

Wisconsin Chiropractic Association



Summary Plan Description

LONG TERM DISABILITY INSURANCE

Purpose	To provide monthly earnings during time lost from work due to a disability
Elimination Period:	180 Days
Benefit Percentage:	60% of monthly earnings
Benefit Duration:	SSNRA
Minimum Monthly Benefit:	10% or \$100, whichever is greater
Guarantee Issue Amount:	\$0
Maximum Monthly Benefit:	\$10,000
Pre-Existing Conditions:	12/24 Months
Mental Illness & Substance Abuse Limitations:	24 Months
Own Occ Duration:	2 Years
Definition of Disability	Progressive Partial/ Residual
Integration Method:	Social Security Family
Employee Assistance Program:	Included

Note: 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. Should there be a difference between this summary and the contract, the contract will govern.