



Voluntary Long Term Disability (LTD) Insurance

Long Term Disability insurance is designed to pay a monthly benefit to you in the event you cannot work because of a covered illness or injury. This benefit replaces a portion of your income, thus helping you to meet your financial commitments in a time of need. Standard Insurance Company (The Standard) has developed this document to provide you with information about the optional coverage you may select through the Lewisville Independent School District.

Eligibility Requirements

Policy # 753256

Employee

- A regular employee of the Lewisville Independent School District
- Actively working at least 20 hours each week
- A citizen or resident of the United States or Canada
- Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible

Premium

- You pay 100 percent of the premium for this coverage through easy payroll deduction

Benefit Amount

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 predisability earnings. The minimum monthly amount you may elect is \$200.

Plan Maximum Monthly Benefit

The lesser of \$8,000 or 66 2/3 percent of your predisability earnings

Plan Minimum Monthly Benefit

25 percent of your LTD benefit before reduction by deductible income

Note:

- If you do not apply for this coverage within 31 days after becoming eligible, and later decide to do so, you must wait until your employer holds an annual enrollment.
- Reinstatements are subject to medical underwriting approval. To submit a medical history statement online, visit: www.standard.com/mhs
- Disability Needs Calculator

Your family has a unique set of circumstances and financial demands. To help you figure out the amount of Disability insurance you may need if you become unable to work, The Standard has created a Disability Needs Calculator found at: <http://www.standard.com/calculators/dineeds.html>

Employee Coverage Effective Date

To become insured, you must satisfy the eligibility requirements listed above, serve an eligibility waiting period*, receive medical underwriting approval (if applicable), and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance. 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.

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

*You are eligible on the first day of the month that follows or coincides with the date you become a member.

Understanding Your Plan Design

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>
14 days	14 days
30 days	30 days
60 days	60 days
90 days	90 days

Own Occupation Definition of Disability For the benefit waiting period and the first 24 months for which LTD benefits are paid, you are considered disabled when you are unable as a result of physical disease, injury, pregnancy or mental disorder to perform with reasonable continuity the material duties of your own occupation **AND** are suffering a loss of at least 20 percent of your indexed predisability earnings when working in your own occupation. You are not disabled merely because your right to perform your own occupation is restricted, including a restriction or loss of license.

Any Occupation Definition of Disability After the own occupation period of disability, you will be considered disabled if you are unable as a result of physical disease, injury, pregnancy or mental disorder to perform with reasonable continuity the material duties of any occupation.

Deductible Income Deductible income is income you receive or are eligible to receive while LTD benefits are payable. Deductible income includes, but is not limited to:

- Sick pay, annual or personal leave pay, severance pay or other forms of salary continuation (including donated amounts) paid
- Benefits under any workers' compensation law or similar law
- Amounts under unemployment compensation law
- Social Security disability or retirement benefits, including benefits for your spouse and children
- Disability benefits from any other group insurance
- Disability or retirement benefits under your employer's retirement plan
- Benefits under any state disability income benefit law or similar law
- Earnings or compensation included in predisability earnings which you receive or are eligible to receive while LTD benefits are payable
- Earnings from work activity while you are disabled, plus the earnings you could receive if you worked as much as your disability allows
- Amounts due from or on behalf of a third party because of your disability, whether by judgment, settlement or other method
- Any amount you receive by compromise, settlement or other method as a result of a claim for any of the above

Understanding Your Plan Design (Continued)

**Maximum Benefit
Maximum**

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

Option A: To Age 65 for both Accident and Sickness

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:

Age	Maximum Benefit Period
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

Option B: To Age 65 for both Accident and 5 years for Sickness

If you become disabled before age 62, LTD benefits may continue during disability until you reach age 65 for Accidents and for 5 years for Sicknesses. If you become disabled at age 62 or older, the benefit duration is determined by your age when disability begins:

Age	Maximum Benefit Period
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

Benefit Calculation

Example

You select the amount of your LTD benefit when you enroll for coverage in the plan. The dollar amount selected must be a multiple of \$100, from a minimum of \$200 to a maximum of the lesser of \$8,000 or 66 2/3 percent of your predisability earnings. This amount is then reduced by deductible income you receive, or are eligible to receive, while LTD benefits are payable. As an example, if your monthly predisability earnings are \$4,500, you may select any dollar amount (in \$100 increments) between \$200 and \$2,700 (60 percent of predisability earnings). In the example below, assume you elected the maximum benefit amount of \$2,700, and you now receive a monthly Social Security disability benefit of \$1,200 and a monthly retirement benefit of \$900. Your monthly LTD benefit would be calculated as follows:

Insured predisability earnings	\$4,500
Maximum benefit percentage	X 60%
Maximum benefit amount	\$2,700
Less Social Security disability benefit	-\$1,200
Less retirement benefit	-\$900
Amount of LTD benefit	\$600

Additional Features

Please see your human resources representative for additional information about the features and benefits below.

