Escambia County Voluntary Long-Term Disability Insurance

Only \$4-\$9 Per Month to Protect Your Income¹

Group plans are often the most reasonably priced option. Individual policies may be much more expensive. Also, the premium payments for this plan are conveniently deducted from your paycheck so there are no hassles with bills.

Option 1

- Covers 40% of your salary²
- 180-Consecutive Calendar Day Elimination Period³
- .00166 cents per salary dollar
- If you make \$40,000 per year, the premium for your coverage is only \$5.53 per month.
- If you make \$30,000 per year, the premium for your coverage is only \$4.15 per month.

Option 2

- Covers 50% of your salary²
- 180-Consecutive Calendar Day Elimination Period³
- .00209 cents per salary dollar
- If you make \$40,000 per year, the premium for your coverage is only \$6.97 per month.
- If you make \$30,000 per year, the premium for your coverage is only \$5.23 per month.

Option 3

- Covers 50% of your salary²
- 90-Consecutive Calendar Day Elimination Period³
- .00247 cents per salary dollar
- If you make \$40,000 per year, the premium for your coverage is only \$8.23 per month.
- If you make \$30,000 per year, the premium for your coverage is only \$6.18 per month.

Option 4

- Covers 60% of your salary²
- 180-Consecutive Calendar Day Elimination Period³
- .00280 cents per salary dollar
- If you make \$40,000 per year, the premium for your coverage is only \$9.33 per month.
- If you make \$30,000 per year, the premium for your coverage is only \$7.00 per month.

How Do I Calculate My Rate?

Monthly Salary (max monthly salary is \$5,000)

X

Rate = Monthly
Rate

a**ry** (.00XXX) ^I monthly ary is

Enroll now with NO MEDICAL QUESTIONS OR TESTS

Purchasing individual Disability Insurance often requires that you fill out a Medical Questionnaire or submit to medical tests. If you apply for this coverage within 31 days of your eligibility date, no medical information is required - your coverage is guaranteed. It is usually best to purchase all the coverage you need during this 31 day window. If you choose to elect a different option that results in either a lower Elimination Period³ or a higher benefit percentage at some point in the future, you will be required to fill out a Medical Questionnaire and coverage may be denied based on your answers.

Disability Income May Be Tax-Free

If you pay for this insurance with after-tax dollars, your disability benefits will not be subject to income tax. (Please note: The premium payment must be paid with after-tax dollars in order for the benefit to be non-taxable. Please see your tax adviser for specific advice.)

What about Maternity Coverage?

If you become pregnant while covered, this plan will protect you if you experience unexpected complications that prevent you from doing your job. Pregnancy, child-birth and related medical conditions are covered the same as any illness.

How Is This Plan Different than My Short-Term Disability Insurance or Sick-Leave?

Short-Term Disability Insurance and sick-leave plans pay for a specified period of time – typically 6-25 weeks. With Long-Term Disability Insurance, you will receive benefits for 24 months if you are unable to work in your current position and you will receive benefits all the way to age 65 or later (depending upon the age at when you became disabled) if you are unable to work in any occupation.

What If I Take a Leave of Absence from Work?

Your Disability Insurance will remain in effect for an employerapproved leave of absence up to one year.

¹Based on annual salaries between \$30,000 and \$40,000 per year.

²For covered injuries or sicknesses.

³Elimination Period is the time period between the onset of the disability and the time when benefits payments begin.

Exclusions and Limitations

- 1. As with most Disability Insurance plans, benefits are reduced by some types of other income you may receive during a disability, including Social Security or Florida State Retirement Disability benefits. The salary percentage is the amount of your eligible monthly income minus income you receive from other sources. However, this policy will pay a minimum of \$100 per month regardless of other income.
- 2. If you apply for this coverage within 31 days of your eligibility date, no medical information is required your coverage is guaranteed. If you choose to elect a different option that results in either a lower Elimination Period** or a higher benefit percentage at some point in the future, you will be required to fill out a Medical Questionnaire and coverage may be denied based on your answers.
- 3. Disabilities related to mental or emotional illness are limited to 2 years of coverage. After the 2-year period following the Elimination Period, benefit payments are made only if you are still totally disabled by the mental or emotional illness, and you are confined as an inpatient in a facility licensed to treat that illness.
- 4. The maximum monthly benefit under this plan is \$5,000.
- 5. This plan is effective the first month following 30 days from your date of hire.
- 6. During the first two years of disability benefits, the definition of disability is based on your inability to work in your own occupation. After 2 years, the definition of disability is based on your inability to work in any occupation for which you are qualified by education, training or experience.
- 7. This plan will not cover any disability related to a preexisting condition that begins in the first 12 months after your effective date. A pre-existing condition means a condition where you have received medical treatment, consultation, and/or services including diagnostic

- measures, or had taken prescribed drugs or medicines in the 3 months prior to your effective date.
- 8. Benefits are payable up to age 65. However, if the covered disability begins after age 61, the duration of benefits is shortened. See the chart below for details.

Age at Disablement	Duration of Benefits
61 or younger	To age 65
62	3 ¹ /2 years
63	3 years
64	2 ¹ /2 years
65	2 years
66	1 ³ /4 years
67	1 ¹ /2 years
68	1 ¹ /4 years
69 or older	1 year

- 9. The policy does not cover any total disability:
 - due to war, declared or undeclared, or any act of war:
 - due to any act of international armed conflict or conflict involving the armed forces of any country;
 - while you are in the armed forces of any country or international authority;
 - due to your attempted suicide while sane or insane;
 - as a result of your intentionally self-inflicted injuries;
 - as a result of your committing of or attempting to commit a felony;
 - as a result of your participation in a riot;
 - as a result of your engaging in an illegal occupation.

Certificate form number LTD-3

Underwritten by:



PO Box 5008, Madison, WI 53705

Administered by:



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