

PLFSOM / TTUHSC El Paso Guardian GLTD Benefits

ASSUMPTIONS: 100% Participation required; No waiting period for coverage to start; Coverage is 24 hours;

Benefits	Guardian
Monthly Benefit	\$1,500 for MSY 1 & 2 and \$2,000 for MSY 3 & 4
Elimination Period: Is the period starting from the day the claimant first becomes disabled and continuing for the period selected (90 days)	90 Days
Coverage Ends	On graduation day
Interruption Period: Is an interruption of your elimination period. The IP allows non-consecutive days of disability to satisfy that 90 day EP.	45 Days
Duration of Benefits: Social Security Normal Retirement Age	SSNRA
Minimum Monthly Benefit: Is the minimum a claimant would be paid if they were partially disabled and not eligible to receive the full amount of their group benefit.	\$100
Conversion option upon graduation: Eligible to convert to an individual policy with no Evidence of Insurability (EOI). NO MEDICAL QUESTIONS. Available upon graduation.	\$1,000 \$3,000 Future Increase Option (FIO); 30 - 60 day window
Disability Definition: The inability to attend medical school and maintain active status. The student must not be working.	2 Year Own Occ, (See cert for after)
Mental, Nervous, Drug / Alcohol limit: Disability due to a mental, nervous drug, or substance related disorders.	24 months
Pre-existing Condition Limit: For disability claims filed within the first 12 months Guardian will look back prior to the student's effective date - to determine if the disability is due to a sickness or injury that they received treatment, consultation, care of services for during the look back period.	3 months prior, 12 months after
Student Loan Reimbursement: An additional benefit paid if you become disabled to pay off a student loan debt.	Payments would start after 12 months of being disabled; Max Benefit \$200,000.
Recurrent Disability Period: If a student goes out with a disability and then returns to class, and then becomes disabled again, Guardian will consider the latter period of disability to be recurring if certain criteria are met. (see cert)	6 months
Maternity: Complications of pregnancy that cause disability	Full, as any other illness
Rate Guarantee	2 Years
FILING A CLAIM - You must send Guardian a written notice of an injury or sickness WITHIN 30 DAYS (SEE CERT)	30 Days

This is a summary of coverage only. The actual certificate and policy language will govern.