

PERTH AMBOY BOARD OF EDUCATION
178 BARRACKS ST
PERTH AMBOY, NJ 08861



**Learn about your
benefits: Important
information inside!**

You have 31 days to enroll.

Perth Amboy Board of Education

NEW HIRE

**Don't miss your chance:
Get valuable financial protection now!**

Your benefits package is an important part of your total compensation.

Perth Amboy Board of Education is offering you this coverage:

- Long Term Disability Insurance

Please see your Plan Administrator for enrollment details

You have 31 days to enroll.

Long Term Disability Insurance



Long Term Disability Insurance

can replace part of your income if a disability keeps you out of work for a long period of time.

Your employer has automatically enrolled you in this important coverage. To opt out, submit the form in this booklet. If you opt out now, you'll have to answer medical questions to get this coverage later.

How does it work?

This coverage can pay a monthly benefit if you have a covered illness or injury and you can't work for a few months — or even longer.

You're generally considered disabled if you're unable to do important parts of your job — and your income suffers as a result.

Why is this coverage so valuable?

You can use the money however you choose. It can help you pay for your rent or mortgage, groceries, out-of-pocket medical expenses and more.

What's covered?

This insurance may cover a variety of conditions and injuries. Here are Unum's top reasons for long term disability claims:¹

- Cancer
- Back disorders
- Injuries and poison
- Cardiovascular
- Joint disorders

This plan does not cover pre-existing conditions. See the disclosure section to learn more.

Consider your monthly expenses

	Food	\$ _____
	Transportation (gas, car payments, repairs)	_____
	Child care/elder care	_____
	Mortgage/rent	_____
	Utilities (electric, water, cable, phone)	_____
	Medical costs (co-pays, medications)	_____
	Insurance (health, life, car, home)	_____
	Total monthly expenses	\$ _____

What else is included?

Worldwide emergency travel assistance

One phone call gets you and your family immediate help anywhere in the world, as long as you're traveling 100 or more miles from home. However, a spouse traveling on business for his or her employer is not covered.

Survivor benefit

If you die while you've been disabled and receiving benefits for at least 180 days, your family could get a benefit equal to 3 months of your gross disability payment.

Waiver of premium

If you're disabled and receiving benefit payments, Unum waives your cost until you return to work.

¹ Unum internal data, 2015. Note: Causes are listed in ranked order.



Long Term Disability Insurance

How much coverage can I get?

You*	<p>You are eligible for coverage if you are an active employee in the United States working a minimum of 30 hours per week.</p> <p>Coverage amounts Cover 60% of your monthly income, up to a maximum payment of \$10,000. The monthly benefit may be reduced or offset by other sources of income.</p> <p><small>*See the Legal Disclosures in the back of this booklet for more information.</small></p>
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If you don't sign up now but decide to apply later, you may have to answer medical questions.

Elimination period (EP)

Your elimination period is 90 days. This is the number of days that must pass after a covered accident or illness before you can begin to receive benefits.

Benefit duration (BD)

This is the maximum length of time you can receive benefits while you're disabled. You can receive benefits up to the Social Security (SS) normal retirement age.

Your cost for coverage

- Use \$200,000 if your annual earnings exceed this amount. This is the maximum coverage amount offered in this plan.
- Multiply by your rate. Use the rate table to find the rate based on your age.

(Choose the age you will be when your coverage becomes effective. See your plan administrator for your plan effective date.)

Disability worksheet				
1 Enter your annual earnings and calculate your maximum monthly benefit available.				
\$ _____ ÷ 12 = \$ _____	x	60% =	=	\$ _____
<small>Your annual earnings</small>	<small>Your monthly earnings</small>	<small>(Max % of income covered)</small>		<small>Max monthly benefit available</small>
2 Calculate your cost per paycheck				
\$ _____ ÷ 100 = \$ _____	x	\$ _____ =	\$ _____ ÷ 10 =	\$ _____
<small>Your annual earnings</small>		<small>Rate</small>	<small>Number of paychecks per year</small>	<small>Total cost per paycheck</small>

Age	Rates
<25	\$0.180
25 - 29	\$0.180
30 - 34	\$0.190
35 - 39	\$0.220
40 - 44	\$0.300
45 - 49	\$0.420
50 - 54	\$0.620
55 - 59	\$0.800
60 - 64	\$0.840
65 - 69	\$0.890
70+	\$0.890

Billed amount may vary slightly.



A series of horizontal dotted lines spanning the width of the page, intended for writing notes.



Long Term Disability Insurance

Active employee

You are considered in active employment, if on the day you apply for coverage, you are being paid (regularly by Perth Ambly Board of Education for the required minimum hours each week and you are performing the material and substantial duties of your regular occupation.

Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Benefit duration (BD)

The duration of your benefit payments is based on your age when your disability occurs. Your Long Term Disability benefits are payable while you continue to meet the definition of disability. Please refer to your plan document for the duration of benefits under this policy.

Definition of disability

You are considered disabled when Unum determines that: You are limited from performing the material and substantial duties of your regular occupation due to sickness or injury; and You have a 20% or more loss of indexed monthly earnings due to the same sickness or injury.

