



# DISABILITY UNDERWRITING GUIDELINES

## LONG TERM DISABILITY

	AETNA	ANTHEM	COPOWER: UNUM
<b>PRODUCT OFFERINGS</b>			
<b>Benefit Percentage</b>	10–50 EEs: 50%, or 60% 51–100 EEs: 50%, 60%, or 66 2/3%.	Employer Sponsored: 50%, 60%, or 67% of earnings Voluntary: 50% or 60% of earnings	60%
<b>Maximum Monthly Benefit</b>	10–50 EEs: \$2000, \$3500, \$5000, \$6000 or \$8000. 51–100 EEs: \$10,000 (must qualify based on top 3 salaries).	Employer Sponsored: \$15,000 (must qualify based on top 3 salaries) Voluntary: \$10,000 (must qualify based on top 3 salaries)	\$7,500
<b>Minimum Monthly Benefit</b>	\$0	\$1,000	The greater of 10% gross disability payment or \$100
<b>Elimination Period</b>	90, or 180 days	90, or 180 days	90, 180 or 360 days
<b>Definition of Disability</b>	Own occupation for 24 months 80%; After 24 months, any reasonable occupation	2-year own occupation, 3-year own occupation, or own occupation period to SSNRA	2 year own occupation, partial definition of disability
<b>Benefit Duration</b>	2 years, 5 years, or Social Security Normal Retirement Age (SSNRA)	Social Security Normal Retirement Age (SSNRA)	Social Security Normal Retirement Age (SS ADEA)
<b>Benefit Integration</b>	10–50 EEs: Not available. 51–100 EEs: Yes.		Primary and family social security
<b>Pre-Existing Conditions</b>	3/12 for new coverage and increases in existing coverage	3/6/12, 3/12, 12/6/24 or 12/24	3/12
<b>Mental Nervous / Substance Abuse</b>	24 months; 90 day extension if hospital confined	24 months per lifetime	Mental/Nervous Limitation-Up to 24 mos of benefits if not hospital confined
<b>ELIGIBILITY</b>			
<b>Group Size</b>	10–100 employees	10–100 employees	10–249 employees. Groups currently enrolled with Unum LTD are not eligible for coverage through CoPower. Excluded industries: Doctors and Hospitals SIC 8001-8069
<b>Stand-Alone</b>	Yes. (some ineligible industries)	Yes.	Yes
<b>Rate Guarantee</b>	10–50 EEs: 2 years. 51–100 EEs: 1 or 2 years.	2 years	2 years
<b>Admin Fee</b>	None.	None.	\$10 admin fee per month per group
<b>Contribution</b>	Minimum 50%. 100% required for non-contributory plans.	Employer Sponsored: Minimum 25%. 100% required for non-contributory plans. Voluntary: 100% employee paid.	100% employer paid.
<b>Participation</b>	Minimum 50%. If employer contributes 100% then 100% participation is required.	Minimum 75%. If employer contributes 100% then 100% participation is required.	100% of eligible employees
<b>Voluntary Participation</b>	10–50 EEs: Not available. 51–100 EEs: Minimum 25% or 20 enrolled if group is 100% employee paid.	The greater of 20% of eligible employees or 10 employees must enroll. If the Enrollment Participation Program (EPP) is selected, participation percentage is waived, and a minimum of 10 enrolled employees is required.	Not available.
<b>Out-of-State</b>	No restrictions.	No restrictions.	No restrictions.



