Disability Insurance
Life Insurance

CTA Member Benefits for Educators

2019-2020 School Year

TheStandard®

CTA CALIFORNIA TEACHERS ASSOCIATION

E. Toby Boyd

President of CTA

As someone who's spent more than two decades in the California classroom, I understand what it takes to ready students for the future. The selfless energy, time and dedication you put into your roles to make our students succeed often leaves little time to look after your own needs. That's where your CTA Member Benefits can help you.

CTA offers you the opportunity to protect your paycheck and loved ones with Voluntary Disability and Life Insurance plans through Standard Insurance Company (The Standard). The plans were designed specifically for CTA members to offer high-quality coverage for you and your loved ones.

Endorsed by CTA Member Benefits since 2007, highly regarded for their service and integrity along with their history of strength and reliability for more than 100 years, we are confident The Standard is a partner you can trust. That's why CTA endorses only The Standard as a provider of Disability and Life Insurance. In fact, more than 77,000[1] of your peers have chosen The Standard to protect what matters most to them.

No matter how long you've been in the education field, I hope you will consider taking a moment to get the most value from your member benefits with protection from The Standard.

Sincerely,

E. Toby Boyd
CTA President

New educator or transferred school districts this year?

You have a special enrollment opportunity to apply for coverage with no health questions asked. Learn more on page 24 under "When can I enroll?"

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Quick Enroll

There are multiple ways to enroll:

Give your completed application to a representative of The Standard.

Fax your application to 888.414.0393 or email a scanned copy to ctaservice@standard.com.[2]

Mail your application to:
CTA Benefits and Services
PO Box 4744, Portland, OR 97208

Apply online at CTAMemberBenefits.org/TheStandard.

Apply over the phone with our dedicated CTA Customer Service team at 800.522.0406 (TTY), 7 a.m. to 6 p.m. Pacific Time, Monday through Friday.

1 As of 4/3/2019, based on data developed by The Standard.
2 Please note that email may not be a secure transmission unless you have the capability to encrypt your email when sent. Information once received by The Standard is protected.

Reset

Standard Insurance Company
CTA Benefits and Services
PO Box 4744 Portland OR 97208
Tel & TTY 800.522.0406 Fax 888.414.0393

Disability and/or Life Application for Enrollment for CTA-endorsed Plans

For additional information and forms visit CTAMemberBenefits.org/TheStandard

Please be sure to complete all sections to ensure prompt processing of your enrollment. Sign and date the completed form and return it to The Standard at the address above, email[1] a scanned copy to ctaservice@standard.com or fax to 888.414.0393.

EMPLOYEE INFORMATION Note: All fields are required.

FIRST NAME	MIDDLE INITIAL	LAST NAME	
HOME MAILING ADDRESS	CITY	STATE	ZIP
PRIMARY PHONE	PERSONAL EMAIL ADDRESS		
DATE OF BIRTH	GENDER ☐ Male ☐ Female	QUALIFYING FAMILY STATUS CHANGE WITHIN THE LAST 60 DAYS? ☐ No ☐ Yes Effective Date _____ Type _____	
SCHOOL DISTRICT *Please do not abbreviate.*	DATE FIRST HIRED AT CURRENT SCHOOL DISTRICT? ____ / ____ / ____		
CURRENTLY WORKING? ☐ Yes Hours Per Week _____ ☐ No	ANNUAL CONTRACT OR EQUIVALENT WITH YOUR EMPLOYER? ☐ Yes ☐ No		
WHAT IS YOUR JOB TITLE?	FULL TIME MEMBER OF THE ARMED FORCES? ☐ Yes ☐ No		
ARE YOU CURRENTLY (OR IN THE PROCESS OF BECOMING) A CTA MEMBER? ☐ Yes ☐ No *You must be an active member to have coverage.*			

COVERAGES

Refer to the enrollment materials provided when completing this form. Coverage may be subject to evidence of insurability (satisfactory proof of good health) requirements. If you have questions, please call The Standard's dedicated CTA Customer Service Department at 800.522.0406 or email ctaservice@standard.com.

Disability Insurance

☐ Disability

Gross Annual Salary
(Required)
$_____

Life Insurance and Dependents Life Insurance

SELF

☐ $25,000
☐ $50,000
☐ $75,000
☐ $100,000
☐ $150,000
☐ $200,000
☐ $250,000
☐ $300,000
☐ $350,000
☐ $400,000

DEPENDENTS (choose one or both)

Spouse/Domestic Partner

☐ $12,500
☐ $25,000
☐ $37,500
☐ $50,000
☐ $75,000
☐ $100,000

Spouse/Domestic Partner and Children

☐ $5,000

Dependent Information

☐ Spouse/Domestic Partner
☐ Child(ren) Number of Child(ren)_____

Please Note: The amount of Dependents Life Insurance **for each dependent** including spouse/domestic partner may not exceed 50% of your Life Insurance amount under the Group Policy.

SIGNATURE REQUIRED

I wish to make the choices indicated on this form. I authorize my employer to deduct premiums from my wages to cover my cost of insurance sponsored by California Teachers Association. I understand that my employer may provide updated payroll information to The Standard either periodically or at The Standard's request to ensure proper premium deductions are being made for my coverage. I understand that a copy of this form will be provided to my employer to facilitate payroll deduction for the coverages that I have elected. I understand that my premium deduction amount will change if my coverage or costs change. This authorization will remain in effect until cancelled by me or by The Standard. I certify that I meet the eligibility requirements of the coverage(s) for which I applied and understand that if I am no longer eligible my coverage(s) will end. I also certify that the information I have provided is accurate.

I understand that Disability Insurance coverage will not pay for benefits for disability due to any diagnosed mental or physical condition for which I have received treatment, care, services or taken prescription medication in the 30 calendar days prior to my insurance effective date unless I have worked 10 consecutive regular days of required attendance after my insurance effective date and prior to becoming disabled.

X **Signature**_____ **Date**_____

[1]Please note that email may not be a secure transmission unless you have the capability to encrypt your email when sent. Information once received by The Standard is protected.

Application Form Frequently Asked Questions

Q: What are qualifying family status changes?

A: A qualifying family status change is a marriage, divorce or legal separation; the initiation or dissolution of a domestic partner relationship; the birth or adoption of a child; the death of a spouse/domestic partner or child; the commencement or termination of a spouse/domestic partner's employment; or a change in employment from full-time to part-time by you or your spouse/domestic partner.

Q: What if I don't remember the "Date first hired at current school district"?

A: If you're a new hire or transferred districts in the past 180 days, please use the exact date of your first day at your new school district. If you're not a new hire or haven't transferred districts in the past 180 days, you can provide an estimated hire date.

Q: When do I need to complete the Medical History Statement on page 29?

A: The most common situations when a completed Medical History Statement is required include when:

- You apply for coverage outside of a special enrollment opportunity.
- You apply for more than the guaranteed amount of Life Insurance during a special enrollment opportunity.
- You apply for more than $30,000 of Dependents Life Insurance coverage.

Q: What are the special enrollment opportunities?

A: The Special enrollment opportunities include:

- A special enrollment opportunity sponsored by your local chapter.
- Within the first 180 days of new employment.
- Within 60 days of a qualifying family status change.

Note: In some situations a complete Medical History Statement may be required during a special enrollment opportunity.

Q: What should I do if I have additional questions?

A: If you have additional questions, please call The Standard's dedicated CTA Customer Service Department at 800.522.0406 (TTY) from 7:00 a.m. to 6:00 p.m. Pacific Time, Monday through Friday.

Q: Am I able to enroll over the phone?

A: Yes. Please call The Standard's dedicated CTA Customer Service team at 800.522.0406 (TTY), from 7:00 a.m. to 6:00 p.m. Pacific Time, Monday through Friday.

There are multiple ways you can enroll for coverage. Choose the best option for you on page 2.

It pays to be a CTA member

Student Loan Benefit and Cancer Benefit

CTA membership comes with many great benefits including access to the only CTA-endorsed Disability Insurance plans from Standard Insurance Company (The Standard).

Now, at no extra cost to you, when you protect your paycheck with CTA-endorsed Disability Insurance from The Standard, you also get access to two benefits from CTA:*

- Student Loan Benefit
- Cancer Benefit

These added benefits are available exclusively for members enrolled in the CTA-endorsed Voluntary Disability Insurance plans on a qualified disability claim.

See page 11 for more details

TheStandard

CTA CALIFORNIA TEACHERS ASSOCIATION

*The benefits are offered by CTA to eligible members on approved disability claims under the CTA-endorsed Voluntary Disability Insurance plans with a disability date on or after 9/1/2018 who meet additional specific criteria. CTA provides these benefits at no extra cost, and The Standard acts only as the claims administrator of these benefits. Student Loan and Cancer Benefits are not provided under the Disability Insurance policy.

To enroll in new coverage you must meet eligibility requirements including being an active CTA member. For costs and further details of the coverage, including exclusions, benefit waiting periods, any reductions or limitations and the terms under which the policies may be continued in force, please contact Standard Insurance Company at 800.522.0406 (TTY).

Being an educator is hard work.

As a California Teachers Association member, you know that better than anyone.

At The Standard, we know insuring educators isn't like insuring other professionals. You're doing work that matters to us all, so you deserve to have peace of mind when life throws changes or the unexpected your way. We're here to offer you that peace of mind and help you secure your future, so you can stay focused on doing your job well.

The Standard is the only carrier endorsed by CTA for **Disability and Life Insurance Plans.**

The Standard is privileged to be your exclusive carrier for Life and Disability Insurance. CTA recommends us because we've designed insurance plans with an educator's needs in mind.

Health Insurance pays your doctor. **Disability Insurance** pays **you.**

When covered by CTA-endorsed Disability Insurance through The Standard, if you encounter a health situation that keeps you from doing your job, you'll receive funds – paid directly to you – to use for things health insurance doesn't cover like rent, mortgage, groceries, childcare, credit cards, student loans and more.

