

# Employer-paid and Employee Optional Additional Short Term Disability Insurance



## How does it work?

If a covered illness or injury keeps you from working, this Short Term Disability Insurance replaces part of your income while you recover.

Your employer is providing you a base amount of coverage. You also have the opportunity to purchase additional coverage to be sure your financial needs are met.

You're generally considered disabled if you're unable to do important parts of your job — and your income suffers as a result. You can use the money however you choose. It can help you pay for your rent or mortgage, groceries, out-of-pocket medical expenses and more.

## Why is this coverage so valuable?

If you don't sign up now but decide to apply later, you may have to answer health questions.

## What else is included?

### Cesarean section benefit

If you have a Cesarean section, you will be considered disabled for a minimum period of eight weeks unless you return to work before the end of the time.



### COVERAGE AMOUNTS

#### Employer-paid coverage

Your employer is providing a benefit of 75% of your weekly earnings to a maximum of \$3,000.

#### Employee optional additional coverage

You can elect to purchase a benefit of 90% of your weekly earnings to a maximum of \$3,000.

The weekly benefit may be reduced or offset by other sources of income. The IRS may require you to pay taxes on certain benefit payments. See your tax advisor for details.



### ELIMINATION PERIOD

This is the number of days that must pass after a covered injury or illness before you can begin to receive benefits.

#### Employer-paid coverage:

Injury and Illness - 7 days

#### Employee optional additional coverage:

Injury and Illness - 7 days



### BENEFIT DURATION

This is the maximum length of time you can receive benefits while you're disabled.

#### Employer-paid coverage:

You can receive benefits for 25 weeks.

#### Employee optional additional coverage:

You can receive benefits for 25 weeks.

## Exclusions and limitations

### Active employee

You are eligible for coverage if you are an active employee in the United States working a minimum of 30 hours per week. You are considered in active employment, if on the day you apply for coverage, you are being paid regularly by your employer for the required minimum hours each week and you are performing the material and substantial duties of your regular occupation.

### Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

### Definition of disability

You are considered totally disabled when, as a result of sickness or injury, you are unable to perform with reasonable continuity the substantial and material acts necessary to pursue your usual occupation in the usual and customary way.

You must be under the regular care of a physician in order to be considered disabled.

The loss of a professional or occupational license or certification does not, in itself, constitute disability. 'Substantial and material acts' means the important tasks, functions and operations generally required by employers from those engaged in your usual occupation that cannot be reasonably omitted or modified.

### Pre-existing conditions

You have an excluded pre-existing condition if:

- You received medical treatment, care, or services for a diagnosed condition, or took prescribed medication for that diagnosed condition, in the 3 months immediately prior to your effective date of coverage; and
- The disability caused or substantially contributed to by the condition begins in the first 12 months after your effective date of coverage.

### Deductible sources of income

Your disability benefit may be reduced by deductible sources of income and any earnings you have while disabled. Deductible sources of income may include such items as disability income or other amounts you receive or are entitled to receive under workers' compensation or similar occupational benefit laws; state compulsory benefit laws; automobile liability and no fault insurance; legal judgments and settlements; certain retirement plans; salary continuation or sick leave plans, if applicable; other group or association disability programs or insurance; and amounts you or your family receive or are entitled to receive from Social Security or similar governmental programs.

Here's an example of how the benefit may be reduced by deductible sources of income:

Weekly pre-disability earnings: \$1,000  
Short term disability benefit percentage: x 60%  
Unreduced maximum benefit: \$600  
Less Social Security disability benefit per week: -\$300  
Less state disability income benefit per week: -\$100  
Weekly short term disability benefit: \$200

### Exclusions and limitations

Your plan does not cover any disabilities caused by or resulting from:

- Intentionally self-inflicted injuries;
- Active participation in a riot;
- War, declared or undeclared or any act of war;
- Commission of a felony for which you have been convicted;
- Any occupational injury or sickness (this will not apply to a partner or sole proprietor who cannot be covered by law under workers' compensation or any similar law);

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

### Termination of coverage

Your coverage under the policy ends on the earliest of the following:

- The date the policy or plan is cancelled
- The date you no longer are in an eligible group
- The date your eligible group is no longer covered
- The last day of the period for which you made any required contributions
- The last day you are in active employment except as provided under the covered layoff or leave of absence provision.

Unum will provide coverage for a payable claim that occurs while you are covered under the policy or plan.

This information is not intended to be a complete description of the insurance coverage available.

The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C-FP-1 et al., or contact your Unum representative.

Underwritten by: Unum Life Insurance Company of America, Portland, Maine

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