	LIFEMAP	METLIFE 2-50
<b>PRODUCT OFFERINGS</b>		
<b>Benefit Percentage</b>	2-9 lives: 60%. 10-100 lives: 50%, 60%.	50%, 60%
<b>Maximum Monthly Benefit</b>	2-9 lives: \$6,000 10-100 lives: \$6,000, \$6,500, \$7,000, \$7,500, or \$8,000.	\$3,000, \$4,000, \$5,000, \$6,000, \$7,000, \$8,000, \$9,000, or \$10,000. Amounts greater than \$7,000 require 10 enrolled, prior LTD coverage, and salaries of the top 3 earners must qualify for the quoted maximum.
<b>Minimum Monthly Benefit</b>	\$100	\$3,000
<b>Elimination Period</b>	90 or 180 days.	90 or 180 days
<b>Definition of Disability</b>	Own occupation for 24 months 80%; After 24 months, any reasonable occupation.	2 year own occupation. Own occupation to 65 available with 25+ for the following SICs: 6011-6153, 6311-6411, 7371-7379, 8711-8733.
<b>Benefit Duration</b>	<ul style="list-style-type: none"> <li>• 2 years Reducing Benefit Duration (RBD)</li> <li>• 5 years Reducing Benefit Duration (RBD)</li> <li>• Social Security Normal Retirement Age (SSNRA)</li> </ul>	<ul style="list-style-type: none"> <li>• RBD/SSNRA (available to groups with 10+)</li> <li>• Lesser of (RBD with SSNRA) or 2 years</li> <li>• Lesser of (RBD with SSNRA) or 5 years</li> </ul>
<b>Benefit Integration</b>	Full Family Integration.	Full Family Integration
<b>Pre-Existing Conditions</b>	2-9 lives: 12/12 10-100 lives: 3/12	3/12
<b>Mental Nervous / Substance Abuse</b>	24 months per lifetime.	24 month lifetime limitation
<b>ELIGIBILITY</b>		
<b>Group Size</b>	2-100 employees.	5-50 employees. Must be in business at least 1 year prior to the effective date of the coverage. Employees must participate in Social Security to be eligible for coverage. Groups with < 10 EEs, no more than 75% of the group can be family members (spouses, siblings, children, and parents). DE-9C will be required groups with > 50% family members. Groups with < 25 EEs will be declined if any employee age is 75+. Industries that must be quoted direct: 4212- 4231, 4412-4581, 8011-8049, 8111. Excluded Industries: 100-739, 750-1299, 1400-1499, 2100-2199, 2400-2429, 3100-3129, 3292, 3450-3459, 3480-3489, 4000-4099, 4953, 5090-5093, 5099, 5194, 8811, 9999. Excluded Employees: retirees, part-time, temporary, seasonal, leased, independent contractors (1099s), pilots and elected officials.
<b>Stand-Alone</b>	Yes.	Yes for groups of 10+. Groups less than 10 must be packaged with Dental Preferred (PPO).
<b>Rate Guarantee</b>	2 years.	2 years.
<b>Admin Fee</b>	None.	None.
<b>Contribution</b>	Minimum 75%.	100% employer paid.
<b>Participation</b>	100% of eligible employees.	100% of eligible employees & 5 enrolled
<b>Voluntary Participation</b>	Not available.	Not available.
<b>Out-of-State</b>	No restrictions.	No restrictions.



