

YOUR LIFE INSURANCE & DISABILITY BENEFITS

What Are The Life Insurance Benefits?

The Fund provides a \$5,000 life insurance benefit (\$1,000 for covered part-time employees) to your designated beneficiary if you die from any cause either on or off the job – while you are insured. This benefit is underwritten by a life insurance company, Amalgamated Life.

<http://www.amalgamatedlife.com>

Amalgamated Life
333 Westchester Ave
White Plains, NY 10604
Attention: Life Claims
(914) 367-5000

How Do You Designate A Beneficiary?

You can name anyone you want as a beneficiary by filing a Designation of Beneficiary card with the Fund Office. You may also change your beneficiary at any time by filing a new card with the Fund Office.

How Does Your Beneficiary File A Claim?

Your beneficiary must contact the Fund Office, obtain a claim form from Amalgamated Life and file it within a reasonable period of time. After filling out the form, your beneficiary must return it to Amalgamated Life with one certified copy (with a raised seal) of your death certificate.

If no beneficiary card is on file or if your named beneficiary is not alive, the person claiming the life insurance benefit must complete an affidavit of survivorship form.

If there is no beneficiary, your benefits will be paid to your estate. If your beneficiary is a minor, proof of guardianship of the property of the minor must be submitted before any claim can be paid.

What If You Become Disabled?

If you become totally and permanently disabled before age sixty (60), your insurance will continue at no cost to you for as long as you are disabled. You have to submit proof of your disability to the insurance company periodically in order for your life insurance to continue.

What Are The Conversion Privileges?

If your coverage by the Fund terminates, you may convert the life insurance to an individual policy within thirty-one (31) days without medical examination. The amount of your converted policy cannot be more than the amount provided under the group plan. You may choose any type of individual policy then being written by the insurance company except term insurance. The premium cost to you will be based upon your class of risk and your age at the time of conversion. Applications for conversion are available by contacting Amalgamated Life. If you die within the thirty-one (31) day conversion period, the insurance company will pay the same life insurance benefits as though you were still insured through the Fund.

What Are The Accidental Death and Dismemberment Benefits?

Accidental death and dismemberment benefits are payable to you or your beneficiary if you die or suffer a loss of your hands or feet at or above the wrist of ankle joint or a total and permanent loss of sight.

Benefits are paid only if the loss is the direct result of any injury caused by an accident. The loss must occur within thirty (30) days after the accident.

	Full-time Employees	Part-time Employees
• Loss of life.....	\$5,000.....	\$1,000
• Loss of two limbs, sight of both eyes		
or		
• Loss of one limb and sight of one eye.....	\$5,000.....	\$1,000
• Loss of one limb or sight of one eye.....	\$2,500.....	\$500

No more than the full benefit amount will be paid for all losses resulting from any one accident.

How Do You File A Claim?

If you suffer dismemberment, you must get a claim form from Amalgamated Life and file it within ninety (90) calendar days of your loss. Claims submitted after the ninety (90) day limit will be denied.

If you die, your beneficiary must contact the Fund Office, obtain a claim form from Amalgamated Life and file it within ninety (90) calendar days of your death or the claim will be denied. After filling out the form, your beneficiary must return it to Amalgamated Life with one certified copy (with raised seal) of your death certificate.

If no beneficiary card is on file or if your named beneficiary is not alive, the person claiming your benefits must complete an affidavit of survivorship form.

If there is no beneficiary card on file and no person is entitled to your benefit, your benefit will be paid to your estate. If your beneficiary is a minor, proof of guardianship of the property of the minor must be submitted before any claim can be paid.

What Are The Limitations To Your Accidental Death And Dismemberment Insurance?

Benefits will not be paid if the loss is the result of:

- Suicide or an intentionally self-inflicted injury;
- Potomac poisoning;
- Bacterial infection (except pus-forming infection resulting from an accidental wound);
- Disease, bodily or mental infirmity;
- Participating in the commission of a crime; or
- War or any act of war or service in any military, navel or air force of any country while that country is engaged in war or police action as a member of any military, naval or air organization.

