The Standard Educator Disability Plan

What would you do if illness or injury kept you out of work for a long time without pay? Disability insurance provides replacement income to help pay your bills.

The disability plan allows you to choose a monthly benefit, a benefit duration, and a waiting period.

<table>
<thead>
<tr>
<th>Monthly Benefit</th>
<th>Benefit Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choose a preferred monthly benefit amount between $400 and $5,000 (up to 66⅔% of your salary)</td>
<td>Choose a benefit duration: Two years OR up to the Social Security Normal Retirement Age (SSNRA)</td>
</tr>
</tbody>
</table>

Waiting Period

Choose 14, 30, or 60 days until the plan starts paying benefits (14- and 30-day waiting periods are waived with hospital admission)

Highlights

- Evidence of Insurability (EOI) is not required. You do not have to fill out a medical questionnaire to be approved.
- Pre-existing conditions will apply. Please refer to “Pre-existing Condition Exclusion” section in the sidebar.
- If a claim is submitted in the first 12 months of the policy effective date, a minimum benefit of $400 will be paid for the first 90 days after the waiting period. A review will be conducted to determine if the claim is subject to pre-existing conditions. If the claim is determined to be a pre-existing condition, then benefits will stop after the 90-day payment. If not, and there is no pre-existing condition, then benefits will continue based on the disability amount you selected, and any retro payment owed by The Standard will also be paid.

First Day Hospital Benefit on 14- and 30-day plans. If you have a claim for a hospital admission/confinement, the 14- and 30-day waiting period will be waived.

Lifetime Security Benefit. This only applies to the benefit duration of up to SSNRA. Your disability benefit (amount in effect when the claim closes) could continue beyond your Social Security normal retirement age if you are unable to perform two or more activities of daily living or are suffering from severe cognitive impairment.

Disability coverage will end on the date your employment terminates.

Please call The Standard at 800-325-5757 or email Christine.D’Angelo@standard.com for more information.

Important Information About Disability Benefits

Pre-existing Condition Limitation

Benefits will be limited at any time for a period of disability occurring in the first 12 months that your insurance or an increased benefit amount is in effect, if that disability was caused or contributed by an accidental injury or sickness, including pregnancy, for which you did any of the following in the six months before your insurance became effective:

- Received medical treatment
- Took prescribed drugs
- Consulted a doctor

Disability Benefits During Pregnancy

The plan provides coverage for a disability period up to six weeks postpartum for an uncomplicated pregnancy, and up to eight weeks postpartum for a cesarean delivery, providing that certification of disability is submitted by the attending physician. Benefits are subject to a waiting/elimination period. A pregnancy that began prior to the effective date of the plan will be considered preexisting.
Eligibility
All Pinellas County Schools and Pinellas County Education Foundation employees who work 30 hours or more each week (includes job-sharing employees) and who are actively working full time on the date of enrollment are eligible to apply.

Effective Date
To become insured, you must satisfy the eligibility requirements, serve an eligibility waiting period, and be actively at work (able to perform all normal duties of your job) on the day before the scheduled effective date of insurance. If you are not actively at work on the day before the scheduled effective date of insurance, your insurance will not become effective until the day after you complete one full day of active work as an eligible employee.

Premium
This is a voluntary benefit and you pay 100% of the premium for coverage through payroll deductions and/or flex credits.

Plan Benefits
A. Plan Maximum Monthly Benefit
The lesser of $5,000 or 66 2/3% of your predisability earnings.

B. Plan Minimum Monthly Benefit
The greater of $100 or 25% of your disability benefit before reduction by deductible income.

C. Benefit Waiting Period
The benefit waiting period is the period of time that you must be continuously disabled before benefits become payable. Benefits are not payable during the benefit waiting period. The benefit waiting period options associated with your plan include:

<table>
<thead>
<tr>
<th>Accidental Injury</th>
<th>Other Disabilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 days</td>
<td>14 days</td>
</tr>
<tr>
<td>30 days</td>
<td>30 days</td>
</tr>
<tr>
<td>60 days</td>
<td>60 days</td>
</tr>
</tbody>
</table>

D. Plan Schedule of Benefits
You may select one of the benefit levels outlined below, provided the Monthly disability Benefit does not exceed 66 2/3% of your regular monthly salary.*

