OneAmerica® Financial

Group Long-term Disability

Plan highlights for Small Business Association of Michigan

Long-term disability insurance is a company-paid benefit that steps in when a serious illness or injury keeps you out of work for an extended period of time. If you're unable to return to your job after a period of time (your elimination period) ends, this coverage helps replace a portion of your income so you can focus on your health, not your finances. It's long-term peace of mind, at no cost to you.

Eligibility

Definition of a member	All full-time permanent employees authorized to work and reside in the United States. Eligible employees cannot be considered a part-time, temporary or seasonal employee.
Class description	All Eligible Full-Time Employees

Benefits

Benefit amount	60% of basic monthly earnings
Monthly maximum benefit	$6,000
Monthly minimum benefit	The greater of 10% of the Gross Monthly Benefit or $100
Elimination period	180 days
Maximum benefit period	Social Security Full Retirement Age
Cost	There is no cost to you
Social Security offset method	Social Security Full Retirement Age
Pre-existing condition limitation	12/6/24
Other limitations	Mental illness: 24 months lifetime cumulative Drug and alcohol abuse: 24 months lifetime cumulative Special conditions: 24 months lifetime cumulative
Total disability	Included
Residual disability	Included
Recurrent disability	Included
Exclusions	The plan may not cover for any disability resulting from war, declared or undeclared or any act of war; active participation in a riot; intentionally self-inflicted injuries, commission of an assault or felony.

Other Group Long-term Disability features

- Return to work
- Survivor income
- Workplace modification
- Supplemental disability benefit
- Vocational rehab

Frequently asked questions

What's long-term disability?
This insurance helps protect your paycheck if you become injured or sick for a long period of time.

What's an elimination period?
This is the waiting period that must pass after a disability occurs before you can start receiving benefits from your disability insurance policy.

What's a pre-existing condition limitation?
A pre-existing limitation in disability insurance refers to a condition you had before your coverage began, which the insurer may exclude or limit benefits for, especially if it was treated or symptomatic during a defined "look-back" period before the policy started. This limitation typically lasts for a specific time, during which claims for that condition are not covered. If your disability is substantially related to this prior condition, your claim for benefits can be denied.

What are the definitions of disability specific to this policy?
- **Total disability: "**Totally disabled" means that you can't perform the material and substantial duties of your regular occupation because of an injury or sickness; you're not working in any occupation and are under the regular attendance of a physician for that injury or sickness and after benefits have been paid for two years; and you cannot perform the duties of any gainful occupation that you're reasonably fitted for by training, education or experience.
- **Residual disability:** The elimination period can be met using total disability, partial disability or a combination of both.
- **Recurrent disability:** The benefit allows claim payments to continue without satisfying a new elimination period if an employee returns to active, full-time work and had a recurrent disability within six consecutive months of their return to active work.