Disability Presentation: Prepared for the State of Arizona

May 2022

*Please note, benefits information provided in this presentation is for year 2022.
Agenda

Introductions / Housekeeping items?

What is Disability Insurance

Definitions & Key Terms

STD & LTD Plan Designs

Elimination Period

Claim Process

Resources

Q&A
What is Disability Insurance?

1. Replaces a percentage of Income
   - Loss of income due to sickness, pregnancy or accidental injury.

2. Helps you to cover your essential living expenses
   - If you are sick or hurt and cannot work. An example of expenses are car payments, mortgage payments, groceries, childcare, tuition and more.

3. Disability drives duration
   - Short Term Disability insurance replaces a portion of your income during disability.
   - Long Term Disability insurance replaces a portion of your income for disabilities that last for an extended period of time.
Definitions & Key Terms

- **Elimination Period** – The period of Disability during which MetLife does not pay benefits. The Elimination Period begins on the day of Disabled. Start of LTD coordinates with the end of the STD benefit.

- **Benefit Frequency** – The STD benefit is weekly, and the LTD benefit is monthly.

- **Benefit Period** – The timeframe which benefits are payable.

- **Offsets** – All other income that will reduce disability benefits. Ex: Social Security Disability Income, Workers Compensation, State Disability Benefits, Sick pay, other leave benefits, etc.
  - Salary Continuance
  - Sick Pay
  - Annual Leave
  - Partial Return to Work

- **Maximum Benefit (payment)** – The maximum benefit amount the claimant can receive under the plan.

- **Minimum Benefit (payment)** – The minimum benefit amount the claimant can receive subject to overpayments and Rehabilitation Incentives.

- **SSNRA** – Social Security Normal Retirement Age. Age the individual is entitled to 100% of your Social Security Benefits – could be 65 or higher depending on the year of birth.

- **Salary Continuance** – When employee pay continues during the disability.
# Short Term Disability (STD) plan

| Eligible Class | Class 1 - All Full-Time Active employees of the Policyholder enrolled within 31 days after becoming eligible; or continuously insured for entire 12 months prior, excluding temporary or seasonal employees
|               | Class 2 - All Full-Time Active employees of the Policyholder enrolled more than 31 days after becoming eligible; and were not continuously insured for entire 12 months prior, excluding temporary or seasonal employees
| Benefit       | 66.67% of the first $1,346 of Your Predisability Earnings, subject to the income that will reduce your disability income
| Elimination Period | • For Injury-None
|                 | • For Sickness
|                 |   • Class 1 – 30 days
|                 |   • Class 2 – 60 days
| Minimum Weekly Benefit | $67.31 or 10%, subject to overpayments and Rehabilitation Incentives
| Maximum Weekly Benefit | $897.43
| Maximum Benefit Duration | • For Injury-26 weeks
|                         | • For Sickness
|                         |   • Class 1 – 22 weeks
|                         |   • Class 2 – 18 weeks

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[MetLife logo]
### Short Term Disability elimination period

<table>
<thead>
<tr>
<th>Injury</th>
<th>Weeks</th>
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<tbody>
<tr>
<td>No elimination period</td>
<td>Up to 26 weeks disability leave (if medical supports duration)</td>
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<tr>
<td></td>
<td>26 weeks payable benefit (if medical supports entire duration)</td>
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<table>
<thead>
<tr>
<th>Sickness</th>
<th>Weeks</th>
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<tbody>
<tr>
<td></td>
<td>Up to 22 weeks disability leave (if medical supports duration)</td>
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<tr>
<td>30-day elimination period</td>
<td>22 weeks payable benefit (if medical supports entire duration)</td>
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</table>

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<tr>
<th>Sickness (late entrant)</th>
<th>Weeks</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>Up to 18 weeks disability leave (if medical supports duration)</td>
</tr>
<tr>
<td>60-day elimination period</td>
<td>18 weeks payable benefit (if medical supports entire duration)</td>
</tr>
</tbody>
</table>

The elimination period is the amount of time at the beginning of the disability that benefits are not paid. The elimination period begins on the day of becoming disabled and continues for the period shown in the certificate of insurance.
STD Example for Injury

• Date of Hire: 1/1/21
• Employee enrolled in STD benefits: 1/18/21
• Disability date: 2/1/22
• Since the Employee is going out on disability for an injury, there is no elimination period to satisfy for STD
• Benefit start date: 2/1/22 (no elimination period)
• Benefits are payable from the benefit start date to disability resolution (ex: return to work, medical released, etc.)
STD Elimination Period
Example: Pregnancy

<table>
<thead>
<tr>
<th>Weeks</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
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<th>10</th>
<th>11</th>
<th>12</th>
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<tbody>
<tr>
<td>FMLA</td>
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<td>12w</td>
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<tr>
<td>Normal (Vaginal) Birth</td>
<td>6w</td>
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<tr>
<td>Disability</td>
<td>30d waiting period</td>
<td>Payable benefit</td>
<td></td>
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</tr>
<tr>
<td>Disability (late entrant)</td>
<td>60d waiting period</td>
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</tr>
<tr>
<td>Caesarian Birth</td>
<td>8w</td>
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</tbody>
</table>
STD Example for Pregnancy

- Date of Hire: 1/1/20
- Employee enrolled in STD benefits: 1/15/20
- Employee falls under Class 1 as she enrolled within 31 days of becoming eligible
- Class 1: 30-day elimination period
- Delivery Date: 4/1/21 (vaginal birth)
- Elimination Period end date: 4/30/21 (30-day elimination period)
- Benefit start date: 5/1/21
- Recovery is 6 weeks from date of delivery for vaginal birth
- Benefits are not payable during the 30-day elimination period
Long Term Disability (LTD) plan

