



Everyone deserves  
 a better Tomorrow.  
 TransDI® Plus for New York,  
 short-term disability income insurance  
 that pays you benefits if you get  
 sick or hurt and can't work.

Income Replacement. Simply put, TransDI Plus for New York helps replace up to 50% of your salary if you are unable to work due to total or partial disability. Benefit amounts are available in \$100 increments, enabling you to select the benefit appropriate for your needs.

**Accelerated Disability Benefit for Terminal Illness Rider (Form Series FRDITI00)**

If you are diagnosed with a terminal illness by a physician on or after the effective date of the rider, that based on his or her best judgment, you have 12 months or less to live, we will advance the remaining months of payments up to 12 months of monthly disability benefits. This benefit will be payable only once.

**Waiver of Premium Provision**

TransDI Plus for New York's waiver of premium provision goes even further to help ease the financial burden of becoming totally disabled. You do not have to pay the premiums after 90 consecutive days of total disability or satisfaction of the elimination period whichever is later. Refer to the policy provisions for limitations.

**Partial Disability Benefit Provision**

If, after being totally disabled, you are able to return to work, but only on a limited basis, you're still protected. We will pay up to 50% of the monthly benefit amount beginning the first day following the end of the total disability assuming the partial disability is due to the same accident or sickness that caused the total disability.

**Mental Illness Limited Benefit**

If you are totally disabled due to a mental illness resulting from psychiatric or psychological conditions, we will pay disability benefits for 1/2 the maximum sickness benefit period and includes any alcohol and drug addiction.

**Easy and Convenient**

- TransDI Plus for New York may be available to you by answering just a few health questions.
- No physical exams or blood tests are required.
- The ease of payroll deduction makes paying for your TransDI Plus for New York policy worry-free.

Product Highlights
Income Protection for up to 50% of your salary
Elimination period, and monthly benefits that fit your needs
Waiver of Premium for Total Disability
Partial Disability Benefits

## Guaranteed Renewable To Age 65

You have the right to renew the Policy until the first premium due date on or after your 65th birthday as long as you pay the correct premium when due or within the grace period.

## Benefits Available

Your employer has established the benefits for TransDI Plus for New York. You must meet the requirements for the policy in order to qualify for this insurance. TransDI Plus for New York has three elements:

- **Elimination Period** — After you become disabled, there's a short waiting period before your benefits begin.
- **Monthly Benefits** — While you're totally disabled, you'll receive a fixed monthly income benefit that will not exceed 50% of your monthly salary. Periods of disability of less than one month will be paid at 1/30th the monthly benefit for each day of total disability.
- **Benefit Period** — Monthly benefits are payable up to a fixed period of time—generally one year or less. Ask your employer about your specific elimination period, monthly benefits, and benefit period.

## Policy Provisions

### Eligibility

Insurance is available to all active employees working 20 hours or more per week as a full-time employee who qualify as “eligible employees” as defined by your employer.

### Effective Date of Insurance

Insurance will become effective on the date shown on the policy data page, provided the first premium has been paid. You must be on active service on the date your insurance becomes effective; otherwise, the insurance will become effective on the first of the month following the date you resume active service. Active service means that you are doing all of the regular duties of your employment in the usual manner, on a full-time basis on a scheduled work day, or would be able to do so if it were a scheduled work day.

### Disability Benefits

Disability benefits will be paid if you become totally disabled as defined in the policy. Total disability must be due to a covered accident or sickness; and begin while your insurance is in force.

We will pay benefits for each period of total disability that continues beyond the elimination period. We will not pay benefits beyond the maximum disability period stated on the contract data page. If any monthly benefit is to be paid for less than a full month, the amount of benefit will be reduced pro-rata on the basis of one day's benefit equals 1/30th of the disability benefit. We will pay the disability benefit only for a period in which you are under the regular care and attendance of a physician.

Disability benefits will be paid for only one disability when more than one disability exists at the same time; or a disability results from two or more causes. Total disability will be deemed to have commenced on the date you first received treatment from a physician following continuous cessation of work.

### Pregnancy Benefits

Total disability resulting from pregnancy or child birth pays benefits the same as any covered sickness or Injury when such total disability begins after this policy has been in effect for a period of 10 months or more from the effective date. However, this provision does not apply to complications of pregnancy. For total disability resulting from complications of pregnancy, we do not require that the policy be in effect for a period of 10 months or more from the effective date.

### Geographical Limitations

If you become disabled outside the United States or its territories, disability benefit payments will be limited to two months. To continue to receive any additional benefit payments, You must reside in the United States or its territories.

### Reduction in Benefits

If total disability occurs for which benefits are paid to the insured by a state or Federal Worker's Compensation Program, Employee's Liability or Occupational Disease Law, we will only pay 40% of the benefit due.

