

# SHORT TERM DISABILITY CLAIM FILING CHECKLIST, GUIDELINES, & ACTIVITY LOG

- ✓ Your responsibilities
- ✓ Important timeframes and action items
- ✓ How to file your Short Term Disability claim
- ✓ What you can expect from your employing organization
- ✓ What you can expect from The Hartford
- ✓ Assistance available to help you return to work

## SHORT TERM DISABILITY PROGRAM OVERVIEW

Disability insurance pays a portion of your income if you are unable to work because of a disabling illness, pregnancy, injury, or other medical condition covered by the plan occurring on or off the job.

The Short Term Disability plan pays up to 75% of your pre-disability base pay, including hazardous duty pay, reduced by "Other Income Benefits" as defined in the Short Term Disability Plan Booklet.

The first 30-calendar days of your disability is known as the elimination period. During this time, you may utilize annual leave, sick leave, compensatory time, or donated leave if eligible, to stay in a paid status. If eligible, Parental Leave is required to be utilized to satisfy the elimination period.

If your Short Term Disability Claim is approved by The Hartford, benefits will begin on the 31<sup>st</sup> calendar day of the disability and may continue for up to a maximum award period of 182-calendar days. Benefits will be paid by the State of Delaware as part of your pay.

During your approved Short Term Disability award period, you may utilize annual leave, sick leave, compensatory time, or donated leave or parental leave<sup>2</sup> if eligible, to supplement your Short Term Disability benefit up to 100% of your pre-disability base pay.

<sup>&</sup>lt;sup>1</sup> The Short Term Disability Plan Booklet can be found on the Statewide Benefits Office website at <u>de.gov/statewidebenefits</u> (Navigation: select your group > choose "Disability Insurance").

<sup>&</sup>lt;sup>2</sup> If eligible, Parental Leave must be utilized to supplement your Short Term Disability benefit.

## **PAYMENTS PROCESS**

The minimum Short Term Disability benefit is the greater of \$50.00 or 10% of the gross benefit, whichever is greater, if paid on a bi-weekly basis.

If you develop a partial or residual disability and can work part-time or on a limited duty basis, you may be entitled to partial disability benefits.

Each day an employee receives a total, partial, or minimum disability benefit counts toward satisfaction of the maximum Short Term Disability benefit period.

Short Term Disability benefit payments will include general salary increases awarded or reductions in salary instituted during the award period.

Employees who work alternate schedules will be converted to a Monday through Friday schedule for the purpose of calculating the Short Term Disability benefit.

**IMPORTANT NOTE:** It is important that you verify the amount of your benefit payments. Employees are required to promptly repay amounts paid in excess of 100% of their pre-disability base pay. If you think you may have received an overpayment, it is your responsibility to contact your Human Resource/Benefit Representative and The Hartford immediately.

For more detailed information on how Short Term Disability claims are paid, review the following documents posted on the <u>Statewide Benefits Office</u><sup>3</sup> website.

**Disability Insurance Program Rules & Regulations** 

**STD Plan Booklet** 

**Frequently Asked Questions** 

# LESS THAN TWELVE MONTH EDUCATIONAL EMPLOYEES (DELAWARE STATE UNIVERSITY, SCHOOL DISTRICTS, CHARTER SCHOOLS, DEPT. OF EDUCATION)

Employees who work less than 12-months per calendar year and who are unable to satisfy the 30-calendar day elimination period before the end of the current school year will resume completion of the elimination period as of the first day of the next school year. The elimination period must start and conclude within normal working periods.

Employees who develop a disability during their normal working period in the school year are required to file a Short Term Disability claim and if eligible, receive benefits through the end of the current

<sup>&</sup>lt;sup>3</sup> Disability Insurance information is located at <u>de.gov/statewidebenefits</u> (Navigation: select your group > choose "Disability Insurance")



school year assuming the employee can satisfy the 30-calendar day elimination period before the last day of the current school year.

Disabilities that begin during a non-working period may not be claimed until the normal working period resumes. The actual date of the employee's date of disability will remain unchanged; however, the elimination period begins the first working day of the new school year.