Rehabilitation Plan	If you are participating in an approved Rehabilitation Plan, The Standard may include payment of some of the expenses you incur in connection with the plan including but not limited to: training and education expenses, family (child and elder) care expenses, job related expenses and job search expenses.
Reasonable Accommodation Expense Benefit	If your employer makes an approved work-site modification that enables you to return to work while disabled, The Standard will reimburse your employer up to a pre-approved amount for some or all of the cost of the modification.
Rehabilitation Incentive Benefit	If you agree to participate in a rehabilitation plan that prepares you to return to work (plan must be approved by The Standard), you may be eligible to receive an additional benefit equal to 10 percent of your predisability earnings. When added to any other amount you receive from The Standard, your total benefit cannot exceed the maximum benefit allowed by the policy.
Employee Assistance Program	Includes an Employee Assistance Program and WorkLife Services to offer support, guidance and resources to help you and your household members resolve personal issues.
Survivors Benefit	If you die while LTD benefits are payable, and on the date you die you have been continuously disabled for at least 180 days, a survivors benefit equal to three time your unreduced LTD benefit may be payable (any survivors benefit payable will first be applied to any overpayment of your claim due to The Standard).
First Day Hospital Benefit	If you are hospital confined for at least 4 hours during the benefit waiting period, the following will apply; the remainder of your benefit waiting period will be waived, LTD benefits will become payable on the first day you are hospital confined, and your maximum benefit period will begin on the date your LTD benefits are payable. You are eligible for this benefit only if your elected benefit waiting period is less than 45 days.
Family Care Expense Benefit	Applies when a disabled employee has returned to work and continues to receive LTD benefits. For 24 months, a portion of expenses is deducted from the amount of your work earnings.
Lifetime Security Benefit	Your LTD benefit (amount in effect when the claim closes) payments will continue beyond the regular plan Maximum Benefit Period if you are unable to perform two or more Activities of Daily Living or are suffering severe cognitive impairment.

Exclusions

Subject to state variations, you are not covered for a disability caused or contributed to by any of the following:

- Your committing or attempting to commit an assault or felony, or your active participation in a violent disorder or riot
- An intentionally self-inflicted injury
- War or any act of war (declared or undeclared, and any substantial armed conflict between organized forces of a military nature)
- The loss of your professional or occupational license or certification
- If applicable, with respect to insurance increases, you are not covered for the insurance increase if your disability is caused or contributed by a preexisting condition or the medical or surgical treatment of a preexisting condition unless on the date you become disabled, you have been continuously insured under the group policy for the specified exclusion and limitation period, and you have been actively at work for at least one full day after the end of the specified exclusion and limitation period

Preexisting Condition Provision

A preexisting condition is a mental or physical condition:

- For which you or a reasonably prudent person would have consulted a physician or other licensed medical professional; received medical treatment, services or advice; undergone diagnostic procedures, including self-administered procedures; or taken prescribed drugs or medications
- Which, as a result of any medical examination, including routine examination, was discovered or suspected

Preexisting Condition Period The 90-day period just before your insurance becomes effective or any insurance increases become effective

Exclusion Period 12 months

Limitations

LTD benefits are not payable for any period when you are:

- Not under the ongoing care of a physician in the appropriate specialty as determined by The Standard
- Not participating in good faith in a plan, program or course of medical treatment or vocational training or education approved by The Standard, unless your disability prevents you from participating
- Confined for any reason in a penal or correctional institution
- Able to work and earn at least 20 percent of your indexed predisability earnings, but you elect not to work during the first 24 months after the end of the benefit waiting period the responsibility to work is limited to work in your own occupation; thereafter, the responsibility to work includes work in any occupation

