

Exclusions

- The Policy does not cover any loss, fatal or non-fatal, resulting from:
- Intentionally self-inflicted Injury while sane or insane
 - An act of war, declared or undeclared
 - Injury sustained or Sickness contracted while in the service of the armed forces of any country
 - Committing a felony
 - Penal incarceration (we will not pay benefits for Disability or any other loss during any period for which you are incarcerated in a penal or correctional institution for a period of 30 consecutive days or longer)
 - Injury or Sickness arising out of and in the course of any occupation for wage or profit or for which you are entitled to Workers' Compensation*
- * The term "entitled to Workers' Compensation" shall also include Workers' Compensation claim settlements that occur via compromise and release. Further, no benefits will be paid under this Policy for any period during which you are entitled to Workers' Compensation benefits.*

Coverage will continue as long as the group policy remains in force, the premiums are paid and you remain eligible for the coverage under the policy. Your coverage will end when you no longer qualify as an insured, you retire, you are not on active employment, or your employment terminates. Your coverage can be terminated or premiums may be increased on any premium due date with 31 days advance notice

7 out of 10 Americans say they live paycheck to paycheck.

<https://Forbes.com/sites/zackfriedman/2022/08/shock-poll-7-in-10-americans-live-paycheck-to-paycheck/?sh=4ec9820a55f6>, February 8, 2022, accessed March 8, 2022

Definitions

Injury means physical harm or damage to the body you sustained which results directly from an accidental bodily injury, is independent of disease or bodily infirmity; and takes place while your coverage is in force. Sickness means a disease or illness (including pregnancy). Disability must begin while your coverage is in force. Hospital means the term "Hospital" shall not include an institution used by you as a place for rehabilitation; a place for rest or for the aged; a nursing or convalescent home; a long-term nursing unit or geriatrics ward; or an extended care facility for the care of convalescent, rehabilitative, or ambulatory patients.

Choose the Plan That's Right for You

In determining the right coverage for you, you should look closely at your sick pay benefits, your retirement plan benefits, and your personal finance scenario. You can insure up to two-thirds of your monthly salary with a maximum benefit of up to \$6,000 per month and coverage amount is based on your salary. Benefits are paid directly to you, not to a doctor or your employer.

Short-Term Disability (STD)	
Benefits are payable up to 2 years for a covered Injury or Sickness.	
Plan I	Benefits begin on the 8th day of Disability due to a covered Injury or Sickness
Plan II	Benefits begin on the 15th day of Disability due to a covered Injury or Sickness
Plan III	Benefits begin on the 31st day of Disability due to a covered Injury or Sickness
Plan IV	Benefits begin on the 91st day of Disability due to a covered Injury or Sickness

Long-Term Disability (LTD)	
Benefits are payable up to the period of time shown in the table below, based on your age as of the date of Disability due to a covered Injury or Sickness.	
Plan V	Benefits begin on the 8th day of Disability due to a covered Injury or Sickness
Plan VI	Benefits begin on the 15th day of Disability due to a covered Injury or Sickness
Plan VII	Benefits begin on the 31st day of Disability due to a covered Injury or Sickness
Plan VIII	Benefits begin on the 91st day of Disability due to a covered Injury or Sickness
Benefit Period	Age 59 or Younger: Maximum Benefit to Age 65 Age 60 - 64: Maximum Benefit of 5 Years Age 65 - 68: Maximum Benefit to Age 70 Age 69 or Older: Maximum Benefit of 1 Year

Pre-Existing Condition Limitation

No Disability Benefit will be payable if Disability is caused by or resulting from a Pre-Existing Condition and begins before you have been continuously covered under the Policy for 24 months. This provision will not apply if you have:

- Gone treatment-free
- Incurred no expense
- Taken no medication
- Received no diagnosis or advice from a Physician for 12 consecutive months for such condition(s)

This limitation will not apply to a Disability resulting from a Pre-Existing Condition that begins after you have been continuously covered under the Policy for 24 months.

Any increase in benefits will be subject to this Pre-Existing Condition Limitation. A new Pre-Existing Condition Limitation period must be satisfied with respect to any increase applied for and approved by us.

Pre-existing condition means a disease, Injury, Sickness, physical condition or mental illness for which you: had treatment; incurred expense; took medication; received care or services including diagnostic testing or related measures; or received a diagnosis or advice from a physician, during the 12 month period immediately before your effective date of coverage. The term pre-existing condition will also include conditions which are related to such disease, injury, sickness, physical condition, or mental illness.

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Plan Features

Return to Work Incentive Benefits: Disabled While Working

If you are disabled and working, you may be eligible to continue to receive a percentage of your disability payment in addition to your disability earnings. If your disability earnings exceed 80% of your monthly compensation, payments will stop and your claim will end.

Donor Benefit

If you are Disabled as a result of being an organ or tissue donor, we will pay your benefit as any other Sickness under the terms of the plan.

