EXHIBIT "A"

# City of Round Rock LTD PROPOSED RATES

	Number of	Annual Covered	Rate per \$100 of	Proposed Annual
Coverage	Lives	Payroll	covered payroll	Premium
Long Term Disability	894	\$52,607,928	\$0.140	\$73,651

Rate Guarantee: 36 months Total Annual Premium \$73,651



# **City of Round Rock**

# Group Long Term Disability Insurance PLAN DESIGN

**Date:** June 08, 2018

Presented by: Ochs, Inc., A Securian Company

**Underwritten by:** Madison National Life Insurance Company, Inc.

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# **PLAN DETAILS**

# **Group Long Term Disability**

Summary	Definition	
Effective Date	January 01, 2019	
Class Definitions	Class 01: All Eligible Employees	
EligibilityRequirements	30 hours per week	
Funding	100% Employer Paid	

# **LONG TERM DISABILITY**

# **Plan Design Description**

Summary	Definition	
LTD Benefit	60%	
Guarantee Issue	\$5,000	
Maximum Monthly Covered Salary	\$8,333	
Maximum Monthly Benefit	\$5,000	
Continuity of Coverage	Included	
Subrogation	Included	
Elimination Period	180 consecutive calendar days	
Maximum Benefit Period	To SSNRA, 12 month minimum	
Own Occupation Period	24 months following the end of the Elimination Period	
Definition of Disability	Zero Day; Partial Disability from Date of Disability	
Own Occ / Any Occ Earnings Threshold	80%/80% of Predisability earnings	
Work Incentive	First 12 months of Disability with Work Earnings	
Calculation Method	Direct Offset	
Freeze	General Freeze	
Integration with State Plan	Yes	
Require Application for State Plan	Yes	
Mental Disorder Limitation	24 months per Occurrence unless hospital confined, with recovery	
Substance Abuse Limitation	Same as Mental Disorder Limitation	
Other Income Integration	Social Security – Full Family Sick Pay – Direct Offset State Plan – Direct Offset Worker's Compensation – Direct Offset	
Cumulative Elimination Period	30 Working Days	
Pre-Existing Condition Exclusion	3 months/12 months	
Minimum Participation	100%	
Leave of Absence Coverage	FMLA; Illness or Injury: 12 months	
Rehabilitation	Applies	
Survivor Benefit	3 x Gross Monthly Benefit	

### SERVICES INCLUDED

# **Waiver of Premium Payment**

When a disabled employee begins drawing benefits, all further insurance premium payments for that individual will be waived during disability.

# Flexible Billing

Self-bill and list-bill options are available. Payments can be made on a monthly basis by multiplying the total covered payroll for the month by the rate indicated on this proposal.

# **Claims Management**

Madison National Life understands that a disability may not only be stressful for an employee and his or her family, but also for the employer. So, even though it's not part of an insurance policy, we believe part of our job is to reduce the stress associated with a disabling illness or injury. In coordination with our carrier partners, we employ the following methods for handling claims and assisting a successful return-to-work.

- One point of contact most groups assigned one claim specialist
- Expedited answers most calls returned in 24 hours or less
- Rehabilitation intervention vocational and site-modification programs
- Patient advocacy helps restore patient's outlook and manage disability
- Social Security and State Disability plan assistance
- Contact with claimant at certain milestones depending upon illness or injury

# Claim payment method

School groups may choose to have benefits paid on a daily compensation basis. If elected, teachers and other "contract day" employees will have their annual pay divided by the number of contract working days to determine a daily benefit. For "non-contract day" employees, the claimant's annual pay will be divided by the number of months which is closest to his or her actual work year.

# **FICA Tax Savings**

Madison National Life Insurance will pay the employer's portion of FICA withholding and release the employer from 941 and W-2 reporting requirements. MNL does not require reimbursement from the employer.

# **KEY DEFINITIONS AND PROVISIONS**

# **Employee Eligibility**

To be eligible for insurance, the Candidate must be an Employee who works for the Employer as a member of an Eligible Class who is reported on the Employer's records for Social Security and tax withholding purposes. He or she must be a citizen or legal resident of the United States or Canada, and must reside in the United States or Canada. The Candidate must be Actively at Work and capable of sustained Active Work on the effective date of his/her coverage and must be meeting the Minimum Hour Requirement. The Candidate cannot be a full-time member of the armed forces of any country, leased employee or independent contractor and must satisfy his/her Waiting Period.