### Subsequent Disabilities

Separate periods of disability resulting from unrelated conditions are considered a continuation of the previous disability, not a new disability, unless they are separated by at least seven calendar days, during which time you returned to work.

### Successive Disabilities

Those disabilities which result from the same or related causes for which benefits are payable under the policy. Successive disabilities will be considered one period of disability unless the disabilities are separated by your return to active service for at least 90 days; or any other occupation for at least 90 consecutive days. Any disability which begins after termination of insurance will not be considered a successive disability; and will not be insured under the policy.

### Maximum Benefit Period When You Attain Age 65

If you are totally disabled when you attain age 65 and we have paid monthly benefits for less than the maximum benefit period for such total disability, we will continue to pay a monthly benefit during the period you remain totally disabled for the balance of the maximum benefit period that began prior to the date your insurance would normally have ended.

### Waiver of Premium Provision

If you become totally disabled due to a covered accident or sickness, your insurance will be continued without payment of premium the first of the month following the later of your satisfaction of the Elimination Period or 90 days of continuous total disability. Premiums must be paid from the beginning of the total disability to the date the Waiver of Premium begins. Waiver of Premium will continue until the earliest of:

- the end of your total disability;
- the end of the maximum benefit period;
- the end of the period for which benefits would otherwise be payable or
- the date the insurance terminates. The insurer may require proof on a periodic basis that you remained disabled during said period.

### Partial Disability Benefit

Partial Disability Benefit will be paid if you become partially disabled due to a covered accident or sickness.

Payment of the partial disability benefit is subject to the following conditions:

- You must satisfy the elimination period for total disability.
- Partial disability benefits will be payable beginning the first day following cessation of total disability.
- The partial disability must be the result of the same accident or sickness which caused total disability.
- The partial disability benefit will be payable for a maximum period of six consecutive months. However, the combined period of time for which benefits are payable for total disability and partial disability may not exceed the maximum disability period stated on the contract data page.
- The partial disability benefit will be equal to 50% of the disability benefit. However, the sum of the partial disability benefit, the salary earned while receiving partial disability benefits and income from all other sources may not exceed 100% of your pre-disability monthly compensation. In this event, the minimum disability benefit, if any, stated on the contract data page will not be payable.

### Termination of Benefits

Benefits will automatically end on the earliest of the following:

- You are no longer totally disabled;
- You fail to provide satisfactory proof of continuing total disability when requested;
- You continue to be totally disabled beyond the maximum disability period shown on the contract data page; or
- Your death.

### Pre-Existing Condition Limitation

Benefits will not be paid for disability or loss that starts within 12 months of the effective date if disability is caused by a Pre-existing condition as defined in the policy.

### Pre-Existing Conditions

A Pre-existing condition is defined as a sickness or physical condition for which:

- The existence of symptoms which would ordinarily cause a prudent person to seek diagnosis, care or treatment within a 12-month period preceding the effective date of the policy; or
- A condition for which medical advice or treatment was recommended by a physician or received from a physician within a 12-month period preceding the effective date of the policy.

## **Exclusions**

The policy does not pay benefits for any loss, fatal or non-fatal, which occurs as a result of:

- Attempted suicide or an intentionally self-inflicted injury while sane;
- War or any act of war, declared or undeclared;
- Your commission of or attempt to commit a felony or engagement in an illegal occupation; or your participation in a riot or insurrection;
- Aviation, except as a fare-paying passenger on a scheduled or chartered flight operated by a scheduled airline;
- An accident or sickness for which benefits are actually paid by any state or Federal workers' compensation, employers' liability or occupational disease law;
- An accident sustained or sickness contracted while in the service of the armed forces of any country or any auxiliary units of same; or
- Your being intoxicated or under the influence of any narcotic unless administered on the advice of a physician.

## **Termination of Policy**

The Insured's insurance will end at 12:01 AM on the earliest of these dates:

- The end of the last period for which premium has been paid, subject to the grace period;
- The date you terminate the policy;
- The policy anniversary following your 65th birthday; or
- Your death.

Termination of your insurance under the policy will have no effect on payment of benefits which begins before your insurance terminates.

**Up to date information regarding our compensation practices can be found in the Disclosures section of our website: [www.tebcs.com](http://www.tebcs.com).**

This is a brief summary of TransDI Plus for New York Voluntary Short-Term Disability Income Insurance. Policy form series FPIDI100; Rider forms series FRDITI00. Limitations and exclusions may apply. Refer to the policy, certificate and riders for complete details.

