

# Short-Term Disability Insurance for 2-9 Lives

MetLife Short-Term Disability (STD) insurance helps provide earnings protection for employees and offers plan design flexibility for employers. With more than 50 years of group disability experience, we offer cost management, a best-in-class service model, and financial strength and stability.

## What's Available

MetLife 2-9 STD is only available when sold with MetLife 2-9 Dental.<sup>1</sup> Plan provisions are as follows (minimum of 2 eligible employees):

<b>Benefit Percentage</b>	◆ 60%
<b>Maximum Weekly Benefit</b>	◆ \$750
<b>Elimination Period</b>	◆ 0 days for injury/ 7 days for sickness
<b>Benefit Duration</b>	◆ 13 Weeks ◆ 26 Weeks

## Definitions

**Disability**—“Disabled” or “disability” means that, due to sickness or as a direct result of accidental injury, the employee is receiving appropriate care and treatment and complying with the requirements of such treatment, and the employee is unable to earn more than 80% of predisability earnings at his/her own occupation.

**Own Occupation**—“Own Occupation” means the essential functions the employee regularly performs that provide his/her primary source of earned income.

**Predisability Earnings**—Predisability earnings means gross salary or wages the employee is earning from the employer as of the employee’s last day of active work before the disability began. This amount is calculated on a weekly basis.

Predisability earnings do not include:

- awards and bonuses;
- commissions;
- overtime pay;
- the grant, award, sale, conversion and/or exercise of shares of stocks or stock options;
- the employer’s contributions on the employee’s behalf to any deferred compensation arrangement or pension plan; or
- any other compensation from the employer.

## Features

### ✓ **Rehabilitation Incentives**

#### – **Rehabilitation Program Incentive**

10% increase in the weekly benefit if participating in an approved rehabilitation program.

#### – **Work Incentive**

Allows employees to work while disabled and receive up to 100% of predisability weekly earnings (including the disability benefit, other income benefits and return-to-work earnings).

#### – **Family Care Incentive**

While participating in an approved rehabilitation program, after the fourth week of disability, up to \$100 per week for reimbursement of eligible family care expenses incurred for each eligible family member.

#### – **Moving Expense Incentive**

Provides reimbursement for expenses incurred in order to move to a new residence if recommended as part of the approved rehabilitation program.

### ✓ **Organ Donor Benefit**

Provides a 10% increase in the weekly benefit if disability is a result of an organ transplant procedure. No elimination period required.

### ✓ **Continuity of Coverage**

The intent of continuity of coverage, as described in Special Rules for Groups Previously Insured Under a Plan of Disability Income Insurance, is to ensure that an employee who was insured for group STD coverage by a prior carrier will neither lose nor gain coverage solely as a result of the employer’s decision to change carriers.

### ✓ **List Billing Services**

The employer will receive a monthly premium statement showing the amount of premium due and providing a list of insured employees and premium by coverage.

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<sup>1</sup> Requirement may not apply in all geographic locations.

## Claims Services

### Disability Management

Services	On-Site Resources
Focus on abilities to encourage return to work, where appropriate	Case Manager Nurse Consultant Vocational Rehabilitation Consultant
Clinical approach to case management	Medical Director Nurse Consultant Vocational Rehabilitation Consultant Clinical Specialty Unit
Job site accommodation services	Nurse Consultant Vocational Rehabilitation Consultant
Social Security application and appeals assistance*	Social Security Specialist

## Eligibility

- Active, full-time employees who work at least 30 hours per week are eligible for coverage.
- Retirees are not eligible for coverage.
- Part-time, temporary, and seasonal employees are not eligible for coverage.

### Evidence of insurability is required for:

- ◆ Groups with 2–4 employees;
- ◆ Groups with 5–9 employees with amounts in excess of the \$250 per week;
- ◆ Employees who were eligible under the prior plan, but did not elect coverage; and
- ◆ Late enrollees (those employees in contributory plans who do not enroll within 31 days of their eligibility date).

## Minimum Requirements

### Contributory Plans:

- The employer's contribution must equal at least 25% of the premium, and
- At least 75% of all eligible employees must enroll.

### Non-contributory Plans:

- The employer contribution must equal 100% of the premium, and
- 100% of all eligible employees must enroll.

