

Bermuda - Disability Benefits

Provided through Argus, GEB's Network Partner in Bermuda

Bermuda Life Insurance company is an entity of Argus Group (Argus Holdings Limited), a multi-line insurance and financial services organisation offering a comprehensive range of insurance, pension and investment products for local and multinational companies. Bermuda Life Insurance offers Group Health, Life, Disability, Workers' Compensation, Property Insurance and Pension/Investment products.

Causes of Disability

Leading causes of death and disability in Bermuda include: ischemic heart disease, diabetes, stroke, lung cancer, low back pain. These conditions are driven by highly prevalent risk factors such as high body mass index, high fasting blood glucose, high blood pressure.¹

Many causes of disability can be managed through early intervention, education and lifestyle changes. For disorders that progress to disability and eventual absence from work, Bermuda Life Insurance offers Disability benefits and associated support services.

Disability Products

Bermuda Life offers Short Term Disability (STD) and Long Term Disability (LTD). Following is a description of standard product features:

Definition of Disability: An individual may be considered Totally or Partially disabled, depending upon their ability to perform their own occupation. Disability is broadly defined as:

- resulting from sickness or injury, and
- resulting in loss of income, and
- requires continuous care and treatment by a Physician [whose expertise is appropriate to treat the disabling condition], and
- begins while insured under the policy.

An individual may be considered Totally Disabled if they are not engaged in any occupation for wage or profit and:

Disability Support

Bermuda Life Insurance takes a holistic approach to disability claims management, supporting customers with a focus on early intervention, rehabilitation and return to work planning.

Early intervention: Our local care coordination programme, Thrive Case Management, is available at no additional cost to clients who also have health insurance policies from Bermuda Life/Argus. Members work one-on-one with a clinical or masters-prepared Case Manager, their healthcare providers and support persons to take an active role in managing their health, with emphasis on prevention and proactive use of health care benefits.

Rehabilitation and Return-to-work support: Thrive Case Managers provide education, advocacy and assistance in supporting claimants in achieving their care goals and returning to work. This includes identifying care needs, coordinating access to social benefits, and allied health services. With the claimant's consent, the Case Manager can also facilitate referrals to occupational therapists who can provide management and team training on the claimant's disability, workspace modifications and recommendations on role adjustment.

Leveraging technology: Secure electronic submission for claimants when submitting documentation and receiving updates on their disability claims. Claims are paid electronically.



1- https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(24)00757-8, 2- Health in the Americas. Country Report: Bermuda Health Situation & the Health System, https://www.paho.org/salud-en-las-americas-2012/index. php?option=com_docman&iwew=download&category_slug=hia-2012-country-chapters-22&alias=116-bermuda-116<emid=231&lang=en GEBDIS/Bermuda_12.01.2024

Disability Products (continued)

a) are unable to perform at least one, but not all major duties of their own job during the Elimination Period and the following 24 months, and:

b) thereafter are unable to perform with reasonable continuity all of the major duties of their own or any other occupation for which they are or may become reasonably qualified by education, training and experience and earn at least 75% of their inflation indexed pre-Disability earnings.

An individual may be considered Partially Disabled if, following a period of Total Disability [lasting at least as long as the Elimination period] they are:

a) able to perform at least one, but not all, major duties of their occupation for any employer and their earnings do not exceed 75% of their inflation indexed pre-Disability earnings during the first 24 months of benefit payment, and

b) thereafter, they are able to perform at least one major duty of any gainful occupation for any employer and their earnings from any and all occupations do not exceed 75% of inflation indexed pre-Disability earnings.

Benefits structure: STD and LTD benefits are typically calculated as 66.67% of annual salary. Monthly maximums average between \$3,850 and \$15,000.

Waiting Period, Elimination Period, Duration of cover: Typically there is no Waiting Period before coverage is effective; the insurance begins from the plan inception date. An Elimination Period must be satisfied before individuals can claim under the Disability plan(s). The standard Elimination period for STD is 0-7 days, and for LTD 90 or 180 days. The standard limit on the Duration of Cover for STD is 13 or 26 weeks. The standard limit on the Duration of Cover for LTD is to age 65.

Claims process: Written proof of loss is required no later than 60 days after the Insured Employee satisfies the Elimination Period. Once the proof of loss and any other requested information is received, payment is typically made within two weeks.



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[&]quot;When moving contracts, past liabilities and associated reserves remain with the prior insurer.