For example, if an injury, illness, pregnancy or childbirth stops you from being able to do your job, with Disability Insurance from The Standard:

- You're eligible for disability benefits after missing 7 regular work days
- You'll get an extra $25 per day during your fully paid sick leave
- You're eligible for up to 75% of your regular daily contract salary

With CTA-endorsed **Life Insurance,** you can feel confident that you and your loved ones are better prepared in the event of your passing because you'll have access to our **Life Services Toolkit** – a resource that offers you:

- Identity theft recovery
- Will and estate planning
- Wellness tips
- Grief counselling
- Legal advice
- Financial assistance

All of this is included with a CTA-endorsed Life Insurance plan from The Standard at no additional cost.

Take advantage of your CTA-endorsed **Disability and Life Insurance** to make sure you're ready if life outside of school becomes harder than the job you do inside.

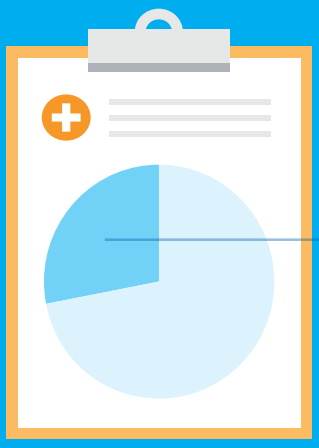
Confronting tough life topics can be hard. Protecting yourself from them should be easy.

We know making decisions about insurance can be difficult and uncomfortable. To make things easier, we've put together this booklet to help you make the best choice for yourself. The information in this booklet is effective September 1, 2019. The dedicated CTA Customer Service team is ready to answer your questions Monday – Friday, 7 a.m. to 6 p.m.

To apply: Complete the application in this booklet
Call us: 800.522.0406 (TTY)
Visit us online: CTAMemberBenefits.org/TheStandard

Why You Need Disability Insurance

The Risk of Disability is Real



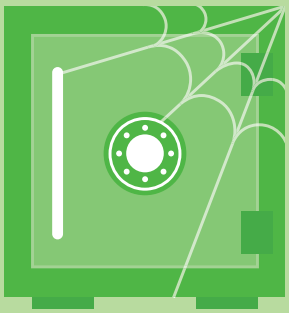
MORE THAN 25%
of today's 20-year-olds will become disabled during their career.[1]

Top Five Causes of Long Term Disability Claims[2]

- Muscle/bone disorders **29%**
- Cancer **15%**
- Pregnancy **9%**
- Accidents **9%**
- Mental disorders **9%**

Over half of Americans are Financially Unprepared for a Period of Disability

52%
of adult Americans have no savings earmarked for emergencies.[3]



Disability Insurance Helps You Pay for Things That Medical Insurance Doesn't Cover

Utilities

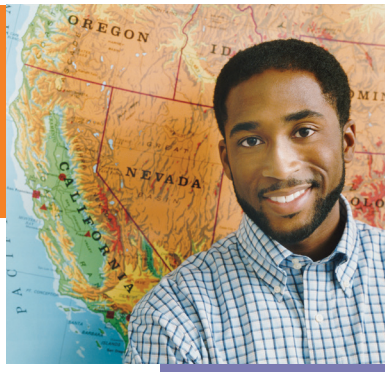
Rent/mortgage

College loans

Child care

1 Council for Disability Awareness, https://www.disabilitycanhappen.org/disability-statistic. Accessed April 9, 2019.
2 Council for Disability Awareness, https://www.disabilitycanhappen.org/disability-statistic. Accessed April 9, 2019. Figures have been rounded.
3 U.S. Federal Reserve Board, Report on the Economic Well-Being of U.S. Households in 2016, May 2017.

DISABILITY INSURANCE HIGHLIGHTS:



Disability Insurance
Protect what's important to you

Your income is likely your greatest asset. Protect it with CTA-endorsed Disability Insurance. Your Disability Insurance benefit is **paid directly to you** if you're unable to work due to illness, injury, pregnancy or childbirth. After all, your bills won't stop if you are unable to work. **Disability Insurance benefits can help pay the everyday expenses that health insurance doesn't cover, like your rent or mortgage, utilities, child care or student loans.**

Up to an Extra $500 or More

You may have a lot of sick leave saved, which you will be required to use while on disability leave. **The Standard will still pay an additional $25 per day, on top of your fully paid sick leave, to help with any extra expenses.** That can add up to $500 or more per month. Plus, as a CTA member you may also be eligible for additional benefits if you have an active Student Loan, or if your disability is due to Cancer.[1]

2 Years @ up to 75% of your Salary

Once your fully paid sick leave ends, you may be eligible for **up to 75% of your regular daily contract salary for up to two benefit years.** If you're receiving income from other sources[2] – such as substitute differential pay or workers' compensation - we'll coordinate with your other benefits when adding up your benefit payment.

On or Off the Job: You're Covered

If you're injured while you are working, The Standard still has you covered. If you're eligible for workers' compensation, **we will coordinate your claims and bridge the gap between your workers' compensation benefit and what would equal 75% of your regular daily contract salary.**

Short Preexisting Condition Exclusion Period

If you've had a health condition in the past, you may be worried about being eligible to file a claim. The CTA-endorsed plan has a preexisting condition exclusion period of 10 regular days of required attendance. **That means once your coverage becomes effective and you work 10 days in a row, you would be eligible to file a claim.**

The information in this booklet is effective September 1, 2019.

QUICK ENROLL
found on page 2

1 Student Loan Benefit and Cancer Benefit are offered by CTA to eligible members on approved Disability claims under the CTA-endorsed Disability Insurance plan who meet specific criteria. CTA provides these self-funded benefits, and The Standard acts only as the claims administrator of these benefits. Student Loan and Cancer Benefits are not provided under the Disability Insurance policy.

DISABILITY INSURANCE PLAN:

How Disability Insurance Benefits Work

During the Benefit Waiting Period	No benefits are payable during the benefit waiting period, which is the lesser of the first seven consecutive days of required attendance or 30 calendar days.
During fully paid sick leave following the Benefit Waiting Period	You will receive **$25 per day** of required attendance while you are receiving fully-paid sick leave, once you satisfy the benefit waiting period.
During Substitute Differential or Similar Pay following sick leave	Your total income will be no less than 75% of your regular daily salary. You will receive **up to 75% of your regular daily salary,** minus the amount the district pays you[1] and any other sources of deductible income[2] you may have. The minimum benefit will be **up to 25% of your regular daily salary** (so long as your total income doesn't exceed 100% of your regular daily pay) **or $30/day, whichever is greater**.
After Substitute Differential or Similar Pay Ends	You will receive **up to 75% of your regular daily salary,** less any sources of deductible income, while you continue to be disabled. The minimum benefit will be $30/day. Benefits are payable for up to two benefit years, while you continue to satisfy the definition of disability.

Features

- Disabilities occurring on or off the job are covered.
- Extra duty pay is covered for the first two benefit years. Extra duty pay may include coaching, after-school programs, summer-school sessions, advising or mentoring.
- If you are hospitalized as the result of your disability, you will receive an extra $35/day for each calendar day you are a bed-registered patient, for up to 60 days with no benefit waiting period.[3]
- While you are receiving disability benefits from The Standard, you do not need to pay premiums.
- If you are able to continue to work while disabled, you may be eligible for partial disability benefits.
- For any adverse decision made by The Standard that is upheld upon review, you have the right to have a panel of your CTA peers (the CTA Advisory Panel on Endorsed Services) review it.

1 Most districts will pay you a reduced salary (your regular daily salary less the cost of a substitute) during the first 100 days following your fully paid sick leave.

2 Examples of deductible income (if currently insured, see your certificate of insurance for a full listing and exceptions): substitute differential pay, personal leave pay, severance pay, catastrophic/extraordinary leave bank, salary continuation, workers' compensation, work earnings, social security, state disability, CalPERS/CalSTRS benefits.

3 For the first two benefit years only. Note, the definition of hospital does not include nursing homes, convalescent homes or extended care facilities.

What if I have a Preexisting Condition?

Disabilities caused by or substantially contributed to by preexisting conditions are not covered unless you have been continuously insured and actively at work for 10 consecutive, regular work days when you become disabled. The preexisting condition period is the 30-calendar-day period just before your insurance becomes effective. After your insurance takes effect and you work 10 consecutive regularly scheduled days, disabilities caused or contributed to by preexisting conditions are covered.

What is the Maximum Benefit Period?

Class 1
If you have 5 or more years of credited service under the California State Teachers Retirement System (CalSTRS) and/or the Public Employees Retirement System (CalPERS), your maximum benefit period is two benefit years following your fully paid sick leave.

Class 2
If you have less than 5 years of credited service under the California State Teachers Retirement System (CalSTRS) and/or the Public Employees Retirement System (CalPERS), your maximum benefit period is two benefit years following your fully paid sick leave, plus the following applicable period:

Your Age When Disability Begins	Maximum Benefit Period
59 or younger	To age 65
60 through 64	5 years
65 through 69	To age 70, or 1 year, whichever is greater
70 or older	1 year

How are my benefits calculated?

Class 1 and 2
For the first two benefit years: benefits are calculated based on your regular daily contract salary for each regular day of required attendance. It's based on your salary in effect for the contract year in which you become disabled.

Class 2 only
After the second benefit year, you may be eligible for up to 50% of your regular monthly contract salary minus any deductible income. In this case, benefits are calculated based on your regular monthly contract salary for each calendar month.

Student Loan and Cancer Benefits exclusively for CTA Members

CTA is always looking for ways to enhance their member benefits. CTA understands the emotional and financial burden members may experience due to outstanding student loans or being out of work on a disability claim due to a Cancer diagnosis. That's why CTA created and is providing the Student Loan Benefit and Cancer Benefit for CTA members.

