

Prepare today to help protect tomorrow.

Disability insurance from New York Life Group Benefit Solutions.



For many people, every paycheck counts. What would happen to your bills, your savings and your lifestyle if you couldn't work? You can help protect your financial future with disability insurance in case you get a covered illness or injury that keeps you from earning a living.

New York Life Group Benefit Solutions (NYL GBS) Disability insurance pays a portion of your paycheck when you become disabled and can't work for a period of time due to a covered illness or injury. When you think about it, it's kind of like having insurance for some of your paycheck. Disability doesn't always mean a serious handicap. A disability is considered an illness or injury that prevents you from earning your salary.

How does it work?

With disability insurance, you'll receive a percentage of your salary for a specified period of time, after you meet any applicable waiting period(s). Payments may come directly to you or someone you designate and can be spent any way you like – just like you would use your paycheck. For example, it can help you pay for:

- Planned expenses like groceries, mortgage or utilities
- Unplanned expenses like medical bills

Why is it important?

Disability insurance can pay you benefits if you suffer a covered disability – so you can have one less thing to worry about and can focus on getting healthy. When you are ready to return to your job, NYL GBS also offers extensive return-to-work and vocational coaching services to help you get back to work safely.

Anytime support with easy-to-use programs and resources

With disability insurance, employees and their families have access to a suite of programs and services, available from day one.

- **NYL GBS Healthy Working Life.** Vocational services designed to help you overcome barriers in performing your job and reduce the risk of a disability event, or help you return to work and life after a disability occurs.
- **Nyl.com/workwellness.** Valuable online resource for you and your family to learn about disability, staying healthy at work, returning to work and programs for healthy living.

Value-added programs and services³

At NYL GBS, our product solutions offer real value to you and your family from day one. Whether you're – healthy, sick, injured, facing a life-changing event or financial challenges – NYL GBS is here to provide assistance and support. With your NYL GBS plan, you and your household members have access to a suite of programs and services for use at any time at no additional cost.

Consider this

Nearly 3/4 of Americans live paycheck-to-paycheck¹

More than one in four 20-year-olds in the U.S. will become disabled before reaching retirement age²



GROUP BENEFIT
SOLUTIONS

How to file a claim

Contact your employer on, or before, your first day out of work. Tell them when and for how long you plan to be out. If you know you'll be out for more than seven days in a row, call at **(800) 362-4462**. Make sure you call before your seventh day out of work. We'll start reviewing your claim. If your plan allows for coverage before seven days, report your claim as soon as possible.

You can file your claim by phone or online



Complete and file your claim by phone

Call toll-free **(800) 238-2125** between 7:00 am and 7:00 pm, CST and choose option 2. A representative will walk you through the process.



Complete and file your claim online

Fill out a claim form online at nyl.com/customer-forms

- Review fraud warning and click "I agree" at the bottom of the page
- Follow the simple steps to complete your form and submit



Fax, email or mail

Blank/fillable claim forms can be found online at nyl.com/customer-forms

- Download, print, complete, sign your claim form and send via fax, email or mail
 - **Fax** documents to **(800) 642-8553**
 - **Email** scanned documents to **DallasFCO.Intake2@newyorklife.com**
 - **Mail** documents to
New York Life Group Benefit Solutions
Paper Intake Team
P.O. Box 709015
Dallas, TX 75370-9015

Information you'll need

Before you call or go online, make sure you have this information handy:

- Personal information, such as your name, address, phone number, birth date, Social Security number and email address
- Employment information, such as employer's name, email address, date of hire and job title
- The reason for your claim – illness, injury or pregnancy
- Description of your illness, symptoms and/or diagnosis – including the date your symptoms first appeared and if you've had these symptoms before
- Workers' compensation claims you've filed or plan to file
- Details about doctor, hospital or clinic visits, including dates and contact information
- Direct deposit – You can have your weekly/monthly benefit payments deposited directly into your checking or savings account



Questions

Call **(800) 238-2125**, option 2 to speak with a customer service representative.

