THE MARYLAND-NATIONAL CAPITAL PARK AND PLANNING COMMISSION 6611 Kenilworth Avenue • Riverdale, Maryland 20737

Dear Eligible Commission Employee:

The <u>basic</u> Long Term Disability (LTD) benefit covers 66 2/3% of an employee's base salary, but only up to \$108,000. We offer a Supplemental Long Term Disability (LTD) benefit to those employees whose base annual salary exceeds the current threshold of \$108,000, allowing greater income replacement.

Coverage

Employees whose annual salary exceeds the \$108,000 are eligible to participate in the supplemental long term disability plan. The coverage is available for base salary amounts exceeding \$108,000 up to \$216,000. If, for example, your salary is \$135,000 the coverage is available for the difference between \$108,000 and \$135,000 or \$27,000. You may not elect a specific amount of salary. Your election would be for the entire amount of your salary that exceeds \$108,000 up to a maximum coverage amount of \$108,000 (\$216,000 less \$108,000).

Premium Rates

The premium for this additional coverage is paid 100% by the employee. If you receive an increase in salary for any reason, your premium will increase based on your new salary. Your premium will be based on your actual salary amount up to the new maximum. You may not elect to cover an amount less than your annual salary unless your salary exceeds \$216,000. If you receive an increase in salary for any reason, your premium will increase based on your new salary.

Evidence of Insurability

Typically, if an employee initially declines enrollment when first eligible and enrolls later, the employee is required to complete an evidence of good health form and submit to a physical exam.

Enrollment Deadline

If you wish to enroll please complete the attached enrollment form and submit to the Health & Benefits Office or email to benefits@mncppc.org. If the employee initially declines enrollment, the employee is eligible to enroll at a later date. However, if an employee enrolls at a later date, the employee is required to complete an evidence of good health form and submit to a physical exam.

Questions

If you have any questions, contact Gertie Johnson at 301-454-1684 or Jennifer McDonald at 301-454-1726.

Health & Benefits Office

MARYLAND-NATIONAL CAPITAL PARK & PLANNING COMMISSION SUPPLEMENTAL LTD PLAN - ENROLLMENT FORM

EMPLOYEE INFORMATION (PLEASE PRINT)					
Name: ID Number:						
Work Location:Work Phone #:						
ENROLLMENT ELECTION		DISENROLLMENT ELECTION				
☐ I elect to enroll	☐ I decline	☐ I elect to dis-enroll				
COVERAGE BEYOND THE BAS	IC LONG-TERM DISABILITY I	PLAN				
basic LTD coverage. This amount wil	coverage beyond the basic Long-Term I be referred to as the Basic LTD Annu	n Disability (LTD) plan which covers up to \$108,000 in ual Salary				
PREMIUM RATE						
The premium rate of coverage is \$1.13	per \$100 of covered benefit.					
This rate is subject to change.						
EMPLOYEE ACKNOWLEDGEN	IENT					
 My election is for the coverage of LTD plan. I am responsible for 100% of the control of the control	my current annual salary above the Basos of this additional coverage. ved: salary beyond the Basic LTD Annual salary that is not an initial enrollment, evalary less the Basic LTD Annual Salary 216,000 annual salary. on current eligibility in the Employee E	current Basic LTD Annual Salary amount. asic LTD Annual Salary amount provided in the basic Salary amount. vidence of good health will be required. y amount. I may not elect a specific amount of coverage. Benefit Handbook and will always be effective on the first				
PAYROLL AUTHORIZATION A	ND VERIFICATION					
with the Maryland-National Capital Pai	rk & Planning Commission.	his form supercedes any information previously filed				
I authorize the Maryland-National Capi LTD Buy-Up plan.	tal Park & Planning Commission to d	educt the required contributions from my earnings for the				
Employee Signature		Date				

