

# Voluntary Short Term Disability (STD)

## INCOME PROTECTION INSURANCE

If you were out of work due to a sickness or accident, would you be able to cover the costs of daily living-not to mention the expenses associated with a disability? ING Employee Benefits' voluntary STD insurance can help replace a portion of your salary in the event of a covered sickness or accident. Following is a short summary of the policy provisions. A complete list of provisions, limitations and exclusions are included in the certificate.

- **Eligibility** - Permanent benefit eligible employees working 20+ hours per week on a regularly scheduled basis who are actively at work during the enrollment.
- **Your Choice of Coverage Amounts** - You can select a benefit amount ranging from \$300 to \$6,000 per month in \$100 increments, not to exceed 60% of basic monthly earnings.
- **Elimination Period** - 14 days
- **Benefit Period** - 90 days
- **Guaranteed Issue** - As a newly eligible employee, you will be eligible to receive 60% of your monthly salary, up to a maximum of \$3,000, without answering any health questions. For coverage over the maximum, you will need to complete an Evidence of Insurability form.
- **Pregnancy** - Pregnancy is considered the same as any other condition if it is not considered a pre-existing condition.
- **Pre-existing condition\***: Disabilities due to pre-existing conditions are not covered for the first 12 months after your certificate effective date. Please refer to the certificate for the exact definition of pre-existing conditions. Any covered disability occurring after the first 12 months will be eligible for standard benefit payment amounts. This provision may vary by state.

**PARTIAL DISABILITY:** Employees experiencing partial disability, as defined in the certificate, are eligible to receive up to their pre-disability earnings minus income made while partially disabled and minus deductible sources of income, provided the maximum benefit period for a disability has not been reached.

**WAIVER OF PREMIUM PROVISION:** Premiums are waived while an individual is receiving disability income benefits payable under this policy, with the exception of the first premium.

\* A condition is considered to be a pre-existing condition if the disability begins in the first 12 months after the certificate effective date and you have received medical treatment, consultation, care, or services, including diagnostic measures, or have taken prescribed drugs or medicines in the 12 months just prior to your effective date of coverage.

# Voluntary Short Term Disability (STD) Rates

Non-Occupational Coverage • 14 / 14, 3 Months • S - Semi-Monthly (24) Rates

Monthly Benefit	Ages 18-49	Ages 50-59	Ages 60+	Monthly Benefit	Ages 18-49	Ages 50-59	Ages 60+
100*	1.10	1.21	1.77	3100	33.95	37.36	54.87
200*	2.19	2.41	3.54	3200	35.04	38.56	56.64
300	3.29	3.62	5.31	3300	36.14	39.77	58.41
400	4.38	4.82	7.08	3400	37.23	40.97	60.18
500	5.48	6.03	8.85	3500	38.33	42.18	61.95
600	6.57	7.23	10.62	3600	39.42	43.38	63.72
700	7.67	8.44	12.39	3700	40.52	44.59	65.49
800	8.76	9.64	14.16	3800	41.61	45.79	67.26
900	9.86	10.85	15.93	3900	42.71	47.00	69.03
1000	10.95	12.05	17.70	4000	43.80	48.20	70.80
1100	12.05	13.26	19.47	4100	44.90	49.41	72.57
1200	13.14	14.46	21.24	4200	45.99	50.61	74.34
1300	14.24	15.67	23.01	4300	47.09	51.82	76.11
1400	15.33	16.87	24.78	4400	48.18	53.02	77.88
1500	16.43	18.08	26.55	4500	49.28	54.23	79.65
1600	17.52	19.28	28.32	4600	50.37	55.43	81.42
1700	18.62	20.49	30.09	4700	51.47	56.64	83.19
1800	19.71	21.69	31.86	4800	52.56	57.84	84.96
1900	20.81	22.90	33.63	4900	53.66	59.05	86.73
2000	21.90	24.10	35.40	5000	54.75	60.25	88.50
2100	23.00	25.31	37.17	5100	55.85	61.46	90.27
2200	24.09	26.51	38.94	5200	56.94	62.66	92.04
2300	25.19	27.72	40.71	5300	58.04	63.87	93.81
2400	26.28	28.92	42.48	5400	59.13	65.07	95.58
2500	27.38	30.13	44.25	5500	60.23	66.28	97.35
2600	28.47	31.33	46.02	5600	61.32	67.48	99.12
2700	29.57	32.54	47.79	5700	62.42	68.69	100.89
2800	30.66	33.74	49.56	5800	63.51	69.89	102.66
2900	31.76	34.95	51.33	5900	64.61	71.10	104.43
3000	32.85	36.15	53.10	6000	65.70	72.30	106.20

\* Benefit level available for increases only