



## **VOLUNTARY LONG TERM DISABILITY PLAN D22**

If you were unable to work due to a serious accident or illness, how long could you maintain your standard of living without your paycheck? Most of us depend on a regular paycheck to pay the bills.

Offering a monthly disability benefit following an established elimination period of 90 days, this plan is payable to you in the event of a total disability resulting from an accident or illness. When you really think about the risks of everyday life, you realize the importance of insuring your paycheck with a Voluntary Long-term Disability Income Insurance plan.

### **Your Voluntary Long Term Disability Benefit**

**Eligibility** - All active full-time members under age 70. Persons not on active service on the effective date of the plan will not be eligible for coverage until they return to active employment. Benefits are also available for partial disability status, following a period of total disability.

**Benefit Amount** - Your Monthly Disability Benefit is determined by your Covered Monthly Compensation, up to a maximum monthly disability benefit of \$6,000. Your monthly disability benefit may not exceed 60% of your Covered Monthly Compensation as determined by net income.

**Elimination Period** - Accident and sickness benefits will be payable on the 91<sup>st</sup> day of continuous disability.

**Benefit Period** - Accident benefits will be paid up to age 65, or for five years, whichever is greater, but not beyond age 70. Sickness benefit will be paid for five years, or to age 70, whichever first occurs. If you become disabled on or after age 69, the maximum payment period is one year.

**Pre-existing Conditions** - If Total Disability is due to a pre-existing condition, no benefit will be available to be paid. This limitation will be waived for Total Disability resulting from a pre-existing condition which begins more than 12 months after your effective date of coverage.

A pre-existing condition is an injury or sickness for which you were diagnosed, received treatment, incurred expense, took medication or received advice from a physician during a 90 day period immediately preceding the effective date of coverage.

**Guaranteed Issue Plan** - When you apply for coverage, you are guaranteed to receive a maximum monthly benefit of up to \$1,200 (not to exceed 60% of your Covered Monthly Compensation). Enrolling outside of the initial enrollment period will result in no guaranteed issue and you will be required to prove good health for any benefit amount elected.

**Premium Plan** - To receive a higher monthly benefit (not to exceed 60% of your Covered Monthly Compensation), you must answer the health questions on your application during the enrollment session. Please contact your employer for more details.

**Paying for the Coverage & Waiver of Premium** - Once you select the plan level you want, you pay for the coverage through the convenience of payroll deductions. The cost is based on your age. Premiums are waived if you are in a disabled status at time of disability and do not resume until the disability status period has ended.



GUARDIAN®

**VOLUNTARY LONG TERM DISABILITY  
PLAN D22**



**PCI™**

**Pennsylvania  
Chamber Insurance**

Example: First, locate your monthly salary in the following table. If your salary is \$3,000, you can apply for a monthly benefit of \$1,800.

