

Plan Highlights

Contributory Short Term Disability Insurance



Northwestern Medical Center, Inc.

COVERAGE

Disability income protection insurance provides a benefit for “short 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

Each Active Full-Time Employee working 36 hours or more per week, each Active Regular Part-Time Employee working a minimum of 30 hours but less than 35.5 hours per week and each Active Part-Time employee working a minimum of 20 hours but less than 29.5 hours per week, except any person working on a temporary or seasonal basis.

BENEFIT AMOUNT

You may elect a weekly benefit equal to 60% of your covered earnings, up to a maximum benefit of \$600 per week.

DAY BENEFITS BEGIN

Injury (accident) and Sickness (illness): benefits begin on the 8th consecutive day of disability;

MAXIMUM BENEFIT DURATION

Benefits for one period of disability, will be paid up to a maximum of 12 weeks.

CONTRIBUTION REQUIREMENTS

Coverage is 100% employee paid.

RATES

See attached Rate Sheet.

FEATURES

- ▶ Maternity covered as any other illness
- ▶ Military Services Leave of Absence Continuation
- ▶ Non-occupational coverage
- ▶ Partial Disability benefit included
- ▶ Transfer of Coverage provision
- ▶ Zero Day Residual included Definition

EXCLUSIONS

Benefits will not be payable for any disability caused by: an intentionally self-inflicted injury; an act of war (declared or undeclared); commission of a felony; sickness covered by workers' compensation or other workers' disability law; injury occurring out of or in the course of work for wage or profit.

For a comprehensive list of exclusions, limitations, and any applicable benefit offsets, please refer to the Certificate of Insurance. The Certificate also provides all requirements necessary to be eligible for coverage and benefits.

This Plan Highlights is a brief description of the key features of the RSL insurance plan. The availability of the benefits and features described may vary by state. It is not a certificate of insurance or evidence of coverage. Insurance is provided under group policy form LRS-6451, et al.

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Scheduled Benefit: Each eligible employee may elect **60%** of their weekly earnings, up to **\$600** per week benefit maximum.

To calculate your bi-weekly payroll deduction, use the formula indicated below:
(Round all numbers to the nearest whole number)

1. Enter your **Weekly Earnings**, not to exceed \$ **1,000** 1. \$ _____
2. **Multiply** your weekly earnings (Line 1) by **60%** 2. \$ _____
3. **Multiply** the amount on Line 2 by **\$0.89** 3. \$ _____
4. **Divide** the amount on Line 3 by 10 and enter the amount on Line 4 to get your monthly payroll deduction. 4. \$ _____
5. **Multiply** the amount on Line 4 by 12, then **Divide** by 26 to get your bi-weekly payroll deduction. 5. \$ _____

Rate per \$10 benefit
\$0.89

Example Calculation:

1. Enter your **Weekly Earnings** , not to exceed \$ **1,000** 1. \$ 400
2. **Multiply** your weekly earnings (Line 1) by **60%** 2. \$ 240 (maximum weekly benefit)
3. **Multiply** the amount on Line 2 by **\$0.89** 3. \$ 213.60
4. **Divide** the amount on Line 3 by 10 and enter the amount on Line 4 to get your monthly payroll deduction. 4. \$ 21.36
5. **Multiply** the amount on Line 4 by 12, then **Divide** by 26 to get your bi-weekly payroll deduction. 5. \$ 9.86 (bi-weekly payroll deduction)