Student Loan Benefit[1]
Active CTA members approved for a disability claim under the CTA-endorsed Voluntary Disability Insurance plans with an active student loan may be eligible for an additional benefit of up to $200 a month (for a maximum of $1,000, not to exceed the balance of the student loan).[2]

Cancer Benefit[1]
Active CTA members approved for a disability claim due to cancer under the CTA-endorsed Voluntary Disability Insurance plans may be eligible for an additional benefit of up to $200 a month (for a maximum of $1,000).[2]

Both benefits are paid in addition to the disability benefits from The Standard and are paid directly to CTA members to help pay for everyday expenses like student loads, rent/mortgage, or child care. These benefits are provided by CTA at no additional cost to members.

1 Student Loan Benefit and Cancer Benefit are offered by CTA to eligible members on approved Disability claims under the CTA-endorsed Disability Insurance plan who meet specific criteria. CTA provides these self-funded benefits, and The Standard acts only as the claims administrator of these benefits. Student Loan and Cancer Benefits are not provided under the Disability Insurance policy.

2 While you remain disabled, benefits to be paid in up to $200 monthly increments up to a maximum of $1,000.

Disability Insurance Premium Amounts

Annual Contract Salary Ranges	Monthly Premium[1]	Eleventhly Premium[1]	Tenthly Premium[1]
$0 – $44,499	$19.14	$20.88	$22.97
$44,500 – $53,249	$23.02	$25.11	$27.63
$53,250 – $60,249	$27.20	$29.67	$32.65
$60,250 – $67,249	$30.75	$33.55	$36.89
$67,250 – $76,249	$34.19	$37.30	$41.03
$76,250 – $85,249	$38.36	$41.85	$46.03
$85,250 – $94,249	$42.63	$46.51	$51.16
$94,250 – $103,249	$46.91	$51.17	$56.29
$103,250 – $112,249	$51.18	$55.83	$61.42
$112,250 – $121,249	$55.46	$60.50	$66.55
$121,250 and over	$59.73	$65.16	$71.68

Visit CTAMemberBenefits.org/TheStandard to watch a short video about Disability Insurance.

Extra Benefits

- **$50,000** Accidental Death and Dismemberment coverage.
- **Survivors Benefit:** Your beneficiary will receive a benefit of 3x your disability benefit, not reduced by deductible income, in the event of your passing while you are eligible for disability benefits.
- **Dependent Education Benefit:** You can receive a monthly benefit of $150 for each eligible student, with a maximum of $600 per month for all eligible students, if you have children or a spouse who are registered, and in full-time attendance, at a licensed or accredited educational institution beyond high school.
- **Child Care Benefit:** Your beneficiaries can receive up to $1,000 per year for three years for child care expenses in the event you suffer an accidental death.
- **Rehabilitation Plans** that may include training and education expenses, family (child and elder) care expenses, and job-search expenses.[5]
- **Reasonable Accommodations** – The Standard may cover your employer's expenses toward work-site modifications (up to $25,000) to help you return to work following a disability.[2]

1 Frequency of required premium payments (monthly, etc.) is determined by your employer. While monthly, eleventhly and tenthly are common deduction frequencies, your district may deduct premiums on an alternative frequency.

2 Subject to prior approval by The Standard.

Disability Insurance:
Terms you should know

Class 1: Participants who, on the date of disability, (a) have five or more years of credited service under the California State Teachers Retirement System (CalSTRS) and/or the Public Employees Retirement System (CalPERS) or (b) are not participants in either system.

Class 2: Participants who, on the date of disability, participate in but have less than five years of credited service under CalSTRS and/or CalPERS.

Regular day(s) of required attendance means any day(s) you are required to be actively at work based on the calendar dates of the school calendar and your employment contract in effect on the date you become disabled. The calendar dates in a subsequent contract year may not fall on the same days of the week as the school calendar in effect on your date of disability.

Extra duty day(s) of required attendance means any day(s) you are required to be actively at work based on the school calendar and your extra duty written agreement in effect on the date you become disabled that covers the time period following your disability.

Benefit year means (a) a period equal to the number of your regular days of required attendance under the terms of your employment contract with your employer for the contract year in which you become disabled, plus (b) any additional periods of restored sick leave.

Regular contract salary means your annual salary under the terms of your employment contract with the employer in effect for the contract year in which you become disabled. Regular contract salary does not include any additional compensation, such as overtime pay, weekend or summer-school work compensation, extra duty pay, bonuses or district-funded fringe benefits. The regular contract salary and the number of regular days of required attendance will not change after your date of disability.

Regular daily contract salary means your regular contract salary, divided by the number of your regular days of required attendance for the contract year in which you become disabled.

Regular monthly contract salary means your regular contract salary divided by 12.

Disability Insurance Worksheet

You have choices when it comes to purchasing Disability Insurance. You decide when to make the purchase and which carrier or plan is right for you. It's up to you!

The worksheet on page 14 is designed to help you make a smart and strategic evaluation by considering a few important questions about Disability Insurance plans. As you consider applying for coverage, we recommend that you carefully review each plan's terms, exclusions, and benefits, and consider how they would apply to your personal situation.

If you have any questions about the CTA-endorsed plans, feel free to call our dedicated CTA Customer Service Department at 800.522.0406 (TTY). Our representatives are available Monday - Friday, 7 a.m. to 6 p.m. Pacific Time.

	CTA-endorsed Plan[1]	Other Plans
Premium Rates and Coverage under the Plan		
How much will my Disability Insurance cost?	Premiums are based on your salary. Refer to the premium rates table on page 12.	
How long is the Preexisting Condition Period?	30 calendar days before the insurance effective date. Once your insurance takes effect, and you have worked ten (10) consecutive days, the preexisting condition exclusion period no longer applies.	
Are disabilities that occur on the job covered?	Yes. The CTA-endorsed plan covers disabilities that happen on and off the job.	
Are disabilities caused by mental disorders and substance abuse covered under the policy?	Yes. These conditions may be payable for up to two (2) full benefit years.	
What coverage for Accidental Death and Dismemberment is included?	$50,000 of Accidental Death and Dismemberment coverage is included.	
How the Plan Works		
If I go out on leave due to a disability, how long will I wait before my benefits start?	Once you are out on leave, you will need to serve a Benefit Waiting Period before benefits become payable. This is the lesser of seven (7) consecutive workdays or 30 calendar days.	
Do I need to use my sick leave?	Yes. But you may be eligible to receive benefits on top of your fully paid sick leave. See the “calculating your benefit section” below.	
If I need to be out of work for a long period of time due to a disability, how long will my benefits last?	For most educators, the Maximum Benefit Period is two (2) full years after your sick leave runs out (sick leave + two (2) benefit years).[2]	
What happens if I don’t agree with a claim decision?	For any adverse decision made by The Standard that is upheld upon review, you have the right to have a panel of your CTA peers (the CTA Advisory Panel on Endorsed Services) review it.	
Calculating Your Benefit		
What salary is my benefit based on?	Your benefit is based on your salary on the date of disability.	
Would Extra Duty Pay be included when calculating my benefits?	Yes, if you have an active or current written extra duty agreement (at the time of your approved disability) for coaching, summer school, etc. The pay you would receive from extra duty assignments is in addition to your regular benefit payments.	
Am I eligible for benefits while I’m in the hospital?	Yes, $35 per calendar day, including during the benefit waiting period. This benefit is in addition to any other benefits you may be receiving, such as the sick pay benefit, or disability benefits.	
Am I eligible for benefits while I’m using my fully paid sick leave?	Starting on the 8th day of missed work, The Standard will begin paying $25 per work day during sick leave, which can add up to $500 per month or more.	
My district deducts the cost of a substitute from my pay. Does this affect my benefit payments?	During substitute differential or similar pay, your Disability Insurance benefits will be up to 75% of your daily income (less any deductible income[3]). Your minimum benefit during this time will be up to 25% of your daily income (total payment from all sources not to exceed 100% of your salary), or $30, whichever is greater.	
How much will my benefits be after my sick leave and substitute differential pay run out?	For the first two (2) benefit years, your benefit will be up to 75% of your daily salary (less any deductible income),[3] tax-free. After the second benefit year, please see page 10 for details.	

1 CTA-endorsed Disability Insurance plan information is subject to all terms and exclusions of the group policy.

2 For Maximum Benefit Period for Class 2 participants with less than five years of credited service under CalSTRS and/or CalPERS, please refer to page 11.

3 Examples of deductible income (if currently insured, see your certificate of insurance for a full listing and exceptions): substitute differential pay, personal leave pay, severance pay, catastrophic/extraordinary leave bank, salary continuation, workers’ compensation, work earnings, social security, state disability, CalPERS/CalSTRS benefits.

Why You Need Life Insurance

Top Four Reasons for Getting Life Insurance[1]

1. Cover final expenses
2. Pay off a mortgage
3. Leave an inheritance
4. Replace lost income

Consider Your Financial Obligations

Average California Expenses

- Mortgage **$334,925**[2]
- Raising a child **$245,460**[3]
- Student loans **$22,744**[4]
- Debt **$23,520**[5]

Life Insurance May Cost Less Than You Think

Typical Monthly Cost of a $50,000 Term Life Insurance Policy in Coffee Drinks[6]

- 25-34 years old
- 35-44 years old
- 45-49 years old
- 50-54 years old

CTA-endorsed Life Insurance

- Easy online application
- No medical exam[7]
- Included AD&D Insurance

Plus, it comes with resources you can use today

- Travel Assistance[8]
- Life Services Toolkit[9]

1 LIMRA, 2017 Insurance Barometer Study.

2 Average amount Californians owe on their homes. Consumer Debt in California, Debt.org, https://www.debt.org/faqs/americans-in-debt/consumer-california/. Accessed: 12/1/17.

