# **Voluntary Benefits Options**

# and

# **Enrollment Guidelines**

# **Open Enrollment**

May 1, 2024 – May 27, 2024

**Effective Date July 1, 2024** 

Reliance Standard Life Insurance Voluntary Benefits Enrollment Call Center

(855) 836-0792

www.ForesterBenefits.com/bwsd







# Welcome to your Voluntary Benefits!

Welcome to your 2024 plan year Benefits Guide. This guide provides a quick and general overview of the benefits program and helps to remove confusion that sometimes surrounds employee benefits. The benefits program is structured to provide comprehensive coverage for you and your family. This benefit program provides a financial safety net in the event of an unexpected and potentially catastrophic event. Please refer to your Summaries of Benefits and Coverage for detailed information.

### Who can enroll in benefits?

To be eligible for benefits you must be an active employee who works at least 20 hours per week and have completed the eligibility waiting period. Your dependents may be eligible for some of the products listed in this guide.

### Eligible Dependents:

- Spouse
- · Child(ren) from birth up to age 26
- · Disabled dependents, regardless of age

## When does my coverage start?

<u>Open enrollment</u> elected coverage is effective July 1, 2024.

#### **Newly hired employees**

**Professional Staff** are eligible to enroll in benefits before the first of the month following date of hire.

**Service Staff** are eligible to enroll in benefits after the 91st following date of hire and are effective the first of the month following 91 days.

### How do I pay for my elections?

The part of the benefits cost that you are responsible for will be automatically deducted from your paycheck on a post-tax basis.



#### How do I enroll?

Call the Benefits Enrollment Call Center 855-836-0792 Monday - Friday 8:00 am - 5:00 pm EST

## What if I want to change my benefits?

The elections you make during your open enrollment will be effective for the full plan year unless you experience a life event. Examples of life events include, but are not limited to the following:

- · Marriage, divorce, or legal separation
- Birth or adoption of a child
- · Loss / Gain of other health coverage
- Change in work status / employment

It is your responsibility to notify the Human Resource Department within 30 days of the event to make changes to your benefits. You may need to provide documentation of the event, such as a marriage license or a birth certificate. Benefit changes must be consistent with the change in family status.

## What happens if I leave?

Some of your plans may be portable which means that if you leave employment you may continue your coverage. Employees are required to provide notification in writing within 30 days from coverage termination. Please contact the enrollment and support call center at (855) 836-0792 for information.

# **Voluntary Critical Illness Benefits** Especially designed for the employees of: Baldwin - Whitehall School District



100% of Insurance Amount

More and more Americans are outliving cancer, stroke, heart disease and other critical illnesses. It's a mixed blessing. On the one hand, it's another chance at life and family. On the other, surviving a critical illness brings with it considerable financial demands at a time when life is already demanding. As a hedge against the lost income, out-of-pocket medical expenses and all the "little things" that add up, there is Voluntary Critical Illness Insurance (VCI) from Reliance Standard.

You can choose between \$5,000 and \$50,000 of lump sum coverage. Spouse and Child coverage is also available. The spouse must be under age 70 to enroll, and will terminate at age 75. The spouse amount may not exceed 100% of the employee amount.

Children may be covered for up to 25% of employee amount.

\*Guaranteed Issue for Employee and Spouse is \$30,000 and all child coverage is guaranteed issue.

## Critical Illnesses fall into 1 of 3 Categories: Cancer, Cardiovascular, Other

• Cancer	100% of Insurance Amount
Carcinoma in SITU	25% of Insurance Amount
Heart Attack	100% of Insurance Amount
Stroke	100% of Insurance Amount
Kidney (Renal) Failure	100% of Insurance Amount
<ul> <li>**Coronary Artery Bypass Surgery</li> </ul>	25% of Insurance Amount
• **Major Organ Transplant	100% of Insurance Amount
<ul> <li>Enhanced Plan Includes: Paralysis, Coma, Brain Damage, Blindness, Ruptured Cerebral, Carotid or Aortic</li> </ul>	100% of Insurance Amount

### During this approved annual enrollment

Employees, and spouses under age 60, who currently have RSLI Critical Illness, but are not at the guaranteed issue limit, can increase to the full guaranteed issue amount with no health questions.

Late Applicants (Employees, and spouses under age 60, who were eligible at prior enrollments but did not enroll) can get the full guaranteed issue amount with no health guestions as long as they have not been previously declined coverage by RSLI in the past\*.

\*other restrictions may apply

- Lifetime Maximum Benefit per Category is 200% of the Amount of Insurance
- Subsequent Occurrence Benefit (Different Category) :100% of the Amount of Insurance. Occurrences must be separated by at least 3 months.
- Re-Occurrence Benefit (Same Category):100% of the Amount of Insurance. Occurrence must be separated by at least 12 months.
- Benefit Waiting Period None

Aneurysm

- Portability The plan is portable, and employees can continue their coverage if you leave employment. Employees are required to complete an application for portability within 30 days of your employment termination date.
- This is a brief summary of benefits. Please refer to the certificate of coverage for complete provisions, limitations and exclusions.

