



**Washington State  
Council of Fire Fighters**



**WSCFF Life & Disability Program - Plan 1A Benefit Summary**

**Life/AD&D, Short and Long Term Disability Insurance**

*Standard Policy #771100*

**Effective 1/1/2017**

For copies of policy certificates and/or help filing a claim, please contact DiMartino Associates.

Phone 206/623-2430 or toll-free at 800/488-8277

**Basic Term Life Insurance**

<b>Employee Basic Life Benefit</b>	\$15,000; paid to your beneficiary if you die for any reason
<b>Dependent Life Benefit—Spouse and Dependent Child to age 26</b>	\$1,000; paid to you if your spouse or dependent child die for any reason
<b>Benefit Reduction Schedule</b>	Amount your benefit reduces to if you are still working: 50% @ age 70, 40% @ age 75 and 20% @ age 80+
<b>Waiver of Premium</b>	Your Basic Life insurance will continue without payment of premiums while on Long Term Disability with The Standard; must be disabled prior to age 60
<b>Accelerated Death Benefit</b>	You may be eligible to receive an accelerated benefit of 75% to a maximum of \$500,000 of your Basic Life insurance if you have a qualifying medical condition; must be under age 60 to qualify
<b>Portability</b>	Employee and covered dependents may port Basic Life insurance until age 70; see Portability rates inside Policy Certificate
<b>Conversion</b>	Included. Member may convert to a whole life policy upon termination; subject to market rates

## Basic Accident Insurance

<b>Employee Basic AD&amp;D Benefit</b>	\$15,000; paid to your beneficiary if you die as a result of an accident; partial benefit paid for certain dismemberments. See schedule of Coverage.
<b><u>Schedule of Coverage</u></b>	
<b>Loss of one hand or one foot</b>	50% of Principal Amount
<b>Loss of sight in one eye, speech or hearing in both ears</b>	50% of Principal Amount
<b>Two or more of the above losses</b>	100% of Principal Amount
<b>Thumb &amp; index finger on same hand</b>	25% of Principal Amount
<b>Quadriplegia</b>	100% of Principal Amount
<b>Paraplegia</b>	50% of Principal Amount
<b>Hemiplegia</b>	50% of Principal Amount
	<i>Refer to Policy Booklet for full Schedule of Coverage</i>
<b>Benefit Reduction Schedule</b>	Amount your benefit reduces to if you are still working: 50% @ age 70, 40% @ age 75 and 20% @ age 80
<b>Additional Benefits:</b>	
<b>Child Care Benefit</b>	The total child care expense incurred by your Spouse within 36 months after the date of your death for all children under age 13, but not to exceed \$5,000 per year or the cumulative total of \$10,000 or 25% of the AD&D benefit, whichever is less
<b>Public transportation Benefit</b>	The lesser of (1) \$200,000 or (2) 100% of the AD&D benefit otherwise payable for the loss of your life
<b>Occupational Assault Benefit</b>	The lesser of (1) \$25,000 or (2) 50% of the AD&D benefit otherwise payable for the loss of your life
<b>Line of Duty Benefit</b>	Additional 100% of Principal Amount payable upon receipt of due proof that covered person, while serving in the Line of Duty, suffers a covered loss that results directly and independently of all other causes from a covered accident
<b>Seat Belt Benefit</b>	The lesser of (1) \$10,000 or (2) the amount of AD&D benefit otherwise payable for the loss of your life
<b>Higher Education Benefit</b>	The tuition expenses for training incurred by your spouse within 36 months after the date of your death, exclusive of room and board, but not to exceed \$5,000 per year, or the cumulative total of \$10,000 or 25% of the AD&D benefit, whichever is less

