



**National Society of  
Professional Engineers®**



*Added Benefits of Your  
**Long-Term Disability  
Income Insurance***



# More Disability Benefits To Help Make Your Coverage Even More Powerful

## Partial Disability Benefit

If you return to work after a covered disability that began before age 65, you may be entitled to a Partial Disability Benefit if:

1. A disability benefit was paid, and
2. You did not receive benefits for the full maximum period applicable to the disability, and
3. Your current average earnings after the disability ends are less than 80 percent of your pre-disability average earnings, and
4. You are under the regular care of a physician.

The Partial Disability Benefit will be paid for as long as your monthly earnings do not exceed 80 percent of your pre-disability monthly pay while you're partially disabled, you're eligible for Total Disability Benefits, or until you return to work in a new occupation.

## Rehabilitation Benefit

This feature can pay the expenses of a personalized rehabilitation program, including the cost of retraining, job placement, medical assessment, and modifications to your practice. The Monthly Benefit Amount we will pay will be equal to the Insured Person's Accident and Sickness Total Disability Monthly Benefit Amount, less 50 percent of any income received from the Rehabilitative Employment.

## Waiver of Premium

Your coverage will remain in effect without premium payments after a Total Disability that begins prior to age 60 and continues for six months. Further premiums due will continue to be waived as long as you remain Totally Disabled.

## Survivor Income Benefit

If you should die on a day for which a Total Disability Benefit is payable, the plan will pay a final benefit equal to three times the monthly benefit.

## Minimum Indemnities for Specified Injuries Benefit

The Certificate of Insurance has an extensive list of Specific Injuries. If an Injured Person sustains any of the losses, fractures, or dislocations on the list, the total amount payable under the Total Disability and Partial Disability Benefits combined as a result of that Injury will be at least an amount equal to the amount that would be payable under the Total Disability Benefit for the number of weeks shown opposite the Specified Injury in the Certificate of Insurance. If more than one Specified Injury is sustained due to the same accident, only the benefit for the Injury that is provided the most number of weeks will apply. Specified Injury means an Injury shown in the Certificate of Insurance which: (a) is due to an accident; and (b) occurs while the Insured Person is covered by this Benefit.

For example, the minimum number of weeks that benefits would be payable for an arm fractured between the elbow and shoulder is 12 weeks.

## Successive Disabilities

Successive or "related" disabilities will be considered as one period of Total Disability unless separated by 90 days of active, full-time work. In other words, if you go back to work after a covered Total Disability, your disability benefits can resume with no waiting period if you become disabled again after being back to work less for than three months. If you are back to work for three months or more, you will need to satisfy your waiting period again before your disability benefits can resume. The related disability must result from the same injury or sickness that caused your original disability.

## Concurrent Disabilities

Benefits during any period of Disability as the result of: a) more than one sickness; or b) more than one accident; or c) both sickness and accident; will be considered the same as if the disability resulted from only one cause.

## Program Details

### Eligibility

If you are an NSPE member who is under age 60, actively at work at least 30 hours a week, and not on active duty in the military, you are eligible to apply for this coverage.



## Program Details (cont.)

### Maximum Issue and Participation Limits

Benefits under Plan A and Plan B are subject to these maximum amounts.

Age of Issue	Maximum Issue & Participation Limit (including other insurance in force)
Thru age 49	\$7,500
Age 50-54	\$4,000
Age 55-59	\$2,000

### Disability Defined

“Total Disability” means a disability which:

- during the Waiting Period and the first 60 months that Total Disability Benefits are payable, wholly and continuously prevents an Insured Person from performing the substantial and material duties of his or her usual occupation; and
- after that, wholly and continuously prevents an Insured Person from engaging in any and every occupation or employment for which he or she is reasonably suited by training, education, or experience.

### Pre-Disability Income Defined

Pre-Disability Income is your average net monthly earnings for the 12-month or 24-month period prior to onset of disability, whichever is higher.