#### **HEALTH PLAN BENEFITS**

Employees on approved Short Term Disability, including <u>Family and Medical Leave Act (FMLA)</u>, amay continue their coverage in the State of Delaware Group Health Insurance Plan (GHIP).

The State Share contributions will be paid on your behalf for the duration of approved leave. The Employee Share will be deducted from your pay.

If there is not enough salary to deduct the Employee Share of the premium, you must submit your premium payment directly to your Human Resource/Benefits Office. Premium payments must be received in full by the last day of each month<sup>5</sup>. Failure to do so will result in coverage termination.

Upon returning to work you must contact your Human Resource/Benefits Representative to complete an enrollment form if your coverage was cancelled. Reinstatement into GHIP benefits coverage does not require that you wait until open enrollment.

IMPORTANT NOTE: Employees who fail to return to work after their FMLA leave entitlement has ended and have not been approved for an extension of leave through another state sponsored program (i.e. Disability Insurance Program, Workers' Compensation, and/or State Personal Injury Protection), will be responsible for the Employee Share and the State Share contributions for their GHIP coverage during the FMLA period-for each month they were in a "no pay" status.

<sup>&</sup>lt;sup>4</sup> The Family Medical Leave Act is posted on the Department of Human Resources website at <a href="https://dhr.delaware.gov/">https://dhr.delaware.gov/</a> (Navigation: "Policies & Procedures" > "Family Medical Leave Act Policy").

<sup>&</sup>lt;sup>5</sup> FMLA regulations provide that employees have a 30-day grace period for late premium payments. If a payment is more than 30-days late, the Human Resource/Benefits Representative will submit a retroactive cancellation to the first day of the month when payment was not received.

## STATE DENTAL OR VISION BENEFITS

Employees who are on an approved leave of absence without pay and enrolled in a State Dental and/or Vision Plan may either waive or continue their coverage.

To continue your coverage, premium payments must be received by the last day of each month. If you do not have enough salary to deduct the premium, you must submit payment directly to your Human Resource/Benefits Office. Failure to do so will result in coverage termination.

Upon returning to work you must contact your Human Resource/Benefits Representative to complete an enrollment form to be reinstated in Dental or Vision Plan benefits coverage; you do not have to wait until the next open enrollment.

# **COORDINATION OF OTHER PROGRAM BENEFITS**

We understand that the Short Term Disability plan may need to be coordinated with other programs<sup>6</sup>. Your Human Resource/Benefits Representative will work with you to ensure that your unique situation is coordinated as needed with other programs such as <u>Workers' Compensation</u><sup>7</sup>, <u>Personal Injury Protection</u> automobile coverage, and the <u>Family Medical and Leave Act (FMLA)</u><sup>8</sup>.

Eligibility for each program must be met separately. Employees entitled to benefits from multiple programs are entitled to a maximum wage payment of 100% of pre-disability base pay.

If your disability is connected to a work-related injury, a medical authorization form will be mailed to you from PMA Management Corp, the State's Workers' Compensation vendor. For PMA Management Corp to obtain medical records to handle your Workers' Compensation claim, this form needs to be signed and returned as soon as possible to PMA Management Corp at the address located on the form.

If your disability is related to an auto accident in a state-owned vehicle, a Personal Injury Protection form will be mailed to you from the Insurance Coverage Office This form will need to be completed and returned to the Insurance Coverage Office before any medical bills or any other benefits can be provided under this program.

<sup>&</sup>lt;sup>8</sup> The Family Medical Leave Act is posted on the Department of Human Resources website at <a href="https://dhr.delaware.gov/">https://dhr.delaware.gov/</a> (Navigation: "Policies & Procedures" > "Family Medical Leave Act Policy"



<sup>&</sup>lt;sup>6</sup> The Workers' Compensation program, Personal Injury Protection, Family Medical Leave Act, Donated Leave and the Disability Insurance Program are separate programs operating under different governing regulations. As a result, the process flow and materials required by the employee to meet eligibility criteria for these programs and for returning to work may vary.

