

Handbook for Employees in the VRS Hybrid Retirement Plan whose School Division or Political Subdivision Participates in The Standard Plan.



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For generic claim questions: Contact your human resources office.

For specific claim questions: Call **800.426.4332**

Hybrid Disability Coverage with The Standard provides some income protection if you can't work because of physical disease, mental disorder, injury or pregnancy. You are enrolled in this program because your employer opted out of the state disability program.

Hybrid Disability Coverage with The Standard is comparable and meets all requirements of Title 51.1 of the Code of Virginia.

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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.

Introduction to Hybrid Disability Coverage with The Standard

Income Protection if You Can't Work

Hybrid Disability Coverage with The Standard provides some income protection if you can't work because of a covered physical disease, mental disorder, injury or pregnancy. Benefits of The Standard 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 benefit for severely disabled individuals

Plan Eligibility

If you were hired and a member of the Hybrid Retirement Plan on or after January 1, 2014, and met the disability plan member definition and active work requirement, you are covered under Hybrid Disability Coverage with The Standard as addressed below.

You are a member if you are a U.S. or Canadian citizen or resident and are actively at work at least the minimum hours per week required by your employer for coverage and are a:

- Teacher or other employee of a local public school division
- General employee of a VRS-participating political subdivision, such as a city, county, town, authority or commission
- Local law enforcement officer, firefighter or emergency medical technician, if your employer does not provide enhanced hazardous duty benefits

Member excludes a temporary or seasonal employee, a full-time member of the armed forces of any country, a leased employee or an independent contractor.

If you were hired before January 1, 2014, and elected to transfer to the Hybrid Retirement Plan from the VRS Plan 1 or the VRS Plan 2, your coverage in the plan and in the Hybrid Disability Plan was effective July 1, 2014, assuming you met the member and active work requirements. If you left employment and took a refund of your Plan 1 or Plan 2 member contributions and interest, or withdrew your full account balance from an ORP authorized or administered by VRS, you will be rehired under the Hybrid Retirement Plan if you return to a position covered under the plan.

You are not eligible for Hybrid Disability Coverage with The Standard if:

- You are a state employee
- You are a member of the State Police Officers' Retirement System (SPORS) or the Virginia Law Officers' Retirement System (VaLORS)
- You are a local law enforcement officer, firefighter or emergency medical technician covered under enhanced hazardous duty benefits
- You are a member of the Judicial Retirement System appointed or elected to an original term before January 1, 2014

Visit www.varetire.org/hybrid for more information about your retirement plan and disability coverage.

Contact your human resources office for more information about your employer's policies.

Short Term Disability Eligibility

To be eligible for short term disability, you must meet the definition of a member as described on page 1 and must be actively at work as required by your employer. Your employer must have also opted into the Hybrid Disability Coverage with The Standard. For a disability that is work-related, you are eligible for coverage on your first day as a member. For a non-occupational disability, you are eligible for coverage the first day after one year of continuous participation as a member in the Hybrid Disability Coverage with The Standard with your current employer.

Long Term Disability Eligibility

To be eligible for long term disability coverage, you must meet the definition of a member as described on page 1 and must be actively at work as required by your employer. Your employer must have also opted into the Hybrid Disability Coverage with The Standard.

For a long term disability, the benefit waiting period is the period for which benefits are payable under the employer's short term disability benefits program, including any benefit waiting period under that plan.

Non-work-related coverage during your one-year waiting period

You may want to consider purchasing an individual policy to ensure you have coverage during your waiting period for non-occupational disability coverage.

If You Change Jobs

If you move to a position with another Virginia state or local government employer providing this or a comparable disability program, you will be required to satisfy a new one-year eligibility waiting period for non-occupational (not work-related) short term disability coverage and a new five-year eligibility period for higher income-replacement levels beginning with your new hire date. This also applies if you leave covered employment and then return to a position eligible for this benefit with another employer.