3 Estimated cost of raising a child from birth through age 17. United States Department of Agriculture, The Cost of Raising a Child, January 2017. https://www.cnpp.usda.gov/sites/default/files/CRC_Infographic-2015.2.pdf

4 Average student loan debt at graduation in California. The Institute for College Access & Success, Project on Student Debt. https://ticas.org/posd/map-state-data# Accessed: 12/1/2017.

5 Average credit card debt ($5,196) and auto loan balance ($18,324) in California). Consumer Debt in California, Debt.org https://www.debt.org/faqs/americans-in-debt/consumer-california/. Accessed: 12/1/17.

6 Costs are approximate and based on the data developed by The Standard. For premium rates, please visit: CTAMemberBenefits.org/Life.

7 No medical exam during qualifying events and special enrollment opportunities.

8 Travel Assistance is provided through an arrangement with Generali Global Assistance. Generali Global Assistance (GGA) is the marketing named used by GMMI, Inc. for their services, which is not affiliated with The Standard. Travel Assistance is subject to the terms and conditions, including exclusions and limitations of the Travel Assistance Program. GGA is solely responsible for providing and administering the included service. Travel Assistance is not an insurance product. This service is only available while insured under The Standard's group policy.

9 The Life Services Toolkit is provided through an arrangement with Morneau Shepell and is not affiliated with The Standard. Morneau Shepell is solely responsible for providing and administering the included service. This service is not an insurance product. The Life Services Toolkit is not available to Life insurance beneficiaries who are minors or non-individual entities such as trusts, estates or charities.

LIFE INSURANCE HIGHLIGHTS:

Your Life Insurance coverage is central to a strong financial plan that helps provide for your loved ones in the event of your passing. The CTA-endorsed plan is a Level Term plan. That means that your premiums will remain the same for the duration of each 5-year term. It also includes valuable additional features that you and your loved ones can benefit from, now and in the future - all at no additional cost.

Customize Your Choice

CTA and The Standard worked together to offer you coverage options ranging from $25,000 to $400,000[1], so you can choose the level that's right for you. The amount of coverage you select, and your current age, determine your premium amount or rate. Group policies like the CTA-endorsed Life Insurance Plan often have lower rates than individual policies.

Get Matching AD&D Coverage

Matching Accidental Death and Dismemberment (AD&D) coverage (up to $200,000) is automatically included with your Life Insurance at no additional cost. Your coverage amount will be the same as the amount of Life Insurance you choose.

Use Our Toolkit

With our collection of online tools and services, you can take full advantage of your Life Insurance today and in the future. Use our Life Services Toolkit[2] to start getting help creating a will, recovering from identity theft and putting your finances in order. After a loss, your loved ones will have access to it for grief counselling (in person or over the phone), legal advice, financial assistance and other support services.

Travel Safer & Smarter

Whether you're travelling out of state or out of the country, the complimentary Travel Assistance program[3] included with your CTA-endorsed Life Insurance will help you feel more secure. You'll have access to a comprehensive range of professional 24-hour medical and legal referral and coordination services, plus trip preparation information.

QUICK ENROLL
found on page 2

LIFE INSURANCE PLAN:

Get more from an essential part of your financial plan.

One of the reasons Life Insurance is an important part of a sound financial plan is because it ensures that your loved ones will be protected if something happens to you. With CTA-endorsed Life Insurance, you can feel confident that your loved ones will have help in the event of your passing – and you can benefit from this valuable coverage now and in the future.

Life Insurance Plan Key Features

- Term Life Insurance coverage with options from $25,000 to $400,000.[1]
- Age-based premium rates that remain the same for the duration of each 5-year term.
- Convenient payroll deduction.
- Continued coverage during periods of total disability with payment of premium.
- Optional Life and Accidental Death and Dismemberment (AD&D) coverage for your spouse/domestic partner and children with your Life Insurance.
- Family protection period allows your spouse/domestic partner and dependent coverage to continue for two years after your passing, without further premium payments.
- The opportunity to convert coverage to an individual policy, with some restrictions, is available when insurance coverage terminates for you or your dependents.
- Retiree Term Life Insurance coverage available to CTA-NEA lifetime retired members upon retirement. Coverage election as an active participant predetermines the amount of coverage when you retire. Coverage will be reduced to one-fifth (1/5) of the amount in force on the day of your retirement.[4]

Visit us at CTAMemberBenefits.org/TheStandard to watch a short video about Life Insurance.

1 Coverage reduces to 65% of the amount in force at age 70, 45% of the amount in force at age 75 and 30% of the amount in force at age 80.

2 The Life Services Toolkit is provided through an arrangement with Morneau Shepell and is not affiliated with The Standard. Morneau Shepell is solely responsible for providing and administering the included service. This service is not an insurance product. The Life Services Toolkit is not available to Life insurance beneficiaries who are minors or to non-individual entities such as trusts, estates or charities.

3 Travel Assistance is provided by Generali Global Assistance. Generali Global Assistance (GGA) is the marketing name used by GMMI, Inc. for their services, which is not affiliated with The Standard. Travel Assistance is subject to the terms and conditions, including exclusions and limitations of the Travel Assistance Program Description. GGA is solely responsible for providing and administering the included service. Travel Assistance is not an insurance product. This service is only available while insured under The Standard's group policy.

4 Retiree's Dependents Life Insurance amount is based on the amount of Life Insurance in force as a retired member.

Life Insurance Premium Amounts and Coverage Options

Use the chart below to find your premium amount. Find your age, the coverage amount you want, and the color coded box corresponding with how often your district deducts premiums.

Calculated as **MONTHLY PREMIUMS**	Calculated as **ELEVENTHLY PREMIUMS**	Calculated as **TENTHLY PREMIUMS**

How premiums are deducted (monthly, eleventhly or tenthly) is determined by your employer.

AGE	$25,000	$50,000	$75,000	$100,000	$150,000	$200,000	$250,000	$300,000	$350,000	$400,000
under 25	$1.50	$3.00	$4.50	$6.00	$9.00	$12.00	$14.00	$16.00	$18.00	$20.00
	$1.64	$3.27	$4.91	$6.55	$9.82	$13.09	$15.27	$17.45	$19.64	$21.82
	$1.80	$3.60	$5.40	$7.20	$10.80	$14.40	$16.80	$19.20	$21.60	$24.00
25-29	$1.75	$3.50	$5.25	$7.00	$10.50	$14.00	$16.50	$19.00	$21.50	$24.00
	$1.91	$3.82	$5.73	$7.64	$11.45	$15.27	$18.00	$20.73	$23.45	$26.18
	$2.10	$4.20	$6.30	$8.40	$12.60	$16.80	$19.80	$22.80	$25.80	$28.80
30-34	$2.00	$4.00	$6.00	$8.00	$12.00	$16.00	$19.00	$22.00	$25.00	$28.00
	$2.18	$4.36	$6.55	$8.73	$13.09	$17.45	$20.73	$24.00	$27.27	$30.55
	$2.40	$4.80	$7.20	$9.60	$14.40	$19.20	$22.80	$26.40	$30.00	$33.60
35-39	$2.50	$5.00	$7.50	$10.00	$15.00	$20.00	$24.00	$28.00	$32.00	$36.00
	$2.73	$5.45	$8.18	$10.91	$16.36	$21.82	$26.18	$30.55	$34.91	$39.27
	$3.00	$6.00	$9.00	$12.00	$18.00	$24.00	$28.80	$33.60	$38.40	$43.20
40-44	$3.25	$6.50	$9.75	$13.00	$19.50	$26.00	$31.50	$37.00	$42.50	$48.00
	$3.55	$7.09	$10.64	$14.18	$21.27	$28.36	$34.36	$40.36	$46.36	$52.36
	$3.90	$7.80	$11.70	$15.60	$23.40	$31.20	$37.80	$44.40	$51.00	$57.60
45-49	$4.50	$9.00	$13.50	$18.00	$27.00	$36.00	$44.00	$52.00	$60.00	$68.00
	$4.91	$9.82	$14.73	$19.64	$29.45	$39.27	$48.00	$56.73	$65.45	$74.18
	$5.40	$10.80	$16.20	$21.60	$32.40	$43.20	$52.80	$62.40	$72.00	$81.60
50-54	$8.25	$16.50	$24.75	$33.00	$49.50	$66.00	$81.50	$97.00	$112.50	$128.00
	$9.00	$18.00	$27.00	$36.00	$54.00	$72.00	$88.91	$105.82	$122.73	$139.64
	$9.90	$19.80	$29.70	$39.60	$59.40	$79.20	$97.80	$116.40	$135.00	$153.60
55-59	$10.25	$20.50	$30.75	$41.00	$61.50	$82.00	$101.50	$121.00	$140.50	$160.00
	$11.18	$22.36	$33.55	$44.73	$67.09	$89.45	$110.73	$132.00	$153.27	$174.55
	$12.30	$24.60	$36.90	$49.20	$73.80	$98.40	$121.80	$145.20	$168.60	$192.00
60-64	$13.00	$26.00	$39.00	$52.00	$78.00	$104.00	$129.00	$154.00	$179.00	$204.00
	$14.18	$28.36	$42.55	$56.73	$85.09	$113.45	$140.73	$168.00	$195.27	$222.55
	$15.60	$31.20	$46.80	$62.40	$93.60	$124.80	$154.80	$184.80	$214.80	$244.80
65-69	$25.50	$51.00	$76.50	$102.00	$153.00	$204.00	$254.00	$304.00	$354.00	$404.00
	$27.82	$55.64	$83.45	$111.27	$166.91	$222.55	$277.09	$331.64	$386.18	$440.73
	$30.60	$61.20	$91.80	$122.40	$183.60	$244.80	$304.80	$364.80	$424.80	$484.80
+70[1]	$25.50	$51.00	$76.50	$102.00	$153.00	$204.00	$254.00	$304.00	$354.00	$404.00
	$27.82	$55.64	$83.45	$111.27	$166.91	$222.55	$277.09	$331.64	$386.18	$440.73
	$30.60	$61.20	$91.80	$122.40	$183.60	$244.80	$304.80	$364.80	$424.80	$484.80

Calculate your premium amount

Use this form along with the chart above and the Family Coverage Options details on page 19 to calculate your estimated premium amount for Life Insurance.

