

Plan Effective Date: 07/01/2020

Explore the coverage that helps you protect your income and your lifestyle.

What is Voluntary Short Term Disability insurance?

Voluntary Short Term Disability (VSTD) insurance can help you replace a portion of your income during the initial weeks of a Disability.

Eligibility Requirements

Voluntary Short Term Disability:

All Active Full-Time Employees working at least 30 hours per week are eligible to participate.

How is “Disability” defined under the Plan?

For **Standard Earnings Test Definition** with Own Occupation only:

Generally, you are considered disabled and eligible for short term benefits if, due to sickness, pregnancy or accidental injury, for which you are receiving appropriate care and treatment from a Doctor on a continuing basis, you are unable to earn more than 80% of your predisability earnings at your own occupation in your local economy.

For a complete description of this and other requirements that must be met, refer to the Certificate of Insurance provided by your Employer or contact your MetLife benefits administrator with any questions.

What is the benefit amount?

Voluntary Short Term Disability:

The Voluntary Short Term Disability benefit replaces a portion of your predisability earnings, less the income that was actually paid to you for the same Disability from other sources¹ (e.g., state-mandated benefits, no-fault auto laws, sick pay, vacation pay, etc.).

The Benefit amount is 70% of your predisability earnings; subject to the plan’s maximum weekly benefit of \$2,000.

When do benefits begin and how long do they continue?

Voluntary Short Term Disability:

Benefits begin to accrue on the date following the day you complete the elimination period. The elimination period begins on the day you become disabled and is the length of time you must wait while being disabled before you are eligible to receive a benefit. The elimination periods are as follows:

For Injury: 0 days.

For Sickness (includes pregnancy): 7 days.

Benefits continue for as long as you are disabled up to a maximum duration of 13 weeks of Disability.

Your plan’s maximum benefit duration and any specific limitations are described in the Certificate of Insurance provided by your Employer or contact your MetLife benefits administrator with any questions.

**Semi-Monthly Premiums for STD
24 Pay Period**

Weekly Benefit	Employee's Age								
	<30	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65+
\$100	\$2.96	\$3.12	\$2.82	\$3.04	\$3.71	\$4.60	\$5.64	\$6.68	\$8.02
\$150	\$4.43	\$4.67	\$4.23	\$4.56	\$5.57	\$6.90	\$8.46	\$10.02	\$12.02
\$200	\$5.91	\$6.23	\$5.64	\$6.08	\$7.42	\$9.20	\$11.28	\$13.36	\$16.03
\$250	\$7.39	\$7.79	\$7.05	\$7.60	\$9.28	\$11.50	\$14.10	\$16.70	\$20.04
\$300	\$8.87	\$9.35	\$8.46	\$9.12	\$11.13	\$13.80	\$16.92	\$20.04	\$24.05
\$350	\$10.34	\$10.90	\$9.87	\$10.64	\$12.99	\$16.10	\$19.74	\$23.38	\$28.05
\$400	\$11.82	\$12.46	\$11.28	\$12.16	\$14.84	\$18.40	\$22.56	\$26.72	\$32.06
\$450	\$13.30	\$14.02	\$12.69	\$13.68	\$16.70	\$20.70	\$25.38	\$30.06	\$36.07
\$500	\$14.78	\$15.58	\$14.10	\$15.20	\$18.55	\$23.00	\$28.20	\$33.40	\$40.08
\$550	\$16.25	\$17.13	\$15.51	\$16.72	\$20.41	\$25.30	\$31.02	\$36.74	\$44.08
\$600	\$17.73	\$18.69	\$16.92	\$18.24	\$22.26	\$27.60	\$33.84	\$40.08	\$48.09
\$650	\$19.21	\$20.25	\$18.33	\$19.76	\$24.12	\$29.90	\$36.66	\$43.42	\$52.10
\$700	\$20.69	\$21.81	\$19.74	\$21.28	\$25.97	\$32.20	\$39.48	\$46.76	\$56.11
\$750	\$22.16	\$23.36	\$21.15	\$22.80	\$27.83	\$34.50	\$42.30	\$50.10	\$60.11
\$800	\$23.64	\$24.92	\$22.56	\$24.32	\$29.68	\$36.80	\$45.12	\$53.44	\$64.12
\$850	\$25.12	\$26.48	\$23.97	\$25.84	\$31.54	\$39.10	\$47.94	\$56.78	\$68.13
\$900	\$26.60	\$28.04	\$25.38	\$27.36	\$33.39	\$41.40	\$50.76	\$60.12	\$72.14
\$950	\$28.07	\$29.59	\$26.79	\$28.88	\$35.25	\$43.70	\$53.58	\$63.46	\$76.14
\$1,000	\$29.55	\$31.15	\$28.20	\$30.40	\$37.10	\$46.00	\$56.40	\$66.80	\$80.15
\$1,050	\$31.03	\$32.71	\$29.61	\$31.92	\$38.96	\$48.30	\$59.22	\$70.14	\$84.16
\$1,100	\$32.51	\$34.27	\$31.02	\$33.44	\$40.81	\$50.60	\$62.04	\$73.48	\$88.17
\$1,150	\$33.98	\$35.82	\$32.43	\$34.96	\$42.67	\$52.90	\$64.86	\$76.82	\$92.17
\$1,200	\$35.46	\$37.38	\$33.84	\$36.48	\$44.52	\$55.20	\$67.68	\$80.16	\$96.18
\$1,250	\$36.94	\$38.94	\$35.25	\$38.00	\$46.38	\$57.50	\$70.50	\$83.50	\$100.19
\$1,300	\$38.42	\$40.50	\$36.66	\$39.52	\$48.23	\$59.80	\$73.32	\$86.84	\$104.20
\$1,350	\$39.89	\$42.05	\$38.07	\$41.04	\$50.09	\$62.10	\$76.14	\$90.18	\$108.20
\$1,400	\$41.37	\$43.61	\$39.48	\$42.56	\$51.94	\$64.40	\$78.96	\$93.52	\$112.21
\$1,450	\$42.85	\$45.17	\$40.89	\$44.08	\$53.80	\$66.70	\$81.78	\$96.86	\$116.22
\$1,500	\$44.33	\$46.73	\$42.30	\$45.60	\$55.65	\$69.00	\$84.60	\$100.20	\$120.23
\$1,550	\$45.80	\$48.28	\$43.71	\$47.12	\$57.51	\$71.30	\$87.42	\$103.54	\$124.23
\$1,600	\$47.28	\$49.84	\$45.12	\$48.64	\$59.36	\$73.60	\$90.24	\$106.88	\$128.24
\$1,650	\$48.76	\$51.40	\$46.53	\$50.16	\$61.22	\$75.90	\$93.06	\$110.22	\$132.25
\$1,700	\$50.24	\$52.96	\$47.94	\$51.68	\$63.07	\$78.20	\$95.88	\$113.56	\$136.26
\$1,750	\$51.71	\$54.51	\$49.35	\$53.20	\$64.93	\$80.50	\$98.70	\$116.90	\$140.26
\$1,800	\$53.19	\$56.07	\$50.76	\$54.72	\$66.78	\$82.80	\$101.52	\$120.24	\$144.27
\$1,850	\$54.67	\$57.63	\$52.17	\$56.24	\$68.64	\$85.10	\$104.34	\$123.58	\$148.28
\$1,900	\$56.15	\$59.19	\$53.58	\$57.76	\$70.49	\$87.40	\$107.16	\$126.92	\$152.29
\$1,950	\$57.62	\$60.74	\$54.99	\$59.28	\$72.35	\$89.70	\$109.98	\$130.26	\$156.29
\$2,000	\$59.10	\$62.30	\$56.40	\$60.80	\$74.20	\$92.00	\$112.80	\$133.60	\$160.30

