

INSURANCE FOR TEXAS PHYSICIANS

Long Term Disability

Feel financially secure, even when your career is on hold.



AVAILABLE THROUGH



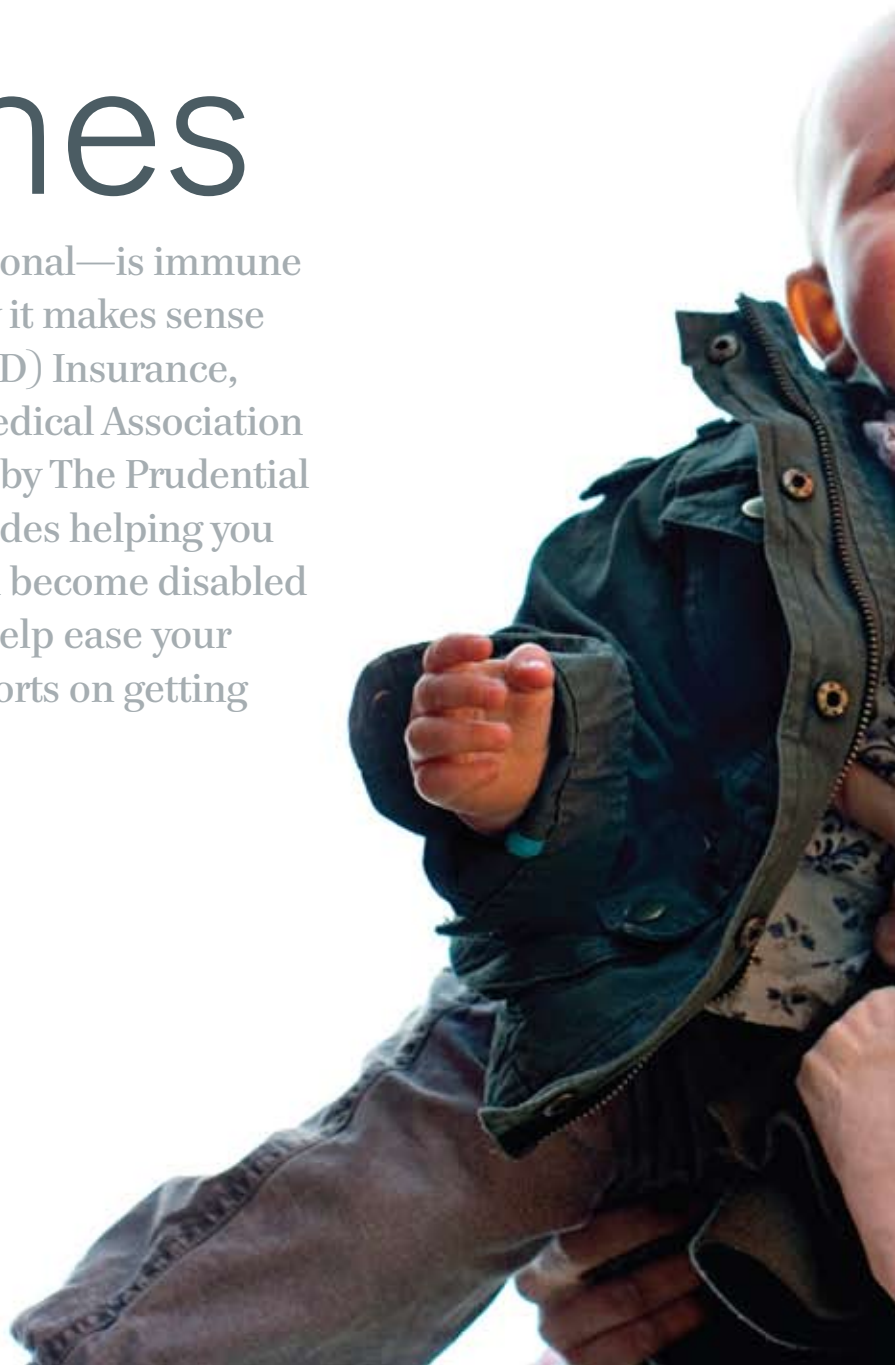
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Protect your income and your loved ones

No one—not even a medical professional—is immune from suffering a disability. That's why it makes sense to consider Long Term Disability (LTD) Insurance, available to you through the Texas Medical Association Insurance Trust (TMAIT) and issued by The Prudential Insurance Company of America. Besides helping you meet your financial obligations if you become disabled and can't work, an LTD benefit can help ease your mind and allow you to focus your efforts on getting better and back to work.