M-NCPPC SUPPLEMENTAL LTD PLAN FOR EMPLOYEES WHOSE ANNUAL SALARY EXCEEDS \$108,000

A	В	С	D	Е	F	G		Н
				Monthly				
	Annuai	Monthly		Buy-up				Annual
	Benefit @	Benefit at		Benefit In	Monthly	Monthly	į	Premium
	66 2/3% of	66 2/3% of	Core	Excess of	Rate /	Premium	Bi-	Paid
Annual	Annual	Monthly	Coverage	Core	\$100	Paid 100%	Weekly	100% by
Salary	Salary	Salary	Amount	Amount	Benefit	by EE	Premium	EE
			_	Ì				
Formula	A x 2/3	B / 12	Constant	C-D	Rate	(E/100) x F		G x 12
\$108,000		\$6,000.00		\$0.00	\$1.13	\$0.00		\$0.00
\$109,000		\$6,055.56	\$6,000	\$55.56	\$1.13	\$0.63		\$7.53
\$110,000	·	\$6,111.11	\$6,000	\$111.11	\$1.13	\$1.26	\$0.58	\$15.07
\$111,000		\$6,166.67	\$6,000	\$166.67	\$1.13		\$0.87	\$22.60
\$112,000		\$6,222.22	\$6,000	\$222.22	\$1.13	\$2.51	\$1.16	\$30.13
\$113,000		\$6,277.78	\$6,000	\$277.78	\$1.13	\$3.14	\$1.45	\$37.67
\$114,000		\$6,333.33	\$6,000	\$333.33	\$1.13	\$3.77	\$1.74	\$45.20
\$115,000		\$6,388.89	\$6,000	\$388.89	\$1,13	\$4.39	\$2.03	\$52.73
\$116,000		\$6,444.44	\$6,000	\$444.44	\$1.13	\$5.02	\$2.32	\$60.27
\$117,000	 	\$6,500.00	\$6,000	\$500.00	\$1.13	\$5.65	\$2.61	\$67.80
\$118,000	 	\$6,555.56	\$6,000	\$555.56	\$1.13	\$6.28	\$2.90	\$75.33
\$119,000 \$120,000	· · · · · · · · · · · · · · · · · · ·	\$6,611.11	\$6,000	\$611.11	\$1.13	\$6.91	\$3,19	\$82.87
		\$6,666.67	\$6,000	\$666.67	\$1.13	\$7.53	\$3.48	\$90,40
\$121,000		\$6,722.22	\$6,000	\$722.22	\$1.13	\$8.16	\$3.77	\$97.93
\$122,000 \$123,000		\$6,777.78	\$6,000	\$777.78	\$1.13	\$8.79	\$4.06	\$105.47
\$123,000		\$6,833.33	\$6,000	\$833.33	\$1.13	\$9.42	\$4.35	\$113.00
\$125,000		\$6,888.89	\$6,000	\$888.89	\$1.13	\$10.04	\$4.64	\$120.53
\$126,000		\$6,944.44	\$6,000	\$944.44	\$1.13	\$10.67	\$4.93	\$128.07
\$127,000		\$7,000.00	\$6,000	\$1,000.00	\$1.13	\$11.30	\$5.22	\$135.60
\$128,000		\$7,055.56 \$7,111.11	\$6,000	\$1,055.56	\$1.13	\$11.93	\$5.51	\$143.13
