

APPINTELL
9786656

Applied Intellect
SCHEDULE OF INSURANCE

Option 1.00

Proposed Effective Date: January 01, 2017

<u>CLASSIFICATION</u>	<u>AMOUNT OF BENEFIT</u>
	Weekly Income
Class 1 All Active Full-time Employees	1500

Minimum Hours: 30, unless otherwise agreed upon.

The Weekly Income benefit for Class 1 will be payable to the Maximum shown above, from the 1st day for accident or 8th day for sickness and for a maximum benefit duration of 13 weeks. The weekly benefit will not exceed 60% of the Insured Person's weekly earnings, including commissions and excluding overtime pay and bonuses.

<i>Additional Features</i>	<i>Benefit</i>
Survivor Income (Family Income) Benefit	3 week(s) gross benefit
Rehabilitation Assistance Benefit	5%; program reimbursement
C-Section Benefit	8 week(s)

This plan does not replace any state mandated disability program.

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Long-Term Disability (LTD) Benefits & Cost Summary

Proposed Effective Date: January 01, 2017 Option 1.00
Class 1: All Active Full-time Employees
Minimum Hours: 30, unless otherwise agreed upon.

The Premier Plan is our traditional full-featured Long-Term Disability benefit plan. The Premier Plan provides the most comprehensive LTD plan of benefits, which are outlined below:

SCHEDULE OF BENEFITS

PREMIER PLAN

Long Term Disability Benefit	60%
Progressive Income Benefit (qualification requirements apply)	10%
Total Available Benefit	70%
Maximum Monthly Benefit	\$6,000
Social Security Integration	Primary & Family
Minimum Monthly Benefit	Greater of \$100 or 10% of Benefit
Elimination Period	90 Days
- Accumulation of Elimination Period	2X Elimination Period
Maximum Benefit Period	Later of Age 65 or SSNRA
Pre-existing Condition Exclusion	3/12
Specified Illness/Injury Limits	
- Mental/Nervous & Substance Abuse	24 Months
- Other Limits (Specified Illnesses)	No Limit
Premium Contributions	Contributory
Minimum Participation	No less than 100%

DEFINITION OF DISABILITY

Own Occupation Coverage Period	36 Months
Following Own Occupation Period	Any Occupation
Zero Day Residual	Included
Return to Work Incentive	SSNRA
Partial Disability Formula	Residual w/ Progressive
- Income Test first 24 Months	99%
- Income Test after 24 Months	85%

ADDITIONAL FEATURES

PIB Maximum	\$5,000
Vocational Rehabilitation	Voluntary
Survivor Income Benefit	3 Months
Subrogation/Third Party Reimburs.	Not Included
Conversion Option	Not Included
COLA	Not Included
Spouse Disability	Not Included
-Maximum Period	Not Included
Retirement Income Protection	Not Included
Medical Premium Benefit	Not Included
-Maximum Period	Not Included
Family Care	\$250

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-Maximum Period
Prior Insurance Credit

12 Months
Not Included