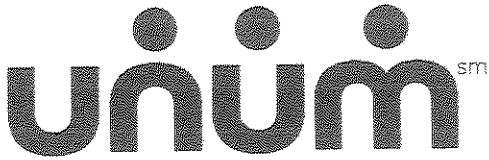


***NPUT*** *NEW PALTZ UNITED TEACHERS BENEFIT TRUST FUND*

SUMMARY PLAN DESCRIPTION  
SHORT TERM DISABILITY

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## Short Term Disability Income Protection Insurance Plan Highlights

New Paltz United Teachers Benefit Trust Fund

Policy # 102788

Please read carefully the following description of your Short Term Disability Income Protection insurance plan, underwritten by First Unum Life Insurance Company.

### Your Plan

#### **Eligibility**

You are eligible for STD coverage if you are a Non-Teaching Member of the New Paltz United Teachers Benefit Trust Fund in active membership.

#### **Waiting Period**

For Members hired on or before 9/1/2008: Coverage is effective on 9/1/2008  
For Members hired after 9/1/2008: Coverage will be effective on your date of hire.

#### **Plan Premiums**

Paid by New Paltz United Teachers Benefit Trust Fund

#### **Weekly Benefit Amount**

If you meet the definition of disability, you would be eligible to receive a weekly benefit if you are disabled equal to 70% of your weekly earnings, to a maximum of \$2,000 per week.

**Your disability benefit may be reduced by deductible sources of income and any earnings you have while disabled.** Deductible sources of income may include such items as disability income or other amounts you receive or are entitled to receive under: workers compensation or similar occupational benefit laws; state compulsory benefit laws; automobile liability and no fault insurance; legal judgments and settlements; certain retirement plans; salary continuation or sick leave plans; other group or association disability programs or insurance; and amounts you or your family receive or are entitled to receive from Social Security or similar governmental programs.

#### **Definition of Disability**

You are disabled when Unum determines that:

- you are limited from performing the material and substantial duties of your regular occupation due to your sickness or injury; and
- you have a 20% or more loss in weekly earnings due to the same sickness or injury.

You must be under the regular care of a physician in order to be considered disabled.

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### ***Elimination Period***

The Elimination Period is the length of time of continuous disability which must be satisfied before you are eligible to receive benefits.

If your disability is the result of an injury that occurs while you are covered under the plan, your Elimination Period is 30 days.

If your disability is due to a sickness, your Elimination Period is 30 days.

### ***Benefit Duration***

If you meet the definition of disability, you may receive a benefit for 22 weeks.

### **Additional Benefits**

#### ***Rehabilitation and Return to Work Assistance***

Unum has a vocational Rehabilitation and Return to Work Assistance program available to assist you in returning to work. We will make the final determination of your eligibility for participation in the program, and will provide you with a written Rehabilitation and Return to Work Assistance plan developed specifically for you. This program may include, but is not limited to the following benefits:

- coordination with your Employer to assist your return to work;
- adaptive equipment or job accommodations to allow you to work;
- vocational evaluation to determine how your disability may impact your employment options;
- job placement services;
- resume preparation;
- job seeking skills training; or
- education and retraining expenses for a new occupation.

If you are participating in a Rehabilitation and Return to Work Assistance program, we will also pay an additional disability benefit of 10% of your gross disability payment to a maximum of \$250 per week. In addition, we will make weekly payments to you for 3 weeks following the date your disability ends, if we determine you are no longer disabled while:

- you are participating in a Rehabilitation and Return to Work Assistance program; and
- you are not able to find employment.

#### ***Worldwide Emergency Travel Assistance Services***

Whether your travel is for business or pleasure, our worldwide emergency travel assistance program is there to help you when an unexpected emergency occurs. With one phone call anytime of the day or night, you, your spouse and dependent children can get immediate assistance anywhere in the world. Emergency travel assistance is available to you when you travel to any foreign country, including neighboring Canada or Mexico. It is also available anywhere in the United States for those traveling more than 100 miles from home. Your spouse and dependent children do not have to be traveling with you to be eligible. However, spouses traveling on business for their employer are not covered by this program.

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## Limitations/Exclusions/ Termination of Coverage

### ***Instances When Benefits Would Not Be Paid***

Benefits would not be paid for loss resulting from:

- war, declared or undeclared, or any act of war;
- active participation in a riot;
- intentionally self-inflicted injuries;
- loss of a professional license, occupational license or certification;
- commission of a crime for which you have been convicted;
- any period of disability during which you are incarcerated.

### ***Once Your Coverage Begins, What Happens If You Are Temporarily Not Working?***

If you are on a **temporary layoff**, and if premium is paid, you will be covered through the end of the 3<sup>rd</sup> month that immediately follows the month in which your temporary layoff begins.

If you are on a **leave of absence**, and if premium is paid, you will be covered through the end of the approved leave of absence or up to 6 months following the date your leave of absence begins, whichever is earlier. If your leave of absence is longer than 6 months, you will need First Unum's approval.

Special Note: Layoff or Leave of Absence means you are temporarily absent from active membership for a period of time that has been approved in advance in writing by your employer. Your normal vacation time, including the School District's summer break, or any period of disability is not considered a temporary layoff or leave of absence.

### ***Termination of Coverage***

Your coverage under the policy ends on the earliest of the following:

- The date the policy or plan is cancelled;
- The date you no longer are in an eligible group;
- The date your eligible group is no longer covered;
- The last day you are in active employment except as provided under the covered layoff or leave of absence provision. Please see your Plan Administrator for further information on these provisions.

Unum will provide coverage for a payable claim which occurs while you are covered under the policy or plan.

### ***Delayed Effective Date of Coverage***

Insurance coverage will be delayed if you are not in active employment because of an injury, sickness, temporary layoff, or leave of absence on the date that insurance would otherwise become effective.

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**Questions**

If you should have any questions about your coverage, how to enroll or file a claim, please contact the Plan Administrator of the NPUT Benefit Trust Fund, Ron Noelle at telephone (845) 255-5770 or fax (845) 255-3654.

This plan highlight is a summary provided to help you understand your insurance coverage from Unum. Some provisions may vary or not be available in all states. Please refer to your certificate booklet for your complete plan description. If the terms of this plan highlight summary or your certificate differ from your policy, the policy will govern. For complete details of coverage, please refer to policy form number C.FP-1, et al. **08/22/08**

All worldwide emergency travel assistance must be arranged by Assist America, which pays for all services it provides. Medical expenses such as prescriptions or physician, lab or medical facility fees are paid by the employee or the employee's health insurance.

*Underwritten by:*

**First Unum Life Insurance Company** 99 Park Avenue, 6<sup>th</sup> Floor, New York, NY 10016, [www.unum.com](http://www.unum.com)

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**SHORT-TERM DISABILITY PLAN DEFINITION OF EARNINGS – Finalized**

**8/21/08**

**STD DEFINITION:**

**“Weekly Earnings” means your gross weekly income from your Employer in effect just prior to your date of disability. It includes your total income before taxes. It is prior to any deductions made for pre-tax contributions to a qualified deferred compensation plan, Section 125 plan or flexible spending account. It includes overtime pay and additional assignments but does not include commissions, bonuses, or income received from sources other than your Employer.**

**Overtime pay and additional assignments are defined as earnings paid by your Employer for services beyond your normally scheduled work hours. Overtime pay and additional assignments will be averaged for the lesser of:**

- a. the 52 full calendar week period of your employment with your Employer just prior to the date disability begins; or**
- b. the period of actual employment with your Employer.**