

# THE HARTFORD DISABILITY

*If you have an illness or injury and are not able to work, disability insurance will pay a portion of your salary. You must be an active employee who works at least 20 hours per week. You are eligible on your date of hire.*

## Plan Options:

### When it Begins:

| Elimination Pd. | Accident | Illness  |
|-----------------|----------|----------|
| Option 1:       | 0 days   | 3 days   |
| Option 2:       | 14 days  | 14 days  |
| Option 3        | 30 days  | 30 days  |
| Option 4:       | 60 days  | 60 days  |
| Option 5:       | 90 days  | 90 days  |
| Option 6:       | 180 days | 180 days |

### When it Ends:

| Your Options              | Plan Description                                                                                                                                                  |
|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Option 1:<br>Premium Plan | <b>Accident &amp; Illness:</b> Benefits will continue up to social security normal retirement age (SSNRA) or retirement.                                          |
| Option 2:<br>Select Plan  | <b>Accident:</b> Benefits will continue up to social security normal retirement age (SSNRA).<br><b>Illness:</b> Benefits will continue up to 5 years for illness. |

## Key Highlights:

- **Guaranteed Coverage.** *Subject to pre-existing condition limitation.*
- **Benefit Amount Options:** Elect up to 66 2/3% of your monthly earnings, maximum of \$8000. Earnings means wages, salary, not extra compensation like stipends.
- **Disability benefits are paid in addition to Paid Leave:** up to 12 months.
- **Benefits reduce with other income or eligible income:**  
Social Security Disability Insurance, State Teacher Retirement Disability Plans, Worker's Compensation, Other employer-based disability insurance coverage you may have, Unemployment benefits, and Retirement benefits that your employer fully or partially pays for (such as a pension plan)
- **1<sup>st</sup> Day Hospitalization:** Benefits begin immediately after 24 hours or more of hospitalization. It is only offered for plan options 0/3, 14/14 & 30/30.
- **Pre-Existing Condition:** If diagnosed or received care for a disability condition within 3 consecutive months just prior to the effective date of this policy, your benefit will be limited.

## Pre-Existing Conditions:

| Pre-Existing Condition Scenarios                     | Pre-Existing Condition Limitation Coverage                                                                                                                |
|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|
| New Hire                                             | Benefits will only be paid up to 30 days for your pre-existing condition.                                                                                 |
| Open Enrollment:<br>New Application                  | Benefits will only be paid up to 30 days for your pre-existing condition.                                                                                 |
| Open Enrollment:<br>Increasing the Benefit Amount    | The increased benefit amount will only be paid up to 30 days, then the original amount will be paid for the duration of the eligible disability coverage. |
| Open Enrollment:<br>Changing to a Better Plan Option | Pre-existing conditions limitation does not apply when changing plan options. Only the benefit amounts are subject to the pre-existing condition rules.   |

## Filing a Claim:

1. Call: **1-866-547-9124**, M-F, 7:00 am – 7:00 pm CST
2. Have the following information ready:
  - Policy Number **715177**
  - Name, address and other key identification information
  - Name of department and last full day of active work
  - The nature of your claim or leave request
  - Physician's name, address, phone and fax numbers
3. You have up to 12 months to file your disability claim.

## Workplace Benefits Advisors

1. Call: 956-781-7771
2. Visit: 819 N. Veterans Blvd Pharr, TX 78577

*\*Contact us to help file a claim, for questions, and for plan information.*

*\*Please see Hartford's brochures and policy book for plan details, exclusions and limitations.*