1. American Payroll Association, "2020 Getting Paid in America Survey", 2020.

2. Social Security Administration, "The Faces and Facts of Disability", <https://www.ssa.gov/disabilityfacts/facts.html>, January 2020.

3. **These programs are NOT insurance and do not provide reimbursement for financial losses.** Programs are provided through third party vendors who are solely responsible for their products and services. Full terms, conditions and exclusions are contained in the applicable client program description, and are subject to change. Program availability may vary by plan type and location, and are not available where prohibited by law.

Product availability may vary by location and plan type and is subject to change. All group insurance policies may contain exclusions, limitations, reduction of benefits, and terms under which the policies may be continued in force or discontinued. For costs and complete details of coverage, contact your New York Life Insurance representative. Policy Form: TL-004700 et al.

New York Life Group Benefit Solutions products and services are provided by Life Insurance Company of North America and New York Life Group Insurance Company of NY, subsidiaries of New York Life Insurance Company.

New York Life Insurance Company

51 Madison Avenue
New York, NY 10010

© 2021, New York Life Insurance Company. All rights reserved. NEW YORK LIFE, and the NEW YORK LIFE Box Logo are trademarks of New York Life Insurance Company.



Offered by Life Insurance Company of North America, a Cigna company

Employee-Paid LONG-TERM DISABILITY INSURANCE

SUMMARY OF BENEFITS

Prepared for: Jackson State University

If you had an unexpected illness or injury and were unable to work, how long would you be able to pay your bills? Long-term disability pays a portion of your salary if you're unable to work due to a covered disability.

Who Can Elect Coverage?:

You: All active, Full-time Employees of the Employer regularly working a minimum of 30 hours per week. You will be eligible for coverage the first of the month following date of hire.

Available Coverage:

Gross Monthly Benefit	Maximum Gross Monthly Benefit	Benefit Waiting Period	Maximum Benefit Period
60% of your monthly covered earnings	\$5,000 or if you qualify for PERS 50% with no further offsets.	90 Days	Please refer to the 'How Long Benefits Last' section below for more details.

Additional Features

Family Survivor Benefit – If you die while receiving benefits, we will pay a survivor benefit to your lawful spouse, eligible children, or estate. The plan will pay a single lump sum equal to 3 months of benefits.

Employee's Monthly Cost of Coverage:

Monthly Rate Per \$100 of Monthly Covered Earnings = \$0.650
*Actual per pay period premiums may differ slightly due to rounding.
Rates may be subject to change in the future.*

How to Calculate Your Semi-Monthly Cost:

- Step 1:** Divide your annual salary by 12 to calculate your monthly earnings.
- Step 2:** Find the above Monthly rate.
- Step 3:** Multiply this rate by your monthly earnings, or \$8,333, whichever is less.
- Step 4:** Divide the total by 100. The result is your Monthly cost.
- Step 5:** Multiply your Monthly cost by 12.
- Step 6:** Divide by 24. The result is your **Semi-Monthly Cost**.

Important Definitions and Policy Provisions:

Disability - "Disability" or "Disabled" means if solely because of a covered injury or sickness, you are unable to perform the material duties of your regular job and you are unable to earn 80% or more of your covered earnings from working in your regular job. We will require proof of earnings and continued disability.

Covered Earnings - "Covered Earnings" means your wages or salary, not including overtime pay, bonuses, commissions, and other extra compensation.

When Benefits Begin - You must be continuously Disabled for 90 Days before benefits will be paid for a covered Disability.

How Long Benefits Last - Once you qualify for benefits under this plan, you continue to receive them until the end of the benefit or until you no longer qualify for benefits, whichever occurs first. Should you remain Disabled, your benefits continue according to the following schedule, depending on your age at the time you become Disabled.

Age at Disability	Age 62 or younger	63	64	65	66	67	68	69+
Duration of Payments (months)	To age 65 or the date the 42nd monthly benefit is payable, if later.	36	30	24	21	18	15	12

When Coverage Takes Effect - Your coverage takes effect on the later of the policy's effective date, the date you become eligible, the date we receive your completed enrollment form if required, or the date you authorize any necessary payroll deductions if applicable. If you're not actively at work on the date your coverage would otherwise take effect, your coverage will take effect on the date you return to work. If you have to submit proof of good health, your coverage takes effect on the date we agree, in writing, to cover you.