If you move to another employer or leave your job and then return to covered employment:

If you move to another school division or political subdivision providing this coverage or VLDP coverage, you will be required to satisfy a new short term disability eligibility period for non-occupational disability and higher short term disability incomereplacement levels. This also applies if you leave and then return to your former position after a bona fide break in service. A bona fide break in service is a break of at least one full calendar month from your last day of employment over a period you normally would work.

If you leave covered employment and then return to your former position after a bona fide* break in service, you will be required to satisfy a new one-year waiting period for non-occupational short term disability coverage and a new five-year eligibility period for higher income-replacement levels beginning with your subsequent hire date.

If you purchase prior service

If you purchase prior public service, you will receive credit for this service toward your retirement and other benefits under the defined benefit component of your plan. However, prior service credit does not count toward satisfying the one-year waiting period for non-occupational short term disability and the five-year eligibility period for higher short term disability income-replacement levels.

If you return to your former position before the end of a bona fide* break in service, you will be considered continuously employed in your current position. You will resume continuous participation in the plan toward the one-year waiting period for non-occupational short term disability and the five-year eligibility period for higher short term disability incomereplacement levels. Or, if you satisfied these qualifying periods before you left your position, you will not be required to satisfy them again.

^{*} What is a Bona Fide Break in Service? A bona fide break in service is a break of at least one full calendar month from your last day of employment that occurs over a period you normally would work. Periods of leave with or without pay and summer breaks do not count toward satisfying this break in service.

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. However, claims should not be filed more than four weeks before you are scheduled to 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 if...

I am 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 are out for more than seven consecutive calendar days, you may file a claim for short term disability through The Standard. You must first satisfy a one-year eligibility waiting period with your current employer before you are eligible for non-occupational coverage. Your eligibility for work-related disability coverage begins upon employment as a member. The short term disability benefit begins on the eighth day of your disability or your next scheduled workday if the eighth day is not a scheduled workday. Ask your human resources office how your coverage may change if you change employers or terminate employment.

I am 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.

I am having a medical procedure or know my due date if I am pregnant?

As soon as you know when you expect to be out, notify your employer to obtain a customized claim form 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 no earlier than four weeks before your due date unless you are disabled earlier for medical reasons.

I am 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.

I am suffering 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. If you receive a workers' compensation award or settlement, your disability benefit will be reduced by your workers' compensation benefit or settlement amount.

I am on disability and eligible to retire?

You can apply for service retirement at any time unless you are receiving workers' compensation benefits. Once you reach normal retirement age under the Virginia Hybrid Retirement Plan, your STD benefits end. You are not eligible to apply for VRS disability retirement.

Disability or retirement benefits under the retirement program will reduce the long term disability benefit payable. Please note: Once the disability benefits are no longer payable, you must service retire to continue to receive some type of monthly benefit.

I file a claim and my claim is denied?

You will receive a letter from The Standard approving or denying your claim. If your claim is denied, the letter will include information on the appeal process.

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

How to File a Claim for Disability Benefits

Contact your human resources office for a claim application packet, which will include an Employee's Statement, Employer's Statement, Attending Physician's Statement and Authorization to Obtain and Release Information.

Some information you will need to provide on the Employee's Statement will include:

- · Job title and employer name
- · Date of birth
- Current mailing address and phone number
- · Last day you were or will be able to work
- Name, address, phone number and fax number of your doctor or other licensed treating health-care professional.

You will also need to sign the Authorization to Obtain and Release Information in order for The Standard to obtain any medical records which may be necessary for claim review.

The Attending Physician's Statement will need to be completed by your licensed treating health-care professional. Please ensure that you ask your health-care professional's office to complete and return this form to The Standard as soon as possible. You are ultimately responsible for ensuring your provider returns this completed form.

