



Inframark, LLC provides this valuable benefit at no cost to you.

All Full-Time, Active US Employees, Excluding Union Employees or Employees Earning \$100,000.00 or More Per Year (Tax Choice)

## Long-Term Disability Insurance

### Keep getting a check when you're hurt or sick.

You always have bills to pay, even when you can't get to work due to injury, illness, or surgery. Long-term disability insurance helps you make ends meet during this difficult time.

#### AT A GLANCE:

- A cash benefit of 60% of your monthly salary (up to \$10,000) starting after the end of your short-term disability or a period of XX days of disability, whichever is greater, and continues up to the maximum benefit period:

○ Age at Disability	Maximum Benefit Period
Less than age 60-----	to age 65 (but not less than 5 years)
60 -----	60 months
61 -----	48 months
62 -----	42 months
63 -----	36 months
64 -----	30 months
65 -----	24 months
66 -----	21 months
67 -----	18 months
68 -----	15 months
69 and over -----	12 months

- Evidence of insurability may be required.
- Includes *EmployeeConnect*® EAP services, which give you and your family confidential access to counselors as well as personal, legal, and financial assistance.
  - Program Services include:
    - Unlimited, 24/7 access to information and referrals
    - In-person help for short-term issues; up to five sessions with a counselor per person, per issue, per year.
    - One free consultation with a network attorney (with subsequent meetings at a reduced fee)
    - One free consultation with a financial counselor
    - Online tools, tutorials, videos and much more

#### ADDITIONAL DETAILS

**Pre-existing Condition:** If you have a medical condition that begins before your coverage takes effect, and you receive treatment for this condition within the three months leading up to your coverage start date, you may not be eligible for benefits for that condition until you have been covered by the plan for 12 months.

For complete benefit descriptions, limitations, and exclusions, refer to the certificate of coverage.

This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the contract, the contract will govern.

*EmployeeConnect*<sup>SM</sup> services are provided by ComPsych<sup>®</sup> Corporation, Chicago, IL. ComPsych<sup>®</sup> and GuidanceResources<sup>®</sup> are registered trademarks of ComPsych<sup>®</sup> Corporation. ComPsych<sup>®</sup> is not a Lincoln Financial Group<sup>®</sup> company. Coverage is subject to actual contract language. Each independent company is solely responsible for its own obligations.

Group insurance products and services described herein are issued by The Lincoln National Life Insurance Company, Fort Wayne, IN. The Lincoln National Life Insurance Company does not solicit business in New York, nor is it licensed to do so. Lincoln Financial Group is the marketing name for Lincoln National Corporation and its affiliates. Affiliates are separately responsible for their own financial and contractual obligations.

