



### Voluntary Long Term Disability Insurance

Standard Insurance Company has developed this document to provide you with information about the optional insurance coverage you may select through A+ Charter Schools, Inc. Written in non-technical language, this is not intended as a complete description of the coverage. If you have additional questions, please refer to the Educator Options Group Voluntary Long Term Disability Insurance brochure included in your packet or check with your human resources representative.

### Employer Plan Effective Date

The group policy effective date is September 1, 2012.

### Eligibility

To become insured, you must be:

- A regular employee of A+ Charter Schools, Inc., excluding temporary or seasonal employees, full-time members of the armed forces, leased employees or independent contractors
- Actively at work at least 20 hours each week
- A citizen or resident of the United States or Canada

### Employee Coverage Effective Date

Please contact your human resources representative for more information regarding the following requirements that must be satisfied for your insurance to become effective. You must satisfy:

- Eligibility requirements
- An eligibility waiting period of 0 days
- An evidence of insurability requirement, if applicable
- An active work requirement. This means that if you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

### Benefit Amount

You may select a monthly benefit amount in \$100 increments, based on the tables and guidelines presented in the Rates section of these Coverage Highlights. The monthly benefit amount must not exceed 66 2/3 percent of your monthly earnings.

Plan Maximum Monthly Benefit: 66 2/3 percent of predisability earnings

Plan Minimum Monthly Benefit: 25 percent of your LTD benefit before reduction by deductible income

**During the annual enrollment period, you may increase your Monthly Benefit by \$100, \$200, or \$300 without being subject to the preexisting condition exclusion. If you choose to increase your coverage by more than \$300, you will be subject to the preexisting condition exclusion.**

### Benefit Waiting Period

The benefit waiting period is the period of time that you must be continuously disabled before benefits become payable. Benefits are not payable during the benefit waiting period. The benefit waiting period options associated with your plan include:

<u>Accidental Injury</u>	<u>Other Disabilities</u>
0 days	7 days
14 days	14 days
30 days	30 days
60 days	60 days
90 days	90 days
180 days	180 days

**During the annual enrollment period, you may decrease your benefit waiting period by one level without being subject to the preexisting condition exclusion. If you choose to decrease by more than one level you will be subject to the preexisting condition exclusion.**

### First Day Hospital Benefit

With this benefit, if an insured employee is admitted as a hospital inpatient for at least four hours (and charged room and board) during the Benefit Waiting Period, the Benefit Waiting Period will be satisfied. Benefits become payable on the date of hospitalization; the maximum benefit period also begins on that date. This feature is included only on LTD plans with Benefit Waiting Periods of 30 days or less.

### Preexisting Condition Exclusion

A general description of the preexisting condition exclusion is included in the Group Voluntary Long Term Disability Insurance for Educators and Administrators brochure. If you have questions, please check with your human resources representative.

Preexisting Condition Period: The 90-day period just before your insurance becomes effective

Exclusion Period: 12 months

### Own Occupation Period

For the plan's definition of disability, as described in your brochure, the own occupation period is the first 24 months for which LTD benefits are paid.

### Any Occupation Period

The any occupation period begins at the end of the own occupation period and continues until the end of the maximum benefit period.

### Maximum Benefit Period

The maximum periods for which benefits are payable are shown in the tables below.

If you become disabled before age 62, LTD benefits may continue during disability until you reach age 65. If you become disabled at age 62 or older, the benefit duration is determined by your age when disability begins:

<u>Age</u>	<u>Maximum Benefit Period</u>
62	3 years 6 months
63	3 years
64	2 years 6 months
65	2 years
66	1 year 9 months
67	1 year 6 months
68	1 year 3 months
69+	1 year

### When Benefits End

LTD benefits end automatically on the earliest of:

- The date you are no longer disabled
- The date your maximum benefit period ends
- The date you die
- The date benefits become payable under any other LTD plan under which you become insured through employment during a period of temporary recovery
- The date you fail to provide proof of continued disability and entitlement to benefits

### Rates

Employees can select a monthly LTD benefit ranging from a minimum of \$200 to a maximum amount based on how much they earn. Referencing the appropriate attached charts, follow these steps to find the monthly cost for your desired level of monthly LTD benefit and benefit waiting period:

1. Find the maximum LTD benefit by locating the amount of your earnings in either the Annual Earnings or Monthly Earnings column. The LTD benefit amount shown associated with these earnings is the maximum amount you can receive. If your earnings fall between two amounts, you must select the lower amount.
2. Select the desired monthly LTD benefit between the minimum of \$200 and the determined maximum amount, making sure not to exceed the maximum for your earnings.
3. In the same row, select the desired benefit waiting period to see the monthly cost for that selection.