<table>
<thead>
<tr>
<th>Eligible Class</th>
<th>The LTD plan has 3 eligible classes – Please refer to the plan for the details of each class</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefit</td>
<td>66.67% of the first $14,999 of Your Predisability Earnings, subject to the income which will reduce your disability benefit</td>
</tr>
<tr>
<td>Elimination Period</td>
<td>180 days</td>
</tr>
<tr>
<td>Minimum Monthly Benefit</td>
<td>10% of the Monthly Benefit before reductions for Other Income Benefits or $100, whichever is greater, subject to the Overpayments and Rehabilitation Incentives</td>
</tr>
<tr>
<td>Maximum Monthly Benefit</td>
<td>$10,000</td>
</tr>
<tr>
<td>Maximum Benefit Duration</td>
<td>A period of 12 months to age 65 depending on your age at the start of your disability</td>
</tr>
</tbody>
</table>
## Disability Claim Overview

### Claim Submission
- Claimant submits claim by phone, web, or mail
- All forms are accessible to the claimant online via the MyBenefits portal
- Claims Specialist reviews all medical information and contacts their treatment provider directly to determine eligibility under the disability plan

### Claim Evaluation and Decision
- A claims decision is made within 2 business days of receiving all necessary information
- The Claims Specialist:
  - Develops an action plan
  - Identifies treatment providers and a timeline for the Claimant
  - Evaluates expected disability duration with an anticipated return to work date
  - Explains next steps to the Claimant

### Ongoing Service and Follow Up
- Clinicians clarify medical information, confirm treatment plans and validate disability benefits, with rehabilitation consultants when appropriate
- We provide analytics-driven referrals at the right points for clinical intervention
- We plan ahead for Long Term Disability and enable automatic claim bridging for a smooth transition
- We continue to update the action plan, assess the claim, follow-up with treatment providers and connect with the Claimant
- Simplified and convenient access to self-service tools and their Claims Specialist
- 6-8 weeks before the benefit start date, we initiate a LTD claim to avoid payment delays, if also covered

### Disability Resolution
- We help with on-site job modification and other return to work accommodations, where appropriate
- The Claimant can move to LTD without additional claim applications. The information is automatically transferred and updated as required
- We advise the Claimant by phone and letter when the claim is closed or when a LTD benefit decision is made, and notify their employer of the resolution online

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**Direct Access to the Claim Specialist**
Disability Submission - Responsibilities

**Claimant**

- Reports absence to Employer
- Reports claim/leave to MetLife at **866-264-5144**
  - Telephonic Intake: M – F 8:00 a.m. – 11:00 p.m. EST
  - Web Intake: M – F 6:30 a.m. - 10:00 p.m. EST, Saturday 6:30 a.m. - 4:00 p.m. EST, Sunday 9:00 a.m. - 8:00 p.m. EST
- Reports disability related absences expected to last more than **30 days**
- If applicable, reports all Workers Compensation claims for FMLA approval and tracking to Employer
- Provides a signed copy of the Medical Authorization to MetLife
- Follows-up with the Healthcare Provider to ensure medical documentation is submitted promptly
- Ensures all documentation includes the appropriate claim number

**State of Arizona Agency**

- Coordinates work-related injuries or illnesses to Workers’ Compensation Carrier
- Provides requested information to MetLife to assist in establishing the claim

**MetLife**

- Conducts a comprehensive claimant intake interview and establishes the claim
- Sends claim acknowledgement packet to claimant
- Requests medical certification and, if applicable, missing claim information
- Sends new claim submission notification to the Employer via MetLink
# Ongoing Services - Responsibilities

<table>
<thead>
<tr>
<th>Claimant</th>
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</thead>
<tbody>
<tr>
<td>• Continues to partner with MetLife to provide required information for ongoing disability</td>
</tr>
<tr>
<td>• Received notification of subsequent claim decisions (approval extensions, denial) via phone, letter and MyBenefits</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>State of Arizona Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Partners with MetLife for return-to-work opportunities</td>
</tr>
<tr>
<td>• Provides job descriptions and potential accommodations to MetLife if applicable</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MetLife</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Partners with The State of Arizona Agency for return-to-work opportunities</td>
</tr>
<tr>
<td>• Continues to follow up with Healthcare Provider for updated medical information</td>
</tr>
<tr>
<td>• Monitors status of disability</td>
</tr>
<tr>
<td>• Notifies employee of subsequent claim decisions (approval, extension, denial) via phone, letter and MyBenefits</td>
</tr>
</tbody>
</table>
Centralized Claim Experience

MyBenefits

https://mybenefits.metlife.com/stateofarizona

Employees can view and manage their claims in one centralized location, the **Claim Center**

- An intuitive interface to view current and past claims
- View claims at a glance
  
  (Submitted, Processing or Processed)
- Important alerts for when you need to take action
- Print, email or download
Resources for all

MetLife claims and customer service: **866-264-5144**

MyBenefits: [https://mybenefits.metlife.com/stateofarizona](https://mybenefits.metlife.com/stateofarizona)


- Tools and resources
- Materials & Plan Documents
- Elimination Period Flyer
- How to file a Claim
- Pregnancy Flyer

MetLife Liaison for State of Arizona:

Chelsea Lira  
Email: soa@metdisability.com  
Phone: 602-542-4414
Questions?
Thank you.