Group Name: Arcwood Environmental Group Number: 746355 Class 2 and 3: All Salary & Hourly Employees

#### Long Term Disability Income Insurance

# Help minimize the financial impact of a disabling illness or injury

## What is Long Term Disability Income Insurance?

While hard to imagine, now is the right time to think about how to replace part of our paycheck when you're injured or ill and can't work. If your recovery time lasts longer than just a few short months, **Long Term Disability Income Insurance** can help replace part of your income for the duration of your disability or to normal retirement age.

### How much coverage do I get?

Your employer believes in the importance of Long Term Disability Income Insurance and is providing basic coverage at no cost to you in the amount of:

#### Coverage amounts

60% of your monthly earnings, up to \$15,000 per month

**Coverage Minimum:** >\$100 of your monthly earnings or 10% of your monthly earnings

Coverage Maximum: \$15,000 monthly benefit

## Your policy has a waiting period of 180 consecutive days within 360 calendar days.

A waiting period is the amount of time that must pass before your benefits will begin. Any days that you are able to work after the start of your disability will not count towards your waiting (elimination) period.

## What else is included?

With Long Term Disability Income Insurance, you'll also have access to these additional benefits to bring you added support when you need it. For a complete description of your available benefits, along with applicable provisions, exclusions and limitations, see your certificate of insurance and any riders.

**ENVIRONMENTA** 

Social Security Disability Income (SSDI) filing assistance when you are ready to file.

**Survivor Benefit** pays an eligible loved one a lump-sum benefit if you pass while receiving disability benefits - 3 times your monthly benefit.

**Vocational rehabilitation** services assist you in returning to work when possible.

**Workplace modifications** may be made to your workplace in order to help you return to work.

**Family Member Care Expense** Benefit may provide a benefit for incurring expenses to care for an eligible family member if you are receiving monthly Disability benefits and participating in a vocational rehabilitation plan.

**Child Care Expense Benefit** may provide a benefit for incurring expenses to care for an eligible child if you are receiving monthly Disability benefits and participating in a vocational rehabilitation plan.



## How long do benefit payments last?

Long Term Disability Income benefits are available until you recover from your disability, or until you reach the maximum period of payment listed below.

If you are disabled **before you reach age 60**, the maximum period of payment will be until SSNRA, as shown in the following table:

Year of birth	Social Security retirement age (SSNRA)*
Before 1938	65 years
1938	65 years and 2 months
1939	65 years and 4 months
1940	65 years and 6 months
1941	65 years and 8 months
1942	65 years and 10 months
1943-1954	66 years
1955	66 years and 2 months
1956	66 years and 4 months
1957	66 years and 6 months
1958	66 years and 8 months
1959	66 years and 10 months
After 1959	67 years

If you are disabled **on or after you reach age 60**, the maximum period of payment will be determined according to the following table:

Age when disability begins	Maximum period of payment
60	60 months or to SSNRA*, whichever is greater
61	48 months or to SSNRA*, whichever is greater
62	42 months or to SSNRA*, whichever is greater
63	36 months or to SSNRA*, whichever is greater
64	30 months or to SSNRA*, whichever is greater
65	24 months
66	21 months
67	18 months
68	15 months
69 and over	12 months

\*Age at which you are entitled to unreduced Social Security benefits based on the Social Security Amendments of 1983.

## **Exclusions and limitations**

Benefits are not payable if your disability is caused by, contributed to or resulting from:

- Loss of a professional or occupational license or certification
- Commission of or attempt to commit a felony
- Intentionally self-inflicted injuries
- Attempted suicide, regardless of mental capacity
- Being legally intoxicated or being under the influence of any narcotic, unless taken under the direction of and as directed by a doctor
- Participation in a war, declared or undeclared, or any act of war
- Active military duty
- Active participation in a riot
- Engaging in any illegal or fraudulent occupation, work or employment
- Commission of a crime for which you have been convicted
- Elective surgery, except when required for your appropriate care as a result of your injury or sickness
- Traveling or flying on an aircraft operated by or under the authority of military or any aircraft being used for experimental purposes

**Pre-existing conditions:** A pre-existing condition is a sickness, injury or physical condition that led to medical treatment, consultation, care or services (including diagnostic measures) during the 3 month period before your coverage effective date. Benefits are not payable if your disability begins in the first 12 months after your

coverage effective date, and your disability is caused by, contributed by, or the result of a pre-existing condition.

Your benefits may be limited to a shorter time period, such as 24 months during your lifetime, if:

- The disability is due to a mental illness, alcoholism or drug abuse.
- Your benefits will be reduced by other income (deductible sources of income) you are eligible to receive while disabled. These include but aren't limited to:
- Income received from any form of employment
- Unemployment benefits and any type of income replacement provided by your employer
- Workers' Compensation benefits or benefits from similar programs
- · Judgments or settlements you receive related to disability
- Disability or retirement payments under Social Security or other federal and state plans
- Disability income payments under automobile liability insurance benefits
- Disability income payments payable under any other group insurance policy and certain retirement payments provided under your employer's retirement plan

\*Limitations and exclusions will vary by state and by your employer's benefit plan.

This offer is contingent upon participation requirements being met.

# **Questions**?

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

Scan the QR code to visit your Employee Benefits Resource Center to learn more about this benefit and review instructions on how to file a claim after your effective date: https://presents.voya.com/EBRC/HeritageEnvironmentalServices



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. Disability Income Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya<sup>®</sup> family of companies. Policy form HP08GP and/or HP13GP (may vary by state).

For the employees of Heritage Environmental Services

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