### When LTD Benefits End

An Insured Person's LTD Benefits end automatically on the earliest of the following:

- The date he or she is no longer Disabled;
- The date his or her Maximum Benefit Period ends;
- The date he or she dies:
- The date he or she becomes eligible for coverage under any other group LTD plan obtained through employment;
- The date he or she fails to provide satisfactory objective medical evidence of continued Disability;
- The date he or she fails to comply with the Insurer's request to be examined by a Physician, other medical practitioner and/or a vocational or rehabilitation expert of the Insurer's choice;
- The date he or she refuses to accept an accommodated position, offered by the Employer, which he or she is able to perform, whether it is in the Insured Person's Own Occupation or Any Occupation;
- The date at which he or she has resided outside of the United States or Canada for 6 months;
- The date that he or she is confined in a penal or correctional institution or under house arrest;
- The date that he or she fails to comply with any requirements set forth in Section XIX, Responsibilities of Disabled Insureds.
- The date that he or she is able to work and earn the amount noted in the Earnings Threshold (outlined in the Plan Details section of this Proposal), but chooses not to.

### **Maximum Benefit Period**

### Class 01:

Age at Disablement	Benefit Duration*
61 or younger	to age 65
62	3-1/2 years
63	3 years
64	2-1/2 years
65	2 years
66	1-3/4 years
67	1-1/2 years
68	1-1/4 years
69 or older	1 year

<sup>\*</sup>To the later of: 1) the specified length of time as stated above, or 2) the day before attaining the Social Security Normal Retirement Age under the United States Social Security Act, as revised.

# **Income That Reduces Disability Payments**

Disability income from the Social Security Administration, any State Disability Plan and other deductible sources of income will be deducted from the insured's income for purposes of calculating benefits unless otherwise stated in the Plan Details section of this proposal. After the first deduction for Social Security benefits, the monthly benefit will not be further reduced due to any cost of living increase payable under Social Security benefits.

If the insured is eligible for Social Security Disability benefits, but chooses instead to receive Social Security Retirement benefits, this plan will estimate the amount of the eligible Social Security Disability benefit and reduce the gross Long-Term Disability benefit with the estimated amount.

# **Income That Does Not Reduce Disability Payments**

This policy will not deduct individual disability insurance benefits, accelerated benefits under a life insurance policy, group credit or mortgage disability insurance benefits, or deferred compensation from the insured's income for the purpose of calculating benefits. Also, the insured's benefit payments will not be reduced by income earned through an occupation held in addition to the own occupation prior to becoming disabled, unless that income exceeds the amount earned immediately prior to disablement

# **Definition of Disability**

Disability or Disabled means that during the Elimination Period and the Own Occupation Period the Insured is, as a result of Physical Disease, Injury, Mental Disorder, Substance Abuse or Pregnancy, unable to perform one or more of the Material Duties of his or her Own Occupation, and, due to such inability, their Work Earnings are less than 80% of their Indexed Predisability Earnings, and he or she is incapable of earning 80% or more of their Indexed Predisability Earnings.

After the Own Occupation Period ends, Disability and Disabled means the Insured is, as a result of Physical Disease, Injury, Mental Disorder, Substance Abuse or Pregnancy, unable to perform one or more of the Material Duties of Any Occupation, and, due to such inability, their Work Earnings are less than 80% of their Indexed Predisability Earnings, and he or she is incapable of earning 80% or more of their Indexed Predisability Earnings.

### **Exclusions**

Disabilities which are caused by or which the following contributed to are not covered by this plan:

- War or any act of war, declared or undeclared
- Active participation in a violent disorder or riot
- Commission of, or attempt to commit, any crime or while engaging in an illegal activity
- Intentionally self-inflicted injury or attempted suicide
- During military leave in the armed forces of any state or country
- No disability benefits will be paid while confined in a penal/correctional institution or under house arrest
- Motor-driven Vehicle in a race, stunt show, or speed test; or while testing any vehicle on any racecourse or speedway

# **Pre-Existing Conditions**

The Insured is not covered for a Disability caused or contributed to by a Pre-existing Condition or medical or surgical treatment of a Pre-existing Condition unless he/she has been continuously insured under the Group Policy for at least 12 months.

If the Insured is not covered for a Disability because of the Pre-existing Condition exclusion for his/her current LTD coverage, he/she is not covered for that same Disability for any LTD coverage increase because of an Eligible Class or Group Policy change.

