

## FEATURES OF THE PLAN

If you become totally disabled as defined in the certificate of insurance, you can receive a monthly benefit starting on the first day after the elimination period ends and continuing until disability ends, the date of your death, or until required proof of disability is not provided. However, benefit payments for disability due to mental and nervous disorders, as defined in the certificate of insurance, for which treatment is received on an out-patient basis, will be limited to 24 months while you are insured under the Plan.

Disability Base Monthly Benefit Amount:

All years of allied health, nursing, dental and graduate programs.....\$1,000

If you become totally and permanently disabled, as defined in the certificate of insurance and after the elimination period, you are eligible for the following benefits:

- A \$5,000 lump sum benefit
- Repayment of all the eligible debt, up to \$175,000, that you are legally liable to repay for college and/or medical education expenses.

## WAIVER OF PREMIUM

Premiums are waived while disability benefits are being paid.

## SURVIVOR BENEFIT

If you die during a total disability that has lasted for at least 6 consecutive months after the elimination period, and have an eligible survivor, the plan pays a benefit to the eligible survivor equal to 4 times the amount of the monthly benefit paid immediately prior to death.

## CONVERSION PRIVILEGE

Full-Time allied health, nursing, dental and graduate students will also have the opportunity to convert to an individual plan upon graduation, without medical underwriting.

## PRE-EXISTING CONDITIONS LIMITATION

Benefits will not be paid for any condition which, within 12 months prior to the effective date of your insurance, resulted in your receiving medical advice or treatment. Benefits will not be paid for loss which starts within 30 consecutive days of the effective date of your insurance and which is caused by a pre-existing Condition. This means if you become disabled within 30 days after the effective date due to a pre-existing condition, no benefits will be paid for these losses even after the 30 day period has expired. A claim for benefits for loss starting after 30 days from the effective date of your insurance will not be reduced or denied on the ground that it is caused by a pre-existing condition.

## EXCLUSIONS

The plan will not pay benefits for loss caused by war or any act of war; intentionally self-inflicted injury; periods of disability which occur outside the United States unless you are temporarily traveling for business or pleasure; any period of disability during which you are not residing in the United States or Canada, unless the Insurance Company agrees in writing to provide such coverage before you leave; or pre-existing conditions (except as previously stated).

## Serving the Insurance Needs of Health Professions Students and Their Families

AMA Insurance Agency, Inc. is pleased to present the American Medical Association (AMA) sponsored Med *Plus* Advantage Group Disability Insurance Plan to you. This plan has been tailored to help meet the needs of full-time health professions students.

Over the years, the AMA has responded to the insurance needs of its Members by sponsoring high quality insurance plans, marketed by its wholly-owned subsidiary, AMA Insurance Agency, Inc. Since its inception, AMA Insurance Agency has maintained the tradition of excellence in offering insurance programs to physicians and their families.

Realizing the significant need for a comprehensive insurance program for medical students, the Agency developed the AMA-sponsored Med *Plus* Advantage Insurance Program. The program is offered with *guaranteed acceptance...at affordable rates*. The AMA-Sponsored Med *Plus* Advantage Program is available to eligible full-time health professions students in the United States.\*

Coverage is available to full-time medical, dental, nursing, allied health and graduate students in the biomedical sciences. Students may need to complete all the necessary enrollment forms to be covered under the plan.

\*Benefits and exclusions may vary in certain states. This coverage may not be available in certain states.

*This is a brief description of the important features of this plan. The certificate of insurance sets forth in detail the rights and obligations of both the insured resident and the insurance company.*

**Sponsored By:**

American Medical Association  
Chicago, Illinois 60610

**Insurance Program Underwritten &  
Claims Paid By:**

Provident Life and  
Accident Insurance Company  
One Fountain Square  
Chattanooga, Tennessee 37402

**Marketed By:**

AMA Insurance Agency, Inc.  
200 North LaSalle St., Suite 400  
Chicago, Illinois 60601  
(In California, d/b/a AMA of Illinois  
Agency)  
A subsidiary of the American Medical Association

**For more information call  
AMA Insurance Agency, Inc.  
1-800-458-5736  
Monday through Friday,  
9:00 a.m. to 4:45 p.m. Central Time**

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