

HELP PROTECT YOURSELF AND YOUR LOVED ONES



▶ **NJEA INCOME PROTECTION PLUS**

Disability Income

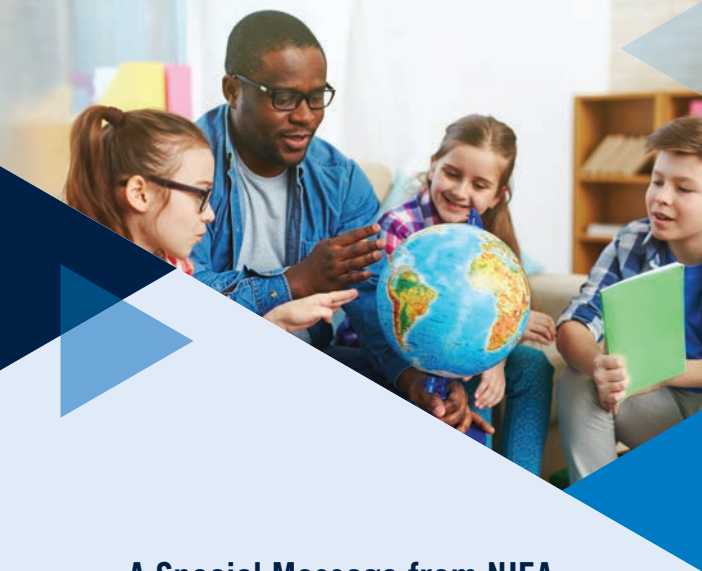
Critical Illness



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**Prudential**  
Bring Your Challenges®

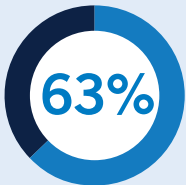


## A Special Message from NJEA

NJEA has been offering solid disability coverage to our members for more than 60 years. We are especially proud to endorse this plan—developed under the guidance of NJEA and backed by the financial strength and experience of Prudential.<sup>1</sup> We urge you to review the material to decide if and how you will help protect your income.

### Disability Insurance

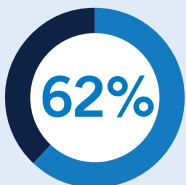
helps protect your paycheck



Americans who live paycheck to paycheck<sup>2</sup>

### Critical Illness Insurance

helps protect your savings



Bankruptcies based on a medical event<sup>3</sup>

## Help protect what matters to you, no matter where you are in life

As an NJEA member, you've got a steady income and a job that serves your community. NJEA wants to make it easy for you to take steps to help protect yourself against the key financial risks, such as an unexpected loss of income due to disability or unexpected out-of-pocket medical and non-medical expenses related to an illness.

We know how busy you are, but helping to protect yourself financially from life's twists and turns is really important.

### NJEA Income Protection Plus helps you protect...

#### ...your paycheck if you become too sick or injured to work

- ▶ **THE NJEA DISABILITY INSURANCE PLAN** helps ensure that if you can't work, you may still be able to afford to pay for things like the rent, mortgage, health insurance premiums, child care, your cellphone, car payments, college tuition, and retirement.

Research shows that 63% of people live from paycheck to paycheck,<sup>2</sup> and about half of all households have less than \$10,000 in savings!<sup>4</sup>

#### ...your savings from potentially high out-of-pocket expenses<sup>5</sup> due to a serious illness or injury

- ▶ **CRITICAL ILLNESS INSURANCE** (details start on page 10) can help you pay for costs that can really add up.

That's important because 62% of bankruptcies are based on a medical event.<sup>3</sup> Even worse, 78% of those who experienced medical bankruptcies had health insurance.<sup>3</sup>

All coverages are issued by **The Prudential Insurance Company of America (Prudential)**.

## The power of an NJEA-endorsed program

As an NJEA member, you understand the power of the Association. By coming together, you can have an even greater impact on education in New Jersey and create even stronger professional opportunities.

The power of the Association works with insurance, too. NJEA has designed Group Disability and Critical Illness Insurance Programs to help protect members and their families during all stages of their career (or life).

Since 1953, NJEA has offered a program to help protect members' income. We've made our programs:

- ▶ **Affordable:** Group plans through an association like the NJEA are generally less expensive than individual plans.
- ▶ **Convenient:** Premiums are automatically deducted from your paycheck.
- ▶ **Member-focused:** Benefits from your NJEA Program are usually more comprehensive and less restrictive than other (available) plans.

And, our plans pay cash benefits that are income tax-free when monthly deductions are paid with after-tax dollars. (IRC Section 104.)

Help protect your paycheck and savings today, or increase your coverage.

## Did you know that...

- ▶ NJEA plans pay cash benefits.
- ▶ Pregnancy is covered as any illness.
- ▶ NJEA plans pay in addition to sick leave and continue when sick leave is exhausted.
- ▶ Open Enrollment opportunities generally occur only once every three years.
- ▶ Benefits do not automatically increase as your salary increases, so check your benefit level often.

## The NJEA Disability Insurance Plan covers disabilities such as:

- ▶ Pregnancy
- ▶ Illness
- ▶ Accidental injury
- ▶ Cancer-related
- ▶ Mental and behavioral health

## FYI about this coverage

- ▶ **Coverage begins** on the first day of the month after we collect one full monthly deduction, provided you're actively at work. We'll collect **monthly deductions** for 10 months (based on the school year), but you'll be covered for 12 months.
- ▶ After you've been disabled for three consecutive months, we'll **waive your monthly deductions** while keeping coverage in effect. We'll allow delayed payments for up to 30 days if work is interrupted or pay is delayed due to a job action.
- ▶ If you collect disability benefits and return to work, and then become disabled again for the same cause, each **recurrent disability** will be considered part of the same disability claim if your return to work occurs within 30 days for **PruProtect Six-Month** and **Two-Year**, and within six months for **PruProtect Plus**, from the initial absence. You won't have to satisfy additional elimination periods before benefits can start.



## Choose the disability insurance that fits your needs

All these plans offer solid paycheck coverage. You're in the best position to decide which benefits meet your needs. Consider when benefits begin (called an elimination period) and how long they last.