<sup>&</sup>lt;sup>7</sup> For more information on Workers' Compensation, visit the Insurance Coverage Office's website at <a href="https://dhr.delaware.gov/inscov">https://dhr.delaware.gov/inscov</a>

## **YOUR RESPONSIBILITIES**

- → Promptly file your Short Term Disability claim with the Hartford within 15-calendar days of your date of disability or last day worked if you expect to be absent from work for at least 30 calendar days.
- If you are unable to provide and/or receive information personally, authorize an advocate who can assist you (e.g. a family member, friend, etc.). Copies of the authorization should be provided to The Hartford, your Human Resource/Benefits Representative, the SBO Return to Work Coordinator, and/or other Statewide Benefits Office representatives when applicable.
- Authorize the release of medical information with each of your health care provider(s) required by The Hartford to process your disability claim.
- Promptly pay all fees required by your health care provider(s) office for the release of basic medical documentation required by The Hartford to process your claim.
- Stay in touch with your treating health care provider(s), your employing organization, and with The Hartford to ensure program compliance.
- If while receiving Short Term Disability benefits, you experience another or new disability, it is your responsibility to promptly report the new disability to The Hartford, your supervisor and Human Resource/Benefits Office.
- → Promptly repay overpaid Short Term Disability benefits to the State of Delaware.
- Initial, sign and return the Employee Acknowledgement form via email (preferred) or mail to your Human Resource/Benefits Office within 5-calendar days of receiving this communication.

## THE HARTFORD'S RESPONSIBILITIES

- The Hartford will promptly process your disability claim and to keep you, your employing organization, and the Statewide Benefits Office informed of the status of your disability claim.
- The Hartford will contact your health care provider(s) to obtain medical documentation required to process your claim.
- → The Hartford will advise you of your Level I Short Term Disability appeal rights.
- → The Hartford will promptly answer your questions and address your concerns.

## **DOCUMENTING YOUR CLAIM**

Use the enclosed activity log to help you keep track of ongoing claim calls and/or email transactions you have with The Hartford, PMA Management Corp (the State's Worker's Compensation vendor, if applicable), the SBO Return to Work Coordinator, your employing organization, your health care provider(s), the Statewide Benefits Office, and/or the Insurance Coverage Office.

**DISCLAIMER:** If there is any conflict in interpretation between the information contained in this document and the Short Term Disability and Long Term Disability Plan contract provisions and existing law, the contract provisions and/or law govern.

Failure to comply with the process set forth within this guidelines/checklist may result in a loss of earnings and/or disciplinary action.

## DAY 1 - AS SOON AS YOU ARE AWARE THAT YOU ARE UNABLE TO WORK

Contact your supervisor and follow the rules of your employing organization for reporting time away from work due to an accident, illness, or pregnancy. This includes providing periodic updates to your supervisor and your Human Resource/Benefits Representative as directed.

Contact your health care provider(s) to authorize the release of medical information required by The Hartford to process your claim.

Promptly pay all fees required by your health care provider(s) office for the release of basic medical documentation required by The Hartford to process your claim.

Review the <u>Disability Insurance Program Online Courses</u>, <u>Disability Insurance Program Rules & Regulations</u> and <u>Frequently Asked Questions</u> posted on the <u>Statewide Benefits Office</u> website<sup>9</sup>.

If you do not have access to view the above forms online, hardcopies can be requested from your organization's Human Resource/Benefits Office.

# DAY 5 TO 15 - IF YOU EXPECT TO BE OUT OF WORK MORE THAN 30-CALENDAR DAYS

Even if your claim is work related, and you are receiving Workers' Compensation benefits, or you are receiving Personal Injury Protection automobile benefits from the State or your personal automobile insurance vendor, you must also apply for Short Term Disability benefits no later than the 15<sup>th</sup> calendar day of your absence.

**IMMEDIATELY** file a Short Term Disability claim with The Hartford.

• Visit <u>de.gov/statewidebenefits</u> (Navigation: select your group > choose "Disability Insurance") to view the "<u>File a Short Term Disability Claim</u>" document for step-by-step instructions.

