



# Protect what you love about your life

Group Term Life insurance  
Short-Term Disability insurance  
Long-Term Disability insurance



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MEMBERSHIP  
BENEFITS PROGRAM

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# A benefits overview

Life is a journey with unexpected twists and turns. Having the right insurance gives you the freedom to live your life instead of worrying about it. Because no matter where you are in life, your future needs to be protected. Whether that means enjoying your new baby instead of worrying about hospital bills, or focusing on family and not finances in a time of need, insurance can help you prepare for all that life has to offer.

The Public Employees Federation (PEF) Membership Benefits Program sponsors Group Term Life, Short-Term Disability, and Long-Term Disability insurance through Sun Life.

**Group Term Life insurance.** When it comes to protecting the financial security of your loved ones, nothing is more important than planning ahead. Group Term Life insurance is a great way to provide your loved ones with financial protection when you can't be there and when they need it most.

**Short-Term Disability insurance.** Surgery, having a baby, or even an illness can keep you away from work. Short-Term Disability insurance may give you the financial support you need to pay your expenses until you are back on your feet and back to work.

**Long-Term Disability insurance.** A serious illness or injury can turn your life upside down for months, or even longer and might also mean you aren't able to work. If this happens, Long-Term Disability insurance may give you the financial support you need so you can focus on getting better. And, we're here to help you return to work and your normal routine as quickly as possible.

## For more information

The PEF Membership Benefits Program Trustees are pleased to offer the Sun Life Insurance products to all active, dues-paying members of PEF.

The PEF Membership Benefits Program will answer any questions you have about Group Term Life, Short-Term Disability, and Long-Term Disability. Simply contact the PEF Membership Benefits Program at (800) 767-1840 or (518) 785-1900, ext. 243, or email [mbinsurance@pef.org](mailto:mbinsurance@pef.org).

You may enroll by:

- Completing the online enrollment form at [pefmbp.com](http://pefmbp.com) or scanning the QR code to the right. You must be signed into the website with your Membership Identification Number (MIN), to see the Enroll button.
- Requesting a form be mailed or emailed to you directly. All completed paper enrollment forms should be mailed to:



Online enrollment  
form

PEF Membership Benefits Program  
10 Airline Drive, Suite 101  
Albany, NY 12205  
ATTN: Insurance Group

When your insurance goes into effect, you'll receive a Certificate and a Notice of Coverage.

# Group Term Life insurance

## How does it work?

With Group Term Life (GTL) insurance, your loved ones will receive a payment based on the coverage you have upon your death.

## How much do I need?

You can select one of the following options:

- Option A—\$20,000
- Option 1—Basic annual earnings
- Option 2—Basic annual earnings x 2
- Option 3—Basic annual earnings x 3
- Option 4—Basic annual earnings x 4
- Option 5—Basic annual earnings x 5

Your earnings are rounded to the next higher \$1,000 (if not already a multiple of \$1,000) based on your current earnings, up to a maximum of \$600,000.

## How much does this coverage cost?

The cost for coverage is based on the amount of coverage you choose, your attained age, and a bi-weekly rate.

### Bi-weekly rate per \$1,000

Age	Life and AD&D rate	Age	Life and AD&D rate
Under 30	\$.0268	50–54	\$.1552
30–34	\$.0381	55–59	\$.2455
35–39	\$.0569	60–64	\$.3704
40–44	\$.0691	65–69	\$.5523
45–49	\$.0998	70+	\$1.1953

Rates are adjusted as the insured member enters a new age bracket. Rates and/or benefits may be changed on a class basis.

For example: a member aged 43 interested in \$20,000 of coverage would pay:

<b>\$.0691</b>	<b>X</b>	<b>20</b>	<b>=</b>	<b>\$1.382</b>	<b>\$35.93</b>
Bi-weekly rate per \$1,000 of coverage		Amount of coverage (use 20 for 20,000)		Bi-weekly premium	Annual premium

If you have chosen a salary-based option and your annual earnings change for any reason, including a change due to a promotion to a PEF-represented position, your insurance will automatically be adjusted on the next available payroll.

