Short-term Disability Coverage and Rates

July 2023 STD Renewal

The following rates shall apply from July 1, 2023 to June 30, 2024

Rating Rene	ewal July						
Suffix #	174						
		BENEFT	T SCHEDULE				
Class	Class Name	Probationary Period	Benefit Amount (% of Base Weekly Earnings)	Maximum Weekly Benefit	Maximum Benefit Period	Waiting I Accident	Illness
1	All Eligible Employees	0M	66.67%	\$950	13 weeks	1 day(s)	8 day(s)
		ONTRIBUTORY STATUS ANI	D PARTICIPAT	•	TS	Destiste	-41
Class	Class Name All Eligible Employees		Contributory Y/N N			Participation 100%	
	RATE						
For Each \$1	0 of Weekly Benefit Per Month	\$0.39					
Monthly rat	tes and continued Member Group coverage are ble HealthTrust minimum participation require	e based on 75% participation of ements.	Eligible Employ	ees if contributory sta	atus is Y or 100% par	ticipation if contril	butory status is N,
		PROBATIONARY	PERIOD EXC	EPTIONS			
None							

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