VACORP Hybrid Disability Plan offered by Standard Insurance Company (The Standard‡)

Handbook for employees in the VRS Hybrid Retirement Plan whose school division or political subdivision participates in the The Standard plan

114406VAMENABS Rev. 10/26

VACORP Hybrid Disability Plan offered by The Standard provides some income protection if you can't work because of physical disease, mental disorder, injury or pregnancy. You are enrolled in this program because your Employer opted out of the state disability program. The VACORP Hybrid Disability Plan offered by The Standard is comparable and meets all requirements of Title 51.1 of the Code of Virginia.

Note: The information contained in this handbook is intended to be general information. It is not complete in all details and does not supersede or replace any plan summary, certificate of insurance or the short-term disability program document and the long-term disability group policy contract. For additional information, please contact your human resources office.

For questions related to claims

For generic claim questions:
Visit: hybriddisability@standard.com

For specific claim questions:
Call or Text: 1-844-404-2111

For questions related to billing:
Visit: billing-hybriddisability@riskprograms.com
Call: 1-844-986-2705

Introduction to VACORP Hybrid Disability Plan offered by The Standard

Income protection if you can't work

VACORP Hybrid Disability Plan offered by The Standard provides some income protection if you can't work because of a physical disease, mental disorder, injury or pregnancy. Benefits of this The Standard plan include:

- Short-term and long-term disability coverage for total and partial disabilities.
- Transitional rehabilitation plans to help you return to work if you are able.
- Free advocacy services to assist you in applying for Social Security Disability Insurance (SSDI) benefits.
- Additional benefits for severely disabled individuals.

What is a disability?

A disability is a condition that prevents you from performing the material duties of your job for a short or extended period of time. The disability may be non-work related or work related. A work-related disability is the result of an illness or injury that occurs on the job and for which workers' compensation is payable. The plan covers partial and total disabilities. If you have a partial disability, you have the capacity to perform some work, such as working part-time in your current job or in a different position. If you have a total disability, you are unable to work at all.

Plan eligibility

If you were hired and a member of the Hybrid Retirement Plan on or after January 1, 2014, and met the disability plan member definition and active work requirement, you are covered under VACORP Hybrid Disability Plan offered by The Standard as addressed below.

You are a member if you are a U.S. or Canadian citizen or resident and are actively at work at least the minimum hours per week required by your employer for coverage and are a:

- Teacher or other employee of a local public school division.
- General employee of a VRS-participating political subdivision such as a city, county, town, authority or commission.
- Local law enforcement officer, firefighter or emergency medical technician if your employer does not provide enhanced hazardous duty benefits.

Member excludes a temporary or seasonal employee, a fulltime member of the armed forces of any country, a leased employee or an independent contractor.

If you were hired before January 1, 2014, and elected to transfer to the Hybrid Retirement Plan from the VRS Plan 1 or the VRS Plan 2, your coverage in the plan and in the hybrid disability plan was effective July 1, 2014, assuming you met the member and active work requirements. If you left employment and took a refund of your Plan 1 or Plan 2 member contributions and interest, or withdrew your full account balance from an ORP authorized or administered by VRS, you will be rehired under the Hybrid Retirement Plan if you return to a position covered under the plan.

Contact your human resources office for more information about your employer's policies.

You are not eligible for VACORP Hybrid Disability Plan if:

- You are a state employee.
- You are a member of the State Police Officers' Retirement System (SPORS) or the Virginia Law Officers' Retirement System (VaLORS).
- You are a local law enforcement officer, firefighter or emergency medical technician covered under enhanced hazardous duty benefits.
- You are a member of the Judicial Retirement System appointed or elected to an original term before January 1, 2014.

Visit varetire.org/hybrid for more information about your retirement plan and disability coverage.

Short-term disability eligibility

To be eligible for short-term disability, you must meet the definition of a member as described above and must be actively at work as required by your employer. Your employer must have also opted into the VACORP Hybrid Disability Plan offered by The Standard. For a disability that is work related, you are eligible for coverage on your first day as a member. For a nonoccupational disability, you are eligible for coverage the first day after one year of continuous employment with your current employer.

Long-term disability eligibility

To be eligible for long-term disability, you must meet the definition of a member as described above and must be actively at work as required by your employer. Your employer must have also opted into the VACORP Hybrid Disability Plan offered by The Standard. For any disability, you are eligible for coverage the first day after one year of continuous employment with your current employer.