If you have questions on how to file a Short Term Disability claim or on the documentation needed to file a claim, assistance is available to you from the Statewide Benefits Office:

Statewide Benefits Office, Customer Service Team 1-800-489-8933 benefits@delaware.gov

<sup>&</sup>lt;sup>9</sup> The Disability Insurance Program Online Courses, Disability Insurance Program Rules & Regulations and Frequently Asked Questions can be found on the Statewide Benefits Office website at <u>de.gov/statewidebenefits</u> (Navigation: select your group > choose "Disability Insurance").

## IF YOU HAVE NOT RETURNED TO WORK BY THE 20TH-WEEK OF YOUR BENEFIT

You will receive *Exhaustion of STD Benefit communications* from your employing organization advising what you can expect if you are awarded 182-calendar days of Short Term Disability benefits and are still disabled and unable to return to work.

You may review the Long Term Disability Booklet<sup>10</sup> online on the Statewide Benefits website.

## **RETURNING TO WORK**

We know that being diagnosed with an illness, or having an injury, can be a frustrating and scary time. Being worried about your job can add to those feelings. It is important to stay in contact with your Human Resource/Benefits Office to keep them informed of your medical status and your intent to return to work.

The Hartford is available to assist you with returning to work from Short Term Disability (STD).

In addition, the Statewide Benefits Office (SBO) Return to Work Coordinator (SBO RTWC) in the Department of Human Resources, Statewide Benefits Office (SBO) provides return to work assistance to employees/former employees who are currently on an approved STD or LTD claim, or were previously on an approved STD or LTD claim within the past 36 months.

## Did you know?

- You may be able to return to work part-time or an alternate work schedule and gradually increase to full-time.
- You may be able to start with light or modified work duty.
- You may be eligible to receive workplace accommodations that can help you to return to work safely and comfortably.

The Hartford and SBO Return to Work Coordinator are available to assist in developing a return to work plan with you and your Human Resource/Benefits Office and help answer your questions about the return to work process.

**IMPORTANT NOTE:** If your intention is to work while transitioning to Long Term Disability, return the *Exhaustion of STD Benefit communications* to your Human Resource/Benefits Representative and contact the SBO Return to Work Coordinator within 10-days prior to the exhaustion of the 182-day Short Term Disability benefit period.

<sup>&</sup>lt;sup>10</sup> The Long Term Disability Booklet is available on the Statewide Benefits Office webpage at: de.gov/statewidebenefits (Navigation: select your group > choose "Disability Insurance").



# SBO RETURN TO WORK COORDINATOR (SBO RTWC)

The SBO Return to Work Coordinator is Crystal Sheats. Crystal has over 20 years' experience assisting people with injuries, disabilities, and illnesses with employment. Crystal is located at the Statewide Benefits Office in Dover and can be reached directly at:

Crystal Sheats, SBO Return to Work Coordinator

Email: returntowork@delaware.gov

Phone: 302-760-7069 Fax: 302-739-8339

Employees requiring assistance with returning to work from STD or being rehired from LTD may contact the SBO Return to Work Coordinator.

Provide a copy of your return to work authorization if your treating health care provider(s) releases you to return to work in a temporary reduced, alternate, light duty and/or part-time basis.

Contact your Human Resource/Benefits Representative for assistance if you are seeking an accommodation under the <u>Americans with Disabilities Act of 1990</u>. If you are unsure how to make this request, the SBO Return to Work Coordinator can assist you.

If your employing organization cannot assist you with modified or transitional work and is unable to provide you the necessary accommodations, please notify the SBO Return to Work Coordinator. The SBO Return to Work Coordinator will contact The Hartford to inform them of your employing organization's inability to accommodate you.

**IMPORTANT NOTE:** If your employing organization approves your request for temporary reduced, alternate, light duty and/or part-time work, **you must return to work.** If you do not return to work, your Short Term Disability and/or Long Term Disability benefits and SBO Return to Work Coordinator assistance may be suspended, discontinued, or denied.