## Quarterly Premium Rates —

Choice of Waiting Periods,  
before benefits begin  
(Per \$100 Monthly Benefit)

PLAN A		Payable up to 5 years		
Age	30 Days	60 Days	90 Days	180 Days
Under 30	\$ 2.38	\$ 1.71	\$ 1.38	\$ 1.18
30-39	\$ 3.53	\$ 2.57	\$ 2.06	\$ 1.75
40-44	\$ 3.86	\$ 2.84	\$ 2.28	\$ 1.93
45-49	\$ 6.38	\$ 4.72	\$ 3.78	\$ 3.21
50-54	\$10.27	\$ 7.63	\$ 6.08	\$ 5.19
55-59	\$15.28	\$11.57	\$ 9.18	\$ 8.27
60-62*	\$16.97	\$12.98	\$10.28	\$ 9.54
63-64*	\$17.83	\$13.26	\$10.46	\$ 9.54

\*Age 60 and over for renewal only. Disability commencing after age 63 and prior to age 65 is payable for 24 months.  
Rates and/or benefits may be changed on a class basis.  
Rates are based on the attained age of the Insured Person and increase as you enter each new age category.

PLAN B		Payable up age 65		
Age	30 Days	60 Days	90 Days	180 Days
Under 30	\$ 3.97	\$ 3.01	\$ 2.49	\$ 2.22
30-39	\$ 5.82	\$ 4.46	\$ 3.65	\$ 3.27
40-44	\$ 6.20	\$ 4.80	\$ 3.89	\$ 3.51
45-49	\$ 9.74	\$ 7.54	\$ 6.11	\$ 5.52
50-54	\$15.02	\$11.64	\$ 9.43	\$ 8.52
55-59	\$17.69	\$13.62	\$10.84	\$ 9.99
60-62*	\$16.97	\$12.98	\$10.28	\$ 9.54
63-64*	\$17.83	\$13.26	\$10.46	\$ 9.54

\*Age 60 and over for renewal only.  
Rates and/or benefits may be changed on a class basis.  
Rates are based on the attained age of the Insured Person and increase as you enter each new age category.

## Exclusions and Limitations

### General Exclusions

This Policy does not cover: intentionally self-inflicted Injury, suicide, or attempted suicide, while sane or insane; pregnancy or childbirth, except Complications of Pregnancy; war or act of war, whether declared or not; the commission or attempted commission of a felony by the Insured Person; sickness contracted or injury sustained while on full-time active duty as a member of the Armed Forces (land, water, air) of any country or international authority, except for training of two months or less shall not, for the purposes of this exclusion, constitute service in the armed forces of any country.

### Pre-Existing Condition Limitation

During the first two years of coverage, losses incurred for Pre-Existing Conditions are not covered. A Pre-Existing Condition means any injury or sickness including pregnancy, diagnosed or undiagnosed, for which you have received medical care within the 12-month period prior to your coverage effective date or the date of an increase in coverage. During that time, benefits for all other accidents or illnesses will be paid under the policy provisions. You are urged to consider this limitation before dropping any coverage you may have until the waiting period is over.

### Mental/Nervous Limitation

If you are Totally Disabled due to Mental or Nervous Disorders, alcoholism, or drug abuse, the Maximum Payment Period will be reduced to two years during your lifetime unless you are confined in a hospital or other institution licensed to provide care and treatment for that disability.

### MIB Notice Disclaimer

Acceptance into this plan is subject to medical evidence of insurability as determined by The Hartford. Depending on your age, the amount of coverage you request, and your answers on the application, a medical examination, medical test(s), or other evidence of good health may be required. Any exams/tests requested by the company will be conducted at your convenience and at no expense to you.

### Renewal

This coverage is automatically renewed by paying the renewal premium applicable for your particular age. Coverage will end only if you do not pay this premium within the grace period, reach age 65, cease to be actively engaged full time in your profession, or cease to be a member of the National Society of Professional Engineers.

### Effective Date

Coverage becomes effective on the first day of the month following the date The Hartford approves your application and the premium is paid. Acceptance into this plan is subject to medical evidence of insurability as determined by The Hartford. Depending on your age, the amount of coverage you request, and your answers on the application, a medical examination, medical test(s), or other evidence of good health may be required. Any exams/tests requested by the company will be conducted at your convenience and at no expense to you.

