



Group Long Term Disability Benefits

Benefit Highlights

for Employees of Cenergistic

All Eligible Employees

Disability Can Happen to Anyone.

Want to know more about your chances of becoming disabled?

Sun Life Financial is a founding member of the Council for Disability Awareness.

Visit

www.disabilitycanhappen.org

and find out your Personal Disability Quotient.

Benefits

- Available to All Full-Time United States Employees working in the United States working 30 hours or more per week.
- Coverage for disability, as defined in the policy, due to accidents and sicknesses.
- Benefits are 60% of Basic Monthly Earnings up to a maximum of \$10,000 per month.
- Benefits may begin after the Elimination period of 180 days of absences due to a covered accident or sickness.
- Employees must meet the definition of disability, as defined in the policy, to be eligible for the benefits described here.
- Benefits are not payable for pre-existing conditions as defined in the policy.

Cost to you

- Long Term Disability "LTD" coverage is contributory, meaning that you are responsible for paying for all or a portion of the cost through payroll deduction. Calculate your monthly cost by dividing your monthly covered earnings by 100 and multiplying the result by the rate found in the chart below. Follow the example below to determine your monthly cost.

Your Age	Rate	Your Age	Rate	Your Age	Rate	Your Age	Rate
Under 25	\$0.098	35–39	\$0.254	50–54	\$0.809	65–69	\$0.589
25–29	\$0.096	40–44	\$0.399	55–59	\$1.105	70 and Over	\$0.276
30–34	\$0.151	45–49	\$0.560	60–64	\$0.952		

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These are the rates in effect for 03/01/2015

Example Monthly Earnings	Divided by 100	Multiplied by rate	Example Cost*
\$3,500	/100 = 35	X \$0.40	\$14.00
Your Monthly Earnings	Divided by 100	Multiplied by rate	Your cost*
\$	/ 100 =	x \$	\$

*Contact your employer to confirm the portion of the cost for which you will be responsible

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Benefit Highlights (continued)

How to enroll

- LTD coverage begins once you meet the eligibility requirements, satisfy any waiting period applicable to your policy, and complete the enrollment process.
- Fill out the LTD enrollment form provided by your employer. Be sure to sign, date, and return the form to your employer.

For complete plan details

- This highlight flyer is intended to provide an overview of the benefits available from your employer and is not a complete description of plan provisions. Receipt of this flyer does not certify eligibility for benefits under this plan.
- For complete plan designs, you may request a copy of the Sun Life Financial Group booklet from your employer.

About Evidence of Insurability

- Evidence of Insurability – also called “proof of good health” – is required if:
 - you decline coverage during your initial eligibility period and then want coverage at a later date.
- All late entrants and increases in coverage require Evidence of Insurability.
- Your employer will advise you if you need to submit an Evidence of Insurability application. If so, Sun Life Financial may arrange for you to take a medical exam (at our expense) and/or complete a questionnaire. Coverage will not go into effect until Sun Life Financial approves the application in writing

Limitations

Subject to state variations, limitations include but are not limited to the list below. Limitations may vary depending on your specific benefit plan. No LTD benefit will be payable for any Total or Partial Disability during any of the following periods:

- any period the employee is not under the regular and continuing care of a physician providing appropriate treatment and regular examination and testing in accordance with the disabling condition, unless the employee has reached a maximum point of recovery and is still totally or partially disabled
- any period the employee fails to submit to any medical examination or clinical assessment requested by Sun Life
- any period the employee is incarcerated

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Exclusions

Subject to state variations, exclusions include but are not limited to the list below. Exclusions may vary depending on your specific benefit plan. No LTD benefit will be payable for any Total or Partial Disability that is due to:

- an intentionally self-inflicted injury,
- war, declared or undeclared, or any act of war,
- active participation in a riot, rebellion, or insurrection, or
- committing or attempting to commit an assault, felony, or other criminal act.

If a pre-existing condition limitation applies to the plan, then no LTD benefit is payable for any period of disability that occurs within the exclusionary period and is caused by, contributed to by, or resulting from a pre-existing condition.

For more information, consult with your Benefits Administrator.

This Overview is preliminary to the issuance of the Policy and booklet certificate. It does not describe the specific benefits under the Policy. This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Insurance Department.

Group insurance policies are underwritten by Sun Life Assurance Company of Canada (Wellesley Hills, MA) in all states, except New York, under Policy Form Series 93P-LH, 12-GP-01, and 12-DI-C-01. In New York, group insurance policies are underwritten by Sun Life and Health Insurance Company (U.S.) (Windsor, CT) under Policy Form Series 13-GP-LH-01 and 13-GP-LF-01. Product offerings may not be available in all states and may vary depending on state laws and regulations.

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