



Group Disability Insurance

Short Term Disability

SUMMARY OF BENEFITS

Class 1

Sponsored By: Idaho AGC Health Benefit Plan
Effective Date: January 1, 2020
Policy Number: 01-018070-00

The information in this summary may be replaced by any subsequently issued summary or policy amendment.

Benefit Highlights:

Benefits:

Core plan \$125 per week
Buy-up plan Additional \$200 per week

Minimum Benefit Amount \$15

Maximum Payment Duration 13 weeks

Elimination Period Accident - 14 days
Sickness - 14 days
(number of days you must be disabled to collect disability benefits)

Accumulation of Elimination Days You can satisfy the days of your elimination period with either total (off work entirely) or partial (working some hours at your current job) disability.

Eligibility

All Full-Time Employees Participating in the Idaho AGC Sponsored Medical Plan earning a minimum of \$26,000 or more Annually and electing the \$200 Buy Up working a minimum of 30 hours per week.

New Hire: Enroll within 31 days after becoming eligible under The Policy without Evidence of insurability.

Late Entrant: You will need to provide Evidence of Insurability if you apply for coverage more than 31 days after the date you are first eligible to apply.

Standard Provisions:

- Maternity is covered the same as any other condition.
- Non Occupational
- 14 days recurrent disability/temporary recovery

Contact Information for Claims

Phone: 1-877-377-6773

Fax: 1-877-737-3650

Symetra Life Insurance Company
Life and Absence Management Center
P.O. Box 1230
Enfield, CT 06083-1230

Costs for Buy Up Short Term Disability coverage

Monthly costs:

| AGE | Monthly Cost |
|-------------|---------------------|
| Under 45 | \$3.20 |
| 45 - 49 | \$4.10 |
| 50 - 54 | \$4.78 |
| 55 - 59 | \$5.80 |
| 60 and over | \$7.00 |

Insured by Symetra Life Insurance Company

This summary provides only a brief description of the Disability Income Insurance coverage insured by Symetra Life Insurance Company under the GDC 4000 series Group Disability Income Insurance policy. For a complete description, including all definitions, exclusions, limitations, and reductions in coverage, as well as information on termination of benefits, please contact your benefit administrator or refer to the Group Insurance Certificate you will receive when you become insured. Coverage will be offered under Group Policy number 01-018070-00. All benefits are subject to the terms and conditions of the Group Policy. If there is a difference between the information in this summary and the information contained in the Group Insurance Certificate, the terms of the Group Insurance Certificate will prevail. The terms of coverage may change over time; always refer to your current Group Insurance Certificate for information regarding your insurance benefits.

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