

**STD**

UNIVERSITY SYSTEM OF NEW HAMPSHIRE

**Short Term Disability  
Insurance Plan**

A benefit of your membership!

You can help protect your most valuable asset—your paycheck.



## Short Term Disability (STD) Insurance Plan

The University System of New Hampshire Short Term Disability Insurance Plan helps provide a paycheck if you become too sick or injured to work. Having this coverage may be important when you consider that 2 in 3 Americans live paycheck to paycheck.<sup>1</sup> So, if you weren't able to earn a regular paycheck because of sickness or injury, how would you pay bills like groceries, mortgage or rent, utility bills, car payments, or even a cellphone? The University System of New Hampshire Short Term Disability Insurance Plan replaces a portion of your paycheck to help you pay your bills.



### Plan Features



#### Reliable coverage

This coverage may be better than one you get off the street or anywhere else, and it may even cost less. That's because the University System of New Hampshire offers this coverage to you at exclusive rates. Coverage is issued by **The Prudential Insurance Company of America (Prudential)**.



#### All faculty and staff employees can apply

You can apply for the University System of New Hampshire Short Term Disability Plan if you're eligible to receive benefits, under age 60, and live in the U.S.



#### Coverage until:

- You turn age 70;
- You retire or stop meeting the "Active Employment" requirement;
- On the last day of the period for which you made any required premium contributions;
- You withdraw from the plan;
- You cease to be in an eligible class; or
- The master policy is terminated.



#### STD benefits paid even with other income

Our STD insurance plan pays benefits in addition to income you receive from any other sources or company, except workers' compensation benefits.

### Benefit Information



#### Benefit duration

Benefits for up to 26 weeks for a disability caused by non-occupational accidents or sickness.



#### Accident benefits

Accident benefits begin with the first days that you're treated by your physician after a disability.



#### Coverage for pregnancies

Sickness benefits (including pregnancy and complications of pregnancy) begin on the eighth day following the first treatment by your physician during a period of disability.



#### Coverage while you're unable to work

Your weekly benefit is equal to the amount in your certificate.



#### Benefits in addition to other time off

Benefits paid in addition to accrued use of vacation, sick leave, and/or earned time.



#### Covers a portion of your paycheck

Benefits you may use to help pay for things like housing, car payments, and utilities.

### Coverage Information

#### All coverage is subject to Prudential's approval of satisfactory evidence of insurability.

This means that, depending on the amount of coverage you apply for and the medical history you disclose in the application, Prudential may order a physical exam, a blood test, an ECG, or medical records from your physician.

**You're considered disabled when Prudential determines that you're:** unable to perform the material and substantial duties of your regular occupation due to your sickness or injury; under the regular care of a doctor; and not working at any job.

#### Your coverage starts on the latest of:

- The first of the month following the date Prudential approves your application, if we require proof of good health; evidence of insurability (EOI) is required; or
- The date you're in active employment. If you're not in active employment on the date coverage would normally begin, your coverage will begin on the date you return to active employment; or
- The first of the month following the date Prudential receives your first premium payment.

## Benefit Schedule and Monthly Premium

Your monthly deduction and weekly benefit depend on your annual salary.

Annual Salary	Weekly Benefit	Monthly Deduction
Less than \$5,999	\$75.00	\$6.50
\$6,000–\$7,999	\$100.00	\$8.66
\$8,000–\$9,999	\$125.00	\$10.84
\$10,000–\$11,999	\$150.00	\$13.00
\$12,000–\$15,999	\$200.00	\$17.35
\$16,000–\$19,999	\$250.00	\$21.70
\$20,000–\$23,499	\$300.00	\$26.08
\$23,500–\$27,499	\$350.00	\$30.40
\$27,500–\$31,499	\$400.00	\$34.66
\$31,500–\$35,499	\$450.00	\$39.00
\$35,500–\$39,499	\$500.00	\$43.34
\$39,500–\$43,499	\$550.00	\$47.68
\$43,500–\$47,499	\$600.00	\$52.00
\$47,500–\$51,499	\$650.00	\$56.34
\$51,500–\$55,499	\$700.00	\$60.00
\$55,500–\$59,499	\$750.00	\$69.34
\$59,500–\$63,499	\$800.00	\$73.68
\$63,500–\$67,499	\$850.00	\$78.00
\$67,500–\$71,499	\$900.00	\$82.34
\$71,500–\$75,499	\$950.00	\$86.68
\$75,500–\$79,499	\$1,000.00	\$91.02
\$79,500–\$83,499	\$1,050.00	\$95.36
\$83,500–\$87,499	\$1,100.00	\$99.70
\$87,500–\$91,499	\$1,150.00	\$104.04
\$91,500–\$95,499	\$1,200.00	\$108.38
\$95,500–\$99,499	\$1,250.00	\$112.72
\$99,500–\$103,499	\$1,300.00	\$117.06
\$103,500–\$107,499	\$1,350.00	\$121.40
\$107,500–\$111,499	\$1,400.00	\$125.74
\$111,500–\$115,499	\$1,450.00	\$130.08
\$115,500–\$119,499	\$1,500.00	\$134.42
\$119,500–\$123,499	\$1,550.00	\$138.76
\$123,500–\$127,499	\$1,600.00	\$143.10
\$127,500–\$131,499	\$1,650.00	\$147.44
\$131,500–\$135,499	\$1,700.00	\$151.78