If you change jobs

If you move to a position with another Virginia state or local government employer providing this or a comparable disability program, you will be required to satisfy a new oneyear eligibility waiting period for nonoccupational (not work related) short-term disability coverage and a new five-year eligibility period for higher income replacement levels beginning with your new hire date. This also applies if you leave covered employment and then return to a position eligible for this benefit with another employer.

If you leave covered employment and then return to your former position after a bona fide* break in service, you will be required to satisfy a new one-year waiting period for nonoccupational short-term disability coverage and a new five-year eligibility period for higher income replacement levels beginning with your subsequent hire date.

If you purchase prior service

If you purchase prior public service, you will receive credit for this service toward your retirement and other benefits under the defined benefit component of your plan. However, prior service credit does not count toward satisfying the one-year waiting period for non-workrelated short-term disability and the five-year eligibility period for higher income replacement levels.

If you return to your former position before the end of a bona fide* break in service, you will be considered continuously employed in your current position. You will resume continuous participation in the plan toward the one-year waiting period for nonoccupational short-term disability and the five-year eligibility period for higher income replacement levels. Or if you satisfied these qualifying periods before you left your position, you will not be required to satisfy them again.

*What is a bona fide break in service?

A bona fide break in service is a break of at least one full calendar month from your last day of employment that occurs over a period you normally would work. Periods of leave with or without pay and summer breaks do not count toward satisfying this break in service.

Your responsibilities

Along with your employer and The Standard, you play an important role in ensuring you receive the benefits to which you are entitled in a timely manner. Your responsibilities include:

- Understanding your benefits and how you qualify for them.
- Contacting your employer and The Standard as soon as you become disabled or know when you will be out. However, claims should not be filed more than four weeks before you are scheduled to be out.
- Authorizing your licensed treating health care professional to release your medical information to The Standard.
- Ensuring The Standard receives medical information in a timely manner.
- Reporting any changes in your disability to your human resources office and The Standard immediately.
- Applying for workers' compensation benefits if your disability is work related.
- Applying for Social Security Disability Insurance benefits if you are eligible.
- Reporting any outside income or other benefits you may receive for the same disability to The Standard and your employer, as this other income may impact your disability payment amount.
- Cooperating with a transitional or rehabilitation plan if one is arranged as part of your return to work.

If you move to another employer or leave your job and then return to covered employment

If you move to another school division or political subdivision providing this coverage or VLDP coverage, you will be required to satisfy new eligibility periods for nonoccupational disability and higher income replacement levels. This also applies if you leave and then return to your former position after a bona fide break in service. A bona fide break in service is a break of at least one full calendar month from your last day of employment over a period you normally would work.

What to do if I:

Am sick, injured or having a minor procedure and will be out for several days?
Check with your human resources office about your employer's leave policies during periods of disability. If you are out for more than seven consecutive calendar days, you may file a claim for short-term disability through The Standard. You must first satisfy a one-year eligibility waiting period with your current employer before you are eligible for nonoccupational coverage. Your eligibility for work-related disability coverage begins upon employment. The short-term disability benefit begins on the eighth day of your disability. Ask your human resources department how your coverage may change if you change employers or terminate employment.

Am ill or injured and will be out for a while?
Notify your employer and file a claim for short-term disability with The Standard as soon as possible. Your human resources office, a family member or friend may file a claim on your behalf.

Am having a medical procedure or know my due date if I am pregnant?
As soon as you know when you expect to be out, let your employer know and call The Standard to start the claim process. You do not need to wait until the seven-calendar-day benefit waiting period to file a claim. For maternity, it is recommended to file your claim no earlier than four weeks before your due date unless you are disabled earlier for medical reasons.

Am not getting better?
If your condition does not improve or worsens, you and your licensed treating health care professional should contact The Standard. Your human resources office, a family member or friend can coordinate with your doctor's office and update The Standard on your behalf. If your disability continues beyond 125 workdays, you may be placed on long-term disability, as determined by The Standard.

Suffer a work-related illness or injury?
To qualify for a work-related benefit, your illness or injury must be considered compensable under the Virginia Workers' Compensation Act. If you receive a workers' compensation award or settlement, your disability benefit will be offset by your workers' compensation benefit or settlement amount.