If you have questions regarding how to determine your monthly LTD benefit, the benefit waiting period, or the premium payment of your desired benefit, please contact your human resources representative.

### Group Insurance Certificate

If you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage. The information presented above is controlled by the group policy and does not modify it in any way. The controlling provisions are in the group policy issued by Standard Insurance Company.

Annual Earnings	Monthly Earnings	Monthly Disability Benefit	Accident/Sickness Benefit Waiting Period					
			Cost Per Month					
			0-7	14-14	30-30	60-60	90-90	180-180
3,600	300	200	9.07	7.99	6.20	4.39	3.79	2.48
5,400	450	300	13.61	11.99	9.31	6.59	5.69	3.72
7,200	600	400	18.14	15.98	12.41	8.78	7.58	4.96
9,000	750	500	22.68	19.98	15.51	10.98	9.48	6.20
10,800	900	600	27.22	23.98	18.61	13.18	11.38	7.44
12,600	1,050	700	31.75	27.97	21.71	15.37	13.27	8.68
14,400	1,200	800	36.29	31.97	24.82	17.57	15.17	9.92
16,200	1,350	900	40.82	35.96	27.92	19.76	17.06	11.16
18,000	1,500	1,000	45.36	39.96	31.02	21.96	18.96	12.40
19,800	1,650	1,100	49.90	43.96	34.12	24.16	20.86	13.64
21,600	1,800	1,200	54.43	47.95	37.22	26.35	22.75	14.88
23,400	1,950	1,300	58.97	51.95	40.33	28.55	24.65	16.12
25,200	2,100	1,400	63.50	55.94	43.43	30.74	26.54	17.36
27,000	2,250	1,500	68.04	59.94	46.53	32.94	28.44	18.60
28,800	2,400	1,600	72.58	63.94	49.63	35.14	30.34	19.84
30,600	2,550	1,700	77.11	67.93	52.73	37.33	32.23	21.08
32,400	2,700	1,800	81.65	71.93	55.84	39.53	34.13	22.32
34,200	2,850	1,900	86.18	75.92	58.94	41.72	36.02	23.56
36,000	3,000	2,000	90.72	79.92	62.04	43.92	37.92	24.80
37,800	3,150	2,100	95.26	83.92	65.14	46.12	39.82	26.04
39,600	3,300	2,200	99.79	87.91	68.24	48.31	41.71	27.28
41,400	3,450	2,300	104.33	91.91	71.35	50.51	43.61	28.52
43,200	3,600	2,400	108.86	95.90	74.45	52.70	45.50	29.76
45,000	3,750	2,500	113.40	99.90	77.55	54.90	47.40	31.00
46,800	3,900	2,600	117.94	103.90	80.65	57.10	49.30	32.24
48,600	4,050	2,700	122.47	107.89	83.75	59.29	51.19	33.48
50,400	4,200	2,800	127.01	111.89	86.86	61.49	53.09	34.72
52,200	4,350	2,900	131.54	115.88	89.96	63.68	54.98	35.96
54,000	4,500	3,000	136.08	119.88	93.06	65.88	56.88	37.20
55,800	4,650	3,100	140.62	123.88	96.16	68.08	58.78	38.44
57,600	4,800	3,200	145.15	127.87	99.26	70.27	60.67	39.68
59,400	4,950	3,300	149.69	131.87	102.37	72.47	62.57	40.92
61,200	5,100	3,400	154.22	135.86	105.47	74.66	64.46	42.16
63,000	5,250	3,500	158.76	139.86	108.57	76.86	66.36	43.40
64,800	5,400	3,600	163.30	143.86	111.67	79.06	68.26	44.64
66,600	5,550	3,700	167.83	147.85	114.77	81.25	70.15	45.88
68,400	5,700	3,800	172.37	151.85	117.88	83.45	72.05	47.12
70,200	5,850	3,900	176.90	155.84	120.98	85.64	73.94	48.36
72,000	6,000	4,000	181.44	159.84	124.08	87.84	75.84	49.60