**Pre-existing Condition** means a mental or physical condition whether or not diagnosed or misdiagnosed for which the Insured has consulted a Physician or other licensed medical professional, received medical treatment, services or advice, undergone diagnostic procedures, including self-administered procedures, or taken prescribed drugs or medications at any time during the 3 months period just before the effective date of the Insured's insurance under the Group Policy or the effective date of the LTD coverage increase.

### Limitations

**Mental Disorders and Substance Abuse.** LTD Benefit payments based on a Mental Disorder or Substance Abuse are limited to 24 months for each period of continuous Disability. This is not a separate maximum for each such condition, but a combined maximum for Mental Disorders or Substance Abuse, either separate or combined.

If Disability is caused by Substance Abuse, the Insured must be participating in an available rehabilitative program recommended by a Physician. An available rehabilitative program is a Substance Abuse program available to the Insured through either: (i) another group plan of the employer (such as an Employee Assistance Program or Medical Plan); or (ii) services generally available to the public through local community services at no or minimal cost to the Insured. Except as otherwise provided for below, LTD benefits will not be made beyond the earlier of the following:

- the date on which LTD Benefits have been paid for the maximum duration specified in subsections A1 and A3 or under the Maximum Benefit Period;
- the date the Insured are no longer participating in the rehabilitative program;
- the date the Insured refuses to participate in an available rehabilitative program; or
- the date the Insured completes the rehabilitative program.

If at the end of that 24 month period, the Insured is confined in a Hospital, or other facility qualified to provide necessary care and treatment for Mental Disorders or Substance Abuse, for at least 30 days immediately following that 24 month period, LTD Benefits will continue for up to an additional 90 consecutive days following the date confinement ends, not to exceed the Maximum Benefit Period.

**Foreign Residency.** Payment of LTD Benefits is limited to 6 months for each period of continuous Disability while the Insured resides outside of the United States or Canada.

**Payment Limit.** In no event will the LTD Benefit plus Deductible Income plus Work Earnings exceed 100% of Predisability Earnings. In the event the Insured's LTD Benefit plus Deductible Income plus Work Earnings exceeds 100% of Predisability Earnings, the LTD Benefit will be reduced by the amount in excess of 100% of Predisability Earnings, subject to the Minimum Monthly Benefit.

This proposal is a brief description of Long Term Disability insurance for informational purposes only and is subject to the definitions, limitations, and exclusions as provided in the Group Long Term Disability insurance policy GLDI-P200-(12/06) or Certificate GLDI-C200-(12/06). For a copy of these documents, please ask your sales representative.

# City of Round Rock STD PROPOSED RATES

**Current Benefits - With Telephonic Claims** 

	Number of	Weekly Benefit	Rate per \$10 of	Proposed Annual
Coverage	Lives	Volume	Weekly Benefit	Premium
Short Term Disability	199	\$126,938	\$0.34	\$51,791

Rate Guarantee: 24 months Total Annual Premium \$51,791

Please note, STD is only available as a package with LTD

Please note, a 20% minimum participation is required in order to offer/maintain coverage



# **City of Round Rock**

# Group Short Term Disability Insurance PLAN DESIGN

**Date:** June 15, 2018

Presented by: Ochs, Inc., A Securian Company

**Underwritten by:** Madison National Life Insurance Company, Inc.

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# **PLAN DETAILS**

# **Group Short Term Disability**

Summary	Definition	
Effective Date	January 01, 2019	
Class Definitions	Class 01: All Eligible Employees	
Eligibility Requirements	30 hours per week	
Funding	0% Employer Paid	

# **SHORT TERM DISABILITY**

# **Plan Design Description**

Summary	Definition	
Weekly STD Benefit	60%	
Guarantee Issue	\$1,000	
Maximum Weekly Benefit	\$1,000	
Minimum Weekly Benefit	None	
Injury Elimination Period	14 days	
Physical Disease Elimination Period	14 days	
24 Hour Coverage	No; Non-Occupational Only	
Benefit Payment Period	Commencing at the end of the Elimination Period and continuing for the lesser of 26 weeks or until LTD Benefits become payable	
Definition of Disability	Zero Day; Partial Disability from Date of Disability	
Own Occupation Period	Duration of Benefits	
Earnings Threshold	80%	
Recurrent Disability	30 days	
Calculation Method	Direct	
Freeze	General Freeze	
Other Income Integration	Social Security – Full Family Sick Pay – Direct Offset State Plan – Direct Offset Worker's Compensation – Direct Offset	
Pre-Existing Condition Exclusion	3 months/12 months	
Mental Disorder, Substance Abuse, Special Conditions	Covered Same as any Physical Disease	
Leaves and Sabbaticals	FMLA; Illness or Injury: 12 months	
Minimum Participation	20%	

### SERVICES INCLUDED

# Flexible Billing

Self-bill and list-bill options are available. Payments can be made on a monthly basis by multiplying the total covered payroll for the month by the rate indicated on this proposal.

