



# County of San Diego



Voluntary Short-Term Disability

## Class 4 - Maximum Benefit Duration of 24 weeks

All active, Full-time Employees of the Employer who are classified as the following:

- AE Appraisal, Fiscal and Purchasing Employees
- CE Confidential Employees
- CL Clerical Employees
- CM Construction, Maintenance, Operation and Repair Employees
- CR Crafts Employees
- FS Food Service Employees
- HS Health Service Employees
- MM Middle Management Employees
- PO Probation Officers
- PR Professional Employees
- PS Public Service Employees
- RN Registered Nurses
- SO Supervising Probation Officers
- SS Social Worker Supervisors
- SW Social Workers
- CNM, SD6 or RTN Confidential Non-Management
- SR5 Confidential Non-Management Employees working at SDRP San Dieguito River Park

Regularly working a minimum of 20 hours per week



## Voluntary Short-term Disability Insurance

# The Lincoln Shortterm Disability Insurance Plan:

- Provides a cash benefit when you are out of work for up to 24 weeks due to injury, illness, surgery, or recovery from childbirth
- Provides a partial cash benefit if you can only do part of your job or work part time
- Features group rates for County employees
- Offers a fast, no-hassle claims process
- To file a claim please contact Lincoln Financial Group at 888-480-8710
- For Claims questions please reach out to Lincoln Financial Group at Claims@lfg.com

#### **Benefits At-A-Glance**

Short-term Disability	
Weekly benefit amount	25% of your weekly salary, limited to \$1,000 per week
Sickness elimination period	14 days
Accident elimination period	14 days
Maximum coverage period	24 weeks

#### **Sickness Elimination Period**

 You must be out of work for 14 days due to an illness before you can collect disability benefits. You can begin collecting benefits on day 15

#### **Accident Elimination Period**

• You must be out of work for 14 days due to an accidental injury before you can collect disability benefits. You can begin collecting benefits on day 15

#### **Pre-existing Condition**

• If you have a medical condition, including pregnancy, that begins before your coverage takes effect, and you receive treatment for this condition within the 3 months leading up to your coverage start date, you may not be eligible for benefitsfor that condition until you have been covered by the plan for 12 months

#### **Benefits Integration**

- Your short-term disability benefits can coordinate with income from other sources, such as continued income or sick pay from your employer, during your disability
- Benefits will be offset by social security payments and any income received from the employer, excluding any disability payment under the California Statutory Disability plan
- This allows you to receive up to 100% of your pre-disability income

Additional Plan Benefits	
5% Rehabilitation Assistance	Included
Premium Waiver	Included
Family Income Benefit	Included
Portability	Included
C-Section	Included

#### **Benefit Exclusions & Reductions**

Like any insurance, this short-term disability insurance policy does have some exclusions. You will not receive benefits if:

- Your disability is the result of a self-inflicted injury or act of war
- You are not under the regular care of a doctor when you request disability benefits

Your benefits may be reduced if you are eligible to receive benefits from:

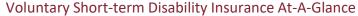
- A retirement plan
- Social Security
- Any form of employment
- Workers' Compensation

A complete list of benefit exclusions and reductions is included in the policy. State restrictions may apply to this plan.

This is not intended as a complete description of the insurance coverage offered. Controlling provisions are provided in the policy, and this summary does not modify those provisions or the insurance in any way. This is not a binding contract. A certificate of coverage will be made available to you that describes the benefits in greater detail. Refer to your certificate for your maximum benefit amounts. Should there be a difference between this summary and the contract, the contract will govern.

Insurance products (policy series GL1101) are issued by The Lincoln National Life Insurance Company (Fort Wayne, IN), which does not solicit business in New York, nor is it licensed to do so. Product availability and/or features may vary by state. Limitations and exclusions apply.

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# Voluntary Short-term Disability Premium Here's how little you pay with group rates:

Your estimated semi-monthly premium is determined by multiplying your weekly salary amount (up to \$4,000) by your benefit percentage, divide by \$10.00, and multiple by your age-banded premium rate. If your weekly salary exceeds \$4,000, then use \$4,000 as your static weekly salary.

Example: Age 39. Weekly Salary  $$800.00 \times 25\% = $200.00/$10.00 = $20.00 \times .620 = $12.40$ 

\$	
	weekly salary
Χ_	.25
	benefit percentage
/_	\$10.00
Χ_	
a	ge-banded premium rate
=\$	
	semi-monthly premium

#### **Premium Rate Table**

Age band	Premium Rate
00 - 49	\$0.310
50 - 54	\$0.310
55 - 59	\$0.345
60 - 64	\$0.405
65 - 99	\$0.440

#### The Lincoln National Life Insurance Company

Please see prior page for product information.

Voluntary Short-term Disability Insurance Premium Calculation