<table>
<thead>
<tr>
<th>If Your Annual Base Salary Is at Least</th>
<th>You Are Eligible for a Maximum Disability Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 7,200</td>
<td>$ 400</td>
</tr>
<tr>
<td>10,800</td>
<td>600</td>
</tr>
<tr>
<td>14,400</td>
<td>800</td>
</tr>
<tr>
<td>18,000</td>
<td>1,000</td>
</tr>
<tr>
<td>21,600</td>
<td>1,200</td>
</tr>
<tr>
<td>25,200</td>
<td>1,400</td>
</tr>
<tr>
<td>28,800</td>
<td>1,600</td>
</tr>
<tr>
<td>32,400</td>
<td>1,800</td>
</tr>
<tr>
<td>37,800</td>
<td>2,100</td>
</tr>
<tr>
<td>43,200</td>
<td>2,400</td>
</tr>
<tr>
<td>48,600</td>
<td>2,700</td>
</tr>
<tr>
<td>54,000</td>
<td>3,000</td>
</tr>
<tr>
<td>63,000</td>
<td>3,500</td>
</tr>
<tr>
<td>72,000</td>
<td>4,000</td>
</tr>
<tr>
<td>81,000</td>
<td>4,500</td>
</tr>
<tr>
<td>90,000</td>
<td>5,000</td>
</tr>
</tbody>
</table>

*Your monthly benefit may be reduced by other income benefits and disability earnings.

E. Own Occupation Definition
For the benefit waiting period and the first 24+ months for which disability benefits are paid, you are considered disabled when you are unable as a result of physical disease, injury, pregnancy, or mental disorder to perform with reasonable continuity the material duties of your own occupation AND are suffering a loss of at least 20% of your indexed predisability earnings when working in your own occupation.

E. Any Occupation Definition
After the own occupation period of disability, you will be considered disabled if you are unable as a result of physical disease, injury, pregnancy, or mental disorder to perform with reasonable continuity the material duties of any occupation.
**Disability Insurance Plans**

**Integration — Deductible Income**

Deductible income is income you receive under any state disability income benefit law or similar law.

**During the First 24 Months of Disability:**
1. Any amount you receive or are eligible to receive because of your disability, including amounts for partial or total disability, whether permanent, temporary, or vocational, under any of the following:
   a. A workers’ compensation law;
   b. The Jones Act;
   c. Maritime Doctrine of Maintenance, Wages, or Cure;
   d. Longshoremen’s and Harbor Worker’s Act; or
   e. Any similar act or law.
2. Your Work Earnings, as described in the Return To Work Provisions.
3. Any amount you receive by compromise, settlement, or other method.

**After You Have Been Disabled for 24 months:**
1. Your Work Earnings, as described in the Return To Work Provisions.
2. Any amount you receive or are eligible to receive because of your disability, including amounts for partial or total disability, whether permanent, temporary, or vocational, under any of the following:
   a. A workers’ compensation law;
   b. The Jones Act;
   c. Maritime Doctrine of Maintenance, Wages, or Cure;
   d. Longshoremen’s and Harbor Worker’s Act; or
   e. Any similar act or law.
3. Any amount you, your spouse, or your child under age 18 receive or are eligible to receive because of your disability or retirement under:
   a. The Federal Social Security Act;
   b. The Canada Pension Plan;
   c. The Quebec Pension Plan;
   d. The Railroad Retirement Act; or
   e. Any similar plan or act.
4. Any amount you receive or are eligible to receive because of your disability under any state disability income benefit law or similar law.
5. Any amount you receive or are eligible to receive because of your disability under another group insurance coverage.
6. Any disability or retirement benefits you receive or are eligible to receive under your employer’s retirement plan, including a public employee retirement system, a state teacher retirement system, and a plan arranged and maintained by a union or employee association for the benefit of its members. You and your employer’s contributions will be considered as distributed simultaneously throughout your lifetime, regardless of how funds are distributed from the retirement plan. If any of these plans has two or more payment options, the option which comes closest to providing you a monthly income for life with no survivors benefit will be deductible income, even if you choose a different option.
7. Any earnings or compensation included in predisability earnings which you receive or are eligible to receive while LTD benefits are payable.
8. Any amount you receive or are eligible to receive under any unemployment compensation law or similar act or law.
9. Any amount you receive or are eligible to receive from or on behalf of a third party because of your disability, whether by judgement, settlement, or other method. If you notify us before filing suit or settling your claim against such third party, the amount used as deductible income will be reduced by a pro rata share of your costs of recovery, including reasonable attorney fees.
10. Any amount you receive by compromise, settlement, or other method as a result of a claim for any of the above, whether disputed or undisputed.

