



## Voluntary Group Short-Term Disability Insurance

### Enrollment Effective January 1, 2024

The City of Georgetown is offering a Voluntary Group Short Term Disability plan, underwritten by Madison National Life Insurance Company, Inc and serviced by Ochs. Short-Term disability is intended to protect your income for a short duration in case you become ill or injured. If you are currently enrolled and are eligible to increase your amount or waived as a new hire and electing to enroll, you may increase your benefit amount with proof of good health is required. If you are a new hire and are applying within 31 days of becoming eligible, proof of good health is not required.

#### Choice of Benefit Amount

You may elect a benefit in \$50 increments, up to 60% of your basic weekly earnings, to a maximum weekly benefit of \$1,500. Minimum election is \$100.

#### When Benefits Begin

Benefit payments will begin after one of the following timeframes:

For a covered injury: 7 calendar days

For a covered sickness (including pregnancy): 7 calendar days

#### When Benefits Ends

Commencing at the end of the Elimination Period and continuing for the lesser of 12 weeks or until Long Term Disability Benefits commence, whichever comes first.

#### Earning Income While Disabled

Benefits are reduced by other income you may receive during a disability, including Social Security or a State Retirement Disability benefit plan. See your certificate of insurance for details.

#### Annual Enrollment Period

During your annual enrollment period, evidence of insurability will be required for all increases. The pre-existing condition exclusion applies to all amounts elected during the annual enrollment period.

#### Pre-Existing Conditions

Definition: A pre-existing condition is a condition for which you have consulted a medical provider or received medical treatment or services during the 3-month period prior to your effective date of coverage.

**Coverage under this plan:** You cannot receive benefits due to a pre-existing condition until you have been continuously covered under the group policy for at least 12 months and been actively at work for at least one day after the end of the 12 months.

Rate per \$10 of Weekly Benefit	
Age	Rate
0 – 49	\$0.413
50 – 54	\$0.552
55 – 99	\$0.759
60 – 99	\$0.862

Short Term Disability Calculation	Calculation Example	Your Math
Enter your basic weekly salary (yearly salary divided by 52).	$\$68,000 / 52 = \$1,307$	_____
Multiply the amount above by 0.60 – not to exceed the maximum weekly benefit amount of <b>\$1,500</b> .	$\$1,307 \times .60 = \$784$	_____
Enter the amount above rounded to the lowest \$50.00 increment and divide by 10.	$\$750 / 10 = \$75$	_____
Multiply the amount above by the rate in the table above for your age. <i>Example assumes age 35</i>	$\$75 \times \$0.413 = \$30.96$	_____
Divide the amount above by 2 and you will have your semi-monthly payroll deduction Your rate will be reevaluated annually according to your attained age on each subsequent policy anniversary.	$\$30.96 / 2 = \$15.48$	_____

DISCLAIMER: This is a brief description of coverage and is not a contract. Read your group certificate carefully for exact terms and conditions. You're welcome to request a full copy of the plan certificate through your employer