

GRADED BENEFIT DISABILITY INCOME PROTECTION

PLATINUM eZ-Select

QUICK REFERENCE GUIDE



PLATINUM eZ-SELECT

Platinum eZ-Select - Graded DI Product for applicants with medical impairments

Issue Ages	18-60 age last birthday
Maximum Benefit	\$15,000 per Month
Minimum Benefit	\$500 per Month
Rates	Male/Female Tobacco / Non Tobacco Level to Age 65 No Occupational Classes
Benefit Period	1, 2, 3, or 5 years
Elimination Period	30 Days (BP 1 & 2 yr) 60 Days (BP 1, 2 & 3 yr) 90 Days (BP 1, 2, 3 & 5 yr) 120 Days (BP 2, 3 & 5 yr) 180 Days (BP 2, 3 & 5 yr) 365 Days (BP 2, 3 & 5 yr) or 730 Days (BP 2, 3 & 5 yr)
Renewability	Guaranteed to Age 65 Conditionally to Age 70 (must be actively at work)
Replacement Ratio	60% of earned income
Participation Ratio	In conjunction with other coverage participation ratios up to 75% of salary may be issued. Participation ratios vary by income level and are subject to underwriting approval.
Disabilities Due to Sickness	For disabilities commencing during: 1 st Policy Year - 40% 2 nd Policy Year - 75% Thereafter - 100%
Definition of Total Disability	Own Occupation for full benefit period
Presumptive Disability	Total and irreversible loss of speech and hearing, sight in both eyes, both feet (amputated at or above the ankle), both hands (amputated at or above the wrist) or one hand and one foot. The monthly benefit amount for the maximum benefit period will be paid whether or not the insured is able to work. The elimination period does not apply to this benefit.
Mental or Nervous Disorders Limitation	50% of the monthly benefit amount for total disability due to injury or sickness; Monthly benefits are limited to 6 months
Partial Disability	50% of the monthly benefit; Monthly benefits are limited to 6 months
Surviving Spouse Benefit	One-time benefit amount equal to 2 times the last full monthly benefit amount paid after 180 days of disability benefits
Waiver of Premium	After 90 days or the elimination period whichever is longer
Hospital Indemnity Benefit	\$30 per day up to 90 days after 30 days of hospitalization
AD&D Benefit	Up to \$5,000
Requirements	Actively at work for at least 30 hours per week for the last 12 months and \$20,000 or more per year earnings

Risk *insurance and reinsurance solutions*

1-866-747-5434

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Specializing in Impaired Risk DI

Insurance Underwritten and Administered by:

Fidelity Security Life Insurance Company, Kansas City, Missouri, Not Available in All States.

Platinum Plus Group SD-28 / Policy Form No. M-4021; Platinum Plus Individual SD-29 / Policy Form No. M-4022; Platinum/Silver Group DI-139C & DI-139D / Policy Form No. M-4004; Platinum / Silver Individual SD-16 & SD-17 / Policy Form No. M-4012 / Platinum eZ-Select Group SD-32, SD-33 / Policy Form No. M-4024; Platinum eZ-Select Individual SD-34 & SD-35 / Policy Form No. M-4025.