Am on disability and eligible to retire?
You can apply for service retirement at any time unless you are receiving workers' compensation benefits. Once you reach normal retirement age under the Virginia Hybrid Retirement Plan, your short-term disability (STD) benefits end. You are not eligible to apply for VRS disability retirement.

Disability or retirement benefits under the retirement program will reduce the long-term disability benefit payable. Please note, once the disability benefits are no longer payable, you must service retire to continue to receive some type of monthly benefit.

File a claim and my claim is denied?
You will receive a call and letter from The Standard. If your claim is denied, the letter will include information on the appeal process.

Have questions about my benefits?
This handbook describes some general questions about the disability plans from The Standard. If you have additional questions, please refer to your Certificate of Insurance or contact your human resources office.

Applying for disability benefits

Notice of a claim must be given to The Standard within 30 days after a covered loss starts, or as soon as reasonably possible. Due Written Proof of Disability must be given to The Standard within 90 days after such loss.

File your claim by phone

After you tell your employer you're going to be out of work, call The Standard toll free at **1-844-404-2111**. Call The Standard as soon as you know you'll be missing work or if you're already off work.

When you call, have this information ready so The Standard can get your claim started quickly:

- Your address and phone number
- Your Social Security number and employee ID number
- Your doctor's name, phone and fax number
- The reason you can't work
- Your job title and work hours
- Your last day, or most likely last day, at work
- The date you expect to return to work

Or you can file your claim online

The Standard's easy system lets you enter all the information needed to start your short-term disability claim. Just go to https://www.standard.com/individuals-families/file-claim/file-claim-insurance-benefits-through-work and follow the simple instructions to create an online account and submit your claim:

- For the type of claim, select Short-Term Disability.
- For the typeof user, select Employee.
- The system will guide you through all information you need to give to The Standard to get started on your short-term disability claim.

And you can print any forms needed for your claim from the online system. Then you can fill out, scan and upload the forms during the submission process.

Once your claim is submitted online, you'll receive a claim reference number and, if you give The Standard your email address, you can also receive a confirmation email. Be sure to keep the claim reference number handy — The Standard can help you faster if you have the claim reference number when you call them with questions.

If you have technical difficulties while you're using the online claim system, call **1-844-404-2111**. The Standard can help you with technical issues.

Your disability benefit examiner is your main contact

After your claim is submitted either online or by phone, The Standard will send you a packet that has all the information regarding the claim process and forms you may need for your claim. It's very important that you complete and return these forms as soon as you can. The Standard will contact you, your employer and your doctor to obtain the information needed to review your claim.

You'll get your own disability benefit examiner (DBE), who will be your main contact. Your DBE may:

- Call you with information and answer your questions.
- Contact your benefits manager at work to make sure we have all of your correct information.
- Get your health records to work on your claim. This includes your doctor's treatment plan and estimates on when you can return to work.
- Act as the main point of contact between The Standard, you, your doctor and your supervisor. This can help you return to work as quickly and safely as possible.

The Standard's goal is to get you back on your feet and back to work

Your employer works with The Standard to help employees out on disability return to their jobs safely. If you're out on disability, your DBE will talk with you, your doctor and your benefits manager to see if any jobs become open during your time out that your doctor might feel you can do, like a job that doesn't have heavy lifting or a desk job that lets you stay off your feet. One thing's for sure — we'll all work together to help you return to your job when the time is right.

You may have your own medical nurse care manager

If you have a chronic or long-term health condition or one that might cause future problems, you may be contacted by one of The Standard's medical nurse care managers. They are registered nurses who'll work with you and your DBE to help you get better. Since everyone heals differently, every claim is based on a person's own situation. If you haven't talked with a medical nurse care manager yet and would like to, your DBE can connect you with one anytime.

Your DBE may also offer to transfer you by phone to a counselor at The Standard's Resource Advisor employee assistance program. Licensed counselors can help you cope with your own disability or with the stress and responsibility of caring for a family member when they're seriously ill.

Cut out and carry this wallet card so you'll have our phone number handy when you need it.

Call 1-844-404-2111 to report a short-term disability claim

Have this information ready when you call:

- Your name, Social Security number, employee ID number, birth date, phone number and address.
- The date and cause of your disability and when you expect to return to work. If you're pregnant, your expected delivery date.
- Name, address and phone number of each doctor you're seeing.