	PruProtect Six-Month	PruProtect Two-Year
<b>Compare the Plan Features</b>	<b>A short-term disability plan that may be a good choice for those who seek a short-term income replacement solution. Members close to retirement age or with other resources to cover long-term absences may want to select this plan.</b>	<b>Provides additional coverage for those who want coverage beyond six months and seek a short-term income replacement solution. Members close to retirement age or with other resources to cover long-term absences may want to select this plan.</b>
<b>When Do Benefits Begin?</b>	Benefits for a covered disability are payable following either a 14-day or 60-day elimination period.	Benefits for a covered disability are payable following either a 14-day or 60-day elimination period.
<b>How Long Do Benefits Continue?</b>	Benefit payments continue for up to six months, provided you remain disabled and are treated by a licensed physician.	Benefit payments continue for up to two years, provided you remain disabled and are treated by a licensed physician.
<b>What Is a Covered Disability?</b>	You are considered disabled when you are unable to perform the material and substantial duties of your own occupation, and you have a 20% or more loss in monthly earnings due to the same sickness or injury, excluding sick leave pay.	You are considered disabled when you are unable to perform the material and substantial duties of your own occupation, and you have a 20% or more loss in monthly earnings due to the same sickness or injury, excluding sick leave pay.
<b>What Is Partial Disability?</b>	If you are disabled and return to work part time, you will continue to receive a monthly payment, based on the percentage of income you are losing due to your disability.	If you are disabled and return to work part time, you will continue to receive a monthly payment, based on the percentage of income you are losing due to your disability.
<b>How May Benefits Be Reduced?</b>	Monthly benefit payments will be reduced by other sources of income, such as workers' compensation, but not by pension, Social Security Disability Benefits, or sick leave pay. Your benefits will never be less than 10% of your monthly benefit or \$100, whichever is greater.	Monthly benefit payments will be reduced by other sources of income, such as workers' compensation, but not by pension, Social Security Disability Benefits, or sick leave pay. Your benefits will never be less than 10% of your monthly benefit or \$100, whichever is greater.
<b>What Is a Pre-Existing Condition?</b>	A disability that begins during the first 12 months and is due to a pre-existing condition is excluded. A pre-existing condition is one that was diagnosed or treated during the three months prior to the effective date of your coverage.	A disability that begins during the first 12 months and is due to a pre-existing condition is excluded. A pre-existing condition is one that was diagnosed or treated during the three months prior to the effective date of your coverage.
<b>Will Your Payment Be Adjusted by a Cost of Living Increase?</b>	Only available with PruProtect Plus	Only available with PruProtect Plus
<b>Benefits for Your Survivors</b>	Only available with PruProtect Plus	Only available with PruProtect Plus
<b>Voluntary Vocational Rehabilitation Program</b>	Only available with PruProtect Plus	Only available with PruProtect Plus
<b>Social Security Claimant Assistance Program</b>	Only available with PruProtect Plus	Only available with PruProtect Plus
<b>Your Monthly Benefit and Deduction</b>	Your monthly deduction is based on your monthly benefit amount. You can select a monthly benefit amount in \$100 increments from \$500 to \$6,500, up to a maximum of 66 <sup>2</sup> / <sub>3</sub> % of your monthly salary. See the Monthly Deduction charts on page 7 to determine your monthly deduction.	Your monthly deduction is based on your monthly benefit amount. You can select a monthly benefit amount in \$100 increments from \$500 to \$6,500, up to a maximum of 66 <sup>2</sup> / <sub>3</sub> % of your monthly salary. See the Monthly Deduction charts on page 7 to determine your monthly deduction.

<b>PruProtect Plus</b>	
<b>Compare the Plan Features</b>	A combined short- and long-term disability plan with maximum coverage. This plan covers you until age 65, helping to protect you for your working life. It also lets you select your elimination period. The longer the elimination period, the lower your monthly deduction. Members with a large number of accrued sick days or other financial resources may prefer a longer elimination period.
<b>When Do Benefits Begin?</b>	Benefits for a covered disability are payable following the elimination period you choose—14, 30, 90, or 180 days.
<b>How Long Do Benefits Continue?</b>	Benefit payments continue, provided you remain disabled and are treated by a licensed physician, until age 65 if disability begins before age 60. If your disability begins at age 60 or later, benefits continue beyond age 65 according to a specified schedule.
<b>What Is a Covered Disability?</b>	You are considered disabled when you are unable to perform the material and substantial duties of your own occupation due to your sickness or injury; and you have a 20% or more loss in your indexed monthly earnings due to that sickness or injury, excluding sick leave pay. After 24 months of payments, you are considered disabled when Prudential determines that due to the same sickness or injury, you are unable to perform the duties of any gainful occupation for which you are reasonably fitted by education, training, or experience. A gainful occupation is expected to provide you with an income of at least 66 <sup>2</sup> / <sub>3</sub> % of your indexed monthly earnings within 12 months of your return to work.
<b>What Is Partial Disability?</b>	If you are disabled and return to work part time, you will continue to receive a monthly payment, based on the percentage of income you are losing due to your disability.
<b>How May Benefits Be Reduced?</b>	Monthly benefit payments will be reduced by other sources of income, such as workers' compensation, Social Security Disability Benefits, retirement disability benefits, and your employer's retirement plan (but not from your retirement contributions). Monthly benefit payments will not be reduced by sick leave pay. Your benefits will never be less than 10% of your monthly benefit or \$100, whichever is greater.
<b>What Is a Pre-Existing Condition?</b>	A disability that begins during the first 12 months and is due to a pre-existing condition is excluded. A pre-existing condition is one that was diagnosed or treated during the three months prior to the effective date of your coverage.
<b>Will Your Payment Be Adjusted by a Cost of Living Increase?</b>	Prudential will make a cost of living adjustment (COLA) on July 1 if you are disabled and not working on that date and have been disabled for all of the 12 months before that date. Your payments will increase on that date by 3%. You will not receive more than 5 cost of living adjustments while you continue to receive payments for your disability.
<b>Benefits for Your Survivors</b>	Additional benefits are payable to your survivors in the event of your death. If you have been disabled for 180 days or more and die while receiving benefits, your spouse or children under age 25 will receive a lump sum totaling three times your gross disability payment.
<b>Voluntary Vocational Rehabilitation Program</b>	Our vocational rehabilitation specialists can work with your doctor to help your return-to-work efforts. If you participate in a Prudential-approved vocational rehabilitation program, there are other benefits available: <ul style="list-style-type: none"> <li>▶ An additional benefit of 10% of your current monthly benefit (if your benefit is less than the maximum monthly benefit), for up to 6 months</li> <li>▶ Day-care expenses, up to \$500 per child per month, for up to 6 months</li> <li>▶ Education costs for higher education, up to \$200 per eligible student per month, for up to 24 months</li> </ul>
<b>Social Security Claimant Assistance Program</b>	We will work with you to help you receive any Social Security disability benefits to which you are entitled.
<b>Your Monthly Benefit and Deduction</b>	Your monthly deduction is based on the elimination period you choose, the monthly benefit amount you select, and your age. You can select from four elimination periods: 14, 30, 90, or 180 days. And you can select a monthly benefit amount in \$100 increments from \$500 to \$6,500, up to a maximum of 66 <sup>2</sup> / <sub>3</sub> % of your monthly salary. See the Monthly Deduction charts on pages 8 and 9 to determine your monthly deduction.



