# Case Western Reserve University

**Group Number**
**227922**

**Class 2 - All Benefit Eligible Staff who work at least 18.75 hours per week for non-exempt and 20 hours per week for exempt employees for the employer on a regular basis and Staff employees who are on an approved Sabbatical Leave as defined in the Employee Handbook (Policy No. IV-11) or on a Convenience Leave or other leaves of absence approved by the employer as outlined in the Employee Handbook (Policy No. IV-11) which does not exceed a period of 12 weeks, and who retains benefit eligibility (CWRU Benefit Category 2&3)**

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# SCHEDULE OF BENEFITS

| | |
|---|---|
| **Policyholder:** | Case Western Reserve University |
| **Policy Number:** | 227922 |
| **Eligibility: Class (if Applicable):** | 2 - All Benefit Eligible Staff who work at least 18.75 hours per week for non-exempt and 20 hours per week for exempt employees for the employer on a regular basis and Staff employees who are on an approved Sabbatical Leave as defined in the Employee Handbook (Policy No. IV-11) or on a Convenience Leave or other leaves of absence approved by the employer as outlined in the Employee Handbook (Policy No. IV-11) which does not exceed a period of 12 weeks, and who retains benefit eligibility (CWRU Benefit Category 2&3) |
| **Group Term Life Insurance** | |
| Employee Basic Life Benefit Amount: | $20,000 |
| Employee Supplemental Life Benefit Amount: | $50,000 or 1.0, 1.5, 2.0, 2.5 or 3.0 times Base Annual Salary minus the Basic benefit in-force to a maximum of $480,000. Benefits round to next higher multiple of $1,000 |
| **Non-Medical Maximum Benefit Limit:** | |
| Employee Basic Life: | $20,000 |
| Employee Supplemental Life: | $480,000 |
| **Accelerated Death Benefit:** | |
| Benefit: | Refer to Accelerated Death Benefit |
| **Accidental Death & Dismemberment (AD&D):** | |
| Employee Basic AD&D Benefit Principal Sum: | $20,000 |
| Employee Supplemental AD&D Principal Sum: | $50,000 or 1.0, 1.5, 2.0, 2.5 or 3.0 times Base Annual Salary minus the Basic benefit in-force to a maximum of $480,000. Benefits round to next higher multiple of $1,000 |
| **Dependent Life Insurance** | |
| Option 1: | |
| Dependent Spouse or Domestic Partner Benefit Amount: | $5,000 |
| Dependent Child(ren) Coverage: | |
| Birth to age 26 years | $1,000 |
| Option 2: | |
| Dependent Spouse or Domestic Partner Benefit Amount: | $10,000 |
| Dependent Child(ren) Coverage: | |
| Birth to age 26 years | $2,000 |

**Other AD&D Features**

- Seat Belt Benefit
- Air Bag Benefit
- Repatriation Benefit
- Dependent Education Benefit

- Common Carrier Benefit
- Exposure and Disappearance Benefit
- Coma Benefit

**Short Term Disability Benefits:**

| | |
|---|---|
| STD Benefits: | 50% of Your Basic Weekly Earnings, not to exceed Maximum STD Weekly Benefit. Minimum of $25. |
| Maximum Weekly Benefit: | $400 |
| Benefits are payable on: | 15th day of disability resulting from an Accident, the 15th day of disability resulting from Sickness, or end of accumulated sick leave, salary continuation or vacation pay, whichever is later and are payable for a maximum of 24 weeks. |

**Reduction of Benefits**

Basic and Supplemental Life and AD&D benefits reduce by 35% upon the Employee©s attainment of age 65, and further reduce to 50% of the face amount upon the Employee©s attainment of age 70Benefits terminate at retirement.

**THIS SCHEDULE OF BENEFITS CANCELS AND REPLACES ALL OTHER SCHEDULES PREVIOUSLY ISSUED TO YOU UNDER THE POLICY. IT OUTLINES THE POLICY FEATURES. THE FOLLOWING PAGES PROVIDE A COMPLETE DESCRIPTION OF THE PROVISIONS OF**

# DEFINITIONS

**This section explains the meaning of special words and phrases used in this Certificate. To help recognize these special words and phrases, the first letter of each word, or each word in the phrase, is capitalized wherever it appears.**

**Accident or Accidental** means a sudden, unexpected event that was not reasonably foreseeable and occurs independently of disease, illness or bodily infirmity.

**Actively at Work**

If You were not a partner during the calendar year prior to the date of loss, Basic Weekly Wage means Your average weekly compensation (excluding dividends, capital gains, and return of capital) from the partnership prior to the date of Your loss, determined in accordance with the terms of the applicable partnership agreement. In the event of a disagreement between Us and the claimant, an adjustment will be made, if warranted, after Your subsequent federal income tax return is submitted to Us.

No benefits are payable when any of the above calculations result in an amount less than zero.

**Base Annual Salary** if You are a SOLE PROPRIETOR or SHAREHOLDER IN A SUBCHAPTER S CORPORATION or a MEMBER IN A LIMITED LIABILITY COMPANY Your annual net taxable income (excluding dividends, capital gains, and return of capital) derived from the Policyholder for the calendar year prior to the date of Your loss, as reported on Your federal income tax return. Your annual net taxable income equals A minus B, where:

A = Your annual taxable income derived from the Policyholder for the prior calendar year (excluding dividends, capital gains, and return of capital), as reported on Your federal income tax return; and

B = Your annual deductible work expenses attributable to Your work for the Policyholder during the prior calendar year, as reported on Your federal income tax return.

If You were not a sole proprietor or shareholder in a Subchapter S corporation or a member in a Limited Liability Company during the calendar year prior to the date of Your loss, Base Annual Salary means Your annual net taxable income derived from the Policyholder for the period You were a sole proprietor or shareholder in a Subchapter S corporation or a member in a Limited Liability Company prior to the date of Your loss. Your annual net taxable income will be based on the taxable income derived from the Policyholder for the period of Your work as a sole proprietor or shareholder in a Subchapter S corporation or a member in a Limited Liability Company for the Policyholder, taking into account Your deductible work expenses attributable to Your w