



## Voluntary Short Term Disability (STD) Insurance

Short Term Disability insurance pays a weekly benefit in the event you cannot work because of a covered illness or injury. An STD benefit replaces a portion of your weekly income, providing funds directly to you to help pay your bills and living expenses. Standard Insurance Company (The Standard) has developed this document to provide you with information about the optional coverage you may select through the Government of the District of Columbia.

## Eligibility Requirements

- Employee**
- An active employee of the Government of the District of Columbia who is in a permanent bargaining employee and non-bargaining executive level, or a full-time or part-time permanent employee.
  - Actively working at least 20 hours each week
  - 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% of the premium for this coverage through easy payroll deduction

## Benefit Amount and Duration

- Benefit Percentage** Your weekly STD benefit is 66 <sup>2</sup>/<sub>3</sub>% of the first \$2,078 of your weekly insured predisability earnings, reduced by deductible income
- Plan Maximum Weekly Benefit** \$1,385
- Plan Minimum Weekly Benefit** \$15
- Maximum Benefit Period** 180 days. However, STD benefits will end on the date Long Term Disability benefits become payable to you under a group plan provided by your employer, even if that occurs before the 180 days.

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 STD insurance plan are also subject to medical underwriting approval. To submit a medical history statement online, visit: [myeoi.standard.com/641332](http://myeoi.standard.com/641332).
- During the Government of the District of Columbia's annual open enrollment period, if you are not currently enrolled, you may elect coverage without having to submit evidence of insurability.

## Family Status Change Privilege

In the event of a family status change, you may enroll in coverage without having to submit evidence of insurability if you enroll within 31 days of your family status change. Family status change means any of the following events:

- Your marriage or divorce or legal separation
- The birth of your child
- The adoption of a child by you
- The death of your spouse and/or child
- The commencement or termination of your spouse's employment
- A change in employment from full-time to part-time by your spouse

**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 STD Benefits is approved by The Standard, benefits become payable after you have served continuously the applicable days noted below for your disability and you remain disabled. Benefits are not payable during the benefit waiting period.

Accidental Injury After 20 days

Physical disease, pregnancy or mental disorder After 20 days

Note: If you do not apply for this STD coverage within 31 days of becoming eligible, your benefit waiting period for physical disease, pregnancy or mental disorder will be 60 days if you become disabled during the first 12 months after your coverage takes effect.

**Definition of Disability**

You will be considered disabled if, as a result of physical disease, injury, pregnancy or mental disorder:

- You are unable to perform with reasonable continuity the material duties of your own occupation, and
- You suffer a loss of at least 20% in your predisability earnings when 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.

**Deductible Income**

Deductible income is income you receive or are eligible to receive while STD benefits are payable. 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 that exceeds 100% of your indexed predisability earnings when added to your STD benefit
- Amounts under an unemployment compensation law
- Amounts because of your disability under any other group insurance
- Disability or retirement benefits under your employer's retirement plan
- Amounts under any state disability income benefit law or similar law
- Earnings from work activity while you are disabled, plus the earnings you could receive if you worked as much as your disability allows
- Earnings or compensation included in your predisability earnings which you receive or are eligible to receive while STD benefits are payable
- 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

**Additional Features**

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

**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 preapproved amount for some or all of the cost of the modification.

**Exclusions**

Subject to state variations, 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)
- The loss of your professional or occupational license or certification

**Limitations**

STD 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
- Able to work and earn at least 20% of your predisability earnings in your own occupation, but you elect not to work
- Eligible to receive benefits for your disability under a workers' compensation law or similar law

**When Benefits End**

STD 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 disability insurance plan under which you become insured through employment during a period of temporary recovery
- The date you fail to provide proof of continued disability and entitlement to benefits
- If applicable, the date long term disability benefits become payable to you under a long term disability plan

**When Insurance Ends**

Insurance ends automatically on the earliest of the following:

- The date the last period ends for which a premium was paid
- The date your employment terminates
- The date the group policy terminates
- The date you cease to meet the eligibility requirements (insurance 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 may view your group insurance certificate containing a detailed description of the insurance coverage including the definitions, exclusions, limitations, reductions and terminating events on your employer's website. 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.

**Rates**

If you have questions regarding how to determine your earnings, please contact your human resources representative. Premiums for this coverage will be deducted directly from your paycheck.

<b>Your Age and Salary</b> (On last January 1)	<b>Biweekly Rate</b> (Per \$100 of monthly benefit)
<50	\$0.470
50+	\$0.610

To calculate your biweekly payroll deduction, use the formula indicated below:

1. Enter your average monthly earnings, not to exceed \$9,000, on Line 1. Line 1: \_\_\_\_\_
2. Multiply Line 1 by 0.6667 to determine your monthly benefit. Line 2: \_\_\_\_\_
3. Select your rate from the rate table and divide this by 100. Line 3: \_\_\_\_\_
4. Multiply Line 2 by the amount entered on Line 3. Line 4: \_\_\_\_\_

The amount shown on Line 4 is your estimated biweekly payroll deduction.



### **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. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at [standard.com](http://standard.com).

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

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GP399-STD, GP 899-STD, GP309-STD,  
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