Annual Earnings	Monthly Earnings	Monthly Disability Benefit	Accident/Sickness Benefit Waiting Period					
			Cost Per Month					
			0-7	14-14	30-30	60-60	90-90	180-180
73,800	6,150	4,100	185.98	163.84	127.18	90.04	77.74	50.84
75,600	6,300	4,200	190.51	167.83	130.28	92.23	79.63	52.08
77,400	6,450	4,300	195.05	171.83	133.39	94.43	81.53	53.32
79,200	6,600	4,400	199.58	175.82	136.49	96.62	83.42	54.56
81,000	6,750	4,500	204.12	179.82	139.59	98.82	85.32	55.80
82,800	6,900	4,600	208.66	183.82	142.69	101.02	87.22	57.04
84,600	7,050	4,700	213.19	187.81	145.79	103.21	89.11	58.28
86,400	7,200	4,800	217.73	191.81	148.90	105.41	91.01	59.52
88,200	7,350	4,900	222.26	195.80	152.00	107.60	92.90	60.76
90,000	7,500	5,000	226.80	199.80	155.10	109.80	94.80	62.00
91,800	7,650	5,100	231.34	203.80	158.20	112.00	96.70	63.24
93,600	7,800	5,200	235.87	207.79	161.30	114.19	98.59	64.48
95,400	7,950	5,300	240.41	211.79	164.41	116.39	100.49	65.72
97,200	8,100	5,400	244.94	215.78	167.51	118.58	102.38	66.96
99,000	8,250	5,500	249.48	219.78	170.61	120.78	104.28	68.20
100,800	8,400	5,600	254.02	223.78	173.71	122.98	106.18	69.44
102,600	8,550	5,700	258.55	227.77	176.81	125.17	108.07	70.68
104,400	8,700	5,800	263.09	231.77	179.92	127.37	109.97	71.92
106,200	8,850	5,900	267.62	235.76	183.02	129.56	111.86	73.16
108,000	9,000	6,000	272.16	239.76	186.12	131.76	113.76	74.40
109,800	9,150	6,100	276.70	243.76	189.22	133.96	115.66	75.64
111,600	9,300	6,200	281.23	247.75	192.32	136.15	117.55	76.88
113,400	9,450	6,300	285.77	251.75	195.43	138.35	119.45	78.12
115,200	9,600	6,400	290.30	255.74	198.53	140.54	121.34	79.36
117,000	9,750	6,500	294.84	259.74	201.63	142.74	123.24	80.60
118,800	9,900	6,600	299.38	263.74	204.73	144.94	125.14	81.84
120,600	10,050	6,700	303.91	267.73	207.83	147.13	127.03	83.08
122,400	10,200	6,800	308.45	271.73	210.94	149.33	128.93	84.32
124,200	10,350	6,900	312.98	275.72	214.04	151.52	130.82	85.56
126,000	10,500	7,000	317.52	279.72	217.14	153.72	132.72	86.80
127,800	10,650	7,100	322.06	283.72	220.24	155.92	134.62	88.04
129,600	10,800	7,200	326.59	287.71	223.34	158.11	136.51	89.28
131,400	10,950	7,300	331.13	291.71	226.45	160.31	138.41	90.52
133,200	11,100	7,400	335.66	295.70	229.55	162.50	140.30	91.76
135,000	11,250	7,500	340.20	299.70	232.65	164.70	142.20	93.00
136,800	11,400	7,600	344.74	303.70	235.75	166.90	144.10	94.24
138,600	11,550	7,700	349.27	307.69	238.85	169.09	145.99	95.48
140,400	11,700	7,800	353.81	311.69	241.96	171.29	147.89	96.72
142,200	11,850	7,900	358.34	315.68	245.06	173.48	149.78	97.96
144,000	12,000	8,000	362.88	319.68	248.16	175.68	151.68	99.20