Age Reduction Schedule - This plan has an age reduction schedule of 50% of the original purchase amount at age 70.

# **Voluntary Critical Illness Benefits** Especially designed for the employees of: **Baldwin - Whitehall School District**



# **\$75 Health Screening Benefit**

To help prevent Critical Illness and for early detection of potential critical health problems, this plan includes annual Health Screening Benefit for screening tests during the year. For Employee, Spouse and Children if applicable. This benefit pays \$75 for one health screening benefit performed during a twelve month period for the Insured, his/her insured dependents. One health screening will be paid per twelve months for dependent children as a group.

### **Covered Health Screening Tests Include:**

- Breast ultrasound or mammography
- Blood test for lipids including LDL, HDL and triglycerides
- Chest x-ray
- Colonoscopy
- Pap smear
- PSA (blood test for prostate cancer)
- Stress test on a bicycle or treadmill

- Fasting blood glucose test
- Bone marrow testing
- CA 15-3 (blood test for breast cancer)
- CA 125 (blood test for ovarian cancer)
- Flexible sigmoidoscopy
- Hemoccult stool analysis
- Serum Protein Electrophoresis (blood test for myeloma)

			EE & S	Spouse	Premiun	ns for 19	Deduc	tions		
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
<b>o</b> < 30	1.26	2.53	3.79	5.05	6.32	7.58	8.84	10.11	11.37	12.63
<b>₹</b> 30-39	1.89	3.79	5.68	7.58	9.47	11.37	13.26	15.16	17.05	18.95
Nicotine 30-39 40-49	3.95	7.89	11.84	15.79	19.74	23.68	27.63	31.58	35.53	39.47
50-59 60-69	8.05	16.11	24.16	32.21	40.26	48.32	56.37	64.42	72.47	80.53
<b>z</b> 60-69	15.63	31.26	46.89	62.53	78.16	93.79	109.42	125.05	140.68	156.32
70+	28.89	57.79	86.68	115.58	144.47	173.37	202.26	231.16	260.05	288.95
Age	\$5,000	\$10,000	\$15,000	\$20,000	\$25,000	\$30,000	\$35,000	\$40,000	\$45,000	\$50,000
< 30	1.58	3.16	4.74	6.32	7.89	9.47	11.05	12.63	14.21	15.79
30-39	2.84	5.68	8.53	11.37	14.21	17.05	19.89	22.74	25.58	28.42
<b>थ</b> 40-49	7.26	14.53	21.79	29.05	36.32	43.58	50.84	58.11	65.37	72.63
<b>5</b> 50-59	15.32	30.63	45.95	61.26	76.58	91.89	107.21	122.53	137.84	153.16
<b>=</b> 60-69	25.11	50.21	75.32	100.42	125.53	150.63	175.74	200.84	225.95	251.05
70+	40.26	80.53	120.79	161.05	201.32	241.58	281.84	322.11	362.37	402.63
			Child	Rider Pre	miume ha	sed on 1	9 deducti	one		

### Child Rider Premiums based on 19 deductions

Age	\$1,250	\$2,500	\$3,750	\$5,000	\$6,250	\$7,500	\$8,750	\$10,000	\$11,250	\$12,500
0-26	0.20	0.39	0.59	0.79	0.99	1.18	1.38	1.58	1.78	1.97

One rate for all eligible dependent children in family, regardless of number.

Spouse premiums are based on the spouse's age on the coverage effective date.



# Voluntary Accident Benefits Especially designed for the employees of: Baldwin - Whitehall School District

Ambulance Transportation (Ground/Air)



No one likes to think about the possibility of an accident, but the likelihood—as well as the havoc it can cause for families—is very real. Whether it's an automobile accident, sports injury or the inevitable slip-and-fall, an accident can bring about not only lifestyle challenges but tangible economic ones as well.

Health insurance can offset many of the treatment costs, but there are "hidden" costs as well: time lost from work, satisfying deductibles, paying co-pays. And don't forget medications, convenient meals for the family and transportation to and from doctor visits. As a safety net against all the incremental burdens and expenses an accidental injury can cause, Reliance Standard offers Voluntary Accident Insurance (VAI).

If you experience a covered accident **off-the-job**. you will receive a tax-free cash benefit according to a benefits schedule. You may use this money however you wish—to pay for prescriptions or other out-of-pocket expenses, like crutches, that may not be covered by health insurance.