## Product Details

### Plan Option 1 Weekly Premium Class A Rates

Benefit Period: 6 Months  
 Accident Elimination Period: 14 Days  
 Sickness Elimination Period: 14 Days

Rates include the following optional rider:  
 Accelerated Disability Benefit for Terminal Illness Rider

Monthly Benefit*	Age 18-49	Age 50-59	Age 60+	Monthly Benefit*	Age 18-49	Age 50-59	Age 60+
\$300	\$2.50	\$2.94	\$4.05	\$2,700	\$14.80	\$18.78	\$28.75
\$400	\$3.01	\$3.60	\$5.08	\$2,800	\$15.31	\$19.44	\$29.78
\$500	\$3.53	\$4.26	\$6.11	\$2,900	\$15.82	\$20.10	\$30.81
\$600	\$4.04	\$4.92	\$7.14	\$3,000	\$16.33	\$20.76	\$31.84
\$700	\$4.55	\$5.58	\$8.17	\$3,100	\$16.85	\$21.42	\$32.87
\$800	\$5.06	\$6.24	\$9.20	\$3,200	\$17.36	\$22.08	\$33.90
\$900	\$5.58	\$6.90	\$10.23	\$3,300	\$17.87	\$22.74	\$34.93
\$1,000	\$6.09	\$7.56	\$11.26	\$3,400	\$18.38	\$23.40	\$35.96
\$1,100	\$6.60	\$8.22	\$12.29	\$3,500	\$18.90	\$24.06	\$36.99
\$1,200	\$7.11	\$8.88	\$13.32	\$3,600	\$19.41	\$24.72	\$38.02
\$1,300	\$7.62	\$9.54	\$14.34	\$3,700	\$19.92	\$25.38	\$39.05
\$1,400	\$8.14	\$10.20	\$15.37	\$3,800	\$20.43	\$26.04	\$40.08
\$1,500	\$8.65	\$10.86	\$16.40	\$3,900	\$20.94	\$26.70	\$41.10
\$1,600	\$9.16	\$11.52	\$17.43	\$4,000	\$21.46	\$27.36	\$42.13
\$1,700	\$9.67	\$12.18	\$18.46	\$4,100	\$21.97	\$28.02	\$43.16
\$1,800	\$10.19	\$12.84	\$19.49	\$4,200	\$22.48	\$28.68	\$44.19
\$1,900	\$10.70	\$13.50	\$20.52	\$4,300	\$22.99	\$29.34	\$45.22
\$2,000	\$11.21	\$14.16	\$21.55	\$4,400	\$23.51	\$30.00	\$46.25
\$2,100	\$11.72	\$14.82	\$22.58	\$4,500	\$24.02	\$30.66	\$47.28
\$2,200	\$12.24	\$15.48	\$23.61	\$4,600	\$24.53	\$31.32	\$48.31
\$2,300	\$12.75	\$16.14	\$24.64	\$4,700	\$25.04	\$31.98	\$49.34
\$2,400	\$13.26	\$16.80	\$25.67	\$4,800	\$25.56	\$32.64	\$50.37
\$2,500	\$13.77	\$17.46	\$26.70	\$4,900	\$26.07	\$33.30	\$51.40
\$2,600	\$14.28	\$18.12	\$27.72	\$5,000	\$26.58	\$33.96	\$52.43

\*Monthly benefit cannot exceed 50% of monthly compensation

Issue State: New York  
 Rate generation date: November 2, 2016

## Product Details

### Plan Option 2 Weekly Premium Class A Rates

Benefit Period: 12 Months  
 Accident Elimination Period: 14 Days  
 Sickness Elimination Period: 14 Days

Rates include the following optional rider:  
 Accelerated Disability Benefit for Terminal Illness Rider

