



Business Overhead Insurance

For Members of Kentucky Bar Association

This competitive plan can help keep your business up and running should you suffer a covered disability by paying your share of many of your firm's overhead expenses. Choose a maximum monthly benefit of \$2,500, \$5,000 or \$10,000, or more — up to \$15,000 per month — then complete the application included on the website today.

Summary of plan benefits

Business Overhead insurance can help pay your company's covered overhead expenses should you become totally disabled under the terms of the policy and unable to work at your regular occupation. Benefits can continue until you receive the equivalent of up to 24 monthly benefit payments. Eligible expenses include:

- Office rent
- Employees' salaries and insurance premiums
- Utility bills, including electric, heat, water, gas and telephone
- Accountant's fees
- The mortgage interest and principal on debt owed for business premises you own and use in your profession
- Other fixed overhead expenses that are normal and customary in operating your business

Apply for up to \$15,000 per month

Members under age 60 who work full time (at least 30 hours per week) may apply. Members under age 50 may apply for up to \$15,000 per month (in \$100 increments); members age 50 to 59 may apply for up to \$10,000 per month (in \$100 increments). All applications are subject to company acceptance. If a medical exam is required, it will be conducted at your convenience and at no cost to you. Coverage will begin on the date your application is approved and the premium is paid. You must be actively at work on the date your insurance is to take effect. If you are not, insurance will take effect on the day you resume such work.

"Own occupation" definition of disability

You are considered to be totally disabled when you cannot perform the substantial and material duties of your regular occupation due to injury or sickness and are under the care and treatment of a licensed physician and are complying with the requirements of treatment. To be covered, the sickness must begin or accident occur while your coverage is in force.

It's quick and easy to apply today

- 1. Select a maximum monthly benefit amount of up to \$15,000.** See other side for your economical premiums based on your age.
- 2. Choose a 15- or 30-day waiting period** before benefit payments begin.*
- 3. Complete the application included on the website.** Upon acceptance, a premium notice will be sent to you with your policy.

Renewable to age 70

Coverage is renewable to age 70 as long as you pay your premium when due and you remain actively engaged full time in the duties of your occupation.

Premiums are waived during disability

If you become totally disabled prior to age 60 and receive monthly benefits for six continuous months, you won't have to continue paying premiums for this plan for as long as you are receiving benefits.

Your survivor may receive benefits

If you die while totally disabled and have been receiving benefits for 12 continuous months, your beneficiary will receive up to three months of additional benefit payments.

*Benefits are payable retroactive to the first day of your total disability, once you have been totally disabled for your selected waiting period.

Competitive group rates — Semi-annual premiums

30-day waiting period

Attained age	\$2,500	\$5,000	\$10,000	\$15,000
Under 30	\$55.50	\$110.50	\$220.50	\$330.50
30-39	110.50	220.50	440.50	660.50
40-49	165.50	330.50	660.50	990.50
50-59	309.88	619.25	1,238.00	1,856.75
60-69*	516.13	1,031.75	2,063.00	3,094.25

15-day waiting period

Attained age	\$2,500	\$5,000	\$10,000	\$15,000
Under 30	\$76.13	\$151.75	\$303.00	\$454.25
30-39	151.75	303.00	605.50	908.00
40-49	213.63	426.75	853.00	1,279.25
50-59	371.75	743.00	1,485.50	2,228.00
60-69*	578.00	1,155.50	2,310.50	3,465.50

* Rates for 60 and over are for renewal only. Coverage ends at age 70.

Rates are subject to change. Rates are not fixed, but will adjust when the insured reaches a new age bracket. Coverage amounts can range up to a maximum of \$15,000, in increments of \$100.

30-day free look

Should you change your mind, you can return your certificate within 30 days after receiving it and obtain a full refund of your premium.

Complete the application included on the website.

If you have any questions, please call us at 1-800-928-6421

Exclusions

This plan will not cover any of the following: your salary, fees, or any other remuneration for you; salaries for any partners, shareholders or members of your profession who work for or with you; salaries for any members of your family not regularly employed at least three months prior to the commencement of total disability; the cost of any goods and implements used in the performance of your job; payment of principal of any debt; income tax; in the case of a partnership or shared facility, for any expense portion for which you are not regularly liable for payment; person hired after disability began; person sharing expenses with you; or personal expenses.

Disabilities will not be covered if resulting from: war, any act of war whether declared or undeclared, or military service; insurrection or rebellion; active participation in a riot; attempted suicide or intentionally self-inflicted injury; participation in the commission or attempted commission of a felony; pregnancy, except for complications of pregnancy, if within 30 days of your effective date of coverage.

This is only a brief summary of benefits and is subject to the terms, conditions, limitations and exclusions of the policy. Coverage may vary or may not be available in all states.

Administered by:



Attention: Enrollment Department
 1 Integrity Parkway
 Cleveland, OH 44143-1500
 800-928-6421 9am – 7pm ET
 Fax: 502-425-3127
 Email: memberservices@selmanco.com



Underwritten by:



Metropolitan Life Insurance Company
 200 Park Avenue
 New York, NY 10166
www.metlife.com

Like most insurance policies, insurance policies offered by MetLife and its affiliates contain certain exclusions, exceptions, reductions, limitations, waiting periods and terms for keeping them in force. Please your plan administrator for costs and complete details.

Policy number 159308-G