Your human resources office may also ask you to complete a Short Term Disability Repayment Agreement. Your employer funds the short term disability benefits even though the claims are administered by The Standard. This agreement states that you will reimburse your employer for any overpayment of benefits while on short term disability. The form will need to be notarized before returning it to your human resources office.

Notification of Claim Decision

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 a full additional claim application packet.

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.

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

If The Standard receives satisfactory documentation from your licensed treating health-care professional that you are severely disabled, the seven-calendar-day elimination period will be waived. In addition, you will be eligible for an increase of 20 percent to your income replacement level of 60 percent, not to exceed a total income replacement of 80 percent while you remain severely disabled.

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, such as getting in and out of bed
- 3. Dressing
- 4. Toileting
- 5. Continence
- 6. Eating (ability to feed oneself)

You may also be considered severely disabled if you have severe cognitive impairment as a result of physical disease or injury which requires you to have substantial supervision for your health or safety.

Disability Coverage for Contract Employees

If you are on a nine-, 10- or 11-month contract, you are eligible to receive short term disability benefits during contract periods only. If your contract is not renewed, your eligibility will end when your current contract ends.

Non-contract periods count toward satisfying the one-year waiting period for non-occupational short term and long term disability coverage and the five-year eligibility period for higher income-replacement levels under the short term disability coverage.

If you are on disability before the end of your current contract, your short term disability benefits will stop when your current contract ends. If you are still disabled at the beginning of your next contract and remain medically eligible as determined by The Standard, you will resume your benefits. If you file a claim during your non-contract period, the time you are disabled will count toward the seven calendar-day elimination period, but will not count toward the 125-workday period for short term disability and your days of income replacement.

Example 1:

Kelly Smith first began a contract with her current employer beginning September 1, 2014. She started work September 1, 2015, on a contract ending June 30, 2016, and has received her next contract renewal. Ms. Smith suffers a non-occupational injury on June 11, 2016, and is approved for short term disability benefits beginning June 18, the eighth consecutive calendar day of the disability.

- If Ms. Smith is still disabled when the current contract ends on June 30, 2016, disability benefits will stop.
- If she is still disabled by the time the next contract starts on September 1, 2016, the disability benefits will resume.

If you become disabled during your non-contract period, you will not be required to apply for disability benefits as you will have fulfilled your contract and employment responsibilities for the year. If your disability prevents you from returning to work at the start of your new contract period, you may file a claim with The Standard at that time. Your date of disability will remain the same. Your benefit will begin on the start of your new contract period or on the eighth day following the benefit waiting period, whichever is later.

When Benefits End

Your Disability Benefit Will End if:

- · You are no longer considered disabled under the policy
- · You fail to provide proof of continued disability to The Standard
- You begin receiving other disability payments under a plan you become covered under through employment during a period of temporary recovery
- · You pass away
- · You resign from your employment or are terminated from employment for cause
- For short term disability coverage: When you attain normal retirement age under the
 Virginia Hybrid Retirement program; when long term disability benefits become payable
 to you under a group long term disability plan even if that occurs before the end of the
 short term disability maximum benefit period; or when you reach the end of the
 Maximum Benefit Period for short term disability benefits
- For long term disability coverage: when you reach the end of the Maximum Benefit Period for long term disability benefits unless benefits are continued by the Lifetime Security Benefit

If you die while receiving disability payments, The Standard plan will not continue your monthly payment to a beneficiary or survivor. However, your beneficiary or survivor may be eligible to receive a Survivors 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. 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, while long term disability benefits remain payable, the minimum benefit amount is \$100.

If you suffer a work-related illness or injury, you must file a claim for workers' compensation benefits before you file a disability claim. If you have not satisfied the one-year eligibility waiting period for non-occupational short term disability coverage, your workers' compensation claim must be filed before you file a short term disability claim.

Workers' Compensation Example: 100 Percent Income Replacement: Short Term Disability

Example: Eric is eligible for a workers' compensation benefit and a work-related disability benefit equal to 100 percent of his predisability income. His weekly predisability income is \$1,500.

