

Flight Attendant Optional Short-Term Disability (OSTD)

How the OSTD Insurance Benefit Works

This benefit applies to eligible Flight Attendant employees. Dependents are not eligible for this benefit.

The Company provides a certain amount of paid sick time for salary continuance during disabilities. However, a gap may occur between the time accrued sick pay ends and Long-Term Disability (LTD) benefits begin. (Note that Long-Term Disability benefits are not part of this Plan.) In this case, the Company also offers Optional Short-Term Disability (OSTD) Insurance benefits to provide income protection until LTD benefits begin.

OSTD Insurance benefits replace a portion of your salary when you are unable to work as a result of a non-work related disability. Before electing OSTD Insurance coverage, you should consider your accrued sick time because OSTD Insurance benefits are not payable until all of your accrued sick pay is used. The cost of OSTD Insurance is collected through payroll deductions.

If you enroll, your selection remains in effect for two calendar years. If you choose not to enroll when you are first eligible and decide to enroll later, Proof of Good Health is required. Your OSTD Insurance will not become effective until you are actively at work and a payroll deduction has been taken.

If you are unable to work your normal work schedule for any reason, you must address your work status with your supervisor. This is true regardless of whether you receive OSTD Insurance benefits.

When You Qualify for OSTD Insurance Benefits

In order to qualify for OSTD Insurance, you must be considered “totally disabled.” You are considered totally disabled if you are not gainfully employed in any type of job for wage or profit and are unable to perform major and substantial duties pertaining to your own occupation because of sickness or accidental bodily injury.

In addition, you will be required to receive Appropriate Care and Treatment (during your disability). Appropriate Care and Treatment means medical care and treatment that is:

- Given by a Physician whose medical training and clinical specialty are appropriate for treating your disability;

- Consistent in type, frequency and duration of treatment with relevant guidelines of national medical research, health care coverage organizations and governmental agencies;
- Consistent with a Physician's diagnosis of your disability; and
- Intended to maximize your medical and functional improvement.

The Company's approval of your sickness or injury leave of absence is independent of disability benefit determination and should not be construed as validation of your disability claim or any guarantee of benefits payable for your disability claim.

OSTD Insurance Benefits

OSTD Insurance is insured through MetLife and is designed to supplement any other similar benefits to equal 50% of your adjusted monthly salary. For regular, full-time employees, "adjusted monthly salary" is defined as your annual base salary. It does not include profit sharing, bonus, overtime or incentive pay. The maximum covered salary is \$200,000.

Your OSTD Insurance benefit will be adjusted to reflect income from other sources (see "[Benefits from Other Sources](#)," below) and any amount of your work earnings while participating in the Return-to-Work Program that causes your income from all sources to exceed 100% of your pre-disability earnings. In no event can the total amount you collect from all sources or income exceed 100% of your pre-disability earnings while you are disabled. Your pre-disability earnings are determined as of the date you become disabled.

If you are enrolled in the Long-Term Disability (LTD) benefit, you will receive the full benefit of OSTD Insurance, plus you will receive a minimum benefit from LTD coverage (to begin the later of four months from the date of disability or when sick pay is exhausted). (Note that Long-Term Disability benefits are not part of this Plan.) Once the 26 weeks of OSTD Insurance are exhausted, the full LTD benefit will be payable.

In some cases, OSTD Insurance benefits may be limited:

- If you are based in California, Hawaii, New Jersey, New York, Rhode Island or Puerto Rico, you may be eligible for state disability benefits. Employees based in California, Hawaii and Rhode Island must apply directly to the state for benefits.
- If you have accrued a significant number of unused sick days, you would not be able to collect OSTD Insurance until you have used all those days.

The OSTD Insurance benefits you receive are not taxable income because you pay for this coverage with after-tax contributions.

Benefits from Other Sources

Your OSTD Insurance benefits are reduced if you are either receiving these other benefits or are entitled to receive these benefits upon your timely filing of respective claims:

- **No-Fault Auto Laws:** Periodic loss of income payments you receive under no-fault auto laws. Such payments will offset your OSTD Insurance benefit.
- **Third Party Recovery:** Recovery amounts that you receive from loss of income as a result of claims against a third party by judgment, settlement or otherwise including future earnings may offset your OSTD Insurance benefit.

When OSTD Insurance Benefits Begin

Provided you qualify, OSTD Insurance benefits are payable on the eighth day of disability or when your accrued paid sick time is exhausted, whichever occurs later. If you are collecting vacation pay when OSTD Insurance benefits become payable, OSTD Insurance benefits will not begin until your vacation pay ends. Benefits are payable for a maximum of 26 weeks.

Successive Periods of Disability

There is no limit to the number of times you may receive these benefits for different periods of disability. However, successive periods of disability separated by less than 60 days of full-time active work are considered a single period of disability. Such disability will be considered to be a part of the original disability. MetLife will use the same pre-disability earnings and apply the same terms, provisions and conditions that were used for the original disability. This benefits you because if you become disabled again due to the same or related sickness or Accidental Injury, you will not be required to meet a new elimination period. The only exception is if the later disability is unrelated to the previous disability and begins after you return to full-time active work for at least one full day.

Filing a Claim for OSTD Insurance Benefits

If your disability continues for eight or more days, you should file your disability claim immediately. **Do not wait until your sick pay is used up; file by the eighth day of your disability.** The sooner you file, the sooner your claim can begin processing. However, the latest you can file your claim is six months after your disability began. If you are covered under a state-mandated short-term disability plan and the state requires you to file sooner, the state's filing deadline overrides the Company's deadline. If you file your disability claim beyond the six-month deadline (or the state-mandated deadline, if sooner), your claim will not be accepted and you will not be eligible for benefits.

