

## SCHEDULE OF BENEFITS

Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Class Effective Date:	October 1, 2011
Benefits Revised Date:	January 1, 2015
Eligible Class:	Class 12: Bus Drivers and Transportation Assistants hired on or after 7/1/11
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$629
Guarantee Issue:	\$629
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 59 consecutive working days Physical Disease: 59 consecutive working days
First Day Hospital Benefit:	Included
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%

Evidence of Insurability Requirement:

Required for Late Emoltees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:

Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins

Social Security Integration:

Full Family

Freeze Type:

General Freeze

Integration with Work Earnings:

Direct

## SCHEDULE OF BENEFITS

Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Benefits Revised Date:	January 1, 2015
Eligible Class:	Class 04: Bus Drivers and Transportation Assistants hired prior to 7/1/11
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$629
Guarantee Issue:	\$629
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 8 consecutive working days Physical Disease: 8 consecutive working days
First Day Hospital Benefit:	Included
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%

Evidence of Insurability Requirement:

Required for Late Emoltees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:

Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins

Social Security Integration:

Full Family

Freeze Type:

General Freeze

Integration with Work Earnings:

Direct

## SCHEDULE OF BENEFITS

Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Benefits Revised Date:	January 1, 2015
Eligible Class:	Class 03: Custodians
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$744
Guarantee Issue:	\$744
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 5 consecutive working days Physical Disease: 5 consecutive working days
First Day Hospital Benefit:	Included
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%

Evidence of Insurability Requirement:

Required for Late Emoltees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:

Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins

Social Security Integration:

Full Family

Freeze Type:

General Freeze

Integration with Work Earnings:

Direct

## SCHEDULE OF BENEFITS

Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Benefits Revised Date:	January 1, 2015
Eligible Class:	Class 09: Non-Bargaining Employees
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$1,320
Guarantee Issue:	\$1,320
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 90 cumulative days Physical Disease: 90 cumulative days
First Day Hospital Benefit:	Included
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%

Evidence of Insurability Requirement:

Required for Late Emoltees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:

Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins

Social Security Integration:

Full Family

Freeze Type:

General Freeze

Integration with Work Earnings:

Direct



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Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Benefits Revised Date:	January 1, 2015
Eligible Class:	Class 10: Administrators
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$1,971
Guarantee Issue:	\$1,971
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 6 cumulative days over the Employee's contract year Physical Disease: 6 cumulative days over the Employee's contract year
First Day Hospital Benefit:	Included
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%

Evidence of Insurability Requirement:

Required for Late Emoltees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:

Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins

Social Security Integration:

Full Family

Freeze Type:

General Freeze

Integration with Work Earnings:

Direct

## SCHEDULE OF BENEFITS

Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Benefits Revised Date:	January 1, 2015
Eligible Class:	Class 05: Paraprofessionals with a 186 day contract
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$535
Guarantee Issue:	\$535
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 5 consecutive working days Physical Disease: 5 consecutive working days
First Day Hospital Benefit:	Included
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%

Evidence of Insurability Requirement:

Required for Late Emoltees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:

Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins

Social Security Integration:

Full Family

Freeze Type:

General Freeze

Integration with Work Earnings:

Direct

## SCHEDULE OF BENEFITS

Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Benefits Revised Date:	September 1, 2014
Eligible Class:	Class 08: Professional (Teachers, Direct Service and Consultants)
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$1,847
Guarantee Issue:	\$1,847
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 90 consecutive calendar days Physical Disease: 90 consecutive calendar days
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%
Evidence of Insurability Requirement:	Required for Late Emollees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:	Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins
Social Security Integration:	Full Family
Freeze Type:	General Freeze
Integration with Work Earnings:	Direct

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Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Benefits Revised Date:	January 1, 2015
Eligible Class:	Class OI: Bargaining Unit Secretaries
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$807
Guarantee Issue:	\$807
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 5 consecutive working days Physical Disease: 5 consecutive working days
First Day Hospital Benefit:	Included
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%

Evidence of Insurability Requirement:

Required for Late Emoltees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:

Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins

Social Security Integration:

Full Family

Freeze Type:

General Freeze

Integration with Work Earnings:

Direct



## SCHEDULE OF BENEFITS

Employer(s):	Macomb Intermediate School District
Plan Number:	6455
Original Plan Effective Date:	July 1, 2005
Benefits Revised Date:	January 1, 2015
Eligible Class:	Class 02: Data Processing Technicians
Minimum Hourly Work Requirement:	15 hours per week
Waiting Period:	None
Employee Eligibility Date:	Upon completion of the Waiting Period
STD Benefit Percentage:	70%
Maximum Weekly Benefit:	\$1,116
Guarantee Issue:	\$1,116
Maximum Benefit Period:	Commencing at the end of the Elimination Period and continuing for the lesser of 52 weeks, or until LTD Benefits commence. No STD Benefits will be paid for periods of time for which LTD Benefits are payable.
Claim Payment Method:	Daily
Elimination Period:	Injury: 6 consecutive working days Physical Disease: 6 consecutive working days
First Day Hospital Benefit:	Included
Definition of Disability:	Partial
Twenty-four Hour Coverage:	Applies
Own Occupation Period:	Duration of benefits
Recurrent Disability:	90 days
Definition of Predisability Earnings:	Base pay plus contributions to deferred compensation plan, Section 125 plan or flexible spending account
Employer Premium Contribution:	100%
Minimum Participation Requirement:	100%

Evidence of Insurability Requirement:

Required for Late Emoltees, Increases and amounts exceeding the Guarantee Issue

Leaves and Sabbaticals:

Coverage with premium payment while on FMLA leave; Coverage with premium payment until the end of the month following the month in which Paid or Unpaid Leave or Layoff begins

Social Security Integration:

Full Family

Freeze Type:

General Freeze

Integration with Work Earnings:

Direct