## **CRYSTAL RECOMMENDS THESE HELPFUL RETURN TO WORK RESOURCES:**

- Frequently Asked Questions regarding Short Term/Long Term Disability and Return to Work can be found at: <a href="https://dhr.delaware.gov/benefits/disability/faq.shtml">https://dhr.delaware.gov/benefits/disability/faq.shtml</a>
- The Job Accommodation Network is a free service that can assist in identifying possible accommodations that will assist you in returning to work: https://askjan.org/

Delaware Division of Vocational Rehabilitation is a state agency that works with people with disabilities to assist them with training, education, and job placement: <a href="https://dvr.delawareworks.com/">https://dvr.delawareworks.com/</a>

## **ACTIVITY LOG**

Keep track of phone calls, medical appointments, and contacts you have with your Employing Organization (Human Resource/Benefits Representative and/or Supervisor), The Hartford, the PMA Management Corp (for Workers Compensation claims), the Insurance Coverage Office (for State Personal Injury Protection) and/or the SBO Return to Work Coordinator.

Date	Description	Name/Number/Time

Check if Applicable: Yes No

## **PARENTAL LEAVE POLICY**

Employees eligible for Parental Leave upon the birth of a child(ren) on or after April 1, 2019, are required to utilize Parental Leave to satisfy the 30-calendar day elimination period and to supplement the 75% Short Term Disability benefit payment to receive 100% of pre-disability base pay.

Employees awarded Short Term Disability benefits who are not eligible for Parental Leave or who have a non-child birth related diagnosis may utilize their available annual, sick, compensatory, and/or donated leave (if eligible) to be paid during the 30-calendar day elimination period.

If you are a <u>Non-Executive Branch Agency Employee</u> (including elected offices, school districts, and charter schools) contact your Human Resource/Benefits Representative regarding your eligibility for Parental Leave and for complete Parental Leave Policy information.

If you are an <u>Executive Branch Employee</u> and eligible for Parental Leave, you are required to apply for Parental Leave 30-Days in advance of the birth of your child(ren). Contact your Human Resource/Benefits Representative for complete Parental Leave Policy information.

Contact your supervisor and your Human Resource/Benefits Representative verbally or in writing of your request for Parental Leave. When a 30-day notice is not possible, you must provide this notice as soon as practicable.

Complete the Parental Leave Request form, the FMLA forms, and initiate the Short Term Disability claims process, as applicable. If intermittent leave is requested, a planned schedule is to accompany the request and supervisor approval is required on the Parental Leave Request form posted on the Department of Human Resources (DHR) website at <a href="https://dhr.delaware.gov/policies/">https://dhr.delaware.gov/policies/</a>.

Submit your completed Parental Leave Form to your Human Resource/Benefits Representative.

Notify your supervisor and Human Resource/Benefits Office verbally or in writing upon the birth of a child(ren). This obligation is for both parents if both are eligible for Parental Leave.

Request absence from work in accordance with agency procedure.

# **WORKERS' COMPENSATION & PERSONAL INJURY PROTECTION**

If your disability is connected to a work-related injury, a medical authorization form will be mailed to you from PMA Management Corp, the State's Workers' Compensation vendor. For PMA Management Corp to obtain medical records to handle your WC claim, this form needs to be signed and returned as soon as possible to the address located on the form.

If your disability is related to an auto accident in a state-owned vehicle, a Personal Injury Protection form will be mailed to you from the Insurance Coverage Office (ICO). This form will need to be completed and returned to the ICO before any medical bills or any other benefits can be provided under this program.

Merit employees who are injured on the job and approved for Workers' Compensation and/or Personal Injury Protection through the State will not be charged sick leave for any portion of the day of the work-related injury, as noted in Merit Rule 5.3.8 (<a href="https://merb.delaware.gov/state-merit-rules/">https://merb.delaware.gov/state-merit-rules/</a>).

