



DI Comparison – Competitive Highlights

Provider Choice vs. Ohio National ContinuON Income Solutions II

Provider Choice product offerings utilize one core base policy with optional provisions and riders to help provide the coverage that will best meet the needs of your client. The following are some of the competitive highlights of Provider Choice Premier Package when competing with Ohio National ContinuON Income Solutions II. For additional information, see the Detailed Feature Comparison on the following pages.

Features	Provider Choice Premier Package (Form 1800)	Ohio National ContinuON Income Solutions II
Definition of Total Disability (See full detailed comparison for alternative options)	<p>True Own Occupation for the full benefit period – available to all occupation classes.</p> <ul style="list-style-type: none"> • Specialty Occupation – (available to Dentists and those not eligible for Enhanced Medical Specialty) • Enhanced Medical Specialty - (available to all medical occupations with a Partial Rider and without the Graded Lifetime Benefit For Total Disability Rider) 	True Own Occupation for the full benefit period for all occupation classes. Includes specialty occupation language.
Enhanced Partial Disability Benefit (See full detailed comparison for alternative options)	15% loss of income. For the first 12 months of partial disability, the benefit will equal the lost income dollar-for-dollar up to the monthly benefit amount, or 50% of the monthly benefit, whichever is greater.	Enhanced Residual Disability Benefit First six months, loss of time or duties; thereafter 15% loss of income and a loss of time or duties. Proportionate benefit with a minimum of 50% payable during the first six months.
Waiver of Premium	Waives premiums for six months after disability ends.	Waiver ends when the disability benefits end.
Waiver of Elimination Period	Waives elimination period for a covered disability within five years of a prior disability that lasted at least six months and a benefit was paid, and you remain continuously disabled for at least 30 days.	Not available
Automatic Benefit Enhancement	4% compounded increases for six years.	Not available
Lump Sum Disability Benefit	Provides a lump sum benefit equal to 35% of all total and/or partial benefits paid. Disability does not need to be continuous to qualify. Payable at age 60.	Provides a lump sum benefit equal to 25% of all total and residual benefits paid. Payable at age 65



Features	Provider Choice Premier Package (Form 1800)	Ohio National ContinuOn Income Solutions II
Retirement Protection	Available as a stand-alone policy or as a rider. Pays a benefit into a trust if insured is totally disabled. The trust assets are payable to the insured at the policy expiry.	Not available
Unemployment Waiver of Premium	Can request that premiums be waived for 12 months due to unemployment.	Not available
Serious Illness Supplemental Benefit	50% of the monthly benefit will be payable, in addition to the monthly benefit, for up to 12 months if totally disabled due to cancer, stroke and/or heart attack.	Not available

If you have any questions, please contact:
Individual Disability Sales and Product Support Center for Producers
Hours: 8:00 a.m. – 5:00 p.m. ET
By phone: 1 866 590 8845 (toll free)
By e-mail: DI_product_support@qlic.com

For Producer use only. Not for use with the general public.

Individual disability income products underwritten and issued by Berkshire Life Insurance Company of America (BLICOA), Pittsfield, MA. BLICOA is a wholly owned stock subsidiary of and administrator for The Guardian Life Insurance Company of America (Guardian), New York, NY or provided by Guardian. Product provisions and availability may vary by state. This comparison is based upon the most recent information available to us at the time of creation. It is not intended to be complete or to compare all contract provisions. Refer to the actual insurance policies for additional information.

*This publication is provided for informational purposes only and should not be considered tax or legal advice. Your client should contact their tax or legal advisor regarding the tax treatment of the policy and policy benefits. Your client should consult with their own independent tax and legal advisors regarding their particular set of facts and circumstances.

Guardian® is a registered trademark of The Guardian Life Insurance Company of America.

PCHL-1117 (01/2020) 2020-92134 (Exp.01/2022)

DI Comparison – Detailed Feature Comparison


Provider Choice vs. Ohio National ContinuOn Income Solutions II

Provider Choice product offerings utilize one core base policy with optional provisions and riders to help provide the coverage that will best meet the needs of your client. The ✓ next to a provision highlights a competitive advantage.

Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
Non-cancellable & Guaranteed Renewable to 65/67	To Age 65 or Age 67	To Age 65, age 67 or age 70
Conditionally Renewable after 65/67	For life	For life
Benefit Periods	To age 70, to age 67, to age 65, 10 years, 5 years, 2 years	To age 70, to age 67, to age 65, 10 years, 5 years, 2 years
Elimination Periods	✓ 30, 60, 90, 180, 360, or 720 days	60, 90, 180, 365 days
Modified Own Occupation Definition of Total Disability	<p>✓ Two Year Modified, then any occupation thereafter</p> <p>Until we have paid benefits for two years in the same claim, solely due to injury or sickness you are not able to perform the material and substantial duties of your occupation and you are not gainfully employed. Thereafter, solely due to injury or sickness you are not able to perform the material and substantial duties of any occupation for which you are or become reasonably suited by your education, training or experience.</p> <p>Modified Own Occupation Endorsement</p> <p>Solely due to injury or sickness you are not able to perform the material and substantial duties of your occupation and you are not gainfully employed. (Available with GSI only)</p>	<p>Base policy definition - The inability to perform the material and substantial duties of your occupation and you are not working in any other occupation. Available to all occupation classes.</p>





Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
<p>True Own Occupation Definitions of Total Disability</p>	<p>✓</p> <p>True Own Occupation (Full Benefit Period). Total disability or totally disabled means solely due to injury or sickness you are not able to perform the material and substantial duties of your occupation, even if you are gainfully employed in another occupation.</p> <p>Specialty Language (Available to all dentists and medical occupations not eligible for enhanced medical specialty language)</p> <ul style="list-style-type: none"> If you have limited your occupation to the performance of the material and substantial duties of a single medical specialty or to a single dental specialty, we will deem that specialty to be your occupation. <p>True Own Occupation with Enhanced Medical Specialty Language (Available to medical occupation classes, with a Partial Rider and without the Graded Lifetime Benefit Rider). We will consider you totally disabled, even if you are gainfully employed in your practice or any other occupation, if:</p> <ul style="list-style-type: none"> you are a medical doctor or doctor of osteopathy and more than 50% of your income is earned from hands-on patient care, and you are unable to provide hands-on patient care due to disability; or you are a medical doctor or doctor of osteopathy and more than 50% of your income is earned from performing surgical procedures, and you are unable to perform surgical procedures due to disability. <p>Two-Year True Own Occupation Modified thereafter (Available to all occupation classes). Until we have paid benefits for two years in the same claim, solely due to injury or sickness you are not able to perform the material and substantial duties of your occupation, even if gainfully employed in another occupation. Thereafter you are not able to perform the material and substantial duties of your occupation and you are not gainfully employed.</p>	<p>Own Occupation Rider - The inability to perform the material and substantial duties required for your regular occupation and you satisfy the regular care of a physician provision. Available to all occupation classes.</p> <p>Specialty language: If your regular occupation at the time disability began is limited to a professionally-recognized specialty in medicine, dentistry or law within the scope of your degree or license, we will deem that specialty to be your regular occupation.</p>




Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
Waiver of Premium	 <p>Premiums are waived during periods of disability after the elimination period is met. Premiums paid that are for the period of disability are refunded. Premiums are waived for six months after disability ends.</p>	<p>Premiums are waived if disabled for at least 90 days or the elimination period, if less. Premiums paid during the elimination period will be refunded. Waiver ends when the disability benefits end.</p>
Recurrent Disability Benefit	<p>After a period of compensable disability ends, a subsequent disability will be considered a continuation of the previous disability if it arises from the same cause or causes and you have returned to gainful employment full time for less than 6 months following the previous disability. No new elimination period will be required.</p>	<p>If disability stops and reoccurs within 365 days from the same or related cause it will be treated as one disability.</p>
Waiver of Elimination Period	 <p>Elimination period will be waived if disabled within five years after the end of the previous disability which lasted more than six months for which benefits were paid (regardless of cause), and you remain continuously disabled for at least 30 days.</p> <p>Elimination period is waived also for presumptive or recurrent disability, or if receiving hospice care.</p>	<p>For presumptive, recurrent disabilities or if under a plan of care for hospice services.</p>
Presumptive Disability Benefit	<p>Need not be irrecoverable. Elimination period will be waived.</p>	<p>Need not be irrecoverable. Elimination period will be waived.</p>
Enhanced Portability Option (GSI Only)	 <p>Within 90 days of leaving your employer, you have a one-time option to increase coverage up to the maximum GSI offer without evidence of medical insurability. Financial eligibility is required.</p>	<p>Not available</p>
Hospice Care Benefit	<p>We will waive the elimination period and benefits will begin to accrue from the date a plan of care is initiated by a physician for hospice services through a member of the National Hospice and Palliative Care Organization.</p>	<p>Waives the unexpired portion of the elimination period and pays benefits from the date a physician-ordered plan of care is initiated for hospice services through a member of the National Hospice and Palliative Care Organization.</p>

Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
Enhanced Partial Disability Benefit	 <p>Gainfully employed and not totally disabled, but solely due to an injury or sickness, income loss is at least 15% of prior income. During the first 12 months of a partial disability we will pay the Enhanced Initial Monthly Benefit which is equal to your loss of income, or 50% of the monthly benefit, whichever is greater, not to exceed the policy's monthly benefit. Proportionate benefiter thereafter. Income loss of 75% or more = 100%.</p> <p>Pre-disability indexing is tied to CPI-U, no cap.</p> <p>Recovery – we will consider you partially disabled, even if you are no longer disabled, so long as you have a 15% loss of income and the loss is solely due to the injury or sickness that caused your partial disability.</p>	<p>Enhanced Residual Disability Rider – In the first six months of disability, you are working; and, you are able to perform one or more, but not all of the material and substantial duties of any occupation (your regular occupation with the Own Occupation Rider) or you are able to work in any occupation (your regular occupation with the Own Occupation Rider) no more than 80% of the time you formerly spent working before your current disability started; and you satisfy the regular care of a physician provision.</p> <p>After the first six months, you must also show a loss of monthly earnings that is at least 15% of prior monthly earnings; and the loss is solely the result of the sickness or injury that caused the disability. Proportionate benefit with a minimum of 50% of the monthly benefit during the first six months. 75% or more loss = 100%.</p> <p>Predisability indexing is tied to CPI-U, no cap.</p> <p>Transitional Return to Work Benefit – after a total or residual disability benefit has been paid, we will continue to pay a monthly transitional benefit if you work full-time in any occupation and have a loss of earnings of at least 15% that is the result of the disability. The monthly benefit is determined using the same calculation to determine the residual benefit.</p>

Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
<p>Basic Partial Disability Benefit</p>	<p>✓</p> <p>You are gainfully employed and are not totally disabled, but solely due to injury or sickness you have a loss of income of at least 20% of prior income; and either you are unable to perform one or more of the material and substantial duties of your occupation; or you are not able to perform them for the length of time they normally require. During the first six months of partial disability, we will pay 50% of the monthly benefit or the actual percentage of lost income, whichever is greater. Income loss of 75% or more = 100%.</p> <p>Predisability indexing is tied to CPI-U, no cap.</p> <p>Recovery – we will pay you a lump sum recovery benefit equal to two times the monthly benefit immediately following a period of partial disability, if your disability ends within 12 months after satisfying the elimination period, and you are gainfully employed full time immediately after your partial disability ends.</p>	<p>Basic Residual Disability Rider - Due to sickness or injury, you have a loss of monthly earnings of at least 15% of prior monthly earnings; your loss of earnings is solely as a result, directly and apart from any other cause, of an injury or sickness; you are able to perform one or more, but not all of the material and substantial duties; or you are able to work in any occupation no more than 80% of the time you formerly spent before disability; and you are under the regular care of a physician. During the first six months the minimum benefit will not be less than 50% of the monthly benefit. Thereafter, the maximum benefit payable will not be greater than 50% of the monthly benefit.</p> <p>Predisability indexing is tied to CPI-U, no cap.</p> <p>Recovery – none.</p>
<p>Short Term Residual Disability Benefit</p>	<p>✓</p> <p>You are gainfully employed, and you are not totally disabled, but solely due to injury or sickness, you have a loss of income of 20% or more, you are unable to perform one of more of the material and substantial duties of your occupation; or are unable to perform them for more than one-half of the time normally required. We will pay a proportionate benefit for up to six months not to exceed the actual loss of income</p> <p>You must remain totally disabled for the duration of the elimination period to qualify for residual disability benefit.</p>	<p>Not available</p>
<p>Automatic Benefit Enhancement (Not available with GSI)</p>	<p>✓</p> <p>Automatic 4% compounded increases. Renewable every 6 years if you are not disabled. Refusal of two consecutive increases forfeits any future increases and the rider terminates.</p>	<p>Not available</p>

Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
Future Increase Option (Not available with GSI)	<p>✓</p> <p>Financial eligibility required; annual options to age 55 and special option date if group LTD coverage terminates or for a company declared date.</p> <p>Maximum of two times the base benefit plus in-force coverage with Berkshire and Guardian; three times the base benefit for medical/dental residents and first year physicians and dentists applying under the Special Limits for New Professionals Program.</p> <p>An option may be exercised when you are disabled but benefits under the option will only become payable for a new and separate disability.</p> <p>Before age 45, can exercise up to the full amount remaining; from age 45 to age 55 up to 1/3 of the original amount or, if less than \$1,000 remains or loss of group LTD, the full amount can be exercised.</p>	<p>Guarantee of Physical Insurability Rider – Financial eligibility required; annual options to age 60 and special option date if GLTD coverage terminates or you have a 50% increase in monthly earning.</p> <p>An option may be exercised during a disability one time. The amount of the increase is the lesser of (1) \$1,000 or (2) the amount you qualify for based on your average annual income for the 12 months prior to disability. The increase amount will not be paid for a disability or a recurrent disability that starts before the increase date on which it takes effect.</p> <p>Maximum increase amount is equal to one-half of the base monthly benefit if financially qualified.</p>
Benefit Purchase Option (Not available with GSI)	<p>✓</p> <p>The insured must purchase at least 75% of eligible benefits at the time of policy issue for this no cost rider to be added to the policy.</p> <p>Options to purchase additional coverage are available every 3 years up to age 55 with evidence of financial eligibility. Maximum on each option date is determined by then current I&P limits. A Special Benefit Purchase option is available if group LTD coverage is discontinued, or insured is no longer eligible to participate in employer’s group LTD or insured has at least a 50% increase in income.</p> <p>Benefit Purchase Options are not available while disabled.</p>	<p>Not available</p>

Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
Enhanced Catastrophic Disability	 <p>Due to injury or sickness you are:</p> <ul style="list-style-type: none"> unable to perform two or more of the activities of daily living without human standby assistance; or Cognitively Impaired; or Irrecoverably (presumptive) disabled. <p>At the end of each 12 months of catastrophic disability the benefit will be adjusted by a fixed 3% compounded adjustment factor up to two times the original benefit.</p>	<p>Due to injury or sickness you are:</p> <ul style="list-style-type: none"> unable to perform two or more of the activities of daily living without human standby assistance due to loss of functional capacity; or you require substantial supervision due to severe cognitive impairment
Severe Disability Benefit	 <p>Due to injury or sickness you are:</p> <ul style="list-style-type: none"> Functionally impaired; or Irrecoverably (presumptively) disabled. 	Not available
Cost of Living Adjustment Benefit	 <p>Three optional riders:</p> <ul style="list-style-type: none"> Guaranteed 3% compounded; or Compounded, CPI tied, 6% maximum with a 3% minimum; or 4-Year Delayed, guaranteed 3% compounded <p>No cap; once disability benefits end, increases of \$300 or more will be added to the policy's monthly benefit without additional premium.</p>	<p>Two optional riders:</p> <ul style="list-style-type: none"> CPI tied with 6% maximum and 2% minimum, compounded. Upon recovery increases to the base policy benefit of at least \$200 or more remain on the policy without additional premium. 3% Simple. Upon recovery increases may be purchased at attained age rates.
Lump Sum Disability Benefit* (Not available with GSI)	 <p>A lump sum disability benefit, equal to 35% of all contributing payments (cumulative benefits paid for all periods of total and/or partial disability) up to age 60, will be payable at age 60. The rider must be in force and the sum of the contributing payments must be equal to or greater than the qualifying amount shown on the schedule page (12 times the monthly indemnity issued).</p>	<p>Lump Sum Payment At Retirement Rider - provides a lump sum benefit equal to 25% of all contributing payments (total and residual) up to age 65 and payable at age 65. The sum of the contributing payments must be equal to or greater than the qualifying amount which is 12 times the monthly benefit.</p>

Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
Student Loan Protection	Provides a reimbursement of student loan payments while the insured is totally disabled. Coverage is available for a period of ten or fifteen years from the policy date. When a qualifying total disability occurs, benefits are only payable for the remaining portion of the ten or fifteen-year term that has not elapsed.	Student Loan Reimbursement Rider – provides an additional monthly benefit if the client is totally disabled and has student loan obligations. Term periods are 5, 10 or 20 years.
Retirement Protection Disability Benefit	 Available as a stand-alone policy or as a rider on a policy. It provides a benefit when you are totally disabled and not gainfully employed. The benefit is paid to a trust and the trust assets become available to the insured at policy expiry.	Not available
Serious Illness Supplemental Benefit (Not available with GSI)	 If you are totally disabled due to Cancer, Stroke or Heart Attack an additional benefit, equal to 50% of the monthly benefit, will be payable for a maximum of 12 months during the life of the policy.	Not available
Occupational Rehabilitation, Modification and Access Benefits	 The expense may be paid for an agreed upon plan for occupational rehabilitation or modification and access to help insured return to gainful employment in their occupation.	May help pay for an approved rehabilitation program.
Mental and/or Substance-Related Disorders Benefit Limitation	 No limitation for the full benefit period; or A 24-month maximum benefit for the life of the policy; or a 12-month maximum benefit for the life of the policy. (6-months in some states) The 24-month maximum benefit for mental and/or substance-related disorders will be applied to all contracts issued: <ul style="list-style-type: none"> • to Anesthesiologists, Anesthetists (MD, DO & CRNA), Emergency Room Physicians, Pain Management Physicians and General Dentists; • in CA; • on a guaranteed standard issue basis because of a Group conversion. 	A 24-month maximum mental disorder/substance abuse limitation for all occupation classes for the life of the policy. Removal of Mental Disorder/Substance Abuse Limitation Rider is available to all occupation classes.

Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
Exclusions and Limitations	For: <ul style="list-style-type: none"> • Declared or undeclared war or acts of war; • Active duty in the armed forces of any nation or international governmental authority or while serving in units auxiliary thereto or National Guard or similar government organizations; • Any period in which insured is legally incarcerated or detained; • Commission of, or attempt to commit, a criminal offense as defined under local, state, or federal law; • Engagement in an illegal occupation; • Suspension, revocation, restriction, inactivation, surrender or the like of professional or occupational license or certification; • Intentionally self-inflicted injury; • Normal pregnancy or childbirth until 90 days have elapsed from the date of disability or the elimination period has been satisfied, if later (not applicable with policy form 18UD or 18GI); • Loss excluded by name or specific description. 	For: <ul style="list-style-type: none"> • Due to war or an act of war, or an act incident of war, whether civil or among nations, declared or undeclared, while serving in active or reserve military service; or • Active military service when scheduled active duty is more than 30 consecutive days; or • While you are legally incarcerated or detained • Due to a loss we have excluded by name or specific description in an exclusion rider attached to this policy • Due to committing, or attempting to commit, a felony; • In the event that your material and substantial duties normally require that you be licensed with a federal, state, or industry regulatory body, during any period your license has been suspended or revoked, due to actual or alleged misconduct or malpractice; or • Due to a loss caused by or contributed to, or which results from you being engaged in, an illegal occupation; or • Caused by an intentionally self-inflicted injury while sane or insane.
Outside the US or Canada Limitation	 <p>Limitation is placed on policies issued in CT, DE, DC, FL, MT, NY, ND and SD. Benefits for disability will be limited to 12 months during your lifetime unless you are living full time in the US or Canada for at least six consecutive months in each calendar year.</p>	<p>We will stop paying benefits if you live outside the United States or Canada for more than three consecutive months.</p>
Pre-Existing Condition Limitation	<p>We will not cover loss that begins in the first two years after the effective date from a pre-existing condition.</p> <p>A 3-month, 6-month, 12-month or no Pre-Existing Condition Limitation Endorsement may be applied to policies issued as part of a Guaranteed Standard Issue offer.</p>	<p>For the first two years following the policy issue date, benefits for a pre-existing condition will not be paid if it was misrepresented or not disclosed on the application.</p>



Provision	Provider Choice Form 1800	Ohio National ContinuOn Income Solutions II
Additional Benefits/Riders Available	Social Insurance Substitute Rider Suspension During Unemployment Suspension for Active Military Service Supplemental Benefit Term Rider Unemployment Waiver of Premium Rider Automatic Benefit Increase Endorsement (GSI only)	Annual Renewable Disability Income Rider Voluntary Suspension During Unemployment Social Insurance Supplement Rider Survivor Benefit

If you have any questions, please contact:
Individual Disability Sales and Product Support Center for Producers
Hours: 8:00 a.m. – 5:00 p.m. ET
By phone: 1 866 590 8845 (toll free)
By e-mail: DI_product_support@glic.com

For Producer use only. Not for use with the general public.

Individual disability income products underwritten and issued by Berkshire Life Insurance Company of America (BLICOA), Pittsfield, MA. BLICOA is a wholly owned stock subsidiary of and administrator for The Guardian Life Insurance Company of America (Guardian), New York, NY or provided by Guardian. Product provisions and availability may vary by state. This comparison is based upon the most recent information available to us at the time of creation. It is not intended to be complete or to compare all contract provisions. Refer to the actual insurance policies for additional information.

*This publication is provided for informational purposes only and should not be considered tax or legal advice. Your client should contact their tax or legal advisor regarding the tax treatment of the policy and policy benefits. Your client should consult with their own independent tax and legal advisors regarding their particular set of facts and circumstances.

Guardian® is a registered trademark of The Guardian Life Insurance Company of America.

PCD -1048 (01/2020) 2020-92131 (Exp.02/2022)