

# **Frequently Asked Questions about Short Term Disability**

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**The purpose of this FAQ is to help you better understand your employer provided short term disability (STD) benefits and the claim process. The questions are presented in two sections:**

- **Questions about your employer provided STD benefits**
- **Questions about what to expect while on STD claim**

**As each employee benefit plan is unique, benefits can vary based on choices your employer makes for your benefit plan. It is important that you reference your Employee Booklet or Summary Plan Description (SPD) as it provides you with plan specific information relative to the short term disability coverage your employer provides for you.**

**Important terms are defined in the glossary on the final page of this FAQ. These terms are quickly recognized throughout the FAQ as they are in bold face type.**

**CS-1228**

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## General Questions about Your Employer Provided STD Benefits

### 1. What is short term disability insurance?

Short term disability benefits can pay a portion of your income if you can't work for several weeks due to a covered injury or illness.

### 2. Are there disabilities that are not covered?

Excluded disabilities, or **Exclusions** can vary by policy, but typically include:

- Intentionally self-inflicted injuries
- Active participation in a riot
- Loss of professional or occupational license or certificate
- Commission of a crime for which the individual has been convicted
- For short-term disability: occupational sickness or injury (however, Unum will cover disabilities due to occupational sicknesses or injuries for partners or sole proprietors who cannot be covered by Workers' Compensation plans)
- **Pre-existing Condition** if applicable
- War, declared or undeclared, or any act of war
- Any period of disability during which an employee is incarcerated

### 3. When am I considered Disabled?

An employee is considered to be disabled on the date that they meet the definition of **Disability** as outlined in the policy. An employee's medical records and information from their physician(s) will help determine that date.

### 4. When should I file a claim?

Disability claims should be submitted as soon as possible to ensure a claim decision is made in a timely manner.

### 5. What happens to my benefits if the group policy terminates or I am terminated from my employment?

The cancellation of the policy or termination from employment does not affect a payable claim. If an employee is on claim and the policy is cancelled or the employee is terminated from employment, a claim will be paid to the same duration it would have been had either event not occurred.

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## Questions on What to Expect While on STD Claim

### 1. How do I file a claim?

- **Online Claims** can be filed on the Unum Website [here](#).
- **Claim Forms** are available from your employer or [here](#) to download and print from the Unum Website. Completed claim forms can be mailed or faxed (1-800-447-2498) to Unum.
- **Telephonic Claim Filing Service** is available if your employer elected this service for its employees. This service is available by calling the Unum Service Center at 1-866-779-1054.

When filing a claim, here is a list of information that will be needed:

- Personal contact information
- Work Schedule (example: Mon-Fri, 40 hours per week)
- Reason for leave
- Last day worked
- First day missed of work
- Condition
- Contact information for the treating physician, including telephone and fax numbers
- If surgery is needed, type and date of surgery.

### 2. How long does it take for a decision to be made on my claim?

Unum will make the initial decision on a short term disability claim within 5 business days after receipt of a complete claim which includes:

- a completed Employee Statement form
- a completed Employer Statement form
- a completed Attending Physician Statement form, and
- a signed medical authorization form.

Each claim is unique and Unum may request additional supporting medical records to make a decision on a claim.

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## 3. I submitted a claim, how can I check its status?

Claim information may be found on the Unum website by logging in [here](#).

- View claim status
- View letters from Unum
- Upload documents to Unum
- Complete authorization forms
- Complete direct deposit request forms.

You may access claim information on your Apple or Android device using the Unum Customer App.

- View claim status
- View communications with Unum
- Upload documents (medical records, claim forms, authorization forms, etc.) using the camera on your device.

## 4. How will Unum determine if I am eligible for benefits?

Unum will review medical information to determine if you meet the definition of **Disability** as it is defined in the policy. The definition of disability can vary by policy, but it is generally concerned with the ability to perform the duties of an **Occupation**

Once Unum establishes that an employee meets the definition of **Disability**, then to be eligible for benefits you:

- must continue to meet the definition of **Disability** during the **Elimination Period (EP)**.
- may also be required to have a certain percentage of **Earnings** lost due to disability.

You may be requested by Unum to periodically provide updated medical information to verify your **Disability** and continued eligibility for benefits beyond the initial approval of your claim.

## 5. How long can I receive short term disability benefit payments?

The maximum duration of short term disability benefits is chosen by the employer and is defined in the certificate of coverage as the **Maximum Benefit Period**.

Once the **Elimination Period (EP)** is satisfied and you continue to meet the definition of **Disability**, your short term disability benefits can extend through the Maximum Benefit Period. Updated medical information will be used to verify your continued eligibility for benefits.

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## 6. When will I receive my benefit payments?

Short term disability benefit payments are generally made on a weekly basis.

## 7. How much will my benefits be?

The amount of your benefit is dependent on your pre-disability **Earnings** and the **Benefit Percent** allowed by the policy.

