Short-term disability insurance

Product Conditions

- All employees to be covered are Actively at Work on the policy's effective date. If any individual does not meet the Actively at Work requirement, we will require full disclosure of all necessary information to evaluate the risk. After reviewing this information, we reserve the right to revise or withdraw this proposal. Unless disabled on the prior workday or on the day of absence, an employee will be considered Actively at Work on the following days;
  - a Saturday, Sunday or holiday which is not a scheduled workday;
  - a paid vacation day, or other scheduled or unscheduled non-workday; or
  - an excused or emergency leave of absence (except a medical leave).
- This plan does not replace any state mandated disability program. This plan does not cover any occupational injuries or sicknesses.

Class and eligibility descriptions

Short-Term Disability Insurance	
Option	1
Class	1
Class Description	All Full-Time Employees
Employer Contribution	100%
Required Employee Participation	100%
Contribution Basis	Pre - Tax
Minimum Hours	30 unless otherwise agreed upon

Short-Term Disability Benefit Overview

Short-Term Disability Employee Benefits	
Option	1
Class	1
Class Description	All Full-Time Employees
Benefit Percent	The weekly benefit will not exceed 50% of the Insured Person's weekly earnings
Minimum Weekly Benefit Amount	$25
Maximum Weekly Benefit Amount	$2500
Day Benefit Begins – Accidental Injury	8th Day
Day Benefit Begins – Sickness	8th Day
Benefit Duration	26 Weeks
Definition of Earnings	Basic Annual Earnings Excluding Overtime, Bonuses, & Commission
Integration	Backdoor
Salary Continuance Program	Included
C-Section Benefit Rider	8 week(s) gross benefit
Family Income Benefit Rider	3 week(s)
Rehabilitation Assistance Benefit	5% program reimbursement; reasonable accommodation

Short-Term Disability Product Standard Features

Recurrent Periods of Disability:
Unless the Insured Person returns to active full-time work for at least two weeks, two or more periods of Disability due to the same or related cause will be treated as one period of Disability.

Partial Disability Benefits:
Lincoln Financial Group does not require that the employee be totally disabled prior to receiving partial benefits. A disabled employee can satisfy the elimination period with days of total disability, partial disability or a combination of both. An employee may qualify for a partial disability benefit if he or she is Partially Disabled and is under the regular care of a physician.

Partial Disability Benefits end on the earliest of:

- The date of Total Disability Benefits become payable;
- The date the Insured Person dies;
- The date the Maximum Benefit Period ends; or
- The date the Insured Person's current earnings exceed 99% of Basic Weekly Earnings.

The amount of the Weekly Partial Disability Benefit equals the lesser of A or B below:

A - The Insured Person's Basic Weekly Earnings multiplied by the Benefit Percentage (limited to the Maximum Weekly Benefit); minus Other Income Benefits except for earnings received.
B - The Insured Person's Basic Weekly Earnings, minus Other Income Benefits.

The Weekly Partial Disability Benefit will not be less than the Minimum Weekly Benefit.

Partial Disability means that, due to sickness or injury, the Insured Person is:

- unable to perform one or more of the material duties of his or her regular occupation; or,
- unable to perform such duties on a full-time basis

Short-Term Disability Product Overview (expanded benefits for Option 1, Class 1)

Total Disability Benefits:
Lincoln Financial Group will pay a Weekly Total Disability Benefit if an Insured Person becomes Totally Disabled while insured for this benefit. This benefit will be paid for each week Total Disability continues:

- beginning on the day benefits begin (as shown in the Schedule of Insurance); and
- ending on the day the Insured Person ceases to be Totally Disabled.

Benefits will not be payable beyond the end of the Maximum Benefit Period, as shown in the Schedule of Insurance. Proportional benefits will be paid for a partial week of Total Disability.

The amount of the Weekly Total Disability Benefit equals the lesser of:

- the Insured Person's Basic Weekly Earnings multiplied by the Benefit Percentage; minus Other Income Benefits except any pay received under the Employer's Sick Leave or Salary Continuance Plan;
- 100% of the Insured Person's Basic Weekly Earnings; minus Other Income Benefits including any pay received under the Employer's Sick Leave or Salary Continuance Plan; or
- The Maximum Weekly Benefit.

In no event will the amount of the Weekly Total Disability Benefit plus any pay received under the Employer's Sick Leave or Salary Continuance Plan exceed 100% of the Insured Person's Basic Weekly Earnings

The amount will not be less than the Minimum Weekly Benefit, unless the Company is entitled to recover an overpayment by deducting it from future benefits.

Other Income Benefits:

Other Income Benefits means those benefits shown below:

1. Any disability income benefits for which the Insured Person receives under:
   a. any compulsory benefit act or law; or
   b. any governmental retirement system as a result of the Insured Person’s job with the Group Policyholder.
2. Any disability benefits or retirement benefits the Insured Person receives under a Retirement Plan.
3. Benefits under the Social Security (or any similar plan or act) including:
   a. disability or unreduced retirement benefits for which the Insured Person receives; or for which his or her spouse or children receives because of the Insured Person's eligibility for unreduced retirement benefits; or
   b. reduced retirement benefits received by the Insured Person; or by his or her spouse or children because of the Insured Person's receipt of reduced retirement benefits.
4. Earnings from work the Insured Person performs for the Group Policyholder or from another employer for which the Insured Person becomes employed after the Disability begins.
5. Any employer-sponsored group disability, sick leave or salary continuance plans.

After the first deduction for each of the Other Income Benefits, the Weekly Total Disability Benefit will not be further reduced due to any cost-of-living increases under these Other Income Benefits (except for increases in earnings from any form of employment). Other Income Benefits paid in a lump sum will be prorated:

- on a weekly basis over the time period for which the sum is given; or
- over the time the Company expects the Insured Person to live, if no time period is stated.

Survivor Income (Family Income) Benefit:

If an employee dies after having been disabled and eligible to receive a benefit, Lincoln will pay a benefit to the survivor.

Rehabilitation Assistance Benefit:

The Rehabilitation Assistance Benefit strives to identify those employees who will benefit from a rehabilitation program early in the disability to generate a useful outcome for the employee. Employees who participate in Rehabilitation Assistance will receive an additional benefit while the employee is participating in the program. Program costs may also be reimbursed. The benefit may also reimburse employer's reasonable accommodation activities.

Initial Enrollment Period: On the effective date, the Company will takeover existing participants at their current inforce amounts of insurance.