

Your disability coverage

	Short-Term Disability	Long-Term Disability
Coverage amount	60% of salary to maximum \$1500/week	60% of salary to maximum \$6000/month
Maximum payment period: Maximum length of time you can receive disability benefits.	12 weeks	Lesser of 2 years or to age 70
Accident benefits begin: The length of time you must be disabled before benefits begin.	Day 8	Day 91
Illness benefits begin: The length of time you must be disabled before benefits begin.	Day 8	Day 91
Evidence of Insurability: A health statement requiring you to answer a few medical history questions.	Health Statement may be required	Health Statement may be required
Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when applicant signs up for coverage during the initial enrollment period.	We Guarantee Issue \$1500 in coverage	We Guarantee Issue \$6000 in coverage
Minimum work hours/week: Minimum number of hours you must regularly work each week to be eligible for coverage.	Planholder Determines	Planholder Determines
Pre-existing conditions: A pre-existing condition includes any condition/symptom for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	3 months look back; 12 months after 2 week limitation	12 months look back; 12 months after exclusion
Premium waived if disabled: Premium will not need to be paid when you are receiving benefits.	Yes	Yes
Survivor benefit: Additional benefit payable to your family if you die while disabled.	No	3 months

UNDERSTANDING YOUR BENEFITS—DISABILITY (Some information may vary by state)

- **Disability (long-term):** For first two years of disability, you will receive benefit payments while you are unable to work in your own occupation. After two years, you will continue to receive benefits if you cannot work in any occupation based on training, experience and education.
- **Earnings definition:** Your covered salary excludes bonuses and commissions.
- **Special limitations:** Provides a 24-month benefit limit for mental health and substance abuse.
- **Work incentive:** Plan benefit will not be reduced for a specified amount of months so that you have part-time earnings while you remain disabled, unless the combined benefit and earnings exceed 100% of your previous earnings.

DISABILITY



Short-Term Disability Plan Cost Illustration:

Policy amounts shown based on sample salary amounts only.

	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64
Your premium rate	\$0.404	\$0.539	\$0.899	\$0.764	\$0.472	\$0.427	\$0.539	\$0.629	\$0.844
<i>Election Cost Per Age Bracket</i>									
	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64
\$20,000 Annual Salary \$231 Weekly Benefit	\$4.67	\$6.23	\$10.38	\$8.82	\$5.45	\$4.93	\$6.23	\$7.27	\$10.38
\$30,000 Annual Salary \$346 Weekly Benefit	\$6.99	\$9.33	\$15.55	\$13.22	\$8.17	\$7.39	\$9.33	\$10.88	\$15.55
\$40,000 Annual Salary \$462 Weekly Benefit	\$9.33	\$12.45	\$20.77	\$17.65	\$10.90	\$9.86	\$12.45	\$14.53	\$20.77
\$50,000 Annual Salary \$577 Weekly Benefit	\$11.66	\$15.55	\$25.94	\$22.04	\$13.62	\$12.32	\$15.55	\$18.15	\$25.94
\$60,000 Annual Salary \$692 Weekly Benefit	\$13.98	\$18.65	\$31.11	\$26.43	\$16.33	\$14.77	\$18.65	\$21.76	\$31.11
\$70,000 Annual Salary \$808 Weekly Benefit	\$16.32	\$21.78	\$36.32	\$30.87	\$19.07	\$17.25	\$21.78	\$25.41	\$36.32
\$80,000 Annual Salary \$923 Weekly Benefit	\$18.65	\$24.88	\$41.49	\$35.26	\$21.78	\$19.71	\$24.88	\$29.03	\$41.49
\$90,000 Annual Salary \$1,038 Weekly Benefit	\$20.97	\$27.97	\$46.66	\$39.65	\$24.50	\$22.16	\$27.97	\$32.65	\$46.66
\$100,000 Annual Salary \$1,154 Weekly Benefit	\$23.31	\$31.10	\$51.87	\$44.08	\$27.23	\$24.64	\$31.10	\$36.29	\$51.87
\$110,000 Annual Salary \$1,269 Weekly Benefit	\$25.63	\$34.20	\$57.04	\$48.48	\$29.95	\$27.09	\$34.20	\$39.91	\$57.04
\$120,000 Annual Salary \$1,385 Weekly Benefit	\$27.98	\$37.33	\$62.26	\$52.91	\$32.69	\$29.57	\$37.33	\$43.56	\$62.26
\$130,000 Annual Salary \$1,500 Weekly Benefit	\$30.30	\$40.43	\$67.43	\$57.30	\$35.40	\$32.03	\$40.43	\$47.18	\$67.43

Long-Term Disability Plan Cost Illustration:

Policy amounts shown based on sample salary amounts only.