After 24 months, you are considered disabled when Unum determines that due to the same sickness or injury, you are unable to perform the duties of any gainful occupation for which you are reasonably fitted by education, training or experience.

You must be under the regular care of a physician in order to be considered disabled. The loss of a professional or occupational license or certification does not, in itself, constitute disability.

"Substantial and material acts" means the important tasks, functions and operations that are generally required by employers from those engaged in your usual occupation and that cannot be reasonably omitted or modified.

Unless the policy specifies otherwise, as part of the disability claims evaluation process, Unum will evaluate your occupation based on how it is normally performed in the national economy, not how work is performed for a specific employer, at a specific location or in a specific region.

Pre-existing conditions

You have a pre-existing condition if: You received medical treatment, consultation, care or services including diagnostic measures for the condition, or took prescribed drugs or medicines for it in the 3 months just prior to your effective date of coverage; and The disability begins in the first 12 months after your effective date of coverage.

Deductible sources of income

Your disability benefit may be reduced by deductible sources of income and any earnings you have while you are disabled, including such items as group disability benefits or other amounts you receive or are entitled to receive:

- Workers' compensation or similar occupational benefit laws, including a temporary disability benefit under a workers' compensation law
- State compulsory benefit laws
- Other group insurance plans
- A group plan sponsored by your employer
- Governmental retirement system
- Salary continuation or sick leave plans, if applicable
- Retirement payments
- Social Security or similar governmental programs

Exclusions and limitations

Your plan does not cover any disabilities caused by, contributed to by, or resulting from you: Intentionally self-inflicted injuries; Active participation in a riot; Loss of a professional license, occupational license or certification; Participation in a felony or which you have been convicted; or Pre-existing conditions (See the disclosure section to learn more).

Your plan will not cover a disability due to war, declared, or undeclared, or any act of war. Unum will not pay a benefit for any period of disability during which you are incarcerated. The lifetime cumulative maximum benefit for all disabilities due to mental illness and disabilities is 24 months. Only 24 months of benefits will be paid for any combination of such disabilities even if the disabilities are not continuous and/or are not related. Payments can continue beyond 24 months only if you are confined to a hospital or institution as a result of the disability.

Termination of coverage

Your coverage under the policy ends on the earliest of the following: The date the policy or plan is cancelled; The date you no longer are in an eligible group; The date your eligible group is no longer covered; The last day of the period for which you made any required contributions; The last day you are in active employment except as provided under the covered layoff or leave of absence provision.

Unum will provide coverage for a payable claim that occurs while you are covered under the policy or plan. Social Security advocacy services are provided by GENEX Services, Inc. or The Advocate Group, LLC. Referral to one of our advocacy partners is determined by Unum. Worldwide emergency travel assistance services, provided by Assist America, Inc., are available with select Unum insurance offerings. Terms and availability of service are subject to change and prior notification requirements. Services are not valid after coverage terminates. Please contact your Unum representative for details. This information is not intended to be a complete description of the insurance coverage available. The policy or its provisions may vary or be unavailable in some states. The policy has exclusions and limitations which may affect any benefits payable. For complete details of coverage and availability, please refer to Policy Form C.F.F.-1 et al. or contact your Unum representative. Some states may require comprehensive medical coverage before purchasing group critical illness insurance. Unum Life Insurance Company of America, Portland, Maine © 2019 Unum Group. All rights reserved. Unum is a registered trademark and marketing brand of Unum Group and its insuring subsidiaries.



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THIS IS NOT AN APPLICATION FOR INSURANCE: This is an enrollment form. Please complete this entire form to ensure a smooth enrollment. If you need assistance, please contact your plan administrator.



Perth Amboy Board of Education

Complete your personal information

First name (please print)	M. initial	Last name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Social Security Number	Gender	Date of birth (mm-dd-yyyy)	Original hire date (mm-dd-yyyy)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Annual salary	Hours worked per week	Occupation	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Long Term Disability Insurance — AUTO ENROLLMENT

474033

Your enrollment will be automatic.

This plan provides a 60% benefit.

To calculate your cost per paycheck, refer to the disability worksheet under "Calculate your costs".

If you do not want Long Term Disability coverage, check the box under "SIGN AND CERTIFY."

Your actual billed amount may vary slightly.

474033

Long Term Disability Insurance — SIGN AND CERTIFY

I DO NOT want Long Term Disability Insurance.

I understand that if I elect coverage in the future, I may need to complete evidence of insurability relative to my health status in order for Unum to determine my eligibility for coverage.

Signature _____

Date ____/____/____

Return forms to: plan administrator

Delayed effective date of coverage

Insurance coverage will be delayed if you are not an active employee because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

Underwritten by: Unum Life Insurance Company of America, Portland, Maine
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1. The first part of the document is a list of names and addresses of the members of the committee.

2. The second part of the document is a list of names and addresses of the members of the committee.

3. The third part of the document is a list of names and addresses of the members of the committee.

4. The fourth part of the document is a list of names and addresses of the members of the committee.

5. The fifth part of the document is a list of names and addresses of the members of the committee.



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