



WE BELIEVE YOU DESERVE A BETTER TOMORROW

How would you and your family make it with no paycheck? Now there's insurance to help protect your income if you ever get sick or hurt and can't work.

TransDI® Plus short-term disability income insurance

Underwritten by **Transamerica Life Insurance Company**, Cedar Rapids, Iowa.

Did you know that 25% of those entering the workforce today will face disability at some point during their working lives?¹ If you're one of them, you'll probably get better and return to work after a recovery period, but how would you pay your bills in the meantime? Would you rather be focused on getting better, or worrying about your family's finances?

Other means of support may not be available when you need them most.

If you run out of vacation or leave days, will you have enough savings to make it? Would you want to borrow money from family or friends while you're getting well? Social Security disability benefits can be difficult and time consuming to receive. Now your company is making voluntary short-term disability income insurance available to you.

You choose the amount of monthly benefit you need.

TransDI® Plus helps replace up to 60% of your salary if you are unable to work because of a disability, and you can select the amount you want to buy in \$100 increments. For periods of disability that last less than one month, you will be paid at 1/30th of the monthly benefit for each day for which you are eligible to receive benefits.

When would your benefits start?

If you become totally disabled and are unable to work because of an accident or illness, you will begin a "waiting period" before you receive benefits.

- Income Protection for up to 60% of your salary

- Elimination period, and monthly benefits that fit your needs

- Waiver of Premium for Total Disability

- Partial Disability Benefits

| Waiting Period | | Benefit Period |
|----------------|----------|----------------|
| ACCIDENT | SICKNESS | |
| | | |

Pre-Existing Condition

Benefits for pre-existing conditions will not be payable until after the insured has been covered continuously for 12 months.

Pre-existing condition means a sickness or physical condition for which the insured had treatment, incurred expenses, took medication, or received a diagnosis or advice from a physician during the 12-month period prior to the effective date. It also includes a condition that manifests itself in a way that would cause an ordinarily prudent person to seek medical advice, diagnosis, care, or treatment.

How long would your benefits continue?

Once you have satisfied the waiting period, your benefits will continue for as long as you are disabled up to the maximum period stated on your policy. If you are ready to return to work immediately after being totally disabled but cannot yet work full time, you could receive up to 50% of your monthly benefit for up to 6 months while you are partially disabled.

Additional Policy Advantages: Waiver of Premium and Accelerated Benefits for Terminal Illness Rider

You will no longer have to pay your premiums for this insurance after you have been totally disabled for 90 consecutive days or have satisfied your elimination period, whichever is later. This important benefit can be helpful when money is tight. Also, if the unthinkable happens and you are ever diagnosed with a terminal illness and have less than a year to live, we will advance the remaining months of disability benefits up to 12 months through the Accelerated Benefit for Terminal Illness Rider to help you and your family with your additional expenses during that difficult time.

Important Information about Supplemental Coverage

As you make your decision about this valuable insurance for your family, be aware that this coverage is intended to supplement other forms of public or private disability insurance you may have. The sum of benefits you receive from this insurance and other sources may not exceed the percentage of your salary indicated in your plan. These other sources of income include Social Security disability benefits, other group or individual coverage, state benefits, sick leave plans, Worker's Compensation, or other similar programs.

Take Action Now to Help Protect Your Paycheck!

This is a brief summary of TransDI® Plus Voluntary Short-Term Disability Income Insurance underwritten by Transamerica Life Insurance Company, Cedar Rapids, Iowa. Policy form series CPDI0100 and CCDI0100; Rider forms series CRDIT100. Forms and form numbers may vary and this coverage may not be available in all jurisdictions. Limitations and exclusions may apply. Refer to the policy, certificate and riders for complete details.

PRODUCT DETAILS

Plan 1 Weekly Premium Class C Rates

Benefit Period: 24 Months
 Accident Elimination Period: 14 Days
 Sickness Elimination Period: 14 Days

Rates include the following optional riders:
 Accelerated Benefit for Terminal Illness
 Hospital Indemnity Benefit Rider
 Accidental Death and Dismemberment Benefit Rider