	Coverage Amount	Premium Amount
Member	$ _____	$ _____
Spouse/ Domestic Partner	$ _____	+ $ _____
Dependent	$5,000	+ $ _____
		Total $ _____

1 Coverage reduces to 65% of the amount in force at age 70, 45% of the amount in force at age 75, and 30% of the amount in force at age 80.

Extra Benefits

- Matching Accidental Death and Dismemberment (AD&D) Insurance benefits included at no additional cost. See page 23 for details.
- Access to Life Services Toolkit[2] is included at no additional cost. This suite of online tools and services can help protect you and your loved ones now and in the future. See page 20 for more information.
- Complimentary Travel Assistance[3] provides access to a comprehensive range of professional, 24-hour medical, legal and trip assistance information, as well as referral and coordination services. See page 22 for more information.
- Accelerated Benefit provides advance payments of up to 80% of the amount of Life Insurance in force if you provide satisfactory proof to The Standard that, while insured, you have been diagnosed with a terminal illness with a life expectancy of less than 12 months.[4]
- Qualified Disability Benefit provides payment of up to 60% of the amount of Life Insurance in force if you provide satisfactory proof to The Standard that, while insured, you are unable to perform two or more activities of daily living.[4]
- Additional repatriation benefit of up to $5,000 to pay expenses incurred in transporting the remains of a covered CTA member who dies more than 200 miles from their primary residence.

Life Insurance Family Coverage Options

The CTA-endorsed Life Insurance plan provides options to supplement or begin coverage for your spouse/domestic partner and any eligible children. It's one more way to feel confident that your loved ones are prepared for the unexpected.

Spouse | Domestic Partner Coverage
You may elect up to 50% of your Life and AD&D Insurance coverage, up to $100,000 of coverage, for your spouse/domestic partner.[5] Spouse/domestic partner premium is based on your age (not your spouse's or domestic partner's age) and spouse/domestic partner coverage amount. See table on the opposite page for premium rates.

Dependent Coverage
You may add $5,000 Term Life and $5,000 AD&D Insurance coverage for your dependents,[5] including spouse/domestic partner and eligible children. You will pay one flat premium amount for as many dependents as you choose to cover. All dependents are included in the single rate: $1.00 monthly, $1.09 eleventhly, $1.20 tenthly.

Please note: Satisfactory proof of good health required for your spouse/domestic partner and/or dependent children when applying more than 60 days after your own insurance becomes effective or outside of a special enrollment opportunity, and for amounts over $30,000.

2 The Life Services Toolkit is provided through an arrangement with Morneau Shepell and is not affiliated with The Standard. Morneau Shepell is solely responsible for providing and administering the included service. This service is not an insurance product. The Life Services Toolkit is not available to Life insurance beneficiaries who are minors or to non-individual entities such as trusts, estates or charities.

3 Travel Assistance is provided by Generali Global Assistance. Generali Global Assistance (GGA) is the marketing name used by GMMI, Inc. for their services, which is not affiliated with The Standard. Travel Assistance is subject to the terms and conditions, including exclusions and limitations of the Travel Assistance Program. GGA is solely responsible for providing and administering the included service. Travel Assistance is not an insurance product. This service is only available while insured under The Standard's group policy.

4 The amount paid under the benefit reduces the amount of the Life Insurance benefit paid upon your death.

5 The total amount of Life and AD&D Insurance coverage for a spouse/domestic partner may never exceed 50% of the participant's Life and AD&D Insurance coverage.

QUICK ENROLL
found on page 2

LIFE SERVICES TOOLKIT

Your Life Insurance plan should work just as well for you now as in your future. When you have CTA-endorsed Life Insurance featuring the Life Services Toolkit[1] – it can.

What's in the toolkit for you?

The Life Services Toolkit hosts a suite of helpful online tools and services that are included with CTA-endorsed Life Insurance plans at no additional cost.

Through the Life Services Toolkit, you have access to:

Estate Planning:

Take advantage of online tools that will walk you through the necessary steps for preparing a will and creating other documents, such as living wills, powers of attorney and healthcare agent forms.

Financial Planning:

Consult online services to help you confidently manage debt, calculate mortgage and loan payments, and take care of other financial matters.

Health & Wellness:

Read timely and relevant articles about nutrition, stress management, and wellness that can help you and your family lead healthy lives.

Identity Theft Prevention:

Learn how to discourage identity thieves and resolve issues if identity theft occurs.

Funeral Arrangements:

Calculate funeral costs, find funeral-related services, and make funeral arrangement decisions in advance.

1 The Life Services Toolkit is provided through an arrangement with Morneau Shepell and is not affiliated with The Standard. Morneau Shepell is solely responsible for providing and administering the included service. This service is not an insurance product. The Life Services Toolkit is not available to Life insurance beneficiaries who are minors or to non-individual entities such as trusts, estates or charities.

What's in the toolkit for your loved ones?

Your loved ones will be able to access support services for up to 12 months after a loss. If you're eligible for an Accelerated Benefit, you'll be able to access these services as well, for up to 12 months after the benefit is paid. Through the Life Services Toolkit, your beneficiaries will have access to:

Grief Support:

Certified counselors are on-call to provide confidential grief sessions by phone or in person.

Legal Services:

Legal assistance from experienced attorneys, including:

- Schedule an initial 30-minute office or a telephone consultation with a network attorney (beneficiaries who wish to retain a participating attorney after the initial consultation receive a 25% rate reduction from the attorney's normal hourly or fixed fee rates).
- Obtain an estate-planning package that consists of a simple will, a living will, a health care agent form, and a durable power of attorney.

Financial Assistance:

Unlimited phone access to financial counselors who can help resolve issues relating to budgeting strategy, and credit and debt management, including hour-long sessions on topics requiring more in-depth discussion.

Support Services:

Help with planning a funeral or memorial service. Get support from work-life advisors who can guide beneficiaries to resources that help manage household repairs and chores; find child care and elder care providers; or organize a move or relocation.

Additional Resources:

Easily access resources to calculate funeral costs, find funeral-related services, and make decisions about funeral arrangements.

How do you access the toolkit?

Members can access the Life Services Toolkit online by logging in at: standard.com/ctalifeservices.

For beneficiary services, please call The Standard's dedicated CTA Customer Service Department at 800.522.0406 (TTY), Monday - Friday, 7 a.m. to 6 p.m.

QUICK ENROLL
found on page 2

TRAVEL ASSISTANCE

Help - Just a Phone Call Away

Unforeseen circumstances can derail even the best-prepared travel plans. When you're far from home, it's not always easy to know where to go for help. When you purchase CTA-endorsed Life Insurance plans, help is just a phone call away – at no extra charge.

24 HOURS A DAY | 7 DAYS A WEEK | 365 DAYS A YEAR

Travel Assistance[1] is available to you, your spouse/domestic partner and children (up to age 25) when traveling more than 100 miles from home, or internationally for up to 180 days.

You don't have to wait until you leave home to receive benefits. Travel Assistance offers aid before and during your trip, with things like:

- Passport, visa, weather, currency exchange information, health hazard advice, and inoculation requirements.
- Emergency ticket, credit card and passport replacement, funds transfer, and missing baggage.
- 24/7/365 phone access to registered nurses for health and medication information, symptom decision support, and help understanding available treatment options.
- Emergency evacuation to nearest adequate medical facility and medically necessary repatriation to your home (including repatriation of remains).[2]
- Connection to medical care providers, interpreter services, a local attorney, consular office, or bail bond services.
- Assistance with returning a travel companion if your trip is disrupted due to necessary emergency transportation services, or assistance with returning dependent children if they are left unattended due to your prolonged hospitalization.
- Logistical arrangements for ground transportation, housing and/or evacuation in the event of political unrest and social instability; for more complex situations, assists with making arrangements with providers of specialized security services.

Your Travel Assistance ID card will be mailed to you when you enroll in CTA-endorsed Life Insurance.

Learn more online at standard.com/travel

1 Travel Assistance is provided by Generali Global Assistance. Generali Global Assistance (GGA) is the marketing name used by GMMI, Inc. for their services, which is not affiliated with The Standard. Travel Assistance is subject to the terms and conditions, including exclusions and limitations of the Travel Assistance Program. GGA is solely responsible for providing and administering the included service. Travel Assistance is not an insurance product. This service is only available while insured under The Standard's group policy.

2 Must be arranged by Generali Global Assistance. The Combined Single Limit (CSL) for these services is $1 million. One service or combination of the services may exceed the CSL. The insured is responsible for payment of any expenses that exceed the CSL.

AD&D INSURANCE

Extra Protection - No Extra Cost

When you enroll in CTA-endorsed Life Insurance, you'll get protection against a covered accidental loss - at no additional cost. Accidental Death and Dismemberment (AD&D) benefits equal to the amount of your Life Insurance coverage (up to $200,000) are automatically included.