\$150 / \$750

Ambulance Transportation (Ground/Air)	\$150 / \$750
Emergency Treatment per visit	\$225
Diagnostic Exam per CT, MRI, PET, SPECT Scans	\$200
Initial Physician Office Visit	\$75
Initial Hospital Admission	\$1,000
Initial ICU Hospital Admission	\$1,500
Hospital Confinement (per day/365 days max)	\$300
ICU Confinement (per day/30 days max)	\$600
Rehabilitation Facility Confinement (per day/30 day max)	\$100
Follow-up Physician Office Visit	\$75
Transportation (if more than 100 miles from residence one way)	\$450
Lodging (per day, up to 30 days, if more than 100 miles from residence)	\$150
Fractures (non-surgical)	\$75 up to \$3,750
Fractures (surgical)	\$150 up to \$7,500
Chip fracture: 25% of non-surgical benefit	φ. σσ αρ το φ. ,σσσ
Multiple fractures: 100% of highest sustained fracture	
Dislocations (non-surgical)	\$150 up to \$2,400
Dislocations (surgical)	\$300 up to \$4,800
Dislocation's (surgical)	φοσο αρ το ψ <del>-</del> ,οσο
Dislocation (multiple): 100% of highest dislocation benefit	
	\$300
Blood/Plasma/Platelets	\$200 up to \$1,600
Burns (2nd degree)	
Burns (3rd degree)	\$1,600 up to \$12,800
Skin Graft (benefit payable for burns)	25% \$7.500
Coma	\$7,500 \$450
Concussion	\$150
Dental Injury (extraction/crown)	\$100 / \$300
Eye Injury (removal of foreign object/surgical repair)	\$150 / \$300
Medical Appliance	\$150
Prosthesis (one)	\$750
Prosthesis (two or more)	\$1,500
Physical Therapy( 6 visits)	\$35
Lacerations (no sutures required)	\$35
Lacerations (sutures required)	\$75 up to \$800
Paralysis (paraplegia or hemiplegia)	\$7,500
Paralysis (quadriplegia)	\$15,000
Exploratory Surgery (no repair)	\$150
Knee Cartilage (surgical repair)	\$450
Abdominal or Thoracic (surgical repair)	\$1,500
Ruptured Disc (surgical repair)	\$750
Tendon, Ligament or Rotator Cuff (one surgical repair)	\$450
Tendon, Ligament or Rotator Cuff (two or more surgical repair)	\$900
X-Rays	\$50
Chiropractic Services (6 sessions max)	\$50
Epidural Anesthesia Injections (2 max)	\$200
Organized Youth Sports Benefit	5%
Organized Touth Sports Deficilit	

# Voluntary Accident Benefits Especially designed for the employees of: Baldwin - Whitehall School District



## **GROUP ACCIDENTAL DEATH & DISMEMBERMENT HIGHLIGHTS**

Benefit Schedule:	Plan B
Employee Loss of Life	\$50,000
Spouse Loss of Life	\$25,000
Child(ren) Loss of Life (per child)	\$10,000
Loss of Life on a Common Carrier	100%
Loss of a Hand, Foot, Arm, Leg, Sight in one Eye, or Hearing in one Ear	50%
Loss of Finger, Thumb or Toe	\$500
Combination Loss of two or more - Finger, Thumb, or Toe	\$1,000
Catastrophic Loss of Speech	100%
Catastrophic Loss - Two or more losses except fingers, thumbs, or toes	100%
Wellness Health Screening	\$75

Available to the employee, and his/her spouse and children if applicable. The Wellness (Health Screening) Benefit pays the amount shown on the Plan Description for one (1) health screening test performed during a twelve (12) month period for each insured, up to a maximum of (4) benefits per family. Covered Health Screening Tests Include: ALT/AST (liver function test), biopsy for cancer, blood test for triglycerides, CA 15-3 (blood test for breast cancer), CA 126 (blood test for ovarian cancer, CEA (blood test for colon cancer, chest x-ray, colonoscopy, echocardiogram, electrocardiogram, fasting blood glucose test, flexible sigmoidoscopy, skin cancer screening, genetic tests, hemoccult stool analysis, hepatitis screening, mammography, pap test, PSA (blood test for prostate cancer), serum cholesterol test to determine level of HDS and LDL, serum proten electrophoresis, stress test, ultrasound screening (breast, abdominal aorta, of carotid arteries) or for cancer detection

# Premiums based on 19 deductions

Employee Only	\$8.75
Employee and Spouse	\$16.26
Employee and Children	\$19.29
Family	\$23.97

For insured age 65 and older, the benefit amount is subject to age reduction. Spouse Benefit will reduce in the same manner upon spouse's attainment of the reducing age.

Age % of available inforce at age 64 65-69 50% 70+. 25%

- Employee and Spouse must be under age 70 to apply.
- Portability The plan is portable, so employees can continue their coverage if you leave employment. Employees are required to complete an application for Portability within 30 days of your employment termination date.
- This is a brief summary of benefits. Please refer to the certificate of coverage for complete provisions, limitations and exclusions.