**Full offset:** Both the primary benefit (the benefit awarded to you) and dependents benefit are deductible income. Benefits your spouse or a child receives or are eligible to receive because of your disability are deductible income regardless of marital status, custody, or place of residence. The term “child” has the meaning given in the applicable plan or act.
Additional Plan Features

24-Hour Coverage
24-hour disability plans provide coverage for disabilities occurring on or off the job.

Rehabilitation Plan
If you are participating in an approved rehabilitation plan, The Standard may include payment of some of the expenses you incur in connection with the plan, including but not limited to: training and education expenses, family (child and elder) care expenses, job related expenses, and job search expenses.

Reasonable Accommodation Expense
The Standard will reimburse your employer up to a pre-approved amount for some or all of the cost of the modification, which enables you to return to work while disabled.

Survivors Benefit
If you die while disability benefits are payable, and on the date you die you have been continuously disabled for at least 180 days, a survivors benefit equal to three time your unreduced disability benefit may be payable (any survivors benefit payable will first be applied to any overpayment of your claim due to The Standard).

Waiver of Premium
Waiver of premium will begin on the first day of the month following 90 days of disability.

Life Time Security Benefit — SSNRA Plan Only
Your disability benefit (amount in effect when the claim closes) payments will continue beyond the regular plan Maximum Benefit Period if you are unable to perform two or more Activities of Daily Living or are suffering severe cognitive impairment. You are eligible for this benefit only if you elected the SSNRA duration plan.

First Day Hospital Benefit — Plans with Waiting Periods of 14 or 30 days Only
If you are hospital confined for at least four hours during the benefit waiting period, the following will apply: the remainder of your benefit waiting period will be waived, disability benefits will become payable on the first day you are hospital confined, and your maximum benefit period will begin on the date your disability benefits are payable. “Hospital confined” means you are admitted to a hospital as an in-patient, and for which you are charged for room and board. You are eligible for this benefit only if your elected a benefit waiting period of 14 or 30 days.
Maximum Benefit Duration Period
You may choose a maximum benefit period of either two years or to Social Security Normal Retirement Age (SSNRA). The maximum periods for which benefits are payable are shown in the tables below.

<table>
<thead>
<tr>
<th>Age</th>
<th>Maximum Benefit Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>66</td>
<td>1 year 9 months</td>
</tr>
<tr>
<td>67</td>
<td>1 year 6 months</td>
</tr>
<tr>
<td>68</td>
<td>1 year 3 months</td>
</tr>
<tr>
<td>69+</td>
<td>1 year</td>
</tr>
</tbody>
</table>

**Option 1: Two Years**
If you become disabled before age 66, disability benefits may continue during disability for two years. If you become disabled at age 66 or older, the benefit duration is determined by your age when disability begins:

**Option 2: SSNRA**
If you become disabled before age 62, disability benefits may continue during disability until age 65 or to the Social Security Normal Retirement Age (SSNRA) or three years and six months, whichever is longer. If you become disabled at age 62 or older, the benefit duration is determined by the age when disability begins:

<table>
<thead>
<tr>
<th>Age</th>
<th>Maximum Benefit Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>62</td>
<td>To SSNRA, or 3 years 6 months, whichever is longer</td>
</tr>
<tr>
<td>63</td>
<td>To SSNRA, or 3 years, whichever is longer</td>
</tr>
<tr>
<td>64</td>
<td>To SSNRA, or 2 years 6 months, whichever is longer</td>
</tr>
<tr>
<td>65</td>
<td>2 years</td>
</tr>
<tr>
<td>66</td>
<td>1 year 9 months</td>
</tr>
<tr>
<td>67</td>
<td>1 year 6 months</td>
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<tr>
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<td>1 year 3 months</td>
</tr>
<tr>
<td>69+</td>
<td>1 year</td>
</tr>
</tbody>
</table>

**Income Tax Consideration**
When you enroll in disability insurance, your payroll deductions are automatically deducted on a pre-tax basis, along with all of your other benefit deductions (except Optional Life Insurance). This means that any disability benefit you receive will be subject to federal income taxes, unless you elect to have your premiums deducted on an after-tax basis, in which case all your payroll deductions for all benefits will be taken on an after-tax basis.
Other Important Information