| Monthly Benefit* | Age 18-49 | Age 50-59 | Age 60+ | Monthly Benefit* | Age 18-49 | Age 50-59 | Age 60+ |
|------------------|-----------|-----------|---------|------------------|-----------|-----------|----------|
| \$300 | \$4.08 | \$5.56 | \$8.12 | \$2,700 | \$34.87 | \$48.20 | \$71.26 |
| \$400 | \$5.36 | \$7.33 | \$10.75 | \$2,800 | \$36.15 | \$49.98 | \$73.89 |
| \$500 | \$6.64 | \$9.11 | \$13.38 | \$2,900 | \$37.44 | \$51.76 | \$76.52 |
| \$600 | \$7.92 | \$10.89 | \$16.01 | \$3,000 | \$38.72 | \$53.53 | \$79.15 |
| \$700 | \$9.21 | \$12.66 | \$18.64 | \$3,100 | \$40.00 | \$55.31 | \$81.78 |
| \$800 | \$10.49 | \$14.44 | \$21.27 | \$3,200 | \$41.28 | \$57.09 | \$84.41 |
| \$900 | \$11.77 | \$16.22 | \$23.90 | \$3,300 | \$42.57 | \$58.86 | \$87.04 |
| \$1,000 | \$13.06 | \$18.00 | \$26.53 | \$3,400 | \$43.85 | \$60.64 | \$89.67 |
| \$1,100 | \$14.34 | \$19.77 | \$29.16 | \$3,500 | \$45.13 | \$62.42 | \$92.30 |
| \$1,200 | \$15.62 | \$21.55 | \$31.80 | \$3,600 | \$46.42 | \$64.20 | \$94.93 |
| \$1,300 | \$16.91 | \$23.33 | \$34.43 | \$3,700 | \$47.70 | \$65.97 | \$97.56 |
| \$1,400 | \$18.19 | \$25.10 | \$37.06 | \$3,800 | \$48.98 | \$67.75 | \$100.20 |
| \$1,500 | \$19.47 | \$26.88 | \$39.69 | \$3,900 | \$50.27 | \$69.53 | \$102.83 |
| \$1,600 | \$20.76 | \$28.66 | \$42.32 | \$4,000 | \$51.55 | \$71.30 | \$105.46 |
| \$1,700 | \$22.04 | \$30.43 | \$44.95 | \$4,100 | \$52.83 | \$73.08 | \$108.09 |
| \$1,800 | \$23.32 | \$32.21 | \$47.58 | \$4,200 | \$54.12 | \$74.86 | \$110.72 |
| \$1,900 | \$24.60 | \$33.99 | \$50.21 | \$4,300 | \$55.40 | \$76.63 | \$113.35 |
| \$2,000 | \$25.89 | \$35.76 | \$52.84 | \$4,400 | \$56.68 | \$78.41 | \$115.98 |
| \$2,100 | \$27.17 | \$37.54 | \$55.47 | \$4,500 | \$57.96 | \$80.19 | \$118.61 |
| \$2,200 | \$28.45 | \$39.32 | \$58.10 | \$4,600 | \$59.25 | \$81.96 | \$121.24 |
| \$2,300 | \$29.74 | \$41.10 | \$60.73 | \$4,700 | \$60.53 | \$83.74 | \$123.87 |
| \$2,400 | \$31.02 | \$42.87 | \$63.36 | \$4,800 | \$61.81 | \$85.52 | \$126.50 |
| \$2,500 | \$32.30 | \$44.65 | \$66.00 | \$4,900 | \$63.10 | \$87.30 | \$129.13 |
| \$2,600 | \$33.59 | \$46.43 | \$68.63 | \$5,000 | \$64.38 | \$89.07 | \$131.76 |

*Monthly benefit cannot exceed 60% of monthly compensation

SUMMARY OF BENEFITS

Monthly Disability Benefit - Pays the selected benefit amount each month that an insured is totally disabled, not to exceed the monthly benefit percent shown on the Product Details page. Benefits do not begin until the applicable **Elimination Period** has been satisfied. Periods of disability lasting less than one month will be paid at 1/30th of the monthly benefit for each day of total disability. Benefits will stop once total disability ends or the end of the **Benefit Period**, whichever occurs first.

Waiver of Premium Provision - Premiums will be waived once an insured employee has been totally disabled for 90 days or met the elimination period, whichever is later. Premiums must continue to be paid until the waiver begins.

Partial Disability Benefit - Pays 50% of the Monthly Disability Benefit for up to 6 months when an insured employee returns to work on a limited basis following a total disability, assuming the partial disability is due to the same reason as the total disability.

Accelerated Benefit for Terminal Illness Rider (*Rider Form Series CRDIT100*) - Advances up to 12 months of Monthly Disability Benefits if the insured is diagnosed by a physician, for the first time on or after the effective date, as having a terminal illness.

