**Effective Date**  
Beginning 1/1/2021

**Eligibility**  
All active full-time Salaried Academic, Unclassified and Classified Employees working at 75% full-time employment or greater who are paid and appointed to a position for more than 120 days or one regular academic semester, excluding the Health Sciences Center employees who have coverage through the Office of Graduate Medical Education

**Class Description**  
All eligible employees who enrolled in this coverage on or after January 1, 2001

**Voluntary LTD Benefit**  
60% of your Monthly Earnings to a maximum of $12,000 per month.

Minimum Benefit: The greater of $100 or 10% of the Gross Monthly Benefit

Guaranteed Issue Benefit: $12,000

Earnings are defined in the UnitedHealthcare contract with your employer.

**Elimination Period**  
The later of 90 days of Disability or the exhaustion of your Accumulated Sick Leave

**Definition of Disability**  
Residual

**Own Occupation Period**  
24 months (2 year) own occupation

**Earnings Test**  
80% Own Occupation / 60% Any Occupation

**Requires Loss of Earnings/Duties**  
Disability is defined in the UnitedHealthcare contract with your employer.

**Maximum Benefit Duration**  
Reducing Benefit Duration w/SSNRA

<table>
<thead>
<tr>
<th>Age at Disability</th>
<th>Maximum Benefit Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than age 60</td>
<td>Greate of: SSNRA* or</td>
</tr>
<tr>
<td>Age 60</td>
<td>To age 65</td>
</tr>
<tr>
<td>Age 61</td>
<td>60 Months</td>
</tr>
<tr>
<td>Age 62</td>
<td>48 Months</td>
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<tr>
<td>Age 63</td>
<td>42 Months</td>
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<td>Age 64</td>
<td>36 Months</td>
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<tr>
<td>Age 65</td>
<td>30 Months</td>
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<tr>
<td>Age 66</td>
<td>24 Months</td>
</tr>
<tr>
<td>Age 67</td>
<td>21 Months</td>
</tr>
<tr>
<td>Age 68</td>
<td>18 Months</td>
</tr>
<tr>
<td>Age 69 and over</td>
<td>15 Months</td>
</tr>
<tr>
<td>Age 66</td>
<td>12 Months</td>
</tr>
</tbody>
</table>

*SSNRA means the Social Security Normal Retirement Age as figured by the 1983 amendment or any later amendment to the Social Security Act.

**Survivor Income Benefit**  
3 months Gross

**Work Incentive Benefit**  
12 months

**Portability**  
Included

**Minimum Indemnity Benefit**  
Included

**Catastrophic Disability Benefit**  
10%, up to $6,000, 12 months life expectancy

**Mental and Nervous Limitation**  
24 months lifetime when combined with Substance Abuse

**Substance Abuse Limitation**  
24 months lifetime when combined with Mental & Nervous

**Subjective Symptoms Limitation**  
No Limit

**Pre-existing Conditions Exclusion**  
3 month look back; 12 month after effective date

**Offsets**  
In addition, as described below within the Important Details, your monthly Long-Term Disability benefit may be reduced by other income you receive.

**Other limitations to enrollment**  
Evidence of Insurability is required for all late entrants

You must be Actively at Work with your employer on the day your coverage takes effect.
Important Details:

This Summary of Benefits sheet is an overview of the Long Term Disability Insurance being offered and is provided for illustrative purposes only and is not a contract. It in no way changes or affects the policy as actually issued. Only the insurance policy issued to the policyholder (your employer) can fully describe all of the provisions, terms, conditions, limitations and exclusions of your insurance coverage. In the event of any difference between the Summary of Benefits sheet and the insurance policy, the terms of the insurance policy apply.

Once a group policy is issued to your employer, a certificate of coverage will be available to explain your benefits in detail.

Limitations and Exclusions:
You cannot receive Long Term Disability Insurance benefit payments for disabilities that are caused or contributed to by:
- War or act of war (declared or not)
- The commission of, or attempt to commit a felony
- An intentionally self-inflicted injury
- Any case where your being engaged in an illegal occupation was a contributing cause to your disability

You must be under the regular care of a physician to receive benefits.

Your benefit payments will be reduced by other income you receive or are eligible to receive due to your disability, including but not limited to:
- Social Security Disability Insurance (please see next section for exceptions)
- Workers' Compensation
- Other employer-based insurance coverage you may have
- Unemployment benefits
- Settlements or judgments for income loss
- Loss of time or lost wages from a no-fault motor vehicle insurance plan.
- Benefits from Employer’s sick leave or salary continuation plan.

Your benefit payments will not be reduced by certain kinds of other income, such as:
- Retirement benefits if you were already receiving them before you became disabled
- Retirement benefits that are funded by your after-tax contributions
- Your personal savings, investments, IRAs or Keoghs
- Profit-sharing
- Most personal disability policies
- Social Security increases

*Some State variations may apply.

Member Assistance Program:
The Member Assistance Program, which accompanies your Long Term Disability benefit, comes at no additional cost to the employee. It includes personal and confidential assistance for employees and their families.
- Toll-free Member Assistance line
- 24/7 access to liveandworkwell.com.
- Referral for face-to-face counseling
- Legal and Financial services information and referrals**

**May not be available in all states.

UnitedHealthcare Life and Disability products are provided by UnitedHealthcare Insurance Company, and certain products in California by Unimerica Life Insurance Company. Texas Coverage is provided on Form LASD-POL-TX (05/03), Form UHCLD-POL 2/2008-TX, or UICLD-POL-TX 4/5.

UnitedHealthcare Insurance Company is located in Hartford, CT; Unimerica Insurance Company and Unimerica Life Insurance Company in Milwaukee, WI.