

Group Long Term Disability Insurance Benefit Summary

Group #: 013595, Stockbridge Community Schools

Policy: Madison National Life Insurance Company, Inc., 7273 **Original Effective Date:** 10/1/2011

Class #	Class Title and Eligibility (Minimum Hour Requirement)	Maximum Annual Covered Salary / Maximum Monthly Benefit	Benefit	Elimination Period
01	Superintendent (40 hours per week)	\$170,004 / \$8,500	60%	Length of accumulated sick leave, or 90 calendar days of Disability accumulated in any twelve (12) consecutive months, whichever is later. The last three (3) sick days or days of Disability must be consecutive and due to the same or a related cause; OR Three (3) consecutive days of Disability occurring during a school year in which the Elimination Period was previously satisfied.
02	Administrators, Supervisors and Administration Office Support (40 hours per week)	\$99,996 / \$5,000	60%	
03	Teachers and Nurses (33.75 hours per week)	\$50,004 / \$2,500	60%	
04	Support Staff (40 hours per week)	\$50,004 / \$2,500	60%	
06	Part-Time Teacher & Part-Time Counselors (15 hours per week)	\$50,004 / \$2,500	60%	

Eligibility/Effective Date of Individual Coverage	Classes 01-02: First day of Active Work Classes 03-04, 06: First of month following completion of the Waiting Period if hired during the school year; 9/1 if hired during the summer		
Employer Contribution	90%		
Participation Requirement	75% all classes combined LOB: LTD Effective Date: 10/01/2023 Participation calculation: 99/110 = 90.00% Participation requirements have been met.		
Benefit Duration	To SSNRA, 12 month minimum		
Definition of Disability	Zero Day; Partial Disability from Date of Disability		
Cumulative Elimination Period	None		



Minimum Monthly Benefit	5% of Gross LTD Benefit		
Calculation Method	Standard - Non-Contract Day		
Pre-Disability Earnings Definition	Class 01: Base Pay, Extra Compensation Classes 02-04, 06: Base Pay Notes: Class 01: Base pay plus annual contributions to an annuity plan as selected by Superintendent		
Pre-Existing Conditions Exclusion	None		
EOI Requirements	Late entrants Not enrolled within 31 days of eligibility, increases, and amounts exceeding the Guarantee Issue		
Terminations & Continuation of Coverage	Coverage may continue, with payment of premiums during: -FMLA -Paid Leave: 12 months -Unpaid Leave: 12 months -Lay-off: 3 months		
Contract Employee Termination or Retirement	Coverage terminates at the earlier of retirement or expiration of the current contract year. If you terminate mid-contract, coverage terminates the date you last worked.		
Non Contract Employee Termination	Coverage terminates on the date you last worked		
Own Occupation	24 months following the end of the Elimination Period		
Sick Pay Coordination	Disability benefit is offset by sick pay		
Recurrent Disability	6 months		
Medical Premium Expense Benefit	90 day wait, \$1,200 max, 29 month duration		
Limitations (Mental/Substance Abuse)	24 months per Occurrence unless hospital confined		
Deductible Income (SS Integration)	Full Family/General Freeze		
Billing Information	Billing Method: List Billed Date Census Last Received: 12/6/2023		
EAP	Yes		
Student Loan Solutions	No		
Identity Theft	Yes		
Renewal Date	10/1/2024		

This summary of benefits is meant to be an overview of the Policy only. Please refer to the Certificate for a full explanation of your plan's benefits, exclusions, limitations, and reductions. Should there be any discrepancy between this outline and the Certificate, the Certificate will prevail.



Employer Use Only

National Insurance Services Contact Roster

All representatives can be reached at 1-800-627-3660

For immediate response to your **SERVICE** guestions, contact:

Tyler Loney Client Relations tloney@nisbenefits.com

For immediate response to your **BILLING** questions, contact:

Shannon Barsch Billing Representative sbarsch@nisbenefits.com Fax: 262-814-1397

For any plan **QUESTIONS** or to arrange an **IN-PERSON** visit to discuss your current plan and future changes, contact:

Nicole Miller Account Manager nmiller@nisbenefits.com

For questions about existing **CLAIMS**, contact:

Madison National Life Insurance Company, Inc.

Phone: 1-800-356-9601

Website: www.madisonlife.com

Email: MNLCustomerCare@madisonlife.com

To submit **CLAIM FORMS** or other documentation, contact:

Madison National Life Insurance Company, Inc.

Website: www.madisonlife.com

Email: MNLCustomerCare@madisonlife.com

NIS Products & Services

Insured Plan Products

Health Insurance
Dental Insurance
Long and Short Term Disability Insurance
Life and AD&D Insurance
Vision Insurance
Worksite (Supplemental) Benefits
Flexible Savings Account (FSA)
Employee Assistance Program (EAP)
Student Loan Solutions (SLS)
Identity Theft Insurance
Retiree Audit Services

Retirement Income Products

Health Reimbursement Arrangement (HRA)
Health Savings Account (HSA)
Early Retiree Health Insurance Alternatives
Tax-Advantaged Sick Leave and Retiree Incentive Payouts
Defined Contribution Plan HRA plans
Funding Solutions - Employee Benefit Trust

Full Benefit Consulting Services

Benefit Administration and Online Enrollment Systems
Retiree Benefit Restructuring
Compliance Services
Enrollment Support
OPEB Consulting
Employee Education
Wellness and Onsite Clinics
Claim Analytics
Decision Support Tools
Self-Funding Plan Assessment and Design

Not all products available in all states. Some services listed above depend on carrier.