



GET THE FACTS - QUICK REFERENCE GUIDE

DisabilityFLEX[®] INSURANCE

This customizable disability insurance coverage helps protect an employee's income while helping them return to work sooner - making it an important consideration for any employee benefit package.

Here are the facts on the DisabilityFLEX plans from **The Hartford's Employee Choice BenefitsSM**.

PLAN DESIGN & BENEFIT INFORMATION		OPTIONS AVAILABLE
Eligibility Basics	Employee (EE) <ul style="list-style-type: none"> • 10 - 49 lives: 30 hours/week • 50+ lives: 30 hours/week 	50+ lives: <ul style="list-style-type: none"> • Work hours can be set by employer • Minimum: 20 hours per week
Funding Options	<ul style="list-style-type: none"> • 100% employee paid (voluntary) 	
Coverage Amounts	<ul style="list-style-type: none"> • Flat benefit amounts • Maximum benefit: \$1,000 not to exceed a percentage of earnings • Benefit percentage: 60% • Increments: \$100 • State exceptions apply 	<ul style="list-style-type: none"> • Maximum benefit: up to \$2,500 • Benefit percentage: 50% • Increments: \$10, \$25 or \$50
Minimum Elected Benefit	\$100	\$200
Coverage Election	Employee only	
UNDERWRITING GUIDELINES		OPTIONS AVAILABLE
Preferred Information to Quote	<ul style="list-style-type: none"> • Group name, situs state, SIC, effective date, current participation • 10-49 lives: no census required • 50+ lives: employee census with DOB, gender, salaries, occupations, work zip code, current amount • If case is a takeover - prior group plan policy number and certificate, current participation and confirmation that inforce STD plan will terminate 	
Participation	<ul style="list-style-type: none"> • 10-49 lives: lesser of 40% participation or 10 enrolled lives • 50+ lives: minimum of 10 enrolled lives and 10% participation 	
Rate Structure	<ul style="list-style-type: none"> • Weekly rate per \$100 of weekly benefit • Four age bands: <35, 35-49, 50-59, and 60+ 	<ul style="list-style-type: none"> • Weekly rate per \$10 weekly benefit • Monthly rate per \$100 weekly benefit • Monthly rate per \$10 weekly benefit
Rate Guarantee Period	<ul style="list-style-type: none"> • Two years • For groups with 50+ lives and multi-year rate guarantees: <ul style="list-style-type: none"> - A group must achieve 10% participation to secure the rate guarantee - If 10% participation is not achieved, the rate guarantee may revert to one year 	<ul style="list-style-type: none"> • One year • 50+ lives: Three years
Guaranteed Issue	All amounts subject to pre-existing conditions limitation	
Renewability	Annually renewable at the group's discretion	
STANDARD PRODUCT PROVISIONS		OPTIONS AVAILABLE
Benefits	Weekly payments for duration of disability	
Offsets For Other Income Benefits	Benefits received for loss of income as a result of Disability are not deducted from the benefit	

continued

STANDARD PRODUCT PROVISIONS (continued)		OPTIONS AVAILABLE
Benefit Commencement Period	<ul style="list-style-type: none"> • Injury/Sickness: choice of 1/8, 8/8, 15/15 or 30/30 (calendar days) • Employer selects up to two choices to offer employees 	Employer selects three or more choices to offer employees
Benefit Duration Period	<ul style="list-style-type: none"> • 10 - 49 lives: choice of 13, 26 or 52 weeks • 50+ lives: choice of 13, 26, 52 or 104 weeks • Employer selects up to two choices to offer employees 	Employer selects three or more choices to offer employees
Total Disability	20% or less of pre-disability earnings	
Disabled and Working (Partial Disability)	<ul style="list-style-type: none"> • 20% - 80% of pre-disability earnings • Disability benefit: reduced by weekly earnings - proportionate loss formula 	
Rehabilitative Employment Benefit	<ul style="list-style-type: none"> • Pays a greater benefit to the employee if engaged in approved rehabilitative employment while disabled and working • Offsets 50% of current work earnings 	
Survivor Benefit	Any benefits owed in the event of death are paid to the employee's estate	
Maternity, Mental Illness & Substance Abuse	Treated the same as any other illness	
Pre-Ex Benefit	Up to a 4-week benefit is payable if a disability is the result of a pre-existing condition	
Pre-Existing Conditions Limitation	<ul style="list-style-type: none"> • 10 - 49 lives: 12/12 • 50 - 999 lives: 6/6/12 • 1,000+ lives: 3/3/12 • Some states may require a specific pre-ex 	50+ lives <ul style="list-style-type: none"> • 3/3/12 with traditional enrollment - evidence of insurability (EOI) • 6/6/12 with annual enrollment • 3/6/12 • 12/12/24
Recurrent Disability Period	15 calendar days	Period may vary if sold with LTD
Definition of Disability	Own Occ - Partial: total disability must be satisfied before Disabled and Working Benefits can be received	Total disability
Ability Assist® EAP¹	24/7/365 access to help for financial, legal or emotional issues	
HealthChampionSM	Administrative and clinical support following serious illness or injury	
ENROLLMENT		OPTIONS AVAILABLE
Enrollment Type	<ul style="list-style-type: none"> • 10 - 49 lives: traditional (EOI) enrollment • 50 - 999 lives: annual open enrollment • 1,000+ lives: traditional (EOI) enrollment 	<ul style="list-style-type: none"> • 50 - 999 lives: traditional (EOI) enrollment • 1,000+ lives: annual open enrollment

Insurance benefits payable are subject to your policy's Pre-Existing Conditions Limitation.

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Disability Form Series includes GBD-1000, GBD-1200, or state equivalent.

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