Benefit Reductions, Conditions, Limitations and Exclusions:

Effects of Other Income Benefits - This plan is structured to prevent your total benefits and post-disability earnings from equaling or exceeding pre-disability earnings. Therefore, we reduce this plan's benefits by an amount equal to any Social Security retirement and/or disability benefits payable to you, your dependents, or a qualified third party on behalf of you or your dependents. Your disability benefits will not be reduced by any Social Security disability benefits you are not receiving as long as you cooperate fully in efforts to obtain them and agree to repay any overpayment when and if you do receive them. Disability benefits will be reduced by amounts received through other government programs, sick pay, employer funded retirement benefits, workers' compensation, franchise/group insurance, auto no-fault, and damages for wage loss. For details, see your outline of coverage, policy certificate, or your employer's summary plan description.

Earnings While Disabled - During the first 24 months that benefits are payable, benefits will be reduced if benefits plus income from employment exceeds 100% of pre-disability Covered Earnings. After that, benefits will be reduced by 50% of earnings from employment.

Limited Benefit Period - Disabilities caused by or contributed to by any one or more of the following conditions are subject to a lifetime limit of 24 months for outpatient treatment: Anxiety-disorders, delusional (paranoid) or depressive disorders, eating disorders, mental illness, somatoform disorders (including psychosomatic illnesses), Alcoholism, drug addiction or abuse. Benefits are payable during periods of hospital confinement for these conditions for hospitalizations lasting more than 14 consecutive days that occur before the 24-month lifetime outpatient limit is exhausted.

Pre-existing Condition Limitation - Benefits are not payable for medical conditions for which you incurred expenses, took prescription drugs, received medical treatment, care or services (including diagnostic measures), or for which a reasonable person would have consulted a physician during the 3 months just prior to the most recent effective date of insurance. Benefits are not payable for any disability resulting from a pre-existing condition unless the disability occurs after you have been insured under this plan for at least 12 months after your most recent effective date of insurance.

Termination of Disability Benefits - Your benefits will terminate when your Disability ceases, when your benefit duration period is exceeded, you earn more than your allowable Covered Earnings, or the date you refuse to participate in rehabilitation services.

Exclusions - This plan does not pay benefits for a Disability which results, directly or indirectly, from any of the following: • Suicide, attempted suicide, or intentionally self-inflicted injury while sane or insane. • war or any act of war, whether or not declared. • active participation in a riot; • commission of a felony; • the revocation, restriction or non-renewal of an Employee's license, permit or certification necessary to perform the duties of his or her occupation unless due solely to Injury or Sickness otherwise covered by the Policy. • any cosmetic surgery or surgical procedure that is not Medically Necessary.

In addition, the plan does not pay disability benefits any period of Disability during which you are incarcerated in a penal or corrections institution.

- 1 Your benefit amount will be reduced by any amounts payable to you by any of the sources listed under the "Effects of Other Income Benefits" section.
- 2 Costs are subject to change.

Terms and conditions of coverage for Long Term Disability insurance are set forth in Group Policy No. VDT 961421. This is not intended as a complete description of the insurance coverage offered. This is not a contract. Complete coverage details, including premiums, are contained in the Policy Certificate. If there are any differences between this summary and the group policy, the information in the group policy takes precedence. Product availability and/or features may vary by state.

Please keep this material as a reference. Insurance coverage is issued on group policy form number: Policy Form TL-004700. Coverage is underwritten by Life Insurance Company of North America, 1601 Chestnut St. Philadelphia, PA 19192.

"Cigna" and the "Tree of Life" logo are registered service marks of Cigna Intellectual Property, Inc., licensed for use by Cigna Corporation and its operating subsidiaries. All products and services are provided by or through such operating subsidiaries, including Life Insurance Company of North America and Cigna Life Insurance Company of New York, and not by Cigna Corporation.

882862 © 2019 Cigna. Some content provided under license.