Workers' Compensation Benefit Calculation:

Predisability Income	\$	1,500.00
X 66 2/3% Workers' Compensation Award	X	0.6667
Weekly Worker's Compensation Benefit =	\$	1,000.05

100% Work-Related Benefit Calculation:

Weekly Benefit Amount =	\$	499.95
Less Workers' Compensation Benefit amount	- \$	1,000.05
100% of Weekly Predisability Income	\$	1,500.00

Workers' Compensation Example:

80 Percent Income Replacement: Short Term Disability

Example: Mary is eligible for a workers' compensation benefit and a work-related disability benefit equal to 80 percent of her predisability income. Her weekly predisability income is \$1,250.

Workers' Compensation Benefit Calculation:

Predisability Income	\$	1,250.00
X 66 2/3% Workers' Compensation Award	X	0.6667
Weekly Worker's Compensation Benefit =	\$	833.38

80% Work-Related Benefit Calculation:		
Predisability Income	\$	1,250.00
X 80% Income Replacement	X	.80
Maximum Weekly Benefit =	\$	1,000.00
Maximum Weekly Benefit	\$	1,000.00
Less Workers' Compensation Benefit	- \$	833.38
Weekly Benefit Amount =	\$	166.62

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Workers' Compensation Example: 60 Percent Income Replacement: Short Term Disability

Example: John is eligible for a workers' compensation benefit and a work-related disability benefit equal to 60 percent of his predisability income. His weekly predisability income is \$2,000.

Workers' Compensation Benefit Calculation:

Predisability Income	\$	2,000.00
X 66 2/3% Workers' Compensation Award	X	0.6667
Weekly Worker's Compensation Benefit =	\$	1,333.05

60% Work-Related Benefit Calculation:

Weekly Benefit Amount =	\$ 1,200,00
X 60% Income Replacement	\$.60
Predisability Income	\$ 2,000.00

John's workers' compensation benefit exceeds his 60 percent 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 percent or ends, or if he is eligible for income replacement at 80 percent because he is severely disabled, John will begin to receive a weekly disability benefit payment to bring him to 60 to 80 percent 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 percent 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 maximum income replacement is 60 percent of your predisability earnings, unless you are severely disabled and qualify for income replacement at 80 percent of your predisability income. Because the long term disability policy has a \$100 minimum benefit, at least \$100 will be payable even if your other income is greater than 60 percent of your predisability earnings when combined together.

Examples of other income that may reduce your disability benefits include, for example, the following. 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:

- 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) (e.g. Social Security benefits, retirement benefits)
- Workers' compensation, severance payments or unemployment compensation
- Amounts received for the same condition from any other group disability insurance.
- Short term disability coverage

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 non-occupational or work-related. A work-related disability is the result of an occupational illness or injury that occurs on the job.

Maximum Benefit Period

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.

Know your due date if you are pregnant? Have an upcoming medical procedure?

If you know when you will be out, notify your employer and file a claim with The Standard. Although the short term disability benefit will not begin until the eighth day of your disability, you do not have to wait until the seven-calendar-day benefit waiting period to file a claim. For maternity, it is recommended to file your claim no earlier than four weeks before your due date unless you are disabled earlier for medical reasons.

Benefit Waiting Period

If your claim for short term disability is approved, the benefit begins on the eighth day of your disability or your next scheduled workday if the eighth day is not a scheduled workday. Check with your human resources office about leave policies for absences during the benefit waiting period. If you have a condition which causes you to lose two or more activities of daily living, this period may be waived.

Non-Occupational 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 percent of your predisability income if your disability is non-occupational. For disability occurring after five years of continuous employment as a member with your current employer, you become eligible for higher income replacement beginning at 100 percent of your predisability income, which reduces to 80 percent and

then 60 percent (for each, 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: Non-Occupational Short Term Disability

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 non-occupational short term disability

Work-Related Short Term Disability – Income Replacement Level

You are eligible for work-related short term disability coverage from the first day your coverage is effective. To qualify for a work-related benefit, your disability must arise out of or in the course of employment with your employer – e.g. the result of an occupational illness or injury that occurs on the job. Contact your employer about your workers' compensation benefits and assistance with filing a workers' compensation claim.