## Dependent Group Term Life insurance

If you are covered for Group Term Life insurance under this plan, you may also apply for Dependent coverage for your spouse/domestic partner and dependent children.

Your Dependent Life insurance selection must represent your family status:

- Option D1 for married members/domestic partners
- Option D2 for unmarried members

### **Option D1—Dependent Life for married members/ domestic partners**

You can choose spouse/domestic partner coverage of \$20,000, \$50,000, \$75,000, or \$100,000. The spouse/ domestic partner coverage amount cannot be more than 100% of your coverage amount. During the 240-day (from date of hire) new employee open enrollment, the only option available for spouse/domestic partner coverage is \$20,000.

### **Domestic partner coverage**

A “domestic partner” is an individual with whom you execute a domestic partner affidavit to establish eligibility. PEF MBP uses the same criteria currently used by the state of New York to qualify a domestic partner for health insurance benefits. You will have to show that you and your partner have been residing together for at least six months and you will need to provide documentation of financial interdependence such as a joint bank account, credit card, joint ownership of residence, or mutually granted durable power of attorney. A Domestic Partner Affidavit is available for download on [pefmbp.com](http://pefmbp.com).

**How much does spouse/domestic partner coverage cost?**

The cost of spouse/domestic partner coverage is based on the amount of coverage you choose, the member’s attained age, and a flat bi-weekly rate.

Member’s age	Life and AD&D bi-weekly deduction			
	\$20K	\$50K	\$75K	\$100K
Under 30	\$1.32	\$3.30	\$4.95	\$6.60
30–34	\$1.52	\$3.80	\$5.70	\$7.60
35–39	\$1.92	\$4.80	\$7.20	\$9.60
40–44	\$2.52	\$6.30	\$9.45	\$12.60
45–49	\$2.72	\$6.80	\$10.20	\$13.60
50–54	\$3.52	\$8.80	\$13.20	\$17.60
55–59	\$5.12	\$12.80	\$19.20	\$25.60
60–64	\$7.52	\$18.80	\$28.20	\$37.60
65–69	\$12.32	\$30.80	\$46.20	\$61.60
70+	\$25.72	\$64.30	\$96.45	\$128.60

Rates and/or benefits may be changed on a class basis. Rates increase as the member enters each new age category.

**Option D2—Dependent Life for unmarried members**

Your dependent children may be eligible for coverage if they are between 15 days and 19 years of age, or up to age 25, and enrolled as a full-time student and dependent on you for 50% or more for his or her support. Dependent Life insurance for your fully handicapped child can be continued past the age of 19. Please call the PEF Membership Benefits Program for more information.

You may insure each eligible dependent child for \$15,000 of life insurance coverage for 50 cents bi-weekly, regardless of age or number of children.

**Group Term Life insurance  
important features**

**Conversion privilege**

The conversion privilege allows you to convert up to the face amount of your Group Term Life insurance policy to an individual policy from Sun Life if your membership with PEF terminates or if you are no longer in an eligible class. Your dependents may also convert if your coverage ends as described above or if they no longer meet the definition of a dependent.



Conversion must be requested and the premium paid within 31 days following the date your Group Term Life insurance coverage terminates or reduces under the policy. Proof of good health will not be required. If your coverage ends, you will receive information about this option.

### **Accelerated Benefit**

Should you or your spouse/domestic partner become diagnosed as terminally ill with a 12-month-or-less life expectancy, this benefit allows an accelerated payment of a portion of the terminally ill person's life insurance proceeds. Your request cannot exceed 80% of the in-force amount of life insurance and is subject to a minimum of the greatest of:

- 25% of the in-force amount of life insurance,
- \$10,000 if amount of insurance is less than \$200,000,
- \$50,000 if amount of insurance is \$200,000+, and
- the Accelerated Benefit percentage originally selected, multiplied by the amount of life insurance that would have been in-force for you, including any age reductions, at your expected time of death, up to a maximum of \$600,000.