## Short Term Disability Insurance

<b>Benefit Waiting Period</b>	30 Days for Accident ; 30 Days for Sickness <i>Number of calendar days you must be disabled before a benefit is payable</i>
<b>Maximum Benefit Duration</b>	180 days
<b>Weekly Benefit—Off Duty</b>	60% of Covered Earnings; maximum \$1,385/week
<b>Weekly Benefit—On Duty</b>	\$100/week
<b>Minimum Benefit</b>	\$15/week
<b>Partial Disability</b>	If you return to work on light/modified duty, your claim may remain open so long as you are unable to perform your normal full duty occupation as a result of your disability. Work earnings plus benefit may not exceed 100% of your pre-disability earnings
<b>Deductible Income</b>	Your benefit will be reduced by certain other income you are receiving from other sources: Work Earnings, Sick Leave, LEOFF/PERS Retirement Benefits, Worker's Compensation, Other Group Disability Benefits. See Policy Certificate for full list of Deductible Income sources.
<b>Sick Leave Buy Back / 100% Backdoor Integration</b>	<b>Optional Benefit - Must elect on Master Participation Agreement.</b> Sick Leave Buy Back, disability check must be credited to sick leave bank. If doing Backdoor Integration, total income may not exceed 100% of pre-disability earnings.
<b>Pre-Existing Condition Limitation</b>	None
<b>Taxation of Benefit</b>	If monthly STD premiums are paid with post-tax dollars, the STD benefit will be tax-free to the member. If premiums are paid pre-tax, the benefit will be taxable.

## Long Term Disability Insurance

<b>Benefit Waiting Period</b>	180 days <i>Number of calendar days you must be disabled before a benefit is payable; LTD is payable immediately following the end of STD benefits</i>
<b>Maximum Benefit Duration</b>	To age 62
<b>Monthly Benefit</b>	60% of Covered Earnings; maximum \$6,000/month
<b>Minimum Benefit</b>	\$100/month

## Long Term Disability Insurance

<b>Definition of Disability</b>	<p>24 month Own Occupation; followed by Any Occupation for the remainder of the benefit period</p> <p><b>Own Occupation Period:</b> For the first 24 months of your long term disability, you are disabled if you are unable to perform the material duties of your “own” occupation.</p> <p><b>Any Occupation Period:</b> After 24 months, you are disabled if you are unable to perform the material duties of “any” occupation which you are reasonably suited for, based on education or experience, and at which you can be expected to earn at least 60% of what you were making prior to becoming disabled</p>
<b>Deductible Income</b>	<p>Your benefit will be reduced by certain other income you are receiving from other sources: Work Earnings, Sick Leave, LEOFF/PERS Retirement Benefits, Worker's Compensation, Other Group Disability Benefits. See Policy Certificate for full list of Deductible Income sources</p>
<b>LEOFF Integration</b>	<p>For the first 12 months that you are receiving your LEOFF or PERS retirement benefit, you may keep up to 100% of pre-disability earnings between the two. <b>After 12 months</b>, your LTD benefit is reduced by the amount you receive in LEOFF or PERS benefits, dollar for dollar.</p>
<b>Sick Leave Buy Back / 100% Backdoor integration</b>	<p><b>Optional Benefit - Must elect on Master Participation Agreement.</b> The Standard will not offset sick leave. If doing Sick Leave Buy Back, disability check must be credited to sick leave bank. If doing Backdoor Integration, total income may not exceed 100% of pre-disability earnings</p>
<b>Pre-Existing Condition Limitation</b>	<p>3 month look back / 3 month symptom free / 12 months insured</p>
<b>Mental Illness/Substance Abuse Limitation</b>	<p>24 months per incident benefit for disabilities arising from a mental illness or from substance abuse</p>
<b>Subjective Condition Limitation</b>	<p>24 months per incident for disabilities arising from a musculoskeletal issue or other subjective condition. See Policy Certificate for more information.</p>
<b>Taxation of Benefit</b>	<p>If monthly LTD premiums are paid with post-tax dollars, the LTD benefit will be tax-free to the member. If premiums are paid pre-tax, the benefit will be taxable.</p>

*This benefit summary is only a summary of the benefits and not intended to replace the specifics of the Plan Contract. If there is a discrepancy, the Plan Contract will supersede this summary.*