Are There Conversion Privileges?

No. If your coverage terminates, you cannot convert this insurance to an individual policy.

What Are The Weekly Accident and Sickness Benefits?

If you become disabled as a result of a non-occupational accident or sickness and cannot perform your job, you are entitled up to \$250 a week for a maximum of thirteen (13) weeks or \$50 a day for partial weeks of disability for up to sixty-five (65) working days. The Weekly Accident and Sickness Benefits begin after you have used up all the paid sick leave (including any extensions of paid sick leave granted by your employer) to which you are entitled. Your pay stub showing a zero sick leave balance or your employer's statement showing no remaining sick leave eligibility is sufficient to demonstrate satisfaction of this eligibility requirement.

There is a seven (7) day waiting period for this benefit, unless you are hospitalized. In other words, once you have used up your paid sick leave (including any extensions of paid sick leave granted by your employer), your Weekly Accident and Sickness Benefits will begin no sooner than your eighth (8th) consecutive day of disability or the day you become hospitalized, whichever is earlier. You must provide documentation of the disability from a licensed physician

on the eighth (8th) consecutive day of disability or from the hospital on the first (1st) day of disability.

You must see a physician during the first week of your disability to be eligible for Weekly Accident and Sickness Benefits. If you see a physician at a later date, your benefits will begin as of the later date.

NOTE: Weekly accident and sickness benefits are taxable income.

What Are The Eligibility Requirements?

You must meet the following requirements before benefits become payable:

- You are unable to perform the duties of your job;
and
- You are under the care of a licensed physician or licensed podiatrist
and
- You are not receiving Workers' Compensation.*

** If you have made a claim to the Workers' Compensation Board which claim has been controverted by your employer, the Fund will pay Weekly Accident and Sickness Benefits. However, if the Workers' Compensation Board's decision is in your favor, you must repay the Fund for the period covered by Workers' Compensation during which you received this benefit.*

You do not have to be confined to your home or a hospital to be eligible.

What Serves As Proof Of Disability?

You must submit proof of your disability on a form approved of by the Fund no later than ninety (90) calendar days after the onset of your disability.

What Are Successive Periods Of Disability?

If you recover from a disability and again become disabled from the same or a related accident or illness, after less than two (2) weeks of active full-time work, both disabilities will be considered as one period of disability. You will be entitled to an aggregate maximum of thirteen (13) weeks of payment. However, if your second disability is the result of a totally unrelated accident or illness and you have returned to full-time work for at least one (1) full day, you will be entitled to a new thirteen (13) week payment maximum.

What Is Not Covered?

No benefits are payable for:

- Disabilities covered by Workers' Compensation;
- Periods when you were not in covered employment;
- Periods when you are not under the care of a licensed physician;
- Disabilities resulting from war or acts of war;
- Disabilities resulting from intentional, self-inflicted injuries; **or**
- Disabilities which do not exceed the seven (7) day waiting period, when you are not hospital confined.

How Do You File A Claim?

To file a claim, follow these steps:

- Request a Weekly Accident and Sickness Benefits Claim Form from the Fund Office.
- Complete and sign only your portion of the form.
- Your doctor must complete and sign his or her portion of the form.
- You must provide recertification of the disability two weeks before the expected return date stated by your physician.

What is the Retirement, Pension, and Health Insurance Counseling Benefit?

When you are planning to retire, or at any time when you have problems concerning your pension or health insurance coverage, you have the opportunity to benefit from the guidance of professional counselors.

Retirement and Pension counseling is available by appointment only and is held at the Fund Office. You can make an appointment by calling 1-212-966-5353 or via your member portal at www.cwa1180.org.

When you come to the Fund Office for your appointment, it will be helpful to bring with you all necessary information and material pertinent to your problem.

In addition, special group retirement counseling sessions are held for employees who plan to retire. You are urged to register for these sessions if you are planning retirement within the coming year. Registration may be made by telephone by calling the Fund Office at the number listed above.