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**Roman Catholic Bishop of Oakland  
Policy # 517531**

Please read carefully the following description of your Unum Select Income Protection Plan insurance.

**Your Plan**

***Eligibility***

You are eligible for short term disability coverage if you are an active employee in the United States working a minimum of 20 hours per week.

***Benefit Amount***

60% of your weekly earnings to a weekly maximum benefit of \$1,000.

***Definition of Disability***

You are disabled when Unum determines that:

- you are limited from performing the material and substantial duties of your regular occupation due to your sickness or injury; and
- you have a 20% or more loss in weekly earnings due to the same sickness or injury.

***Elimination Period***

The Elimination Period is the length of time of continuous disability, due to injury or sickness, which must be satisfied before you are eligible to receive benefits. STD benefits would begin after 30 consecutive days of disability, as described in the definition above.

***Benefit Duration***

If you meet the definition of disability you may receive a benefit for 22 weeks.

**Additional Benefits**

**Limitations/Exclusions/  
Termination of Coverage**

***Instances When Benefits  
Would Not Be Paid***

Benefits will not be paid for disabilities caused by, contributed to by, or resulting from:

- war, declared or undeclared, or any act of war;
- active participation in a riot;
- intentionally self-inflicting injuries;
- loss of a professional license, occupational license or certification;
- commission of a crime for which you have been convicted;
- any period of disability during which you are incarcerated;
- pre-existing conditions (see definition).
- an **occupational injury or sickness** (this will not apply to a partner or sole proprietor who cannot be covered by law under Workers' Compensation or any similar law);

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***Termination of Coverage***

Your coverage under the policy ends on the earliest of the following:

- The date the policy or plan is cancelled;
- The date you no longer are in an eligible group;
- The date your eligible group is no longer covered;
- The last day of the period for which you made any required contributions;
- The later of the last day you are in active employment except as provided under the covered layoff or leave of absence provision.

Unum will provide coverage for a payable claim which occurs while you are covered under the policy or plan.

***Next Steps******Delayed Effective Date of Coverage***

If you are absent from work due to injury, sickness, temporary layoff or leave of absence, your coverage will not take effect until you return to active employment. Please contact your Plan Administrator after you return to active employment for when your coverage will begin.

***Questions***

If you should have any questions about your coverage or how to enroll, please contact your Plan Administrator.

This plan highlight is a summary provided to help you understand your insurance coverage from Unum. Some provisions may vary or not be available in all states. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern. For complete details of coverage, please refer to policy form number C.FP-1, et al.

*Underwritten by:* **Unum Life Insurance Company of America** 2211 Congress Street, Portland, Maine 04122,  
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