For your spouse/domestic partner, your request cannot exceed 80% of the in-force amount of life insurance and is subject to a minimum of \$2,500, up to a maximum of \$100,000.

Should you or your spouse/domestic partner, if covered under this plan, become terminally ill, the funds are paid directly to you, or at your request, to your spouse/domestic partner with no policy restrictions on how they may be used. The remaining benefit is then payable to the beneficiary.

An individual or his or her spouse/domestic partner is said to be "terminally ill" if the person has a sickness or physical condition that is certified by a physician to reasonably be expected to result in death within 12 months.

**Receipt of Accelerated Benefits may be taxable; you should seek assistance from your personal tax advisor for more information. Receipt of Accelerated Benefits may affect your eligibility for public assistance programs.**

## Accidental Death & Dismemberment benefit

If you have elected Group Term Life insurance coverage for yourself or your dependents, you and your dependents are automatically covered for Accidental Death and Dismemberment (AD&D) coverage.

### **Accidental Death coverage**

Accidental Death coverage provides an additional benefit equal to the amount of your life insurance coverage and is payable if your death occurs as a direct result of a covered accidental bodily injury sustained while insured, provided death occurs within 365 days of the accident.

### **Accidental Dismemberment coverage**

This plan pays a benefit if, while insured, you suffer a covered bodily injury caused by an accident and if, within 365 days after the accident, you lose, as a direct result of the injury, a hand, foot, or eye. The amount payable for any one loss is equal to one half the amount of your Accidental Death benefit. You may also be eligible for benefits ranging from 25% to 100% of your Accidental Death benefit for accidental losses that result in paraplegia, quadriplegia, or hemiplegia. However, no more than an amount equal to your full life insurance coverage is payable for all covered losses resulting from one accident.

- Loss of limb means severance of the hand or foot at or above the wrist or ankle joint.
- Loss of sight, speech, or hearing must be total and irrecoverable.
- Loss of thumb and index finger means severance through or above the metacarpophalangeal joints.
- Quadriplegia means the total and permanent paralysis of both upper and lower limbs.
- Paraplegia means the total and permanent paralysis of both lower limbs.
- Hemiplegia means the total and permanent paralysis of the upper and lower limbs on one side of the body.

See your Certificate for a complete AD&D benefit schedule.

## Enhancements to your AD&D benefit

If you are eligible for a payment under the AD&D benefit, you may be eligible for one or more of the following enhancements:

### **Child Care benefit**

If you die, then a Child Care benefit may be payable in addition to the Accidental Death benefit. The Child Care benefit is payable for each dependent if the dependent is younger than age 13 at the time of your death and if you provide proof of the dependent's enrollment in a licensed child care program. The Child Care benefit payable is the lesser of \$10,500 or 5% of your Accidental Death benefit. One Child Care benefit is payable each year for each dependent who qualifies for Child Care benefits. No more than four Child Care benefits are payable for each dependent. Payment is made to the person who has primary responsibility for the dependent's expenses.

### **Dependent Child Education benefit**

If you die, then a Dependent Child Education benefit may be paid in addition to the Accidental Death benefit. This benefit is payable to each of your dependents who qualifies as a student. Please refer to your Certificate to see if your dependents qualify as students.

The Dependent Child Education benefit payable is the lesser of \$5,000; 5% of the Accidental Death benefit; or the actual expense for any one school year for four years. No more than one Dependent Child Education benefit is payable per student during any one school year. If no dependent qualifies as a student, then a 1% or \$1,000 payment, whichever is less, is made in accordance with your beneficiary designation.

### **Spouse/Domestic Partner Education benefit**

A dependent spouse/domestic partner is eligible for a single lump sum for the lesser of expenses or \$5,000 for employment training within one year of your death.

