## UNITED OF OMAHA LIFE INSURANCE COMPANY

A MUTUAL of OMAHA COMPANY

## GROUP VOLUNTARY LONG-TERM DISABILITY CERTIFICATE SUMMARY



This summary describes some of the terms and conditions of the Policy. For a complete description of the terms and conditions of the Policy, refer to the appropriate section of the Certificate, available from the Policyholder. A person is not necessarily entitled to insurance because he or she received this summary. A person is only entitled to insurance if he or she is eligible in accordance with the terms of the Policy. This summary was published on July 2, 2018.

Systemtec, Inc.

## **POLICY INFORMATION**

Policyholder:

Policy Effective Date:	July 1, 2018	
Policy Anniversary:	July 1	
Policy Number:	GUPR-BCWB	
Group Number:	G000BCWB	
Classification:	All Eligible Hourly Employees	
Minimum Work Hours Required:	40 hours per week	
Eligibility Present Waiting Period:	30 days	
Eligibility Future Waiting Period:	30 days	
When Insurance Begins:	the first day of the month that follows the day the Employee becomes eligible. Additional eligibility conditions apply as described in the Certificate.	
Elimination Period:	The later of:  a) 90 calendar days; or	
	b) the date Your short-term Disability ends.	
BENEFITS		
Monthly Benefit Percentage:	60%	
Maximum Monthly Benefit:	\$5,000	
Minimum Monthly Benefit:	\$100	
Maximum Benefit Period:	Age at Disability	<b>Maximum Benefit Period</b>
	61 or less	to age 65, Your SSNRA, or 3 years and 6 months, whichever is longest;
	62	Your SSNRA, or 3 years
		and 6 months, whichever
	63	is longer;
	63	Your SSNRA, or 3 years,
		whichever is longer;
	64	whichever is longer; Your SSNRA, or 2 years and 6 months, whichever
	64	whichever is longer; Your SSNRA, or 2 years and 6 months, whichever is longer;
	65	whichever is longer; Your SSNRA, or 2 years and 6 months, whichever is longer; 2 years;
	64	whichever is longer; Your SSNRA, or 2 years and 6 months, whichever is longer; 2 years; 1 year and 9 months;
	65	whichever is longer; Your SSNRA, or 2 years and 6 months, whichever is longer; 2 years; 1 year and 9 months; 1 year and 6 months;
	65	whichever is longer; Your SSNRA, or 2 years and 6 months, whichever is longer; 2 years; 1 year and 9 months;
Own Occupation Definition:	64	whichever is longer; Your SSNRA, or 2 years and 6 months, whichever is longer; 2 years; 1 year and 9 months; 1 year and 6 months; 1 year and 3 months;
Own Occupation Definition: Survivor Benefit:	64	whichever is longer; Your SSNRA, or 2 years and 6 months, whichever is longer; 2 years; 1 year and 9 months; 1 year and 6 months; 1 year and 3 months;

## LIMITATIONS/EXCLUSIONS

Alcohol/Drug Abuse/Substance Abuse Limitation: 24 months Mental Disorder Limitation: 24 months Pre-existing Condition Exclusion: 3/12