Direct Deposit Disability Benefits

In the event you choose the direct deposit option on an approved claim, we will deposit your benefits directly into your bank account at no additional cost. This can accelerate access to your benefits by several days. We also have a toll-free fax that allows you instant transmission of your claim forms to our Benefits Department.

Waiver of Premium

No premium payments are required while you are receiving payments under the plan after disability payments have been received for 180 consecutive days. We will require proof annually that you remain Disabled during that time.

Specifically Designed Benefits for NEA Members

The NEA Income Protection® Plan is specifically designed to meet the needs of members like you. Here are a few of the customized benefits we offer NEA members:

- NEA Annual Reserve Dues Benefit - pays unified reserve dues when Disabled
- NEA Strike Waiver of Premium - premium is waived if there is an NEA supported strike
- NEA Physical Examination Requirement Benefit - \$100 annual benefit for required physical exams

Waiver of Premium During a Strike

If you are on an NEA supported strike that has lasted more than 60 days, we will waive premium payments for the remainder of that strike. To qualify for this benefit, you must be eligible for unemployment compensation from your state and submit a written request asking for premium to be waived.

Annual Reserve Dues Benefit

If you are Totally Disabled for 6 consecutive months, we will pay either the value of your NEA unified reserve dues or the amount you are required to pay in order to maintain your NEA status, whichever is less.

Physical Examination Requirement Benefit

Pays up to \$100 (once each calendar year) of the Physician's charges for any physical examination as required by the State Teacher's Retirement System, once you have been Totally Disabled for 12 consecutive months.

For Long-Term Disability Income Plans Only

Special Conditions Limited Benefit

The Special Conditions Limited Benefit provides a benefit up to two years, due to Special Conditions if you are disabled and under the regular and appropriate care of your Physician. Benefits will be paid for only one Disability when more than one disability exists at the same time or a Disability results from two or more causes. Special Conditions means: Chronic Fatigue Syndrome; Fibromyalgia; any disease, disorder, accident, or injury of the neck or back not resulting in hemiplegia, paraplegia, or quadriplegia; Environmental allergic illness including, but not limited to sick building syndrome and multiple chemical sensitivity; and self-reported symptoms. Self-reported symptoms are symptoms that the insured tells their Physician that are not verifiable using tests, procedures or clinical examinations. Examples include: headaches, pain, fatigue, stiffness, soreness, ringing in ears, dizziness, numbness, or loss of energy.

Mental Illness Limited Benefit

If you are Disabled due to a mental illness, regardless of the cause, Disability Payments will be provided for up to two years, not to exceed the Maximum Disability Period.

Alcoholism and Drug Addiction Limited Benefit

If you are Disabled due to alcoholism or drug addiction, a limited benefit of up to two years for each Disability will be paid.

Benefits will not be paid beyond the Maximum Benefit Period. If drug addiction is sustained at the hands of, or while under the regular and appropriate care of a Physician in the course of treatment for an Injury or Sickness, it will be covered the same as any other Sickness.

Social Security Filing Assistance

If we determine you are a likely candidate for Social Security Disability benefits, we can assist you with the application and appeal process.

Important Policy Provisions

Eligibility

All NEA members working 15 hours or more per week are eligible for this disability income insurance. Regardless of your health at the time of application, if coverage is approved and issued, claims incurred while coverage is in force will be subject to all terms of the Policy including any Pre-Existing Condition limitation.

When Coverage Begins

Certificates will become effective on the requested effective date following the date we approve the application, provided you are on active employment and premium has been paid.

If You Are Disabled Due to a Covered Disability and Not Working

Your Disability Payment will be the lesser of:

- (a) the Disability Benefit described in the Schedule; or
- (b) 66 2/3% of your Monthly Compensation less any Deductible Sources of Income you receive or are entitled to receive

No disability payment will be provided for any period in which you are not under the regular and appropriate care of a physician.

Disability or disabled for the first 12 months of disability means that you are unable to perform the material and substantial duties of your regular occupation. After that, disability means you are unable to perform the material and substantial duties of any gainful occupation for wage or profit for which you are reasonably qualified by training, education, or experience.

Offsets with Other Sources of Income

Deductible sources of income include:

- Other group disability income
- Governmental or other retirement system, whether due to Disability, normal retirement or voluntary election of retirement benefits
- United States Social Security Act or similar plan or act, including any amounts due your dependent(s) on account of your Disability
- State Disability
- Unemployment compensation
- Sick leave or other salary or wage continuance plans provided by the Employer which extend beyond 60 calendar days from the Date of Disability
- We reserve the right to estimate these Deductible Sources of Income that you may receive as defined in your Certificate

Minimum Disability Benefit

The minimum monthly payment is 10% of the Monthly Disability Benefit or \$100, whichever is greater.

Leave of Absence

Your coverage may be continued for up to one year during a Leave of Absence approved in writing by your Employer.



Interested in applying? Call your NEA
Income Protection® Plan Representative at:
888 - 461-1612 | M-F 9 a.m - 6 p.m. EST
or visit our website at
www.neamb.com/IncomeProtect