Non-merit employees must comply with the rules that apply to your employing organization. For initial work-related injuries, the second day will be considered the date of your Workers' Compensation disability. For recurrences, the date of the disability will be the first date that they are out of work.

# **SHORT TERM DISABILITY (STD) CLAIM APPEALS PROCESS**

## INITIAL CLAIM FILING OR REQUEST FOR BENEFIT EXTENSION

- 1. Employee files an initial STD claim or a request for an extension of STD benefits with The Hartford.
- 2. The Hartford reviews the claim and approves or denies the request for STD benefits or the request for an extension of STD benefits.
- 3. **IF** STD benefits are **DENIED OR TERMINATED**, The Hartford provides the employee with the reasons for the denial or termination in writing by certified U.S. mail and electronically (if the employee signed up to receive communications electronically from The Hartford), return receipt requested within 10 days of the decision to deny or terminate benefits. The employing organization is also advised by The Hartford of the denial or termination.

### LEVEL I APPEAL – ADMINISTERED BY THE HARTFORD

4. **IF THE EMPLOYEE DISAGREES WITH THE HARTFORD'S DETERMINATION**, the employee may file an appeal with The Hartford within 90 days of the postmark date of the certified notice from The Hartford containing their decision to deny or terminate benefits. The written appeal should be mailed or faxed to the following address:

**RE: DISABILITY APPEAL** 

The Hartford P.O. Box 14868 Lexington, KY 40512

Tel: (877) 484-9731/ Fax: (833) 357-5152

5. The Hartford approves or denies the appeal then provides written notice by certified U.S. mail and electronically (if the employee signed up to receive communications electronically from The Hartford), return receipt requested to the employee within 10 days of the decision date. The employing organization and the Statewide Benefits Office are also advised by The Hartford of the appeal determination.

### LEVEL II APPEAL - ADMINISTERED BY THE STATE OF DELAWARE

6. **IF THE EMPLOYEE DISAGREES WITH THE LEVEL I APPEAL DETERMINATION**, the employee may file an appeal in writing to the Appeals Administrator within 20 days of the postmark date of the certified notice from The Hartford containing their decision. The written appeal should be emailed, mailed, <u>or</u> faxed to:

Appeals Administrator

**RE: DISABILITY APPEAL** 

Department of Human Resources, Statewide Benefits Office 841 Silver Lake Boulevard, Suite 100 Dover, DE 19904 Tel: (800) 489-8933/ Email: benefits@delaware.gov / Fax: (302) 739-8339

# The written request must include:

- The employee's name and ID number
- The "State of Delaware" as the name of the program sponsor
- The employee's disability claim number, and
- Any new information that was not previously submitted to The Hartford. This could mean medical records, test results, or other documentation that supports why the employee is unable to perform the essential duties of their occupation.
- 7. The Appeals Administrator from the Department of Human Resources, Statewide Benefits Office (or their designee) shall conduct an internal review of the appeal and provide the decision notice to the employee by email (if available), regular U.S. mail, and certified U.S. mail within 30 days following receipt of the written appeal. The employing organization and The Hartford are also advised of the appeal determination.

## LEVEL III APPEAL - ADMINISTERED BY THE STATE OF DELAWARE

8. **IF THE EMPLOYEE DISAGREES WITH THE LEVEL II APPEAL DETERMINATION**, the employee may file a written appeal to the State Employee Benefits Committee (SEBC) within 20 days of the postmark date of the certified notice from the Appeals Administrator from the Department of Human Resources, Statewide Benefits Office containing their decision. The written appeal request should be emailed, mailed, <u>or</u> faxed to:

State Employee Benefits Committee (SEBC)

**RE: DISABILITY APPEAL** 

Department of Human Resources 841 Silver Lake Boulevard, Suite 100

Dover, DE 19904

Tel: (302) 739-4195 / Email: <u>sebc@delaware.gov</u> / Fax: (302) 739-3000

# The written request must include:

- The employee's name and ID number
- The "State of Delaware" as the name of the program sponsor
- The employee's disability claim number, and
- Any new information that was not previously submitted to The Hartford. This could mean medical records, test results, or other documentation that supports why the employee is unable to perform the essential duties of their occupation.
- 9. The SEBC receives the appeal and:
  - a. Identifies an appropriate officer from the Department of Human Resources as the Hearing Officer. The Hearing Officer conducts a hearing with the employee and submits a report to the SEBC within 60 days of the date of the hearing. The SEBC accepts or modifies



