



Disability Income Insurance

FAQs Frequently Asked Questions

One-Step Express Disability Income Insurance

A quick 6-question application process for individuals age 54 and under means it is easier to apply for quality disability income protection which can provide coverage if illness or injury prevented you from working.

Q. What is special about the One-Step Express Disability Income Insurance offer?

A. Individuals can apply for coverage using our short form application. The short form includes only six medical questions and asks for your height and weight. If we find no further medical information is needed upon review of your application, then you're done! It's as easy as that.¹

Q. Who is eligible for coverage?

A. You are eligible to apply if you are an individual, in good standing, age 54 or under and are actively at work on a full-time basis for at least 30 hours per week.

If you are age 55-59, you also may apply by completing a full application form.

Q. Does this plan include own occupation protection?

A. Yes, this plan pays full benefits if you are totally disabled due to a sickness or injury and are unable to perform the material duties of your occupation and are receiving regular medical care from a duly licensed physician, as described in your certificate and unable to earn more than 80% of predisability earnings at your Own Occupation.

Q. What is the maximum monthly benefit I can apply for?

A. You can choose a monthly benefit amount up to \$6,000, for those ages 44 and under and \$3,000, for those age 45-54.

You can apply up to \$10,000 monthly benefit by completing the full application form.

Please Note: The amount that can be issued depends upon earned income and will be capped at 66.67%.

Q. Is there a waiting period before benefits begin?

A. Yes, you may choose from a 30, 60, 90, or 180 day waiting period.

Q. How long will the benefits last?

A. The plan offers three maximum benefit durations.

- Option #1: Benefits paid for up to 2 years (for accidental injury or sickness).
- Option #2: Benefits paid for up to 5 years (for accidental injury or sickness).
- Option #3: Benefits are paid to the later of:

The Lesser of Your normal retirement age; or

Age on Date of Your Disability	Benefit Period
Less than age 60	to age 65
60	60 months
61	48 months
62	42 months
63	36 months
64	27 months
65	24 months
66	21 months
67	18 months
68	15 months
69	12 months

Q. What additional plan benefits are included?

A. The following additional plan benefits are available:

Survivor benefit: Your beneficiary will receive a survivor benefit of up to three months of payments if you die while totally disabled and had been disabled for at least 12 continuous months and receiving monthly benefits.

Waiver of premium: If you become totally disabled, once you begin receiving benefits after the elimination period has been met, MetLife will waive your premium payments for as long as you continue to receive benefits. When you stop receiving monthly benefits, premium must again be paid when due.

Q. Can I customize my plan with optional benefits?²

A. Yes, the following optional benefits are available.

Cost of Living Option (COLA) We will adjust your benefit amount by an additional 3% if you have been receiving monthly benefits for 12 months, and make additional similar adjustments on up to 4 anniversaries of the first adjustment as long as you continue to receive monthly benefits.

Guaranteed Purchase Option (GPO), this option may be purchased by individuals under age 40 and allows you to increase your monthly disability benefit without having to provide evidence of insurability. You can increase this benefit by 25% of the original amount on the second, fourth, sixth and eighth anniversaries of the renewal date immediately following your effective date up to the maximum available to the group. The premium rate for this option is 5% of the sum of the base coverage amount.

Q. What is the cost of coverage?

A. Total SEMI-ANNUAL premium per \$1,000 monthly benefit and 90 day waiting period, to age 65 as shown above in option #3:

Disability					
Under 30	30-34	35-39	40-44	45-49	50-54
\$65.90	\$81.65	\$102.05	\$131.60	\$170.50	\$217.55
Disability + COLA					
Under 30	30-34	35-39	40-44	45-49	50-54
\$90.35	\$118.15	\$150.35	\$205.80	\$284.95	\$369.65

Q. What are the renewal terms of this coverage?

A. Coverage is renewable to age 70 as long as you pay your premium when due, you remain actively engaged full time in the duties of your occupation, policy stays in force and you do not enter active military duty.

Q. What conditions are excluded from coverage?

A. This plan will not pay benefits for a disability due to, attempted suicide; an intentionally self-inflicted injury; a war or act of war whether declared or undeclared, rebellion or insurrection; riot or terrorist act; the commission of, or attempt to, commit a felony.

We will not pay benefits for a disability that results from a pre-existing condition unless you have been actively at work for at least 12 consecutive months since the date your disability insurance took effect.

A pre-existing condition is defined as a sickness or accidental injury for which you, received medical treatment, consultation, care, or services; took prescription medication or had medications prescribed; in the 6 months before your insurance took effect.

Q. Are there limited disability benefits for alcohol, drug or substance abuse, addiction or mental or nervous disorders or diseases?

A. Yes, if you are disabled due to alcohol, drug, substance abuse or addiction, we will limit your disability benefits for each period of disability to 12 months of payments.

If you are disabled due to a mental or nervous disorder or disease, we will limit your disability benefits to a per occurrence maximum of 24 months.

To apply please visit tdainsurance.com or call **800-347-1109** with any questions.

¹ If answers to medical questions are answered unfavorably, full underwriting may be required and coverage is subject to approval of insurer

² There may be additional charges, please contact 800-347-1109 for additional details.

This plan is available to TN residents only.

Like most insurance policies, MetLife policies contain certain exclusions, waiting periods, reductions, limitations and terms for keeping them in force. All policies and riders may not be available in all states for all ages. Coverage is subject to underwriting approval. Please contact IPSCO at 800-347-1109 for complete details.

Policy Form Number 165929-1-G



Administered by:

IPSCO
6505 Lee Highway
Chattanooga, TN 37421-2420
Toll-Free: 800.347.1109



Metropolitan Life Insurance Company
200 Park Avenue
New York, NY 10166
metlife.com