Loss	Percentage Payable
Loss of Life	100% of the AD&D Insurance Benefit
Maximum of all losses from any one accident	100% of the AD&D Insurance Benefit
Paraplegia, Quadriplegia or Hemiplegia	100% of the AD&D Insurance Benefit
Loss of one of the following: hand, foot, sight in one eye, speech or hearing	50% of the AD&D Insurance Benefit
Loss of two or more of the following: hand, foot, sight in one eye, speech or hearing	100% of the AD&D Insurance Benefit
Loss of thumb and index finger (same hand)	25% of the AD&D Insurance Benefit
Loss of finger	5% of the AD&D Insurance Benefit
Coma	1% per month of the remainder of the AD&D Insurance benefit for up to 30 months[3]

Extra Benefits

- **Career Adjustment Benefit** of up to $5,000 per year will be paid to a spouse/domestic partner who, within 48 months after the date of your loss of life, is a registered student in attendance at a professional or trades training program for the purpose of obtaining employment or increasing earnings. The maximum benefit is $20,000 or 40% of the AD&D benefit, whichever is less, over 48 consecutive months.
- **Higher Education Benefit** of up to $5,000 per year to go towards the tuition of each child who, within 12 months after the date of your loss of life, is a registered, full-time student attending a licensed and accredited institution of higher education. The maximum benefit is $20,000 or 40% of the AD&D benefit, whichever is less, within 48 consecutive months.
- **Child Care Benefit** covers the cost of providing care for children under age 13 within 36 months of loss of your life while a surviving spouse, domestic partner or court appointed legal guardian obtains additional career training. Benefits are up to $5,000 per year, or the cumulative total of $10,000 or 25% of the AD&D benefit, whichever is less.
- **Seat Belt Benefit** pays an additional benefit of up to $10,000 (not to exceed the AD&D amount) if your covered loss is the result of a covered automobile accident and you were wearing and properly utilizing a seat belt as demonstrated by the police report.
- **Air Bag Benefit** pays an additional benefit of up to $5,000 (not to exceed AD&D amount) if your covered loss is the result of a covered automobile accident for which a Seat Belt Benefit is payable.

3 Participant or dependent AD&D Insurance benefit is payable for loss of life after reduction by any participant or dependent AD&D Insurance benefit paid for any other loss as a result of the same accident.

Important Questions and Answers

When can I enroll?

You can apply for coverage anytime online or by completing and returning the enclosed forms. Opportunities to enroll with no health questions asked include:

- **During the first 180 days of new employment,** CTA members have a one-time opportunity to enroll in Disability Insurance and/or up to $200,000 of Life Insurance plus dependent Life coverage up to $30,000.
- **During the first 180 days of transferring employment to a new district,** CTA members have the opportunity to continue their coverage at its current level or members can enroll in Disability Insurance and/or Life Insurance under the new employment opportunity described above.
- **Within 60 days following the date of a family status change,** including birth/adoption, marriage/domestic partnership, employment change or loss/commencement of spousal employment, divorce/dissolution or other qualifying events, members may add or change Disability and/or Life Insurance coverage.[1]
- **Within 180 days of becoming newly eligible for CTA-endorsed Disability coverage for the first time.** To be considered newly eligible, applicants must be able to demonstrate that they had not been previously eligible for the CTA-endorsed Disability Insurance (for example, an increase in work hours that results in eligibility for the CTA-endorsed insurance plans). Please note: an elective change in membership status from non-member to active member may not qualify.

In some situations a complete Medical History Statement may be required during these enrollment opportunities. In addition, there may be other opportunities throughout the year to add or increase coverage, including but not limited to special enrollment opportunities held at local chapters.

What if I have coverage with another carrier?

If you are considering switching your disability and/or life insurance coverage from another carrier to the CTA-endorsed plan, be sure you understand any differences between the plans' terms, exclusions and benefits and how they could apply to your personal situation. Please see page 14 for some questions you might consider related to Disability Insurance plans.

When will my coverage become effective?

You must satisfy the active work requirement in the applicable group insurance policy before your Disability or Life Insurance coverage will become effective.

Disability Insurance: If you are not required to submit proof of good health, your insurance will become effective on the later of (a) the date you become eligible and (b) the first day of the calendar month coinciding with or next following the date you apply. If you are required to provide proof of good health, your insurance will become effective on the later of (a) the date you become eligible and (b) the first day of the calendar month coinciding with or next following the date The Standard approves your proof of good health. You must make the required premium contribution.[2]

Life Insurance: For Life Insurance amounts not subject to proof of good health and for which you apply within 60 days following a family status change, coverage becomes effective on the later of (a) the date of the family status change and (b) the first day of the calendar month coinciding with or next following the date you apply, provided the required premium contribution has been made for that month. Life Insurance amounts not subject to proof of good health and for which you apply at any other time become effective on the first day of the calendar month coinciding with or next following the date you apply, provided the required premium contribution has been made for that month. Life Insurance amounts subject to proof of good health become effective on the first day of the calendar month coinciding with or following the date The Standard approves your proof of good health, provided the required premium contribution has been made for that month.[2]

Am I covered for Disability while on a leave of absence?

Your coverage may continue while you are out on federal or state-mandated family or medical leave. In addition, if you take an approved leave of absence, your insurance will be continued with premium payment through the last day of the first calendar month for which you are absent from active work due to the leave of absence. If your coverage remains in force and subject to the terms and conditions of the group policy, a disability that occurs while you are on an approved leave of absence may be covered.

Is childbirth covered under the Disability Plan?

After your coverage is effective, childbirth is covered like any other disability. As an administrative claims management practice, you will be considered disabled four weeks prior to your due date and six weeks following a normal delivery or eight weeks following a C-section. Medical complications that result in disabilities outside of these guidelines will be considered based on medical records. All plan provisions, including those regarding disability, medical necessity and preexisting conditions apply.

How do I file a claim?

For your convenience, you have three options to submit claims:

1. **Call** The Standard's dedicated CTA Customer Service Department at 800.522.0406 (TTY), 7:00 a.m. to 6:00 p.m. Pacific Time
2. **Visit CTAMemberBenefits.org/TheStandard** and submit a claim online.
3. **Fax** a completed claim form to 888.414.0393

Is this a complete description of coverage?

No, this is not a complete description of this coverage. If you become insured, you will receive a certificate of insurance containing a detailed description of the insurance coverage, including the definitions, exclusions, limitations, reductions and terminating events. The controlling provisions will be in the group policy. Neither this booklet nor the certificate of insurance modify the group policy or the insurance coverage.

1 If a previous application submitted with proof of good health was denied by The Standard, then proof of good health will be required.

2 If a premium contribution was not made because your employer makes payroll deductions only 10 months each year, your Life and/or Disability Insurance will become effective as if the premium contribution had been made. However, premium contributions must begin the next following month in which employee payroll deductions are made by your employer.

Terms and Exclusions

The information described in this booklet is subject to all terms and provisions of the group policies and is effective September 1, 2019.

Changes in premium/termination of the group policies/miscellaneous

The Standard's Disability Insurance and Life Insurance are provided under two separate policies. The group policies may be terminated by The Standard or California Teachers Association (CTA) according to their terms. CTA may terminate the group policies, in whole, and may terminate insurance for any class or any group of participants at any time by giving The Standard written notice. The Standard may change premiums in accordance with the terms of the group policies.

Disability Insurance eligibility

You must be an active employee who (1) has an annual contract with an employer, or the equivalent, as agreed to by The Standard and CTA; (2) is a member in good standing of CTA; (3) is a citizen or resident of the United States or Canada; and (4) is scheduled to work an average of at least 15 hours a week over a four-week period, or during your period of employment if less than four weeks. You must not be: (1) a student member of CTA; (2) a non-member of CTA; (3) a CTA Education Support Professional (CTA ESP) member of CTA; (4) a retired member of CTA; (5) a full time member of the armed forces of any country.

Disability Insurance Evidence of Insurability

You are required to submit evidence of insurability (proof of good health, which may include a medical examination and/or a blood test) if you apply more than 180 days after you become an employee of an employer, or if you fail to make the required premium contribution by the third month following the date you apply for insurance; if you have been eligible for insurance under the policyholder's group disability plan for more than 180 days but are not insured under the plan; or for certain reinstatements.[3]

Disability Insurance Active Work Requirement

All coverage is subject to an active work requirement. If you are incapable of active work because of sickness, injury, pregnancy or mental disorder on the scheduled effective date of your insurance or an increase in your insurance, your insurance or increase will not become effective until you complete 10 consecutive full days of active work as an eligible participant.

Definition of disability

During the benefit waiting period and the usual occupation period you must be unable, as a result of sickness or injury, to perform with reasonable continuity the substantial and material acts necessary to pursue your usual occupation and are not working in your usual occupation. You are also disabled if you are working in your usual occupation but, as a result of sickness or

3 Exceptions exist during special enrollment opportunities.

injury, are unable to earn 80% or more of your indexed regular daily contract salary. Usual occupation period is the period for which you are eligible to receive fully paid sick leave and the following two benefit years.

For Class 2 participants, during the any occupation period you are disabled if, as a result of sickness or injury, you are unable to engage with reasonable continuity in any occupation. You are also disabled if you are working in an occupation but, as a result of sickness or injury, you are unable to engage in that occupation or any occupation with reasonable continuity. Any occupation period occurs from the end of the usual occupation period to the end of the maximum benefit period.

Disability Insurance exclusions and limitations

Benefits are not payable for any disability:

- Caused or substantially contributed to by a preexisting condition unless you have been continuously insured and actively at work for 10 consecutive regular days of required attendance or extra duty days of required attendance on the date you become disabled.

Preexisting condition means a diagnosed mental or physical condition for which you have received medical treatment, care or services or have taken prescribed medication at any time during the 30-calendar-day period just before your insurance becomes effective.

- Due to intentionally self-inflicted injuries, committing or attempting to commit an assault or a felony, war or any act of war, declared or undeclared.
- Unless under the care of a physician appropriate to the condition(s) causing disability.

Physician means a licensed medical professional, diagnosing and treating individuals within the scope of the license. The term includes a legally licensed physician, dentist, optometrist, podiatrist, psychologist or chiropractor. Physician does not include you or your spouse/domestic partner, or the brother, sister, parent or child of either you or your spouse/domestic partner.

Benefits are limited for any disability due to mental disorder or substance abuse.

