

*Employee*

# Group Short-Term Disability

*Group Short-Term Disability  
Income Insurance*

If you've ever been out of work because of a sickness or an injury, you know there are two things that are increasingly hard to come by:

***Peace of mind and cash benefits.***

Our insurance policies help provide both.



**Aflac**®

Underwritten by:  
American Family Life Assurance  
Company of Columbus

# Group Short-Term Disability

Group Short-Term Disability Income Insurance

Policy Series A-57300

## The Need

*Becoming disabled is often an unexpected and burdensome experience, and it can happen to anyone. What if a disability interrupted your job, your income, and your financial security? How would you make your house or rent payment, or cover day-to-day expenses? It's important to consider these questions because a disability could adversely affect your well-being and your finances at a time when you should be concentrating on recovery.*

*As an employee, you should have even greater peace of mind knowing that your employer wants you to be prepared in the event of a disability. By making Aflac's group short-term disability insurance policy available, your employer can help reduce the worry of financial security during a disability so you can focus on your recovery.*

## Consider These Facts:

- About 62 million people in the United States have some disability that affects daily activity.<sup>1</sup>
- Approximately two-thirds of those with disabilities are younger than 65.<sup>1</sup>
- Around 3-in-10 people entering the workforce today will become disabled before retiring.<sup>2</sup>

When disabled, you may not only lose the ability to earn a living, but you may also lose savings, retirement funds, or even your home. The financial obligations can be overwhelming. Disability insurance plays an integral and important role in your financial planning.

## How Aflac Can Help

Aflac's group short-term disability benefits provide a source of income while you concentrate on getting better. Knowing that your disability coverage is backed by a market leader with more than 50 years in the insurance industry may help provide you with peace of mind.

We pay you a cash benefit for each day you are disabled.

Aflac does not coordinate benefits. Regardless of any other disability insurance benefits you may have, including Social Security, we will pay you directly (unless you assign the benefits).

Peace of mind. Cash benefits. Knowing that your employer cares. Knowing that you'll have help in the event of a disability. All these are good reasons to strongly consider the benefits of Aflac.

Aflac herein means American Family Life Assurance Company of Columbus.

<sup>1</sup> "Disability and Health in the United States, 2001–2005," National Center for Health Statistics, 2008.

<sup>2</sup> Fact Sheet 2007, Social Security Administration.

## Key Features

- **Guaranteed Issue.** All actively working full-time employees are eligible for coverage (subject to income requirements).
- **Simplified Issue for monthly benefit amounts above the guaranteed-issue amount.** If you would like additional coverage beyond the guaranteed-issue amount, you may apply for additional coverage with simplified underwriting (subject to income requirements).
- **Waiting periods will not start over.** If Aflac's group short-term disability is replacing your existing group short-term disability coverage, the amount of time you have earned toward your Pre-Existing Conditions provision may transfer to your new Aflac coverage (subject to policy provisions).

## What We Will Pay

**Disability Benefit for Sickness and Off-the-Job Injury:** While you are working at a Full-Time Job and while coverage is in force, we will insure you as follows: If a covered Sickness or covered Off-the-Job Injury causes you to become Totally Disabled within 90 days of your covered Sickness or covered Off-the-Job Injury, we will pay you one-thirtieth of the benefit shown in the Certificate Schedule for each day you remain Totally Disabled.

This benefit is payable up to the benefit period selected and is subject to the elimination period shown in the Certificate Schedule.

## Additional Information

**Certificate Exchange Provision:** If it is necessary for you to leave your current employer, and if your certificate of coverage has been in force for 12 months or more, if the master policy is in force, and if you are not over age 64, Aflac will offer you an option to obtain coverage under an individually owned policy without evidence of insurability. This option will not be available if Aflac cancels your employer's master policy, if your employer cancels Aflac, if you are over age 64, or if the certificate of coverage has been in force for less than 12 months. Upon termination of the certificate, Aflac will notify you that you have 31 days from the termination date to exchange the certificate for a short-term disability income insurance policy.

The certificate of coverage is subject to the laws of the state of New Jersey.

**Renewability Provision:** You are guaranteed the right to renew the certificate until the certificate anniversary date following your 70th birthday if: (1) You pay the appropriate premiums at the rate in effect at the beginning of each term, (2) The master policy under which the certificate was issued remains in force, and (3) You continue to be an Employee with the employer listed on your enrollment application. Rates can be changed only if the rate is changed for all policies of this class. While the certificate is in force, no change will be made in your class because of your age or physical condition.

**Provisions of Coverage:** Aflac reserves the right to meet with you during the pendency of a claim or to use an independent consultant and physician's statement to determine whether you are Totally Disabled. You must be under the care and attendance of a physician for these benefits to be payable. Benefits will cease on the date you are no longer disabled or on the date of your death.

If you have any other disability benefits in force with Aflac, only one disability benefit is payable.