Notification of claim decision

You will receive a call from your DBE to explain the decision and next steps, and letter from The Standard approving or denying your claim. If your claim is denied, the letter you receive will include information about the appeal process.

If your disability is expected to last for more than 125 workdays, your claim will be reviewed for long-term disability. Additional information may need to be obtained for the claim review, but you will not be required to complete an additional claim form.

Returning to work

The Standard focuses on assisting with a safe return to work if you are able. Our vocational staff will work with you, your licensed treating health care professional and your employer to develop a transitional plan or, under the long-term disability plan, a rehabilitation plan tailored to the activities you can safely perform, such as sitting, standing or walking and how many pounds you can lift or carry. Your employer may have specific policies and procedures regarding return-to-work programs and the maximum length of time accommodations may be offered to employees. For more information, contact your human resources office.

Therapeutic treatment plans

Physical therapy and other treatment plans are considered part of your overall treatment regimen. They are not the same as a transitional or rehabilitation plan.

Transitional plan

A transitional plan helps you return to your full duties gradually. Examples include working part time or performing a light-duty position on a temporary basis until you are fully recovered. The Standard will work with your treating health care professional and your employer to design this plan. While working on a transitional basis, you will continue to receive your benefit. The benefit amount may be reduced by income you receive for the hours you are able to work.

If you become severely disabled

If The Standard receives documentation from your licensed treating health care professional that you are severely disabled, the seven-calendar-day elimination period will be waived. In addition, you will be eligible for an increase of 20%.

To be considered severely disabled, you must be unable to perform at least two of the following six activities of daily living:

1. Bathing
2. Transferring, such as getting in and out of bed
3. Dressing
4. Toileting
5. Continence
6. Eating (ability to feed oneself)

You may also be considered severely disabled if you have severe cognitive impairment as a result of physical disease or injury that requires you to have substantial supervision for your health or safety.

Disability coverage for contract employees

If you are on a nine-, 10- or 11-month contract, you are eligible to receive benefits during contract periods only. If your contract is not renewed, your eligibility will end when your current contract ends.

Noncontract periods count toward satisfying the one-year waiting period for nonoccupational short-term disability coverage and the five-year eligibility period for higher income replacement levels.

If you are on disability before the end of your current contract, your disability benefits will stop when your current contract ends. If you are still disabled at the beginning of your next contract and remain medically eligible as determined by The Standard, you will resume your benefits. If you file a claim during your noncontract period, the time you are disabled will count toward the seven-calendar-day elimination period but will not count toward the 125-workday period for short-term disability and your days of income replacement.

Example

John Smith first began a contract with his current employer beginning September 1, 2014. He started work September 1, 2015, on a contract ending June 30, 2016, and has received his next contract renewal. Mr. Smith suffers a nonoccupational injury on June 11, 2016, and is approved for short-term disability benefits beginning June 18, the eighth consecutive calendar day of the disability.

- If Mr. Smith is still disabled when the current contract ends on June 30, 2016, disability benefits will stop.
- If he is still disabled by the time the next contract starts on September 1, 2016, the disability benefits will resume.

If you become disabled during your noncontract period, you will not be required to apply for disability benefits as you will have fulfilled your contract and employment responsibilities for the year. If your disability prevents you from returning to work at the start of your new contract period, you may file a claim with The Standard at that time. Your date of disability will remain the same. Your benefit will begin on the start of your new contract period or on the eighth day following the elimination period, whichever is later.

When benefits end

Your disability benefit will end if:

- You are no longer considered disabled under the policy.
- You fail to provide proof of continued disability to The Standard.
- You begin receiving other disability payments under a plan you become covered under through employment during a period of temporary recovery.
- You pass away.
- You resign from employment or are terminated for cause.
- For short-term disability coverage: when you attain normal retirement age under the Virginia Hybrid Retirement program, when long-term disability benefits become payable to you under a group long-term disability plan even if that occurs before the end of the short-term disability maximum benefit period or when you reach the end of the maximum benefit period for short-term disability benefits.
- For long-term disability coverage: when you reach the end of the maximum benefit period for long-term disability benefits unless benefits are continued by the lifetime security benefit.