## NJEA Income Protection Plus can help protect you.

“No one wants to go through the worst time of their life, and during that period, no one wants to talk about it. Defend it. Admit to it.

Back in November, I crashed. Calling Prudential was one of the hard calls I had to make and I was beyond fortunate when I was assigned to Andrew.

The respect, patience, and professionalism he showed with each phone call meant more to me than I can say. I am choked up now thinking about how hard those phone calls were for me and how he made them bearable. Respect is a quality people either have or lack. Andrew possesses that quality, along with kindness and compassion.

Thank you for being a strength that helped me get back on my feet. Years ago, I signed up with Prudential when a girlfriend was diagnosed with cancer and went without pay through her extended treatment period. I never foresaw the path my life would take, and that is my lesson of insurance. The payments were a drop in the bucket. The benefit was immeasurable.”—D.E., NJEA Member

## Choose the plan and benefit amount that fits your needs

Your monthly deduction is based on your Benefit Amount. You can choose a Benefit Amount in \$100 increments from \$500 to \$6,500, up to a Maximum Monthly Benefit of two thirds of your salary. You may select the maximum monthly benefit, or any lower amount, to fit your needs.

See how the loss of your paycheck would impact your financial wellness with the Disability Insurance Needs Estimator:

<http://www.prudential.com/EZDisabilityNeeds>.

### A few things to know if you currently have disability coverage:

1. You may want to check your benefit level; benefits don't automatically increase as your salary increases.
2. You can increase your current disability coverage up to \$500 per month during a school visit...without health questions.
3. Use the charts on the right to find the Maximum Monthly Benefit Amount for your salary. Then, follow across the chart to find the Monthly Deduction.

### To find the Maximum Monthly Benefit Amount for salaries not shown:

- ▶ Divide your annual salary by 12 to find your monthly salary.
- ▶ Then multiply your monthly salary by .667 and round down to the next \$100 increment.



PruProtect Six-Month		14-Day Elimination Period		60-Day Elimination Period	
Salary	Monthly Benefit	Monthly Deduction (Ten deductions per year)	Paycheck Deduction	Monthly Deduction (Ten deductions per year)	Paycheck Deduction
\$ 9,000	\$ 500	\$ 19.35	\$ 9.68	\$ 8.15	\$ 4.08
18,000	1,000	38.70	19.35	16.30	8.15
27,000	1,500	58.05	29.03	24.45	12.23
36,000	2,000	77.40	38.70	32.60	16.30
45,000	2,500	96.75	48.38	40.75	20.38
54,000	3,000	116.10	58.05	48.90	24.45
63,000	3,500	135.45	67.73	57.05	28.53
72,000	4,000	154.80	77.40	65.20	32.60
81,000	4,500	174.15	87.08	73.35	36.68
90,000	5,000	193.50	96.75	81.50	40.75
99,000	5,500	212.85	106.43	89.65	44.83
108,000	6,000	232.20	116.10	97.80	48.90
117,000	6,500	251.55	125.78	105.95	52.98

To find your Monthly Deduction for an amount not shown, just multiply your desired Maximum Monthly Benefit Amount by \$0.0387 for 14-Day Elimination Period or \$0.0163 for 60-Day Elimination Period.

PruProtect Two-Year		14-Day Elimination Period		60-Day Elimination Period	
Salary	Monthly Benefit	Monthly Deduction (Ten deductions per year)	Paycheck Deduction	Monthly Deduction (Ten deductions per year)	Paycheck Deduction
\$ 9,000	\$ 500	\$ 32.10	\$ 16.05	\$ 24.70	\$ 12.35
18,000	1,000	64.20	32.10	49.40	24.70
27,000	1,500	96.30	48.15	74.10	37.05
36,000	2,000	128.40	64.20	98.80	49.40
45,000	2,500	160.50	80.25	123.50	61.75
54,000	3,000	192.60	96.30	148.20	74.10
63,000	3,500	224.70	112.35	172.90	86.45
72,000	4,000	256.80	128.40	197.60	98.80
81,000	4,500	288.90	144.45	222.30	111.15
90,000	5,000	321.00	160.50	247.00	123.50
99,000	5,500	353.10	176.55	271.70	135.85
108,000	6,000	385.20	192.60	296.40	148.20
117,000	6,500	417.30	208.65	321.10	160.55

To find your Monthly Deduction for an amount not shown, just multiply your desired Maximum Monthly Benefit Amount by \$0.0642 for 14-Day Elimination Period and \$0.0494 for 60-Day Elimination Period.

