## **Plan Highlights**

## Voluntary Group Short Term Disability Insurance



#### **ITC Federal**

#### **COVERAGE**

Disability income protection insurance provides a benefit for short term disability resulting from a covered injury or sickness. Benefits begin at the end of the elimination period and continue while you are disabled up to the maximum benefit duration.

#### **ELIGIBILITY**

All Active Full-Time SCA Eligible Employees working 30 hours or more per week, except for any person working on a temporary or seasonal basis.

#### **BENEFIT AMOUNT**

The benefit amount is equal to 60% of your weekly covered earnings, from a minimum of \$25, to a maximum benefit of \$1,000 per week.

#### **DAY BENEFITS BEGIN**

Injury (accident) and Sickness (illness): benefits begin on the 8th consecutive day of disability.

#### **MAXIMUM BENEFIT DURATION**

Benefits for one period of disability will be paid up to a maximum of 12 weeks.

#### **CONTRIBUTION REQUIREMENTS**

Coverage is 100% Employee Paid.

#### RATES

See attached Rate Sheet

#### **FEATURES**

- Maternity covered as any other illness
- Non-occupational coverage
- Partial Disability
- Zero Day Residual: You can accumulate time toward the elimination period even while partially disabled
- Transfer of Coverage provision
- ► FMLA Continuation
- Military Services Leave of Absence Continuation

#### **VALUE-ADDED SERVICES**

► Telephonic Claim Intake Included

#### **LIMITATIONS**

- ▶ Pre-Existing Condition Limitation: 3/12
- Offsets: Your benefit may be reduced by other income sources such as, but not limited to, Social Security, Workers Compensation, State Disability Plans.



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This Plan Highlight is not a complete description of the insurance coverage. Insurance is provided under group policy form LRS-6451, et al. This is not a binding contract. Should there be a difference between this Plan Highlight and the contract, the contract will govern. The Certificate of Coverage will be made available to you that describes the benefits in greater detail; however a benefit will not be paid if caused or contributed by an exclusion listed in the Certificate.

Reliance Standard Life Insurance Company is licensed in all states (except New York), the District of Columbia, Puerto Rico, the U.S. Virgin Islands and Guam. In New York, insurance products and services are provided through First Reliance Standard Life Insurance Company, Home Office: New York, NY. Product features and availability may vary by state.

## **Plan Highlights**

# Voluntary Group Short Term Disability Insurance



### **Information Technology Coalition (dba ITC Federal)**

The benefit amount is equal to 60% of your weekly covered earnings, to a maximum benefit of \$1,000 per week.

To calculate your monthly payroll deduction, use the formula indicated below:

			Rate per \$10 benefit
1.	Enter your <b>Weekly Earnings</b> , not to exceed <b>\$1,000</b> .	1. \$	\$0.46
2.	Multiply the amount on Line 1 by 0.60.	2. \$	
3.	Multiply the amount on Line 2 by \$0.46.	3. \$	
4.	<b>Divide</b> the amount on Line 3 by 10 and enter the amount on Line 4 to get your <b>monthly payroll deduction</b> .	4. \$	

## Example Calculation:

Enter your Weekly Earnings, not to exceed \$1,000.
 Multiply the amount on Line 1 by 0.60.
 \$ 240 (maximum weekly benefit)
 Multiply the amount on Line 2 by \$0.46.
 \$ 110.40
 Divide the amount on Line 3 by 10 and enter the amount on Line 4 to get your monthly payroll deduction.
 \$ 11.04 (monthly payroll deduction)