	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64
Your premium rate	\$0.070	\$0.080	\$0.120	\$0.180	\$0.230	\$0.330	\$0.480	\$0.650	\$1.100

DISABILITY



	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60+
	<i>Election Cost Per Age Bracket</i>								
	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60+
\$20,000 Annual Salary \$1,000 Monthly Benefit	\$0.58	\$0.67	\$1.00	\$1.50	\$1.92	\$2.75	\$4.00	\$5.42	\$8.34
\$30,000 Annual Salary \$1,500 Monthly Benefit	\$0.88	\$1.00	\$1.50	\$2.25	\$2.88	\$4.13	\$6.00	\$8.13	\$12.50
\$40,000 Annual Salary \$2,000 Monthly Benefit	\$1.17	\$1.33	\$2.00	\$3.00	\$3.83	\$5.50	\$8.00	\$10.83	\$16.67
\$50,000 Annual Salary \$2,500 Monthly Benefit	\$1.46	\$1.67	\$2.50	\$3.75	\$4.79	\$6.88	\$10.00	\$13.54	\$20.84
\$60,000 Annual Salary \$3,000 Monthly Benefit	\$1.75	\$2.00	\$3.00	\$4.50	\$5.75	\$8.25	\$12.00	\$16.25	\$25.00
\$70,000 Annual Salary \$3,500 Monthly Benefit	\$2.04	\$2.33	\$3.50	\$5.25	\$6.71	\$9.62	\$14.00	\$18.96	\$29.17
\$80,000 Annual Salary \$4,000 Monthly Benefit	\$2.33	\$2.67	\$4.00	\$6.00	\$7.67	\$11.00	\$16.00	\$21.67	\$33.34
\$90,000 Annual Salary \$4,500 Monthly Benefit	\$2.63	\$3.00	\$4.50	\$6.75	\$8.63	\$12.38	\$18.00	\$24.38	\$37.50
\$100,000 Annual Salary \$5,000 Monthly Benefit	\$2.92	\$3.33	\$5.00	\$7.50	\$9.58	\$13.75	\$20.00	\$27.08	\$41.67
\$110,000 Annual Salary \$5,500 Monthly Benefit	\$3.21	\$3.67	\$5.50	\$8.25	\$10.54	\$15.13	\$22.00	\$29.79	\$45.84
\$120,000 Annual Salary \$6,000 Monthly Benefit	\$3.50	\$4.00	\$6.00	\$9.00	\$11.50	\$16.50	\$24.00	\$32.50	\$50.00

DISABILITY



Long-Term Disability Plan Cost Illustration:

Policy amounts shown based on sample salary amounts only.

	< 25	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60+
Your premium rate	\$0.070	\$0.080	\$0.120	\$0.180	\$0.230	\$0.330	\$0.480	\$0.650	\$1.000
\$20,000 Annual Salary \$1,000 Monthly Benefit	\$0.58	\$0.67	\$1.00	\$1.50	\$1.92	\$2.75	\$4.00	\$5.42	\$8.34
\$30,000 Annual Salary \$1,500 Monthly Benefit	\$0.88	\$1.00	\$1.50	\$2.25	\$2.88	\$4.13	\$6.00	\$8.13	\$12.50
\$40,000 Annual Salary \$2,000 Monthly Benefit	\$1.17	\$1.33	\$2.00	\$3.00	\$3.83	\$5.50	\$8.00	\$10.83	\$16.67
\$50,000 Annual Salary \$2,500 Monthly Benefit	\$1.46	\$1.67	\$2.50	\$3.75	\$4.79	\$6.88	\$10.00	\$13.54	\$20.84
\$60,000 Annual Salary \$3,000 Monthly Benefit	\$1.75	\$2.00	\$3.00	\$4.50	\$5.75	\$8.25	\$12.00	\$16.25	\$25.00
\$70,000 Annual Salary \$3,500 Monthly Benefit	\$2.04	\$2.33	\$3.50	\$5.25	\$6.71	\$9.62	\$14.00	\$18.96	\$29.17
\$80,000 Annual Salary \$4,000 Monthly Benefit	\$2.33	\$2.67	\$4.00	\$6.00	\$7.67	\$11.00	\$16.00	\$21.67	\$33.34
\$90,000 Annual Salary \$4,500 Monthly Benefit	\$2.63	\$3.00	\$4.50	\$6.75	\$8.63	\$12.38	\$18.00	\$24.38	\$37.50
\$100,000 Annual Salary \$5,000 Monthly Benefit	\$2.92	\$3.33	\$5.00	\$7.50	\$9.58	\$13.75	\$20.00	\$27.08	\$41.67
\$110,000 Annual Salary \$5,500 Monthly Benefit	\$3.21	\$3.67	\$5.50	\$8.25	\$10.54	\$15.13	\$22.00	\$29.79	\$45.84
\$120,000 Annual Salary \$6,000 Monthly Benefit	\$3.50	\$4.00	\$6.00	\$9.00	\$11.50	\$16.50	\$24.00	\$32.50	\$50.00