Exclusively for Texas physicians

We're always looking for ways to make your TMA membership more valuable. As a TMA member, you're eligible for coverage under the LTD Insurance Plan if you are a physician with a full-time medical practice, a resident, an intern, or a physician with a limited medical practice. If you move out of Texas while covered, you can continue your coverage as an affiliate TMA member. No matter what stage of your career you're in, LTD Insurance can be an important part of your financial future, and a TMAIT insurance Advisor can help you create a customized plan to fit your unique needs.

Available for residents, too

Residents who are just beginning their medical careers are especially vulnerable to the financial risks that a disability can cause. That's why TMAIT is making a special offer available to residents. Residents can request a \$2,000 monthly coverage amount without answering any health questions. It's quick and easy to request coverage. When their residencies are over, participating members may continue their coverage or increase it to \$5,000 without having to provide evidence of good health, or up to \$15,000 with full medical underwriting.

Choose the options and plan that fit your needs

Insurance needs vary—that's why we offer two options with four different plans and varying waiting periods. The waiting period is the amount of time you must be disabled before benefits begin. Options vary based on how disability is defined.



OPTION 1:

Five-Year Medical Specialty Option

This option pays benefits for the first five years of your disability when you can't practice your medical specialty. (After five years, benefits are paid when you can't perform any gainful occupation you are reasonably qualified for. "Gainful occupation" includes any work that is expected to provide you with 80 percent or more of your normal monthly earnings within 12 months of returning to work or \$240,000 annually, whichever is less.)

Catastrophic disability feature (option 1 only)

This option allows you to receive an additional 20 percent of your existing benefit if you are not able to perform at least two of the five activities of daily living such as bathing, dressing, transferring, toileting, and feeding.

OPTION 2:

Catastrophic Option

Like option 1, for the first five years of disability, this plan pays benefits when you can't practice your specific medical specialty. After five years, you will only receive benefits when you can't perform at least two of the five activities of daily living. These include bathing, dressing, transferring, toileting, and feeding.

Monthly cost of living adjustment provision per \$1,000 of coverage

Age	Option 1	Option 2
Under 30	\$2.67	\$2.00
30-39	\$3.33	\$2.67
40-44	\$6.00	\$4.00
45-49	\$8.33	\$5.67
50-54	\$11.00	\$7.67
55-59	\$11.33	\$8.00
60-64	\$9.00	\$6.67
65+	N/A	N/A

Note: The above rates were effective as of May 1, 2010, and remain current.

Cost of living adjustment provision

An optional inflation protection feature for participants under the age of 65 protects the buying power of your disability benefits. Automatic annual increases to your disability benefits equal to the lesser of 6 percent, or 50 percent of the increase in the Consumer Price Index for that year. See the monthly cost of living adjustment rate chart for cost details.

Future increase opportunity

Physicians who apply for coverage prior to age 40 will be offered an annual opportunity to obtain or increase their monthly coverage amount. Increments of \$1,000, up to a maximum cumulative amount of \$5,000, are available without having to provide evidence of good health. This offer is subject to amount limitations based on earnings and/or other coverage and is subject to the overall plan maximum. The offer expires at age 45.

How long must you be disabled before your benefits begin?

You must be continuously disabled through your **elimination period**. Prudential will treat your disability as continuous if your disability stops for 30 consecutive days or less during the elimination period. The days that you are not disabled will not count toward your elimination period. The elimination periods are the following options:

→ **Plan A – 30 days**

→ **Plan B – 90 days**

→ **Plan C – 180 days**

→ **Plan D – 365 days**

Choose your coverage amount

Coverage amounts from \$1,000 to \$7,000, in increments of \$1,000, are available with Plan A and Plan B. The plan you choose determines when your benefits begin. With Plans C and D, coverage amounts of up to \$15,000 are available.

Physicians may request a monthly coverage amount up to \$4,000, and residents may request a monthly coverage amount up to \$2,000, without having to provide proof of income.

If you elect a monthly coverage amount greater than these amounts, your LTD coverage cannot be more than $66\frac{2}{3}$ percent of your pre-disability earnings, minus any other disability coverage you may have. Complete the Earnings Calculation section on your Request Form to determine the amount of LTD coverage you're eligible for.

Duration of your benefits

Member's Year of Birth	Benefits Paid Up to
Before 1943	Age 65
1943-1959	Age 65
After 1959	Age 67

LTD plan benefit durations will be determined using Social Security normal retirement ages as indicated above. Your certificate will detail any additional months added to your benefit duration. Benefits can be paid for a minimum of 12 months for eligible members who are disabled from their job, regardless of their age.