► Disability Period minus Elimination Period = Total Days Paid

Example: 6 weeks (6x7) = 42 days minus 14 day Elimination Period = 28 Days Paid

**PruProtect Plus, which combines both short- and long-term coverage, begins on the next two pages.**

# PruProtect Plus Combined Short & Long Term Plan up to Age 65

## Decide which Monthly Benefit meets your needs.

Find the chart that corresponds to your age. Find the Maximum Monthly Benefit Amount for your salary. You may select the maximum monthly benefit or select any lower amount that fits your needs. Follow across the chart and choose an elimination period to see your Monthly Deduction. Your Monthly Deduction will change as you get older and move into the next age group.

Ages less than 40*			PruProtect Plus Ten Monthly Deductions/Year			
Annual Salary	Monthly Benefit	Monthly or Per Paycheck	Elimination Period			
			14 Days	30 Days	90 Days	180 Days
\$ 9,000	\$ 500	Monthly	\$ 31.25	\$ 11.50	\$ 4.25	\$ 2.60
		Paycheck	15.63	5.75	2.13	1.30
18,000	1,000	Monthly	62.50	23.00	8.50	5.20
		Paycheck	31.25	11.50	4.25	2.60
27,000	1,500	Monthly	93.75	34.50	12.75	7.80
		Paycheck	46.88	17.25	6.38	3.90
36,000	2,000	Monthly	125.00	46.00	17.00	10.40
		Paycheck	62.50	23.00	8.50	5.20
45,000	2,500	Monthly	156.25	57.50	21.25	13.00
		Paycheck	78.13	28.75	10.63	6.50
54,000	3,000	Monthly	187.50	69.00	25.50	15.60
		Paycheck	93.75	34.50	12.75	7.80
63,000	3,500	Monthly	218.75	80.50	29.75	18.20
		Paycheck	109.38	40.25	14.88	9.10
72,000	4,000	Monthly	250.00	92.00	34.00	20.80
		Paycheck	125.00	46.00	17.00	10.40
81,000	4,500	Monthly	281.25	103.50	38.25	23.40
		Paycheck	140.63	51.75	19.13	11.70
90,000	5,000	Monthly	312.50	115.00	42.50	26.00
		Paycheck	156.25	57.50	21.25	13.00
99,000	5,500	Monthly	343.75	126.50	46.75	28.60
		Paycheck	171.88	63.25	23.38	14.30
108,000	6,000	Monthly	375.00	138.00	51.00	31.20
		Paycheck	187.50	69.00	25.50	15.60
117,000	6,500	Monthly	406.25	149.50	55.25	33.80
		Paycheck	203.13	74.75	27.63	16.90

Ages 40–49*			PruProtect Plus Ten Monthly Deductions/Year			
Annual Salary	Monthly Benefit	Monthly or Per Paycheck	Elimination Period			
			14 Days	30 Days	90 Days	180 Days
\$ 9,000	\$ 500	Monthly	\$ 33.00	\$ 17.75	\$ 8.80	\$ 7.25
		Paycheck	16.50	8.88	4.40	3.63
18,000	1,000	Monthly	66.00	35.50	17.60	14.50
		Paycheck	33.00	17.75	8.80	7.25
27,000	1,500	Monthly	99.00	53.25	26.40	21.75
		Paycheck	49.50	26.63	13.20	10.88
36,000	2,000	Monthly	132.00	71.00	35.20	29.00
		Paycheck	66.00	35.50	17.60	14.50
45,000	2,500	Monthly	165.00	88.75	44.00	36.25
		Paycheck	82.50	44.38	22.00	18.13
54,000	3,000	Monthly	198.00	106.50	52.80	43.50
		Paycheck	99.00	53.25	26.40	21.75
63,000	3,500	Monthly	231.00	124.25	61.60	50.75
		Paycheck	115.50	62.13	30.80	25.38
72,000	4,000	Monthly	264.00	142.00	70.40	58.00
		Paycheck	132.00	71.00	35.20	29.00
81,000	4,500	Monthly	297.00	159.75	79.20	65.25
		Paycheck	148.50	79.88	39.60	32.63
90,000	5,000	Monthly	330.00	177.50	88.00	72.50
		Paycheck	165.00	88.75	44.00	36.25
99,000	5,500	Monthly	363.00	195.25	96.80	79.75
		Paycheck	181.50	97.63	48.40	39.88
108,000	6,000	Monthly	396.00	213.00	105.60	87.00
		Paycheck	198.00	106.50	52.80	43.50
117,000	6,500	Monthly	429.00	230.75	114.40	94.25
		Paycheck	214.50	115.38	57.20	47.13

**Disability Period -  
Elimination Period**  
Total Days Paid

**Example:** 42 days (6 weeks x 7 days)  
- 30 days (Elimination Period)  
12 Days Paid





## Ages 50+\*

### PruProtect Plus Ten Monthly Deductions/Year

Annual Salary	Monthly Benefit	Monthly or Per Paycheck	Elimination Period			
			14 Days	30 Days	90 Days	180 Days
\$ 9,000	\$ 500	Monthly	\$ 34.85	\$ 27.00	\$ 20.45	\$ 15.60
		Paycheck	17.43	13.50	10.23	7.80
18,000	1,000	Monthly	69.70	54.00	40.90	31.20
		Paycheck	34.85	27.00	20.45	15.60
27,000	1,500	Monthly	104.55	81.00	61.35	46.80
		Paycheck	52.28	40.50	30.68	23.40
36,000	2,000	Monthly	139.40	108.00	81.80	62.40
		Paycheck	69.70	54.00	40.90	31.20
45,000	2,500	Monthly	174.25	135.00	102.25	78.00
		Paycheck	87.13	67.50	51.13	39.00
54,000	3,000	Monthly	209.10	162.00	122.70	93.60
		Paycheck	104.55	81.00	61.35	46.80
63,000	3,500	Monthly	243.95	189.00	143.15	109.20
		Paycheck	121.98	94.50	71.58	54.60
72,000	4,000	Monthly	278.80	216.00	163.60	124.80
		Paycheck	139.40	108.00	81.80	62.40
81,000	4,500	Monthly	313.65	243.00	184.05	140.40
		Paycheck	156.83	121.50	92.03	70.20
90,000	5,000	Monthly	348.50	270.00	204.50	156.00
		Paycheck	174.25	135.00	102.25	78.00
99,000	5,500	Monthly	383.35	297.00	224.95	171.60
		Paycheck	191.68	148.50	112.48	85.80
108,000	6,000	Monthly	418.20	324.00	245.40	187.20
		Paycheck	209.10	162.00	122.70	93.60
117,000	6,500	Monthly	453.05	351.00	265.85	202.80
		Paycheck	226.53	175.50	132.93	101.40