## What Is Not Covered

**Aflac will not pay benefits for a disability that is caused by or occurs as a result of your:**

- Giving birth when conception occurs prior to the Effective Date of coverage (see Pre-Existing Conditions Limitation When Previously Insured section); complications of pregnancy will be covered to the same extent as a Sickness;
- Being addicted to alcohol or a narcotic, unless such narcotic was administered or consumed on the advice of a physician and taken according to the physician's instructions;
- Participating in any activity or event, including the operation of a vehicle, while under the influence of any narcotic (unless administered on the advice of a physician and taken according to the physician's instructions) or while intoxicated (the term *intoxicated* means that condition as defined by the law of the jurisdiction in which the accident occurs);
- Attempting to commit or committing a felony, or being engaged in an illegal occupation;
- Intentionally self-inflicting a bodily injury or attempting suicide, while sane or insane;
- Being involved in war or any act of war, declared or undeclared;
- Serving in any of the armed forces (We will return the premium paid during such service, and upon termination of military service, you have the right to renew coverage);
- Being Totally Disabled while outside the territorial limits of the United States or, if outside the United States, the territorial limits of the place where your certificate was issued.

**This brochure is for illustrative purposes only.**

**Refer to the certificate for complete definitions, details, limitations, and exclusions.**

## What Is Not Covered (continued)

A physician does not include you or a member of your immediate family.

Benefits will be paid for only one disability at a time, even if the disability is caused by more than one Sickness, more than one Injury, or Sickness and Injury.

The term *complications of pregnancy* does not include false labor, occasional spotting, physician-prescribed rest during pregnancy, morning sickness, and similar conditions associated with the management of a difficult pregnancy not constituting a classifiably distinct complication of pregnancy.

**Pre-Existing Conditions Limitation:** Aflac will not pay benefits for any period of disability that results, directly or indirectly, from Sickness or Injury for which you, within the two-year period prior to the Effective Date of your insurance, incurred expenses, received medical treatment, took prescribed drugs or medicines, or consulted a physician.

This limitation will not apply to a period of disability that begins more than 24 months after the Effective Date of your insurance.

The above provision may not apply to you (see Pre-Existing Conditions Limitation When Previously Insured and Pre-Existing Conditions Limitation When Previously Insured With Aflac sections).

**Pre-Existing Conditions Limitation When Previously Insured:** If you were insured on the day before the Effective Date of the certificate under a group disability policy sponsored by the same employer and replaced by a certificate with similar benefits, then the length of time your previous coverage was in force will be applied toward the satisfaction of the Pre-Existing Conditions Limitation of the certificate and also toward your giving birth within the first ten months of the Effective Date of the certificate as the result of a normal pregnancy, including cesarean. Any increased benefit amounts resulting from the replacement of the original coverage with this new coverage will be subject to a new Pre-Existing Conditions Limitation provision and to all limitations and exclusions, beginning with the Effective Date of this new coverage. You must be working at an approved Full-Time Job on the Effective Date of the certificate.

**Pre-Existing Conditions Limitation When Previously Insured With Aflac:** If you were insured on the day before the Effective Date of the certificate under a group disability policy issued by Aflac and replaced by a certificate with similar benefits, any condition for which you received disability benefits under the original Aflac coverage will not be subject to the new Pre-Existing Conditions Limitation up to the benefit amount under the original Aflac coverage or the benefit amount under the new Aflac coverage, whichever is less. Any increased benefit amounts resulting from the replacement of the original coverage with this new coverage will be subject to a new Pre-Existing Conditions Limitation provision and to all limitations and exclusions, beginning with the Effective Date of this new coverage. You must be working at an approved Full-Time Job on the Effective Date of the certificate.

## Terms You Need to Know

**Effective Date:** the date your coverage begins. We require evidence of insurability before coverage is provided. Upon our approval of your application, coverage will begin on the Effective Date shown in the Certificate Schedule.

**Full-Time Job:** a job that: (1) you are compensated for by your employer with pay and benefits, (2) your employer has classified as full time, and (3) has been approved in the group application by Aflac Worldwide Headquarters. If you have more than one job, your Full-Time Job shall be considered the job at which you work the most regularly scheduled hours.

**Injury:** a bodily injury caused directly by an accident, independent of Sickness, disease, bodily infirmity, or any other cause, occurring on or after the Effective Date of coverage and while coverage is in force.

**Off-the-Job Injury:** an Injury that occurs while you are not working at any job for pay or benefits.

**Sickness:** a disease, disorder, infection, or any other abnormal physical condition (not caused by an Injury) that results in loss commencing after the Employee's Effective Date of coverage and while coverage is in force.

**Successive Periods of Disability:** the benefit period will be restored (subject to a new elimination period) for separate periods of disability that are the result of the same or a related condition, provided you have returned to work and performed the material and substantial duties of your Full-Time Job for a period of 180 consecutive days or more. Disabilities not caused by the same or a related condition will be subject to a new elimination period and benefit period. This provision does not apply during the elimination period or when you become eligible for benefits under any other group short-term disability income insurance policy following termination of your coverage under the certificate.

**Totally Disabled:** your continuing inability to perform the material and substantial duties of your Full-Time Job. You must also be under the care and attendance of a physician for your condition. If you are unable to perform the material and substantial duties of your Full-Time Job but return to work, you will continue to be considered Totally Disabled as long as your earnings are less than 80 percent of your earnings at the time you became Totally Disabled. If you return to work at any job and are earning 80 percent or more of your earnings at the time you became Totally Disabled, you are no longer considered Totally Disabled.