# Voluntary Hospital Indemnity Especially designed for the employees of: Baldwin - Whitehall School District



No one likes to think about the possibility of hospitalization, but the likelihood — as well as the stress it can cause for families — is very real. Whether caused by injury or illness, a hospitalization can bring about not only lifestyle challenges, but tangible economic ones as well.

Major medical insurance plans can offset some of the treatment expenses, but there are other costs as well: time lost from work, satisfying deductibles and co-insurance. And don't forget prescribed medications, transportation costs, and continuing to provide for a family. As a safety net against the expenses a hospitalization can cause, Reliance Standard offers Voluntary Hospital Indemnity (VHI) coverage. This benefit provides a range of fixed, tax-free, lump-sum daily cash benefits. These benefits are paid directly to you following a hospitalization that meets the criteria for benefit payment

## Hospital Room & Board

Room & Board Benefit per Day (180 Daily Benefits per Coverage Year)

\$100

#### **Hospital Admission**

One Daily Benefit per Coverage Year

\$500

# **FEATURES**

- Guaranteed issue; no medical questions
- No pre-existing conditions exclusions
- Mental & Nervous and Substance Abuse treated same as any other hospital admission
- No deductibles
- Coverage Offered on a Voluntary Basis
- Overlying Major Medical Plan NOT Required Note: The state of California requires its residents to be enrolled in an overlying major medical plan in order to enroll for Voluntary Hospital Indemnity.



- Wellness Care means medical examinations and procedures that are preventive in nature and not for the treatment of Injury or Sickness.
- Continuation of Coverage Under certain circumstances, the insured may continue their coverage for a set period of time. The insured must notify Reliance Standard in writing within 31 days of the terminating event.
- This is a brief summary of benefits. Please refer to the certificate of coverage for complete provisions, limitation and exclusions.

# Voluntary Hospital Indemnity Especially designed for the employees of: Baldwin - Whitehall School District



### **How Travel Assistance Services Work**

Using your travel emergency services is a cinch! Just contact On Call International directly at (603) 328-1966 anytime you need assistance while traveling. On Call's Global Response Center is open **24** hours a day, **365** days a year and can provide the following services through your group coverage with Reliance Standard.

The following is an outline of the On Call emergency travel assistance service program. For a complete description of all services and the program terms and limitations, please request a Description of Covered Services from your employer.

#### **Covered Services**

When traveling more than 100 miles from home or in a foreign country, On Call offers you and your dependents the following services:

# **Pre-Trip Assistance**

- Inoculation requirements information
- Passport/visa requirements
- Currency exchange rates
- ▶ Consulate/embassy referral
- ▶ Health hazard advisory
- Weather information

## Emergency Medical Transportation\*

- Emergency evacuation
- Medically necessary repatriation
- Visit by family member or friend
- ▶ Return of traveling companion
- Return of dependent children
- Return of vehicle
- Return of mortal remains

# **Emergency Personal Assistance Services**

- Urgent message relay
- Interpretation/translation services
- ▶ Emergency travel arrangements
- Recovery of lost or stolen luggage/personal possessions
- Legal assistance and/or bail bond

### Medical Assistance Services Include

Children

- Medical referrals for local physicians/dentists
- Medical case monitoring
- Prescription assistance and eyeglasses replacement
- Convalescence arrangements

# Premiums based on 19 deductions

Employee Only \$8.62
Employee & Spouse \$18.19
Employee & Children \$12.93
Employee, Spouse &

\$22.50

**24-Hour Travel Assistance** 

On Call International provided through Reliance Standard



In the U.S., toll free



(800) **456-3893**Worldwide, collect
(**603**) **328-1966** 





For emergency medical, legal and travel assistance information and referral service 24 hours a day, 365 days a year, call the numbers below. To place a collect call, dial the INTERNATIONAL COUNTRY CODE: followed by On Call's collect call number.

<sup>\*</sup> The services listed above are subject to a maximum combined single limit of \$250,000. Return of vehicle is subject to \$2,500 maximum

# **Voluntary Group Term Life**

# Especially designed for the employees & families of

# **Baldwin - Whitehall School District**



Life insurance provides your loved ones with a payment, based on the amount of your coverage, upon your death. By purchasing Reliance Standard Life Insurance through your employer, you can take advantage of affordable group rates. Your premium (the cost of the plan) will be determined by your age and the amount of coverage you choose. You will be eligible for coverage—up to a Guaranteed Issue amount—without answering medical questions. In addition, you will be able to purchase coverage for your eligible dependents.

## **Plan Highlights**

Employee Coverage: \$10,000 to \$500,000 in increments of \$10,000. Employee Guaranteed Issue: \$120,000 up to and including age 69. Spouse Coverage: \$10,000 to \$500,000 in increments of \$10,000. Spouse Guaranteed Issue: \$40,000 up to and including age 59.