### **Seat Belt benefit**

If you die from injuries sustained in a motor vehicle accident, a Seat Belt benefit may be paid in addition to the Accidental Death benefit. The Seat Belt benefit payable is the lesser of 10% of the Accidental Death benefit or \$25,000. This benefit is payable provided that:

- a) the death is the result of an automobile accident and
- b) the individual was wearing a seat belt at the time of the accident, as verified in the police accident report.

### **Air Bag benefit**

An Air Bag benefit is payable if a Seat Belt benefit is payable and you were in a seat protected by a supplemental restraining system that inflated on impact. The Air Bag benefit is the lesser of 10% of the Accidental Death benefit or \$5,000.

### **Common Carrier benefit**

If you die while traveling as a fare-paying passenger on a common carrier, a Common Carrier benefit may be payable in an amount equal to your Accidental Death benefit.

### **Bereavement Counseling benefit**

If an Accidental Death benefit is payable, Bereavement Counseling benefits up to \$250 per immediate family member, up to a maximum of \$1,000 per family, are payable during the 12 months following your death.

### **Disappearance benefit**

Sun Life will presume, subject to no objective evidence to the contrary, that you are dead and death is a result of an Accidental Bodily Injury if:

- you disappear as a result of an accidental wrecking, sinking, or disappearance of a conveyance in which you were known to be a passenger, and
- your body is not found within 365 days after the date of the conveyance's disappearance.

## **General information about your Group Term Life insurance**

### **Eligibility**

All active, dues-paying members of the Public Employees Federation (PEF), actively working 10 hours, bi-weekly, in a PEF-represented position, may be eligible under this group term life insurance plan. Certain restrictions will apply to part-time or hourly members.

## Effective dates

The effective date of your coverage depends on the date you enroll and whether proof of good health is required.

- If you enroll within 240 days after your first date of hire in a PS&T unit position (first date of eligibility to become a PEF member), coverage will automatically be approved for up to three times your Basic Annual Earnings; you may elect \$20,000 of spouse/domestic partner coverage, and \$15,000 of coverage for each eligible dependent child. Coverage that does not require proof of good health will begin the day your enrollment form is received by the PEF Membership Benefits Program.
- If you request coverage after the 240-day period, or if you elect to increase your coverage, you will be required to complete and submit an Evidence of Insurability application and coverage will begin on the date Sun Life approves your application.

If you're absent from work due to injury or illness on the date coverage would normally begin, your coverage will be deferred until you are actively at work. Your coverage will continue for as long as the group policy stays in effect, your premiums are paid, and you remain an eligible PEF member. If you choose to increase your amount of coverage, you'll be required to complete and submit an Evidence of Insurability application, which must be approved by Sun Life before the increase can take effect. If you are absent from work on the date an increase in coverage would ordinarily begin, the increase will be deferred as described above.

## How to enroll

To enroll in the GTL plan, enroll online at [pefmbp.com](http://pefmbp.com) or, complete, sign, and return a hard copy enrollment form to the PEF Membership Benefits Program. This form will authorize the PEF Membership Benefits Program to make payroll deductions to cover the cost of your insurance. When your application is approved, your premiums will be automatically deducted from your paycheck.

If you have been in the PS&T unit for longer than 240 days, or if you are a new employee requesting coverage in excess of three times your Basic Annual Earnings or \$20,000 of dependent coverage, you will have to complete an Evidence of Insurability application, which must be approved by Sun Life before coverage can take effect. The online enrollment form and the Evidence of Insurability application are available at [pefmbp.com](http://pefmbp.com).



Online enrollment  
form



Evidence of  
Insurability form



About GTL

## **Retiree coverage**

PEF members enrolled in the plan prior to retirement may maintain their Group Term Life insurance coverage as a member of the PEF Retirees. The AD&D benefit terminates upon retirement. Retirees are eligible to maintain Dependent coverage and are subject to coverage reductions defined under "coverage reductions."

