

# Rochester Regional Health Summary of Benefits

## Long-Term Disability Insurance

### Group disability insurance offers income protection

Disability is often called the “forgotten risk,” as few employees think about how they would survive financially with no earned income. The impact of a disabling illness or injury, both financially and emotionally, is devastating.

While health insurance may cover most medical bills, daily living expenses such as rent or mortgage, car payments, and utilities continue. Disability insurance provides partial income replacement if you are unable to work due to a qualifying illness or injury. An employee generally begins with what is considered a short-term disability for a period of 13 or 26 weeks. If the illness or injury extends beyond that period it becomes long-term disability.

<b>Eligibility</b>	All eligible employees, excluding Physicians, Senior Vice Presidents and above working a minimum of 30 regularly scheduled hours per week	
<b>Waiting Period</b>	You are eligible on the first of the month coincident with or next following date of hire.	
<b>Benefit</b>	<b>Core LTD Coverage:</b> The Core LTD option is employer-paid. If you become disabled (as defined in the plan) and remain disabled through the elimination period, the core plan benefit pays 40% of your monthly covered earnings, less other deductible sources of income, such as Social Security and workers compensation (see your plan booklet for details). The maximum monthly benefit is \$1,500.	
	<b>Buy-Up LTD Coverage:</b> The Buy-Up LTD option is paid for by you. You can elect a higher level of coverage or “buy up” from your Core LTD plan. If you purchase this coverage, become disabled (as defined in the plan), and remain disabled through the elimination period, you will receive 60% of your monthly covered earnings, less other deductible sources of income, such as Social Security and workers compensation (see your plan booklet for details). The maximum monthly benefit is \$10,000	
<b>Elimination Period</b>	Benefits are payable after a period of 180 consecutive days of disability.	
<b>Definition of Disability</b>	You will be considered disabled if, during the elimination period and the next 24 months of disability, you are unable to perform the duties of your “own occupation” and thereafter, you are unable to perform the duties of “any occupation.” Refer to your certificate of coverage for definitions of “own occupation” and “any occupation.”	
<b>Maximum Benefit Period</b>	<b>Age at Disability</b>	<b>Maximum Benefit Period</b>
	Less than age 60-----	Greater of SSNRA* or to age 65 (but not less than 5 years)
	60 -----	60 months
	61 -----	48 months
	62 -----	42 months
	63 -----	36 months
	64 -----	30 months
	65 -----	24 months
	66 -----	21 months
	67 -----	18 months
68 -----	15 months	
69 and over -----	12 months	

This brochure is a general description of coverage and/or services offered. See your policy or service contract for actual terms and conditions. Group products and services are offered by Liberty Life Assurance Company of Boston, a Liberty Mutual company. Home Office: Boston, MA. 11/14



\*SSNRA means the Social Security Normal Retirement Age as figured by the 1983 amendment to the Social Security Act and any subsequent amendments.

<b>Year of Birth</b>	<b>Normal Retirement Age</b>
Before 1938 -----	65
1938 -----	65 and 2 months
1939 -----	65 and 4 months
1940 -----	65 and 6 months
1941 -----	65 and 8 months
1942 -----	65 and 10 months
1943-1954 -----	66
1955 -----	66 and 2 months
1956 -----	66 and 4 months
1957 -----	66 and 6 months
1958 -----	66 and 8 months
1959 -----	66 and 10 months
1960 and after -----	67

**Successive Disability** If you become disabled for the same condition within six months following your prior disability, your benefits will continue under the same claim.

**Survivor Benefit** A lump-sum payment, equal to three months of benefits paid, to an eligible survivor or estate if you are receiving a benefit and have been disabled for at least 180 days.

**MyLibertyAssist®** As an employee covered under your employer’s group long-term disability policy issued by Liberty Life Assurance Company of Boston, you are eligible for MyLibertyAssist Employee Assistance Program (EAP) provided by Bensinger, DuPont & Associates. These benefits include financial, legal, and family services and are available to you and your immediate family members.

Please Note: Taxability will vary based on election and employer and employee contributions. Evidence of Insurability may be required. Pre-existing condition exclusions may affect the payment of benefits. Please see your Human Resources Department or Benefits Department for additional information.