- **For ongoing disability benefits for Class 2 employees only:** After fully paid sick leave and the following 2 benefit years, no benefits are payable for any disability resulting from mental disorder or substance abuse unless you are confined in a hospital or participating in a rehabilitation program approved by The Standard.

Mental disorder means those psychiatric or psychological conditions, regardless of cause, that are classified in the Diagnostic and Statistical Manual of Mental Health Disorders (DSM), published by the American Psychiatric Association, most current as of the start of disability. If the DSM is discontinued or repealed, mental disorders will be those classified in the diagnostic manual then used by the American Psychiatric Association as of the start of disability.

The mental disorder limitation will not apply to a disability caused or substantially contributed to by dementia if the dementia is the result of: 1) stroke; 2) physical trauma; 3) Alzheimer's disease or 4) other medical conditions not listed that are not usually treated by a mental health or other qualified provider using psychotherapy, behavioral therapy, psychotropic drugs or similar methods of treatment.

Substance abuse means your being intoxicated or under the influence of any narcotic unless administered on the advice of a physician.

When Disability Benefits End

Your disability benefits and extra duty pay benefits end automatically on the earliest of the date you are no longer disabled, the date your maximum benefit period ends, the date you die, the date benefits become payable under any other group long term disability insurance policy under which you become insured during a period of temporary recovery, or the date you fail to provide proof of continued disability and entitlement to benefit.

Disability Insurance Accidental Death and Dismemberment (AD&D) exclusions and limitations

Benefits are not payable for losses caused or contributed to by sickness (illness or disease, mental disorder, pregnancy, or donation of organs or bone marrow for transplant into another person), war or any act of war, suicide or self-inflicted injury, or the commission or attempt to commit an assault or felony. AD&D benefits are not payable for losses occurring more than 365 days after the accident. Losses must be caused directly by the accident.

Disability Insurance termination provisions

Your insurance ends automatically on the earliest of:

1. The date the last period ends for which a premium

was paid for your insurance.
2. The date the group policy terminates.
3. The date your employment terminates. However, insurance will continue for up to 90 days following the date employment terminates, provided insurance premiums continue to be paid and termination of your employment occurs due to any of the following, as determined by the Employer:
   a. Budgetary constraints
   b. Decline in student attendance
   c. Reduction or discontinuance of a service
   d. Curriculum modification
4. The first day of the calendar month following the date you cease to be a participant, unless:
   a. You cease to be a participant because you are not working the minimum number of required hours. In this case, unless it ends under 1 through 3 above, your insurance will be continued during the following periods:
      - During the benefit waiting period.
      - During a leave of absence if continuation of your insurance under the group policy is required by federal or state-mandated family or medical leave act or law.
      - During the first 90 days of a temporary layoff.
      - Through the last day of the calendar month in which you are absent from active work due to a labor dispute.
      - Through the last day of the first calendar month for which you are absent from active work due to a leave of absence.
      - During a scheduled vacation period; or

   b. You cease to be a participant because you are not a California Teachers Association member in good standing. In this case, unless it ends under 1 through 3 above, your insurance will continue through the first day of the calendar month following the date of the termination letter.

Life Insurance eligibility

You must be one of the following: (1) an active employee of an employer and a member in good standing of CTA or (2) a retired employee who (a) is a retired employee of an employer and a CTA-NEA Retired Lifetime Member and (b) was insured under the group policy or prior plan immediately prior to retirement and (c) is eligible to receive benefits under the State Teachers Retirement System (CalSTRS) or Public Employees Retirement System (CalPERS) and authorizes premium deductions. You must not be: (1) a student member of CTA; (2) a non-member of CTA; (3) insured under another group voluntary life insurance policy issued by us to the policyholder; (4) a retired annual member of CTA; (5) a full time member of the armed forces of any country.

Life Insurance Active Work Requirement

All coverage is subject to an active work requirement. If you are incapable of active work because of physical disease, injury, pregnancy or mental disorder on the scheduled effective date of your insurance or an increase in your insurance, your insurance or increase will not become effective until you complete one full day of active work as an eligible participant.

Life Insurance Evidence of Insurability

Evidence of insurability (proof of good health, which may include a medical examination and/or a blood test) is required if you apply for Life Insurance more than 180 days after you become an employee of an employer, or fail to make the required premium contribution by the third month following the date you apply for Life Insurance; if you apply for Dependents Life Insurance more than 31 days after you become eligible for dependents coverage under the policyholder's group Life Insurance plan, or you fail to make the required premium contribution by the third month following the date you apply; to become insured for an amount of Life Insurance in excess of $200,000; to become insured for an amount of Dependents Life Insurance in excess of $30,000; to become insured for an amount greater than the amount for which you or your dependent was insured under the prior plan, if insured under the prior plan; for any increase in Life Insurance or Dependents Life Insurance; and reinstatements if required.[1]

Life Insurance termination provisions

Your insurance will automatically end on the earliest of:
1. The date the last period ends for which a premium was paid for your Life Insurance;
2. The date the group policy terminates;
3. The date your employment terminates, unless you are covered as a retired participant;
4. The first day of the calendar month following the date of the termination letter if you cease to be a participant because you are not a CTA member in good standing; and
5. The first day of the calendar month following the date you cease to be actively at work. However, if you cease to be actively at work, your Life Insurance may be continued with advance written notice to us and provided premiums are paid during the following periods, unless it ends under 1 through 4 above:
   - During the first 90 days of a temporary layoff.
   - Through the last day of the calendar month in

1 Exceptions exist during special enrollment opportunities.

which you are absent from active work due to a labor dispute. However, insurance may be continued during a labor dispute for up to six months, subject to the provisions in the group policy.

- During a leave of absence if continuation of your insurance under the group policy is required by a state-mandated family or medical leave act or law.

- During any other scheduled leave of absence approved by your employer in advance and in writing, and lasting not more than 24 months.
- During the period of your service on active duty in the National Guard or the Reserves of the armed forces of the United States within the limits of the United States.

Dependents Life Insurance termination provisions

Dependents Life Insurance ends automatically on the earliest of:

1. Two years after you die (no premiums will be charged for your Dependents Life Insurance during this time). However, coverage for your spouse/domestic partner will not be continued beyond the date your surviving spouse/domestic partner remarries or enters a domestic partner relationship.
2. The date your Life Insurance ends (except as provided in 1 above).
3. The date the group policy terminates, or the date Dependents Life Insurance terminates under the group policy.
4. The date the last period ends for which a premium was paid for your Dependents Life Insurance (except as provided in 1 above).
5. For your spouse/domestic partner, the date of your divorce or termination of your domestic partner relationship.
6. For any dependent, the date the dependent ceases to be a dependent.
7. For a child who is disabled, 90 days after we mail you a request for proof of disability, if proof is not given.

Life Insurance Accidental Death and Dismemberment (AD&D) exclusions and limitations

Benefits are not payable for losses caused or contributed to by physical disease or mental disorder or pregnancy, bacterial infections, medical or surgical treatment, war or any act of war, suicide or self-inflicted injury or the commission or attempt to commit an assault or felony. AD&D benefits are not payable for losses occurring more than 365 days after the accident. Losses must be caused solely by the accident.

Accidental Death and Dismemberment termination provisions

AD&D Insurance ends automatically for participants on the earliest of:

- The date your Life Insurance ends
- The date the last period ends for which a premium was paid for your AD&D Insurance.
- The date AD&D Insurance terminates under the group policy.
- The date you retire.

Dependents AD&D Insurance ends automatically on the earliest of:

- The date your Dependents Life Insurance ends.
- The date Dependents AD&D Insurance terminates under the group policy.
- The date the last period ends for which a premium was paid for your Dependents AD&D Insurance.
- For your spouse/domestic partner, the date of your divorce or termination of your domestic partner relationship.
- For any dependent, the date the dependent ceases to be a dependent.
- For a child who is disabled, 90 days after we mail you a request for proof of disability, if proof is not given.
- The date you retire.

Note: The information described in this booklet is subject to all terms and provisions of the group policy.

Standard Insurance Company
Medical Underwriting, PO Box 4744 • Portland OR 97208

Medical History Statement
For Residents of California

Reset

DIRECTIONS FOR APPLYING FOR COVERAGE

Read the Information Practices Notice(s) on page 3. A separate form must be submitted for each applicant (Employee/Member, Spouse and/or Child) when Evidence Of Insurability or Proof of Good Health is required to apply for coverage. Complete all items, date and sign in the space at the bottom of page 2. Keep a copy for your records, and send the original to Standard Insurance Company at the address given above.

MEMBER/EMPLOYEE INFORMATION

School District		Policy Number	Check who is Applying (One per form) ☐ Self ☐ Spouse ☐ Domestic Partner ☐ Child
Employee Name		Birthdate (Mo/Day/Year)	Date First Employed (Mo/Day/Year)
Occupation	Annual Salary	Social Security Number	CTA Member ID

APPLICANT INFORMATION

Applicant's Name (Person to be insured)	Street Address City State Zip			
Gender ☐ M ☐ F	Birthdate (Mo/Day/Year)	Birthplace	Social Security Number	Primary Phone ( ) Secondary Phone ( )

APPLICATION INFORMATION

Type of Application *(check one)* ☐ Initial ☐ Increase in Coverage ☐ Late Application

Check the insurance coverage you are requesting.

☐ Voluntary Disability

☐ Voluntary Life – *Choose one:* ☐ $25,000 ☐ $50,000 ☐ $75,000 ☐ $100,000 ☐ $150,000 ☐ $200,000 ☐ $250,000 ☐ $300,000 ☐ $350,000 ☐ $400,000

☐ Spouse/Domestic Partner and/or Child Life $5,000

☐ Spouse/Domestic Partner up to 50% of participant's Life Insurance amount – Choose one: ☐ $12,500 ☐ $25,000 ☐ $37,500 ☐ $50,000 ☐ $75,000 ☐ $100,000

SIC USE ONLY	POLICY NO.	PARTICIPANT ID	GUARANTEE ISSUE AMOUNT	CURRENT AMOUNT IN FORCE

MEDICAL HISTORY STATEMENT QUESTIONS

Check yes or no for each of these questions, and give details for any "yes" answers. Attach a separate sheet if necessary.

