



2171 West 38th Street • Erie, Pa. 16508  
814/833-3200 • 800/815-2660 • Fax: 814/833-4844



**An Employer's Guide for the Manufacturer & Business Association Group Life, AD&D, Short-Term Disability and Long-Term Disability plans offered through The Hartford**

- Premium Rates – May 1, 2019 through April 30, 2021
- Underwriting Regulations
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- Billing and Administrative Fees and Procedures
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## **I PREMIUM RATES – May 1, 2019 through April 30, 2021**

### **A. Life / Accidental Death and Dismemberment**

Since rates are based on specific insurance amounts at each employee's insurance age, it is necessary to submit a listing of employees to MBA, including requested amounts of insurance and date of birth. MBA will supply a cost quotation to you. Rate changes based on changes of insurance age for existing members as of January 1, will be made as of May 1, 2019 upon plan renewal.

**PLEASE NOTE:** Dependent Life will continue to be provided to employees of member companies that participate in one of the Association-sponsored Life Insurance Plans. For this purpose, a dependent means the lawful spouse of an eligible employee and/or each child of such employee who is at least 14 days old and has not reached his/her 19<sup>th</sup> birthday. The amount of dependent life insurance will be \$4,000 for spouse and \$2,000 for each child.

### **B. Short Term Disability (Weekly Indemnity)**

Rates for new members will be furnished upon request by contacting Manufacturer & Business Association at 1-800/815-2660.

Benefit Duration - For all plans, benefits begin on the first day of an accident, the eighth day of a sickness and are payable for a maximum of thirteen (13) or twenty six (26) weeks for a disability.

Short term disability plans provide benefits up to a maximum of 70% of the employee's salary.

### **C. Long Term Disability**

Rates for new members will be furnished upon request by contacting Manufacturer & Business Association at 1-800/815-2660.

Benefit Duration - For all plans, benefits begin on the 90<sup>th</sup> day or the 180<sup>th</sup> day. All plans initially pay 60% per month. Rates are then paid based upon occupation going forward.

### **D. Age Determination for Life Premium Rate Purposes**

Rates for group life coverage will be based upon the age of the employee at the time of enrollment. Rates will be adjusted at renewal according to employee's age at that time.

## II UNDERWRITING REGULATIONS

### A. Initial Enrollment Procedures

1. New Members – New members may enroll for The Hartford Life, AD&D, Short Term Disability and Long-Term Disability programs on the first day of the month following membership approval by the Board of Governors.
2. Employee salary updates are processed effective May 1 for groups with Life plans 3, 4, 10 and 11.

### B. Enrollment / Late Enrollment Procedures

1. The Hartford does not have an open enrollment period for coverage other than when the employee is first eligible.
2. The standard eligibility waiting period is the first of the month following 30 days of employment. In order to accommodate employers with eligibility waiting periods that are longer than the standard, The Hartford has extended the eligibility waiting period to the first of the month following 90 days of employment. Employees who enrolled beyond the extended time frame will be considered late enrollees and subject to late enrollment requirements.
3. If an employee would like to request insurance coverage, complete an enrollment form, sign the form, and return with the monthly premium to:

**Manufacturer & Business Association Insurance Plan  
Three Gateway Center, STE 1625  
Pittsburgh, Pa. 15222**

**Late Enrollment Requirements – After reviewing the request, if it is determined that the employee or their dependent did not enroll when they were first eligible, the employee will be subject to evidence of insurability guidelines for Life, AD&D, Short Term Disability and Long-Term Disability coverage.**

### C. Eligibility

Association member firm with two or more full time employees.

### D. Change of Option Procedures

Existing members currently enrolled should direct their inquiries to Manufacturer & Business Association if a change in benefits is desired, members may contact their agent or broker as well.

### E. Contributions

1. Plans may be contributory, however, the employee contribution may not exceed 50% of actual cost to a maximum of \$0.60 per month for each \$1,000 of Group Life Insurance, as required by law.
2. If employees are required to contribute toward the premium, only those who enroll for coverage are to be insured. Insurance on employees is subject to (a) 85% or more of those eligible being insured if the number of eligible employees is less than 10; or (b) 75% or more of those eligible being insured if the number of eligible employees is 10 or more.

### **III BILLING, ADMINISTRATIVE FEES AND PROCEDURES**

Billing and administrative services for Manufacturer & Business Association Insurance Plan are provided through CW Breitsman Associates. The schedule of fees applied to the monthly premium billings are as follows:

**A. Service Charge**

1. A basic charge per group of \$4.00
2. \$0.35 per participating employee.

*The maximum monthly total per employee charge (items 1&2 above) will be \$60.*

**B. Premium Delinquency Charge**

Premium Payments are due and payable by the 25<sup>th</sup> day of the month of billing.

**Manufacturer & Business Association Insurance Plan  
Three Gateway Center, STE 1625  
Pittsburgh, Pa. 15222**

**Checks are made payable to:**

**Manufacturer & Business Association Insurance Plan**

**A \$35.00 charge for returned checks will be applied.**

**C. Administrative Changes**

Member Firms must submit, in writing, all requests for administrative changes regarding company name, address, telephone number, ownership and billing correspondence to:

**The Manufacturer & Business Association  
2171 West 38<sup>th</sup> Street  
Erie, Pa. 16508**

**D. Premium Invoices**

Invoices will be mailed to member companies **only**.

