



GROUP LONG-TERM DISABILITY CERTIFICATE SUMMARY

This summary describes some of the terms and conditions of the Policy. For a complete description of the terms and conditions of the Policy, refer to the appropriate section of the Certificate, available from the Policyholder. A person is not necessarily entitled to insurance because he or she received this summary. A person is only entitled to insurance if he or she is eligible in accordance with the terms of the Policy. This summary was published on August 31, 2026.

POLICY INFORMATION

Policyholder:	Avila University
Policy Effective Date:	January 1, 2021
Policy Anniversary:	January 1
Policy Number:	GLTD-BTLY
Group Number:	G000BTLY
Classification:	All Eligible Employees Earning \$58,500 or More per Year
Minimum Work Hours Required:	30 hours per week
Eligibility Present Waiting Period:	None
Eligibility Future Waiting Period:	None
When Insurance Begins:	The first day of the month that coincides with or follows the day the Employee becomes eligible. Additional eligibility conditions apply as described in the Certificate.
Premium Contribution:	Non-contributory
Elimination Period:	The Elimination Period is the later of: a) 90 calendar days; or b) the date your Policyholder-sponsored short-term disability benefits from us end.

BENEFITS

Monthly Benefit Percentage:	66 2/3%																				
Maximum Monthly Benefit:	\$7,000																				
Minimum Monthly Benefit:	\$50																				
Maximum Benefit Period:	<table><tr><th>Age at Disability</th><th>Maximum Benefit Period</th></tr><tr><td>61 or less.....</td><td>to age 65, your SSNRA, or 3 years and 6 months, whichever is longest;</td></tr><tr><td>62.....</td><td>your SSNRA, or 3 years and 6 months, whichever is longer;</td></tr><tr><td>63.....</td><td>your SSNRA, or 3 years, whichever is longer;</td></tr><tr><td>64.....</td><td>your SSNRA, or 2 years and 6 months, whichever is longer;</td></tr><tr><td>65.....</td><td>2 years;</td></tr><tr><td>66.....</td><td>1 year and 9 months;</td></tr><tr><td>67.....</td><td>1 year and 6 months;</td></tr><tr><td>68.....</td><td>1 year and 3 months;</td></tr><tr><td>69 or older.....</td><td>1 year.</td></tr></table>	Age at Disability	Maximum Benefit Period	61 or less.....	to age 65, your SSNRA, or 3 years and 6 months, whichever is longest;	62.....	your SSNRA, or 3 years and 6 months, whichever is longer;	63.....	your SSNRA, or 3 years, whichever is longer;	64.....	your SSNRA, or 2 years and 6 months, whichever is longer;	65.....	2 years;	66.....	1 year and 9 months;	67.....	1 year and 6 months;	68.....	1 year and 3 months;	69 or older.....	1 year.
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Own Occupation Definition:	Own-Occupation to Maximum Benefit Period																				
Enhanced Disability Benefit:	10%																				

Reasonable Accommodation Benefit:	The lesser of 100% for covered services expenses, \$5,000 or an amount equal to the total Gross Monthly Benefit.
Survivor Benefit:	3 months
Vocational Rehabilitation Benefit:	5%

LIMITATIONS

Substance Abuse Limitation:	24 months per occurrence
Mental Disorder Limitation:	24 months per occurrence
Pre-existing Condition Limitation:	3/12