If you die while receiving disability payments, The Standard will not continue your monthly payment to a beneficiary or survivor. However, your beneficiary or survivor may be eligible to receive a survivor's benefit in the event of your death if you were receiving long-term disability benefits.

Adjustments to your benefits and workers' compensation

A work-related disability is the result of an occupational illness or injury that occurs on the job. If you receive a workers' compensation award or settlement amount, your disability benefit will be offset by your workers' compensation benefit or settlement amount. Because of this offset or reduction, you will not receive a short-term disability payment if your workers' compensation award is greater than your benefit amount. There is no minimum benefit payable under the short-term disability program. However, minimally a $100 benefit would be payable under the long-term disability coverage.

If you suffer a work-related illness or injury, you must file a claim for workers' compensation benefits before you file a disability claim. If you have not satisfied the one-year eligibility waiting period for nonoccupational short-term disability coverage, your workers' compensation claim must be filed before you file a short-term disability claim.

Workers' compensation example: 100% income replacement for short-term disability

Example: Sandra is eligible for a workers' compensation benefit and a work-related disability benefit equal to 100% of her predisability income. Her weekly predisability income is $1,500.

Workers' compensation benefit calculation:

Predisability income	$ 1,500.00
x 66.67% workers' compensation award	x 0.6667
Weekly workers' compensation benefit =	$ 1,000.05

100% work-related benefit calculation:

100% of weekly predisability income	$ 1,500.00
Less workers' compensation benefit amount	$ -1,000.05
Weekly benefit amount =	$ 499.95

Workers' compensation example: 80% income replacement for short-term disability

Example: Esteban is eligible for a workers' compensation benefit and a work-related disability benefit equal to 80% of his predisability income. His weekly predisability income is $1,250.

Workers' compensation benefit calculation:

Predisability income	$ 1,250.00
x 66.67% workers' compensation award	x 0.6667
Weekly workers' compensation benefit =	$ 833.38

80% work-related benefit calculation:

Predisability income	$ 1,250.00
x 80% income replacement	x 0.80
Maximum weekly benefit =	$ 1,000.00
Maximum weekly benefit	$ 1,000.00
Less workers' compensation benefit	$ -833.38
Weekly benefit amount =	$ 166.62

Workers' compensation example: 60% income replacement for short-term disability

Example: John is eligible for a workers' compensation benefit and a work-related disability benefit equal to 60% of his predisability income. His weekly predisability income is $2,000.

Workers' compensation benefit calculation:

Predisability income	$ 2,000.00
x 66.67% workers' compensation award	x 0.6667
Weekly workers' compensation benefit =	$ 1,333.40

60% work-related benefit calculation:

Predisability income	$ 2,000.00
x 60% income replacement	x .60
Maximum weekly benefit =	$ 1,200.00

John's workers' compensation benefit exceeds his 60% incomereplacement level. Therefore, he will not receive a short-term disability benefit from The Sandard. If his workers' compensation benefit is reduced to less than 60% or ends, or if he is eligible for income replacement at 80% because he is severely disabled, John will begin to receive a weekly benefit payment to bring him to 60% of his predisability income, as applicable.

Other outside income or benefit payments

Disability coverage is intended to provide a certain level of income replacement, including your disability payment and other income you may be entitled to receive. For short-term disability, the maximum replacement varies between 60% and 100% of your predisability income, depending on how long you have had coverage through your employer. Other income or benefits you are eligible to receive are offset from or reduce the short-term disability benefits payable. Because there is no minimum short-term disability benefit, when the other income exceeds your income replacement percentage, no short-term disability benefit is payable.

For long-term disabilities, the maximum income replacement is 60% of your predisability earnings unless you are severely disabled and qualify for income replacement at 80% of your predisability income. Because the long-term disability policy has a $100 minimum benefit, at least $100 will be payable even if your other income is greater than 60% of your predisability earnings when combined together.

Examples of other income that may reduce your disability benefits include, for example, the following:

- Income or wages reported on W-2 forms.
- Income from self-employment.
- Federal, state or local government disability program payments for the same condition, excluding cost-of-living adjustments (COLAs) (for example, Social Security benefits or retirement benefits).
- Workers' compensation, severance payments or unemployment compensation.
- Amounts received for the same condition from any other group disability insurance.

