



IBEW Local 9 Summary of Rates

224-770-5305
www.uniondisability.com

For quick and easy enrollment, call Cornerstone at 224-770-5305 (M-F 8am-5pm CST)

LAST DAY TO ENROLL IS 9/15/2019

Short-Term Disability (STD)

- Benefit pays on day 15 for up to 11 weeks
- STD Option A pays a flat weekly benefit of \$250 or \$500
- STD Option B pays a weekly benefit of 50% of pre-disability earnings
- Pre-existing conditions are covered after 12 months
- Covers off the job disabilities resulting from injury or illness
- Stackable with other benefits up to 100% of pre-disability earnings
- Benefits paid are tax free

Long-Term Disability (LTD)

- Pays after 90 day waiting period (starts when STD ends)
- LTD Option A pays a flat \$2,500 monthly benefit for up to 5 years
- LTD Option B pays a monthly benefit of 60% of your pre-disability earnings for up to 10 years
- Pre-existing conditions are covered after 12 months
- Covers on and off the job disabilities resulting from injury or illness
- Offset by other benefits
- Benefits paid are tax free
- Includes 24 months of own occupation coverage

Life and Accidental Death & Dismemberment (AD&D)

- Guaranteed approved coverage for member, spouse, and children - NO pre-existing condition limitations
 - All life coverage includes an equal amount of AD&D. If death is caused by an accident, benefit doubles
- Member coverage from \$50,000-\$250,000 (in \$50,000 increments)
 - Spousal and child coverage is available when member life coverage is elected
- Spousal coverage of \$25,000 or \$50,000, not to exceed 500% of member election
- Child(ren) eligible for a flat \$10,000 of coverage - All eligible children are covered for \$3.23 per month
- Life coverage is convertible & portable

Please Note: Life/AD&D guaranteed amounts may be lower or not offered at future open enrollments for those members that do not enroll initially

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Resumen completo de los beneficios y tarifas disonibles en español en www.uniondisability.com

See reverse for more information →

Short-Term Disability (STD)

STD Option A - Flat Rate Benefit	
\$250 Weekly Benefit	\$500 Weekly Benefit
\$21.03	\$37.00

STD Option B - 50% of Weekly Income		
Salary	Weekly Benefit	Monthly Premium
\$60,000	\$576.92	\$36.75
\$70,000	\$673.08	\$42.38
\$80,000	\$769.23	\$48.00
\$90,000	\$865.38	\$53.63
\$100,000	\$961.54	\$59.25
\$110,000	\$1,057.69	\$64.88
\$120,000	\$1,153.85	\$70.50

Long-Term Disability (LTD)

Option A - Pays a Flat Monthly Benefit of \$2,000 for up to 5 Years					
Monthly Benefit	0 - 29	30 - 39	40 - 49	50 - 59	60 - 69
\$2,500	\$7.48	\$14.90	\$25.10	\$43.60	\$47.43

* Benefit cannot exceed 60% of your monthly earnings

Option B - Pays 60% of Your Earnings for up to 10 Years						
Annual Earnings	Monthly Benefit	0 - 29	30 - 39	40 - 49	50 - 59	60 - 69
\$60,000	\$3,000	\$9.24	\$19.89	\$34.20	\$60.21	\$65.70
\$70,000	\$3,500	\$10.28	\$22.71	\$39.40	\$69.75	\$76.15
\$80,000	\$4,000	\$11.32	\$25.52	\$44.60	\$79.28	\$86.60
\$90,000	\$4,500	\$12.36	\$28.34	\$49.80	\$88.82	\$97.05
\$100,000	\$5,000	\$13.40	\$31.15	\$55.00	\$98.35	\$107.50
\$110,000	\$5,500	\$14.44	\$33.97	\$60.20	\$107.89	\$117.95
\$120,000	\$6,000	\$15.48	\$36.78	\$65.40	\$117.42	\$128.40

* Annual Earnings include your total compensation for the year including overtime

* Call 224-770-5305 to get premiums for annual earnings amounts not listed above

* Benefits are subject to offsets

Calculate Your Monthly Premium

Short-Term Disability:	\$
Long-Term Disability:	\$
Life/AD&D:	Member: \$
	Spouse: \$
	Child: \$
Processing Fee:	\$1.00
Total Monthly Premium:	\$

Life and Accidental Death & Dismemberment (AD&D)

Benefit and Monthly Premium					
Benefit	0 - 29	30 - 39	40 - 49	50 - 59	60 - 69
Member Monthly Premium Can be elected in increments of \$50,000					
\$50,000	\$9.35	\$10.50	\$16.65	\$38.90	\$69.85
\$100,000	\$16.70	\$19.00	\$31.30	\$75.80	\$137.70
\$150,000	\$24.05	\$27.50	\$45.95	\$112.70	\$205.55
\$200,000	\$31.40	\$36.00	\$60.60	\$149.60	\$273.40
\$250,000	\$38.75	\$44.50	\$75.25	\$186.50	\$341.25
Spouse Monthly Premium Spouse Premiums Based on Member Age • Can't exceed 100% of Member Life					
\$25,000	\$5.30	\$5.88	\$8.95	\$20.08	\$35.55
\$50,000	\$8.60	\$9.75	\$15.90	\$38.15	\$69.10
Child(ren)/Dependent(s) Monthly Premium					
\$10,000	All children covered at one cost of \$3.23				

IMPORTANT NOTE:

If you leave the union or retire it is your responsibility to contact our office immediately at (847) 387-3555, and failure to do so within 30 days will forfeit your ability to keep coverage and receive any premium refunds. Premium is determined by your age on the coverage effective date, and will increase on the next policy anniversary date after you enter the next age band. Benefit effective dates are subject to change. The IBEW does not make any endorsement or recommendations regarding these benefits. This program is voluntary and it is solely the members' decision to enroll. This is a basic summary of benefits and makes no guarantee or warranty on the processing of claims. Other limitations may apply. It is recommended that each enrolled member obtain a copy and read the entire policy booklet. All non-banking administrative and transaction fees are included in the enclosed premiums.

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Accident

- No pre-existing condition limitations
- 24/7 on and off the job coverage
- Lump sum benefits paid directly to the member
- Wellness Benefit for covered preventative screening
- Covers accidental injuries including: fractures, burns, lacerations, etc.
- Covers medical treatment including: ER visits, X-Rays, appliances, follow-up visits, etc.

Options and Rates	
Coverage	Monthly Premium
Member	\$18.79
Member & Spouse	\$31.03
Member & Child	\$42.12
Family	\$54.35

Critical Illness

- Lump sum benefits paid directly to the member for these Critical Health Events:
 - Heart Attack, Cancer, Stroke, Coronary Artery Bypass, Organ Transplant, End-Stage Renal Failure
- Members can elect \$20,000 or \$10,000 Benefit
- Spouse can be covered at 50% of Member Benefit
- Dependent children covered at 50% of Member at no additional cost
- Includes a \$50 Health Screening Benefit
- Rates are locked in at the age you enroll

\$5,000 Benefit	
Age	Monthly Premium
18-29	\$5.63
30-39	\$7.21
40-49	\$10.94
50-59	\$18.29
60+	\$31.62

\$10,000 Benefit	
Age	Monthly Premium
18-29	\$7.74
30-39	\$10.91
40-49	\$18.36
50-59	\$33.06
60+	\$59.73

\$20,000 Benefit	
Age	Monthly Premium
18-29	\$11.95
30-39	\$18.29
40-49	\$33.20
50-59	\$62.60
60+	\$115.94

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