The George Washington University

Benefits At-A-Glance

Eligibility:
• Active Full-Time Staff
• Active Full-Time Faculty
• Active Medical residents
*Please note that one year of continuous, active employment may be required for enrollment in the plan.

<table>
<thead>
<tr>
<th>Core Plan (paid by The George Washington University)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly benefit amount</td>
</tr>
<tr>
<td>Elimination period</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>“Buy-Up” Option (paid by you through payroll deduction)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monthly benefit amount</td>
</tr>
<tr>
<td>Elimination period</td>
</tr>
</tbody>
</table>

Elimination Period
• This is the number of days you must be disabled before you can collect disability benefits.

Maximum Coverage Period
• This is the total amount of time you can collect disability benefits (also known as the benefit duration).
• Benefits are limited to 36 months for mental illness; 36 months for substance abuse
• Age at Disability Maximum Benefit Period
  Less than age 60-------------------- Greater of Social Security Normal Retirement age or 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
Additional Plan Information

Evidence of Insurability

- When you are first offered this coverage (and during approved open enrollment periods), you may be able to take advantage of this important coverage with no evidence of insurability (proof of health).

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 3 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.

Benefit Exclusions & Reductions

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

- Your disability is the result of a self-inflicted injury or act of war
- Your disability is the result of cosmetic surgery, unless related to a disabling condition
- Your disability occurs while you are committing a felony or misdemeanor or participating in a riot

Your benefits may be reduced if you are 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

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® services are provided by ComPsych® Corporation, Chicago, IL. ComPsych® and GuidanceResources® are registered trademarks of ComPsych® Corporation. ComPsych® is not a Lincoln Financial Group® 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.

©2021 Lincoln National Corporation
LCN-3753259-090921
EED-LTD-FLI001_Z01

Long-term Disability Insurance At-A-Glance 2
Long-Term Disability Insurance
Calculate Your Premium

Use the employee buy-up long-term disability premium rate table provided below to calculate your cost and benefit. The following example calculates the monthly cost for an employee with annual benefits-eligible earnings of $35,400.

Note: The maximum monthly covered earnings are equal to the maximum monthly benefit divided by the benefit percentage.

<table>
<thead>
<tr>
<th>Calculation Example</th>
<th>Example</th>
<th>You</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1 Enter the monthly rate per $100 of monthly covered payroll.</td>
<td>$0.407</td>
<td></td>
</tr>
<tr>
<td>Step 2 Enter your monthly earnings. Divide your annual earnings by 12.</td>
<td>$2,950</td>
<td></td>
</tr>
<tr>
<td>Step 3 If your monthly earnings are greater than the maximum monthly covered earnings of $18,000, indicate $18,000. Otherwise, indicate the amount from Step 2.</td>
<td>$2,950</td>
<td></td>
</tr>
<tr>
<td>Step 4 Multiply Step 1 by Step 3</td>
<td>$12.01</td>
<td></td>
</tr>
<tr>
<td>Step 5 Enter the Core monthly rate per $100 of monthly covered payroll</td>
<td>$0.341</td>
<td></td>
</tr>
<tr>
<td>Step 6 Enter your monthly earnings. Divide your annual earnings by 12.</td>
<td>$2,950</td>
<td></td>
</tr>
<tr>
<td>Step 7 If your monthly earnings are greater than the Core maximum monthly covered earnings of $16,667, indicate $16,667. Otherwise, indicate the amount from Step 6.</td>
<td>$2,950</td>
<td></td>
</tr>
<tr>
<td>Step 8 Multiply Step 5 by Step 7</td>
<td>$10.06</td>
<td></td>
</tr>
<tr>
<td>Step 9 Your premium for the Buy-up is equal to Step 4 minus Step 8</td>
<td>$1.95</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Core Premium Rate</th>
<th>Buy-Up Premium Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.341</td>
<td>0.407</td>
</tr>
</tbody>
</table>

This worksheet allows you to approximate your monthly contributions for buy-up long-term disability insurance coverage. Cost of insurance may change in the future due to age and/or coverage amount elected.