



**Standard Insurance Company**  
**Voluntary Long Term Disability Coverage Highlights**  
 The Regents of the University of California  
 Postdoctoral Scholar Benefit Plan

**Voluntary Long Term Disability (LTD) Insurance**

Long Term Disability insurance is designed to pay a monthly benefit to you in the event you cannot work because of a covered illness or injury. This benefit replaces a portion of your income, thus helping you to meet your financial commitments in a time of need. Standard Insurance Company (The Standard) has developed this document to provide you with information about the optional coverage you may select through your employer, The Regents of the University of California Postdoctoral Scholar Benefit Plan.

**Eligibility Requirements**

**Policy # 643383**

**Employee**

- An active Postdoctoral Scholar of the employer who maintains average regular paid time of at least 17.5 hours each week, or an active Postdoctoral Fellow or Paid Direct of the employer who maintains an appointment at a minimum of 43.75% time.
- A citizen or resident of the United States or Canada
- Temporary and seasonal employees, full-time members of the armed forces, leased employees and independent contractors are not eligible

**Premium**

- You pay 100 percent of the premium for this coverage through easy payroll deduction

**Benefit Amount**

<b>Benefit Percentage</b>	Your monthly benefit is 60 percent of the first \$7,500 of your insured predisability earnings reduced by deductible income
<b>Plan Maximum Monthly Benefit</b>	\$4,500
<b>Plan Minimum Monthly Benefit</b>	\$100

Note:

- All late applications (applying 31 days after becoming eligible), requests for coverage increases and reinstatements are subject to medical underwriting approval. Employees eligible but not insured under the prior LTD insurance plan are also subject to medical underwriting approval. To submit a medical history statement online, visit: [www.standard.com/mhs](http://www.standard.com/mhs).

**Disability Needs Calculator**

Your family has a unique set of circumstances and financial demands. To help you figure out the amount of Disability insurance you may need if you become unable to work, The Standard has created a Disability Needs Calculator found at: <http://www.standard.com/calculators/dineeds.html>

**Employee Coverage Effective Date**

To become insured, you must satisfy the eligibility requirements listed above, receive medical underwriting approval (if applicable), and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance. If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Please contact your human resources representative for more information regarding the requirements that must be satisfied for your insurance to become effective.

**Understanding Your Plan Design**

**Benefit Waiting Period** If your claim for LTD benefits is approved by The Standard, benefits become payable after you have been continuously disabled for 180 days and remain disabled. Benefits are not payable during the benefit waiting period.

**Own Occupation Definition of Disability** For the benefit waiting period and the first 24 months for which LTD benefits are paid, you are considered disabled when you are unable as a result of physical disease, injury, pregnancy or mental disorder to perform with reasonable continuity the substantial and material acts necessary to pursue your own occupation and you are not working in your own occupation **OR** as a result of physical disease, injury, pregnancy or mental disorder you are unable to earn 80 percent or more of your indexed predisability earnings while working in your own occupation. You are not disabled merely because your right to perform your own occupation is restricted, including a restriction or loss of license.

**Any Occupation Definition of Disability** After the own occupation period of disability, you will be considered disabled if you are unable, as a result of physical disease, injury, pregnancy or mental disorder, to engage with reasonable continuity in any occupation, **OR** are working in an occupation but as a result of physical disease, injury, pregnancy or mental disorder you are unable to engage with reasonable continuity in that occupation or any occupation.

**Maximum Benefit Period** If you become disabled before age 62, LTD benefits may continue during disability until you reach age 65. If you become disabled at age 62 or older, the benefit duration is determined by your age when disability begins:

<u>Age</u>	<u>Maximum Benefit Period</u>
62	3 years 6 months
63	3 years
64	2 years 6 months
65	2 years
66	1 year 9 months
67	1 year 6 months
68	1 year 3 months
69+	1 year

**Deductible Income** Deductible income includes, but is not limited to:

- Sick pay, annual or personal leave pay, severance pay or other forms of salary continuation (including donated amounts) paid by your employer Benefits you receive or are entitled to receive under any workers' compensation law (other than California Workers' Compensation benefits for permanent total and permanent partial disability) or similar law
- Amounts received under unemployment compensation law
- Disability benefits received from any other group insurance that exceed 80 percent of your indexed predisability earnings when added to your LTD benefit
- Earnings or compensation included in predisability earnings which you receive or have a right to receive while LTD benefits are payable
- Earnings from work activity while you are disabled
- Amounts due from or on behalf of a third party because of your disability, whether by judgment, settlement or other method
- Any amount you receive by compromise, settlement or other method as a result of a claim for any of the above

**Benefit Calculation**

**Example**

The LTD benefit amount is determined by multiplying your insured predisability earnings by the specified benefit percentage. In the example below, there is no deductible income listed. If there was deductible income, you would subtract the amount from the LTD benefit amount of \$2,700. In this example, the LTD benefit amount is 60 percent of insured predisability earnings. If your monthly earnings before becoming disabled were \$4,500, your monthly LTD benefit would be calculated as follows:

Insured predisability earnings	\$4,500
LTD benefit percentage	X 60%
<b>Amount of LTD benefit</b>	<b>\$2,700*</b>

\* Please note your LTD benefit amount may vary based on your own circumstances, including earnings.