To find your Monthly Deduction for a Monthly Benefit Amount not shown:

- ▶ Use the chart below and locate your age.
- ▶ Follow across and choose your elimination period.
- ▶ Multiply the rate shown by the Monthly Benefit Amount you've selected.

PruProtect Plus				
Age as of preceding October 1	14 Days	30 Days	90 Days	180 Days
<40	0.0625	0.0230	0.0085	0.0052
40-49	0.0660	0.0355	0.0176	0.0145
50+	0.0697	0.0540	0.0409	0.0312

Rates may change as the insured enters a higher age category or if plan experience requires a change for all insureds. Divide monthly deduction by two to get per paycheck amount.

To find the Maximum Monthly Benefit Amount for salaries not shown:

- ▶ Divide your annual salary by 12 to find your monthly salary.
- ▶ Then multiply your monthly salary by .667 and round down to the next \$100 increment.

## Example of Elimination Period for Maternity

How the timing of delivering your baby impacts the benefit amount

Your elimination period (EP) begins when your doctor disables you, which is typically 4 weeks before your EXPECTED delivery date, but keep in mind that every situation is different. We consider a member to be disabled for 6 weeks after their ACTUAL delivery. Benefits begin after the EP has been met. You are not paid for the EP.

EXAMPLE: Member has \$3,000 monthly benefit (or a \$100 a day) and 30 day elimination

*Baby Arrives on Time:* 4 weeks before (28 days) + 6 weeks after (42 days) = 70 days - 30 day EP = 40 days payable  
40 days @ \$100 daily rate = \$4,000 disability benefit

*Baby Arrives Early (more than 4 weeks before):* No disability time before birth. 6 weeks after (42 days) - 30 day EP = 12 days payable  
12 days @ \$100 daily rate = \$1,200 disability benefit

# New Critical Illness Insurance benefits

## Coverage available for members and their families

### Help protect your savings today with Critical Illness Insurance.

NJEA continues to look for benefits that can help its members protect their overall financial wellness, and is excited to introduce Critical Illness Insurance, effective October 1, 2017.

A critical illness, such as cancer or heart attack, is not only a devastating physical blow, but it can be a severe financial one as well.

Even with health insurance, out-of-pocket medical and non-medical expenses such as deductibles, co-pays, over-the-counter medications, and home accommodations can really cause financial strain. With reduced income during this time, family budgets are stretched to cover normal household expenses. And there are always extra expenses, like transportation, child care, and housekeeping.

### Critical Illness Insurance helps protect against unexpected financial hardship due to illness.

Critical Illness Insurance pays benefits when a covered person is diagnosed with a critical illness for the first time and that diagnosis occurs during the covered person's lifetime. When diagnosed with a covered illness,\* you receive a single payment that you can use for anything.

#### The plan pays 100% of your selected benefit of coverage for:

- ▶ Cancer
- ▶ Heart Attack
- ▶ Major Organ Transplant
- ▶ Stroke
- ▶ Renal Failure
- ▶ Alzheimer's Disease
- ▶ Parkinson's Disease

#### The plan pays 25% of your selected benefit of coverage for:

- ▶ Cancer in Situ
- ▶ Coronary Artery Bypass
- ▶ Blindness
- ▶ Coma
- ▶ Deafness
- ▶ Heart Valve
- ▶ Terminal Illness

### Pre-Existing Condition limitations

A Critical Illness or Procedure is not covered if it is caused by, contributed to by, or resulting from a pre-existing condition.

A person has a Pre-Existing Condition if both (1) and (2) are true:

- 1 The person received medical treatment, consultation, care, or services, including diagnostic measures, from a Doctor or took prescribed drugs or medicines, or followed treatment recommendation in the 6 months just prior to the person's effective date of coverage or the date an increase in the person's benefits would otherwise be available
- 2 The person's Critical Illness or Procedure begins within 6 months of the date the person's coverage under the plan becomes effective

### Choose your coverage amount and see how much it costs

Choose your coverage in increments of \$10,000, up to \$200,000. Your spouse may take the same benefit amount as you. Your child may be covered for 50% of your benefit amount, to a maximum of \$15,000. Then, follow the chart on the right to determine your rate per pay period.

- ▶ Find your age.
- ▶ Follow across the chart to see your deduction.
- ▶ Multiply the rate per \$10,000 for the coverage you want.

**Critical Illness coverage is available for you, your spouse, and children up to age 26. Retirees up to age 64 can sign up, too.**

# Enroll for Critical Illness Insurance at [enroll.njea.org](http://enroll.njea.org)



## Critical Illness rates (Please note rates are based upon member's age.)

Member		Ten Monthly Deductions/Year				
Age	Cost per \$10,000 of Coverage		Cost for \$20,000 of Coverage		Cost for \$30,000 of Coverage†	
	Cost per Month	Cost per Paycheck	Cost per Month	Cost per Paycheck	Cost per Month	Cost per Paycheck
<25	\$ 1.58	\$ 0.79	\$ 3.16	\$ 1.58	\$ 4.74	\$ 2.37
25-29	2.36	1.18	4.72	2.36	7.08	3.54
30-34	3.58	1.79	7.16	3.58	10.74	5.37
35-39	5.66	2.83	11.32	5.66	16.98	8.49
40-44	9.24	4.62	18.48	9.24	27.72	13.86
45-49	14.80	7.40	29.60	14.80	44.40	22.20
50-54	22.32	11.16	44.64	22.32	66.96	33.48
55-59	32.80	16.40	65.60	32.80	98.40	49.20
60-64	48.00	24.00	96.00	48.00	144.00	72.00
65-69	66.50	33.25	133.00	66.50	199.50	99.75
70-74	93.50	46.75	187.00	93.50	280.50	140.25
75+	130.92	65.46	261.84	130.92	392.76	196.38

†Coverage above \$20,000 always requires Evidence of Insurability.