In addition, payment of LTD benefits is limited in duration:

- If you reside outside the United States or Canada
- If applicable, if your disability is caused or contributed by a preexisting condition or the medical or surgical treatment of a preexisting condition unless on the date you become disabled, you have been continuously insured under the group policy for the specified exclusion and limitation period, and you have been actively at work for at least one full day after the end of the specified exclusion and limitation period
- If your disability is caused or contributed to by mental disorders, substance abuse or the environment, chronic fatigue conditions, chronic pain conditions, carpal tunnel or repetitive motion syndrome or temporomandibular joint disorder or craniomandibular joint disorder

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 disability insurance 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

When Insurance Ends

Insurance ends automatically on the earliest of the following:

- The last day of the last period for which you make a premium contribution (except if premiums are waived while disabled)
- The date your employment terminates
- The date the group policy terminates
- The date you cease to meet the eligibility requirements (coverage may continue for limited periods under certain circumstances)
- If applicable, the date your employer ceases to participate under the group policy

Group Insurance Certificate

If coverage becomes effective, and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. Neither the information presented in this summary nor the certificate modifies the group policy or the insurance coverage in any way.

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:

- 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.
- 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.
- 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.

Maximum Benefit Period: Option A

Annual Earnings	Monthly Earnings	Monthly Disability Benefit	Accident/Sickness Benefit Waiting Period			
			Cost Per Month			
			14-14	30-30	60-60	90-90
4,000	\$333	200	6.65	5.64	3.63	3.15
6,000	\$500	300	9.97	8.45	5.45	4.73
8,000	\$667	400	13.30	11.27	7.27	6.30
10,000	\$833	500	16.62	14.09	9.09	7.88
12,000	\$1,000	600	19.94	16.91	10.90	9.46
14,000	\$1,167	700	23.27	19.73	12.72	11.03
16,000	\$1,333	800	26.59	22.54	14.54	12.61
18,000	\$1,500	1000	33.24	28.18	18.17	15.76
20,000	\$1,667	1100	36.56	31.00	19.99	17.34
22,000	\$1,833	1200	39.89	33.82	21.80	18.91
24,000	\$2,000	1300	43.21	36.63	23.62	20.49
26,000	\$2,167	1400	46.54	39.45	25.44	22.06
28,000	\$2,333	1500	49.86	42.27	27.26	23.64
30,000	\$2,500	1600	53.18	45.09	29.07	25.22
32,000	\$2,667	1700	56.51	47.91	30.89	26.79
34,000	\$2,833	1800	59.83	50.72	32.71	28.37
36,000	\$3,000	2000	66.48	56.36	36.34	31.52
38,000	\$3,167	2100	69.80	59.18	38.16	33.10
40,000	\$3,333	2200	73.13	62.00	39.97	34.67
42,000	\$3,500	2300	76.45	64.81	41.79	36.25
44,000	\$3,667	2400	79.78	67.63	43.61	37.82
46,000	\$3,833	2500	83.10	70.45	45.43	39.40
48,000	\$4,000	2600	86.42	73.27	47.24	40.98
50,000	\$4,167	2700	89.75	76.09	49.06	42.55
52,000	\$4,333	2800	93.07	78.90	50.88	44.13
54,000	\$4,500	3000	99.72	84.54	54.51	47.28
56,000	\$4,667	3100	103.04	87.36	56.33	48.86
58,000	\$4,833	3200	106.37	90.18	58.14	50.43
60,000	\$5,000	3300	109.69	92.99	59.96	52.01
62,000	\$5,167	3400	113.02	95.81	61.78	53.58
64,000	\$5,333	3500	116.34	98.63	63.60	55.16
66,000	\$5,500	3600	119.66	101.45	65.41	56.74
68,000	\$5,667	3700	122.99	104.27	67.23	58.31
70,000	\$5,833	3800	126.31	107.08	69.05	59.89
72,000	\$6,000	4000	132.96	112.72	72.68	63.04
74,000	\$6,167	4100	136.28	115.54	74.50	64.62
76,000	\$6,333	4200	139.61	118.36	76.31	66.19
78,000	\$6,500	4300	142.93	121.17	78.13	67.77
80,000	\$6,667	4400	146.26	123.99	79.95	69.34
82,000	\$6,833	4500	149.58	126.81	81.77	70.92

Maximum Benefit Period: Option A (Continued)

