

Short Term Disability Plan

The Short Term Disability Plan provides eligible Full-Time Employees with short term income protection for absences due to nonworking related disability. Coverage is automatic after satisfaction of the service requirement, so there is no enrollment requirement.

The following sections summarize the Short Term Disability Plan. Please review these provisions and retain this booklet for future reference. Key terms used in this text are specifically defined at the back of this section.

Description of Plan

The Short Term Disability Plan is administered by Life Insurance Company of North America (Cigna). Cigna will provide coverage for each Employee who has satisfied or satisfies in the future the eligibility provisions of the Short Term Disability Plan. For eligibility information, please see [Plan Overview](#).

NOTE:

The following Short Term Disability Plan Description applies to all Lowe's full-time, regular Employees. Please contact the Lowe's HR Shared Services Department at 1-888-474-6365 for more information. Employees at work locations in New York and Hawaii should file their claim for benefits through Cigna, and Cigna will handle your State's disability benefit filing and coordinate the offset from your Short Term Disability Plan benefit. For Employees at work locations in Hawaii, please be sure to complete the TDI-45 paperwork. Employees at work locations in California, New Jersey and Rhode Island should file for disability benefits directly with their respective States and Cigna will coordinate the benefit offset from your Short Term Disability Plan benefit. Please note: Cigna may offset an estimate of the benefits you are presumed to be receiving from the State, so it is essential that you provide the appropriate documentation in a timely manner.

To contact the Lowe's Disability Notification Team at Cigna to file your claim, call toll-free: 1-855-648-7970. For general questions, contact the Lowe's Disability Claim Team at Cigna toll-free at: 1-800-238-2125 x 1013379.

Benefit Cost

Lowe's pays the full cost of the Short Term Disability Plan for regular Full-Time Employees. There is no cost to the Employee.

The Benefit

The amount of the Short Term Disability Plan (STD) benefit is:

- For regular, full time Hourly Employees, 60% of your pre-disability Weekly Earnings to a maximum benefit of \$4,615 per week, less other income benefits; or
- For regular, full time Salaried Employees, 100% of your pre-disability Weekly Earnings.

Hourly Employees will begin receiving benefits under the Short Term Disability Plan after you have satisfied the elimination period. The elimination period is a waiting period that begins on the first day of your disability and continues until the later of:

- The 15th day of continuous absence; or
- The first day after any sick pay available to the Employee has been exhausted. Employees on medical leave will retain up to 48 accrued sick hours for use upon returning from leave.

STD plan benefits for Salaried Employees are payable from the 1st day of sickness or injury for absences exceeding 3 consecutive days, after any sick pay available to the Employee has been exhausted. Salaried Employees on medical leave will retain up to 48 accrued sick hours for use upon returning from leave.

Hourly STD Plan benefits are payable for up to 11 weeks. If you have more than two weeks of sick pay, any sick pay beyond the two weeks will reduce your STD benefit period maximum of 11 weeks. Salaried STD plan benefits are payable for up to 13 weeks. In no case will combined sick pay and STD benefits exceed 13 weeks from the start of the absence.

Preexisting Condition

Preexisting condition means a condition resulting from an Injury or Sickness for which you received a diagnosis or treatment within three months prior to your effective date of coverage.

The Short Term Disability Plan Option will not cover any disability that is caused or contributed to by, a preexisting condition, and that begins in the first 12 months immediately after your effective date of coverage.

For Salaried Employees the Preexisting Condition only applies to benefits payable beyond 14 days.

Former Part-Time Employees enrolled in the Allstate Voluntary STD plan will receive credit for service as a Part-Time Employee.

The Pre-existing Condition Limitation does not apply to a full-time Employee previously insured under the Lowe's Short Term Disability Plan immediately before becoming eligible under this plan and who satisfied the Pre-Existing Condition Limitation under that plan. Employees who moved from Hourly to Salaried and were previously covered under the Lowe's Short Term Disability plan will receive credit toward the Pre-existing limitation period.

If a Salaried employee did not fully satisfy the Pre-Existing Condition Limitation prior to the date he or she became eligible under this Plan, credit will be given for any time that was satisfied.

The Pre-Existing Condition Limitation does not apply to pregnancy claims.

Other Income Benefits

The STD benefit will be reduced by other income benefits received. Other income benefits include earnings from any form of employment including severance, unemployment benefits, retirement benefits, Social Security benefits for you and your family (except if Social Security retirement benefits began on or after Social Security Normal Retirement age and you were already receiving Social Security Benefits at the time of Disability), and any other government program benefits.

Definition of Disability

If, as a result of a non-occupational Sickness or Injury, you are unable to perform the material and substantial duties of your own job on a full-time or part-time basis, you are considered disabled or partially disabled.

With respect to partial disability, you are considered partially disabled if you can perform one or more, but not all, of the duties for your job or all the duties of another job, and are earning between 20% to 80% of your pre-disability earnings.

Partial Disability Benefit Payment

Return to Work Incentive

You may work for wage or profit while Disabled. In any week in which you work and a Disability Benefit is payable, the Return to Work Incentive Benefit Calculation applies.

During any week you have Disability Earnings, your benefits will be calculated as follows:

1. Add your Gross Disability Benefit and Disability Earnings.
2. Compare the sum from 1. to your Covered Earnings.
3. If the sum from 1. exceeds 100% of your Covered Earnings, then subtract the Covered Earnings from the sum in 1.
4. Your Gross Disability Benefit will be reduced by the difference from 3. as well as by Other Income Benefits.
5. If the sum from 1. does not exceed 100% of your Covered Earnings, your Gross Disability Benefit will be reduced by Other Income Benefits.

