

Summary of Benefits

City Of Chicago

All Employees who are classified as Full Time LMCC and Uniformed Fire Employees

Long Term Disability

Issued by The Prudential Insurance Company of America

Effective: 04/01/2018

Long Term Disability

100% Employee Paid

- **CITY OF CHICAGO** offers you Voluntary (or Contributory) Long Term Disability (LTD) coverage. You are automatically enrolled in this plan unless you opt-out. Premium contributions for the cost of the plan will automatically be deducted from your earnings.
- Your monthly Long Term Disability benefit will be 60% of your monthly pre-disability earnings, up to the maximum of \$10,000, less deductible sources of income. The minimum monthly benefit is \$100. Deductible sources of income may include benefits from statutory plans, Social Security to you and your dependents, workers' compensation, unemployment income and other income.
- If you meet the definition of disability, your benefits will begin 180 days following an accidental injury or sickness. The benefit duration is up to age 65. However, if you become disabled at or after age 65 benefits are payable according to an age-based schedule. Refer to the Booklet-Certificate for details.
- You are considered disabled when, because of injury or sickness, you are under the regular care of a doctor, you are unable to perform the material and substantial duties of your regular occupation and your disability results in a loss of income of at least 20%. After receiving benefits for 24 months, you are considered disabled when, due to the same sickness or injury, you are unable to perform the material and substantial duties of any gainful occupation for which you are reasonably fitted by education, training or experience, and disability results in a loss of income of a specified percentage determined by your plan.
- Disabilities due to mental illness are limited to 24 months of benefits during your lifetime. Examples of mental illness include schizophrenia, depression, manic depressive or bipolar illness, anxiety, somatization, substance related disorders (including drug and alcohol abuse), and/or adjustment disorders. Disabilities which are primarily based on self-reported symptoms are limited to 36 months of benefits during your lifetime. Examples of self-reported symptoms include headache, pain, fatigue, stiffness, soreness, ringing in the ears, dizziness, numbness and loss of energy. Disabilities due to mental illness and disabilities which are primarily based on self-reported symptoms have a combined limited pay period during your lifetime.
- LTD benefits will not be paid for a disability that begins during the first 12 months of coverage and due to a pre-existing condition. A pre-existing condition is an injury or sickness for which you received medical treatment, consultation, diagnostic measures, prescribed drugs or medicines, or for which you followed treatment recommendations during the 90 days prior to your effective date of coverage.
- During the first 12 months of part-time work while disabled, you can receive full benefits as long as your combined income and disability benefits do not exceed your monthly pre-disability earnings.
- If you die while collecting disability benefits, a lump sum payment may be paid to your eligible survivors.

- You are not covered for a disability caused by war or any act of war, declared or undeclared, an intentionally self-inflicted injury, active participation in a riot, and commission of a crime for which you have been convicted. Benefits are not payable for any period of incarceration as a result of a conviction.

Benefits, exclusions and provisions may vary by state. Refer to the plan booklet for details.

For your coverage to become effective, you must be actively at work on the effective date of the plan. If you apply for an amount that requires satisfactory evidence of insurability to The Prudential Insurance Company of America, you must be actively at work on the date of approval for the amount requiring satisfactory evidence of insurability.

Long Term Disability Insurance coverage is issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ 07102. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500

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Rate Sheet

City Of Chicago

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"How much does this Long Term Disability Insurance cost?"

Use the chart below to find the cost of LTD insurance. Follow the steps below to calculate your coverage cost. Your maximum monthly benefit amount is up to \$10,000. Your coverage level is limited to the salary of \$200,000.

Cost of Long Term Disability	
Employee's Age	Employee's Rate
0 - 30	\$0.096
30 - 34	\$0.115
35 - 39	\$0.163
40 - 44	\$0.230
45 - 49	\$0.365
50 - 54	\$0.566
55 - 59	\$0.758
60 - 64	\$0.845
65 - 69	\$0.979
70 - 99	\$1.795

Rates may change as the insured enters a higher age category. Also, rates may change if plan experience requires a change for all insureds.

How to Calculate Your Total LTD Semi-Monthly Cost

Step 1	Indicate your monthly earnings.	= \$
Step 2	If the amount in Step 1 is greater than \$10,000, indicate \$10,000. Otherwise, indicate the amount from Step 1.	= \$
Step 3	Multiply the amount in Step 2 by the rate for your age and divide by 100 to obtain your total LTD monthly cost.	= \$
Step 4	Multiply the amount in Step 3 by 12 and divide by 24 to obtain your total LTD semi-monthly cost.	= \$

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Enrollment Change – CITY OF CHICAGO
All Eligible LMCC Employees and Uniformed Fire Employees

To Opt-Out Return Completed Form to:
 The Prudential Insurance Company of America
 Record Keeping Services
 P. O. Box 13676
 Philadelphia, Pennsylvania 19176

Employee General Information		Effective Date of Coverage (for office use only) / /	
Last Name	First Name	MI	Email Address
Address		City	State Zip Code
Social Security Number - -	Marital Status Single Married Divorced Widowed	Date of Birth (Month/Day/Year) / /	
Date Employed (Month/Day/Year) / /	Your Annual Earnings \$ _____	(For Prudential Use Only) Control # 44004	

Long Term Disability

CITY OF CHICAGO offers you Voluntary (Contributory) Long Term Disability Insurance coverage.

You are automatically being enrolled in this coverage, and no further action is required unless you elect to opt-out of Voluntary Long Term Disability insurance coverage. Premium contributions for the Voluntary Long Term Disability insurance coverage will automatically be deducted from your paycheck.

If you elect to opt-out of the Voluntary Long Term Disability insurance coverage:

Check the opt-out box below, complete this form and return the completed form to the above address.

OR

Call the Prudential Customer Service Office @ 1-800-778-3827 Monday - Friday 8am - 8pm EST

I elect to Opt-Out of Long Term Disability insurance coverage.

I understand that in the event I desire such insurance at a later date, I will be required to furnish medical evidence of insurability and the insurance company will have the right to refuse my request.

Important Notices

For residents of all states except Alabama, Arkansas, the District of Columbia, Florida, Kentucky, Louisiana, Maine, Maryland, New Jersey, New York, North Carolina, Pennsylvania, Puerto Rico, Rhode Island, Utah, Vermont, Virginia and Washington; WARNING — Any person who knowingly and with intent to injure, defraud, or deceive any insurance company or other person, or knowing that he is facilitating commission of a fraud, submits incomplete, false, fraudulent, deceptive or misleading facts or information when filing an insurance application or a statement of claim for payment of a loss or benefit commits a fraudulent insurance act, is/may be guilty of a crime and may be prosecuted and punished under state law. Penalties may include fines, civil damages and criminal penalties, including confinement in prison. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant or if the applicant conceals, for the purpose of misleading, information concerning any fact material thereto.

I have read and understand the terms and requirements of the fraud warnings included as part of this form.

Employee Signature _____ **Date Signed (Month/Day/Year)** _____

Long-Term Disability Insurance coverages are issued by The Prudential Insurance Company of America, 751 Broad Street, Newark, NJ 07102. Life Claims: 1-800-524-0542 and Disability Support 1-800-842-1718. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. If there is a discrepancy between this document and the Booklet-Certificate/Group Contract issued by Prudential, the terms of the Group Contract will govern. Contract provisions may vary by state. California COA #1179, NAIC#68241. Contract Series: 83500.

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