

Short-term Disability Insurance

	Group STD		Voluntary STD
	2 to 9 employees	10+ employees	3+ employees
Employee Participation	Greater of 2 enrolled employees or 75%	75% of employees	3 to 50: Minimum 3 enrolled lives 51+: Minimum 10 enrolled
Eligibility	All active full-time employees working 20+ hours/week	All active full-time employees working 20+ hours/week	All active full-time employees working 20+ hours/week
Benefit Percentage	Standard: 60% Options: 50% or 66 2/3%	Standard: 60% Options: 50% or 66 2/3%	Standard: 60% Options: 50% or 66 2/3%
Weekly Benefit	Standard: \$100 to \$1,000 Flat Amounts: \$100 to \$300	Standard: \$100 to \$1,000 Flat Amounts: \$100 to \$300	Standard: \$100 to \$2000 Flat Amounts: \$100 to \$300
Commencement Period–Sickness & Injury	Standard: 1/8, 8/8, 15/15, 30/30 Option: 1st to 60th day injury 8th to 60th day sickness	Standard: 1/8, 8/8, 15/15, 30/30 Option: 1st to 60th day injury 8th to 60th day sickness	Standard: 1/8, 8/8, 15/15, 30/30 Option: 1st to 60th day injury 8th to 60th day sickness
Coverage Basis	Non-occupational	Non-occupational	Non-occupational
Definition of Disability	Residual	Residual	Residual
Initial Rate Guarantee	2 years	2 years	2 years
Pre-existing Condition	Not included	Not included	Included- Standard is 3/3/12
Family Medical Leave	Option	Option	Included
Recurrent Disability Duration	15 days (3 month LTD EP) or 30 days (6 month LTD EP)	15 days (3 month LTD EP) or 30 days (6 month LTD EP)	15 days (3 month LTD EP) or 30 days (6 month LTD EP)
W-2 Service	Signed agreement required to include or waive service	Signed agreement required to include or waive service	Signed agreement required to include or waive service

Long-term Disability Insurance

	Group LTD		Voluntary LTD
	2 to 9 employees	10+ employees	3+ employees
Employee Participation	Greater of 2 enrolled employees or 75%	75% of employees	3 to 50: Minimum 3 enrolled 51+: Minimum 10 enrolled
Eligibility	All active full-time employees working 30+ hours/week	All active full-time employees working 30+ hours/week	All active full-time employees working 30+ hours/week"
Benefit Percentage	Standard: 60%; Options: 50%, 66 2/3%	Standard: 60%; Options: 50%, 66 2/3%	Standard: 60%; Options: 50%, 66 2/3%
Maximum Monthly Benefit	\$1,000 to \$5,000	\$1,000 to \$10,000	\$1,000 to \$10,000
Minimum Benefit	Greater of \$100 or 10% gross benefit	Greater of \$100 or 10% gross benefit	Greater of \$100 or 10% gross benefit
Benefit Duration	ADEA 1 with Social Security normal retirement age	ADEA 1 with Social Security normal retirement age	ADEA 1 with Social Security normal retirement age
Elimination Period	90 or 180 days	90 or 180 days	90 or 180 days
Recurrent Disability	Employee can work up to 50% of the days in the Elimination Period without having to satisfy a new Elimination Period	Employee can work up to 50% of the days in the Elimination Period without having to satisfy a new Elimination Period	Employee can work up to 50% of the days in the Elimination Period without having to satisfy a new Elimination Period
Definition of Disability	Standard: 2 year own occupation Options: 3 year own occupation, any thereafter or Own Occupation to Social Security normal retirement age	Standard: 2 year own occupation Options: 3 year own occupation, any thereafter or Own Occupation to Social Security normal retirement age	Standard: 2 year own occupation Options: 3 year own occupation, any thereafter or Own Occupation to Social Security normal retirement age
Initial Rate Guarantee	2 years	2 years	2 years
Pre-existing Condition	3/3/12, 6/6/12 or 12/12/24 Groups with no prior coverage: 12/12/24	3/3/12, 6/6/12 or 12/12/24 Groups with no prior coverage: 12/12/24	6/6/12 or 12/12/24 Groups with no prior coverage: 12/12/24
Waiver of Premium	Included	Included	Included
Limitations for Mental/Nervous and Alcohol & Drug Abuse	Outpatient: 24 months Inpatient: Covered as long as confined	Outpatient: 24 months Inpatient: Covered as long as confined	Outpatient: 24 months Inpatient: Covered as long as confined
Coverage Basis	24 hours	24 hours	24 hours
Family Medical Leave	Option	Option	Included
Cost Of Living Adjustment	None	None	Option: Flat 3% for duration of claim
Survivor Income Benefit	Standard: 3 month lump sum gross benefit	Standard: 3 month lump sum gross benefit	Standard: 3 month lump sum gross benefit
Workplace Modification	Included	Included	Included
FICA Match Service	Included	Included	Included
W-2 Service	Signed agreement required to include or waive service	Signed agreement required to include or waive service	Signed agreement required to include or waive service

CBIA Service Corp.