1. Are you now unable to work full-time because of any physical or mental condition, or injury? ☐ Yes ☐ No
2. Has a medical professional ever treated you for, diagnosed you as having, or prescribed medication for you for any of the following:
   - A. Disease of the liver, pancreas, kidney, ulcers, stomach, intestinal ailment, or digestive system disorder? ☐ Yes ☐ No
   - B. Multiple sclerosis, epilepsy, stroke, paralysis, numbness, visual disturbance, blindness, deafness, or any other neurological or muscle disorder? ☐ Yes ☐ No
   - C. Cancer, tumor, lesions, leukemia, lymphoma, blood clotting or other malignancy or growth? ☐ Yes ☐ No
   - D. Cardiovascular disease, heart ailment, arteriosclerosis, abnormal pulse, high blood pressure, heart murmur, valve, circulatory, or vascular disorders? ☐ Yes ☐ No
   - E. Emphysema, asthma, bronchitis, sleep apnea, or other respiratory or lung disease? ☐ Yes ☐ No
   - F. Lupus, scleroderma, vasculitis, connective tissue disease, or other immune system disorder not related to Human Immunodeficiency Disorder (HIV)? ☐ Yes ☐ No
   - G. Osteoarthritis, rheumatoid arthritis, osteoporosis, pain in the joints, amputations, or other disease or disorder of the bones, joints, back, or spine, arthritic or disc conditions? ☐ Yes ☐ No
   - H. Diabetes, thyroid, gland, spleen, or nephritis? ☐ Yes ☐ No
   - I. Drug or alcohol abuse, or have you used alcohol, drugs or nicotine in a manner that has resulted in medical treatment? ☐ Yes ☐ No
   - J. Psychiatric or mental condition, depression, adjustment disorder, affective disorder, anxiety disorder, or obsessive-compulsive disorder? ☐ Yes ☐ No
3. In the past 10 years have you had any illness or injury not listed above which resulted in the use of prescribed medication or physician visits? ☐ Yes ☐ No
4. Has a medical professional ever diagnosed you as having or prescribed medication to you for Acquired Immune Deficiency Syndrome (AIDS) or AIDS-Related Complex (ARC)? ☐ Yes ☐ No
5. Are you currently pregnant? ☐ Yes ☐ No

Height	Weight	Physician or Medical Facility with Applicant's Complete Medical Records
		Name and Full Mailing Address

Describe below any "yes" answers. (Please provide the entire question number.)

Question Number	*Description of Injuries, Disorders and Operations*	*Month/Year*	*Duration*	*Final Result*	*Physicians Consulted, City & State*

ACKNOWLEDGMENT AND AUTHORIZATION FOR RELEASE OF INFORMATION *(Please read carefully)*

- I represent that the statements contained herein, including those made in response to the Medical History Statement questions and any attachments, are true and complete, to the best of my knowledge and belief, and I understand that they form the basis of any coverage under the Group Policy(ies). I understand that any misstatements or failure to report information which is material to the issuance of coverage may be used as a basis for rescission of my insurance and/or denial of payment of a claim. I agree to notify Standard Insurance Company (The Standard) of any change in my medical condition while my enrollment application is pending. I agree that if my application is approved by The Standard, the effective date of any coverage will be determined in accordance with the terms of the Group Policy(ies), including any applicable Active Work requirement. I agree that if my application is declined, The Standard's liability is limited to the return of any premium which may have been paid.
- To any health plan, physician, health care provider, hospital, clinic, laboratory, pharmacy, pharmacy benefit manager, medical facility, insurance or reinsurance company, and the Medical Information Bureau Inc. (MIB), I instruct you to disclose my entire medical record and any other protected health information concerning me to The Standard or its reinsurers. This includes information on any disorder of the immune system, including Acquired Immune Deficiency Syndrome (AIDS) or other related syndromes or complexes, and any communicable or sexually transmitted disease or disorder. This also includes information on the diagnosis and treatment of mental illness and the use of alcohol, drugs, and tobacco, but excludes psychotherapy notes.
- By my signature below, I acknowledge that any agreements I have made to restrict my protected health information do not apply to this authorization and I instruct any of the above to release and disclose my entire medical records without restriction.
- I understand that The Standard will use information obtained by authorization to determine my eligibility for group insurance coverage. I understand The Standard may release information it has about me to its reinsurers and to any person performing business or legal services for The Standard in connection with my application. I understand The Standard may release information it has about me to the MIB for the purpose of reporting to the MIB information exchange and for MIB to audit The Standard's reporting. I understand The Standard may release information it has about me to other insurance companies to which I have applied for insurance coverage or benefits.
- I understand that information disclosed to The Standard pursuant to authorization may be subject to redisclosure with my authorization or as otherwise permitted by law. Life and disability insurance coverages are not subject to the Privacy Rule under the Health Insurance Portability and Accountability Act (HIPAA), and therefore release of information to The Standard is not protected under the Act.
- I understand that if my application is approved, premiums shall be paid in accordance with the provisions of the Group Policy(ies), and my coverage will be subject to all terms and conditions of the Group Policy(ies) and state limitations.
- For Member/Employee: If I currently have a Life and/or Trust Life beneficiary designation on file with my plan administrator, I understand the designation(s) on file will also apply to any approved amounts. If I have no beneficiary designation(s) on file or I wish to change the name of the current beneficiary(ies), I will contact my plan administrator.
- I understand that insurance on a Spouse or other Dependent, if any, is payable to the Member/Employee, if living, or as provided under the terms of the Group Policy(ies).
- I acknowledge that I have read and received the Information Practices Notice and I have kept a copy of this Medical History Statement.
- I understand that I am entitled to receive a copy of this authorization. This authorization will remain valid one year from the date of the signature below. A photocopy or facsimile of this authorization shall be as valid as the original.
- I understand that I have the right to refuse to sign this authorization. I further understand that I have a right to revoke this authorization at any time by sending a written statement to The Standard, except to the extent it has been relied upon to disclose requested records. I understand that the revocation of the authorization, or the failure to sign the authorization, may impair The Standard's ability to evaluate or process my application and may be a basis for denying my application for insurance coverage.

Signature of Applicant (or Member/Employee for Dependent Child)	**Date**

Note: Declinations do not affect either Guarantee Issue Amounts not subject to Evidence Of Insurability or other coverages already in force with Standard Insurance Company.

INFORMATION PRACTICES NOTICE

- To help us determine your eligibility for group insurance we may request information about you from other persons and organizations. For example, we may request information from your doctor or hospital, other insurance companies, or MIB, Inc. (MIB), formerly known as Medical Information Bureau. We will use the authorization you signed on this form when we seek this information.
- MIB – Information regarding your insurability will be treated as confidential. Standard Insurance Company or its reinsurers may, however, make a brief report thereon to MIB, a not-for-profit membership organization of insurance companies, which operates an information exchange on behalf of its Members. If you apply to another MIB Member company for life or health (including short and long term disability) insurance coverage, or a claim for benefits is submitted to such a company, MIB, upon request, will supply such company with the information in its file.

  Upon receipt of a request from you, MIB will arrange disclosure of any information it may have in your file. Please contact MIB at 866-692-6901. If you question the accuracy of information in MIB's file, you may contact MIB and seek a correction in accordance with the procedures set forth in the federal Fair Credit Reporting Act. The address of MIB's information office is: 50 Braintree Hill Park, Suite 400, Braintree, Massachusetts 02184-8734.

  Standard Insurance Company may release information in its file to its reinsurers, and Standard Insurance Company, or its reinsurers, may release information in its file to other insurance companies to whom you may apply for life or health (including short and long term disability) insurance, or to whom a claim for benefits may be submitted. Information for consumers about MIB may be obtained on its website at www.mib.com.
- DISCLOSURE TO OTHERS – The information collected about you is confidential. We will not release any information about you without your authorization, except to the extent necessary to conduct our business or as required or permitted by law.
- YOUR RIGHTS – You have a right to know what information we have about you in our underwriting file. You also have a right to ask us to correct any information you think is incorrect. We will carefully review your request and make changes when justified. If you would like more information about this right or our information practices please write to us at Medical Underwriting, Standard Insurance Company, 900 SW Fifth Avenue, Portland, Oregon 97204 or call 1-800-843-7979.

Print and Sign

Enrollment is Easy!

There are multiple ways to enroll:

Give your completed application to a representative of The Standard.

Fax your application to 888.414.0393 or email a scanned copy to ctaservice@standard.com.[1]

Mail your application to:
CTA Benefits and Services
PO Box 4744, Portland, OR 97208

Apply online at CTAMemberBenefits.org/TheStandard.

Apply over the phone with our dedicated CTA Customer Service team at 800.522.0406 (TTY), 7 a.m. to 6 p.m. Pacific Time, Monday through Friday.

Have additional questions?

Call the dedicated CTA Customer Service team at 800.522.0406 (TTY), 7 a.m. to 6 p.m., Pacific Time, Monday through Friday.

TheStandard®

For more than 100 years we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. We have earned a national reputation for quality products and superior service by always striving to do what is right for our customers. We are proud to have been chosen by California Teachers Association as the only CTA-endorsed carrier for Life and Disability Insurance.

Standard Insurance Company
1100 SW Sixth Avenue
Portland, OR 97204

www.standard.com

GP190-LTD/S399/CTA.1
GP190-LIFE/S399/CTA.3
SI 13565-CTAvol
06/19 70K

1 Please note that email may not be a secure transmission unless you have the capability to encrypt your email when sent. Information once received by The Standard is protected.