Help protect your savings

Group Long-Term Disability Insurance by American General®
For employees of LeTourneau University

BENEFIT SUMMARY

American General
Life Companies
Group Long-Term Disability Benefit Summary

If an illness or injury left you unable to work for an extended period of time, it could become extremely difficult to cover even your most basic expenses. Although you may have enough money in the bank to meet your short-term needs, what would happen if you were unable to work for months, or even years? The real value of disability insurance lies in its ability to protect you over the long haul.

Following is an overview of Group Long-Term Disability benefits. See the certificate for details regarding benefit descriptions, limitations and exclusions.

### Benefits at a Glance

<table>
<thead>
<tr>
<th>Plan Features</th>
<th>Plan Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Eligibility</td>
<td>Active, full-time eligible employees working a minimum of 30 hours per week, working and residing in the U.S.</td>
</tr>
<tr>
<td>Benefit Percentage</td>
<td>60 percent of basic monthly earnings</td>
</tr>
<tr>
<td>Minimum Monthly Benefit</td>
<td>Greater of $100 or 10 percent of the gross monthly benefit</td>
</tr>
<tr>
<td>Maximum Monthly Benefit</td>
<td>$10,000</td>
</tr>
<tr>
<td>Benefit Duration</td>
<td>To Social Security Normal Retirement Age (SSNRA)</td>
</tr>
<tr>
<td>Elimination Period</td>
<td>180 days</td>
</tr>
<tr>
<td>Definition of Disability During the Elimination Period</td>
<td>Zero-day residual</td>
</tr>
<tr>
<td>Pre-Existing Condition Exclusion</td>
<td>3/12</td>
</tr>
<tr>
<td>Waiver of Disability Premium</td>
<td>Included</td>
</tr>
<tr>
<td>Rehabilitation Program</td>
<td>Included, with rehabilitation and child care benefits</td>
</tr>
<tr>
<td>Partial Disability Provision</td>
<td>Proportionate loss</td>
</tr>
<tr>
<td>Return-to-Work Incentive</td>
<td>Included for the first 12 months of disability</td>
</tr>
<tr>
<td>Survivor Benefit</td>
<td>Three times monthly disability payment after 180 days of disability</td>
</tr>
<tr>
<td>Regular Occupation Period</td>
<td>24 months</td>
</tr>
<tr>
<td>Mental/Nervous, Drug and Alcohol Limitation</td>
<td>24 months lifetime</td>
</tr>
<tr>
<td>Employee Assistance Program (EAP)</td>
<td>Telephonic EAP with online Work/Life services</td>
</tr>
</tbody>
</table>

(1) Provided by Harris Rothenberg International (HRI), Inc. Not an insurance product.
Definitions

**Waiting Period:** The time determined by your employer before your insurance becomes effective.

**Benefit Duration:** The longest period of time that benefits may continue to be paid to you during a period of disability.

**Elimination Period:** A specified number of days for which you must remain continuously disabled before benefits are payable.

**Zero-day Residual:** Provision allowing an employee who has been partially disabled to work on a part-time basis immediately, while continuing to satisfy the elimination period.

**Pre-Existing Condition Exclusion:** Any injury or sickness, for which the person incurred charges, received medical treatment, consulted a physician, or took prescribed drugs within a number of months specified before becoming insured. If the disability is due to a pre-existing condition and it begins within a specific number of months from the date the employee becomes insured, no benefits will be paid. Please refer to the group policy for specific provisions.

**Waiver of Disability Premium:** The premium for your long-term disability coverage will be waived while you are receiving benefits.

**Rehabilitation Program:** An organized effort by American General Life Companies and/or your employer to assist you in assuming constructive job duties while recovering. Programs may include temporary limited hours, modified job duties, or transitional jobs, as well as permanent accommodations including modified or alternate jobs.

**Partial Disability Provision:** If you become disabled (non-work related injury or sickness) and can work part-time, you may be eligible for partial disability benefits, which will help you supplement your income until you are able to return to work full-time.

**Return to Work:** For the first 12 months of benefits, your partial disability provision allows you to earn up to 100 percent of predisability income, between your work earnings and LTD benefit.

**Survivor Benefit:** Should you pass away while receiving LTD benefits, a lump sum benefit will be provided to your eligible survivor.

**Regular Occupation Period:** As long as you are disabled from your regular occupation, disability benefits will be paid.

**Gainful Occupation:** If you are disabled from all gainful occupations, based on your education, training, experience and earnings potential, disability benefits will be paid.

**Mental/Nervous, Drug and Alcohol Limitation:** Limit on the period of time over which LTD benefits will be paid when you are disabled from a mental, emotional, nervous, drug or alcohol-related condition that is being treated on an outpatient basis.
Pre-Existing Conditions and Exclusions (state variations may apply)

Pre-existing condition means an injury or sickness that occurred within three months just before the effective date of coverage, or the effective date of any individually elected increase under the group policy, or the effective date of an increase due to a policy amendment for which the insured:

- Incurred charges.
- Received medical treatment, consultation, care or services, including diagnostic measures.
- Took prescribed drugs or medicines.

If a disability is due to, caused by or contributed to by a pre-existing condition, and it begins in the first 12 months after the effective date of coverage, or the effective date of an individually elected increase under the group policy, or the effective date of an increase due to a policy amendment, no benefits will be paid.

Exclusions and Assumptions

- Evidence of insurability is required for all late entrants.
- The group policy does not cover any disability caused by, contributed to by or resulting from:
  - Loss of professional license, occupational license or certification.
  - Intentionally self-inflicted injuries, while sane or insane.
  - Active participation in a riot.
  - Attempting to commit a crime, or commission of a crime for which the insured has been convicted under federal or state law.
  - Insurrection, war, declared or undeclared, or any act of war.
- The company will not pay a benefit for any period of disability during which the insured is incarcerated as a result of a conviction.

Monthly benefit based on a percentage of employee earnings or flat amount, if elected. The Certificate of Insurance will provide details on benefit percentages, rates, effective date of coverage and other important coverage information. The monthly benefit will be reduced by the amount of any income the insured received or is entitled to receive that month from sources including Federal Social Security Act or the Railroad Retirement Act, the disability sickness laws of any state, workers’ compensation, or a mandatory state auto reparation or indemnity act (no-fault insurance, where allowed by law). Please see the Certificate of Insurance for additional reduction sources.

Policies issued by:

American General Life Insurance Company of Delaware
Wilmington, Delaware
Policy Form Number G-DIS-41000

The United States Life Insurance Company in the City of New York
New York, New York
Policy Form Number G-DIS-31000

www.americangeneral.com/employeebenefits

American General Life Companies, www.americangeneral.com, is the marketing name for the insurance companies and affiliates comprising the domestic life operations of American International Group, Inc., including American General Life Insurance Company of Delaware and The United States Life Insurance Company in the City of New York.

The underwriting risks, financial and contractual obligations and support functions associated with products issued by American General Life Insurance Company of Delaware and The United States Life Insurance Company in the City of New York are the issuing insurer’s responsibility. The United States Life Insurance Company in the City of New York is authorized to conduct insurance business in New York. Policies are not available in all states.

This is a summary only of products and services offered. Actual offerings may vary by group size and are subject to state insurance law, and the benefits/provisions as described may vary due to such law. All products are subject to the terms, conditions, limitations and exclusions of the policy. Please see policy and certificate for details.

An employer-funded program may be funded 100 percent by the employer or a combination of both the employer and employee funding.

©2011. All rights reserved.
06675006-2316FILL R07/11

Employer-funded plan for groups of 10-plus employees.