1. **Who is eligible?**
   Eligible members must be under age 65 and actively practicing medicine, on a full-time basis in Canada, as a family medicine practitioner or a specialist, employed in medical research, medical and health sciences education, or administration in connection with the profession of medicine, or undergoing a period of training as an interne or resident, or a post-graduate student, or a medical fellow, or serving as a medical missionary or medical student and be a member of the Ontario Medical Association, or an Atlantic Medical Association/Society.

2. **How much coverage can I get? What is an “all source maximum?”**
   **Resident:**
   You may apply for a monthly benefit between $500 and $4,000 in increments of $100. $4,000 is the maximum you are able to receive from both OMA and non-OMA Disability Insurance plans (all source maximum).

   A special arrangement with PARO, Maritime Resident Doctors, and PARNL means that you may be paid in addition to your Ontario/Atlantic resident association group Disability Insurance benefit. Normally a monthly all-source maximum of $4,000 applies.

   **Physician:**
   You may apply for monthly benefit between $500 and $25,000 in increments of $100. $25,000 is the maximum you are able to receive from both OMA and non-OMA Disability Insurance plans (all source maximum).

3. **What is the difference between Step and Level Rate premiums?**
   Premiums are based on your age, smoking status and gender.

   Step rates change according to your age band (under 35, 35, 45 and 55) at the time of the plan renewal.

   Level Rates have been designed to remain level over time as you age and cannot be adjusted on an individual basis due to changes in your age or health. However, level premium rates may change from time to time on a group basis depending on the insurance costs of the group. While we cannot guarantee that rates will not be adjusted in the future, the OMA Disability Insurance plan has a long history of stable rates.

   Premiums are yearly renewable and subject to applicable provincial taxes.

4. **Is there a discount?**
   **Resident**
   As a medical resident, you receive an automatic 50% discount on your Step Rate premium AND your first two years of practice.

   *Loyalty discount.* After you’ve paid for coverage for two consecutive years as a student or resident, you may qualify for an additional 25% discount that is applied to your Step Rate premium as a resident and your first two years of practice.

   **Physician**
   You will receive an automatic 50% discount on your Step Rate premium in your first two years of practice.

5. **What is an elimination period (EP)?**
   The EP is the time between the onset of the disability and the time disability benefits become payable. To match your needs, you may choose from a 30, 60, 90, 120, 180, or 365 day EP. After age 70, if you choose the 70+ DI Coverage Option, the Elimination Period is 90 days.
6. When does coverage become effective?
Your Disability Insurance coverage may become effective as follows:
• If your application is approved with medical evidence, the later of the date the completed application is received or
  the date medical underwriting requirements are completed; or
• If your application is approved with an amendment to restrict coverage or change the Elimination Period due to
  health, the date the application is approved; or
• If your application is replacing other company insurance coverage, the date the application is approved.
• 70+ DI Coverage option becomes effective on Sept 1st, on plan year immediately after attaining age 70, and on
  completion of application.

7. Is coverage portable?
Your coverage continues as long as you maintain membership in an eligible association. For OMA Members: if you have
moved or planning to move outside Ontario, there is a new OMA membership category to maintain your comprehensive
insurance coverage at a preferred membership rate of only $50 per year.

8. What is Total Disability?
You are unable to perform the essential duties of your regular occupation as a result of sickness or injury, are under the
regular care of a physician, and you are not engaged in any other gainful occupation.

9. What is Residual Disability?
You don’t have to be totally disabled to receive benefits. If your income is reduced by at least 20% as a result of
sickness or injury and you are under the regular care of a physician, the residual disability benefit will provide you with
monthly payments for the percentage of income lost while you are unable to return back to work full time.

10. What is Presumptive Disability?
You will qualify for full disability insurance benefits if you totally and irrecoverably lose the power of either speech, sight in
both eyes, hearing in both ears or the use of both hands or both feet.

11. What is the 70+ DI Coverage Option?
At age 70, if you are providing at least 25 hours of medical services a week, you can extend your disability coverage with
the 70+ DI Coverage option which allows you to choose a monthly benefit from $500 to a maximum of $10,000 from all
sources with a 90-day Elimination Period. Its guaranteed acceptance – no medical underwriting required.

