

SHORT TERM DISABILITY (WEEKLY INCOME) BENEFITS

Introduction In general, if you become Disabled while eligible under the Plan, you are entitled to a Weekly Income Benefit of one hundred twenty-five dollars (\$125), after completing a Benefit Waiting Period, for the duration of your Disability up to a maximum of twenty-six (26) weeks, subject to the provisions of this Part.

Disability For purposes of this Part, “Disabled” and “Disability” means:

- (a) you are unable to perform the essential duties of your regular occupation or a reasonable employment option offered to you by the Fund,
- (b) because of a change in your functional capacity to work due to sickness or accidental injury,
- (c) and, as a result, you are unable to earn more than 80% of your basic weekly earnings,
- (d) and, you are receiving regular and appropriate care.

“**Essential duties**” are duties that are normally required for the performance of an occupation as it is normally performed in the national economy and which cannot be reasonably omitted or modified.

“**Regular occupation**” means the work that you were performing immediately prior to your sickness or accidental injury and for which contributions were made to the Fund. “**Sickness**” means any physical illness, mental disorder, normal pregnancy or complication of pregnancy. “**Accidental injury**” means bodily injury resulting from a sudden, violent, unexpected and external event, as well an infection resulting from a cut or wound caused by an accident. Accidental injury does not include any other type of infection, poisoning, or disease. “**Regular and appropriate care**” means:

- (1) you personally visit a doctor as often as is medically required consistent with generally accepted medical standards to effectively manage and treat your sickness or injury,
- (2) you are receiving care that conforms to generally accepted medical standards for treating your sickness or injury,
- (3) the care is rendered by a doctor whose specialty or experience is the most appropriate for your sickness or injury according to generally accepted medical standards, and
- (4) you are receiving or actively seeking appropriate physical or psychological rehabilitative services.

Benefit Waiting Period The Benefit Waiting Period is the seven(7) day period that you must be continuously disabled before you can qualify to receive any benefits. You must complete the Benefit Waiting Period before any benefits are payable.

- (a) Exception: you may return to work for up to five (5) days during the Benefit Waiting Period without having to begin a new Benefit Waiting Period. The days you work (and are, therefore, not disabled) do not count toward meeting the Benefit Waiting Period requirement, however.
- (b) The Benefit Waiting Period begins on the first day that you see a doctor and the doctor states in writing that your are disabled because of sickness or accidental injury. 9.4: Benefit The benefit is one hundred twenty-five dollars (\$125) per week. The benefit is paid at the end of each week for the period

during which you are Disabled following the Benefit Waiting Period up to the maximum period for which benefits are payable (twenty-six (26) weeks).

Exclusions: No benefit is payable if your Disability results from: (a) sickness or injury that occurs in any armed conflict, whether or not a declared war; (b) sickness or injury that occurs while you are in the military service for any country; (c) intentionally self-inflicted injury or illness, whether you are sane or insane; (d) injury that occurs while you are committing or attempting to commit a felony; (e) injury suffered during a fight in which you were the aggressor; (f) sickness or injury due to cosmetic or reconstructive surgery, except for surgery necessary to correct a deformity caused by sickness or accidental injury; (g) sickness or accidental injury for which you had or have a right to payment under workers compensation law or similar law; or (h) sickness or accidental injury arising out of or in the course of work for pay, profit or gain. No benefits are payable for any period of Disability during which you are confined to a penal or correctional facility as a result of conviction for a criminal or other public offense. No additional benefit is payable if the Disability is caused by multiple sicknesses and/or accidental injuries.

Benefits are not automatically payable. You must submit written notice of disability to the Fund Administrator as soon as reasonably possible and normally within twenty (20) days after you become disabled.

(a) Upon receipt of the notice, the Fund Administrator will send to you a claim form. You will have to complete the claim form and return it to the Fund Administrator as soon as possible but no later than ninety (90) days after you are disabled. No benefit is payable unless the claim form is completed and submitted to the Fund Administrator.

(b) The Fund Administrator or the Fund's insurer may require additional information to prove your claim for benefits. In addition, you may be required to submit to examination by one or more doctors or vocational experts of the Fund's or insurer's choosing if the Fund or the insurer reasonably believes it necessary to properly evaluate your claim or potential for rehabilitation. Failure to cooperate with such an examination may result in the denial, loss, deferral or suspension of Benefits.