

AFLAC GROUP SHORT-TERM DISABILITY

NON-OCCUPATIONAL INSURANCE PLAN

Policy Series C51000



No one plans on becoming disabled. It's just not something we typically think about. And yet, it is something that can happen to anyone. If you get sick or hurt and couldn't work, how would you pay the mortgage? Buy groceries? Make your car payment? And all of the other bills that won't go away, just because your paycheck is gone?

That's where Aflac's group short term disability insurance plan can help make the difference.

The difference that means you will have a portion of your income to help take care of your bills while you're taking care of yourself.

Plan Features:

- Benefits are paid directly to you unless otherwise assigned.
- Premiums are paid through convenient payroll deduction.
- This is a non-occupational plan providing coverage for disabilities occurring off the job.

BENEFITS

Benefit Percentage	60% of salary
Weekly Maximum Benefit	\$750
Minimum Benefit	\$25
Accident/Sickness Elimination Period (EP)	0/7 days
Maximum Benefit Duration	13 weeks

WAIVER OF PREMIUM

Premium payments are not required for your coverage beginning the first of the month following a specified period of days of disability, and thereafter while you are receiving short term disability payments. See certificate for details.

Coverage underwritten by Continental American Insurance Company (CAIC)
A proud member of the Aflac family of insurers.

If this coverage will replace any existing individual policy, please be aware that it may be in your best interest to maintain your individual guaranteed renewable policy.

EXCLUSIONS AND LIMITATIONS

Disabilities Not Covered under the Plan

The plan does not cover any disabilities caused by, contributed to by, or resulting from your:

- Commission or attempt to commit a felony;
- Intentionally self-inflicted harm;
- Attempted suicide, regardless of mental capacity;
- Subject to the applicable law in the state where the policy is delivered or issued for delivery, operating a motor vehicle while under the influence of alcohol as evidenced by a blood alcohol level in excess of the state legal intoxication limit as defined by the state law where the disability occurs (In Connecticut, D.C., Delaware and Florida, operating a motor vehicle while under the influence of alcohol as evidenced by a blood alcohol level in excess of the state legal intoxication limit.);
- Subject to the applicable law in the state where the policy is delivered or issued for delivery, being under the influence of any narcotic, unless the narcotic is being taken on the advice of a doctor (In Connecticut, voluntary use of any controlled substance, as defined in Title II of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as now or hereafter amended, unless the controlled substance is being taken as prescribed by your doctor (In D.C., Delaware and Florida, being under the influence of any narcotic, unless the narcotic is being taken on the advice of a doctor.);
- Voluntary intake of poison, drugs or fumes, unless a direct result of an occupational accident (In Connecticut, this exclusion is not applicable.);
- Participation in a war, declared or undeclared, or any act of war; an act of war is military activity by one or more national governments and does not include terrorist acts, other random acts of violence not perpetrated by you, or civil war or community faction (In Connecticut, D.C., Delaware and Florida, participation in a war, declared or undeclared, or any act of war.);
- Active duty in the military or the National Guard or similar government organizations;
- Active participation in a riot, insurrection or terrorist activity;
- Engaging in any illegal occupation, work, or employment (In Connecticut, engaging in any felonious occupation, work or employment.);
- Cosmetic surgery except when required for your appropriate care as a result of your injury or sickness; cosmetic surgery shall not include reconstructive surgery when the surgery is incidental to or follows surgery resulting from trauma, infection or other diseases of the involved part and reconstructive surgery because of congenital disease or anomaly resulting in a functional defect (In Connecticut, D.C., Delaware and Florida, elective or cosmetic surgery except when required for your appropriate care as a result

of your injury or sickness.);

- Traveling in any aircraft other than as a fare-paying passenger on a scheduled or charter flight operated by a scheduled airline;
- Traveling in any aircraft or device operated by or under authority of military or any aircraft being used for experimental purposes or to travel beyond the earth's atmosphere;
- Occupational Sickness or Injury;
- In D.C. and Delaware, commission of a crime for which you have been convicted.

We will not pay a benefit for any period of disability during which you are legally incarcerated in a penal or correctional institution. (In Connecticut, D.C. and Delaware, we will not pay a benefit for any period of disability during which you are incarcerated.)

PRE-EXISTING CONDITION LIMITATION

Benefits will not be paid if your disability begins in the first 12 months following the effective date of coverage and your disability is caused by, contributed to by, or the result of a Pre-existing Condition.

Pre-Existing Condition means any condition for which you have done (In D.C. and Delaware ordinarily prudent person language does not apply.), or for which an ordinarily prudent person would ordinarily have done, any of the following at any time during the 3 months just prior to your effective date of coverage, whether or not that condition is diagnosed at all or is misdiagnosed (In Delaware, diagnosed or misdiagnosed language does not apply.):

- Received medical treatment, advice, consultation, or diagnostic testing; or
- Taken or were prescribed drugs or medicine.

In Florida, routine follow-up care to determine the recurrence of breast cancer does not constitute medical advice, diagnosis, care or treatment unless evidence of breast cancer is found during or as a result of the follow-up care.

This plan does not replace the statutory disability plan in any state. Employees in states with statutory short term disability plans are covered by those statutory plans, and any short term disability benefit payable will be offset by those statutory benefits.

Employees must be actively at work on the effective date of the plan for coverage to be effective. For employees not actively at work on the effective date, coverage will be effective when the employee returns to active employment.

DEFINITIONS

Definition of Disability

You are considered disabled when we review your claim and determine that, due to your sickness or injury:

- You are unable to perform all the material and substantial duties of your regular occupation; and
- You have a specified percentage of loss in your weekly earnings, as outlined in your certificate.

The loss of a professional or an occupational license or certification does not, in itself, constitute disability.

Recurrent Disability means a disability which is:

Caused by a worsening in your condition; and

Due to the same cause(s) as your prior disability for which we made a payment.

If you have a recurrent disability, and after your prior disability ended, you returned to work for your employer for a specified period of time as outlined in your certificate, we will treat your disability as part of your prior claim and you do not have to complete another elimination period.

Your disability will be treated as a new claim if your current disability:

Is unrelated to your prior disability; or after your prior disability ended, you returned to work for your employer for more than the specified number of consecutive days as outlined in your certificate. The new claim will be subject to all of the provisions of the policy and you will be required to satisfy a new elimination period.

Elimination Period means the period of continuous disability you must satisfy before you are eligible to receive benefits under the plan.

Sickness means illness, disease or disability resulting from complications due to pregnancy. In Connecticut, Delaware and Florida, sickness means illness or disease. Disability resulting from the sickness must begin while you are covered under the plan.

When Your Coverage Ends

Your coverage under the plan ends on the earliest of:

- The date the policy is canceled;
- The date you are no longer in an eligible class;
- The date your eligible class is no longer covered;
- The end of the period for which you paid premiums, if you stop making a required premium contribution;
- The end of the policyholder's grace period if the policyholder does not remit premium to us by the end of such period; or
- The last day you are in active employment except as provided under a covered leave of absence.

Benefits, terms, and conditions may vary by state.

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Continental American Insurance Company • Columbia, South Carolina

The certificate to which this sales material pertains may be written only in English; the certificate prevails if interpretation of this material varies.

This brochure is a brief description of coverage and is not a contract. Read your certificate carefully for exact terms and conditions. You're welcome to request a full copy of the plan certificate through your employer or by reaching out to our Customer Service Center. This brochure is subject to the terms, conditions, and limitations of Policy Form Series C51000.