12. What is the Cost of Living Adjustment (COLA) rider?
Allows your monthly disability benefit to increase once you have been disabled for 12 consecutive months, in accordance
with the Consumer Price Index, and subject to an annual maximum of 10%.

13. What is the Guaranteed Insurability Benefit (GIB) rider?
Once you complete residency, you can exercise this rider to increase your coverage during the 31-day option period
without medical evidence every year to age 55.

14. What is the Own Occupation rider?
Expands the Total Disability definition. You will be considered totally disabled and receive full benefits even if you return to
work performing different duties and suffer no loss of income.

15. What is the Retirement Protection rider?
This rider will pay an additional monthly benefit paid into a locked-in non-registered retirement fund while you are totally
disabled after the 90 day elimination period. These retirement benefits are available when you reach age 65 or upon
death.
16. What is the Survivor Benefit?
If you die during a period of disability for which the EP has been completed and Monthly Disability Income Benefits are payable, a survivor benefit of three times the last month’s disability benefit is payable to your estate.

17. Is HIV, Hepatitis B/C coverage automatically included?
If you test positive for the Human Immunodeficiency Virus (HIV) or if it is determined that you are a carrier of the Hepatitis B Virus (acute Viral Hepatitis) or Hepatitis C Virus, and are in an asymptomatic infectious state, you will be considered eligible for this benefit, if before the age of 65, such condition:

- Requires you to disclose your condition to patients by regulations approved by an appropriate governmental authority, hospital board or an applicable medical regulatory body or licensing authority,
- Results in a limitation of practice of medicine as a consequence of regulations approved by an appropriate governmental authority, hospital board or an applicable medical regulatory body or licensing authority,

And, as a consequence of either of the situations described above, you suffer a loss of 20% or more of your Average Monthly Earned Income or Adjusted Average Monthly Earned Income for the period before the date the condition was disclosed as provided in the para-graphs above.

If this circumstance applies, the Company will pay, on completion of the Elimination Period, a monthly benefit in accordance with the terms of this policy governing the calculation of the Residual Disability Benefit.

18. How are benefits integrated with other plans?
**Resident:**
If you were a medical resident, a post graduate medical trainee, or a medical fellow when you first became disabled, the benefits payable under Policy 17849 will be reduced by any other disability benefits payable to you from another individual insurance issued after the effective date of coverage under 17849, excluding coverage provided under PARO, Maritime Resident Doctors and PARNL.

**Physician:**
If you are 65 years of age or older, the amount of benefit payable under Policy 17849 will be reduced by any other disability benefits payable to you from another individual, association or group insurance.

19. What are the exclusions?
No benefits are payable, for any disability:

- Resulting from declared or undeclared war;
- Resulting from injuries sustained or sickness contracted while in the military services of any country at war, whether such war be declared or undeclared;
- Resulting from normal pregnancy and/or childbirth; or
- Any period of imprisonment or confinement in a similar institution.

20. When does coverage end?
Coverage terminates:

- Upon termination of this policy;
- Immediately prior to the September 1st coincident with, or next following the date of, your 70th birthday, unless you select the 70+ DI Coverage option;
- If you opt into the 70+ DI Coverage option prior to the termination of your coverage at age 70, coverage will end.
immediately prior to the September 1st coincident with or next following the date of your 80th birthday.

- Immediately prior to the September 1st coincident with or next following the date of termination of your membership in an Eligible Association;

- On the date you fail to make the required premium payment, subject to the grace period;

- On the date you are no longer practicing medicine, if you are Age 65 or over unless you select the 70+DI coverage option;

- For the 70+DI coverage option, the date you practice medicine for less than 25 hours per week;

- At age 65 if benefits were received to age 65 or the date you received 24 months of benefits if such date is beyond your 65th birthday;

- On the date of your death; or

- The last day of the month in which Sun Life or the OMA receive your written request to discontinue this insurance coverage.

This information piece provides the highlights, but not all details of the OMA Group Disability Insurance Policy 17849. The complete terms, conditions, exclusions and limitations governing the insurance coverage are found in the group insurance policy issued to the OMA by Sun Life Assurance Company of Canada.