## Spouse (Coverage may not exceed member's coverage.)

Member's Age	Cost per \$10,000 of Coverage		Cost for \$20,000 of Coverage		Cost for \$30,000 of Coverage†	
	Cost per Month	Cost per Paycheck	Cost per Month	Cost per Paycheck	Cost per Month	Cost per Paycheck
<25	\$ 0.80	\$ 0.40	\$ 1.60	\$ 0.80	\$ 2.40	\$ 1.20
25-29	1.20	0.60	2.40	1.20	3.60	1.80
30-34	1.82	0.91	3.64	1.82	5.46	2.73
35-39	2.88	1.44	5.76	2.88	8.64	4.32
40-44	4.68	2.34	9.36	4.68	14.04	7.02
45-49	7.48	3.74	14.96	7.48	22.44	11.22
50-54	11.28	5.64	22.56	11.28	33.84	16.92
55-59	16.56	8.28	33.12	16.56	49.68	24.84
60-64	24.24	12.12	48.48	24.24	72.72	36.36
65-69	42.26	21.13	84.52	42.26	126.78	63.39
70-74	59.30	29.65	118.60	59.30	177.90	88.95
75+	78.10	39.05	156.20	78.10	234.30	117.15

†Coverage above \$20,000 always requires Evidence of Insurability.

## Children (Coverage may not exceed 50% of member's coverage.)

Age	Cost per \$5,000 of Coverage		Cost for \$10,000 of Coverage		Cost for \$15,000 of Coverage	
	Cost per Month	Cost per Paycheck	Cost per Month	Cost per Paycheck	Cost per Month	Cost per Paycheck
<26	\$1.27	\$0.635	\$2.54	\$1.27	\$3.81	\$1.905

# Critical Illness Outline of Coverage for Active Members

The certificate is a group certificate. The certificate provides critical illness coverage ONLY. The certificate does NOT provide comprehensive medical or hospital insurance, Medicare supplement insurance, long-term care insurance, nursing home insurance only, home health care insurance only, or nursing home and home care insurance. You may also contact your local Social Security office or Prudential and obtain a copy of the Guide to Health Insurance for People with Medicare.

## IMPORTANT INFORMATION FOR RESIDENTS OF CERTAIN STATES:

There are state-specific requirements that may change the provisions under the Coverage described in this Outline of Coverage. If you live in a state that has such requirements, those requirements will apply to your Coverage and are made a part of your Outline of Coverage. This means the requirements of the state where you reside at the time of loss could change the benefits to which you may be entitled if you become insured under the Coverage. Prudential has a website that describes these state-specific requirements. You may access the website at [www.prudential.com/etonline](http://www.prudential.com/etonline). When you access the website, you will be asked to enter your state of residence and your Access Code. **Your Access Code is CVGCR.**

If you are unable to access this website, want to receive a printed copy of these requirements, or have any questions, call Prudential at 1-866-439-9026.

## Critical Illness coverage for you and your dependents

The items below are only highlights of your coverage. For a full description, please read the entire Group Insurance Certificate.

## Coverage for certain Critical Illnesses and Procedures:

This coverage pays benefits for certain Critical Illnesses and Procedures. Critical Illnesses and Procedures means the person's:

- ▶ Alzheimer's Disease
- ▶ Blindness
- ▶ Cancer in Situ (partial benefit)
- ▶ Coma
- ▶ Coronary Artery Obstruction
- ▶ Deafness
- ▶ Heart Attack
- ▶ Heart Valve Malfunction
- ▶ Invasive Cancer (full benefit)
- ▶ Major Organ Transplant
- ▶ Parkinson's Disease
- ▶ Renal (Kidney) Failure
- ▶ Stroke
- ▶ Terminal Illness

See the Benefit Definitions pages of your group certificate for a definition of each Critical Illness and Procedure.

## Benefits for a Critical Illness or Procedure are payable only if:

- (1) The person is diagnosed with the Critical Illness while a Covered Person; or
- (2) The person has the Critical Procedure while a Covered Person.

Not all such Critical Illnesses or Procedures are covered. See Critical Illnesses or Procedures Not Covered, on Page 14.

**First Occurrence Benefit Amount Payable:** The amount payable for the First Occurrence of a Critical Illness or Procedure depends on the type of Critical Illness or Procedure as shown below and the Amount of Insurance the person elects (as explained on the next page). All benefits are subject to the Lifetime Maximum Benefit in the next column.

Critical Illness or Procedure:	Percent of the Person's Amount of Insurance
Alzheimer's Disease	100
Heart Attack	100
Invasive Cancer (full benefit)	100
Major Organ Transplant	100
Parkinson's Disease	100
Renal (Kidney) Failure	100
Stroke	100
Blindness	25
Cancer in Situ (partial benefit)	25
Coma	25
Coronary Artery Obstruction	25
Deafness	25
Heart Valve Malfunction	25
Terminal Illness	25

Reoccurrence Benefit Amount Payable: The amount payable for a Reoccurrence of a Critical Illness or Procedure is 50% of the amount paid to the person for the First Occurrence of the Critical Illness or Procedure. All benefits are subject to the Lifetime Maximum Benefit below.

**Reoccurrence of a Critical Illness or Procedure means:**

- (1) A person is positively diagnosed by a Doctor as having an additional occurrence or reoccurrence of a Critical Illness or Procedure for which a benefit was paid under this Coverage; and
- (2) The date of the diagnosis of the additional occurrence or reoccurrence is more than 180 days after the date of such prior benefit payment.