\$129,000	\$86,000.00	\$7,111.11 \$7,166.67	\$6,000	\$1,111.11	\$1.13	\$12.56	\$5.79	\$150.67
\$130,000	\$86,666.67	\$7,100.07	\$6,000	\$1,166.67	\$1.13	\$13.18	\$6.08	\$158.20
\$131,000	\$87,333.33	\$7,222.22	\$6,000	\$1,222.22	\$1.13	\$13.81	\$6.37	\$165.73
\$132,000	\$88,000.00	\$7,333.33	\$6,000 \$6,000	\$1,277.78 \$1,333.33	\$1.13	\$14.44	\$6.66	\$173.27
\$133,000	\$88,666.67	\$7,388.89	\$6,000	\$1,388.89	\$1.13 \$1.13	\$15.07	\$6.95	\$180.80
\$134,000		\$7,444.44	\$6,000	\$1,444.44	\$1.13	\$15.69	\$7.24	\$188.33
\$135,000	\$90,000.00	\$7,500.00	\$6,000	\$1,500.00		\$16.32	\$7.53	\$195.87
\$136,000		\$7,555.56	\$6,000	\$1,555.56	\$1.13	\$16.95	\$7.82	\$203.40
\$137,000	\$91,333.33	\$7,611.11	\$6,000	\$1,611.11	\$1.13	\$17.58	\$8.11	\$210.93
\$138,000	\$92,000.00	\$7,666.67	\$6,000		\$1.13	\$18.21	\$8.40	\$218.47
\$139,000	\$92,666.67	\$7,722.22	\$6,000	\$1,666.67 \$1,722.22	\$1.13 \$1.13	\$18.83	\$8.69	\$226.00
\$140,000	\$93,333.33	\$7,777.78	\$6,000	\$1,777.78	\$1.13	\$19.46	\$8,98	\$233.53
\$141,000	\$94,000.00	\$7,833.33		\$1,833.33	\$1.13	\$20.09	\$9.27	\$241.07
\$142,000	\$94,666.67	\$7,888.89	\$6,000	\$1,888.89	\$1.13	\$20.72	\$9.56	\$248.60
\$143,000	\$95,333.33	\$7,944.44	\$6,000	\$1,944.44	\$1.13	\$21.34 \$21.97	\$9.85	\$256.13
\$144,000	\$96,000.00	\$8,000.00	\$6,000	\$2,000.00	\$1.13	\$22.60	\$10.14 \$10.43	\$263.67
\$145,000	\$96,666.67	\$8,055.56	\$6,000	\$2,055.56	\$1.13	\$23.23	\$10.43	\$271.20
\$146,000	\$97,333.33	\$8,111.11	\$6,000	\$2,111.11	\$1.13	\$23.86	\$11.01	\$278.73
\$147,000	\$98,000.00	\$8,166.67	\$6,000	\$2,166.67	\$1.13	\$24.48	\$11.30	\$286.27
\$148,000	\$98,666.67	\$8,222.22	\$6,000	\$2,222.22	\$1.13	\$25.11	\$11.59	\$293.80
\$149,000	\$99,333.33	\$8,277.78	\$6,000	\$2,277.78	\$1.13	\$25.74	\$11.88	\$301.33
	\$100,000.00	\$8,333.33	\$6,000	\$2,333.33	\$1.13	\$26.37		\$308.87
		+ -,	Ψ0,000	42,000.00	Ψ1.10	Ψ20.37	\$12.17	\$316.40

