

This document includes details on disability benefits: how to file, program specifics, health and welfare plan information and returning to work.

MET LIFE DISABILITY BENEFIT PROGRAM

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Qualifying for Disability Benefits

To qualify for short-term disability benefits from MetLife you must meet the following conditions:

- Be unable to work due to a medically determined physical or mental impairment due to sickness or as a direct result of accidental injury,
 - unable to earn more than 80% of your predisability earnings at your own occupation, and
 - are receiving appropriate care and treatment and complying with the requirements of such treatment.
- or -
- Must have a medical condition that is maternity-related; or
 - Must have an approved Stay at Work/Return to Work (SAW/RTW) partial disability.

For more information on qualifying for disability, review the:

- [Short-term disability summary plan description](#)
- [Long-term disability summary plan description](#)

Filing for Disability Benefits

It is critical that you remain in contact with your Leave Coordinator regarding your leave.

Additionally, you **must consistently** provide medical updates from your medical provider to MetLife and Occupational Medicine. This is to ensure you do not experience any adverse impact to your case.

Employee's Responsibility When Filing for a Disability Benefit

- Notify MetLife by calling 833-622-0139. MetLife will require you to provide the claims intake nurse with the Triad customer number (228241) when you call.
- Sign the MetLife "[Authorization to Disclose Information About Me](#)" release document and provide a copy to your medical provider(s). For disabilities involving psychiatric care, please use the [psychiatric version](#) of the release form instead.
- Contact Occupational Health (OSH-OH) at 667-0660, option 5, to inquire about eligibility for job-protection under the Family & Medical Leave Act (FMLA).
- Contact Clearance Processing for questions regarding security clearances (665-8500).

Your Disability Leave Coordinator's Responsibilities

- Email your group office with the start date of disability and instructions on how to enter Time and Effort while you are out.
- Mail you important information regarding your obligation to continue to pay benefit premiums while on leave in order to keep your benefit coverage (i.e. medical, dental, vision) active.
- Complete and send back to MetLife the Employer Certification Report which validates the date of disability and when to commence disability benefit.

Family Medical Leave Act (FMLA)

For information regarding FMLA contact OSH-OH at 667-0660, option 5.

Family Medical Leave Policy, [P730-13](#)

According to the FMLA guidelines, any period of total disability for which an employee receives disability benefits under a Triad-sponsored disability plan shall be substituted for and counted toward an employee's family and medical leave entitlement. The policy of treating disability leave as FMLA time is mandatory and will be applied to all eligible employees (see P730-13). FMLA protects your job status and maintains the employer portion of your premiums for up to 12-weeks (480 hours) or for the time you qualify for FMLA.

The following forms must be completed and forwarded to OSH-OH

- [1621 - Employee Request for Family and Medical Leave](#)
- [1785 - Family and Medical Leave Notification](#)
- [1786 - Certification of Health Care Provider](#)

Program Information

Short-Term Disability Benefit Information

The maximum duration you may benefit from Short-Term Disability (STD) coverage is 26 weeks, however your period of disability will be determined by MetLife.

The waiting period before disability benefits being is seven days. (A waiting period is the time from the day you are unable to work due to an injury, illness or pregnancy-related leave until the day the disability benefits start). During the waiting period you may choose to use sick leave (PSL then legacy sick) or PTO to receive pay during this time. If you do not have enough accrued sick leave or PTO hours to meet the seven-day waiting period or prefer not to use your paid leave hours, you will be in a leave without pay status.

Once you have applied and the date of disability has occurred, MetLife will evaluate your supporting medical documentation and, if approved, your disability benefit will commence effective the eighth day of your disability. If the approval process exceeds the seven-day waiting period, benefits will be paid retroactively.

STD pays 100% of your base weekly pre-disability earnings up to seven weeks.

If the disability period extends beyond eight weeks (including the seven-day waiting period), the STD benefits will be reduced to 60% of your base weekly pre-disability earnings for up to 19 weeks.

Where applicable, MetLife will offset any disability benefit for pregnancy with the Triad Paid Maternity Leave benefit. For medical conditions associated with pregnancy, disability benefits may be available prior to and after the Paid Maternity Leave benefit.

Note: This is a taxable benefit.

Short-Term Disability Top-off Election

STD pays 100% of your base pay for seven weeks and then is reduced to 60% of base pay for the remainder of the approved STD benefit period. You may elect to use your accrued paid leave hours (PSL, Sick, PTO) to top-off the income you receive from disability insurance when your benefit has been reduced to 60%. By electing the top-off, your paid leave hours will be used to pay you the remaining 40%, in order to achieve 100% of your base pay.