Exclusions

Subject to state variations, you are not covered for a disability caused or contributed to by any of the following:

• Your committing or attempting to commit an assault or felony, or your active participation in a violent disorder or riot
• An intentionally self-inflicted injury
• War or any act of war (declared or undeclared, and any substantial armed conflict between organized forces of a military nature)
• The loss of your professional or occupational license or certification
• If applicable, with respect to insurance increases, a decrease in the benefit waiting period and/or an increase in the maximum benefit period, you are not covered for the insurance enhancement if your disability is caused or contributed by a preexisting condition or the medical or surgical treatment of a preexisting condition unless on the date you become disabled, you have been continuously insured under the elected plan selection for the specified exclusion and limitation period, and you have been actively at work for at least one full day after the end of the specified exclusion and limitation period

Preexisting Condition Provision

A preexisting condition is a mental or physical condition:

• For which you would have consulted a physician or other licensed medical professional; received medical treatment, services or advice; undergone diagnostic procedures, including self-administered procedures; or taken prescribed drugs or medications
• Which, as a result of any medical examination, including routine examination, was discovered or suspected

<table>
<thead>
<tr>
<th>Preexisting Condition Period</th>
<th>The 180-day period just before your insurance becomes effective or any insurance increases become effective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specified Exclusion and Limitation Period</td>
<td>12 months</td>
</tr>
</tbody>
</table>

Note: For new enrollees, The Standard will pay $400 per month in benefits even if you have a condition subject to the preexisting condition limitation for the first 90 days of disability. After 90 days, The Standard will continue benefits only for conditions for which the preexisting condition exclusion or limitation does not apply. Benefit amounts subject to the preexisting condition exclusion will be excluded from payment.

Limitations

Disability benefits are not payable for any period when you are:

• Not under the ongoing care of a physician in the appropriate specialty as determined by The Standard
• Not participating in good faith in a plan, program or course of medical treatment or vocational training or education approved by The Standard, unless your disability prevents you from participating
• Confined for any reason in a penal or correctional institution
• Able to work and earn at least 20% of your indexed predisability earnings, but you elect not to work; throughout the own occupation period months after the end of the benefit waiting period the responsibility to work is limited to work in your own occupation; thereafter, the responsibility to work includes work in any occupation
In addition, payment of disability benefits is limited in duration:

- If you reside outside the United States or Canada
- If applicable, if your disability is caused or contributed by a preexisting condition or the medical or surgical treatment of a preexisting condition unless on the date you become disabled, you have been continuously insured under the group policy for the specified exclusion and limitation period, and you have been actively at work for at least one full day after the end of the specified exclusion and limitation period
- If your disability is caused or contributed to by mental disorders or substance abuse

Mental or Emotional Disorder Defined
Disability benefits due to a mental or emotional disease or disorder of any kind will be limited to a period not to exceed two years.

Waiver of Premium
Under the Base Plan, if you are disabled and entitled to payment of benefits under the plan for three consecutive months, your premium, which becomes due during the remaining compensable period of disability, will be waived. Waiver of premium will cease on the earlier of (1) the date disability ceases, or (2) the date the maximum benefit period has expired.

When Benefits End
LTD benefits end automatically on the earliest of:

- The date you are no longer disabled
- The date your maximum benefit period ends
- The date you die
- The date benefits become payable under any other disability insurance plan under which you become insured through employment during a period of temporary recovery
- The date you fail to provide proof of continued disability and entitlement to benefits

When Insurance End
Insurance ends automatically on the earliest of the following:

- The last day of the last period for which you make a premium contribution (except if premiums are waived while disabled)
- The date your employment terminates
- The date the group policy terminates
- The date you cease to meet the eligibility requirements (coverage may continue for limited periods under certain circumstances)
- If applicable, the date your employer ceases to participate under the group policy

Group Insurance Certificate
If coverage becomes effective, and you become insured, you will receive a group insurance certificate containing a detailed description of the insurance coverage including the definitions, exclusions, limitations, reductions, and terminating events. The controlling provisions will be in the group policy. Neither the information presented in this summary nor the certificate modifies the group policy or the insurance coverage in any way.