Accidental Death and Dismemberment (AD&D) Benefit Rider (*Rider Form Series CRDIAD00*) - Pays the following benefits for losses due to a covered off the job accident. Loss must occur within 90 days of the accident.

| Type of Loss | Benefit |
|---|----------|
| Loss of Life | \$10,000 |
| Loss of two or more members (member means hand, foot, or sight in one eye) | \$10,000 |
| Quadriplegia (total and permanent paralysis of both upper and lower limbs) | \$10,000 |
| Loss of speech and hearing in both ears | \$10,000 |
| Paraplegia (total paralysis of both lower limbs) | \$ 7,500 |
| Loss of one member or loss of speech or loss of hearing in both ears | \$ 5,000 |
| Hemiplegia (total and permanent paralysis in the upper and lower limbs of one side of the body) | \$ 5,000 |
| Loss of hearing in one ear or loss of the thumb and index finger on the same hand. | \$ 2,500 |

Hospital Indemnity Benefit Rider (*Rider Form Series CRDIH100*) - Pays 25% of the Monthly Disability Benefit for up to 30 days when an insured is confined to a hospital as the result of the covered accident or sickness that caused the insured's total disability. Only payable for the first hospitalization in any period of disability. After the insured's 65th birthday this benefit will be reduced by 50%.

LIMITATIONS AND EXCLUSIONS

The sum of the disability benefits paid to the insured together with the payments the insured is entitled to receive from the sources described below, may not exceed the monthly percent shown on the Product Details page:

- a. Group or individual insurance coverage or like coverage for persons in a group;
- b. Federal Social Security Act (this includes benefits paid to the insured employee and his or her dependents on account of the insured's disability);
- c. State or federal government disability or retirement plan, or increases thereof, which begin on or after the date of total disability;
- d. Pension plan to which the policyholder or the insured's employer contributes or makes payroll deductions;
- e. Salary or wage continuance plans such as sick leave paid for by the policyholder or the insured's employer which extend beyond the period stated in the contract; and
- f. Federal Old Age Benefits or increases which begin on or after the date of total disability, under the Federal Social Security Act on the insured employee's behalf.

With respect to items (b) and (f) only, unless we receive proof that payments under these applicable programs or acts have been applied for but will not be paid, we:

- a. will assume such payments are being received if the insured is covered under the Federal Social Security Act; and
- b. may require re-application (but not more frequently than annually) once a Social Security denial has been received and all appeals have been pursued. Failure to re-apply for benefits when required by us will result in our estimation of payment under those acts.

Benefits will not be reduced due to a cost of living increase in Social Security if the increase takes place while benefits are payable under the policy.

With respect to any and all of the above sources, if the insured or his or her dependent receives a lump sum payment for a period previously paid by us, any resulting overpayment must be repaid on a lump sum basis. If the insured has the option of taking retirement benefits on a monthly basis but chooses to receive retirement benefits in a lump sum, we may assume he or she is receiving retirement benefits based upon the lowest monthly retirement plan benefit available to the insured prior to lump sum withdrawal.

If the insured is totally disabled and receiving regular treatment due to a covered mental illness, regardless of the cause, monthly disability benefits will be paid for one-half (1/2) of the benefit. The lifetime maximum is 12 months of disability payments.

Exclusions

The policy does not cover any loss, fatal or non-fatal, which results from:

- intentionally self-inflicted injury while sane or insane;
- any act of war, declared or undeclared;
- accident sustained or sickness contracted while in the service of the armed forces of any country;
- committing a felony;
- operating, learning to operate or having any duty in the operation of any device or vehicle intended or designed for flight in the air including boarding, alighting or descending therefrom;
- accident or sickness arising out of and in the course of the insured's occupation for wage or profit. This exclusion applies even if Workers' Compensation is not paid for the on-the-job injury.

Pre-Existing Conditions

There will be no disability benefit payable for a pre-existing condition until the insured has been continuously covered under the Policy for 12 consecutive months and has returned to performing the duties of his or her occupation for 30 continuous days after the first 12 months of coverage.

"Pre-Existing Condition" means sickness or physical condition for which the insured had treatment, incurred expense, took medication, or received a diagnosis or advice from a physician, during the 12-month period immediately before the effective date of coverage.

The term "Pre-Existing Condition" will also include a condition that manifests itself in a way that would cause an ordinarily prudent person to seek medical advice, diagnosis, care or treatment.

LIMITATIONS AND EXCLUSIONS

Termination of Insurance

Employee coverage will terminate on the earliest of:

- the date the insured does not qualify as an insured;
- the date the insured retires;
- the date the insured ceases to be on active service;
- the end of the last period for which premium has been paid, subject to the Grace Period;
- the date the group master policy is discontinued.

Termination will have no effect on payment of benefits for a total disability that begins before such termination. We will have the right to terminate the coverage of any covered person who submits a fraudulent claim under the policy.

Termination of the Group Master Policy

The policyholder may end the policy on any premium due date by submitting a 60-day advance written notice. A group will not be continued if it drops below the minimum required participation. The group master policy will be terminated and coverage of all remaining insureds will end, subject to any portability option.

Other Insurance with Us

An individual can only have one disability income policy or certificate with us. If a person already has disability income insurance with us, such person is not eligible to apply for this coverage.