

DISABILITY PROTECTION

Can you live on your basic railroad benefits?

PROBABLY NOT!



Short Term and Long Term Disability Plans

- Receive up to \$692 per week in short term disability benefit, with no offsets.
- Coverage is 24 hrs a day, on or off the job, sickness or accident.
- Optional accident benefits pays you cash for ER visits, hospital stays, ambulance visit, physical therapy, etc...
- Plan pays in addition to Railroad Sickness Benefit, (RUIA), & supplemental sickness benefit for the first year.
- Guarantee issue available during open enrollment period.
- Benefits paid weekly for Short Term Disability Plans.

Railroad Marketing Specialists is an independent insurance general agency working exclusively with railroaders and their families. Since we are independent, we can offer you insurance coverage from some of the largest insurance carriers in the country using insurance products that will best fit the needs of railroaders.

For life, cancer or additional disability insurance quote to meet your own individual needs, please call Railroad Marketing and we will be pleased to provide you with all the information you need to customize your own insurance program.



Railroad Marketing Insurance Services

888-646-9951

866-646-9951

www.railroadmarketing.com
P.O. Box 911630 St. George, UT 84791

This brochure is not the contract and is only intended to be a brief, general description of coverage available. Benefits described are a combination of policies from multiple companies and have limitations. For costs and complete details of coverage, contact Railroad Marketing.

24-Hour Accident & Sickness Disability Benefit

Covers you 24 hours per day - even while you're at work.

Receive up to \$692 per week for both on-the-job and off-the-job injury for short term disability and up to \$ 3,000 per month for LTD.

Coverage begins after 14 days of a covered Sickness or accident on the STD plan. Maximum Disability Benefit Period is 24 months.

Optional Coverage

Optional, additional, accident benefits are available to include accident coverage for 33 different treatment expenses. These benefits are paid in addition to your disability benefits.

Buy With Confidence

- Your benefits are paid directly to you.
- Your rates have an annual rate guarantee.
- Railroad Marketing will provide you with claims assistance in the event you become disabled.
- Railroad Marketing has been working with railroaders and their families for over 60 years. This is group insurance. This plan is available to former MRL employees and new hired in this specific area.

RATES & PLANS

Short & Long Term Disability

Option A

Monthly Disability Benefit

Accident & Sickness \$2,000

Elimination Period

14 day Accident & Sickness

Benefit Period

24 months

Rate

\$122.00 Monthly

\$61.00 Twice Monthly

Option B

Monthly Disability Benefit

Accident & Sickness \$3,000

Elimination Period

14 day Accident & Sickness

Benefit Period

24 months

Rate

\$167.00 Monthly

\$83.50 Twice Monthly

Additional Supplemental Benefits Available

Term Life Insurance: Yes No

Employee:

200k 150k 100 50k
 (\$41.50) (\$31.50) (\$21.50) (\$11.50)

Spouse: 25k (\$5)

Children: 10k (each) (\$1)

Critical Illness: Yes No

Employee:

30k 25k 20k 15k 10k 5k
 (\$21) (\$17.75) (\$14.50) (\$11.25) (\$8) (\$4.75)

Spouse:

30k 25 20k 15k 10k 5k
 (\$21) (\$17.75) (\$14.50) (\$11.25) (\$8) (\$4.75)

Children: 5k (each) Yes No (\$1.50)

Accident Indemnity Insurance:

Employee Only: Yes No (\$9)

Employee & Spouse: Yes No (\$17)

Employee & Children: Yes No (\$19)

Family: Yes No (\$23)

Hospitalization Insurance: Yes No

Employee Only: Yes No (\$21)

Family (spouse & children) Yes No (\$64)

Crew Van Insurance: Yes No (\$4.25)

**Prices shown are bi-monthly*

Benefits are Received Tax FREE

Premiums for the disability coverage are waived while you are receiving benefits.

Pre Existing conditions apply see policy for details.

All premiums will be payroll deducted.

Benefits are paid weekly.

To learn how to protect your financial future
contact us for your personal consultation:



Railroad Marketing
Insurance Services

888-646-9951
866-646-9951
RailRoadMarketing.com

ENROLLMENT FORM

Plan Selection: A B

Full Name: _____

Home Address: _____

Cell Phone: _____

Employee ID#: _____ **Railroad:** _____

Social Security: _____ **Date Of Birth:** _____ **Sex:** _____

Annual Income Last Year (including all overtime) _____

Occupation: _____ **Date of Hire:** _____

Email: _____

Term Life Ins Beneficiary: _____

Relationship: _____ **Date Of Birth:** _____

(for life insurance only)

Additional Household Members if buying benefits:

Full Name	Relationship	Date Of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I wish to enroll in the disability insurance program through Railroad Marketing Specialist LLC and authorize my Railroad employer to make the necessary deduction.

Signature: _____ **Date:** _____