# **Claims Management**

Madison National Life understands that a disability may not only be stressful for an employee and his or her family, but also for the employer. So, even though it's not part of an insurance policy, we believe part of our job is to reduce the stress associated with a disabling illness or injury. In coordination with our carrier partners, we employ the following methods for handling claims and assisting a successful return-to-work.

- One point of contact most groups assigned one claim specialist
- Expedited answers most calls returned in 24 hours or less
- Rehabilitation intervention vocational and site-modification programs
- Patient advocacy helps restore patient's outlook and manage disability
- Social Security and State Disability plan assistance
- Contact with claimant at certain milestones depending upon illness or injury

# Claim payment method

School groups may choose to have benefits paid on a daily compensation basis. If elected, teachers and other "contract day" employees will have their annual pay divided by the number of contract working days to determine a daily benefit. For "non-contract day" employees, the claimant's annual pay will be divided by the number of months which is closest to his or her actual work year.

### **FICA Tax Administration**

Madison National Life Insurance will pay the employer's portion of FICA withholding and release the employer from 941 and W-2 reporting requirements. MNL will invoice the employer for reimbursement of the FICA tax expenses.

### **KEY DEFINITIONS AND PROVISIONS**

# **Employee Eligibility**

To be eligible for insurance, the Candidate must be an Employee who works for the Employer as a member of an Eligible Class who is reported on the Employer's records for Social Security and tax withholding purposes. He or she must be a citizen or legal resident of the United States or Canada, and must reside in the United States or Canada. The Candidate must be Actively at Work and capable of sustained Active Work on the effective date of his/her coverage and must be meeting the Minimum Hour Requirement. The Candidate cannot be a full-time member of the armed forces of any country, leased employee or independent contractor and must satisfy his/her Waiting Period.

### When STD Benefits End

An Insured Person's STD Benefits end automatically on the earliest of the following:

- The date he or she is no longer Disabled;
- The date his or her Maximum Benefit Period ends;
- The date that group long term disability benefits become payable to him or her;
- The date he or she dies;
- The date he or she becomes eligible for coverage under any other group STD plan obtained through employment;
- The date he or she fails to provide satisfactory objective medical evidence of continued Disability:
- The date he or she fails to comply with the Insurer's request to be examined by a Physician, other medical practitioner and/or a vocational or rehabilitation expert of the Insurer's choice;
- The date he or she refuses to accept an accommodated position, offered by the Employer, which he or she is able to perform, whether it is in the Insured Person's Own Occupation or Any Occupation;
- The date at which he or she has resided outside of the United States or Canada for 6 months;
- The date that he or she is confined in a penal or correctional institution or under house arrest;
- The date that he or she fails to comply with any requirements set forth in Section XIX, Responsibilities of Disabled Insureds.
- The date that he or she is able to work and earn the amount noted in the Earnings Threshold (outlined in the Plan Details section of this Proposal), but chooses not to.

# **Income That Reduces Disability Payments**

Disability income from the Social Security Administration, any State Disability Plan and other deductible sources of income will be deducted from the insured's income for purposes of calculating benefits unless otherwise stated in the Plan Details section of this proposal. After the first deduction for Social Security benefits, the monthly benefit will not be further reduced due to any cost of living increase payable under Social Security benefits.

If the insured is eligible for Social Security Disability benefits, but chooses instead to receive Social Security Retirement benefits, this plan will estimate the amount of the eligible Social Security Disability benefit and reduce the gross Long-Term Disability benefit with the estimated amount.

# **Income That Does Not Reduce Disability Payments**

This policy will not deduct individual disability insurance benefits, accelerated benefits under a life insurance policy, group credit or mortgage disability insurance benefits, or deferred compensation from the insured's income for the purpose of calculating benefits. Also, the insured's benefit payments will not be reduced by income earned through an occupation held in addition to the own occupation prior to becoming disabled, unless that income exceeds the amount earned immediately prior to disablement.

