



Your short term disability coverage

	Option I	Option 2
Coverage amount	Choose weekly benefit amount from \$100 to \$1250. See cost illustration page for weekly benefit offerings.	Choose weekly benefit amount from \$100 to \$1250. See cost illustration page for weekly benefit offerings.
Maximum payment period: Maximum length of time you can receive disability benefits.	26 weeks	26 weeks
Accident benefits begin: The length of time you must be disabled before benefits begin.	Day I	Day 30
Illness benefits begin: The length of time you must be disabled before benefits begin.	Day 8	Day 30
Evidence of Insurability: A health statement requiring you to answer a few medical history questions.	Health Statement may be required	Health Statement may be required
Guarantee Issue: The 'guarantee' means you are not required to answer health questions to qualify for coverage up to and including the specified amount, when applicant signs up for coverage during the initial enrollment period.	We Guarantee Issue \$1250 in coverage	We Guarantee Issue \$1250 in coverage
Minimum work hours/week: Minimum number of hours you must regularly work each week to be eligible for coverage.	Planholder Determines	Planholder Determines
Pre-existing conditions: A pre-existing condition includes any condition/symptom for which you, in the specified time period prior to coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	3 months look back; 12 months after 2 week limitation	3 months look back; 12 months after 2 week limitation
Premium waived if disabled: Premium will not need to be paid when you are receiving benefits.	Yes	Yes

UNDERSTANDING YOUR BENEFITS—DISABILITY (Some information may vary by state)

Earnings definition: Your covered salary excludes bonuses and commissions.