**Lifetime Maximum Benefit:** No more than the Lifetime Maximum Benefit will be paid for all of a Covered Person's Critical Illnesses or Procedures.

The Lifetime Maximum Benefit for a Covered Person is 200% of the person's Amount of Insurance.

**Benefit amounts for you:**

The amount of insurance is the amount for your Benefit Class. The Benefit Classes for your Association are listed in the next column. You may enroll for the plan shown in the next column. If you may choose the amount of insurance or if there are options from which to select, the amount for which you enroll will be recorded by your Association and reported to Prudential.

**Amount of Insurance for Each Benefit Class:**

Benefit Classes	Amount of Insurance
All Active Members	Any multiple of \$10,000
Maximum Amount	\$200,000

**Guaranteed Issue Limit on the Amount of Member Insurance:**

There is a limit on the amount for which you may be insured without submitting evidence of insurability. This is called the Guaranteed Issue Limit. If you're a new hire or enroll during a school visit, your Guaranteed Issue Limit is \$20,000. Otherwise all coverage would require proof of good health.

**Benefit amounts for your dependents:**

The amount of insurance is the amount for your Benefit Class. You may enroll your Qualified Dependents for the plan shown below. If you choose the amount of insurance or if there are options from which to select, the amount for which you enroll will be recorded by your Association and reported to Prudential. **Your Benefit Class is determined by the classification of your Qualified Dependents and the amount for which you enroll as shown in this table.**

Qualified Dependents Classification	Amount of Insurance*
Your spouse, Civil Union Partner, or Domestic Partner	Any multiple of \$10,000
	Maximum Amount: \$200,000
Your children	Any multiple of \$5,000
	Maximum Amount: \$15,000

\*Spouse coverage may not exceed member's coverage amount, and children's coverage may not exceed 50% of member's coverage amount.

**Guaranteed Issue Limit on Dependent Spouse, Civil Union Partner, or Domestic Partner Amounts:**

There is a limit on the amount for which your Qualified Dependent Spouse, Civil Union Partner, or Domestic Partner may be insured without submitting evidence of insurability for the spouse, Civil Union Partner, or Domestic Partner. This is called the Guaranteed Issue Limit.

If you're a new hire or enroll during a school visit, the Guaranteed Issue Limit for Dependent Spouse, Civil Union Partner, or Domestic Partner Amounts is \$20,000. Otherwise all coverage would require proof of good health.

# Critical Illness Outline of Coverage for Active Members, continued

## Critical Illness or Procedures not covered:

A Critical Illness or Procedure is not covered if it is caused by, contributed to by, or resulting from, directly or indirectly, any of these:

- (1) Attempted suicide, while sane or insane.
- (2) Intentionally self-inflicted Injuries, or any attempt to inflict such Injuries.
- (3) War, or any act of war. "War" means declared or undeclared war and includes resistance to armed aggression.
- (4) Travel or flight in any vehicle used for aerial navigation. This includes getting in, out, on or off any such vehicle. This (4) does not apply if the person is riding as a fare-paying passenger in a licensed aircraft provided by a common carrier and operating between definitely established airports.
- (5) Commission of a crime for which you have been convicted under state or federal law.
- (6) Being under the influence of alcohol, or alcohol intoxication, as defined by the laws of the jurisdiction in which the Critical Illness or Procedure occurred. Conviction is not required for a determination of being intoxicated.
- (7) Being under the influence or taking any narcotic, unless prescribed by and administered in accordance with the advice of the Covered Person's Doctor.

## Pre-Existing Condition limitations:

A Critical Illness or Procedure is not covered if it is caused by, contributed to by, or resulting from a Pre-Existing Condition.

A person has a Pre-Existing Condition if both (1) and (2) are true:

- (1) The person received medical treatment, consultation, care, or services, including diagnostic measures, from a Doctor or took prescribed drugs or medicines, or followed treatment recommendation in the 6 months just prior to the person's effective date of coverage or the date an increase in the person's benefits would otherwise be available
- (2) The person's Critical Illness or Procedure begins within 6 months of the date the person's coverage under the plan becomes effective

## Special Rules for Pre-Existing Conditions If You Were Covered Under Your Association's Prior Plan:

Special rules apply to Pre-Existing Conditions, if this critical illness plan replaces your Association's prior plan, and: you were covered by that plan on the day before this plan became effective; and you became covered under this plan within 31 days of its effective date.

### The special rules are:

- (1) If the Association's prior plan did not have a Pre-Existing Condition exclusion or limitation, then a Pre-Existing Condition will not be excluded or limited under this plan.
- (2) If the Association's prior plan did have a pre-existing condition exclusion or limitation, then the limited time does not end after the first 6 months of coverage. Instead it will end on the date any equivalent limit would have ended under the Association's prior plan.
- (3) If the change from your Association's prior plan to this plan of coverage would result in an increase in the amount of benefits for a person, the benefits for the person's Critical Illness or Procedure that is due to a Pre-Existing Condition will not increase. Instead, the benefits are limited to the amount the person had on the day before the plan change. This applies whether or not the Association's prior plan had a Pre-Existing Condition exclusion or limitation.

## Benefit for National Cancer Institute (NCI) Evaluation:

**This additional benefit for NCI evaluation pays benefits** for a Covered Person's evaluation or consultation at an NCI-designated cancer center only if both of these conditions are met:

- (1) The Covered Person is seeking the evaluation or consultation as a result of receiving a diagnosis of Cancer
- (2) The purpose of the evaluation or consultation is to determine the appropriate course of treatment

National Cancer Institute (NCI) Evaluation Benefit Amount Payable: An amount equal to:

- (1) \$500; plus
- (2) \$250 for the transportation and lodging of the Covered Person requiring the evaluation if the NCI facility is more than 100 miles from the Covered Person's primary residence.

NCI Evaluation Benefit Lifetime Limit: The NCI Evaluation Benefit is payable once during the lifetime of each Covered Person.

