ARCHDIOCESE OF DUBUQUE
Policy # 285940

Please read carefully the following description of your UnumProvident Long Term Disability Income Protection insurance plan.

Your Plan

Eligibility
You are eligible for LTD coverage if you are an active employee in the United States working a minimum of 20 hours per week.

Guarantee Issue
You may apply for coverage without answering any medical questions or providing evidence of insurability if you apply for coverage within 31 days after your eligibility date. If you apply more than 31 days after your eligibility date, your coverage will be medically underwritten, and you will be required to qualify based on information you provide regarding your health history.

Please see your Plan Administrator for your eligibility date.

Benefit Amount
Monthly LTD Benefit:
- Choice of 25%, 40% or 50% of your monthly earnings.
- To a maximum of $5000

Your LTD benefit will not be reduced by the amount of other income replacement benefits you receive for the same disability.

Definition of Disability
You would be considered disabled if, due to injury or sickness:

- you cannot perform each of the material duties of your regular occupation, and
- after benefits have been paid for 24 months, you cannot perform each of the material duties of any gainful occupation for which you are reasonably fitted by education, training or experience.

"Partial disability" and "partially disabled" mean that because of injury or sickness, you, while unable to perform all the material duties of your regular occupation on a full-time basis, are:

a. performing at least one of the material duties of your regular occupation or another occupation on a part-time or full-time basis; and
b. earning at least 20% less per month than your indexed pre-disability earnings due to the same injury or sickness.

Partial Disability
If you have met this definition of disability and have satisfied the elimination period, you can return to work on a part-time basis and still receive a partial benefit, provided your earnings are at least 20% less per month than your pre-disability earnings due to that same injury or illness.

Elimination Period
The Elimination Period is the length of time of continuous disability which
must be satisfied before you are eligible to receive benefits.

LTD benefits would begin after 90 consecutive days of disability, as described in the definition above.

**Benefit Duration**

Your duration of benefits is based on your age when the disability occurs. Your LTD benefits are payable for the period during which you continue to meet the definition of disability up to age 65, but not less than 5 years. If your disability occurs at or after age 65, benefits would be paid for a reduced period of time.

**Taxation**

The taxability of benefits depends on how premium was taxed during the plan year in which you become disabled. If premium for the plan year is paid with **post-tax** dollars, your benefits will **not** be taxed. If premium for the plan year is paid with **pre-tax** dollars, your benefits will **be** taxed. If premium for the plan year is paid partially with post-tax dollars and partially with pre-tax dollars, then a portion of your benefits will be taxed.

**Additional Benefits**

**Waiver of Premium**

You will not be required to pay LTD premiums as long as you are receiving LTD benefits.

**Portability**

If you leave ARCHDIOCESE OF DUBUQUE you can take your coverage with you at the group rate for up to 12 months, providing you have been covered under this plan for at least 12 months. Portability is not available to employees who leave the employer due to retirement, disability, or are on an approved leave of absence, or become covered under any other group long term disability income plan.
Survivor Benefit

UnumProvident will pay your eligible survivor a lump sum benefit equal to 3 months of your gross disability payment.

This benefit will be paid if, on the date of your death, your disability had continued for 180 or more consecutive days, and you were receiving or were entitled to receive payments under the plan. If you have no eligible survivors, payment will be made to your estate, unless there is none. In this case, no payment will be made. However, we will first apply the survivor benefit to any overpayment which may exist on your claim.

Limitations/Exclusions/
Termination of Coverage

Pre-existing Condition Exclusion

- A pre-existing condition is a sickness or injury for which you receive medical treatment, consultation, care or services including diagnostic measures, or took prescribed drugs or medicines in the 12 months prior to your effective date of coverage.

If you suffer a disability caused by, contributed to, or resulting from a pre-existing condition and it begins in the first 24 months after your effective date, that disability would not be covered by this policy.

Instances When Benefits Would Not Be Paid

Benefits would not be paid for disabilities caused by, contributed to by, or resulting from:
- intentionally self-inflicted injuries;
- active participation in a riot;
- war, declared or undeclared, or any act of war;
- pre-existing conditions (see definition).

Mental and Nervous

LTD benefits would be paid for 24 months per lifetime for disabilities caused by mental illness that meet the definition of disability. Mental and nervous benefits would continue beyond 24 months only if you are institutionalized or hospitalized as a result of the disability.

Termination of Coverage

Your coverage under the policy ends on the earliest of the following:
- The date the policy or plan is cancelled;
- The date you no longer are in an eligible group;
- The date your eligible group is no longer covered;
- The last day of the period for which you made any required contributions;
- The last day you are in active employment except as provided under the covered layoff or leave of absence provision.

UnumProvident will provide coverage for a payable claim which occurs while you are covered under the policy or plan.
Next Steps

How to Apply

To apply for coverage, complete your enrollment form within 31 days of your eligibility date. After that date you will be required to provide evidence of insurability in order to qualify for coverage. Please forward enrollment application to the attention of Jim McPartland at the address listed below.

Effective Date of Coverage

Please contact your Broker, Jim McPartland for your effective date.

Delayed Effective Date of Coverage

Insurance will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Questions

If you should have any questions about your coverage or how to enroll, please contact your Broker, Jim McPartland at 1-877-535-6579 Ext. 1347

This plan highlight is a summary provided to help you understand your insurance coverage from UnumProvident. Details may differ from state to state. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern.

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Please Forward Enrollment Applications to:

Jim McPartland
TrueNorth Companies, L.C.
P.O. Box 1863
Cedar Rapids, IA 52406-1863