If the policy includes an incremental benefit, the benefit amount is the amount that you purchased at enrollment time.

## 8. I do not agree with the earnings that Unum used to calculate my benefit. How can I fix this?

Unum relies on information provided by the employer with regards to **Earnings**. If you believe your earnings were incorrectly reported to Unum, please check with your employer to determine if corrected information should be sent to us.

## 9. How will my benefit payments be sent to me?

Employees will receive benefit payments via the United States Postal Service.

Employees can also choose to have benefit payments electronically deposited into their bank account. An electronic transfer form can be completed on line [here](#).

## 10. How does Unum handle maternity claims?

For a delivery with no complications, pregnancy claims are approved under short term disability for a period of 6 weeks.

If the employer chooses, delivery by C-sections can result in an 8 week benefit period.

The 6 and 8 week periods include the **Elimination Period**. For example, if the elimination period is 7 days, then a normal delivery is paid 5 weeks of benefits

If an employee has complications due to pregnancy and continues to meet the definition of **Disability** as defined in the policy, payments may continue beyond the 6 week period.

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## 11. How are benefits affected by taxes?

It depends. Benefit taxability is determined based on how premiums are paid.

- If an employer or an employee paid the premiums on a pre-tax basis, the benefit payments are taxable.
- If an employee paid for the premiums themselves on a post-tax basis, the benefits are non-taxable.

Are you still unsure about your taxability? Check with your employer to see how your premiums for this benefit were paid.

If an employer has chosen the tax reporting service, Unum will send employees a W-2 form indicating the amount of taxable benefits they have received.

## 12. I am ready to return to work. What do I do next?

- If required by your employer, present them with a fitness for duty form to return to work.
- Unum will contact you 5-7 days before your scheduled return to work date to confirm you still plan to return to work on the specified date.

If you are medically unable to return to work after exhausting your short term disability benefits, you may be eligible for long term disability benefits. Please check with your HR representative to determine if long term disability coverage is available.

## 13. What if I return to work and then have to go back out of work again for my disability?

Most plans allow for recurrent disability.

If you become disabled again due to the same condition within the specified number of days as stated in the Recurrent Provision in your policy, short term disability payments can continue under the original claim. You will not be required to satisfy a new **Elimination Period**.

If an employee becomes disabled after the number of days in the Recurrent Provision, or due to a new medical condition, a new claim and **Elimination Period** would need to be initiated.

## 14. Can I work part time and still receive benefits?

Depending on the definition of **Disability** as defined in the policy, an employee may be able to receive short term disability benefits and work part time.

Typically, to be eligible for a part time benefit, you will need to have lost a certain percentage of your **Earnings** due to the disability.

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## Glossary

**Benefit Percent:** The benefit percent is the percentage of an employee's pre-disability earnings that is used to calculate the gross disability benefit. The benefit percentage is chosen by the employer and is noted in the certificate of coverage.

**Disability:** The definition of disability is found in the policy. There are several definitions of disability; however, the core concept is that, due to a sickness or injury, an employee is unable to perform the material and substantial duties of their occupation as it is defined in the national economy. An employee may also be required to have a certain percentage of their earnings lost due to a disability.

**Earnings:** The definition of earnings can be found in the policy. Earnings are generally either the amount an employee was making at the time they became disabled or the amount shown on their previous year's W-2 form. However, there are several definitions of earnings, so please refer to the policy or ask an HR representative for more information.

**Eligible/Eligibility:** Eligible means someone qualifies to apply for, or enroll in, a certain insurance plan. For example, an employee may have to work a minimum number of hours per week to be eligible for insurance coverage.

**Elimination Period:** The elimination period is a period of time an employee must be disabled before benefits are paid. For short term disability, there is an elimination period for disabilities due to sickness and one for those due to injury. The elimination periods may be the same length, depending on the policy.

The length of the elimination period is chosen by the employer.

Please refer to the certificate of coverage to confirm the elimination period.

**Exclusions:** Disabilities that are not covered by the policy.

**Maximum Benefit Period:** The maximum length of time during which benefits can be paid. The maximum benefit period is chosen by the employer and stated in the policy.

**Occupation:** An employee's occupation is the occupation they were routinely performing when they became disabled. It includes the material and substantial duties of the occupation as they are usually and customarily performed.

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**Pre-Existing Condition:** A pre-existing condition is a condition for which an employee received treatment prior to the effective date of STD coverage.

If a claim is filed within a defined time after the effective date of coverage, a review will be completed to determine if treatment for the condition being claimed was received prior to the effective date of coverage.

The look back period (time prior to the effective date) and the time period after the effective date during which a claim is filed that would necessitate this review are selected by the Employer and noted in the certificate of coverage.

**Didn't find what you needed or have more questions?**

**We're here to help.**

**Call us: 866-679-3054 8:00 am - 8:00 pm ET, Monday – Friday**

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