## Transportation Benefit:

This additional benefit for transportation pays benefits for the travel expenses associated with a Covered Person's round-trip between the Covered Person's primary residence and a hospital or medical facility only if both of these conditions are met:

- (1) The Covered Person needs to travel to the hospital or medical facility to receive treatment for a Critical Illness or to have a Critical Procedure performed
- (2) The hospital or medical facility is more than 100 miles from the Covered Person's primary residence

Transportation Benefit Amount Payable: An amount equal to the lesser of:

- (1) The actual charges incurred for travel by train, plane, or bus, plus \$0.50 per mile for travel by personal car; and
- (2) \$1,500.

Transportation Benefit Annual Limit: The Transportation Benefit is limited to one benefit payment per Calendar Year for each Covered Person receiving treatment during that visit.

## Lodging Benefit:

This additional benefit for lodging pays benefits for a Covered Person's lodging expenses only if all of these conditions are met:

- (1) The Covered Person needs to stay overnight in order to receive treatment for a Critical Illness or to have a Critical Procedure at a hospital or medical facility.
- (2) The hospital or medical facility is more than 100 miles from the Covered Person's primary residence.
- (3) The lodging occurs not more than 24 hours prior to the treatment or procedure, and not more than 24 hours after the treatment or procedure.

Lodging Benefit Amount Payable: \$60 per day.

Lodging Benefit Annual Limit: The Lodging Benefit is limited to 60 days per Calendar Year for each Covered Person receiving treatment during that visit.

This outline of coverage is a very brief summary of your certificate.

The certificate itself sets forth the rights and obligations of both you and the insurance company. It is therefore imperative that you READ YOUR CERTIFICATE carefully.

The anticipated loss ratio for this certificate is 75%. This ratio is the portion of future premiums which Prudential expects to return as benefits, when averaged over all people with this certificate.

## ► How to Enroll:

**Enroll when first becoming an NJEA member or returning from unpaid leave.** Fill out the attached Enrollment Form and mail it in the business reply envelope provided within 120 days of becoming a member. When you return from unpaid leave and were covered under the NJEA Disability Insurance Program and/or Critical Illness Insurance before your leave, fill out the Enrollment Form and mail it in the business reply envelope within 90 days of returning to work.

**Sign up after an enrollment meeting at your school.** Fill out the attached Enrollment Form and give it to the Prudential representative at the meeting. Or mail it using the business reply envelope provided within 60 days of the enrollment meeting.

**Enroll at any other time.** You may enroll for coverage at any time by answering health questions. Fill out the attached Enrollment Form and mail it in the business reply envelope provided.

## Things to know about Open Enrollment

Open Enrollment generally happens only once every 3 years, so now may be a good time to enroll.

You're eligible to enroll for coverage if you're an NJEA member and work at least 15 hours per week. You can keep your coverage if you change districts, provided you notify us of the transfer within 90 days. You can enroll your spouse and dependents for Critical Illness, only if you're enrolled.



You're guaranteed acceptance if you enroll during the first 120 days of NJEA membership, during the first 60 days after an enrollment meeting at your school, or during the first 90 days after you return from unpaid leave (provided you were covered under the NJEA Endorsed Disability Insurance Program before your leave).

## Need help or have questions?

If you have questions about enrollment, claims, or premium payments, call **800-727-3414**.

- Option 1 for Claims
- Option 2 for Billing
- Option 3 for Enrollment

Email us: [info@educators-insurance.com](mailto:info@educators-insurance.com)

Visit <http://www.educators-insurance.com>

## Don't delay!

**Enrolling is fast and simple, so do it now. The sooner you enroll, the sooner you will have coverage.**

Please mail or fax enrollment forms to:

**Educators Insurance Services**  
**4000 Route 66–Suite 144**  
**Tinton Falls, NJ 07753-7300**  
**Fax 732-918-2001**

1 [www.prudential.com/about](http://www.prudential.com/about). 2 American Payroll Association, "Getting Paid in America" Survey, 2016. 3 David U. Himmelstein, MD, Deborah Thorne, PhD, Elizabeth Warren, JD, and Steffie Woolhandler, MD, MPH, "Medical Bankruptcy in the United States, 2007: Results of a National Study," American Journal of Medicine, 2009. 4 Prudential Financial Wellness Survey, April 2014. 5 Out-of-pocket expenses related to an illness or injury may be both medical and non-medical expenses.

This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical, or major medical insurance as defined by the New York Department of Financial Services.

**This coverage is not health insurance coverage (often referred to as "Major Medical Coverage").**

**This type of plan is NOT considered "minimum essential coverage" under the Affordable Care Act and therefore does NOT satisfy the individual mandate that you have health insurance coverage. If you do not have other health insurance coverage, you may be subject to a federal tax penalty.**

Group Critical Illness Insurance coverage is a limited benefit policy issued by The Prudential Insurance Company of America, a Prudential Financial company, Newark, NJ. Prudential's Critical Illness Insurance is not a substitute for medical coverage that provides benefits for medical treatment, including hospital, surgical, and medical expenses, and does not provide reimbursement for such expenses. The Booklet-Certificate contains all details, including any policy exclusions, limitations, and restrictions, which may apply. If there is a discrepancy between this document and the Booklet-Certificate/Group Contract issued by The Prudential Insurance Company of America, the Group Contract will govern. A more detailed description of the benefits, limitations, and exclusions applicable are contained in the Outline of Coverage provided at time of enrollment. Please contact Prudential for more information. Contract provisions may vary by state. Contract Series: 114774.

**PruProtect Six-Month, PruProtect Two-Year, and PruProtect Plus Short Term and Long Term Disability Insurance** coverages are issued by The Prudential Insurance Company of America, Newark, NJ. This brochure is intended to be a summary of your benefits and does not include all plan provisions, exclusions, and limitations. A Booklet-Certificate with complete plan information, including limitations and exclusions, will be provided. If there is a discrepancy between this document and the Booklet-Certificate issued by The Prudential Insurance Company of America, the terms of the Booklet-Certificate will govern. Contract provisions may vary by state. Contract Series: 83500.

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