## Short-term Disability Coverage and Rates

## July 2022 STD Renewal

## The following rates shall apply from July 1, 2022 to June 30, 2023

Rating RenewalJulySuffix #174

## BENEFIT SCHEDULE

Class	Class Name	l Probationary Period	Benefit Amount (% of Base Weekly Earnings)	Maximum Weekly Benefit	Maximum Benefit Period	Waiting I Accident	Period Illness
1	All Eligible Employees	0M	66.67%	\$950	13 weeks	1 day(s)	8 day(s)
<i></i>		NTRIBUTORY STATUS ANI	D PARTICIPAT	<u> </u>	ſS		
Class 1	Class Name All Eligible Employees			Contributory Y/N N		Participa 1009	
	RATE						
or Each \$10 of Weekly Benefit Per Month		\$0.35					

Monthly rates and continued Member Group coverage are based on 75% participation of Eligible Employees if contributory status is Y or 100% participation if contributory status is N, per applicable HealthTrust minimum participation requirements.

PROBATIONARY PERIOD EXCEPTIONS

None

SPECIAL NOTES

Evidence of Insurability needed for all late enrollees (contributory groups only).