## Income Which Will Reduce the Disability Benefit

The disability benefit will be reduced by the amount of all other income. Other income includes the following:

1. Any disability or retirement benefits which the employee, employee's spouse, or child(ren) receive or are eligible to receive because of the employee's disability or retirement under:
  - Federal Social Security Act\*
  - Railroad Retirement Act;
  - Any state or public employee retirement or disability plan; or
  - Any pension or disability plan of any other nation or political subdivision thereof;
2. Any income received for disability or retirement under the employer's Retirement Plan, to the extent that it can be attributed to the employer's contributions;
3. Any income received for disability under:
  - A group insurance policy to which the employer has made a contribution, such as:
    - Benefits for loss of time from work due to disability; and
    - Installment payments for permanent total disability.
  - A no-fault auto law for loss of income, excluding supplemental disability benefits;
  - A government compulsory benefit plan or program which provides payment for loss of time from the employee's job due to the disability, whether such payment is made directly by the plan or program, or through a third party.
  - A self-funded plan, or other arrangement if the employer contributes toward it or makes payroll deductions for it;
  - Any sick pay, vacation pay or other salary continuation that the employer pays to the employee;
  - Workers' Compensation or a similar law which provides periodic benefits;
  - Occupational disease laws;
  - Laws providing for maritime maintenance and cure; and/or
  - Unemployment insurance law or program.
4. Recovery amounts that the employee receives for loss of income as a result of claims against a third party by judgment, settlement or otherwise, including future earnings.

\* If the STD period, as described in the plan, is greater than 26 weeks.

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## Limitations

### ◆ Maximum Benefits

The total of the weekly benefit including the rehabilitation incentive, income earned while disabled and family care incentive, may not exceed 100% of the employee's predisability earnings.

## Exclusions

***This plan will not pay for any disability caused or contributed to by:***

1. War, whether declared or undeclared, or act of war, insurrection, rebellion, or terrorist act;
2. Active participation in a riot;
3. Intentionally self-inflicted injury;
4. Any injury for which the employee is entitled to benefits under Workers' Compensation or a similar law (optional);
5. Attempted suicide; or
6. Commission of or attempt to commit a felony.

***The plan will not pay Short-Term Benefits for any disability caused or contributed to by elective treatment or procedures, such as:***

1. Cosmetic surgery or treatment primarily to change appearance;
2. Sex-change surgery;
3. Reversal of sterilization;
4. Liposuction;
5. Visual correction surgery; and
6. In vitro fertilization; embryo transfer procedure; or artificial insemination.

However, pregnancies and complications from any of these procedures will be treated as a sickness.

## Cancellation/Termination

### ***Date Insurance Ends***

Insurance will end on the earliest of:

- The date the Group Policy ends;
- The date insurance under the Group Policy ends for the employee's class;
- The end of the period for which the last premium has been paid for the employee;
- The date the employee ceases to be in an eligible class for disability income insurance, the employee will cease to be in an eligible class on the date he/she ceases active work in an eligible class, if the employee is not disabled on such date; or
- The date employment ends.

### ***Date Benefit Payments End***

Disability benefit payments will end on the earliest of:

- The end of the Maximum Benefit Period;
- The date the employee is no longer disabled;
- The date the employee dies;
- The date the employee ceases or refuses to participate in a rehabilitation program that MetLife requires;
- The date the employee fails to have a medical exam requested by MetLife;
- The date the employee fails to provide required proof of continuing disability.

While disabled, the benefits described will not be affected if:

- The Group Policy ends; or
- The Group Policy is amended to change the plan of benefits for the employee's class.

### ***Note:***

1. Policy provisions vary depending on state requirements and variations.
2. In the event of any conflict between the provisions of this summary and the Group Policy or certificate, the Group Policy or certificate shall govern.
3. This benefit description is based on the contractual provisions contained in the Group Policy (Form GPNP99) situated in MD, NY or SD with certificates of insurance (Form GCERT2000) issued to each insured employee.

All states except for MD, NY and SD: Coverage is provided through employer in a Multiple Employer Trust (MET), subject to the terms and provisions in the Master Group Policy (Form G.2130-S) situated in the District of Columbia, with certificates of insurance (Form GCERT2000) issued to each insured employee. In any state validly exercising extraterritorial jurisdiction, the plan will be modified to meet applicable laws.

# MetLife®

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