# **Dependent Child Coverage:** 14 days to 6 months is \$1,000.

6 months up through age 19 or through age 25 if a full-time student is \$10,000.

#### During this approved annual enrollment

Employees up to and including age 69, and spouses up to and including age 59, who currently have RSLI VGTL, but are not at the guaranteed issue limit, can add \$10,000 with no health questions (up to the guaranteed issue limits).

Late Applicants (Employees up to and including age 69, and spouses up to and including age 59, who were eligible at prior enrollments but did not enroll) can get \$10,000 with no health questions as long as they have not been previously declined coverage by RSLI in the past\*.

\*other restrictions may apply

- Dependent benefit cannot exceed employee's benefit.
- Accelerated Death / Living Benefit is a benefit that enables the policyholder to receive cash advances against the death benefit in the case of being diagnosed with a terminal illness. This policies benefit is 50% to maximum of \$250,000.
- Waiver of premium if totally disabled before age 60 for a minimum of 6 months.
- Portability The plan is portable, so you can continue your coverage if you leave employment. You are required to complete an application for Portability within 31 days of your employment termination date.
- Conversion Group Term Life Insurance is intended to provide employees with coverage during their working years. This coverage terminates at retirement; however, the plan does have a conversion option. The coverage amount also reduces when you reach certain ages.
- This is a brief summary of benefits. Please refer to the certificate of coverage for complete provisions, limitations and exclusions.

7.5% of the amount in force at age 74

AGE REDUCTION SCHEDULE:	
Age	Amount of Coverage Reduces to:
75-79	60.0% of the amount in force at age 74
80-84	35.0% of the amount in force at age 74
85-89	27.5% of the amount in force at age 74
90-94	20.0% of the amount in force at age 74

95-99

# **Voluntary Group Term Life**

# Especially designed for the employees & families of





			Р	remium	s based	l on 19 (	deductio	ons		
Age	\$10,000	\$20,000	\$30,000	\$40,000	\$50,000	\$60,000	\$70,000	\$80,000	\$90,000	\$100,000
<25	\$0.25	\$0.51	\$0.76	\$1.01	\$1.26	\$1.52	\$1.77	\$2.02	\$2.27	\$2.53
25-29	\$0.25	\$0.51	\$0.76	\$1.01	\$1.26	\$1.52	\$1.77	\$2.02	\$2.27	\$2.53
30-34	\$0.25	\$0.51	\$0.76	\$1.01	\$1.26	\$1.52	\$1.77	\$2.02	\$2.27	\$2.53
35-39	\$0.38	\$0.76	\$1.14	\$1.52	\$1.89	\$2.27	\$2.65	\$3.03	\$3.41	\$3.79
40-44	\$0.63	\$1.26	\$1.89	\$2.53	\$3.16	\$3.79	\$4.42	\$5.05	\$5.68	\$6.32
45-49	\$1.14	\$2.27	\$3.41	\$4.55	\$5.68	\$6.82	\$7.96	\$9.09	\$10.23	\$11.37
50-54	\$1.89	\$3.79	\$5.68	\$7.58	\$9.47	\$11.37	\$13.26	\$15.16	\$17.05	\$18.95
55-59	\$3.16	\$6.32	\$9.47	\$12.63	\$15.79	\$18.95	\$22.11	\$25.26	\$28.42	\$31.58
60-64	\$3.79	\$7.58	\$11.37	\$15.16	\$18.95	\$22.74	\$26.53	\$30.32	\$34.11	\$37.89
65-69	\$5.49	\$10.99	\$16.48	\$21.98	\$27.47	\$32.97	\$38.46	\$43.96	\$49.45	\$54.95
70-74	\$10.23	\$20.46	\$30.69	\$40.93	\$51.16	\$61.39	\$71.62	\$81.85	\$92.08	\$102.32
75+	\$10.23	\$20.46	\$30.69	\$40.93	\$51.16	\$61.39	\$71.62	\$81.85	\$92.08	\$102.32
Age	\$110,000	\$120,000	\$130,000	\$140,000	\$150,000	\$160,000	\$170,000	\$180,000		\$200,000
<25	\$2.78	\$3.03	\$3.28	\$3.54	\$3.79	\$4.04	\$4.29	\$4.55	\$4.80	\$5.05
25-29	\$2.78	\$3.03	\$3.28	\$3.54	\$3.79	\$4.04	\$4.29	\$4.55	\$4.80	\$5.05
30-34	\$2.78	\$3.03	\$3.28	\$3.54	\$3.79	\$4.04	\$4.29	\$4.55	\$4.80	\$5.05
35-39	\$4.17	\$4.55	\$4.93	\$5.31	\$5.68	\$6.06	\$6.44	\$6.82	\$7.20	\$7.58
40-44	\$6.95	\$7.58	\$8.21	\$8.84	\$9.47	\$10.11	\$10.74	\$11.37	\$12.00	\$12.63
45-49	\$12.51	\$13.64	\$14.78	\$15.92	\$17.05	\$18.19	\$19.33	\$20.46	\$21.60	\$22.74
50-54	\$20.84	\$22.74	\$24.63	\$26.53	\$28.42	\$30.32	\$32.21	\$34.11	\$36.00	\$37.89
55-59	\$34.74	\$37.89	\$41.05	\$44.21	\$47.37	\$50.53	\$53.68	\$56.84	\$60.00	\$63.16
60-64	\$41.68	\$45.47	\$49.26	\$53.05	\$56.84	\$60.63	\$64.42	\$68.21	\$72.00	\$75.79
65-69	\$60.44	\$65.94	\$71.43	\$76.93	\$82.42	\$87.92	\$93.41	\$98.91	\$104.40	\$109.89
70-74	\$112.55	\$122.78	\$133.01	\$143.24	\$153.47	\$163.71	\$173.94	\$184.17	\$194.40	\$204.63
75+	\$112.55	\$122.78	\$133.01	\$143.24	\$153.47	\$163.71	\$173.94	\$184.17	\$194.40	\$204.63