## **Coverage reductions**

Benefits reduce to 60% of the amount in-force on the first of the month following the month in which an active member attains age 70. If you are a retiree, and at age 70 you have participated in the plan for at least the five continuous years preceding the attainment of age 70, and you are not an active member, your life insurance will be reduced to \$20,000 or you may elect a further reduction in benefits to \$10,000 or \$5,000. If you have not been in the plan for five continuous years, your coverage will terminate.

## **Exclusions**

No Accidental Death & Dismemberment benefit will be payable for your loss that is due to or results from:

- suicide,
- intentionally self-inflicted injuries,
- sickness of any kind, or an infection unless due to an accidental cut or wound,
- mental or nervous disorder,
- your participation in a felony,
- your active participation in a war (declared or undeclared) or your active duty in any armed service during a time of war,
- your active participation in a riot or insurrection,
- injury or sickness sustained from any aviation activities, other than your riding as a fare-paying passenger on a scheduled or charter flight operated by a scheduled airline, or
- your being intoxicated or under the influence of any narcotic unless administered on the advice of a physician.

# Short-Term Disability insurance

## How does it work?

You have the opportunity to buy affordable protection that may provide you with a weekly benefit once your claim is approved. This replacement income can help you manage your expenses without relying solely on vacation days, sick pay, or your savings to stay on track with your expenses.

Your ability to earn a paycheck is your most valuable asset. Help protect it with Short-Term Disability (STD) insurance, a benefit that works for you when you can't, due to a covered disability. It's an affordable way to continue receiving a steady income so you can focus on getting better.

## How much do I need?

Your STD plan, sponsored by the PEF Membership Benefits Program, allows you to choose the benefit option that best fits your needs. Your STD benefit payments are not subject to federal income tax and will not be reduced by other income even though you may be entitled to sick leave pay or have other insurance coverage.

## 26-week STD plan rates

Schedule of weekly disability payments	Under age 40 bi-weekly cost	Over age 40 bi-weekly cost
\$100	\$4.87	\$6.63
\$200	\$9.76	\$13.26
\$300	\$14.64	\$19.87
\$400	\$19.26	\$26.14
\$500	\$24.07	\$32.68
\$600	\$28.92	\$39.23
\$700	\$33.75	\$45.76

## How soon will I receive benefits?

Benefits are paid if you are absent from work while insured, as a result of either a job-related or non-job-related injury or illness. You must be under the care of a legally qualified physician. Disability benefits are payable for a covered disability on the first day for accidental bodily injury and on the eighth day for sickness.

Benefits are not payable for disabilities caused by, contributed to by, or resulting from a pre-existing condition for the first 12 months (six months for members age 65 and older) following the effective date of insurance or an increase in insurance. A pre-existing condition is one for which an insured has received medical treatment, consultation, care, or services, including diagnostic measures or prescribed drugs or medicine, within the 3 months prior to his or her effective date of insurance or increase in insurance. Please refer to your certificate for additional details.

### **How long will benefits last?**

Benefits can continue for up to 26 weeks.

## **General information about your STD insurance**

### **Eligibility**

All active, dues-paying members of the Public Employees Federation (PEF), actively working 35 hours, bi-weekly, in a PEF-represented position may be eligible under this group disability insurance plan. Certain restrictions will apply to part-time, per diem, or hourly members.

### **How to enroll**

To enroll in the STD plan, enroll online at [pefmbp.com](http://pefmbp.com) or, complete, sign, and submit a hard copy enrollment form to the PEF Membership Benefits Program. This form will authorize the PEF Membership Benefits Program to make payroll deductions to cover the cost of your insurance. When your application is approved, your premiums will be automatically deducted from your paycheck.

If you have been in the PS&T unit for longer than 240 days, you will also have to complete and submit an Evidence of Insurability application, which must be approved by Sun Life before coverage can take effect. The online enrollment form and the Evidence of Insurability applications are available at [pefmbp.com](http://pefmbp.com).



