

Legacy Disability Plan offered by The Standard

Handbook for VRS Plan 1 employees and VRS Plan 2 employees



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.

†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.

For questions related to claims:

Call 1-844-404-2111

Introduction to Legacy Disability Plan offered by Standard Insurance Company

Income protection if you can't work

The Legacy 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 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 are a regular full-time employee working for pay on a scheduled normal work week of at least 40 hours, you are eligible for the Legacy Disability Plan.

You will be enrolled in the Plan on the first of the month following your date of hire.

Temporary, seasonal and contract employees are not eligible.

Short-term and long-term disability eligibility

To be eligible for short-term disability and long-term disability benefits, you must satisfy plan eligibility and you must be actively at work as required by your employer. You are eligible for benefits the first day after one year of continuous enrollment in the Plan.

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.
- 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.

What to do scenarios:

What do I do if I'm 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 will be out for more than seven consecutive calendar days, file a claim for short-term disability through The Standard. You must first satisfy a one-year eligibility waiting period before you are eligible for benefits. The short-term disability benefit begins on the eighth day of your disability.

What do I do if I'm 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.

What do I do if I'm 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 one to two months prior to your due date unless you are disabled earlier for medical reasons. Your claim will be set up in a "suspended" status until you go out on leave. Notify your Case Manager once you stop working.

What do I do if I'm 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.

What do I do if I 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 or other compulsory benefit law. If you receive a workers' compensation award or settlement, your disability benefit will be offset by your workers' compensation benefit or settlement amount.

What do I do if I 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.

What do I do if I 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 policy number: CM10002158
- Your address and phone number
- Your social security 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://app.standard.com/benefits/employee/soc/> and follow these simple instructions to submit your claim:

- For the type of claim, select short-term disability.
- For the type of 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.

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 case manager 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 case manager (DCM), who will be your main contact. Your DCM 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 DCM 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.

If you have a chronic or long-term health condition or one that might cause future problems, you may be contacted by one of your Anthem medical plan's medical nurse care managers. They are registered nurses who'll work with you and your DCM 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 DCM can connect you with one anytime.

Your DCM may also offer to transfer you by phone to a counselor at The Standard's Resource Advisor member 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.

Notification of claim decision

You will receive a call from your DCM to explain the claim decision and next steps and you will receive a 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.



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.
- Your policy number: CM10002158
- 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.

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 - LTD

If you are approved for LTD and The Standard receives documentation from your licensed treating health care professional that you are severely disabled, you may be eligible for a benefit increase up to 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
3. Dressing
4. Toileting
5. Mobility
6. Continence
7. Eating

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.

When benefits end

Your disability benefits will end if:

- You are no longer considered disabled under the policy.
- You are no longer receiving, accepting or following regular care from a physician.
- The Maximum Benefit Period from the Schedule of Benefits ends.
- You pass away.
- You fail to provide proof of continued disability.
- We ask you for details about your deductible sources of income and you do not provide the information within 31 days.
- Your disability work earnings exceed the amount allowable under the program.

If you die while receiving short-term 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. To qualify for a work-related benefit, your illness or injury must be considered compensable under the Virginia Workers' Compensation act or other compulsory benefit law. 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. You are only eligible for a work-related disability if a workers' compensation claim has been filed and approved.

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% STD benefit calculation:

Predisability income	\$1,500.00
x 100% income replacement	x 1.00
Maximum weekly STD benefit =	\$1,500.00
Maximum weekly STD benefit	\$1,500.00
Less workers' compensation benefit	- \$1,000.05
Adjusted weekly STD benefit =	\$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
<u>x 66.67% workers' compensation award</u>	<u>x 0.6667</u>
Weekly workers' compensation benefit =	\$833.38

80% STD benefit calculation:

Predisability income	\$1,250.00
<u>x 80% income replacement</u>	<u>x .80</u>
Maximum weekly STD benefit =	\$1,000.00
Maximum weekly STD benefit	\$1,000.00
Less workers' compensation benefit	<u>-\$833.38</u>
Adjusted weekly STD benefit =	\$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 \$1,500.

Workers' compensation benefit calculation:

Predisability income	\$1,500.00
<u>x 66.67% workers' compensation award</u>	<u>x 0.6667</u>
Weekly workers' compensation benefit =	\$1,000.05

60% STD benefit calculation:

Predisability income	\$1,500.00
<u>x 60% income replacement</u>	<u>x .60</u>
Maximum weekly STD benefit =	\$900.00

John's workers' compensation benefit exceeds his 60% income replacement level. Therefore, he will not receive a short-term disability benefit from The Standard. 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% or 80% 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 income replacement is 60% of your pre-disability earnings up to \$7,500 per month, unless you are severely disabled and qualify for income replacement at 80% of your pre-disability income. Because the long-term disability policy has a minimum benefit of \$100 or 10% of the gross monthly benefit (whichever is greater), at least \$100 will be payable even if your other income is greater than 60% of your pre-disability 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
- Salary continuation or accumulated sick leave
- 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.

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.

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.

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 pre-disability income. For a disability occurring after five years of continuous employment, you become eligible for higher income replacement beginning at 100% of your pre-disability income, which reduces to 80% and then 60% (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:

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 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 may be eligible to receive a partial disability payment if you are unable, due to your disability, to earn more than 80% of your pre-disability earnings. Your disability benefit may be offset by earnings from your job during this period. If you apply for partial short-term disability benefits, you must satisfy the seven calendar day elimination period.

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 you 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.

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 gainful occupation thereafter. Long-term disability benefits are payable after 180 days or the expiration of short-term disability benefits (whichever is longer). 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 pre-disability income up to \$7,500 per month, reduced by deductible income. One example of deductible income is 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. If you become disabled before you reach age 60, the maximum benefit period will be until your Social Security Normal Retirement Age (SSNRA). If you become disabled at age 60 or older, the maximum benefit period will be determined according to the following chart:

Age 60 - 60 months or to SSNRA, whichever is greater
Age 61 - 48 months or to SSNRA, whichever is greater
Age 62 - 42 months or to SSNRA, whichever is greater
Age 63 - 36 months or to SSNRA, whichever is greater
Age 64 - 30 months or to SSNRA, whichever is greater
Age 65 - 24 months
Age 66 - 21 months
Age 67 - 18 months
Age 68 - 15 months
Age 69+ - 12 months

There are limitations for disabilities related to mental illness, alcoholism, drug addiction and special conditions. Refer to your long-term disability Policy for more details.

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. 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 6 months 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.

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, pre-disability 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.

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 <https://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 coordinate SSDI claim advocacy services. 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 pre-disability income is \$5,000 per month. Her SSDI benefit is \$2,000 per month.

Calculation:

Monthly pre-disability income	\$5,000.00
x 60% income replacement	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.