# Voluntary Long Term Disability Income Insurance

**Explore Your Benefits & Costs** 

Group Name: KIPP Team and Family Schools, Inc. Group Number: 689122

It can take time to recover from a disabling illness or injury. When that time extends past your Short Term Disability coverage, Long Term Disability Income Insurance can help. This document includes cost and coverage information about Long Term Disability Income Insurance. As you explore, keep in mind:



More than one in four of today's 20-year-olds can expect to be out of work for at least a year because of a disabling condition before they reach retirement age.<sup>1</sup> Help to keep a portion of your income protected with the Long Term Disability Income Insurance that's available through your employer.

<sup>1</sup> Disability Awareness Survey, Council for Disability Awareness, 2019

ReliaStar Life Insurance Company a member of the Voya® family of companies



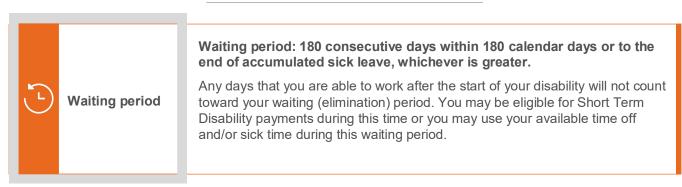
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## Add coverage based on your needs

Your employer is giving you the option to enroll in Long Term Disability Income Insurance. This means that if a disabling illness or injury prevents you from working, and your Short Term Disability coverage has run out, you'll still be able to replace a portion of your income.

**Coverage Amount** 

60% of your monthly earnings (\$100 minimum monthly benefit/\$15,000 maximum monthly benefit)



#### Evidence of Insurability (health questions)

If you are a late entrant, you must provide evidence of insurability for any coverage elected.

When evidence of insurability is required, the insurance company will need to approve it before coverage becomes effective.

How long benefit payments last
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For a disability which begins before you reach age 60, the maximum period of payment will be until the Social Security Normal Retirement Age (SSNRA), as shown in the following table:

Year of birth	Social Security retirement age (SSNRA)*
Before 1938	65 years
1938	65 years and 2 months
1939	65 years and 4 months
1940	65 years and 6 months
1941	65 years and 8 months
1942	65 years and 10 months
1943-1954	66 years
1955	66 years and 2 months



1956	66 years and 4 months
1957	66 years and 6 months
1958	66 years and 8 months
1959	66 years and 10 months
After 1959	67 years

For a disability which starts on or after you reach age 60, the maximum period of payment will be determined according to the following table:

Age when Disability begins	Maximum period of payment
60	60 months or to SSNRA*, whichever is greater
61	48 months or to SSNRA*, whichever is greater
62	42 months or to SSNRA*, whichever is greater
63	36 months or to SSNRA*, whichever is greater
64	30 months or to SSNRA*, whichever is greater
65	24 months
66	21 months
67	18 months
68	15 months
69 and over	12 months

\*Age at which you are entitled to unreduced Social Security benefits based on the Social Security Amendments of 1983.

#### How much does it cost?

Rates shown are guaranteed until: 7/1/2025. Your contributions are deducted on a pre-tax basis.

The cost is calculated based on your age.

