

# UNITED OF OMAHA LIFE INSURANCE COMPANY

A MUTUAL of OMAHA COMPANY

## GROUP 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 December 4, 2023.

### POLICY INFORMATION

Policyholder:	EAH
Policy Effective Date:	December 1, 2010
Policy Anniversary:	December 1
Policy Number:	GLTD-AHQ9
Group Number:	G000AHQ9
Classification:	All Other Eligible Employees
Minimum Work Hours Required:	20 hours per week
Eligibility Present Waiting Period:	30 day
Eligibility Future Waiting Period:	30 day
When Insurance Begins:	The first day of the month that coincides with or follows the day the Employee becomes eligible. Additional eligibility conditions apply as described in the Certificate.
Elimination Period:	The Elimination Period is the later of: a) 90 calendar days; or b) the date your Policyholder-sponsored short-term disability benefits from us end.

### BENEFITS

Monthly Benefit Percentage:	60%																				
Maximum Monthly Benefit:	\$10,000																				
Minimum Monthly Benefit:	\$100/10%																				
Maximum Benefit Period:	<table><thead><tr><th>Age at Disability</th><th>Maximum Benefit Period</th></tr></thead><tbody><tr><td>61 or less.....</td><td>to age 65, Your SSNRA, or 3 years and 6 months, whichever is longest;</td></tr><tr><td>62 .....</td><td>Your SSNRA, or 3 years and 6 months, whichever is longer;</td></tr><tr><td>63 .....</td><td>Your SSNRA, or 3 years, whichever is longer;</td></tr><tr><td>64 .....</td><td>Your SSNRA, or 2 years and 6 months, whichever is longer;</td></tr><tr><td>65 .....</td><td>2 years;</td></tr><tr><td>66 .....</td><td>1 year and 9 months;</td></tr><tr><td>67 .....</td><td>1 year and 6 months;</td></tr><tr><td>68 .....</td><td>1 year and 3 months;</td></tr><tr><td>69 or older.....</td><td>1 year.</td></tr></tbody></table>	Age at Disability	Maximum Benefit Period	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 is longer;	63 .....	Your SSNRA, or 3 years, whichever is longer;	64 .....	Your SSNRA, or 2 years and 6 months, whichever is longer;	65 .....	2 years;	66 .....	1 year and 9 months;	67 .....	1 year and 6 months;	68 .....	1 year and 3 months;	69 or older.....	1 year.
Age at Disability	Maximum Benefit Period																				
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 is longer;																				
63 .....	Your SSNRA, or 3 years, whichever is longer;																				
64 .....	Your SSNRA, or 2 years and 6 months, whichever is longer;																				
65 .....	2 years;																				
66 .....	1 year and 9 months;																				
67 .....	1 year and 6 months;																				
68 .....	1 year and 3 months;																				
69 or older.....	1 year.																				
Own Occupation Definition:	3 years																				
Reasonable Accommodation Benefit:	The lesser of 100% for covered services expenses, \$5,000 or																				

Survivor Benefit:	an amount equal to the total Gross Monthly Benefit.
Vocational Rehabilitation Benefit:	3 months
	5%

**LIMITATIONS**

Substance Abuse Limitation:	24 months while insured under the Policy
Mental Disorder Limitation:	24 months while insured under the Policy
Pre-existing Condition Limitation:	3/12