**Additional Features**

Please see your human resources representative for additional information about the features and benefits below.

**24 Hour Coverage**

24-hour LTD plans provide coverage for disabilities occurring on or off the job.

**Rehabilitation Plan**

If you agree to participate in a rehabilitation plan that prepares you to return to work (plan must be approved by The Standard), you may be eligible to receive an additional benefit equal to 10 percent of your predisability earnings. When added to any other amount you receive from The Standard, your total benefit cannot exceed the maximum benefit allowed by the policy.

**Reasonable Accommodation Expense Benefit**

If your employer makes an approved work-site modification that enables you to return to work while disabled, The Standard will reimburse your employer up to a pre-approved amount for some or all of the cost of the modification.

**Employee Assistance Program**

Includes an Employee Assistance Program and WorkLife Services to offer support, guidance and resources to help you and your household members resolve personal issues.

**Survivors Benefit**

If you die while LTD benefits are payable, and on the date you die you have been continuously disabled for at least 180 days, a survivors benefit equal to three time your unreduced LTD benefit may be payable (any survivors benefit payable will first be applied to any overpayment of your claim due to The Standard).

**Exclusions**

You are not covered for a disability caused or contributed to by any of the following:

- Your committing or attempting to commit an assault or felony, or your active participation in a violent disorder or riot
- An intentionally self-inflicted injury, while sane or insane
- War or any act of war (declared or undeclared, and any substantial armed conflict between organized forces of a military nature)
- A preexisting condition or the medical or surgical treatment of a preexisting condition unless on the date you become disabled, you have been continuously insured under the group policy for a specified period of time, and you have been actively at work for at least one full day after the end of the exclusion period

**Preexisting Condition Provision**

A preexisting condition is a diagnosed mental or physical condition for which you received medical treatment, care or services or have taken prescribed medication at any time during the preexisting period, or if medical underwriting approval was required for coverage, a mental or physical condition, whether diagnosed or undiagnosed:

- For which you have received medical treatment, care or services or have taken prescribed medication at any time during the preexisting period, or

**Preexisting Condition Provision, Continued**

- That caused symptoms during the preexisting period for which a prudent person would usually seek medical treatment, care or services and
- Which was misrepresented or not disclosed in your application for coverage

**Preexisting Condition Period** The 90-day period just before your insurance becomes effective

**Exclusion Period** 12 months

**Limitations**

LTD benefits are not payable for any period when you are:

- Not under the ongoing care of a physician in the appropriate specialty as determined by The Standard
- Not participating in good faith in a plan, program or course of medical treatment or vocational training or education approved by The Standard, unless your disability prevents you from participating
- Confined for any reason in a penal or correctional institution

In addition, payment of LTD benefits is limited in duration:

- If you reside outside the United States or Canada
- If your disability is caused or contributed to by mental disorders, alcohol use, alcoholism or drug use, musculoskeletal and connective disorders, chronic fatigue conditions or chemical and environmental sensitivities.

**When Benefits End**

LTD benefits end automatically on the earliest of:

- The date you are no longer disabled
- The date your maximum benefit period ends
- The date you die
- The date benefits become payable under any other LTD disability insurance plan under which you become insured through employment during a period of temporary recovery
- The date your work earnings equal or exceed 80 percent of your indexed predisability earnings
- The date you fail to provide proof of continued disability and entitlement to benefits

**When Insurance Ends**

Insurance ends automatically on the earliest of the following:

- The date the last period ends for which a premium was paid (except if premiums are waived while disabled)
- The date your employment terminates
- The date the group policy terminates
- The date you cease to meet the eligibility requirements (coverage may continue for limited periods under certain circumstances)
- If applicable, the date your employer ceases to participate under the group policy

**Group Insurance Certificate**

If coverage becomes effective, and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. Neither the information presented in this summary nor the certificate modifies the group policy or the insurance coverage in any way.

For more information regarding your eligibility, visit Garnett Powers website at:

<https://clients.garnett-powers.com/pd/uc>

**Rates**

Effective January 1, 2017, your monthly rate is \$8.55. Premiums for this coverage will be deducted directly from your paycheck.



### **Standard Insurance Company**

For more than 100 years we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. We have earned a national reputation for quality products and superior service by always striving to do what is right for our customers.

Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group Disability, Life, Dental and Vision insurance and Individual Disability insurance. We provide insurance to more than 24,800 groups, covering over 8 million employees nationwide.\* Our first group policy, written in 1951 and still in force today, stands as a testament to our commitment to building long-term relationships.

To learn more about products from The Standard, Contact your human resources department or visit us at [www.standard.com](http://www.standard.com).

\* As of June 30, 2013, based on internal data developed by Standard Insurance Company.

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