Annual Earnings	Monthly Earnings	Monthly Disability Benefit	Accident/Sickness Benefit Waiting Period			
			Cost Per Month			
			14-14	30-30	60-60	90-90
84,000	\$7,000	4600	152.90	129.63	83.58	72.50
86,000	\$7,167	4700	156.23	132.45	85.40	74.07
88,000	\$7,333	4800	159.55	135.26	87.22	75.65
90,000	\$7,500	5000	166.20	140.90	90.85	78.80
92,000	\$7,667	5100	169.52	143.72	92.67	80.38
94,000	\$7,833	5200	172.85	146.54	94.48	81.95
96,000	\$8,000	5300	176.17	149.35	96.30	83.53
98,000	\$8,167	5400	179.50	152.17	98.12	85.10
100,000	\$8,333	5500	182.82	154.99	99.94	86.68
102,000	\$8,500	5600	186.14	157.81	101.75	88.26
104,000	\$8,667	5700	189.47	160.63	103.57	89.83
106,000	\$8,833	5800	192.79	163.44	105.39	91.41
108,000	\$9,000	6000	199.44	169.08	109.02	94.56
110,000	\$9,167	6100	202.76	171.90	110.84	96.14
112,000	\$9,333	6200	206.09	174.72	112.65	97.71
114,000	\$9,500	6300	209.41	177.53	114.47	99.29
116,000	\$9,667	6400	212.74	180.35	116.29	100.86
118,000	\$9,833	6500	216.06	183.17	118.11	102.44
120,000	\$10,000	6600	219.38	185.99	119.92	104.02
122,000	\$10,167	6700	222.71	188.81	121.74	105.59
124,000	\$10,333	6800	226.03	191.62	123.56	107.17
126,000	\$10,500	7000	232.68	197.26	127.19	110.32
128,000	\$10,667	7100	236.00	200.08	129.01	111.90
130,000	\$10,833	7200	239.33	202.90	130.82	113.47
132,000	\$11,000	7300	242.65	205.71	132.64	115.05
134,000	\$11,167	7400	245.98	208.53	134.46	116.62
136,000	\$11,333	7500	249.30	211.35	136.28	118.20
138,000	\$11,500	7600	252.62	214.17	138.09	119.78
140,000	\$11,667	7700	255.95	216.99	139.91	121.35
142,000	\$11,833	7800	259.27	219.80	141.73	122.93
144,000	\$12,000	8000	265.92	225.44	145.36	126.08

Maximum Benefit Period: Option B

Annual Earnings	Monthly Earnings	Monthly Disability Benefit	Accident/Sickness Benefit Waiting Period			
			Cost Per Month			
			14-14	30-30	60-60	90-90
4,000	\$333	200	5.87	5.04	3.27	2.81
6,000	\$500	300	8.80	7.56	4.90	4.21
8,000	\$667	400	11.73	10.08	6.53	5.61
10,000	\$833	500	14.67	12.60	8.17	7.02
12,000	\$1,000	600	17.60	15.11	9.80	8.42
14,000	\$1,167	700	20.53	17.63	11.43	9.82
16,000	\$1,333	800	23.46	20.15	13.06	11.22
18,000	\$1,500	1000	29.33	25.19	16.33	14.03
20,000	\$1,667	1100	32.26	27.71	17.96	15.43
22,000	\$1,833	1200	35.20	30.23	19.60	16.84
24,000	\$2,000	1300	38.13	32.75	21.23	18.24
26,000	\$2,167	1400	41.06	35.27	22.86	19.64
28,000	\$2,333	1500	44.00	37.79	24.50	21.05
30,000	\$2,500	1600	46.93	40.30	26.13	22.45
32,000	\$2,667	1700	49.86	42.82	27.76	23.85
34,000	\$2,833	1800	52.79	45.34	29.39	25.25
36,000	\$3,000	2000	58.66	50.38	32.66	28.06
38,000	\$3,167	2100	61.59	52.90	34.29	29.46
40,000	\$3,333	2200	64.53	55.42	35.93	30.87
42,000	\$3,500	2300	67.46	57.94	37.56	32.27
44,000	\$3,667	2400	70.39	60.46	39.19	33.67
46,000	\$3,833	2500	73.33	62.98	40.83	35.08
48,000	\$4,000	2600	76.26	65.49	42.46	36.48
50,000	\$4,167	2700	79.19	68.01	44.09	37.88
52,000	\$4,333	2800	82.12	70.53	45.72	39.28
54,000	\$4,500	3000	87.99	75.57	48.99	42.09
56,000	\$4,667	3100	90.92	78.09	50.62	43.49
58,000	\$4,833	3200	93.86	80.61	52.26	44.90
60,000	\$5,000	3300	96.79	83.13	53.89	46.30
62,000	\$5,167	3400	99.72	85.65	55.52	47.70
64,000	\$5,333	3500	102.66	88.17	57.16	49.11
66,000	\$5,500	3600	105.59	90.68	58.79	50.51
68,000	\$5,667	3700	108.52	93.20	60.42	51.91
70,000	\$5,833	3800	111.45	95.72	62.05	53.31
72,000	\$6,000	4000	117.32	100.76	65.32	56.12
74,000	\$6,167	4100	120.25	103.28	66.95	57.52
76,000	\$6,333	4200	123.19	105.80	68.59	58.93
78,000	\$6,500	4300	126.12	108.32	70.22	60.33
80,000	\$6,667	4400	129.05	110.84	71.85	61.73
82,000	\$6,833	4500	131.99	113.36	73.49	63.14

