

Long-Term Disability Insurance

Hope College | All Eligible Other Members | 952772

Protect your paycheck for the long-

erage is provided by your employer at no

Benefits

Monthly benefit after your claim is approved

You will receive a check for your benefits on a monthly basis. It will cover **60%** of your Total Monthly Earnings, up to T342 f36447.42 0.48 59.22 ref112.26447.42 0.481 59.22 ref382.26447.42 0.481 59.22 refEMC /P AM



Sun Life Assurance Company of Canada
sunlife.com
800-SUN-LIFE (247-6875)

Additional optional Long-Term Disability coverage amounts

Consider supplementing your employer-paid long-term disability insurance. You are responsible for paying for the cost of this additional coverage.

	Buy Up
Additional monthly benefit after your claim is approved	You will receive a check for your benefits on a monthly basis. It will cover 70% of your Total Monthly Earnings, up to \$7,500 each month—with no medical questions asked up.
When benefits begin	Benefits begin as soon as 180 days .
Benefits may be paid for	Until you reach the

[Sun Life Assurance Company of Canada]
[Sun Life and Health Insurance
Company (U.S.)]



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Additional considerations

If I have other income	Income from other sources may reduce your benefit amount. These may include disability benefits from social security, retirement, government plans or state disability income; other group disability plans; no-fault benefits, salary continuance or sick leave, and return-to-work earnings.
If I can work while disabled	Your plan is designed to encourage and support your return to work. If you are able to work part-time for example, you may receive part of your benefit while working.

Long-term disability FAQs

Do I need to answer any health questions to enroll?

You will be required to answer health questions if (1) you do not elect coverage when it's first available to you and you want to elect at a later date; (2) you request an amount higher than the Guaranteed Issue amount noted in the table, if offered; or (3) you want to increase coverage at a later date. You will need to fill out and submit our Evidence of Insurability application which must be approved by Sun Life before the coverage takes effect.

What if I have a pre-existing condition?

If you submit a claim within 12 months of your insurance taking effect, or 12 months following any increase in your amount of insurance, we will not pay any benefit for any pre-existing condition. A pre-existing condition includes anything you have sought treatment for in the 3 months prior to your insurance becoming effective. Treatment can include consultation, advice, care, services or a prescription for drugs or medicine.

How much insurance do I need?

Visit www.sunlife.com/calculators for help understanding how much insurance you may need.

How do I file a claim after becoming disabled?

Check with your employer to make sure you are eligible for benefits. Then, file a claim with Sun Life. We will ask for information from you about your doctor, your income, and your condition. We will ask for medical records and for your doctor to fill out a form about your condition and your expected recovery. You can download forms from our website.

How is my benefit taxed?

If you pay for your coverage all post-tax, your benefit will not be taxable income or tax reported by us to the IRS. If you pay for your coverage all pre-tax, or if you pay for part of your coverage post-tax and your employer pays for the rest, or if your employer pays the entire premium, some or all of your benefit amount will be taxable income, which will be tax reported on a Form W-2 and it may have FICA tax deductions that reduce the amount we pay you. Please consult with a tax advisor or your employer if you have any questions.

How do I qualify for benefits?

You'll start receiving disability payments if you satisfy the Elimination Period (see "When benefits begin" in the table) and meet the definition of disability if you're insured when you become disabled.

Read the important plan provisions section for more information including limitations and exclusions.

*Realitycheckup.org, Council for Disability Awareness, 2018, citing Social Security Administration "Disability and Death Tables for Insured Workers Born in 1997," October 2017.

Important information

The following coverage(s) do not constitute comprehensive health insurance (often referred to as “major medical coverage”). They do NOT provide basic hospital, basic medical, or major medical insurance.

To become insured, you must meet the eligibility requirements set forth by your employer. Your coverage effective date will be determined by the Policy and may be delayed if you are not actively at work on the date your coverage would otherwise go into effect. Refer to the Certificate for details.

Limitations and exclusions

The below exclusions and limitations may vary by state law and regulations. This list may not be comprehensive. Please see the Certificate or ask your benefits administrator for details.

Long-Term Disability

We will not pay a benefit that is caused by, contributed to in any way or resulting from: intentionally self-inflicted injuries; committing or attempting to commit an assault, felony or other criminal act; war or an act of war; active participation in a riot (Toact; war2dttem0 45 54uar;orth buof op) buo acta modetiz anvehiclot hilotect.xr detd. not pay a benefitBT

Rates

Employee - monthly rate for Long-Term Disability.

Rates are effective as of July 01, 2022.

Long-Term Disability coverage is contributory. You are responsible for paying for all or a part of the cost through payroll deduction.

Follow the example below to figure out your monthly and pay period costs.

Rate*

0.225

				monthly cost
\$2500	/ 100 = 25	x \$0.225	=	\$5.625
Your monthly earnings	Divide by 100	Multiply by rate		Your monthly cost
\$ _____	/ 100 = _____	x \$ _____	=	
		Annual cost		Divide by your number of pay periods per year (ex: 12,24,26,52,etc.)
				Your estimated cost per pay period
\$ _____	x 12	= \$ _____	/ _____	= \$ _____

*Contact your employer to confirm your part of the cost.