United of Omaha Life Insurance Company

A MUTUAL of OMAHA COMPANY

GROUP VOLUNTARY SHORT-TERM DISABILITY CERTIFICATE SUMMARY



This summary describes some of the terms and conditions of the Policy. For a complete description of the terms and conditions of the Policy, refer to the appropriate section of the Certificate, available from the Policyholder. A person is not necessarily entitled to insurance because he or she received this summary. A person is only entitled to insurance if he or she is eligible in accordance with the terms of the Policy. This summary was published on October 10, 2022.

POLICY INFORMATION

Policyholder:	California Nurses Association
Policy Effective Date:	April 1, 2009
Policy Number:	GUC-ACBI
Group Number:	G000ACBI
Classification:	All Eligible California Nurses Association Employees
	Participating in the Benefit Trust
Minimum Work Hours Required:	20 hours per week
Eligibility Present Waiting Period:	none
Eligibility Future Waiting Period:	30 days
When Insurance Begins:	the first day of the month that coincides with or follows the
C	day the Employee becomes eligible. Additional eligibility
	conditions apply as described in the Certificate.
Elimination Period:	
Injury:	30 calendar days
Sickness:	30 calendar days

BENEFITS

Maximum Weekly Benefit:\$350Maximum Benefit Period:22 weeksSurvivor Benefit:IncludedVocational Rehabilitation Benefit:5%

EXCLUSION

Pre-existing Condition Exclusion: 3/6