Online enrollment  
form



Evidence of  
Insurability form



About STD



## Effective dates

The effective date of your coverage depends on the date you enroll and whether proof of good health is required.

- Your application for disability insurance coverage will automatically be approved if you enroll within 240 days of the first date of hire in a PS&T unit position (first date of eligibility to become a PEF member), up to the \$400 level. Coverage that does not require proof of good health will begin the day your enrollment form is received by the PEF Membership Benefits Program.
- If you do not enroll within the 240-day period, or if you elect the \$500, \$600, or \$700 levels, you will have to complete and submit an Evidence of Insurability application, which must be approved by Sun Life before coverage can begin.

If you're absent from work due to injury or illness on the date coverage would normally begin, your insurance coverage will become effective on the date you actually return to work on a full-time basis.

## Exclusions

No STD benefit is payable for any Total Disability that is due to intentionally self-inflicted injuries; a war, declared or undeclared, or any act of war; your active participation in a riot or insurrection; or your participation in a felony.

## Termination

Your insurance will terminate on the earliest of:

- The date the Group insurance Policy terminates,
- The date the Group insurance Policy no longer insures your class,
- The date the premium payment is due, but not paid by the PEF Membership Benefits Program,
- The date on which you cease to be in an eligible class, including:
  - temporary layoff,
  - leave of absence, including but not limited to leave for military service, or
  - the date your PEF membership ceases, or
- The date you retire.

Complete information on Termination of Coverage can be found in the Certificate.

# Long-Term Disability insurance

## **How does it work?**

Long-term disability (LTD) insurance provides you with a monthly benefit if you are unable to work for an extended period of time due to a covered disability. Most of us think nothing of insuring our cars, homes, and other valuables. But many of us overlook protecting our most valuable asset, our ability to earn an income.

## **How much do I need?**

Your LTD plan, sponsored by the PEF Membership Benefits Program, offers two levels of coverage from which you can choose: 50% or 60% of your monthly income based on the salary on file at the time of disability, up to \$7,500 a month.

Your LTD benefit will be based on your monthly income, and it will not take into account earnings from investments or savings plans. The plan will offset benefit payments by other sources of income for which you may be eligible. Examples are workers' compensation; Social Security (Primary and Family source); disability pension or any New York state retirement payments; any other group benefits for disability, retirement, or unemployment; and benefits from your sick pay program (these will offset benefits payable under this LTD plan only when combined benefits exceed 85% of your income).

Your LTD benefit payments will not be reduced if Social Security benefits increase for general cost of living adjustments. Regardless of how much in other benefits you may be eligible for, your LTD benefit will not be less than \$200 a month.

## **How soon do I receive benefits?**

The coverage pays a benefit for disabilities lasting longer than six months. You will receive benefits after a six month Elimination Period. The Elimination Period is the period of time you must be disabled before benefits become payable. You can be partially disabled during the Elimination Period and still working, however, benefits still are not paid until after the Elimination Period.

If you return to work for less than 15 consecutive days during the Elimination Period and become disabled from the same cause, there is no interruption in calculating the Elimination Period. If after receiving benefits, you return to work for less than six months only to become disabled again from the same cause, you do not have to go through another Elimination Period. Refer to your Certificate for more details.

### **How long do I receive benefits?**

Once the Elimination Period ends, if you are disabled prior to age 60, you are eligible to receive a monthly benefit up to the maximum benefit period or Social Security Normal Retirement Age, whichever is longer, for as long as you're disabled. If you are disabled after age 60, you are eligible to receive a monthly benefit from one year to five years depending on your age. Disabilities that start at or after age 69 are covered for 12 months.

### **What does the plan cover?**

The definition of disability is the inability to engage in the material and substantial duties of your own occupation during the first two-and-a-half years that benefits are payable. Thereafter, disability is the inability to perform any occupation for which you are or can become qualified for by training, education, or experience.