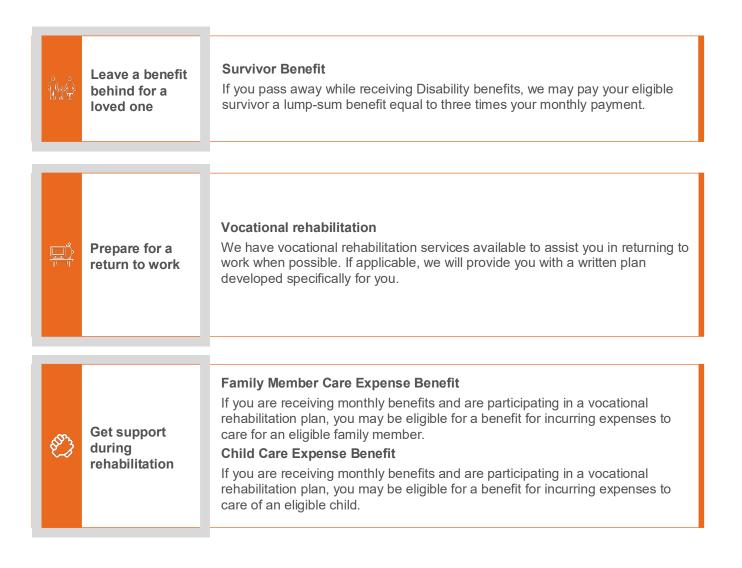
Long Term Disability monthly rates	
Age	Rate/\$100 Monthly Covered Payroll
Under 25	\$.06
25-29	\$.06
30-34	\$.10
35-39	\$.18
40-44	\$.26
45-49	\$.41
50-54	\$.62
55-59	\$.65
60 and over	\$.68



To calculate your cost:			
1. Divide your eligible annual earnings by 12.	\$	Your <u>eligible annual earnings</u> are the salary or wage you receive from your employer. It does not include: Bonuses	
2. If your answer in Step 1 was lower than \$15,000, enter that number here. If higher, enter \$15,000 here.	\$		
3. Divide your answer from Step 2 by 100.	\$		
<ol> <li>Multiply your answer from Step 3 by the rate from the table above. This is your total monthly cost.</li> </ol>	\$	<ul><li>Commissions</li><li>Overtime pay</li></ul>	

### What else is included?

The Long Term Disability Income Insurance available through your employer includes the following additional benefits. For a complete description of your available benefits, along with applicable provisions, exclusions and limitations, see your certificate of insurance and any riders.





# **Exclusions & Limitations**

Benefits are not payable if your disability is caused by, contributed to or resulting from:

- Commission of or attempt to commit a felony
- Intentionally self-inflicted injuries
- Attempted suicide, regardless of mental capacity
- Being legally intoxicated or being under the influence of any narcotic, unless taken under the direction of and as directed by a doctor
- Participation in a war, declared or undeclared, or any act of war
- Active military duty
- Active participation in a riot
- Engaging in any illegal or fraudulent occupation, work or employment
- Commission of a crime for which you have been convicted
- Elective surgery, except when required for your appropriate care as a result of your injury or sickness

Traveling or flying on an aircraft operated by or under the authority of military or any aircraft being used for experimental purposes

Your benefits may be limited to a shorter time period, such as 24 months during your lifetime, if:

• The disability is due to a mental illness, alcoholism or drug abuse.

Your benefits will be reduced by other income (deductible sources of income) you are eligible to receive while disabled. These include but aren't limited to:

- Income received from any form of employment
- Unemployment benefits and any type of income replacement provided by your employer
- Workers' Compensation benefits or benefits from similar programs
- Judgments or settlements you receive related to disability
- Disability or retirement payments under Social Security or other federal and state plans
- Disability income payments under automobile liability insurance benefits
- Disability income payments payable under any other group insurance policy and certain retirement payments provided under your employer's retirement plan

\*Limitations and exclusions will vary by state and by your employer's benefit plan.

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Enrollment instructions will be provided by your employer. If you have additional questions before you enroll, please call:

Voya Employee Benefits Customer Service at (800) 955-7736

or go to https://presents.voya.com/EBRC/KIPP

This is a summary of benefits only. A complete description of benefits, limitations, exclusions and termination of coverage will be provided in the certificate of insurance and riders. All coverage is subject to the terms and conditions of the group policy. If there is any discrepancy between this document and the group policy documents, the policy documents will govern. To keep coverage in force, premiums are payable up to the date of coverage termination. Disability Income Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. Policy form HP08GP and/or HP13GP (may vary by state).

GRP-LTD

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