



FAMILY MATTERS. NO MATTER WHAT.®

Group Short Term Disability Benefit Summary

Designed for the Employees of

Hamilton Wenham Regional School District

ELIGIBILITY & BENEFIT FEATURES

All Full Time Active Employees working a minimum of 20 hour per week

Coverage: Non-Occupational

Elimination Period:

Approved benefits will be paid at the end of the Elimination Period or **refer to Mass. Municipal Disability Addendum below.** (whichever is greater)

Your disability must continue through the elimination period before payments begin. Your benefits become payable on the:

30th day for accident

30th day for illness

First Day Hospitalization: No

Maximum Payment Duration: 22 weeks

Maximum Weekly Benefit: 60 % of your weekly base earnings to a maximum of **\$1,150** , and with a minimum benefit of **\$25 per week**

COST OF COVERAGE

The premium for your coverage: paid by you

ADDITIONAL FEATURES

Offsets at Time of Claim: Benefits may be reduced by payment under Worker's Compensation law, occupational disease law, or similar law, group insurance, SSA, state or Federal Disability, pension, salary or wage continuance plans and Federal old age benefits.

Massachusetts Municipal Disability Addendum: While you are satisfying the disability elimination period as defined within the master policy, you are allowed to use accrued sick time to make up to 100% of your pre-disability earnings. The only requirement for satisfying the elimination period is that you have a loss of ability to perform material duties only.

Once on an approved claim, Boston Mutual will not offset against accrued sick time in determining the payable benefit amount. Further, you may collect any accrued sick time in addition to the claim payment to equal up to 100% of your pre-disability earnings. In no event will you be allowed to collect an excess of 100% of your pre-disability earnings when adding the disability payment and accrued sick pay.

EXCLUSIONS & LIMITATIONS

- We will not cover a disability if it is due to war, declared or not, or any act of war; intentionally self-inflicted injuries, active participation in a riot, attempt to commit or commission of a felony under federal/state law.
- No benefits are payable while incarcerated in a penal or correctional facility for a period of 30 or more consecutive days.
- This coverage is not portable. If your employment is terminated, all coverage is terminated.

This information is a summary of benefits; this summary is not your certificate nor does it constitute coverage for claim. Any discrepancies between this summary and the master policy will be resolved by the language issued in the master policy. For complete details of coverage and availability, please refer to your certificate or contact your benefits administrator.

BOSTON MUTUAL LIFE INSURANCE COMPANY – 120 Royall Street • Canton, MA 02021 • www.bostonmutual.com