**Any problems or questions related to billing should be directed to CW Breitsman Associates at (833) 530-9675.**

## **E. Enrollment / Change Procedures**

1. To add a new employee, complete an enrollment form (supplies can be obtained by contacting the Manufacturer & Business Association at 814/ 833-3200 or visiting the Website at [www.mbausa.org](http://www.mbausa.org). Have the employee sign the form and return it to the billing office.
2. To delete an employee, cross the name from the billing invoice and provide a termination date.
3. To change dependent status, complete a revised enrollment form and return it with your next billing

## **IV PLAN OPTIONS**

### **Basic Life Plan Options**

Plan I	Flat \$10,000 for all employees
Plan II	Flat \$20,000 for all employees
Plan III	1X basic annual earnings, \$50,000 maximum
Plan IV	2X basic annual earnings, \$100,000 maximum
Plan V	1X basic annual earnings, \$100,000 maximum
Plan VI	2X basic annual earnings, \$200,000 maximum

***An age reduction factor applies to the group life and AD&D benefit. Age reduction in the group life benefit will begin at age 70 when the original benefit will be reduced by 25 percent. For example, an original benefit amount of \$100,000 will become \$75,000 at age 70. The benefit will be further reduced at age 75 to 50 percent of the original benefit. It is important to note that the group life plans are available to active employees only.***

### **Short Term Disability Plan Options**

Plan I	1-8-26 plan*, \$100 flat per week for all employees
Plan II	1-8-26 plan*, 66 2/3% salary for officers, partners and owners, \$150 maximum per week 1-8-26 plan*, 66 2/3% salary for all other employees, \$100 maximum per week
Plan III	1-8-26 plan*, 66 2/3% salary for all employees, \$400 maximum per week
Plan VII	1-8-26 plan*, 66 2/3% salary for all employees, \$800 maximum per week
Plan IX	1-8-26 plan*, 66 2/3% salary for all employees, \$1,200 maximum per week
Plan XI	1-8-26 plan*, \$300 flat per week for all employees
Plan XIII	1-8-26 plan*, \$600 flat per week for all employees

***\* 13 week maximum duration options may also be available on some plans***

## **Long Term Disability Plan Options**

- Plan I     Officers/Partners/Owners  
60% up to \$5000/month starting on the 90<sup>th</sup> day  
80% or less of predisability earnings – own occupation
- Other Employees  
60% up to \$3000/month starting on the 90<sup>th</sup> day  
80% or less of predisability earnings – own occupation  
60% or less of predisability earnings after 24 mos. – any occupation
- Plan II     Officers/Partners/Owners  
60% up to \$5000/month starting on the 180th day  
80% or less of predisability earnings – own occupation
- Other Employees  
60% up to \$3000/month starting on the 180th day  
80% or less of predisability earnings – own occupation  
60% or less of predisability earnings after 24 mos. – any occupation
- Plan III    All Employees  
60% up to \$5000/month starting on the 90<sup>th</sup> day  
80% or less of predisability earnings – own occupation  
80% or less of predisability earnings after 24 mos – any occupation
- Plan IV    All Employees  
60% up to \$5000/month starting on the 180th day  
80% or less of predisability earnings – own occupation  
80% or less of predisability earnings after 24 mos – any occupation
- Plan V     All Employees  
60% up to \$5000/month starting on the 90<sup>th</sup> day  
80% or less of predisability earnings – own occupation  
60% or less of predisability earnings after 24 mos – any occupation
- Plan VI    All Employees  
60% up to \$5000/month starting on the 180th day  
80% or less of predisability earnings – own occupation  
60% or less of predisability earnings after 24 mos – any occupation

## **V LIFE AND AD&D**

1. Supplies can be obtained by contacting Manufacturer & Business Association at 814/833-3200 or 800/815-2660 or visiting the Website at [www.mbausa.org](http://www.mbausa.org).
2. To file a death or AD&D claim, complete a claim form, have the death certificate, original enrollment card and Beneficiary designation (if any) attached and send to:

**The Hartford  
Group Life Claims  
PO Box 14299  
Lexington, KY 40512-4299**

3. Inquiries concerning benefits and claims on Life and AD&D plans must be directed to **The Hartford Group Life Claims office at 888/563-1124.**

## **VI SHORT TERM DISABILITY/LONG TERM DISABILITY**

1. To file a Short-Term Disability claim call 888/301-5615
2. Paper claims may still be filed to:

**The Hartford  
Group Benefit Claims  
PO Box 14869  
Lexington, KY 40512-4869**

3. Inquiries concerning benefits and claims for disability plans must be directed to **The Hartford Disability Claims office at 800/549-6514.**

# REFERENCE PAGE

**Company Name/Address Changes**

Manufacturer & Business Association  
2171 West 38<sup>th</sup> Street  
Erie, Pa. 16508

**Premium Payment Address**

Manufacturer & Business Assoc. Insurance Plan  
Three Gateway Center, STE 1625  
Pittsburgh, Pa. 15222

**New Group Submission Address**

Manufacturer & Business Association  
2171 West 38<sup>th</sup> Street  
Erie, Pa. 16508

**Enrollments and Changes**

Manufacturer & Business Assoc. Insurance Plan  
Three Gateway Center, STE 1625  
Pittsburgh, Pa. 15222

**Life Claim Address**

The Hartford  
Group Life Claims  
PO Box 14299  
Lexington, KY 40512-4299  
Fax: (866) 954-2621

**STD and LTD Claim Address**

The Hartford  
Group Benefit Claims  
PO Box 14869  
Lexington, KY 40512-4869  
Fax: (833) 357-5153

## Phone Numbers

<b>Forms .....</b>	<b>1-800/815-2660</b>
<b>Rate Information.....</b>	<b>1-800/815-2660</b>
<b>Billing Questions .....</b>	<b>1-833/530-9675</b>
<b>To File a Disability Claim .....</b>	<b>1-888/301-5615</b>
<b>Life Claim Questions .....</b>	<b>1-888/563-1124</b>
<b>Disability Claim Questions.....</b>	<b>1-800/549-6514</b>
<b>Membership Issues.....</b>	<b>1-800/815-2660</b>