Monthly Salary	Monthly Benefit	Monthly Salary	Monthly Benefit	Monthly Salary	Monthly Benefit
\$ 333.00-\$ 415.99	\$ 200	\$4,250.00-\$4,332.99	\$2,550	\$8,166.00-\$8,249.99	\$4,900
\$ 416.00-\$ 499.99	\$ 250	\$4,333.00-\$4,415.99	\$2,600	\$8,250.00-\$8,332.99	\$4,950
\$ 500.00-\$ 582.99	\$ 300	\$4,416.00-\$4,499.99	\$2,650	\$8,333.00-\$8,415.99	\$5,000
\$ 583.00-\$ 665.99	\$ 350	\$4,500.00-\$4,582.99	\$2,700	\$8,416.00-\$8,499.99	\$5,050
\$ 666.00-\$ 749.99	\$ 400	\$4,583.00-\$4,665.99	\$2,750	\$8,500.00-\$8,582.99	\$5,100
\$ 750.00-\$ 832.99	\$ 450	\$4,666.00-\$4,749.99	\$2,800	\$8,583.00-\$8,665.99	\$5,150
\$ 833.00-\$ 915.99	\$ 500	\$4,750.00-\$4,832.99	\$2,850	\$8,666.00-\$8,749.99	\$5,200
\$ 916.00-\$ 999.99	\$ 550	\$4,833.00-\$4,915.99	\$2,900	\$8,750.00-\$8,832.99	\$5,250
\$1,000.00-\$1,082.99	\$ 600	\$4,916.00-\$4,999.99	\$2,950	\$8,833.00-\$8,915.99	\$5,300
\$1,083.00-\$1,165.99	\$ 650	\$5,000.00-\$5,082.99	\$3,000	\$8,916.00-\$8,999.99	\$5,350
\$1,166.00-\$1,249.99	\$ 700	\$5,083.00-\$5,165.99	\$3,050	\$9,000.00-\$9,082.99	\$5,400
\$1,250.00-\$1,332.99	\$ 750	\$5,166.00-\$5,249.99	\$3,100	\$9,083.00-\$9,165.99	\$5,450
\$1,333.00-\$1,415.99	\$ 800	\$5,250.00-\$5,332.99	\$3,150	\$9,166.00-\$9,249.99	\$5,500
\$1,416.00-\$1,499.99	\$ 850	\$5,333.00-\$5,415.99	\$3,200	\$9,250.00-\$9,332.99	\$5,550
\$1,500.00-\$1,582.99	\$ 900	\$5,416.00-\$5,499.99	\$3,250	\$9,333.00-\$9,415.99	\$5,600
\$1,583.00-\$1,665.99	\$ 950	\$5,500.00-\$5,582.99	\$3,300	\$9,416.00-\$9,499.99	\$5,650
\$1,666.00-\$1,749.99	\$1,000	\$5,583.00-\$5,665.99	\$3,350	\$9,500.00-\$9,582.99	\$5,700
\$1,750.00-\$1,832.99	\$1,050	\$5,666.00-\$5,749.99	\$3,400	\$9,583.00-\$9,665.99	\$5,750
\$1,833.00-\$1,915.99	\$1,100	\$5,750.00-\$5,832.99	\$3,450	\$9,666.00-\$9,749.99	\$5,800
\$1,916.00-\$1,999.99	\$1,150	\$5,833.00-\$5,915.99	\$3,500	\$9,750.00-\$9,832.99	\$5,850
\$2,000.00-\$2,082.99	\$1,200	\$5,916.00-\$5,999.99	\$3,550	\$9,833.00-\$9,915.99	\$5,900
\$2,083.00-\$2,165.99	\$1,250	\$6,000.00-\$6,082.99	\$3,600	\$9,916.00-\$9,999.99	\$5,950
\$2,166.00-\$2,249.99	\$1,300	\$6,083.00-\$6,165.99	\$3,650	\$10,000 and over	\$6,000
\$2,250.00-\$2,332.99	\$1,350	\$6,166.00-\$6,249.99	\$3,700		
\$2,333.00-\$2,415.99	\$1,400	\$6,250.00-\$6,332.99	\$3,750		
\$2,416.00-\$2,499.99	\$1,450	\$6,333.00-\$6,415.99	\$3,800		
\$2,500.00-\$2,582.99	\$1,500	\$6,416.00-\$6,499.99	\$3,850		
\$2,583.00-\$2,665.99	\$1,550	\$6,500.00-\$6,582.99	\$3,900		
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\$2,916.00-\$2,999.99	\$1,750	\$6,833.00-\$6,915.99	\$4,100		
\$3,000.00-\$3,082.99	\$1,800	\$6,916.00-\$6,999.99	\$4,150		
\$3,083.00-\$3,165.99	\$1,850	\$7,000.00-\$7,082.99	\$4,200		
\$3,166.00-\$3,249.99	\$1,900	\$7,083.00-\$7,165.99	\$4,250		
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\$3,666.00-\$3,749.99	\$2,200	\$7,583.00-\$7,665.99	\$4,550		
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\$3,833.00-\$3,915.99	\$2,300	\$7,750.00-\$7,832.99	\$4,650		
\$3,916.00-\$3,999.99	\$2,350	\$7,833.00-\$7,915.99	\$4,700		
\$4,000.00-\$4,082.99	\$2,400	\$7,916.00-\$7,999.99	\$4,750		
\$4,083.00-\$4,165.99	\$2,450	\$8,000.00-\$8,082.99	\$4,800		
\$4,166.00-\$4,249.99	\$2,500	\$8,083.00-\$8,165.99	\$4,850		

Disclaimer: This information highlights the important features of the products. These policies have limitations and exclusions. Your Benefit Administrator can supply you with cost and complete details of coverage. Refer to the product brochure for more details.