- the report and notice of the decision is sent by email (if available), regular U.S. mail, and certified U.S. mail postmarked to the employee within 60 days; **OR**
- b. Hears the appeal and notice of the decision is sent by email (if available), regular U.S. mail, and certified U.S. mail postmarked to the employee within 60 days of the hearing.

### LEVEL IV APPEAL – ADMINISTERED BY DELAWARE SUPERIOR COURT

10. **IF THE EMPLOYEE DISAGREES WITH THE LEVEL III APPEAL DETERMINATION**, the employee may appeal the decision to the Delaware Superior Court within 30 days of the postmark date of the certified notice from the State Employee Benefits Committee containing their decision.

# **EMPLOYEE ASSISTANCE PROGRAM + WORK/LIFE**

Members who are currently enrolled in a State of Delaware non-Medicare Health Insurance Plan (Aetna or Highmark Delaware) have confidential help available to them and their families if they face challenges in coping with the stress, challenges, and changes as a result of a disability. The State of Delaware's Employee Assistance Program (EAP) + Work/Life Program provides free and confidential access to:

- A licensed professional counselor who will provide short-term assistance on topics including stress, depression, anxiety, marital relationships, work conflict, anger, grief and more. You may also be referred for more in-depth long-term help.
- Work/Life Specialists who can answer your questions as well as put you in touch with resources in the following areas: Legal services, eldercare services and financial management.

Learn more about the Employee Assistance Program (EAP) + Work/Life Program at <a href="de.gov/statewidebenefits">de.gov/statewidebenefits</a> (Navigation: select your group, choose "Employee Assistance Program").

**Have questions?** Contact the Statewide Benefits Office Customer Service Team at 1-800-489-8933 or by email at benefits@delaware.gov.

# **QUESTIONS?**

#### **AMERICANS WITH DISABILITIES ACT**

For more information about the Americans with Disabilities Act, if you are an <a href="Executive Branch"><u>Executive Branch</u></a> (If you are a Non-Executive Branch Agency Employee (Including elected offices, school districts, and charter schools) contact your organization's Human Resource/Benefits Representative.

# **EMPLOYEE ASSISTANCE PROGRAM + WORK/LIFE PROGRAMS**

Statewide Benefits Office Customer Service Team at 1-800-489-8933 or benefits@delaware.gov

## THE FAMILY MEDICAL LEAVE ACT (FMLA)

Contact your organization's Human Resource/Benefits Representative.

# **MEDICAL, DENTAL OR VISION BENEFITS**

Contact your organization's HR/Benefits Office if:

- You are on Short Term Disability
- You are working part-time while on Long Term Disability

Contact the Office of Pensions at 1-800-722-7300 if you are on Long Term Disability and not working. The Office of Pensions handles benefits for individuals in these instances, because they are no longer employed.

### **PARENTAL LEAVE POLICY**

The Leave policy for Executive Branch Agencies can be found under "Parental Leave Policy and Procedure" on the Department of Human Resources (DHR) website at <a href="https://dhr.delaware.gov/policies/">https://dhr.delaware.gov/policies/</a>. Non-Executive Branch Agencies (including elected offices, school districts, and charter schools) should contact the Human Resource/Benefits Representative for policy information.

### TRANSITIONING FROM SHORT TERM DISABILITY TO LONG TERM DISABILITY

Contact your organization's Human Resource/Benefits Representative.

WORKERS' COMPENSATION, STATE PERSONAL INJURY PROTECTION OR SALARY SUPPLEMENT Contact the Insurance Coverage Office at 1-877-277-4185 or inscov@delaware.gov.

## **OTHER QUESTIONS**

Contact your organization's Human Resource/Benefits Representative.