

Colonial Life Your Voluntary Benefits Offering!

Montgomery County Schools

Open Enrollment October & November

HR will be providing Specific Enrollment Dates for Your School

20- Pay - Payroll Rate Samples

Short Term Disability: \$1000/month, 7/7 day Elimination Period, OR 14/14 day Elimination Period
"Paycheck Insurance!" Provides income replacement to help you pay mortgage or rent, utility bills or other expenses should you become disabled due to a covered accident or illness. Maternity covered after policy has been in-force 9 months.

Design your own plan to fit your budget & financial needs: You may elect up to 66 2/3 of your salary with a maximum benefit of \$3000 per month. Choose your monthly income benefit (based on your salary), elimination period (benefits become payable once you have been disabled for this number of days; "waiting" period), and 3 month benefit period (how many months you are eligible to receive disability benefits from your plan).

	<u>3 month 7/7</u>	<u>3 month 14/14</u>
Age 17-49	\$16.50	\$11.10
Age 50-69	\$19.80	\$14.10

Accident Care: On/Off Job Coverage
 Helps offset unexpected medical expenses that can result from accidental injury. Includes ER treatment, Hospitalization, Intensive Care and Catastrophic coverage for covered accidents - see brochure for all benefits.

	<u>Employee</u>	<u>EE + Spouse</u>	<u>EE + Child(ren)</u>	<u>Family</u>
	\$10.80	\$14.40	\$18.00	\$21.60

Cancer 1000: Level 2
 Provides wellness benefits for screening tests and follow up. Benefits provide protection against out-of-pocket medical and *indirect, non-medical expenses related to cancer. Men have a 1 in 2 lifetime risk, for women the risk is 1 in 3. *American Cancer Society reports that 65% of the overall cost of treatment for cancer is indirect. Additional levels of coverage available.

Rate includes \$1,000 Initial Diagnosis, Progressive Payment and Specified Disease Riders

	<u>Employee</u>	<u>EE + Child(ren)</u>	<u>Family</u>
	\$15.84	\$17.25	\$26.25

Intensive Care:
 Coverage protects you and your family against financial hardships that result from a prolonged stay in intensive care, coronary care, neonatal intensive care and sub-acute intensive care units.

	<u>\$500</u>	<u>\$750</u>	<u>\$1,000</u>
Employee	\$3.45	\$4.87	\$6.29
EE + Child(ren)	\$4.00	\$5.69	\$7.38
Family	\$6.23	\$9.03	\$11.83

"NEW BENEFIT" CRITICAL ILLNESS
 You have the option to choose from a \$10,000 or \$25,000 benefit and you may also add your spouse to a plan. The Critical Illness plan is a lump sum payment for Heart Attack, Stroke, Major Organ Transplant, End Stage Renal Failure. For Coronary Bypass Surgery it will pay 25% of the amount of coverage you purchase.

Wellness Benefit: \$50 per calendar year, see brochure

WITHOUT CANCER RIDER

	<u>\$10,000 Benefit</u>		<u>\$25,000 Benefit</u>	
	<u>Non-Tobacco</u>	<u>Tobacco</u>	<u>Non-Tobacco</u>	<u>Tobacco</u>
Age 16-29	\$2.34	\$3.01	\$4.06	\$5.69
30-39	\$3.37	\$5.16	\$6.61	\$11.10
40-49	\$5.28	\$8.99	\$11.40	\$20.69
50-59	\$8.17	\$14.71	\$18.61	\$34.95
60-69	\$11.40	\$19.50	\$26.70	\$46.96

WITH CANCER RIDER

	<u>\$10,000 Benefit</u>		<u>\$25,000 Benefit</u>	
	<u>Non-Tobacco</u>	<u>Tobacco</u>	<u>Non-Tobacco</u>	<u>Tobacco</u>
Age 16-29	\$3.60	\$5.16	\$7.20	\$11.10
30-39	\$5.25	\$8.70	\$11.40	\$19.96
40-49	\$8.88	\$16.20	\$20.40	\$38.70
50-59	\$14.46	\$27.18	\$34.36	\$66.15
60-69	\$22.20	\$38.52	\$53.70	\$94.50

This is a brief summary, see the Outline of Coverage for complete details of benefits, exclusions and limitations. This is not an application for coverage; you must complete the required Enrollment Application and Forms.