



Standard Insurance Company
Your Choice Voluntary Long Term Disability Coverage Highlights
 Ector County Independent School District

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 Ector County Independent School District.

Eligibility Requirements

- | | |
|-----------------|--|
| Employee | <ul style="list-style-type: none"> • A regular employee of Ector County 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 | <ul style="list-style-type: none"> • You pay 100 percent of the premium for this coverage through easy payroll deduction |

Benefit Amount

You may select a monthly benefit amount in \$100 increments, based on the table 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.

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.

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
180 days	180 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:

- During the first 12 month of disability, deductible income includes:
 - Benefits under any workers' compensation law or similar law
 - Earnings from work activity while you are disabled, plus the earnings you could receive if you worked as much as your disability allows
 - Any Amount you receive by compromise, settlement or other method as a result of a claim for any of the above
- After you have been disabled for 12 months, deductible income includes:
- 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

Maximum Benefit Period If you become disabled before age 62, LTD benefits may continue during disability until age 65 or to the Social Security Normal Retirement Age (SSNRA) or 3 years 6 months, whichever is longer. If you become disabled at age 62 or older, the benefit duration is determined by the age when disability begins:

<u>Age</u>	<u>Maximum Benefit Period</u>
62	To SSNRA, or 3 years 6 months, whichever is longer
63	To SSNRA, or 3 years, whichever is longer
64	To SSNRA, or 2 years 6 months, whichever is longer
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	<u>\$2,700</u>
Less Social Security disability benefit	-\$1,200
Less retirement benefit	<u>-\$900</u>
Amount of LTD benefit	\$600

Additional Features

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

24 Hour Coverage 24-hour LTD plans provide coverage for disabilities occurring on or off the job.

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.

Special Dismemberment Benefit If you suffer a Loss of a hand, foot, or sight as the result of an accident, you may be considered Disabled for the Minimum Benefit Period of 23 months, or 46 months (for multiple Losses). During the Minimum Benefit Period under this provision, sick pay or other Salary continuation is not considered deductible income from your LTD Benefits. If the LTD Maximum Benefit Period is a shorter duration than the Minimum Benefit Period under the Special Dismemberment provision, your LTD benefits will extend through the Minimum Benefit Period. The Minimum Benefit Period counts as part of the Maximum Benefit period.

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 and are charged room and board, 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 you are eligible for this benefit only if your elected benefit waiting periods is 30 days or less.
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.

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

Preexisting Condition For the first 60 days of disability, we will pay benefits even if you have a condition subject to the preexisting condition limitation. After 60 days, we will continue benefits only for conditions for which the preexisting condition exclusion or limitation does not apply. Benefit amounts subject to the preexisting condition exclusion will be excluded from payment.

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

Specified Exclusion and Limitation Period 12 months

If your Disability is subject to the Preexisting Condition Limitation and you have been continuously insured under the Group Policy for:

Less than 12 months:

Your Maximum Benefit Period is 60 days.

12 months or more and your elected to change your insurance during the preceding Annual Enrollment period by:

a) Increasing your LTD Benefit Amount by more than \$300

Your LTD Benefit is equal to the amount of insurance for which you were insured under the Group Policy on the day before the last preceding Annual Enrollment Period plus \$300, reduced by Deductible Income.

b) Decreasing your Benefit Waiting period by more than on level:

Your Benefit Waiting Period equals the Benefit Waiting Period which applied to the Option under which you were insured on the day before the last preceding Annual Enrollment Period.

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 24months 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. However, if you have a contract with the Employer, and your employment terminates on the last day of the school year, your insurance will be continued through the last day of the calendar month of your contract year, provided that premium contributions are paid through the end of that calendar month
- 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 to SSNRA for both accident and sickness