Please note, the deductible income under the short-term coverage and the long-term coverage does vary some. Please refer to your certificate of insurance or summary plan.

Short-term disability coverage

What is a short-term disability?

A short-term disability is a physical disease, injury, pregnancy or mental disorder that prevents you from performing the material duties of your occupation with reasonable continuity. If you meet all other eligibility requirements, the disability may be nonoccupational or work related. A work-related disability is the result of an occupational illness or injury that occurs on the job.

Maximum benefit period

The maximum short-term disability period is 125 workdays. The 125-workday period is based on a Monday-through-Friday workweek and includes paid holidays. If you are still disabled after 125 workdays, you may be approved for long-term disability, as determined by The Standard.

Know your due date if you are pregnant? Have an upcoming medical procedure?

If you know when you will be out, notify your employer and file a claim with The Standard. Although the short-term disability benefit will not begin until the eighth day of your disability, you do not have to wait until the seven-calendar-day elimination period to file a claim. For maternity, it is recommended to file your claim no earlier than four weeks before your due date unless you are disabled earlier for medical reasons.

Benefit waiting period

If your claim for short-term disability is approved, the benefit waiting period is seven days; the benefit will begin on the eighth calendar day of your disability. Check with your human resources office about leave policies for absences during the elimination period. If you have a condition that causes you to lose two or more activities of daily living, this period may be waived.

Nonoccupational short-term disability — income replacement level

After the one-year eligibility waiting period, if you become disabled, you are eligible for income replacement at 60% of your predisability income if your disability is nonoccupational. For disability occurring after five years of continuous employment as a member with your current employer, you become eligible for higher income replacement beginning at 100% of your predisability income, which reduces to 80% and then 60% (for each, less deductions for other income). The percentage level change depends on your months of continuous program participation with your current employer and how long you are disabled as shown in the table below:

Days of income replacement: nonoccupational short-term disability

Months of Continuous Service	Workdays at 100% Income Replacement	Workdays at 80% Income Replacement	Workdays at 60% Income Replacement
0–12	0	0	0
13–59	0	0	125
60–119	25	25	75
120–179	25	50	50
180+	25	75	25

Contact your human resources office with questions about leave policies and income replacement during periods of nonoccupational short-term disability.

Work-related short-term disability — income replacement level

You are eligible for work-related short-term disability coverage from the first day your coverage is effective. To qualify for a work-related benefit, your disability must arise out of or in the course of employment with your employer — for example, the result of an occupational illness or injury that occurs on the job. Contact your employer about your workers' compensation benefits and assistance with filing a workers' compensation claim.

You are eligible for income replacement at 60% of your predisability income. For disability occurring after five years of continuous participation in the STD plan and with your current employer, you become eligible for income replacement beginning at 100% of your predisability income, which reduces to 80% and then 60% (for each, less deductions of other income). The percentage level change depends on your months of continuous program participation with your current employer and how long you are disabled as shown in the table below:

Months of Continuous Service	Workdays at 100% Income Replacement	Workdays at 80% Income Replacement	Workdays at 60% Income Replacement
Fewer than 60	0	0	125
60-119	85	25	15
120 or more	85	40	0

Contact your human resources office with questions about leave policies and income replacement during periods of nonoccupational short-term disability.

If you have a partial disability

A partial disability means you have a condition that allows you to perform some of your duties and work. You are eligible to receive a partial disability payment if you are unable, due to your disability, to earn 80% or more of your predisability earnings. Earnings from your job during this period will be offset by the amount of your short-term or long-term disability benefit.

If you apply for partial disability benefits, you must satisfy the seven-calendar-day elimination period.

If you receive a workers' compensation award, your short-term disability benefit will be reduced by your workers' compensation benefit. Because of this offset, you will not receive a short-term disability benefit if your workers' compensation benefit is greater than your short-term disability benefit amount.

Temporary recovery during short-term disability

You may temporarily recover from your disability and then become disabled again from the same cause during the benefit period. The length of your temporary recovery determines whether you continue under the same claim or you need to file a new claim.

Within 45 consecutive calendar days: If you have a period of temporary recovery that is 45 days or less and become disabled again from the same cause or causes, your same short-term disability claim will be reopened. You will not need to fulfill another seven-calendar-day benefit waiting period, and your income replacement will resume at the level you were receiving during the previous disability period. The number of days remaining of the 125-workday maximum benefit period will also resume. However, your claim will not reopen if you are receiving STD benefits under another disability plan for which you became covered during recovery.