METLIFE 51-499	
PRODUCT OFFERINGS	
<b>Benefit Percentage</b>	40%, 50%, 60%, 66 2/3% Non-contributory required for percentages over 60% <u>VLTD</u> : 60%, 50% or 40% rate of benefit
<b>Maximum Monthly Benefit</b>	\$6,000 <u>≤100 lives</u> : Amounts above \$10,000 require UW approval. <u>100+ lives</u> : Amounts above \$15,000 require approval.
<b>Minimum Monthly Benefit</b>	\$0 - \$100 <u>VLTD</u> : \$100 (subject to state regulations)
<b>Elimination Period</b>	30, 60, 90, 120, 150, 180, 270, or 360 days <u>VLTD</u> : 90, 180 or 360 days. If STD is in force, the greater of the maximum STD benefit duration OR end of the LTD elimination period of (90, 180 or 360 days).
<b>Definition of Disability</b>	<ul style="list-style-type: none"> <li>• Combination Substantial and Material Acts and Inability to Earn (80%)</li> <li>• Substantial and Material Acts only</li> <li>• Own Occupation (12, 24, 36, 48, 60 months or unlimited)</li> </ul> <u>VLTD</u> <ul style="list-style-type: none"> <li>• Usual Occupation (24 month) and Any Occupation – Total Disability (Substantial and Material Acts)/Partial Disability (Unable to Earn 80%)</li> <li>• Other options available with underwriting approval</li> </ul>
<b>Benefit Duration</b>	<ul style="list-style-type: none"> <li>• Later of Reducing Benefit Duration (RBD) or Social Security Normal Retirement Age (SSNRA)</li> <li>• 65/5/70 with SSNRA</li> <li>• 65/5/70 without SSNRA</li> <li>• RBD without SSNRA</li> <li>• Lesser of (RBD with SSNRA) or 2 years</li> <li>• Lesser of (RBD with SSNRA) or 5 years</li> <li>• To Age 70 or older/minimum 12 months benefits</li> </ul> <u>VLTD</u> <ul style="list-style-type: none"> <li>• Greater of Social Security Normal Retirement Age (SSNRA) or Reducing Benefit Duration (RBD)</li> <li>• Lesser of 5 year duration or RBD</li> </ul>
<b>Benefit Integration</b>	<ul style="list-style-type: none"> <li>• Direct Integration w/Full Family (Primary and Family)</li> <li>• Direct Integration: w/ Primary SS Offsets</li> <li>• Back Door Integration: 10% or 20% up to 70%</li> <li>• All Source Integration: 10% or 20% up to 70%</li> <li>• No Integration (SS Benefits not offset)</li> </ul>
<b>Pre-Existing Conditions</b>	<u>Standard</u> : 3/12 months <u>Optional</u> : 6/12, 6/24, 12/12, 3/3/12 or 3/6/12 <u>VLTD</u> : 6/24 months
<b>Mental Nervous / Substance Abuse</b>	24 months; variations available.
ELIGIBILITY	
<b>Group Size</b>	51-499 employees
<b>Stand-Alone</b>	Yes
<b>Rate Guarantee</b>	2 years; other options available.
<b>Admin Fee</b>	None.
<b>Contribution</b>	Minimum 25%
<b>Participation</b>	50% of eligible employees.
<b>Voluntary Participation</b>	Options available.
<b>Out-of-State</b>	No restrictions.



	PRINCIPAL	RELIANCE STANDARD
<b>PRODUCT OFFERINGS</b>		
<b>Benefit Percentage</b>	40%, 50%, 60%, or 66 2/3% <u>VLTD</u> : Standard 60%. Optional 40% or 50%	60%
<b>Maximum Monthly Benefit</b>	\$6,000 quoted standard. Options available up to \$15,000 <u>VLTD</u> : Standard \$6,000. Optional up to \$10,000	\$7,500
<b>Minimum Monthly Benefit</b>	\$100 quoted standard. Options include greater of 10% of primary monthly benefit or \$50	\$7,500
<b>Elimination Period</b>	180 days. Options available from 2 to 12 months, or 60 to 365 days. <u>VLTD</u> : Options from 3 to 12 months, or 90 to 365 days	60, 90 or 180 days
<b>Definition of Disability</b>	2-year Own Occupation with Zero-Day Residual. Options include Total, Partial, or Total with Social Security Approval Own Occupation Period: None, 1, 3, or 5 years, or end of benefit duration <u>VLTD Optional</u> : Own Occ Period: None, 1, 3, or 5 years, end of benefit duration	36 months Own Occupation with Zero-Day Residual.
<b>Benefit Duration</b>	Reducing Benefit Duration (RBD). Options include 2 year, 5 year, 65/5/70 or to SSNRA.	Social Security Normal Retirement Age
<b>Benefit Integration</b>	Direct - Full Family. Options include Direct - Primary only 70%, All Sources - Full Family.	Full family social security
<b>Pre-Existing Conditions</b>	3/12 months. Options include 6/12, 6/24, 12/12, 3/3/12, 3/6/12, 6/12/24, or 24/24 <u>VLTD</u> : 6/12 months. Optional 12/12 or 24/24	12/12
<b>Mental Nervous / Substance Abuse</b>	24 months. Options include 12 or 36 months; same as any other disability also available with alcohol abuse limitation <u>VLTD</u> : 24 months. Optional 12 months.	Up to 24 months of benefits if not hospital confined
<b>ELIGIBILITY</b>		
<b>Group Size</b>	3+ employees. Must be in business at least 2 years.	SmartChoice 2-19. Must be in business at least 1 year. Some industries ineligible. Firms not participating in Social Security, and firms with employees residing on employer's premises are ineligible.
<b>Stand-Alone</b>	Available with 5+ EEs. 3-4 must be alongside other coverage.	Yes
<b>Rate Guarantee</b>	2 years. 1 or 3 year options available.	36 months.
<b>Admin Fee</b>	None.	\$5 per month for electronic billing, or \$12 per month for paper billing. (Groups enrolling in dental must elect paper billing)
<b>Contribution</b>	Options available for 100% employer paid and contributory.	Employer may contribute from 0-100% of the premium.
<b>Participation</b>	75% of eligible. 100% required if 100% contribution.	2 eligible: 100% of eligible. 3-5 eligible: All but one must enroll. 6-9 eligible: All but two must enroll. 10-19 eligible: 75% must enroll. Part-time EEs working 20-30 hours/week may be included if less than 25% of total eligible. If employer contributes 100% then 100% participation is required. Carve-outs permitted, must have 2 EEs enrolled within a class.
<b>Voluntary Participation</b>	The greater of 20% of eligible or 5 enrolled.	All plans may be 100% EE paid, full participation must still be met.
<b>Out-of-State</b>	No restrictions.	No restrictions.



