



Prudential

SUMMARY OF BENEFITS

Radiology Partners, Inc.

All Austin Radiology Association Teammates Earning \$130,000 or Less

Short Term Disability, and Long Term Disability

Issued by **The Prudential Insurance Company of America**

SHORT TERM DISABILITY

100% Employee Paid

- ▶ Your weekly Short Term Disability benefit will be 60% of your weekly pre-disability earnings, up to the maximum of \$1,200, less deductible sources of income. No medical questions asked - if enrolling when first eligible. The minimum weekly benefit is \$25.
- ▶ Deductible sources of income may include benefits from statutory plans and salary continuation.
- ▶ If you meet the definition of disability, your benefits will begin on the 15th day following a non-occupational injury or the 15th day following a non-occupational sickness. The benefit duration is 11 weeks. You are considered disabled when, because of injury or sickness, you are under the regular care of the doctor, are unable to perform the material and substantial duties of your regular occupation and your disability results in a loss of weekly income of at least 20%.
- ▶ STD benefits will not be paid for a disability that begins within 12 months of your coverage effective date and is due to a pre-existing condition. A pre-existing condition is an injury or sickness for which you received medical treatment, consultation, diagnostic measures, prescribed drugs or medicines, or for which you followed treatment recommendations during the 3 months prior to your effective date of coverage.
- ▶ You are not covered for a disability caused by war or any act of war, declared or undeclared, an intentionally self-inflicted injury, active participation in a riot, and commission of a crime for which you have been convicted. Benefits are not payable for any period of incarceration as a result of a conviction.

LONG TERM DISABILITY

100% Employer Paid

- ▶ Your monthly Long Term Disability benefit will be 60% of your monthly pre-disability earnings, up to the maximum of \$6,500, less deductible sources of income. The minimum monthly benefit is the greater of \$100 or 10% of your gross monthly benefit.
- ▶ Deductible sources of income may include benefits from statutory plans, Social Security to you and your dependents, workers' compensation, unemployment income and other income.
- ▶ If you meet the definition of disability, your benefits will begin 90 days following an accidental injury or sickness. The benefit duration is up to your normal retirement age under the Social Security Act. However, if you become disabled at or after age 65 benefits are payable according to an age-based schedule. Refer to the Booklet-Certificate for details.
- ▶ You are considered disabled when, because of injury or sickness, you are under the regular care of a doctor, you are unable to perform the material and substantial duties of your regular occupation and your disability results in a loss of income of at least 20%. After receiving benefits for 24 months, you are considered disabled when, due to the same sickness or injury, you are unable to perform the material and substantial duties of any gainful occupation for which you are reasonably fitted by education, training or experience, and disability results in a loss of income of a specified percentage determined by your plan.
- ▶ Disabilities due to mental illness are limited to 24 months of benefits during your lifetime. Examples of mental illness include schizophrenia, depression, manic depressive or bipolar illness, anxiety, somatization, substance related disorders (including drug and alcohol abuse), and/or adjustment disorders. Disabilities due to mental illness have a combined limited pay period during your lifetime.
- ▶ LTD benefits will not be paid for a disability that begins within 12 months of coverage effective date and is due to a pre-existing condition. A pre-existing condition is an injury or sickness for which you received medical treatment, consultation, diagnostic measures, prescribed drugs or medicines, or for which you followed treatment recommendations during the 3 months prior to your effective date of coverage.
- ▶ During the first 12 months of part-time work while disabled, you can receive full benefits as long as your combined income and disability benefits do not exceed your monthly pre-disability earnings.
- ▶ If you die while collecting disability benefits, a lump sum payment may be paid to your eligible survivors.
- ▶ You are not covered for a disability caused by war or any act of war, declared or undeclared, an intentionally self-inflicted injury, active participation in a riot, and commission of a crime for which you have been convicted. Benefits are not payable for any period of incarceration as a result of a conviction.

Implementation of the insurance plan(s) will depend on having a specific percentage of all eligible employees enrolling in the plan(s). If this percentage of enrollment level is not met, these coverage(s) may not be effective.

Benefits, exclusions and provisions may vary by state. Refer to the plan booklet for details.

For your coverage to become effective, you must be actively at work on the effective date of the plan. If you apply for an amount that requires satisfactory evidence of insurability to The Prudential Insurance Company of America, you must be actively at work on the date of approval for the amount requiring satisfactory evidence of insurability.

Group Insurance coverages are issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. Contract Series: 83500

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RATE SHEET

Radiology Partners, Inc.

All Austin Radiology Association Teammates Earning \$130,000 or Less

Issued by **The Prudential Insurance Company of America (Prudential)**

Effective: 01/01/2022

“HOW MUCH DOES SHORT TERM DISABILITY COST?”

SHORT TERM DISABILITY - TEAMMATES MONTHLY COST PER COVERAGE AMOUNT

Use the chart below to find the cost of Short Term Disability insurance. If your salary is not noted, follow the steps below. Your maximum weekly benefit amount is up to \$1,200. All salaries of \$104,000 and above have a monthly cost of \$66.00.

Annual Income	Weekly Benefit	STD Cost	Annual Income	Weekly Benefit	STD Cost
\$12,000.00	\$138.46	\$7.62	\$55,000.00	\$634.62	\$34.90
\$13,000.00	\$150.00	\$8.25	\$60,000.00	\$692.31	\$38.08
\$14,000.00	\$161.54	\$8.88	\$65,000.00	\$750.00	\$41.25
\$15,000.00	\$173.08	\$9.52	\$70,000.00	\$807.69	\$44.42
\$20,000.00	\$230.77	\$12.69	\$75,000.00	\$865.38	\$47.60
\$25,000.00	\$288.46	\$15.87	\$80,000.00	\$923.08	\$50.77
\$30,000.00	\$346.15	\$19.04	\$85,000.00	\$980.77	\$53.94
\$35,000.00	\$403.85	\$22.21	\$90,000.00	\$1,038.46	\$57.12
\$40,000.00	\$461.54	\$25.38	\$95,000.00	\$1,096.15	\$60.29
\$45,000.00	\$519.23	\$28.56	\$100,000.00	\$1,153.85	\$63.46
\$50,000.00	\$576.92	\$31.73	\$104,000.00	\$1,200.00	\$66.00

Rates may change if plan experience requires a change for all insureds.

HOW TO CALCULATE YOUR TOTAL STD MONTHLY COST

Step 1	Indicate your weekly earnings.	= \$
Step 2	Multiply your weekly earnings by 60%	= \$
Step 3	If the amount in Step 2 is greater than \$1,200, indicate \$1,200. Otherwise, indicate the amount from Step 2.	= \$
Step 4	Multiply the amount in Step 3 by the rate of \$0.055 to obtain your total STD monthly cost.	= \$

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