# **Termination provisions**

The Insurer may terminate coverage as follows:

- If a premium payment is not received by the due date or grace period.
- If the number of people insured is less than the minimum participation number or percentage.
- If the employer fails to promptly furnish any requested information or fails to perform any other obligations relating to the group policy.
- By giving the employer at least 60 days advance written notice or on the date that the employer breaches any part of the contract.

The Employer may terminate coverage under the group policy by giving the insurer at least 31 days written notice. The effective date of termination will be the date stated in the notice or the next payment due date, whichever date is later.

An Insured Person's Insurance, Subject to the When Your Insurance Ends provision found within the Certificate, will cease on the earliest of the following to occur:

- the date the Employer's coverage under the Group Policy terminates;
- the date he or she ceases to be an Eligible Person;
- the date that premium payment is not paid when required;
- his or her Retirement Date.

# **Changes in Premium Rates**

Premium rates will not be changed during the initial rate guarantee period except if any of the following occur:

- A change or clarification in a law or governmental regulation affects the amount payable under the Group Policy. Any such change in premium rates will reflect only the change in the Insurer's obligations.
- Factors material to the underwriting risk the Insurer assumed under the Group Policy with respect to an Employer, including, but not limited to, the number of persons insured, age, Predisability Earnings, gender and occupational classification change significantly.
- The premium contribution arrangement for insured employees is changed or varies from that provided for under the Group Policy when issued or last renewed.
- Plan design changes are requested by the Employer.
- The Insurer and the Employer mutually agree to change premium rates.

# **Definition of Disability**

During the Elimination Period and the Benefit Payment Period, Disability or Disabled means that the Insured is, as a result of Physical Disease, Injury, Pregnancy or Mental Disorder, unable to perform one or more of the Material Duties of his or her Own Occupation, and, due to such inability, their Work Earnings are less than {not set}% of their Predisability Earnings, and he or she is incapable of earning {not set}% or more of their Predisability Earnings.

### **Exclusions**

Disabilities which are caused by or which the following contributed to are not covered by this plan:

- War or any act of war, declared or undeclared
- Active participation in a violent disorder or riot
- Commission of, or attempt to commit, any crime or while engaging in an illegal activity
- Intentionally self-inflicted injury or attempted suicide
- > During military leave in the armed forces of any state or country, or while imprisoned
- Occupational Disability. Insureds are not covered for a disability arising out of or in the course of any employment for wage or profit. Insured is not covered for any Disability for which Worker's Compensation benefits are payable.
- Motor-driven Vehicle in a race, stunt show, or speed test; or while testing any vehicle on any racecourse or speedway

# **Pre-Existing Conditions**

The Insured is not covered for a Disability caused or contributed to by a Pre-existing Condition or medical or surgical treatment of a Pre-existing Condition unless he/she has been continuously insured under the Group Policy for at least 12 months.

If the Insured is not covered for a Disability because of the Pre-existing Condition exclusion for his/her current STD coverage, he/she is not covered for that same Disability for any STD coverage increase because of an Eligible Class or Group Policy change.

STD coverage increase because of an Eligible Class or Group Policy change. The Insured is not covered for a Disability caused or contributed to by a Pre-existing Condition or medical or surgical treatment of a Pre-existing Condition unless he/she has been continuously insured under the Group Policy for at least 12 months from the effective date of the STD coverage increase

**Pre-existing Condition** means a mental or physical condition whether or not diagnosed or misdiagnosed for which the Insured has consulted a Physician or other licensed medical professional, received medical treatment, services or advice, undergone diagnostic procedures, including self-administered procedures, or taken prescribed drugs or medications at any time during the 3 months period just before the effective date of the Insured's insurance under the Group Policy or the effective date of the STD coverage increase.

### Limitations

**Foreign Residency.** Payment of STD Benefits is limited to 6 months for each period of continuous Disability while the Insured resides outside of the United States or Canada.

**Payment Limit.** In no event will the STD Benefit plus Deductible Income plus Work Earnings exceed 100% of Predisability Earnings. In the event the Insured's STD Benefit plus Deductible Income plus Work Earnings exceeds 100% of Predisability Earnings, the STD Benefit will be reduced by the amount in excess of 100% of Predisability Earnings, subject to the Minimum Monthly Benefit.

This proposal is a brief description of Short Term Disability insurance for informational purposes only and is subject to the definitions, limitations, and exclusions as provided in the Group Short Term Disability insurance policy GSDI-P200-(12/06) or Certificate GSDI-C200-(12/06). For a copy of these documents, please ask your sales representative.