You are eligible for income replacement at 60 percent of your predisability income. For disability occurring after five years of continuous participation in the STD plan, and with your current employer, you become eligible for income replacement beginning at 100 percent of your predisability income, which reduces to 80 percent and then 60 percent (for each, less deductions of 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:

Months of Continuous Service	Workdays at 100% Income Replacement	Workdays at 80% Income Replacement	Workdays at 60% Income Replacement
Fewer than 60	0	0	125
60-119	85	25	15
120+	85	40	0

Contact your human resources office with questions about leave policies and income replacement during periods of non-occupational 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 are eligible to receive a partial disability payment if you are unable, due to your disability, to earn 80% or more of your predisability earnings. Earnings from your job during this period will reduce the amount of your short term or long term disability benefit.

If you apply for partial disability benefits, you must satisfy the seven-calendar-day benefit waiting period.

If you receive a workers' compensation award, your short term disability benefit will be reduced by your workers' compensation benefit. Because of this offset, you will not receive a short term disability benefit if your workers' compensation benefit is greater than your short term disability benefit amount.

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 which 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 sevencalendar-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 short term disability benefits under another disability plan under which you became covered during recovery.

After 45 consecutive calendar days: If you have a period of temporary recovery which lasts longer than 45 days, and 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.

Other Benefit Coverage While on Short Term Disability

Hybrid Retirement Plan Service and Contributions

Contact your human resources office with any questions regarding your retirement plan and contributions. Defined benefit component: While you are on short term disability, you will continue to contribute 4 percent of your compensation each month to your member contribution account on a pre-tax salary-reduction basis, unless you are receiving only a workers' compensation benefit. If you are on work-related short term disability and receiving only a workers' compensation benefit, and the contribution cannot be withheld from your payment because your employer does not have control over deductions, the contribution will not be withheld and you will not receive service credit. You will be eligible to purchase this missing time. The Code of Virginia prohibits members from borrowing from their member-contribution accounts.

Defined contribution component: Hybrid 401(a) Cash Match Plan and Hybrid 457 Deferred Compensation Plan. While you are on short term non-occupational disability, you will continue to contribute the mandatory 1 percent member contribution, and your employer will continue to contribute the mandatory 1 percent employer contribution to your Hybrid 401(a) Cash Match Plan. You also remain eligible to make voluntary contributions to your Hybrid 457 Deferred Compensation Plan. Distributions from the Hybrid 401(a) and Hybrid 457 plans for a hardship or unforeseen emergency are prohibited by the Code of Virginia. If you are on work-related short term disability and receiving only a workers' compensation benefit, and contributions cannot be withheld because your employer does not have control over the deductions, no contributions will be credited to your Hybrid 401(a) Cash Match Plan or Hybrid 457 plans. More information about the VRS Hybrid Retirement Plan is available at www.varetire.org/hybrid.

Note: If you are determined by the Social Security Administration to be permanently and totally disabled and are on work-related disability, no contributions will be withheld from your payment. You will be credited with the mandatory 1 percent employer contribution to your Hybrid 401(a) Cash Match Plan.

Employer-Sponsored Tax-Deferred Savings and Supplemental Retirement Plans If you are contributing to an employer-sponsored tax-deferred savings or supplemental retirement plan, your contributions may continue while you are on short term disability. You also may be eligible for a distribution for a hardship or unforeseen emergency. Contact your human resources office for more information about your contributions if you participate in an employer-sponsored plan.

Leave	Contact your human resources office about your employer's leave policies during periods of short term disability
Health Insurance	If your employer provides health insurance, your coverage will continue while you are on short term disability. Contact your human resources office with any questions.

