



NYSUT Member Benefits Trust Endorsed Voluntary Disability Insurance Plan - Rate Chart

If you have questions or would like to apply for coverage, please contact AMBA at 888-386-9788 or you may visit the AMBA website (see link to the right) for additional information and to download an application.

[AMBA Website](#)

To determine your rate, first select a payment method and then a plan (Short-Term, 5-Year or Long-Term plan) along with your desired Elimination Period (EP), also known as a waiting period. Once you identify those, go to the table below that applies and select the rate that falls into your age bracket. For an easy way to calculate your premium, visit the AMBA Website (link above) for access to the Disability Rate Calculator.

Age / EP	Payroll Deduct Rate Per \$50 of Monthly Benefit					Direct Bill Rate Per \$50 of Monthly Benefit				
	Short-Term Plan - 12 Months					Short-Term Plan - 12 Months				
	60-Day	90-Day	120-Day	150-Day	180-Day	60-Day	90-Day	120-Day	150-Day	180-Day
18 – 39	\$0.27	\$0.18	\$0.18	\$0.14	\$0.14	\$0.27	\$0.18	\$0.18	\$0.14	\$0.14
40 – 49	\$0.41	\$0.32	\$0.27	\$0.23	\$0.23	\$0.41	\$0.32	\$0.27	\$0.23	\$0.23
50 – 59	\$0.54	\$0.45	\$0.45	\$0.41	\$0.36	\$0.59	\$0.50	\$0.45	\$0.41	\$0.36
60 +	\$1.04	\$0.90	\$0.81	\$0.77	\$0.68	\$1.08	\$0.95	\$0.86	\$0.81	\$0.72
Age / EP	5-Year Plan					5-Year Plan				
	60-Day	90-Day	120-Day	150-Day	180-Day	60-Day	90-Day	120-Day	150-Day	180-Day
18 – 39	\$0.50	\$0.36	\$0.33	\$0.29	\$0.27	\$0.54	\$0.42	\$0.40	\$0.37	\$0.32
40 – 49	\$0.81	\$0.72	\$0.68	\$0.62	\$0.61	\$0.92	\$0.85	\$0.81	\$0.75	\$0.71
50 – 59	\$1.26	\$1.19	\$1.16	\$1.13	\$1.09	\$1.48	\$1.38	\$1.31	\$1.25	\$1.21
60 +	\$1.66	\$1.44	\$1.33	\$1.26	\$1.15	\$2.07	\$1.80	\$1.67	\$1.58	\$1.44
Age / EP	Long-Term Plan					Long-Term Plan				
	60-Day	90-Day	120-Day	150-Day	180-Day	60-Day	90-Day	120-Day	150-Day	180-Day
18 – 39	\$0.58	\$0.54	\$0.50	\$0.47	\$0.43	\$0.72	\$0.68	\$0.63	\$0.59	\$0.54
40 – 49	\$0.97	\$0.90	\$0.86	\$0.79	\$0.76	\$1.22	\$1.13	\$1.08	\$0.99	\$0.95
50 – 59	\$1.48	\$1.30	\$1.26	\$1.15	\$1.12	\$1.85	\$1.62	\$1.58	\$1.44	\$1.40
60 +	\$1.66	\$1.44	\$1.33	\$1.26	\$1.15	\$2.07	\$1.80	\$1.67	\$1.58	\$1.44

Notes:

- Coverage terminates at age 66.
- Your Monthly benefit application will be limited to the lesser of \$5,000 or 60% of your earnings.
- To be eligible, you must be actively at work and a member of or agency fee payer to NYSUT, age 65 or under and work 20 or more hours weekly.
- This is a quote for disability insurance and NOT an offer for insurance coverage. All applications are subject to underwriting.
- Payroll deduction is available in local associations that have made the necessary payroll deduction arrangements for NYSUT Member Benefits-endorsed programs.
- Visit the AMBA website for additional plan details.

The MetLife Disability Insurance Plan is a NYSUT Member Benefits Trust (Member Benefits)-endorsed program. Member Benefits has an endorsement arrangement of 5% of gross premiums for this program. All such payments to Member Benefits are used solely to defray the costs of administering its various programs and, where appropriate, to enhance them. The Insurer pools the premiums of Member Benefits participants who are insured for the purposes of determining premium rates and accounting. Coverage outside of this plan may have rates and terms that are not the same as those obtainable through Member Benefits. The Insurer or Member Benefits may hold premium reserves that may be used to offset rate increases and/or fund such other expenses related to the plan as determined appropriate by Member Benefits. Member Benefits acts as your advocate; please contact Member Benefits at 800-626-8101 if you experience a problem with any endorsed program.



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