### Disclaimer

This brochure explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy between this brochure and the policy, the terms of the policy apply. All benefits are subject to the terms and conditions of the policy. Policies underwritten by Hartford Life Insurance Company detail exclusions, limitations, reduction of benefits and terms under which the policies may be continued in full or discontinued. Complete details are in the Certificate of Insurance issued to each insured individual and the Master Policy issued to the policyholder. This program may vary and may not be available to residents of all states.

### NOTICE OF INSURANCE INFORMATION PRACTICES

To properly underwrite and administer your application for insurance coverage, we must collect certain information concerning your insurability. You are our most important source of information, but we may also contact other sources such as medical professionals and institutions, employers and other insurance companies. While all information regarding your insurability will be treated as confidential, in some situations, and in compliance with applicable law, we may disclose necessary items of information to third parties without your specific authorization.

### INVESTIGATIVE CONSUMER REPORTS

As part of our procedure for processing your application, an investigative consumer report may be prepared by an outside insurance reporting organization. Personal information may be collected from others regarding your general reputation and lifestyle. If an interview is conducted with someone other than you, we will inform you of your right to be interviewed in connection with the preparation of the investigative consumer report. You have the right to send a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation.

### PERSONAL HISTORY INTERVIEW

To provide you, our client, with the best possible service, we may also conduct what we call a personal history interview. This is a phone call placed from our underwriting office. Its purpose is to make sure that the application information is complete. Our interviewers are trained to conduct their calls in a friendly, professional manner. The nature of the information discussed is always treated as personal and confidential and will only be used to assess your eligibility for insurance.

### MEDICAL INFORMATION BUREAU (MIB) PRE-NOTICE

Information regarding your insurability will be treated as confidential. Hartford Life Insurance Company or Hartford Life and Accident Insurance Company or its reinsurer(s) may, however, make a brief report thereon to the MIB, Inc., formerly known as Medical Information Bureau, a not-for-profit membership organization of insurance companies, which operates an information exchange on behalf of its members. If you apply to another MIB member company for life or health insurance coverage, or a claim for benefits is submitted to such a company, MIB, upon request, will supply such company, with the information about you in its file. Upon receipt of a request from you, MIB will arrange disclosure of any information in your file. Please contact MIB at (866) 692-6901 (TTY (866) 346-3642). If you question the accuracy of the information in MIB's file, you may contact MIB and seek a correction in accordance with the procedures set forth in the Federal Fair Credit Reporting Act. The address of MIB's information office is 50 Braintree Hill Park, Suite 400, Braintree, Massachusetts 02184-8734. Hartford Life Insurance Company, Hartford Life and Accident Insurance Company, or their reinsurers, may also release information from their files to other insurance companies to whom you may apply for life or health insurance, or to whom a claim for benefits may be submitted. Information for consumers about MIB may be obtained on its website at [www.mib.com](http://www.mib.com).

### ACCESS, CORRECTION AND DISCLOSURE

You can obtain access to personal information about you contained in our policy files by sending us a written request. You may also request any necessary corrections, amendments or deletion of any information in our files which you believe to be inaccurate or irrelevant. Hartford Life Insurance Company or Hartford Life and Accident Insurance Company or its reinsurer(s) may release information in their files to other life insurance companies to whom you may apply for life or health insurance, or to whom a claim for benefits may be submitted. Also, please be advised that personal and confidential information collected by us may, in certain circumstances, be disclosed to third parties without authorization. A notice providing further description of the circumstances under which information about you may be disclosed and the types of persons and organizations to whom it may be disclosed will be sent to you upon your written request. If you desire further information or access to your personal information, please send your written request to: Hartford Life Insurance Company or Hartford Life and Accident Insurance Company, 200 Hopmeadow St., Simsbury, CT 06089.

Pearl Insurance is the Plan Administrator and Insurance broker that administers the insurance plan on behalf of the Hartford Life and Accident Insurance Company for the benefit of the Group Policyholder. Pearl is compensated for the placement of insurance and for the services it provides to customers on behalf of the insurance company, in addition to other compensation it may receive. Compensation is paid to or retained by the Group Policyholder directly or indirectly for services associated with this insurance program.



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