TRANSAMERICA®

BENEFITS AT A GLANCE

LONG-TERM DISABILITY INSURANCE

Underwritten by Transamerica Life Insurance Company

Long-term disability insurance provides income if you experience a disability for longer than six months, helping you to pay for everyday expenses while you are unable to work. Here is a summary of the benefits being offered to you. Refer to the policy, certificate, and riders for complete details.

EMPLOYEE CLASS 3: All Active Eligible K-1s

BENEFIT AMOUNT

BASE BENEFIT

You pay 100% of premium costs, and your employer covers the rest

The amount is determined by a percentage of your covered earnings.

60% of your covered earnings with a minimum* of $100 and a maximum of $10,000

COVERED EARNINGS

Your covered earnings are the total annual income received from your employer just prior to the date of disability. This is used to determine your benefit amount. It does not include income received from sources other than your employer.

K - 1

WHEN BENEFITS START

You must meet the definition of disability for a period of time before becoming eligible to receive a benefit meaning you must be unable to work and/or receive a portion of your income for a certain number of days before your benefit payments will begin. This is also known as the elimination period. Your benefits will begin the day after your elimination period (EP) ends.

180 Days

OWN OCCUPATION PERIOD

Your own occupation period is a period in which your policy will pay benefits if you are unable to perform the trade or profession in which you were employed at the time of your disability. You may be eligible to continue receiving benefits if your disability prohibits you from any employment for which you are reasonably suited through your training, education, and experience after your own occupation period ends. This can also be called the regular occupation period.

To Maximum Benefit Duration

BENEFIT PERIOD

This is the longest amount of time that your benefit may be paid. Also known as maximum duration.

Social Security Normal Retirement Age Duration (SSNRA)

The maximum period of payment will be determined according to the following table:

Your Age When Disability Begins	Maximum Period of Payment
Less than age 60	To Social Security Normal Retirement Age (SSNRA)
Age 60	60 months or to SSNRA, whichever is greater
Age 61	48 months or to SSNRA, whichever is greater
Age 62	42 months or to SSNRA, whichever is greater
Age 63	36 months or to SSNRA, whichever is greater
Age 64	30 months or to SSNRA, whichever is greater
Age 65	24 months
Age 66	21 months
Age 67	18 months
Age 68	15 months
Age 69 and over	12 months

LIMITATIONS

PRE-EXISTING CONDITION LIMITATION

A pre-existing condition is a condition for which you received medical treatment or consultation, took or was prescribed drugs or medicine, or received care or services, including diagnostic measures, **3 months** before the effective date of your coverage. Any disability contributed to or caused by a pre-existing condition within the first **12 months** of the coverage effective date will not be covered.

MENTAL ILLNESS LIMITATION

Benefits for mental illness will not exceed **24 months** of combined monthly benefit payments during the lifetime of the insured, unless the insured is hospital confined at the end of that period.

ALCOHOLISM OR DRUG ABUSE LIMITATION

Benefits for substance abuse will not exceed **24 months** of combined monthly benefit payments during the lifetime of the insured, unless the insured is hospital confined at the end of that period.

SPECIAL CONDITION LIMITATION

Limits the length of time a benefit will be paid if diagnosis is for a special condition specified in the policy. Examples: Chronic Fatigue, Fibromyalgia, Musculoskeletal

Unlimited

KEY FEATURES

- Rehabilitation planning, oversight, and job placement services
- Physicians and nurse/medical consultants who connect with the treating physician
- Return-to-work accommodation assistance
- Survivor Benefit - Provides a benefit to an eligible survivor if you pass away while receiving a disability benefit.
- Vocational Rehabilitation Benefit - You may be eligible to receive an additional benefit while participating in a vocational rehabilitation program
- Work Incentive Benefit - This benefit allows for a period of time in which you are able to earn up to 100% of your pre-disability earnings while working part-time.
- Workplace Modification Benefit - Your employer may be eligible to receive an additional benefit to provide an appropriate workplace modification.

* Integration of benefits (common offsets) – Your benefits may be offset with other income received to avoid disability benefits being higher than the benefit percentage defined in the contract. Standard integration typically includes, but is not limited to: Social Security disability benefits, Workers' Compensation, state disability, salary continuation or accumulated sick leave.

LIMITATIONS AND EXCLUSIONS

DISABILITIES NOT COVERED UNDER THE POLICY

The policy does not cover any disabilities caused by, contributed to by, or resulting from: Intentionally self-inflicted harm; Attempted suicide, regardless of mental capacity; Participation in a war, declared or undeclared, or any act of war; an act of war is military activity by one or more national governments and does not include terrorist acts, other random acts of violence not perpetrated by you, or civil war or community faction; Active duty in the military or the National Guard or similar government organizations; Active participation in a riot, insurrection or terrorist activity; Engaging in any illegal occupation, work, or employment; Commission of or attempt to commit a felony; Cosmetic surgery except when required for Appropriate Care as a result of Injury or Sickness; cosmetic surgery shall not include reconstructive surgery when the surgery is incidental to or follows surgery resulting from trauma, infection or other diseases of the involved part and reconstructive surgery because of congenital disease or anomaly resulting in a functional defect. We will not pay a benefit for any period of disability during which you are legally incarcerated in a penal or correctional institution.

This is a brief summary of *Long-Term Disability Insurance*℠ **underwritten by Transamerica Life Insurance Company (TLIC)**, Cedar Rapids, IA. TLIC is not an authorized insurer in New York. Policy form series ICC20 TMDI111IC-1020 and ICC20 TCDI111IC-1020. Forms and numbers may vary. Insurance may not be available in all jurisdictions. Limitations and exclusions apply. Please refer to the policy, certificate, and riders for complete details.

Up-to-date information regarding our compensation practices can be found in the disclosures section of our website at tebcs.com.

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