

Plan Highlights

Group Long Term Disability Insurance



Jireh Semiconductor Incorporated

COVERAGE

Disability income protection insurance provides a benefit for long term disability resulting from a covered injury or sickness. Benefits begin at the end of the elimination period and continue while you are disabled up to the maximum benefit duration.

ELIGIBILITY

All Active Full-Time Jerih Semiconductor Employees working 30 hours or more per week, except for any person working on a temporary or seasonal basis.

CONTRIBUTION REQUIREMENTS

Coverage is 100% Employee Paid.

ELIMINATION PERIOD

90 consecutive days of total disability.

BENEFIT AMOUNT

The benefit amount is equal to 60% of your monthly covered earnings, from a minimum of \$100, to a maximum benefit of \$10,000 per month.

MAXIMUM BENEFIT DURATION

Benefits will not extend beyond the longer of your Social Security Normal Retirement Age or Duration of Benefits below:

Age at Disablement	Duration of Benefits
61 or less	To Age 65
62	3 1/2 Years
63	3 Years
64	2 1/2 Years
65	2 Years
66	1 3/4 Years
67	1 1/2 Years
68	1 1/4 Years
69 or more	1 Year

RATES

See attached Rate Sheet

FEATURES

- ▶ Extended Disability Benefit
- ▶ Military Services Leave of Absence
- ▶ Interruption and Recurrent Provisions
- ▶ Own Occupation Coverage – 24 Months
- ▶ Rehabilitation Provision
- ▶ Residual and Partial Disability
- ▶ Specific Indemnity Benefit
- ▶ Survivor Benefit – 3 months
- ▶ Transfer of Coverage Provision
- ▶ Work Incentive & Child Care Provisions
- ▶ Worksite Modification Benefit

VALUE-ADDED SERVICES

- ▶ Travel Assistance Services
- ▶ ID Theft Recovery Services

LIMITATIONS

- ▶ Pre-Existing Condition Limitation: 3/12
- ▶ Mental & Nervous Limitation – 24 months outpatient
- ▶ Substance Abuse Limitation – 24 months
- ▶ Offsets: your benefit may be reduced by other income sources such as, but not limited to, Social Security, Workers Compensation, State Disability Plans

This Plan Highlight is not a complete description of the insurance coverage. Insurance is provided under group policy form LRS-6564, et al, et al. This is not a binding contract. Should there be a difference between this Plan Highlight and the contract, the contract will govern. The Certificate of Coverage will be made available to you that describes the benefits in greater detail; however a benefit will not be paid if caused or contributed by an exclusion listed in the Certificate. Product features and availability may vary by state.

Reliance Matrix is a branding name. Coverage is underwritten by Reliance Standard Life Insurance Company, which is licensed in all states (except New York), the District of Columbia, Puerto Rico, the U.S. Virgin Islands and Guam. In New York, insurance products and services are offered by First Reliance Standard Life Insurance Company, Home Office, New York, NY. Where applicable, absence services are provided by Matrix Absence Management, Inc.

Premium Worksheet



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The benefit amount is equal to 60% of your monthly covered earnings, to a maximum benefit of \$10,000 per month.

To calculate your monthly payroll deduction, use the formula indicated below:

1. Enter your **Annual Earnings**. 1. \$ _____
2. **Divide** your annual earnings by 12 (monthly earnings).
Average monthly income cannot exceed **\$16,667**. 2. \$ _____
3. Find your rate from the age table displayed. 3. \$ _____
4. **Multiply** the amount on Line 2 by the appropriate rate
for your age entered on Line 3. 4. \$ _____
5. **Divide** the amount on Line 4 by 100 and enter the
amount on Line 5 to get your **monthly payroll deduction**. 5. \$ _____

Age	Rate per \$100 of covered payroll
18-24	\$0.135
25-29	\$0.113
30-34	\$0.133
35-39	\$0.209
40-44	\$0.290
45-49	\$0.605
50-54	\$0.725
55-59	\$0.780
60-64	\$0.690
65-69	\$1.998
70+	\$1.998

Example Calculation: Jane Smith is age 35.

1. Enter your **Annual Earnings**. 1. \$ 50,000
2. **Divide** your annual earnings by 12 (monthly earnings).
Average monthly income cannot exceed **\$16,667**. 2. \$ 4,167 (monthly earnings)
3. Find your rate from the age table displayed. 3. \$ 0.209
4. **Multiply** the amount on Line 2 by the appropriate rate for
your age entered on Line 3. 4. \$ 870.90
5. **Divide** the amount on Line 4 by 100 and enter the
amount on Line 5 to get your **monthly payroll deduction**. 5. \$ 8.71 (monthly payroll deduction)