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M-NCPPC SUPPLEMENTAL LTD PLAN FOR EMPLOYEES WHOSE ANNUAL SALARY EXCEEDS \$108,000

A	В	C	D	E	F	G		Н
				Monthly				
	Annual	Monthly		Buy-up				Annual
	Benefit @	Benefit at		Benefit In	Monthly	Monthly		Premium
1	66 2/3% of	66 2/3% of	Core	Excess of	Rate /	Premium	Bi-	Paid
Annual	Annual	Monthly	Coverage	Core	\$100	Paid 100%	E .	100% by
Salary	Salary	Salary	Amount	Amount	Benefit	by EE	Premium	EE

Formula	A x 2/3	B / 12	Constant	C-D	Rate	(E/100) x F		G x 12
\$151,000		**************************************	\$6,000	\$2,388.89	\$1,13	\$26.99	\$12.46	\$323.93
\$152,000			\$6,000	\$2,444.44	\$1.13	\$27.62	\$12.75	\$331.47
\$153,000			\$6,000	\$2,500.00	\$1.13	\$28.25	\$13.04	\$339.00
\$154,000		\$8,555.56	\$6,000	\$2,555.56	\$1.13	\$28.88	\$13.33	\$346.53
\$155,000			\$6,000	\$2,611.11	\$1.13	\$29.51	\$13.62	\$354.07
\$156,000			\$6,000	\$2,666.67	\$1.13	\$30.13	\$13.91	\$361.60
\$157,000			\$6,000	\$2,722.22	\$1.13	\$30.76	\$14.20	\$369.13
\$158,000			\$6,000	\$2,777.78	\$1.13	\$31.39	\$14.49	\$376.67
\$159,000			\$6,000	\$2,833.33	\$1.13	\$32.02	\$14.78	\$384.20
\$160,000		\$8,888.89	\$6,000	\$2,888.89	\$1.13	\$32.64	\$15.07	\$391.73
	\$107,333.33		\$6,000	\$2,944.44	\$1.13	\$33.27	\$15.36	\$399.27
	\$108,000.00	\$9,000.00	\$6,000	\$3,000.00	\$1.13	\$33.90	\$15.65	\$406.80
	\$108,666.67	\$9,055.56	\$6,000	\$3,055.56	\$1.13	\$34.53	\$15.94	\$414.33
	\$109,333.33	\$9,111.11	\$6,000	\$3,111.11	\$1.13	\$35.16	\$16.23	\$421.87
	\$110,000.00	\$9,166.67	\$6,000	\$3,166.67	\$1.13	\$35.78	\$16.52	\$429.40
	\$110,666.67	\$9,222.22	\$6,000	\$3,222.22	\$1.13	\$36.41	\$16.81	\$436.93
\$167,000	\$111,333.33	\$9,277.78	\$6,000	\$3,277.78	\$1.13	\$37.04	\$17.09	\$444.47
\$168,000		\$9,333.33	\$6,000	\$3,333.33	\$1.13	\$37.67	\$17.38	\$452.00
\$169,000		\$9,388.89	\$6,000	\$3,388.89	\$1.13	\$38.29	\$17.67	\$459.53
\$170,000		\$9,444.44	\$6,000	\$3,444.44	\$1.13	\$38.92	\$17.96	\$467.07
\$171,000		\$9,500.00	\$6,000	\$3,500.00	\$1.13	\$39.55	\$18.25	\$474.60
\$172,000	\$114,666.67	\$9,555.56	\$6,000	\$3,555.56	\$1.13	\$40.18	\$18.54	\$482.13
\$173,000		\$9,611.11	\$6,000	\$3,611.11	\$1.13	\$40.81	\$18.83	\$489.67
	\$116,000.00	\$9,666.67	\$6,000	\$3,666.67	\$1.13	\$41.43	\$19.12	\$497.20
\$175,000	\$116,666.67	\$9,722.22	\$6,000	\$3,722.22	\$1.13	\$42.06	\$19.41	\$504.73
\$176,000	\$117,333.33	\$9,777.78	\$6,000	\$3,777.78	\$1.13	\$42.69	\$19.70	\$512.27
	\$118,000.00	\$9,833.33	\$6,000	\$3,833.33	\$1.13	\$43.32	\$19.99	\$519.80
	\$118,666.67	\$9,888.89	\$6,000	\$3,888.89	\$1.13	\$43.94	\$20.28	\$527.33
	\$119,333.33	\$9,944.44	\$6,000	\$3,944.44	\$1.13	\$44.57	\$20.57	\$534.87
\$180,000	\$120,000.00		\$6,000	\$4,000.00	\$1.13	\$45.20	\$20.86	\$542.40
	\$120,666.67	\$10,055.56	\$6,000	\$4,055.56	\$1.13	\$45.83	\$21.15	\$549.93
	\$121,333.33	\$10,111.11	\$6,000	\$4,111.11	\$1.13	\$46.46	\$21.44	\$557.47
	\$122,000.00		\$6,000	\$4,166.67	\$1.13	\$47.08	\$21.73	\$565.00
	\$122,666.67	\$10,222.22		\$4,222.22	\$1.13	\$47.71	\$22.02	\$572.53
	\$123,333.33	\$10,277.78	\$6,000	\$4,277.78	\$1.13	\$48.34	\$22.31	\$580.07
	\$124,000.00	\$10,333.33	\$6,000	\$4,333.33	\$1.13	\$48.97	\$22.60	\$587.60
	\$124,666.67	\$10,388.89	\$6,000	\$4,388.89	\$1.13	\$49.59	\$22.89	\$595.13
	\$125,333.33	\$10,444.44	\$6,000	\$4,444.44	\$1.13	\$50.22	\$23.18	\$602.67
	\$126,000.00	\$10,500.00	\$6,000	\$4,500.00	\$1.13	\$50.85	\$23.47	\$610.20
	\$126,666.67	\$10,555.56	\$6,000	\$4,555.56	\$1.13	\$51.48	\$23.76	\$617.73
	\$127,333.33	\$10,611.11	\$6,000	\$4,611.11	\$1.13	\$52.11	\$24.05	\$625.27
	\$128,000.00	\$10,666.67	\$6,000	\$4,666.67	\$1.13	\$52.73	\$24.34	\$632.80
φ 193,000	\$128,666.67	\$10,722.22	\$6,000	\$4,722.22	\$1.13	\$53.36	\$24.63	\$640.33

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M-NCPPC SUPPLEMENTAL LTD PLAN FOR EMPLOYEES WHOSE ANNUAL SALARY EXCEEDS \$108,000