Attained Age rate structure. Employee & Spouse rates are based on attained age on your group's policy anniversary date.

Dependent Children Life Insurance 19 deductions (for \$10,000) - \$1.70 (regardless of the number of children)



# Voluntary Short Term Disability Especially designed for the employees of: Baldwin - Whitehall School District



Even though no one likes to think about getting sick or sustaining an injury, almost everyone makes sure to get medical insurance - just incase. But medical insurance is only designed to cover all or most of the healthcare costs an illness or injury brings - what happens to your paycheck if you've exhausted your paid time off? If your paycheck were to stop for a period of time, how would it affect you and your family? If you never thought about the possibility, now is a good time.

Reliance Standard provides Short Term Disability that has a weekly cash tax-free benefit to help pay for everyday expenses (such as mortgage / rent, utilities, childcare, or groceries) if you are unable to work due to a covered disability.

Short Term Disability benefits are payable for an off-the-job accident, sickness or pregnancy. Pregnancy benefits for normal delivery up to 6 weeks; C-Section up to 8 weeks (minus the waiting period) – can be longer if medically necessary and under doctor's care.

Employees can choose from \$100 to **\$1,500** in increments of \$25, not to exceed **65%** of weekly earnings.

## **Plan Highlights**

Waiting Period	14 days for an injury / 14 days for a sickness
Maximum Percentage of Income Replaced	65%
Minimum Weekly Benefit Payable	\$100
Maximum Weekly Benefit Payable	\$1,500
Pre-Existing Limitation Condition	3/12
Maximum Benefit Period	11 weeks

- Benefits are subject to a pre-existing condition limitation. A pre-existing condition is any condition in which you have already received medical advice, treatment, or taken prescribed medications for during the **3 months** prior to your effective date of coverage.
- If you file a claim within the first **12 months** of coverage, the look back period of **3 months** from the effective date would apply for pre-existing conditions related to this claim. If your claim is due to a pre-existing condition, no benefits will be payable for that claim. However, after **12 months** of coverage, the pre-existing condition limitation no longer applies. Any claim for a new condition, or a condition you have not been treated for, during the **3 month** look back would be covered.
- Enrollment in the Short Term Disability plan is Guaranteed Issue, so you do not have to answer any health questions to be covered. Once your coverage goes into effect and if you have to be out of work for a covered short term disability, benefits begin after 14 days for an injury / 14 days for a sickness.
- Short Term Disability benefits are payable up to **11 weeks** or until you are released by your doctor to return to work. Partial disability benefit is available subject to certain limitations.
- Premium payments are waived once your benefits begin.
- Short Term Disability Benefits do not pay in addition to Paid Time Off.
- Definition of Disability: An employee is considered disabled when he/she is unable to perform his/her job, is not doing any work for pay and is under the regular care of a physician. This definition may vary by state.
- This is a brief summary of benefits. Please refer to the certificate of coverage for complete provisions, limitations and exclusions.