The LTD plan covers mental and nervous illnesses, however, benefits are limited to 24 months. This limitation does not apply to periods of confinement in a hospital or another qualified institution, or for treating mental and nervous disorders, alcoholism, and drug addiction.

### **How much does this plan cost?**

Bi-weekly costs are based on the member's age and annual salary. Rates are based on 26 paychecks per year. If you are not on a 26 bi-weekly pay period, call the PEF Membership Benefits Program at (800) 767-1840 or (518) 785-1900, ext. 243, for rates.

	Under Age 40		Age 40–49		Age 50+	
<b>Annual Salary</b>	<b>50% Level</b>	<b>60% Level</b>	<b>50% Level</b>	<b>60% Level</b>	<b>50% Level</b>	<b>60% Level</b>
Less than 20,999	\$2.10	\$2.99	\$3.19	\$4.52	\$4.40	\$6.27
21,000–24,999	2.51	3.56	3.64	5.10	4.89	6.95
25,000–28,999	2.91	4.16	4.25	6.02	5.74	8.16
29,000–32,999	3.32	4.73	4.85	6.92	6.59	9.38
33,000–36,999	3.76	5.33	5.45	7.76	7.44	10.54
37,000–40,999	4.15	5.94	6.06	8.62	8.33	11.85
41,000–44,999	4.57	6.51	6.67	9.50	9.21	13.09
45,000–48,999	5.01	7.12	7.28	10.35	10.02	14.23
49,000–52,999	5.41	7.68	7.88	11.19	10.87	15.44
53,000–56,999	5.81	8.28	8.49	12.05	11.77	16.70
57,000–60,999	6.26	8.89	9.09	12.94	12.69	18.03
61,000–64,999	6.66	9.49	9.90	14.07	13.66	19.40
65,000–69,999	7.27	10.34	10.72	15.20	14.68	20.86
70,000–74,999	7.87	11.18	11.52	16.37	15.72	22.35
75,000–79,999	8.43	11.97	12.33	17.52	16.82	23.92
80,000–84,999	9.02	12.81	13.19	18.73	18.00	25.59
85,000–89,999	9.65	13.71	14.12	20.05	19.25	27.39
90,000–999,000	10.27	14.60	15.03	21.36	20.51	29.16

Rates and/or benefits may be changed on a class basis. Rates are based on the attained age of the insured member and increase as you enter each new age category and/or salary category.

## Additional benefits of your LTD insurance

### **Survivor Income benefit**

Your plan also includes a three-month Survivor Income benefit that pays a lump sum equal to three times your monthly benefit after Total or Partial Disability has continued for at least 180 consecutive days and while you are eligible to receive a monthly benefit.

### **Residual Disability**

You do not have to be Totally Disabled during the Elimination Period. You can be Partially Disabled during the Elimination Period and still working, earning less than 80% of your pre-disability earnings. Benefits will not be paid until after the Elimination Period.

### **Return-to-Work benefit**

To encourage your return to a productive lifestyle, the plan pays a Return-to-Work benefit if you return to work on a part-time basis. Your part-time earnings and partial benefit combined may equal up to 100% of your pre-disability earnings for the first 12 months of disability. If this sum exceeds your pre-disability earnings, the monthly benefit paid by Sun Life will be reduced accordingly.

### **Assisted Living benefit**

The Assisted Living benefit pays an additional 20% of total monthly earnings or \$5,000, whichever is less, if you are disabled and are also cognitively impaired or unable to perform two or more activities of daily living. This benefit is not offset by other benefits. Activities of daily living are bathing, dressing, toileting, being able to move to and from a bed or chair, continence, and eating.

### **Retro Disability benefit**

The Retro Disability benefit pays benefits retroactively to the first day of disability if you are continuously hospitalized for 14 days or more at the onset of disability and remain disabled at the end of the Elimination Period. The Retro Disability benefit is paid in a lump sum and is not offset by other benefits.