	UNITEDHEALTHCARE	UNUM
<b>PRODUCT OFFERINGS</b>		
<b>Benefit Percentage</b>	50%, 60%, or 66.67%	50%, 60%, 66.667%
<b>Maximum Monthly Benefit</b>	2-9 eligible: \$1,500 to \$5,000 in \$500 increments. 10-99 eligible: \$1,500 to \$10,000 in \$500 increments. Benefit maximums based on the average of the top two employees' salaries for groups 2-9, or top three employees' salaries for groups 10-99, or the selected benefit maximum (whichever is less).	Up to \$35,000 determined by employee earnings
<b>Minimum Monthly Benefit</b>	\$1,500	10% or \$100
<b>Elimination Period</b>	90 days or 180 days.	30, 60, 90, 120, 180, 360 days (90 and 180 are most common)
<b>Definition of Disability</b>	24 months own occupation/Residual. Extended own occupation to age 65/Residual (restricted to business professionals who are salaried office employees with annual earnings of \$100,000 or more, excluding bonuses, overtime and other extra compensation)	2 year Own Occ, Own Occ to 65, partial and residual available
<b>Benefit Duration</b>	2-9 eligible: Two years, five years or reducing benefit duration with SSNRA (SSNRA not available for monthly benefit amounts over \$3,000) 10-99 eligible: Two years, five years or reducing benefit duration with SSNRA	To Social Security Normal Retirement Age
<b>Benefit Integration</b>	Primary only	SSI, SSDI
<b>Pre-Existing Conditions</b>	3/12, 12/6/24 or 12/24	3/12 standard
<b>Mental Nervous / Substance Abuse</b>	24 months lifetime maximum	12 month mental nervous standard
<b>ELIGIBILITY</b>		
<b>Group Size</b>	2-99 employees. Must be in business for a minimum of 2 years (1 year if premier or preferred industry), and must not contain more than 50% immediate family members.	2+
<b>Stand-Alone</b>	Yes for groups with 51-99 employees. Groups with 2-50 employees must purchase LTD alongside another ancillary benefit (ex: dental, vision, life, or STD).	Yes
<b>Rate Guarantee</b>	2 years	2 years standard, 3 years available
<b>Admin Fee</b>	None.	None
<b>Contribution</b>	2-9 eligible: 100% 10-99 eligible: Minimum 25% for contributory. No minimum for voluntary.	Employer funded and employee funded available
<b>Participation</b>	2-9 eligible: 100% 10-99 eligible: Minimum 50%. If 100% employer paid then 100% participation is required.	100%. Carve-out options available. Carveouts cannot be discriminatory.
<b>Voluntary Participation</b>	Available to groups with 10+ eligible. Minimum 25% participation.	Greater of 20% or 10 lives
<b>Out-of-State</b>	No restrictions	No restrictions.

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