Annual Earnings	Monthly Earnings	Monthly Disability Benefit	Accident/Sickness Benefit Waiting Period				
			Cost Per Month				
			14-14	30-30	60-60	90-90	180-180
3,600	300	200	5.86	4.72	4.00	3.34	2.50
5,400	450	300	8.79	7.08	6.00	5.01	3.75
7,200	600	400	11.72	9.44	8.00	6.68	5.00
9,000	750	500	14.65	11.80	10.00	8.35	6.25
10,800	900	600	17.58	14.16	12.00	10.02	7.50
12,600	1,050	700	20.51	16.52	14.00	11.69	8.75
14,400	1,200	800	23.44	18.88	16.00	13.36	10.00
16,200	1,350	900	26.37	21.24	18.00	15.03	11.25
18,000	1,500	1,000	29.30	23.60	20.00	16.70	12.50
19,800	1,650	1,100	32.23	25.96	22.00	18.37	13.75
21,600	1,800	1,200	35.16	28.32	24.00	20.04	15.00
23,400	1,950	1,300	38.09	30.68	26.00	21.71	16.25
25,200	2,100	1,400	41.02	33.04	28.00	23.38	17.50
27,000	2,250	1,500	43.95	35.40	30.00	25.05	18.75
28,800	2,400	1,600	46.88	37.76	32.00	26.72	20.00
30,600	2,550	1,700	49.81	40.12	34.00	28.39	21.25
32,400	2,700	1,800	52.74	42.48	36.00	30.06	22.50
34,200	2,850	1,900	55.67	44.84	38.00	31.73	23.75
36,000	3,000	2,000	58.60	47.20	40.00	33.40	25.00
37,800	3,150	2,100	61.53	49.56	42.00	35.07	26.25
39,600	3,300	2,200	64.46	51.92	44.00	36.74	27.50
41,400	3,450	2,300	67.39	54.28	46.00	38.41	28.75
43,200	3,600	2,400	70.32	56.64	48.00	40.08	30.00
45,000	3,750	2,500	73.25	59.00	50.00	41.75	31.25
46,800	3,900	2,600	76.18	61.36	52.00	43.42	32.50
48,600	4,050	2,700	79.11	63.72	54.00	45.09	33.75
50,400	4,200	2,800	82.04	66.08	56.00	46.76	35.00
52,200	4,350	2,900	84.97	68.44	58.00	48.43	36.25
54,000	4,500	3,000	87.90	70.80	60.00	50.10	37.50
55,800	4,650	3,100	90.83	73.16	62.00	51.77	38.75
57,600	4,800	3,200	93.76	75.52	64.00	53.44	40.00
59,400	4,950	3,300	96.69	77.88	66.00	55.11	41.25
61,200	5,100	3,400	99.62	80.24	68.00	56.78	42.50
63,000	5,250	3,500	102.55	82.60	70.00	58.45	43.75
64,800	5,400	3,600	105.48	84.96	72.00	60.12	45.00
66,600	5,550	3,700	108.41	87.32	74.00	61.79	46.25
68,400	5,700	3,800	111.34	89.68	76.00	63.46	47.50
70,200	5,850	3,900	114.27	92.04	78.00	65.13	48.75
72,000	6,000	4,000	117.20	94.40	80.00	66.80	50.00
73,800	6,150	4,100	120.13	96.76	82.00	68.47	51.25
75,600	6,300	4,200	123.06	99.12	84.00	70.14	52.50
77,400	6,450	4,300	125.99	101.48	86.00	71.81	53.75
79,200	6,600	4,400	128.92	103.84	88.00	73.48	55.00
81,000	6,750	4,500	131.85	106.20	90.00	75.15	56.25

Annual Earnings	Monthly Earnings	Monthly Disability Benefit	14-14	30-30	60-60	90-90	180-180
82,800	6,900	4,600	134.78	108.56	92.00	76.82	57.50
84,600	7,050	4,700	137.71	110.92	94.00	78.49	58.75
86,400	7,200	4,800	140.64	113.28	96.00	80.16	60.00
88,200	7,350	4,900	143.57	115.64	98.00	81.83	61.25
90,000	7,500	5,000	146.50	118.00	100.00	83.50	62.50
91,800	7,650	5,100	149.43	120.36	102.00	85.17	63.75
93,600	7,800	5,200	152.36	122.72	104.00	86.84	65.00
95,400	7,950	5,300	155.29	125.08	106.00	88.51	66.25
97,200	8,100	5,400	158.22	127.44	108.00	90.18	67.50
99,000	8,250	5,500	161.15	129.80	110.00	91.85	68.75
100,800	8,400	5,600	164.08	132.16	112.00	93.52	70.00
102,600	8,550	5,700	167.01	134.52	114.00	95.19	71.25
104,400	8,700	5,800	169.94	136.88	116.00	96.86	72.50
106,200	8,850	5,900	172.87	139.24	118.00	98.53	73.75
108,000	9,000	6,000	175.80	141.60	120.00	100.20	75.00
109,800	9,150	6,100	178.73	143.96	122.00	101.87	76.25
111,600	9,300	6,200	181.66	146.32	124.00	103.54	77.50
113,400	9,450	6,300	184.59	148.68	126.00	105.21	78.75
115,200	9,600	6,400	187.52	151.04	128.00	106.88	80.00
117,000	9,750	6,500	190.45	153.40	130.00	108.55	81.25
118,800	9,900	6,600	193.38	155.76	132.00	110.22	82.50
120,600	10,050	6,700	196.31	158.12	134.00	111.89	83.75
122,400	10,200	6,800	199.24	160.48	136.00	113.56	85.00
124,200	10,350	6,900	202.17	162.84	138.00	115.23	86.25
126,000	10,500	7,000	205.10	165.20	140.00	116.90	87.50
127,800	10,650	7,100	208.03	167.56	142.00	118.57	88.75
129,600	10,800	7,200	210.96	169.92	144.00	120.24	90.00
131,400	10,950	7,300	213.89	172.28	146.00	121.91	91.25
133,200	11,100	7,400	216.82	174.64	148.00	123.58	92.50
135,000	11,250	7,500	219.75	177.00	150.00	125.25	93.75
136,800	11,400	7,600	222.68	179.36	152.00	126.92	95.00
138,600	11,550	7,700	225.61	181.72	154.00	128.59	96.25
140,400	11,700	7,800	228.54	184.08	156.00	130.26	97.50
142,200	11,850	7,900	231.47	186.44	158.00	131.93	98.75
144,000	12,000	8,000	234.40	188.80	160.00	133.60	100.00



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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