The following is a summary of how you file a claim for disability benefits:

- You only need to file one claim to request benefits under the OSTD Insurance benefit, state disability plans (other than California, Rhode Island and Hawaii,

which have their own forms that must be filed directly with the respective states) and LTD benefit. (Note that Long-Term Disability benefits are not part of this Plan.) You or your supervisor should request the [Disability Claim Form](#) as soon as you become disabled.

- You, your supervisor and your attending Physician must each complete part of the form. The completed sections may be mailed together or separately to the Network/Claim Administrator at the address on the form.
 - Disability Claim Employer Statement: Your supervisor completes this page.
 - Disability Claim Employee Statement: You complete this page. Be sure to sign the Reimbursement Agreement on the back of the form (see [Benefits from Other Sources](#)).
 - Disability Claim Attending Physician Statement: Your Physician completes this page.

After the Network/Claim Administrator receives the form, your claim will be processed. Sometimes the Network/Claim Administrator may request additional information. You will be notified of the decision regarding your claim. Notification and/or payment is made directly to you.

MetLife is the Network/Claim Administrator for the Optional Short-Term Disability Insurance benefit. The OSTD Insurance and state disability coverages are insured plans (including state plans in Hawaii, New Jersey, New York and Puerto Rico). The states of California and Rhode Island administer their own disability plans.

OSTD Insurance Return-to-Work Program

OSTD Insurance also offers a Return-to-Work Program that allows you to go back to work on a trial basis while recovering from a disability. If you participate in the Return-to-Work Program, you will collect:

- a 50% OSTD Insurance benefit that is adjusted for income from other sources,
- a 10% Return-to-Work Program incentive, and
- The amount you earn from participating in the voluntary Return-to-Work Program while you are disabled.

OSTD Insurance Family Care Incentive

If you work part-time or participate in the Return-to-Work Program while you are disabled, MetLife will reimburse you for up to \$100 for weekly expenses you incur for each Child or family member incapable of independent living.

To receive the reimbursement, child care must be provided by a licensed child care provider who may not be member of your immediate family or living in your residence.

Child care must be provided for your or your Spouse's child, legally adopted child or a child for whom you or your Spouse is legal guardian and who is:

- Living with you as part of your household;
- Dependent on you for support; and
- Under age 13.

This benefit also includes care for your family member who is living with you as part of your household and who is

- Chiefly dependent on your for support; and
- Incapable of independent living, regardless of age, due to mental or physical handicap as defined by applicable law.

Care to your family member may not be provided by a member of your immediate family.

When OSTD Insurance Benefits End

Your OSTD Insurance benefit payments end automatically on the earliest of the following dates:

- The date the Network/Claim Administrator determines you are no longer disabled (e.g., you no longer meet the definition of total disability, you are no longer receiving Appropriate Care and Treatment, etc.); or
- The date you become gainfully employed in any type of job for any employer, except under the Return-to-Work Program; or
- The end of the maximum benefit period of 26 weeks; or
- The date you die.

If and when you return to work, you or your supervisor must notify MetLife to stop benefit payments. This ensures proper closure of your claim and avoids possible overpayment. You are responsible for repaying any overpayments you receive.

Exclusions and Limitations

The OSTD Insurance benefit has the following exclusions and limitations:

- **Preexisting conditions exclusion:** You are not covered under this benefit for a disability if you received medical care or treatment for the disability within the three months before the effective date of this coverage. However, after you have been covered for 12 months, this limitation of disability no longer applies, and you may receive benefits.
- If you are based in California, Hawaii, New York, New Jersey, Puerto Rico or Rhode Island, then OSTD Insurance benefits are offset. Employees based in these states receive similar benefits that are provided in compliance with

applicable state law. If the state benefit is less than the OSTD Insurance benefit, an OSTD Insurance benefit is payable. If the state benefit is more than the OSTD Insurance benefit, an OSTD Insurance benefit is not payable.

- Benefits are not payable if you are disabled as a result of a work-related accident or sickness. An injury or illness is not considered work-related for OSTD Insurance purposes if the claim is denied by Workers' Compensation.
- If you become disabled before the effective date, you are not covered under this insurance until you return to work and deductions are taken from your pay.
- Benefits are not payable if you are disabled as a result of committing or trying to commit a felony, assault or other serious crime.
- Benefits are not payable if you are disabled as a result of self-inflicted injuries or attempted suicide.
- Benefits are not payable if caused by a declared or undeclared act of war.
- Benefits are not payable unless you are receiving Appropriate Care and Treatment for your disabling condition from a duly qualified Physician.
- Benefits may be reduced if you participate in the Return-to-Work program.

Long-Term Care Insurance

MetLife fully insures and administers the long-term care insurance benefit under the Plan. MetLife has made the determination to no longer offer long-term care insurance under the Plan. Individuals who are already enrolled in long-term care insurance will be able to continue their coverage through MetLife. To be considered for coverage, individuals must have submitted a completed enrollment form to MetLife, and MetLife must have received it on or before January, 2, 2013.

When you enrolled in the long-term care insurance benefit, you should have received a Certificate of Coverage in the mail that describes the benefits under long-term care insurance. If you need another copy of your Certificate of Coverage or want more information, you can visit the [MetLife website](#) or contact MetLife at 1-800-438-6388 for more information.