Lincoln Financial℠

Parsons Corporation
Long-term disability insurance

What is it?

Long-term disability insurance pays you a portion of your salary while you're away from work or recovering from a covered illness or injury.

Why is this coverage valuable?

When you're unable to collect your normal paycheck due to injury or illness, your disability policy provides money that can help you pay your bills.

Your long-term disability coverage

Eligibility description	All active employees, excluding officers and employees in pay groups R019, L019, and Y019 as well as employees in a collective bargaining agreement H780
Contributions	You pay the cost of your coverage
Coverage amount	60% of your monthly earnings to a maximum of $10,000 per month
Maximum benefit period	**Age at disability** / **Maximum benefit period** Under 60 / To age 65 (but not less than five 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+ / 12 months
Elimination period	After the end of your short-term disability or a period of 180 days of disability, whichever is greater
Evidence of insurability (EOI): A health statement requiring you to answer a few medical history questions.	Health statement may be required
Preexisting condition(s): Any condition or symptom for which you, in the specified time period before coverage in this plan, consulted with a physician, received treatment, or took prescribed drugs.	3 months lookback; 12 months after effective date of coverage
Premium waived if disabled: Premium won't need to be paid when you're receiving benefits.	Yes
EmployeeConnect℠ **services:** Gives you and your family confidential access to counselors, along with personal, legal, and financial assistance.	Included

Long-term disability rate information

Monthly rate	$0.312 per $100 of covered payroll

Exclusions, limitations, and reductions

Like any insurance, this long-term disability insurance policy does have some exclusions. You won't receive benefits if:

- Your disability is the result of a self-inflicted injury or act of war
- Your disability occurs while you're committing a felony or misdemeanor, or participating in a riot
- Your disability occurs while you're imprisoned for committing a felony

Your benefits may be reduced if you're eligible to receive benefits from:

- A state disability plan or similar compulsory benefit act or law
- A retirement plan
- Social Security
- Any form of employment
- Workers' compensation
- Salary continuance
- Sick leave

This is an incomplete list of benefit exclusions. A complete list is included in the policy. State variations apply.

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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.

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