

Summary of Benefits

Group Long-Term Disability Income Insurance | Effective: 01/01/2027 | Group #: 0012345 (Sample Company, Inc.)

Schedule of Benefits

Provision	Benefit
Monthly Benefit	60% of pre-disability monthly earnings
Maximum Monthly Benefit	\$10,000
Elimination Period	90 days of continuous disability
Maximum Benefit Duration	To age 65
Definition of Disability	Own occupation for the first 24 months; any gainful occupation thereafter
Premium Contributions	100% employer-paid

Plan Provisions

Provision	Detail
Benefit Offsets	Benefits are reduced by Social Security (primary and family), workers' compensation, and other group income benefits
Proof of Disability	Required at reasonable intervals during the benefit period

Limitations and Exclusions

Benefits are not payable for disabilities caused by war, intentionally self-inflicted injury, or commission of a felony, or during any period of incarceration. See the certificate of coverage for complete provisions.