

AFLAC Short Term Disability Plan Q&A

Q: Can I enroll in the AFLAC plan anytime?

A: No, you can only enroll during your initial eligibility period, and then during any announced open enrollment period.

Q: If I enroll during my initial eligibility period is there a health questionnaire to complete?

A: If your monthly benefit level is up to \$3,000 there is no health questionnaire during your initial eligibility period. If your benefit level is greater than \$3,000 (up to the max benefit of \$6,000) you will have to complete a short health questionnaire and are subject to underwriting approval.

Q: If I'm applying for enrollment above \$3,000 during this initial eligibility period and my health questionnaire is denied, can I apply for a lower benefit where the questionnaire isn't required?

A: Yes, if you answer "yes" to any of the questions on the health questionnaire during your initial eligibility period, your application for benefits above \$3,000 will be denied – BUT you can enroll in a benefit less than but not greater than \$3,000.

Q: Do I have to take the amount of disability insurance that correlates to my salary?

A: No, the amount that correlates to your salary is the maximum you can take – however you can take lower amounts of coverage – depending on your specific financial need.

Q: If I enroll late will it be guarantee issue?

A: There is no opportunity to enroll late. You can only enroll during designated enrollment periods. Enrollment after your initial eligibility period will require you to complete the health questionnaire.

Q: How can I enroll?

A: You can enroll online, via paper enrollment form or via toll free number. Information on enrollment can be obtained at www.usmc-mccs.org/employ/benefits or from your local HR office. The URL to log in to the online enrollment tool is www.wecareworks.com/aflac (you will need case ID# C124, user ID# and password) or you can call 800-983-0979 and schedule an appointment to enroll over the phone.

Q: When I enroll, will I get confirmation of my enrollment?

A: Yes, closer to the plan effective date you will get a letter from AFLAC with your policy number and effective date.

Q: What information will I need to enroll?

A: You'll need to know the case ID # which is C124. You will also need to know your Social Security number as your user ID#. The password (case sensitive) for everyone is MCCSNAF.

Q: What is the time period for benefits?

A: Benefits can be paid to you up to 3 months – depending on your disability. Child birth claims are paid at a standard 12 weeks (both vaginal and cesarean delivery), as long as you do not return to work before the 12 week period has ended (you cannot return to work and continue to receive disability).

Q: What is the waiting period?

A: The elimination period (waiting period) is 14 calendar days and begins from the date your disability starts, however, if you are on disability for child birth the waiting period is waived and benefits are paid from the first day of disability (usually the day of delivery).

Q: What is the benefit amount?

A: This amount depends on what you signed up for, but full benefits are up to 60% of covered salary.

Q: Are their partial benefits?

A: Yes, partial benefits may be payable (i.e. when you are only able to work part time due to covered disability) up to 50% of your covered benefit (i.e. up to 50% of your 60% benefit).

Q: Is there a pre-existing restriction?

A: Yes, there is a pre-existing limitation during first 12 months – benefits may be payable up to 50% of covered benefit (i.e. 50% of your eligible 60% benefit).

Q: How often are benefits paid?

A: Once approved, benefits are paid monthly.

Q: How are benefits paid?

A: Once the claim is received and processed, benefits can be paid via direct deposit (typically within 4 days) or via check (typically in 10 days). The money you receive from AFLAC is tax-free.

Q: How are my premiums paid to AFLAC

A: Your premiums are payroll deductions and your employer will remit payment to AFLAC on your behalf.

Q: If I quit, can I keep my AFLAC plan?

A: Yes, your benefit is portable – and can follow you to your new employer. Your premium will become directly billed by AFLAC. AFLAC stipulations will apply. You must call AFLAC customer service at 800-433-3036 and port your coverage within 30 days of leaving MCCS.

Q: How much does coverage cost?

A: Your premium is based on your salary replacement amount and your age. Refer to the price chart for your applicable premium, log into the web portal www.wecareworks.com/aflac to view your individual benefit amount during your eligibility period or open enrollment period, or contact AFLAC directly.

Q: Are there age restrictions?

A: Yes, the minimum age to participate is 18 and the maximum age is 74.

Q: Will my premium increase when I have a birthday that takes me to the next premium age bracket?

A: No, your premium is locked into the premium of when you signed up. It will not increase with age as long as you keep your coverage, and don't cancel and re-enroll.

Q: What happens if an AFLAC participant becomes age 74?

A: Their coverage will continue until they turn age 75 and then it will cease.

Q: Are my premiums deducted pre or post tax?

A: Premiums are deducted on an after tax basis, thus your AFLAC benefit is not taxable.

Q: If I go out on LWOP – and don't have a paycheck how will my premiums to AFLAC be paid?

A: While you are on LWOP your premiums will fall into arrears status. You will be responsible to pay these arrears while you are in LWOP status. If you fail to remit payment your coverage will be cancelled. When you return to work you will be provided an opportunity to re-enroll in the Plan.

Q: If I get a salary increase during the year does my disability income insurance increase too?

A: No, the amount of your disability insurance that you enrolled in initially will remain the amount of your coverage for the remainder of that year (or until you elect to change it during an enrollment period). If you want to increase your coverage during the announced open enrollment period, to an amount that correlates to your new salary you can do that but will be subject to enrollment restrictions (i.e. questionnaire and underwriter approval) for the higher amount.

Q: If I decide I no longer want this coverage, can I cancel at any time?

A: Yes, because your coverage premiums are paid with post tax earnings, you can cancel at any time, there is no qualifying event requirement. Your HR office will have the service request form you will need to complete to make changes. Please note, if you decide to re-enroll at a later date you will have to complete the short health questionnaire and be approved prior to enrolling.

Q: If I cancel coverage can I reenroll?

A: Yes, you can apply for reenrollment during announced open enrollment periods, but enrollment requirements will apply (questionnaire and underwriter approval) before you can enroll.

Q: If I transfer to another MC NAF employer, does my current AFLAC coverage continue?

A: Yes, if you are employed with another MC employer, your current coverage will continue if you elect to have it continue. Your AFLAC coverage is portable, in other words it can transfer to any new employer if you elect continuation.

Q: If I transfer to another MC NAF employer, will I have an opportunity to re-enroll in AFLAC.

A: If you cancel your AFLAC coverage when you terminate from your current employer, you will have to re-apply with your new employer. When you re-apply, any pre-existing limitations will be applicable if your application is accepted.

If you still have questions or need clarification, please contact the
MCCS AFLAC representative at 800-983-0979