No Disability Benefits will be paid, and insurance will end if we determine you are able to work under a modified work arrangement and you refuse to do so without Good Cause.

Proof of Disability

When Cigna receives proof that you are disabled due to an injury or sickness that requires the regular attendance of a physician, Cigna will pay the weekly benefit. The benefit will be paid for the period of disability if you provide proof of continued disability, receive regular care from a physician, and receive appropriate available treatment. The proof must be in a format satisfactory to Cigna and obtained and provided at your expense.

"Appropriate available treatment" means care or services that are acknowledged by physicians to cure, correct, limit, treat, or manage the disabling condition, and are accessible within your geographical region. The services must be provided by a physician who is licensed and qualified in a discipline suitable to treat the disabling injury or sickness. A physician does not include any family member or domestic partner.

Successive Periods of Disability

A successive period of disability will be treated as part of the prior disability if, after receiving disability benefits under this policy, you return to your own job for less than two continuous weeks, and then become disabled again for the same or a related disability. To qualify for the successive periods of disability benefit, you must experience more than a 20% loss of monthly earnings.

If you return to your own job for two continuous weeks or more, the successive period of disability will be treated as a new period of disability. You must complete another elimination period to be eligible for STD benefits. If you become eligible for any other group short term disability coverage, this provision will cease to apply.

General Exclusions

The Short Term Disability Plan Option will not pay for any disability due to:

- An occupational injury or sickness for which you receive or are entitled to receive benefits under workers' compensation law;
- War, declared or undeclared, or any act of war;
- Intentionally self-inflicted injuries, while sane or insane;
- Active participation in a riot;
- The committing of a felony;
- Cosmetic surgery, unless such surgery is in connection with an injury or sickness; or
- A gender change, including, but not limited to, any operation, drug therapy, or any other procedure related to a gender change.
- An injury or sickness that is work related; or
- The revocation, restriction or non-renewal of an Employee's license, permit or certification necessary to perform the duties of his or her occupation, unless due solely to injury or sickness otherwise covered by the Policy.

When Benefits End

The weekly benefit will end on the earliest of the following:

- The date you earn from any occupation, more than the percentage of Covered Earnings set forth in the definition of Disability;
- The date we determine you are not Disabled;

- The end of the Maximum Benefit Period;
- The date you die;
- The date you refuse, without Good Cause, to fully cooperate in all required phases of the Rehabilitation Plan and assessment;
- The date you are no longer receiving Appropriate Care;

The date you fail to cooperate with us in the administration of the claim. Such cooperation includes, but is not limited to, providing any information or documents needed to determine whether benefits are payable or the actual benefit amount due. In addition, Short Term Disability coverage will not continue beyond the end of the six-month period in which a leave of absence begins, or beyond 12 weeks for a temporary layoff due to lack of work.

Portability

Your coverage under the Short Term Disability Plan will end at the termination of your employment with Lowes, including retirement, or loss of eligibility due to your change in employment classification from full-time regular status.

Coverage under the Short Term Disability Plan is not portable.

Filing Claims

You should submit your claim for Short Term Disability benefits as soon as you think that your absence from work may extend beyond 14 days for Hourly Employees and more than 3 days for Salaried/Exempt Employees. You may also submit your claim two weeks in advance of a planned disability absence such as childbirth or prescheduled surgery. You should also notify your HR Manager that you will be missing work.

You can submit your disability claim through a toll-free number at 1-855-648-7970, or by submitting it online at mycigna.com website, accessible via the employee portal at www.myloweslife.com (My Lowe's Life > My Work/Life > Work Life Related Quick Links > STD/LTD/FMLA Leave Reporting > Submit Claim, Leave, or EOI > I Agree to These Terms of Use > Claim or Leave Submission).

Please note that Cigna requires your doctor to provide information about your medical condition. If Cigna cannot obtain this information, your Short Term Disability benefits may be denied. You are responsible for signing an authorization for your physicians to release medical information to Cigna and for making sure your physicians provide Cigna with proof of your disability. If medical documentation is not received within 14 business days from the receipt of your claim, processing of your claim will be suspended.

You will receive a claim number when you report your claim to 1-855-648-7970 (a toll-free number). Have a pen and paper ready to record this number. In order to report your claim, you will need:

- Your name and Social Security number;
- Your complete address and phone number;
- Your last day worked and first day absent from work because of your injury or sickness ; and
- Your physician's name and phone number and the reason for your disability.

You will be asked additional questions about yourself and your physician or medical care provider and your medical condition.

After your claim is submitted, a claim manager from Cigna will be assigned to your claim. The claim manager will be your primary contact throughout the duration of your claim, and can be reached by calling 1-800-238-2125 x 1013379.

You can also check the status of a claim at the mycigna.com web site, accessible via the employee portal at www.myloweslife.com (My Lowe's Life > My Work/Life > Work Life Related Quick Links > STD/LTD/FMLA Leave Reporting > Check status of a Claim or Leave Request, or you can download the Cigna app.

If there is a change in your medical condition that would allow you to return to work earlier than expected, contact your HR Manager and your Cigna case manager.

If you develop additional medical complications and need to be out longer than expected, you will be required to provide objective medical information that supports your continued disability.

Definitions

Injury: Bodily impairment resulting directly from an accident and independently of all other causes.

Sickness: Illness, disease, or pregnancy or complications of pregnancy.

Weekly Earnings: For Hourly and Salaried Employees, the basic weekly rate of pay immediately prior to your disability, as verified by Lowe's. Normal base pay does not include overtime, bonuses, and incentive pay, or non-cash compensation.