

Humble ISD Group Disability Plan Comparison

Disability Plan Features:	Humble ISD Long Term Disability	New Humble ISD Long Term Disability 2022
Benefit Schedule	–50% of monthly compensation up to \$15,000, less deductible sources of income – 66 2/3% of monthly compensation up to \$11,250, less deductible sources of income	–50% of monthly compensation up to \$20,000 , less deductible sources of income – 66 2/3% of monthly compensation up to \$15,000 , less deductible sources of income
Maximum Monthly Benefit	\$7,500	\$10,000
Minimum Monthly Benefit	\$100 or 10%, whichever is greater	\$100 or 10%, whichever is greater
Elimination Period Injury/Sickness	Choice of 7, 14, 30, 60, 90 & 150 days	Choice of 7, 14, 30, 60, 90 & 150 days
Maximum Benefit Period	Up to Social Security Normal Retirement Age (SSNRA) for Injury and Sickness OR Up to Social Security Normal Retirement Age (SSNRA) for Injury and 5 Years for Sickness	Up to Social Security Normal Retirement Age (SSNRA) for Injury and Sickness OR Up to Social Security Normal Retirement Age (SSNRA) for Injury and 5 Years for Sickness
Hospital Confinement Benefit	Benefit will be payable on the first day the Insured is confined as a patient in a hospital for up to 60 days of confinement. The remainder of the Insured's Elimination Period will be waived. Available plans with an elimination period of 30 days or less.	Benefit will be payable on the first day the Insured is confined as a patient in a hospital for up to 60 days of confinement. The remainder of the Insured's Elimination Period will be waived. Available plans with an elimination period of 30 days or less.
Deductible Sources of Income	All plans pay in addition to Sick Leave for the first 12 months of disability.	All plans pay in addition to Sick Leave for the first 12 months of disability.
Guarantee Issue Amount	\$7,500	\$10,000
Minimum Participation	Greater of 20% or 10 lives	Greater of 20% or 10 lives
Own Occupation Period	24 months	24 months
Disabled and Working	Included	Included
Pre-Existing Condition Period	3-month lookback/12 months continuous coverage	3-month lookback/12 months continuous coverage; 1 month benefit for disability due to pre-ex conditions
Mental & Nervous Limitation	2 years	2 years
Drug & Alcohol Limitation	15 days	2 years
Special Conditions Limitations	2 years	2 years
Physician Expense Benefit	Up to \$150 for Injury	Up to \$150 for Injury
Accidental Death Benefit	Not Included	Not Included

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Family Care Benefit	Insured will receive up to 25% of benefit up to 24 months of disability benefit	Insured will receive up to 25% of benefit up to 24 months of disability benefit
Waiver of Premium	First of the month following 90 days of disability	First of the month following 90 days of disability
Survivor Benefit	Not Included	Lump sum equal to 3x the Disability Payment
SSNRA/SSNRA Rates per \$100 of Covered Monthly Salary		
		<u>50%</u> <u>66 2/3%</u>
	7 day	\$1.90 \$2.54
	14 day	\$1.62 \$2.16
	30 day	\$1.36 \$1.80
	60 day	\$0.84 \$1.12
	90 day	\$0.64 \$0.84
150 day	\$0.42 \$0.56	
SSNRA/5 Rates per \$100 of Covered Monthly Salary		
		<u>50%</u> <u>66 2/3%</u>
	7 day	\$1.64 \$2.18
	14 day	\$1.38 \$1.84
	30 day	\$1.06 \$1.42
	60 day	\$0.54 \$0.72
	90 day	\$0.46 \$0.62
150 day	\$0.34 \$0.44	
	<u>50%</u> <u>66 2/3%</u>	
7 day	\$1.62 \$2.36	
14 day	\$1.36 \$1.98	
30 day	\$1.12 \$1.64	
60 day	\$0.62 \$1.00	
90 day	\$0.44 \$0.74	
150 day	\$0.30 \$0.48	

*Coverages are enrolled via Application once annually Guarantee Issue with no medical questions. Existing insureds may increase coverage guarantee issue to salary. Plan changes may be subject to a new pre-existing condition limitation.

*Insured's enrolled in Grandfathered Plans are not required to enroll in new plans effective 9/1/2022 unless 1) moving to a new elimination period, 2) new benefit period or changing monthly indemnity amount.