After 45 consecutive calendar days: If you have a period of temporary recovery that lasts longer than 45 days and become disabled again from the same cause or causes, you will have to file a new claim and satisfy a new seven-calendar-day benefit waiting period. If your claim is approved, you will have up to 125 workdays of short-term disability coverage again under the new claim.

Other benefit coverage while on short-term disability

Hybrid retirement plan service and contributions	**Defined benefit component**: While you are on short-term disability, you will continue to contribute 4% of your compensation each month to your member contribution account on a pretax salary reduction basis unless you are receiving only a workers' compensation benefit. If you are on work-related short-term disability, receiving only a workers' compensation benefit and the contribution cannot be withheld from your payment because your employer does not have control over deductions, the contribution will not be withheld and you will not receive service credit. You will be eligible to purchase this missing time. The Code of Virginia prohibits members from borrowing from their member contribution accounts. **Defined contribution component**: Hybrid 401(a) Cash Match Plan and Hybrid 257 Deferred Compensation Plan. While you are on short-term nonoccupational disability, you will continue to contribute the mandatory 1% member contribution and your employer will continue to contribute the mandatory 1% employer contribution to your Hybrid 401(a) Cash Match Plan. You also remain eligible to make voluntary contributions to your Hybrid 457 Deferred Compensation Plan. Distributions from the Hybrid 401(a) and Hybrid 457 plans for a hardship or unforeseen emergency are prohibited by the Code of Virginia. If you are on work-related short-term disability and receiving only a workers' compensation benefit and contributions cannot be withheld because your employer does not have control over the deductions, no contributions will be credited to your Hybrid 401(a) Cash Match Plan or Hybrid 457 plans. More information about the VRS Hybrid Retirement Plan is available at varetire.org/hybrid. **Note**: If you are determined by the Social Security Administration to be permanently and totally disabled and are on work-related disability, no contributions will be withheld from your payment. You will be credited with the mandatory 1% employer contribution to your Hybrid 401(a) Cash Match Plan.
Employer-sponsored tax-deferred savings and supplemental retirement plans	If you are contributing to an employer-sponsored tax-deferred savings or supplemental retirement plan, your contributions may continue while you are on short-term disability. You also may be eligible for a distribution for a hardship or unforeseen emergency. Contact your human resources office for more information about your contributions if you participate in an employer-sponsored plan.
Leave	Contact your human resources office about your employer's leave policies during periods of short-term disability.
Health insurance	If your employer provides health insurance, your coverage will continue while you are on short-term disability.

Long-term disability coverage

What is a long-term disability?

A long-term disability is a physical disease, injury, pregnancy or mental disorder that prevents you from performing the material duties of your occupation with reasonable continuity for the first 24 months after the benefit waiting period, and from performing any other occupation thereafter. Long-term disability benefits are payable after a seven-calendar-day benefit waiting period plus 125 contract work days. If you are approved to receive short-term disability benefits by The Standard and progress to a long-term disability claim, you will not be required to complete a full long-term disability claim application.

Income replacement

If you are approved for long-term disability, you will receive 60% of your predisability income reduced by deductible income. One example of deductible income would include workers' compensation benefits issued to you because of a work-related disability.

Maximum benefit period
The maximum benefit period is determined by your age when disability begins as follows: age 59 or younger — to SSNRA, age 60 through 64 — 5 years, age 65 through 68 — to age 70, age 69 or older — one year. SSNRA means your normal retirement age under the Federal Social Security Act, as amended.

Temporary recovery during long-term disability

You may temporarily recover from your disability and then become disabled again from the same cause or causes. The length of your temporary recovery determines whether you are on the same claim or you need to file a new claim.

During the benefit waiting period: If you have a period of temporary recovery that lasts 45 consecutive days or less while you are still serving the benefit waiting period, you will not have to file a new claim and serve the benefit waiting period again. However, this period of temporary recovery will not count toward serving the 125-workday benefit waiting period. If your period of temporary recovery lasts longer than 45 days, you will be required to file a new claim.