### **Rehabilitation benefit**

To encourage your return to a productive lifestyle, the plan pays a Rehabilitation benefit if you participate in a rehabilitation program approved by Sun Life. Under this benefit, the disability benefit payable is increased by 10% for up to 12 months.

Refer to your Certificate for more details about the above benefits.

# General information about your LTD insurance

## Eligibility

All active, dues-paying members of the Public Employees Federation (PEF), actively working 35 hours, bi-weekly, in a PEF-represented position may be eligible under this group disability insurance plan. Certain restrictions will apply to part-time, per diem, or hourly members.

## How to enroll

To enroll in the LTD plan, enroll online at [pefmbp.com](http://pefmbp.com) or, complete, sign, and submit a hard copy enrollment form to the PEF Membership Benefits Program. This form will authorize the PEF Membership Benefits Program to make payroll deductions to cover the cost of your insurance. When your application is approved, your premiums will be automatically deducted from your paycheck.

If you have been in the PS&T unit for longer than 240 days, you will also have to complete and submit an Evidence of Insurability application, which must be approved by Sun Life before coverage can take effect. The online enrollment form and Evidence of Insurability applications are available at [pefmbp.com](http://pefmbp.com).



Online enrollment form



Evidence of Insurability form



About LTD

## **Effective dates**

The effective date of your coverage depends on the date you enroll and whether proof of good health is required.

- Your application for disability insurance coverage will automatically be approved if you enroll within 240 days of the first date of hire in a PS&T unit position (first date of eligibility to become a PEF member). Coverage that does not require proof of good health will begin the day your enrollment form is received by the PEF Membership Benefits Program.
- If you do not enroll within the 240-day period, or if you elect to increase your coverage, you will have to complete and submit an Evidence of Insurability application and coverage will begin on the date Sun Life approves your application.

If you're absent from work due to injury or illness on the date coverage would normally begin, your insurance coverage will become effective on the date you actually return to work on a full-time basis.

## **Pre-Existing Condition Limitation**

No LTD benefit will be payable to you for any disability that results from a pre-existing condition. A pre-existing condition is one for which you took medication or received treatment during the six months before your effective date or the effective date of an increase in your insurance. The exclusion applies only during the 12 months (six months for members age 65 and older) following your effective date.

## **Exclusions**

No LTD benefit will be payable for any Total or Partial Disability that is due to:

- intentionally self-inflicted injuries;
- war declared or undeclared or any act of war;
- your active participation in a riot or insurrection; or
- your participation in a felony.

Visit the PEF Membership Benefits Program  
at [pefmbp.com](https://pefmbp.com), scan QR code, or call  
(800) 767-1840 or (518) 785-1900, ext. 243.



This highlight flyer is intended to provide an overview of the benefits available through the PEF Membership Benefits Program and is not a complete description of plan provisions. The rates shown include administrative fees. Receipt of this flyer does not certify eligibility for benefits under this plan. For complete plan details, please refer to your certificate.

The group policy provides disability income insurance only. It does not provide basic hospital, basic medical, or major medical insurance as defined by the New York State Department of Financial Services. The expected benefit ratio for this policy is 65 percent. This ratio is the portion of future premiums that the company expects to return as benefits, when averaged over all people with this policy.

The group disability policy contains limitations and exclusions that may affect benefits. Please see the certificate or ask your benefits administrator for information on Elimination Periods, Waiting Periods, and Pre-Existing Conditions limitations.

Group life and disability insurance policies are underwritten by Sun Life and Health Insurance Company (U.S.) (Lansing, MI) under Policy Form Series 13-GP-LH-01, 13-LF-C-01, 13-GPPORT-P-01, 13-LFPort-C-01, 13-ADD-C-01, 13-LTD-C-01, 13-LTD-P-01, 13-STD-C-01, and 06P-NY-DBL.

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