# Voluntary Short Term Disability Especially designed for the employees of: Baldwin - Whitehall School District



				Pr	emium	s based	d on 19	deduct	tions				
Weekly Benefits	\$100	\$125	\$150	\$175	\$200	\$225	\$250	\$275	\$300	\$325	\$350	\$375	\$400
<b>Age</b> < 40	2.91	3.63	4.36	5.08	5.81	6.54	7.26	7.99	8.72	9.44	10.17	10.89	11.62
40 - 49	3.66	4.58	5.49	6.41	7.33	8.24	9.16	10.07	10.99	11.91	12.82	13.74	14.65
50 - 59	4.17	5.21	6.25	7.29	8.34	9.38	10.42	11.46	12.51	13.55	14.59	15.63	16.67
60+	4.93	6.16	7.39	8.62	9.85	11.08	12.32	13.55	14.78	16.01	17.24	18.47	19.71
Min Income	\$153	\$192	\$230	\$269	\$307	\$346	\$384	\$423	\$461	\$500	\$538	\$576	\$615
Weekly Benefits	\$425	\$450	\$475	\$500	\$525	\$550	\$575	\$600	\$625	\$650	\$675	\$700	\$725
<b>Age</b> < 40	12.35	13.07	13.80	14.53	15.25	15.98	16.71	17.43	18.16	18.88	19.61	20.34	21.06
40 - 49	15.57	16.48	17.40	18.32	19.23	20.15	21.06	21.98	22.89	23.81	24.73	25.64	26.56
50 - 59	17.72	18.76	19.80	20.84	21.88	22.93	23.97	25.01	26.05	27.09	28.14	29.18	30.22
60+	20.94	22.17	23.40	24.63	25.86	27.09	28.33	29.56	30.79	32.02	33.25	34.48	35.72
Min Income	\$653	\$692	\$730	\$769	\$807	\$846	\$884	\$923	\$961	\$1,000	\$1,038	\$1,076	\$1,115
Weekly Benefits	\$750	\$800	\$850	\$900	\$950	\$1,000	\$1,050	\$1,100	\$1,150	\$1,200	\$1,250	\$1,300	\$1,500
<b>Age</b> < 40	21.79	23.24	24.69	26.15	27.60	29.05	30.51	31.96	33.41	34.86	36.32	37.77	43.58
40 - 49	27.47	29.31	31.14	32.97	34.80	36.63	38.46	40.29	42.13	43.96	45.79	47.62	54.95
50 - 59	31.26	33.35	35.43	37.52	39.60	41.68	43.77	45.85	47.94	50.02	52.11	54.19	62.53
60+	36.95	39.41	41.87	44.34	46.80	49.26	51.73	54.19	56.65	59.12	61.58	64.04	73.89
Min Income	\$1,153	\$1,230	\$1,307	\$1,384	\$1,461	\$1,538	\$1,615	\$1,692	\$1,769	\$1,846	\$1,923	\$2,000	\$2,307

# Voluntary Long Term Disability Especially designed for the employees of: Baldwin - Whitehall School District



One in three Americans will have a disability that will prevent them from working for 90 days or longer. One in seven can expect to be disabled five years or more. Financial hardships caused by the loss of income resulting from disability can be staggering to your family.

Reliance Standard's Long Term Disability provides you with a monthly **tax-free** benefit to replace a portion of your income once your claim is approved, which can help lessen the financial impact of a covered disability. This type of insurance can help you manage your expenses when you can't work due to a covered disability, so that you don't have to rely solely on your savings. Enrollment in this benefit is Guaranteed Issue, so you don't have to answer any health questions to be covered.

You can choose from \$300 up to \$6,000 in increments of \$100, not to exceed 65% of monthly earnings.

## **Plan Highlights**

Elimination Period	90 days
Maximum Percentage of Income Replaced	65%
Minimum Monthly Benefit Payable	\$300
Maximum Monthly Benefit Payable	\$6,000
Pre-Existing Limitation Condition	3/12
Maximum Benefit Period	Social Security Normal Retirement Age

- Long Term Disability benefits are payable up to **Social Security Normal Retirement Age** or until you are released by your doctor to return to work. If you are able to accept rehabilitative employment after receiving benefits, the plan can pay a partial disability benefit up to the plan maximum duration.
- Benefits are subject to a pre-existing condition limitation. A pre-existing condition is any condition in which you have already received medical advice, treatment, or taken prescribed medications for during the **3 months** prior to your effective date of coverage. If you file a claim within the first **12 months** of coverage, the look back period of **3 months** from the effective date would apply for pre-existing conditions related to this claim. If your claim is due to a pre-existing condition, no benefits will be payable for that claim. However, after **12 months** of coverage, the pre-existing condition limitation no longer applies. Any claim for a new condition, or a condition you have not been treated for, during the **3 month** look back would be covered.
- Definition of Disability: You are considered totally disabled when you are unable to perform the material duties of your regular occupation. This is a 24-month Own Occupation. After you are disabled for 24 months, the disability definition changes to Any Occupation. Therefore, after 24 months of disability, if you are considered totally disabled as the result of a sickness or injury, and you are unable to perform the material duties of any occupation normally performed in the national economy, benefits are continued.
- Premium payments are waived once your benefits begin.
- Long Term Disability plan includes a Survivor Benefit. This benefit pays a lump-sum payment equal to 3 months' benefit to your beneficiary should you die while receiving benefits.
- This is a brief summary of benefits. Please refer to the certificate of coverage for complete provisions, limitations and exclusions.