During the maximum benefit period: Once you have fulfilled the benefit waiting period and are receiving long-term disability benefits, you may have a period of temporary recovery lasting up to 125 consecutive days before you would be required to begin a new claim. If your original claim is continued, your benefit amount and maximum benefit period does not change. No long-term disability benefits are payable if benefits became payable to you under any other disability insurance plan you became insured under during your period of temporary recovery.

Rehabilitation plan

A vocational case manager may work with you and your health care professional to develop a formal rehabilitation plan. The plan will take into account your physical and cognitive abilities, educational background, skills, work history, predisability income or wages, interests, and aptitudes. Rehabilitation plans may include:

- Training or additional certification in order for you to be placed in a new position with your same (or a different) employer.
- Modification of your work area in order to facilitate your return to work.
- Resuming development assistance.

The rehabilitation plan may be developed to help you return to your current employer or may be put in place to help you find other employment if you're able to return to work.

Other benefit coverage while on long-term disability

Contributions	**Defined benefit component:** The 4% member contribution will stop while you are on long- term disability. You also will be ineligible to purchase prior service. If you are on work-related disability receiving only a workers' compensation benefit, contact your human resources office for more information about your member contributions. **Defined contribution component:** The mandatory 1% member contribution to your Hybrid 401(a) Cash Match Plan will stop while you are on long-term disability. You will be ineligible to make additional voluntary contributions to your Hybrid 457 Deferred Compensation Plan. If you qualify for Social Security Disability Insurance (SSDI) benefits, your employer will continue to make the mandatory 1% employer contribution to your Hybrid 401(a) plan. Distributions from the Hybrid 401(a) and Hybrid 457 plans for a hardship or unforeseen emergency are prohibited under Internal Revenue Service (IRS) requirements. More information about the VRS Hybrid Retirement Plan is available at varetire.org/hybrid.
VRS service credit	You continue to accrue VRS service credit while on long-term disability. VRS members earn service credit for each month they are reported in a covered position. Service credit also may include credit for prior service a member may have purchased or additional service granted by an employer. Service credit is one of the factors used to calculate the VRS retirement benefit and determine eligibility for retiree benefits.
Leave	Contact your human resources office about your employer's leave policies during periods of long-term disability.

For more information about your VRS benefits, visit varetire.org/hybrid or call VRS at 1-855-291-2285. You can also contact your human resources office with questions.

Social Security Disability Insurance benefits

If you are over 30, you may be eligible for Social Security Disability Insurance (SSDI) benefits if you are unable to perform any work for which you are reasonably qualified for an extended period of time. You must have contributed to Social Security for a sufficient number of quarters to qualify. For more information, call the Social Security Administration toll free at **1-800-772-1213** or visit ssa.gov.

Qualifying for SSDI does not automatically qualify you for a long-term disability benefit from The Standard. If you file a claim with The Standard and we determine you may also be eligible for SSDI, we will provide assistance to you with the SSDI application process and appeal process if your SSDI claim is denied. If your claim with The Standard is approved, your disability benefits will begin while your claim for SSDI is pending or in review. If your SSDI claim is approved, the long-term disability benefits from The Standard will be reduced for any period the SSDI benefit has been awarded. This may result in an overpayment on your long-term disability claim, and you will remain responsible for repayment on your disability claims.

Important note about SSDI Advocacy Services:

If The Standard determines you may qualify for SSDI, we will provide SSDI claim advocacy services free of charge. If you wish to use a different advocacy service or an attorney, you will be responsible for paying the fees.

SSDI Benefit Calculation Example

Maria is approved for long-term disability from The Standard and is also eligible for SSDI. Her predisability income is $5,000 per month. Her SSDI benefit is $2,000 per month.

Calculation:

Monthly predisability income	$ 5,000.00
x 66.67% workers' compensation award	x 0.60
Maximum long-term disability monthly benefit =	$ 3,000.00
Less SSDI monthly disability benefit	$ -2,000.00
Amount of adjusted long-term disability benefit =	$ 1,000.00

Note: If your family is eligible for SSDI benefits, the long-term disability benefit will be adjusted by the additional SSDI amounts. If your SSDI award is retroactive over the period you have been receiving a benefit, you will be required to repay any overpayment to your claim.

Notes

‡ The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of 1100 SW Sixth Avenue, Portland, Oregon in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.