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 other occupation thereafter. Long term disability benefits are payable after a seven-calendar-day benefit waiting period plus 125 contract workdays. If you are receiving short term disability benefits from 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 percent of your predisability income reduced by deductible income. One example of deductible income would include 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, as follows: age 59 or younger - to SSNRA, age 60 through 64 - 5 years, age 65 through 68 - to age 70, age 69 or other - one year. SSNRA means your normal retirement age under the Federal Social Security Act, as amended.

Age	Maximum Benefit Period		
59 or younger	To SSNRA		
60 through 64	5 years		
65 though 68	To age 70		
69 or older	1 year		

Social Security Normal Retirement Age (SSNRA) means your normal retirement age under the Federal Social Security Act, as amended.

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.

During the benefit waiting period. If you have a period of temporary recovery that lasts 45 consecutive days or less while you are still serving the benefit waiting period, you will not have to file a new claim and serve the benefit waiting period again. However, this period of temporary recovery will not count toward serving the 125-workday-benefit waiting period. If your period of temporary recovery lasts longer than 45 days, you will be required to file a new claim.

During the maximum benefit period: 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 125 consecutive days 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. No long term disability benefits are payable if benefits became payable to you under any other disability insurance plan you became insured under during your period of temporary recovery.

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, predisability 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.

Other Benefit Coverage While on Long Term Disability

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Contributions	Defined benefit component. The 4 percent member contribution will stop while you are on long term disability. You also will be ineligible to purchase prior service. If you are on work-related disability receiving only a workers' compensation benefit, contact your human resources office for more information about your member contributions. Defined contribution component. The mandatory 1 percent member contribution to your Hybrid 4019a) Cash Match Plan will stop while you are on long term disability. You will be ineligible to make additional voluntary contributions to your Hybrid 457 Deferred Compensation Plan. If you qualify for Social Security Disability Insurance (SSDI) benefits, your employer will continue to make the mandatory 1 percent employer contribution to your Hybrid 401(a) plan. Distributions from the Hybrid 401(a) and Hybrid 457 plans for a hardship or unforeseen emergency are prohibited under Internal Revenue Service (IRS) requirements. More information about the VRS Hybrid Retirement Plan is available at www.varetire.org/hybrid
VRS Service Credit	You continue to accrue VRS service credit while on long term disability. VRS members earn service credit for each month they are reported in a covered position. Service credit also may include credit for prior service a member may have purchased, or additional service granted by an employer. Service credit is one of the factors used to calculate the VRS retirement benefit and determine eligibility for retiree benefits.
Leave	Contact your human resources office about your employer's leave policies during periods of long term disability.

For more information about your VRS benefits, visit **www.varetire.org/hybrid** or call VRS at **1.855.291.2285.** You can also contact your human resources office with questions.

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 800.772.1213 or visit www.ssa.gov.

Important note about SSDI advocacy services:

If The Standard determines you may qualify for SSDI, The Standard will provide SSDI claim advocacy services free of charge. If you wish to use a different advocacy service or an attorney, you will be responsible for paying the fees.

Qualifying for SSDI does not automatically qualify you for a long term disability benefit from The Standard. If you file a disability claim and The Standard determines you may also be eligible for SSDI, The Standard 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.

SSDI Benefit Calculation Example:

Example: Maria is approved for long term disability from The Standard and is also eligible for SSDI. Her predisability income is \$5,000 per month. Her SSDI benefit is \$2,000 per month.

Calculation:

Monthly Predisability Income	\$	5,000.00
x 60% Income Replacement	X	.60
Maximum Long Term Disability Monthly Benefit =	\$	3,000.00
Less SSDI Monthly Disability benefit	- \$	2,000.00
Amount of Adjusted LTD 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.



Standard Insurance Company 1100 SW Sixth Avenue Portland OR 97204

www.standard.com