Your election must be made at least two weeks before the benefit will reduce to 60% via Form [2316 - Short-Term Disability Top-Off Election](#). The election is irrevocable once paid leave hours have been utilized.

You have the option of which paid leave hours will be used for top off and the order in which they are drawn down. See the election form for details.

If elected, Triad will pay STD top-off amounts on the regular bi-weekly payroll schedule. As with payroll checks, Triad will deduct tax withholdings, benefit premiums (including satisfying deductions that are past due), and retirement plan contributions from the gross payment amount. If STD top-off is insufficient to cover your benefit premium deductions, it is your responsibility to make arrangements to pay Triad the premiums due.

STD top-off will stop when there are no remaining paid leave hours available based on the election made.

Long-Term Disability Benefit Information

Long-term disability pays 60% of your earnings up to a maximum monthly benefit of \$15,000 per month.

Note: This is a taxable benefit.

Health and Welfare Plan Information

Qualifying Life Event

Insurance Enrollment [Form 1751\(a\)](#)

***Premium Due Dates:** To keep your insurance(s) active, your bi-weekly payments must be received by the Treasury Office/ CNTL-FINRP no later than 10 days prior to the bi-weekly pay date. If payment is 30 days late, an invoice will be sent by Benefit Accounting to the employee. If payment is not received, a letter will be sent to the employee with a deadline to bring payments current or be de-enrolled from coverage.

Continuation of Benefits

If you would like to continue to maintain insurance coverage (i.e. medical, dental, vision) while on disability, it is your responsibility to pay for benefit premiums. The Leave Coordinator will provide premium information including payment amount and due date.

- Disability leave is a Qualifying Life Event that allows you to modify the benefits you are enrolled in. You have 31-days from the date of disability to submit a Benefits Insurance Enrollment form.
- If covered under FMLA, Triad will continue to subsidize medical, dental, and vision premiums. When FMLA ends, you are responsible for paying the full gross premiums (employer and employee) for dental and vision. The change to paying gross premiums is a Qualifying Life Event and you have the option to de-enroll from dental and vision within 31-days of the rate change. To de-enroll an employee must submit a Benefits Insurance Enrollment form.
- If an employee is receiving a short-term disability benefit, Triad will continue to subsidize medical premiums for a maximum of 26 weeks. If the disability extends beyond 26 weeks, you are responsible for paying gross premiums for medical insurance. The change to paying gross premiums is a Qualifying Life Event and you have the option to de-enroll from medical within 31-days of the rate change. To de-enroll you must submit a Benefits Insurance Enrollment form.

- If your disability extends beyond eight weeks and you have elected to top-off your benefit with sick leave or PTO hours, your benefit deductions will be taken to the extent possible from your top-off payments. Any premiums not covered will require you to continue to make payments to the Treasury Office.

Re-Enrolling in Coverage

When you return from disability, you have 31-days to re-enroll in benefits (the same benefits as prior to the disability). To re-enroll an employee must submit a Benefits Insurance Enrollment form within 31-days of return.

Flexible Spending Accounts (FSAs) while receiving disability benefits

(Health Care Reimbursement Account (HCRA), Dependent Care Reimbursement Account (DCRA), or Adoption Expense Reimbursement Account (AAEA))

When you are no longer receiving pay through payroll, your contributions via payroll deductions to the HCRA, DCRA, or AAEA stop, and participation is suspended. Participation is suspended on the Sunday of the pay cycle in which STD benefits begin and will resume upon your return to work. Expenses incurred during the leave, after participation is suspended, are not eligible for reimbursement.

Upon return to an active work status, your contributions to the FSA elected prior to leave will automatically resume. Missing contributions will be prorated by payroll and added to the prior deduction amount for the remainder of the calendar year.

Health Savings Account (HSA)

When you are no longer receiving pay through payroll, HSA deductions will stop. You can continue to use funds in your HSA for eligible medical expenses. Contact HSA Bank directly if you wish to continue making contributions while you are out on leave. Please do not send any HSA contributions to Triad.

Returning to Work

Returning to Work from a Disability Medical Leave

When you return to work you must notify the Leave Coordinator at 667-1806 or leaves@lanl.gov of the day you are returning from medical leave status. You must check in with OSH-OH before going to your work location. A doctor's note is required when checking in with OSH-OH. Please forward the Duty Disposition Letter you receive to leaves@lanl.gov to close your case.

Your work schedule while on leave was defaulted to 5/8s. Once you are back in an Active pay status you can request a change to your work schedule.

Return To Work/Stay At Work Partial Disability (RTW/SAW)

If determined by your personal physician that you can only return to work on a reduced schedule, you may be able to continue to receive partial disability benefits to cover the hours you are not cleared to work. See: [Return to Work/Stay at Work Partial Disability Program Information](#)