## Enroll Now



To apply, simply print, complete, and mail the application to:

Insurance Specialists, Inc.  
Administrative Services Center  
305 Carteret Street  
Beaufort, SC 29902

### Please note:

If you're unable to answer "no" to all five health questions on the Short Form Application, you must complete and mail the Long Form Application.

### Have questions?

Call the Plan Agent, Insurance Specialists, Inc., at **1-888-ISI-1959** or email [sales@isi1959.com](mailto:sales@isi1959.com).



## Additional Information

### Pre-existing condition limitation

During the first 6 months of coverage, disabilities due to a pre-existing condition are not covered. A pre-existing condition means any injury or sickness, including pregnancy, for which you have received medical care within the 6-month period before your coverage effective date or date of an increase in coverage.

### Other coverage exclusions

This plan does not cover disability caused by or resulting from: intentionally self-inflicted injury; war or act of war, whether declared or not; the commission of a crime for which you have been convicted; occupational sickness or injury, or any disabilities which begin at the same time or after your occupational sickness or injury; or active participation in a riot.

### Coverage for successive disabilities

If you receive benefits for a disability and recover, and again become disabled for the same reason while covered under this plan, the later disability may be considered as a continuation of the prior disability, if your return to active employment is 14 days or less—removing the need to satisfy the elimination period again. But, the second disability will be considered a new claim if the current disability is unrelated to the prior disability, requiring that you satisfy a new elimination period.

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## Other Provisions

### Group Life and Disability Income Medical Underwriting NOTICE

Thank you for choosing The Prudential Insurance Company of America (Prudential) for your insurance needs. Before we can issue coverage we must review your application/enrollment form. To do this, we need to collect and evaluate personal information about you. This notice is being provided to inform you of certain practices Prudential engages in, and your rights, with regard to your personal information. We would like you to know that: personal information may be collected from persons other than yourself or other individuals, if applicable, proposed for coverage; this personal information, as well as other personal or privileged information subsequently collected by us, may in certain circumstances be disclosed to third parties without authorization; you have a right of access and correction with respect to personal information we collect about you; and upon request from you, we will provide you with a more detailed notice of our information practices and your rights with respect to such information. Should you wish to receive this notice, please contact: The Prudential Insurance Company of America, Group Medical Underwriting, P.O. Box 8796, Philadelphia, PA 19176.

Information regarding your insurability will be treated as confidential. We may, however, make a brief report thereon to MIB Group, Inc., a not-for-profit membership organization of insurance companies, which operates an information exchange on behalf of its members. If you apply to another MIB member company for life, disability, or health insurance coverage, or a claim for benefits is submitted to such a company, MIB, upon request, will supply such company with the information about you in its file. In addition, upon receipt of a request from you, MIB will arrange disclosure of any information in your file. Please contact MIB at 866-692-6901. If you question the accuracy of the information in MIB's file, you may contact MIB and seek a correction in accordance with the procedures set forth in the Federal Fair Credit Reporting Act. The address of MIB's information office is 50 Braintree Hill Park, Suite 400, Braintree, MA 02184.

The cost of insurance is met from premium contributions by Plan participants. The current premium rates are set forth in the enclosed material.

This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services.

**North Carolina Residents: THIS IS NOT A MEDICARE SUPPLEMENT PLAN. If you are eligible for Medicare, review the Guide to Health Insurance for People with Medicare, which is available from the company.**

Group Insurance coverage is issued by The Prudential Insurance Company of America, Newark, NJ. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500.

1 American Payroll Association, Getting Paid in America Survey, 2015.

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