# **Voluntary Long Term Disability** Especially designed for the employees of: **Baldwin - Whitehall School District**



	Premiums based on 19 deductions													
Monthly Benefit	\$300	\$400	\$500	\$600	\$700	\$800	\$900 \$	61000	\$1100	\$1200	\$1300	\$1400	\$1500	\$1600
< 40	0.74	0.99	1.23	1.48	1.72	1.97	2.22	2.46	2.71	2.96	3.20	3.45	3.69	3.94
40-49	1.65	2.20	2.75	3.30	3.85	4.40	4.95	5.49	6.04	6.59	7.14	7.69	8.24	8.79
50-59	2.94	3.92	4.89	5.87	6.85	7.83	8.81	9.79	10.77	11.75	12.73	13.71	14.68	15.66
60+	4.36	5.81	7.26	8.72	10.17	11.62	13.07	14.53	15.98	17.43	18.88	20.34	21.79	23.24
Min Income	\$461	\$615	\$769	\$923	\$1,076	\$1,230	\$1,384	\$1,538	\$1,692	\$1,846	\$2,000	\$2,153	3 \$2,307	\$2,461
Monthly Benefit		\$1800	\$1900	\$2000	\$2100	\$2200	\$2300	\$2400	\$2500	\$2600	\$2700	\$2800	\$2900	\$3000
< 40	4.19	4.43	4.68	4.93	5.17	5.42	5.67	5.91	6.16	6.40	6.65	6.90	7.14	7.39
40-49	9.34	9.89	10.44	10.99	11.54	12.09	12.64	13.19	13.74	14.29	14.84	15.39	15.93	16.48
50-59	16.64	17.62	18.60	19.58	20.56	21.54	22.52	2 23.4	9 24.4	7 25.45	26.43	27.41	28.39	29.37
60+	24.69	26.15	27.60	29.05	30.51	31.96	33.41	34.86	36.32	37.77	39.22	40.67	42.13	43.58
Min Income	\$2,615	\$2,769	\$2,923	\$3,076	\$3,230	\$3,384	\$3,538	\$3,692	\$3,846	\$4,000	\$4,153	\$4,307	7 \$4,461	\$4,615
Monthly Benefit	\$3100	\$3200	\$3300	\$3400	\$3500	\$3600	\$3700	\$3800	\$3900	\$4000	\$4100	\$4200	\$4300	\$4400
< 40	7.64	7.88	8.13	8.37	8.62	8.87	9.11	9.36	9.61	9.85	10.10	10.35	10.59	10.84
40-49	17.03	17.58	18.13	18.68	19.23	19.78	20.33	20.88	3 21.43	3 21.98	3 22.5	3 23.0	8 23.63	3 24.18
50-59	30.35	31.33	32.3	33.28	34.26	35.24	36.22	2 37.2	0 38.1	8 39.1	6 40.1	4 41.1	2 42.09	9 43.07
60+	45.03	46.48	47.94	49.39	50.84	52.29	53.75	55.20	56.65	58.11	59.56	61.01	62.46	63.92
Min Income	\$4,769	\$4,923	\$5,076	\$5,230	\$5,384	\$5,538	\$5,692	\$5,846	\$6,000	\$6,153	\$6,307	\$6,461	\$6,615	\$6,769



# How to File a Claim

To file a claim online follow these three easy steps.

- 1. Go to www.rsli.com
- 2. Click "File A Claim"
- 3. Click "I am an Employee or Claimaint"
- Click on the benefit for which you are filing a claim ("File a Life Claim", "File an Accident or Critical Illness Claim, or "File a Wellness Claim")
- 5. Complete the online claims form

You will need a valid email address and some general information to get started. You will not

need to create an account login and password. Depending on which type of claim you are submitting, you should be ready to provide information such as:

- Your Name / Address / Gender / Date of Birth / Phone / Social Security Number
- Your Employer Name / Address
- Injury/Condition
- Physician or medical provider information
- Whether or not to withhold taxes from your benefit payments

You may also need to complete an additional Authorization to Obtain Information, which allows us to request your medical records

if needed. If you would like your benefit payment deposited electronically into your bank account, we will also need you to complete an Authorization for Electronic Fund Transfer.

\*Please note that claims cannot be filed before the policy effective date.

#### **About This Guide**

This guide describes the benefit plans and policies available to you. The details of these plans and policies are contained in the official plan and policy documents, including some insurance contracts.

This guide is meant only to cover the major points of each plan or policy. It does not contain all of the details that are included in your summary plan description (as described by ERISA). If there is ever a question about one of these plans and policies, or if there is a conflict between the information in this guide and the formal language of the plan or policy documents, the formal wording in the plan or policy documents will govern.

Please note that the benefits described in this guide may be changed at any time and do not represent a contractual obligation on the part of the benefits plan.