

Short Term Disability Income Insurance

Explore Your Benefits & Costs

Group Name: Bergstrom, Inc.
Group Number: 725111
Class: All Active Full-Time Hourly Employees

Life doesn't stop when you're unable to work. If a maternity leave, planned surgery, or unexpected illness or injury affect your income, **Short Term Disability Income Insurance** can help. This document includes cost and coverage information about Short Term Disability Income Insurance. As you explore, keep in mind:

- No medical questions or tests are required for coverage
- Group pricing makes coverage more cost-effective
- One dedicated claim analyst guides you throughout your leave

More than half (60%) of US households have less than $6,275 in liquid cash. That's what it would take for a family of four to replace income at the poverty level for three months.[1] Help keep a portion of your income protected with the Short Term Disability Income Insurance that's available to you through your employer.

[1] "The State of Disability Coverage in America," Council for Disability Awareness, 2019.

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Choose coverage to fit your needs

With Short Term Disability Income Insurance, you'll still be able to replace a portion of your income if a disabling illness or injury prevents you from working. When you become disabled, you must complete a waiting period before benefits are payable (Learn more in the "Waiting Period" section below). When benefit payments begin, here's how much you'll receive:

Coverage Amount
60% of your weekly earnings

Coverage Amount	
Coverage Minimum	$15 per week
Coverage Maximum	$1,500 per week

Waiting period

Waiting period

- The benefit waiting period for a disability caused by an accidental injury is 0 days
- The benefit waiting period for a disability caused by a sickness is 7 days

How long benefit payments last

Short Term Disability Income Insurance is intended to replace income for a disability that lasts just a few weeks. The maximum amount of time that you're able to receive Short Term Disability benefit payments is 13 weeks.

How much does it cost?

Rates shown are guaranteed until: January 1, 2024. Your premiums are deducted on a post-tax basis.

Short Term Disability Income Insurance rates	
Age*	**Monthly rate per $10 of weekly payroll**
Under 40	$0.86
41-49	$0.62
50-59	$0.91
60+	$1.32

*Age as of 01/01/2022.

To calculate your cost:	
1. Enter your basic annual earnings.	$
2. Divide your basic annual earnings by 52. This is your basic weekly earnings.	$
3. Enter the maximum benefit percentage.	60%
4. Multiply the figure from Step 2 by the percentage in Step 3.	$
5. Enter your elected weekly benefit amount ($100 to $1,500 in $100 increments). Note: This cannot be more than the amount in Step 4.	$
6. Divide the weekly benefit amount in Step 5 by 10.	$
7. Enter your Short Term Disability rate from the table above.	$
8. Multiply the result in Step 6 by the rate in Step 7. This is your **monthly premium.**	$
9. Multiply your total monthly premium by 12 for your annual premium amount. Then, divide by your number of paychecks per year for your payroll deduction amount.	$

Your eligible annual earnings are the salary or wage you receive from your employer.

It does not includes:

- Bonuses
- Commissions
- Overtime pay

Exclusions and limitations

We won't pay benefits if your disability is caused by, contributed to by, or results from any of the following:

- Subject to the applicable law in the state where the Policy is delivered or issued for delivery, commission or attempt to commit a felony or illegal activity.
- Engaging in any illegal occupation, work or employment.
- Operating a motorized vehicle while under the influence of alcohol as evidenced by a blood alcohol level at or in excess of the state legal intoxication limit as defined by the state law where the disability occurs.
- Intentionally self-inflicted harm.
- Attempted suicide, regardless of mental capacity.
- Participation in a war, declared or undeclared, or any act of war. An act of war is military activity by one or more national governments and does not include terrorist acts, other random acts of violence not perpetrated by you, or civil war or community faction.
- Active duty as a member of the armed forces of any nation. However, we will refund, upon written notice of such service, any Premium which has been accepted for any period not covered as a result of this exclusion.
- Active participation in a riot, insurrection or terrorist activity, but not including civil commotion, disorder, injury as an innocent bystander, or injury because of self-defense.
- Subject to the applicable law in the state where the Policy is delivered or issued for delivery, voluntary intake of any narcotic or other controlled substance, unless the narcotic or controlled substance is taken under the direction of and as directed by a doctor.
- Voluntary intake of poison, drugs or fumes, unless a direct result of an occupational accident.

- Cosmetic surgery except when required for your appropriate care as a result of your injury or sickness; cosmetic surgery shall not include (1) reconstructive surgery when the surgery is incidental to or follows surgery resulting from trauma, infection or other diseases of the involved part, (2) reconstructive surgery because of congenital disease or anomaly resulting in a functional defect and (3) surgery necessitated by gender dysphoria.
- Traveling in any aircraft other than as a fare-paying passenger on a scheduled or charter flight operated by a scheduled airline.
- Traveling in any aircraft (or device) used for testing or an experimental purpose, used by or for any military authority, or used for travel beyond the earth's atmosphere.
- Hang-gliding, skydiving, parachuting, ultralight, soaring, ballooning and parasailing.
- Participation in recreational motor sports events, racing, speed or endurance contest (auto, truck, cycle or boat), rock or mountain climbing, skin or scuba diving, or bungee jumping.
- Participation in any sport for wage, compensation or profit.

If your employer's plan covers only non-occupational injuries, then the following exclusion also applies:

- Occupational sickness or injury

We will not pay a benefit for any period of Disability during which you are incarcerated.

Pre-existing conditions: We won't pay benefits if your disability is due to a pre-existing condition, and you became disabled during the first 12 months** following the effective date of your coverage. A pre-existing condition is any condition for which you have done any of the following at any time during the 3** months just prior to your effective date of coverage, whether or not that condition is diagnosed, undiagnosed or misdiagnosed:

- Received medical treatment or consultation.
- Taken or were prescribed drugs or medicine.
- Received care or services, including diagnostic measures.

Your benefits may be reduced by other income you are eligible to receive while disabled.

*Limitations and exclusions will vary by state and by your employer's benefit plan.
**The length of the pre-existing condition "limitation" period and "look-back" period may vary for your employer's plan. Contact your employer for details.

Ready to Enroll?

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

- Voya Employee Benefits Customer Service at (877) 236-7564
  or go to https://presents.voya.com/EBRC/Bergstrom

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. Short Term Disability Income Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis MN) a member of the Voya® family of companies. Policy form ICC19 RL-STD-POL-19 (may vary by state).

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