Answers to Some Important Questions...

Q. Can I still receive benefits if I return to work part time?

A. Yes. As long as you are disabled and meet the terms of your Disability plan, you may qualify for adjusted Disability benefits.

Your plan offers financial and Rehabilitation incentives designed to help you to return to work when appropriate, even on a part-time basis[when you participate in an approved Rehabilitation Program.

While disabled, you may receive up to 100% of your predisability weekly earnings when combining benefits, Rehabilitation Incentives, other income sources such as family care expense reimbursement, return-to-work earnings and other income benefits.

With the Rehabilitation Incentive you can get a 10% increase in your weekly benefit.

If you work or participate in a rehabilitation program while disabled, following the 4th weekly benefit payment, the Family Care Incentive provides reimbursement up to \$100 per week for eligible expenses.

Q. Are there any exclusions for pre-existing conditions?

A. Yes. Your plan may not cover a disability due to sickness or accidental injury for which you received treatment in the months prior to your participation in the plan. A complete description of the pre-existing condition exclusion is included in the Certificate of Insurance/Summary Plan Description provided by your Employer or contact your MetLife benefits administrator with any questions.

Q. Are there any exclusions to my coverage?

A. Yes. Your plan does not cover any Disability which results from or is caused or contributed to by:

- War, insurrection or rebellion;
- Active participation in a riot;
- Intentionally self-inflicted injury or attempted suicide;
- Committing a felony.

Additionally, no benefits will be payable for any Disability which happens in the course of any work performed you for wages or profit or for which you are eligible to receive benefits under any Workers' Compensation or similar law.

Other limitations or exclusions to your coverage may apply. Please review your Certificate of Insurance provided by your Employer for specific details or contact your MetLife benefits administrator with any questions.

The "Plan Benefits" provides only a brief overview of the VSTD plan. A more complete description of the benefits provisions, conditions, limitations, and exclusions will be included in the Certificate of Insurance. If any discrepancies exist between this information and the legal plan documents, the legal plan documents will govern.

Voluntary Short Term Disability ("VSTD") coverage is provided under a group insurance policy (Form GPNP99) issued to your employer by MetLife. This VSTD coverage terminates when your employment ceases, when you cease to be an eligible employee, when your VSTD contributions cease (if applicable) or upon termination of the group contract by your employer. Like most group insurance policies, MetLife's group policies contain certain exclusions, elimination periods, reductions, limitations and terms for keeping them in force. State variations may apply.

¹ Under certain circumstances, MetLife may estimate the amount of income you may receive from other sources, where permitted to do so.

*Changes have been made to your Plan as of the Amendment Effective Date listed above. Please refer to your Certificate of Insurance/Certificate Rider for more details or contact your MetLife benefits administrator with any questions.