Monthly rates per \$1,000 of monthly coverage

Age	Plan A – 30 Days		Plan B – 90 Days		Plan C – 180 Days		Plan D – 365 Days	
	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2	Option 1	Option 2
Under 30	\$10.33	N/A	\$8.67	\$6.00	\$5.33	\$3.67	\$5.00	\$3.33
30-39	\$12.33	N/A	\$10.33	\$7.00	\$7.00	\$4.67	\$5.67	\$4.00
40-44	\$23.00	N/A	\$18.00	\$12.67	\$13.33	\$9.00	\$11.33	\$8.00
45-49	\$28.67	N/A	\$23.67	\$16.33	\$17.67	\$12.33	\$15.33	\$10.67
50-54	\$40.33	N/A	\$34.00	\$23.67	\$27.00	\$18.67	\$23.67	\$16.67
55-59	\$58.67	N/A	\$50.33	\$35.33	\$40.00	\$28.00	\$35.33	\$25.00
60-64	\$59.67	N/A	\$50.33	\$35.33	\$36.67	\$25.33	\$32.33	\$22.67
65+	\$57.00	N/A	\$47.33	\$33.00	\$33.67	\$23.33	\$29.67	\$20.67

Note: The above rates were effective as of May 1, 2010, and remain current. All monthly and cost of living rates are based on your age as of your effective date of coverage. Any subsequent changes to your rate are based on your age as of each November 1st. Rates are subject to change, but only on a class basis.

Calculate your costs

LTD Insurance premiums are based on your age and the options you choose. Premiums are paid quarterly and are due on the 1st of February, May, August, and November unless you are enrolled in the monthly electronic funds transfer (EFT) program. Calculate your premium using the rate charts provided in this brochure. Please note that all the rates listed are monthly rates. Please contact TMAIT if you need help calculating quarterly rates if you do not wish to enroll in the EFT program.





Apply now!

Applying for LTD Insurance is easy. All you need to do is complete the Coverage Request Form. Then return it to TMAIT in the postage-paid envelope provided or print and mail your completed form to TMAIT.

**Texas Medical Association
Insurance Trust
P.O. Box 1707
Austin, TX 78767-1707**

30-day free look

Our 30-day “free-look” period means you can sign up for coverage with no risk or obligation. If you decide not to accept coverage, simply return your Certificate of Coverage within 30 days.

Questions?

To learn more about this plan, please call us toll-free at 1.800.880.8181. Our trained insurance Advisors are available to assist you Monday – Friday, 7:30 a.m. to 5:30 p.m.

Visit our website at www.tmaid.org.

Group Life and Disability Income Medical Underwriting Notice

Thank you for choosing The Prudential Insurance Company of America (Prudential) for your insurance needs. Before we can issue coverage we must review your Enrollment Form. To do this, we need to collect and evaluate personal information about you. This notice is being provided to inform you of certain information practices Prudential engages in, and your rights with regard to your personal information. We would like you to know that: personal information may be collected from persons other than yourself or other individuals, if applicable, proposed for coverage; this personal information as well as other personal or privileged information subsequently collected by us may, in certain circumstances, be disclosed to third parties without authorization; you have a right of access and correction with respect to personal information we collect about you; and upon request from you, we will provide you with a more detailed notice of our information practices and your rights with respect to such information. Should you wish to receive this notice, please contact: The Prudential Insurance Company of America, Group Medical Underwriting, P.O. Box 8796, Philadelphia, PA 19176.

Any information we obtain regarding a person's insurability will be treated as confidential. We may, however, make a brief report of it to the Medical Information Bureau (the Bureau), a non-profit membership organization of life insurance companies, which operates an information exchange on behalf of its members. When you apply for life, disability, or health insurance to any company, including Prudential, which is a member of the Bureau, or submit a claim for benefits to such a company, the Bureau will, on request, give the company the information in its files. In addition, upon receipt of a request from you, the Bureau will arrange disclosure of any information it may have in your file. If the information came from the Bureau and you question the accuracy of the information in the Bureau's files, you may contact the Bureau and seek a correction in accordance with the procedures set forth in the Federal Fair Credit Reporting Act. The Bureau's address is: MIB Group, Inc., Customer Service, 50 Braintree Hill Park, Suite 400, Braintree, MA 02184, 1-866-692-6901.

The LTD plan includes limitations and exclusions. A disability incurred during the first 12 months of coverage and due to a pre-existing condition is not payable. A pre-existing condition is an injury or sickness for which an insured received medical treatment, consultation, diagnostic measures, prescribed drugs, or medicine, or for which the insured followed treatment recommendations during the three months prior to the effective date of coverage. This provision may also apply if the insured did not consult a physician when an ordinarily prudent person would have. Benefits for disabilities due to mental or nervous conditions, self-reported symptoms, or pregnancy are limited. Refer to the Booklet-Certificate for complete details regarding exclusions and reductions.

LTD Insurance coverage is issued by The Prudential Insurance Company of America, 751 Broad Street, Newark, NJ 07102. A Booklet-Certificate with complete plan information, including limitations and exclusions, will be provided. Contract Series: 83500.

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