FAQS Fre

Frequently Asked Questions

Disability Income Insurance

If illness or injury prevented you from working, how well would you and your family do without a paycheck? If you are like most, it would be tough to support your lifestyle for any significant length of time. Help protect your income with this Group Disability Income Insurance plan.

Q. Who is eligible for coverage?

A. You are eligible to apply if you are a participating association member, age 59 or under and are actively at work on a full-time basis for at least 20 hours per week.

Q. Does this plan include own occupation protection?

- **A.** Due to a Sickness, or as a direct result of accidental injury:
 - The member is receiving Appropriate Care and Treatment and complying with the requirements of such treatment, and
 - Is unable to earn more than 80% of pre-disability earnings at their Own Occupation.

Q. What is the maximum monthly benefit I can apply for?

A. Members under age 55 who work full time may apply for up to \$12,000 per month in \$100 increments. Members age 55-59 may enroll up to \$10,000.

Please Note: Total disability benefits may not exceed 70% of predisability income.

Q. How long will the benefits last?

- A. The plan offers two maximum benefit durations.
 - Option #1: The later of Your Normal Retirement Age as defined by Social Security or the period shown below:

Age on Date of Your Disability	Benefit Duration
Less than 60	to age 65
61	48 months
62	42 months
63	36 months
64	30 months
65	24 months
66	21 months
67	18 months
68	15 months
69 and over	12 months

- Option #2: Benefits paid for up to 5 years (for accidental injury or sickness).
- Option #3: Benefits paid for up to 2 years (for accidental injury or sickness).

Q. Is there a waiting period before benefits begin?

A. Yes, you may choose from a 60, 90 or 180 day waiting period.

Q. What additional plan benefits are included?

- **A. Survivor benefit:** Your beneficiary will receive a survivor benefit of up to six months of payments if you die while totally disabled and had been disabled and receiving monthly benefits or if you were entitled to receive monthly benefits for the month you die.
 - **Waiver of premium:** If you become totally disabled while receiving monthly benefits, the company will waive your premium payments for as long as you continue to receive benefits. When you stop receiving monthly benefits, premium must again be paid when due.
- Q. Are there limited disability benefits for alcohol, drug or substance abuse, addiction or mental or nervous disorder or diseases?
- **A.** Yes, if you are disabled due to alcohol, drug, substance abuse or addiction, we will limit disability benefits to a lifetime maximum of 24 months.

If you are disabled due to a mental or nervous disorder or disease or other specified conditions, we will limit your disability benefits to a lifetime maximum of 24 months.

Please contact Insurance Specialists, Inc. at 1-888-474-1959 for additional details.

Q. Can I customize my plan with optional benefits?

- **A.** Yes, the following optional benefits are available.
 - **Cost of Living Option (COLA)** We will adjust your benefit amount by an additional 3% if you have been receiving monthly benefits for 12 months, and make additional similar adjustments on up to 9 anniversaries of the first adjustment as long as you continue to recieve monthly benefits.

Adding the COLA option to your plan will increase your premium by 14%.

Q. What is the cost of coverage?

A. To the later of your Normal Retirement Age as defined by social security or the period shown in Option #1 above: Monthly Rate Per \$1,000 Covered Benefit.

Without COLA	Elimination Period		
Age	60 Day	90 Day	180 Day
Under 30	\$9.10	\$7.00	\$5.25
30-34	\$10.92	\$8.40	\$6.30
35-39	\$11.73	\$9.03	\$6.77
40-44	\$18.73	\$14.41	\$10.81
45-49	\$21.20	\$16.31	\$12.23
50-54	\$33.55	\$25.81	\$19.36
55-59	\$35.61	\$27.39	\$20.54
60-64*	\$41.17	\$31.67	\$23.75
65-69*	\$34.99	\$26.92	\$20.19

^{*}Renewal Only Rates.

COLA will be a 14% increase to the rate chosen.

5 YEAR DURATION Monthly Rate Per \$1,000 Covered Benefit

Without COLA	Elimination Period		
Age	60 Day	90 Day	180 Day
Under 30	\$5.42	\$4.17	\$3.54
30-34	\$6.28	\$4.83	\$4.11
35-39	\$8.23	\$6.33	\$5.38
40-44	\$13.00	\$10.00	\$8.50
45-49	\$15.38	\$11.83	\$10.06
50-54	\$28.17	\$21.67	\$18.42
55-59	\$31.63	\$24.33	\$20.68
60-64*	\$43.33	\$33.33	\$28.33
65-69*	\$36.83	\$28.33	\$24.08

^{*}Renewal Only Rates.

COLA will be a 14% increase to the rate chosen

2 YEAR DURATION Monthly Rate Per \$1,000 Covered Benefit

Without COLA	Elimination Period		
Age	60 Day	90 Day	180 Day
Under 30	\$3.25	\$2.50	\$2.13
30-34	\$3.90	\$3.00	\$2.55
35-39	\$4.12	\$3.17	\$2.69
40-44	\$6.07	\$4.67	\$3.97
45-49	\$8.02	\$6.17	\$5.24
50-54	\$10.83	\$8.33	\$7.08
55-59	\$17.77	\$13.67	\$11.62
60-64*	\$26.87	\$20.67	\$17.57
65-69*	\$36.83	\$28.33	\$24.08

^{*}Renewal Only Rates.

COLA will be a 14% increase to the rate chosen

Q. When does the coverage become effective?

A. Your coverage will begin on the 1st of the month following the date your enrollment form is approved and your premium has been paid. You must be actively at work on the date insurance is to take effect; otherwise, the insurance will take effect on the date you return to work. Issuance of coverage or benefit payments may depend on the answers given in the enrollment form.

Q. What are the renewal terms of this coverage?

A. Coverage is renewable to age 70 as long as you are a member, pay your premium when due, you remain actively engaged full time in the duties of your occupation, the group plan remains in force and association continues to participate in the insurance trust.

Q. What conditions are excluded from coverage?

A. This plan will not pay benefits for a disability due to, attempted suicide; an intentionally self-inflicted injury; a war or act of war whether declared or undeclared, rebellion or insurrection; active participation in a riot; the commission of, or attempt to, commit a felony.

We will not pay benefits for a disability that results from a pre-existing condition unless you have been actively at work for at least 12 consecutive months since the date your disability insurance took effect.

A pre-existing condition is defined as a sickness or accidental injury for which you, received medical treatment, consultation, care, or services; took prescription medication or had medications prescribed; in the 6 months before your insurance took effect.

Don't miss out on this important benefit offer.

If you have any questions, please call Insurance Specialists Inc. at **1-888-474-1959**.

Coverage may not be available in all states, please contact Insurance Specialists, Inc. at 1-888-474-1959 for additional details.

Like most insurance policies, MetLife policies contain certain exclusions, waiting periods, reductions, limitations and terms for keeping them inforce. All policies and riders may not be available in all states or at all issue ages. Eligibility is subject to underwriting approval. Please call Insurance Specialists Inc. at 1-888-474-1959 for complete details.

Group Disability Income Insurance provided by Metropolitan Life Insurance Company under policy form #151697-1-G



