# GROUP LONG-TERM DISABILITY INSURANCE BENEFIT HIGHLIGHTS





More than 1 in 4 adults in the U.S. has some type of disability.1

# **Cracker Barrel Old Country Store – Maple Street Biscuit Company**

A disability can happen to anyone. Long-term disability insurance helps protect your paycheck if you're unable to work for a long period of time after a serious condition, injury or sickness.



To learn more about Long-Term Disability insurance, visit <a href="https://www.thehartford.com/employee-benefits/employees">https://www.thehartford.com/employee-benefits/employees</a>

# **COVERAGE INFORMATION**

| BENEFIT PERCENTAGE (PERCENT OF YOUR EARNINGS) | MONTHLY<br>MAXIMUM | MINIMUM (BASED ON MONTHLY INCOME LOSS BEFORE THE DEDUCTION OF OTHER INCOME BENEFITS) | BENEFIT<br>STARTS<br>(ELIMINATION PERIOD) | BENEFIT DURATION  |
|---|--------------------|--|---|---|
| 50%   | \$7,500            | The greater of \$100 or 10% of the benefit   | After 90 days disabled                    | If you become disabled prior to age 61, benefits may continue for as long as you remain disabled or 5 years. If your disability occurs at age 61 or above, the number of payments may reduce. |

# **ASKED & ANSWERED**

## WHO IS ELIGIBLE?

You are eligible for this insurance if you are an active full-time Home Office or Field Management employee or Maple Street Family Support Team Member, excluding General Managers, Maple Street Community Leaders, District Manager, Maple Street Mission Coach or MIP (Management Incentive Plan) who works at least 30 hours per week on a regularly scheduled basis.

## **AM I GUARANTEED COVERAGE?**

This insurance is guaranteed issue coverage - it is available without having to provide information about your health.

This coverage is subject to a pre-existing condition exclusion. Please refer to the Limitations & Exclusions sheet provided with this benefit highlight sheet for more information on limitations and exclusions, such as pre-existing conditions.

# WHEN CAN I ENROLL?

Your employer will automatically enroll you for this coverage.

# WHEN DOES THIS INSURANCE BEGIN?

The initial effective date of this coverage is January 1, 2022. Please refer to your certificate for coverage effective date information.

You must be actively at work with your employer on the day your coverage takes effect.

## WHEN DOES THIS INSURANCE END?

This insurance will end when you no longer satisfy the applicable eligibility conditions, premium is unpaid, you leave your employer, or the coverage is no longer offered.

# WHAT DOES IT MEAN TO BE DISABLED? Typically, disability means that you cannot perform one or more of the essential duties of your occupation due to injury, sickness, pregnancy or other medical condition covered by the insurance, and as a result, your current monthly earnings are less than 80% of your pre-disability earnings. Once you have been disabled for 24 months following the elimination period, you must be prevented from performing one or more of the essential duties of any occupation and as a result, your current monthly earnings are less than or equal to 80% of your pre-disability earnings. Pre-disability earnings are defined in your policy.

1Center for Disease Control and Prevention "Disability Impacts All of Us," September 2020: https://www.cdc.gov/ncbddd/disabilityandhealth/infographic-disability-impacts-all.html, as viewed on 10/14/2020.

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# **LIMITATIONS & EXCLUSIONS**



This insurance coverage includes certain limitations and exclusions. The certificate details all provisions, limitations, and exclusions for this insurance coverage. A copy of the certificate can be obtained from your employer.

#### **GROUP LONG TERM DISABILITY INSURANCE**

#### **GENERAL EXCLUSIONS**

- You must be under the regular care of a physician to receive benefits.
- You cannot receive disability insurance benefit payments for disabilities that are caused or contributed to by:
  - War or act of war (declared or not)
  - The commission of, or attempt to commit a felony
  - An intentionally self-inflicted injury
  - Your being engaged in an illegal occupation

#### PRE-EXISTING CONDITIONS

- Your insurance excludes the benefits you can receive for pre-existing conditions. In general, if you were diagnosed or received care for a condition before
  the effective date of your certificate, you will be covered for a disability due to that condition only if:
  - You have not received treatment for your condition for 12 months before the effective date of your insurance, or
  - You have been insured under this coverage for 12 months prior to your disability commencing, so you can receive benefits even if you're receiving treatment or
  - You have already satisfied the pre-existing condition requirement of your previous insurer

#### LIMITATIONS

Mental Illness and Substance Abuse Limitation. If you are disabled because of Mental Illness or because of alcoholism or the use of narcotics, sedatives, stimulants, hallucinogens or other similar substance, benefits will be payable for a maximum of 24 months in your lifetime, unless at the end of that 24 months, you are confined to a hospital or other place licensed to provide medical care for your disability.

#### **OFFSETS**

- Your benefit payments will be reduced by other income you receive or are eligible to receive due to your disability, such as:
  - Social Security disability insurance (please see next section for exceptions)
  - Workers' compensation
  - Other employer-based insurance coverage you may have
  - Unemployment benefits
  - Settlements or judgments for income loss
  - Retirement benefits that your employer fully or partially pays for (such as a pension plan)
- Your benefit payments will not be reduced by certain kinds of other income, such as:
  - Retirement benefits if you were already receiving them before you became disabled
  - Retirement benefits that are funded by your after-tax contributions your personal savings, investments, IRAs or Keoghs profit-sharing
  - Most personal disability policies
  - Social Security cost-of-living increases

This example is for purposes of illustrating the effect of the benefit reductions and is not intended to reflect the situation of a particular claimant under the Policy:

Insured's monthly [Pre-Disability Earnings/Basic Monthly Pay] \$3,000 Long term disability benefits percentage x 50% Unreduced maximum benefit \$1,500 Less Social Security disability benefit per month - \$900 Less state disability income benefit per month - \$300 Total amount of long term disability benefit per month \$300

#### THIS POLICY PROVIDES LIMITED BENEFITS.

This limited benefit plan (1) does not constitute major medical coverage, and (2) does not satisfy the individual mandate of the Affordable Care Act (ACA) because the coverage does not meet the requirements of minimum essential coverage.

In New York: This Disability policy provides disability income insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Department of Financial Services.

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