Monthly Benefit*	Age 18-49	Age 50-59	Age 60+	Monthly Benefit*	Age 18-49	Age 50-59	Age 60+
\$300	\$3.15	\$3.76	\$5.28	\$2,700	\$20.65	\$26.14	\$39.84
\$400	\$3.88	\$4.69	\$6.72	\$2,800	\$21.38	\$27.07	\$41.28
\$500	\$4.61	\$5.63	\$8.16	\$2,900	\$22.11	\$28.00	\$42.72
\$600	\$5.34	\$6.56	\$9.60	\$3,000	\$22.84	\$28.93	\$44.16
\$700	\$6.07	\$7.49	\$11.04	\$3,100	\$23.57	\$29.87	\$45.60
\$800	\$6.80	\$8.42	\$12.48	\$3,200	\$24.30	\$30.80	\$47.04
\$900	\$7.53	\$9.36	\$13.92	\$3,300	\$25.03	\$31.73	\$48.48
\$1,000	\$8.26	\$10.29	\$15.36	\$3,400	\$25.76	\$32.66	\$49.92
\$1,100	\$8.99	\$11.22	\$16.80	\$3,500	\$26.49	\$33.60	\$51.36
\$1,200	\$9.72	\$12.15	\$18.24	\$3,600	\$27.22	\$34.53	\$52.80
\$1,300	\$10.44	\$13.08	\$19.68	\$3,700	\$27.95	\$35.46	\$54.24
\$1,400	\$11.17	\$14.02	\$21.12	\$3,800	\$28.68	\$36.39	\$55.68
\$1,500	\$11.90	\$14.95	\$22.56	\$3,900	\$29.40	\$37.32	\$57.12
\$1,600	\$12.63	\$15.88	\$24.00	\$4,000	\$30.13	\$38.26	\$58.56
\$1,700	\$13.36	\$16.81	\$25.44	\$4,100	\$30.86	\$39.19	\$60.00
\$1,800	\$14.09	\$17.75	\$26.88	\$4,200	\$31.59	\$40.12	\$61.44
\$1,900	\$14.82	\$18.68	\$28.32	\$4,300	\$32.32	\$41.05	\$62.88
\$2,000	\$15.55	\$19.61	\$29.76	\$4,400	\$33.05	\$41.99	\$64.32
\$2,100	\$16.28	\$20.54	\$31.20	\$4,500	\$33.78	\$42.92	\$65.76
\$2,200	\$17.01	\$21.48	\$32.64	\$4,600	\$34.51	\$43.85	\$67.20
\$2,300	\$17.74	\$22.41	\$34.08	\$4,700	\$35.24	\$44.78	\$68.64
\$2,400	\$18.47	\$23.34	\$35.52	\$4,800	\$35.97	\$45.72	\$70.08
\$2,500	\$19.20	\$24.27	\$36.96	\$4,900	\$36.70	\$46.65	\$71.52
\$2,600	\$19.92	\$25.20	\$38.40	\$5,000	\$37.43	\$47.58	\$72.96

\*Monthly benefit cannot exceed 50% of monthly compensation

Issue State: New York  
 Rate generation date: November 2, 2016

## Summary of Benefits

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**Monthly Disability Benefit** - Pays the selected benefit amount each month that an insured is totally disabled, not to exceed the monthly benefit percent shown on the Product Details page. Benefits do not begin until the applicable **Elimination Period** has been satisfied. Periods of disability lasting less than one month will be paid at 1/30th of the monthly benefit for each day of total disability. Benefits will stop once total disability ends or the end of the **Benefit Period**, whichever occurs first.

**Waiver of Premium Provision** - Premiums will be waived once an insured employee has been totally disabled for 90 days or met the elimination period, whichever is later. Premiums must continue to be paid until the waiver begins.

**Partial Disability Benefit** - Pays 50% of the Monthly Disability Benefit for up to 6 months when an insured employee returns to work on a limited basis following a total disability, assuming the partial disability is due to the same reason as the total disability.

**Accelerated Disability Benefit for Terminal Illness Rider** (*Rider Form Series FRDIT100*) - Advances up to 12 months of Monthly Disability Benefits if the insured is diagnosed by a physician, on or after the effective date, as having a terminal illness.

## Limitations and Exclusions

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### Exclusions

The policy does not pay benefits for any loss, fatal or non-fatal, which results from:

- attempted suicide or an intentionally self-inflicted injury while sane;
- war or any act of war, whether declared or undeclared;
- accident sustained or sickness contracted while in the service of the armed forces of any country or any auxiliary units of same;
- commission of or attempt to commit a felony or engagement in an illegal occupation; or the insureds participation in a riot or insurrection;
- aviation, except as a fare-paying passenger on a scheduled or chartered flight operated by a scheduled airline;
- accident or sickness for which benefits are actually paid by any state or federal worker's compensation, employer's liability or occupational disease law.
- being intoxicated or under the influence of any narcotic unless administered on the advice of a physician.

### Pre-Existing Conditions

There will be no disability benefit payable for a pre-existing condition until the insured has been continuously insured under the Policy for 12 consecutive months and has returned to performing the duties of his or her occupation for 30 continuous days after the first 12 months of insurance.

Benefits will not be paid for disability or loss that starts within 12 months of the effective date if disability is caused by a Pre-Existing condition.

"Pre-Existing condition" means a condition for which medical advice or treatment was recommended by a physician or received from a physician within a 12-month period preceding the effective date of this policy or the existence of symptoms which would ordinarily cause a prudent person to seek diagnosis, care or treatment within a 12-month period preceding the effective date of this policy;

### Termination of Insurance

The insured's insurance coverage will end on the earliest of these dates:

- the end of the last period for which premium has been paid, subject to the grace period;
- the date the insured terminates the policy;
- the policy anniversary following the insured's 65th birthday; or
- the date of his or her death.

### Other Insurance with Us

An individual can only have one disability income policy or certificate with us. If a person already has disability income insurance with us, such person is not eligible to apply for this insurance.