Maximum Benefit Period: Option B (Continued)

Annual Earnings	Monthly Earnings	Monthly Disability Benefit	Accident/Sickness Benefit Waiting Period			
			Cost Per Month			
			14-14	30-30	60-60	90-90
84,000	\$7,000	4600	134.92	115.87	75.12	64.54
86,000	\$7,167	4700	137.85	118.39	76.75	65.94
88,000	\$7,333	4800	140.78	120.91	78.38	67.34
90,000	\$7,500	5000	146.65	125.95	81.65	70.15
92,000	\$7,667	5100	149.58	128.47	83.28	71.55
94,000	\$7,833	5200	152.52	130.99	84.92	72.96
96,000	\$8,000	5300	155.45	133.51	86.55	74.36
98,000	\$8,167	5400	158.38	136.03	88.18	75.76
100,000	\$8,333	5500	161.32	138.55	89.82	77.17
102,000	\$8,500	5600	164.25	141.06	91.45	78.57
104,000	\$8,667	5700	167.18	143.58	93.08	79.97
106,000	\$8,833	5800	170.11	146.10	94.71	81.37
108,000	\$9,000	6000	175.98	151.14	97.98	84.18
110,000	\$9,167	6100	178.91	153.66	99.61	85.58
112,000	\$9,333	6200	181.85	156.18	101.25	86.99
114,000	\$9,500	6300	184.78	158.70	102.88	88.39
116,000	\$9,667	6400	187.71	161.22	104.51	89.79
118,000	\$9,833	6500	190.65	163.74	106.15	91.20
120,000	\$10,000	6600	193.58	166.25	107.78	92.60
122,000	\$10,167	6700	196.51	168.77	109.41	94.00
124,000	\$10,333	6800	199.44	171.29	111.04	95.40
126,000	\$10,500	7000	205.31	176.33	114.31	98.21
128,000	\$10,667	7100	208.24	178.85	115.94	99.61
130,000	\$10,833	7200	211.18	181.37	117.58	101.02
132,000	\$11,000	7300	214.11	183.89	119.21	102.42
134,000	\$11,167	7400	217.04	186.41	120.84	103.82
136,000	\$11,333	7500	219.98	188.93	122.48	105.23
138,000	\$11,500	7600	222.91	191.44	124.11	106.63
140,000	\$11,667	7700	225.84	193.96	125.74	108.03
142,000	\$11,833	7800	228.77	196.48	127.37	109.43
144,000	\$12,000	8000	234.64	201.52	130.64	112.24



Standard Insurance Company

For more than 100 years we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. We have earned a national reputation for quality products and superior service by always striving to do what is right for our customers.

Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group Disability, Life, Dental and Vision insurance and Individual Disability insurance. We provide insurance to more than 24,800 groups, covering over 8 million employees nationwide.* Our first group policy, written in 1951 and still in force today, stands as a testament to our commitment to building long-term relationships.

To learn more about products from The Standard, Contact your human resources department or visit us at **www.standard.com**.

* As of June 30, 2013, based on internal data developed by Standard Insurance Company.

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