New York State Teamsters Council Health & Hospital Fund

Disability Benefits

Effective October 1, 2016

Your Funds......Working For You

DISABILITY BENEFITS

New York State Teamsters Short-Term Disability Benefits provide benefits when you are unable to work due to an illness, injury, or disease **that is not related to your job.** If you are under a doctor's care, and your disability prevents you from working your normal work week schedule, this benefit will provide you with income. The short-term disability benefits are insured and administered by The Union Labor Life Insurance Company ("Union Labor Life") under a contract between Union Labor Life and the New York State Teamsters Council Health and Hospital Fund.

WHEN YOU BECOME ELIGIBLE

You will become eligible for benefits on:

- 1. The first day of absence caused by an accident; or
- 2. The eighth day of disability due to an illness. If your illness lasts more than eight weeks, benefits will be paid from the first day of disability.

BENEFITS

Option 1:

Your level of benefits will be based on: 50% of your average weekly earnings to a maximum of \$300.00 per week

Option 2:

Your level of benefits will be based on: 50% of your average weekly earnings to a maximum of \$230.00 per week

The Benefit Option that applies to you is determined by the contribution rate paid to the Fund and the Benefit Selection Form signed by your employer and your local union. If you have any questions concerning the Benefit Option that applies to you, you may contact the Fund Office.

MAXIMUM PERIOD OF BENEFITS

The Plan provides benefits for up to 26 weeks for any one period of disability in a 52-week period. All periods of disability are considered to be the same period of disability, unless you return to work for at least **two (2)** full weeks between disabilities.

HOW TO FILE A CLAIM

Required Information:

Certain information is required in order to initiate your Short-Term Disability claim. Before starting the process be sure you have the following information:

- Date last worked
- Commencement date of disability
- Cause/details of disability
- Employer, including supervisor, contact information (name, address, phone and/or fax numbers)
- Listing of all pertinent physicians and hospitals (name, address, phone and/or fax numbers)
- If claim is work related, Workers Compensation information (name, address, phone and/or fax numbers of carrier and details regarding claim)

To initiate a disability claim, you should contact Union Labor Life at the following toll free number:

1-888-855-4261 8:00 am to4:00 pm, Eastern Standard Time (Monday through Friday) Fax: 1-860-769-6986

The claims staff will advise you of the claim process once the initial claim notification is received.

Action Taken:

When you contact the Union Labor Life, a representative requests the necessary information to initiate your claim. The representative will also contact your physician for medical information and your employer for average weekly earnings and work schedule required to process your claim.

Your doctor may be contacted to provide periodic medical information to substantiate your continuing disability. When this is required, you will be so advised.

The current mailing addresses:

Home Office Address: The Union Labor Life Insurance Company 8403 Colesville Road Silver Spring, Maryland 20910

Claims Office Address:
The Union Labor Life Insurance Company
P.O. Box 49
Bloomfiled, Connecticut 06002

Filing Limit:

Section 217 of the Disability Law requires that all claims for disability must be filed with the disability carrier within **thirty** (30) days after the commencement of disability. If your disability is not filed within the required period, the payment of benefits will begin **two** (2) weeks prior to the date that the required claim information is received.

Payments:

Disability payments are normally issued weekly once your claim for disability has been established. If you have any questions concerning your disability claim you should contact **Union Labor Life at 1-888-855-4261.**

EXCLUSIONS

Payments cannot be made under the Disability Benefits Program for:

- 1. Any period of disability that you were not under the care of a doctor.
- 2. Any disability that is the result of an intentional self-inflicted injury or illness.
- **3.** Any injury or illness caused or sustained while perpetrating an illegal act.
- **4.** Any disability due to an act of war, whether declared or undeclared.
- 5. Any period of disability that is work related or is covered by Workers' Compensation or other similar laws.

FUTURE OF THE PLAN

It is hoped that This Plan will be continued indefinitely, but New York State Teamsters Council Health & Hospital Fund reserves the right to change or terminate This Plan in the future. Any such action would be taken only after careful consideration.

The Board of Trustees of the New York State Teamsters Council Health & Hospital Fund shall be empowered to amend or terminate This Plan or any benefit under This Plan at any time.

As noted, the short-term disability benefits summarized in this document are provided through a group insurance policy issued by The Union Labor Life Insurance Company. As such, in the event that this document conflicts with the actual benefits provided by the group insurance policy, the group insurance policy shall control.