A	В	С	D	E	F	G		Н
	Annual Benefit @	Monthly Benefit at		Monthly Buy-up Benefit In	Monthly	Monthly		Annual Premium
_	66 2/3% of	66 2/3% of	Core	Excess of	Rate /	Premium	Bi-	Paid
Annual	Annual	Monthly	Coverage	Core	\$100	Paid 100%	Weekly	100% by
Salary	Salary	Salary	Amount	Amount	Benefit	by EE	Premium	EE
.								
Formula	A x 2/3	B / 12	Constant	C - D	Rate	(E/100) x F		G x 12
\$194,000			\$6,000	\$4,777.78	\$1.13	\$53.99	\$24.92	\$647.87
	\$130,000.00	\$10,833.33	\$6,000	\$4,833.33	\$1.13	\$54.62	\$25.21	\$655.40
\$196,000		\$10,888.89	\$6,000	\$4,888.89	\$1,13	\$55.24	\$25.50	\$662.93
\$197,000		\$10,944.44	\$6,000	\$4,944.44	\$1.13	\$55.87	\$25.79	\$670,47
	\$132,000.00	\$11,000.00	\$6,000	\$5,000.00	\$1.13	\$56.50	\$26.08	\$678.00
\$199,000		\$11,055.56	\$6,000	\$5,055.56	\$1.13	\$57.13	\$26.37	\$685.53
\$200,000	\$133,333.33	\$11,111.11	\$6,000	\$5,111.11	\$1.13	\$57.76	\$26.66	\$693.07
\$201,000	\$134,000.00	\$11,166.67	\$6,000	\$5,166.67	\$1.13	\$58.38	\$26,95	\$700.60
\$202,000	\$134,666.67	\$11,222.22	\$6,000	\$5,222.22	\$1.13	\$59.01	\$27.24	\$708.13
\$203,000	\$135,333.33	\$11,277.78	\$6,000	\$5,277.78	\$1.13	\$59.64	\$27.53	\$715.67
\$204,000	\$136,000.00	\$11,333.33	\$6,000	\$5,333.33	\$1.13	\$60.27	\$27.82	\$723.20
\$205,000	\$136,666.67	\$11,388.89	\$6,000	\$5,388.89	\$1.13	\$60.89	\$28.11	\$730.73
\$206,000	\$137,333.33	\$11,444.44	\$6,000	\$5,444.44	\$1.13	\$61.52	\$28.39	\$738.27
\$207,000	\$138,000.00	\$11,500.00	\$6,000	\$5,500.00	\$1.13	\$62.15	\$28.68	\$745.80
\$208,000	\$138,666.67	\$11,555.56	\$6,000	\$5,555.56	\$1.13	\$62.78	\$28.97	\$753.33
\$209,000	\$139,333.33	\$11,611.11	\$6,000	\$5,611.11	\$1.13	\$63.41	\$29.26	\$760.87
\$210,000	\$140,000.00	\$11,666.67	\$6,000	\$5,666.67	\$1.13	\$64.03	\$29.55	\$768.40
\$211,000	\$140,666.67	\$11,722.22	\$6,000	\$5,722.22	\$1.13	\$64.66	\$29.84	\$775.93
\$212,000	\$141,333.33	\$11,777.78	\$6,000	\$5,777.78	\$1.13	\$65.29	\$30.13	\$783.47
\$213,000	\$142,000.00	\$11,833.33	\$6,000	\$5,833.33	\$1.13	\$65.92	\$30,42	\$791.00
	\$142,666.67	\$11,888.89	\$6,000	\$5,888.89	\$1.13	\$66.54	\$30.71	\$798.53
\$215,000	\$143,333.33	\$11,944.44	\$6,000	\$5,944.44	\$1.13	\$67.17	\$31.00	\$806.07
\$216,000	\$144,000.00	\$12,000.00	\$6,000	\$6,000.00	\$1.13	\$67.80	\$31.29	\$813.60

NOTES:

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^{4.} This chart is for illustrative purposes only, the employee's actual annual salary will be used to calculate the monthly premium.

Example Of Premium Calculation For Supplemental LTD

130,000	10,833 A (Annual Salary) divided by 12	7,222 B (Monthly Salary) times 66.67%	000'9	1,222 C (Monthly Salary at 66.67%) minus \$6.000	1.13 Calculated at \$1.13 for every \$100 of benefit	13.81 E (Amount in excess of basic LTD coverage) divided by 100 times \$1 13	165.74 G times 12	6.37 H divided by 26
(7)	↔	↔	↔	↔	↔	↔	↔	G
Annual Salary	Monthly Salary	Monthly Salary at 66 2/3%	Current Basic LTD Benefit Maximum	Amount in Excess of Basic Maximum Benefit	Premium for Supplemental plan	Monthly premium	Annual premium	Biweekly premium
⋖	മ	ပ	Ω	Ш	LL.	Ŋ	I	_