

State of Delaware
“Transitioning to LTD” Packet
Information Sheet

Included in this Packet:

- LTD Form Letter: A letter from your employing organization (*Disability Insurance Program (DIP) Transition from Short-Term Disability (STD) to Long-Term Disability (LTD)*)
 - Complete and sign** this letter if you wish to escrow your available leave balances
 - Time Sensitive** – Must be received by your HR Department before LTD begins

- Long Term Disability Booklet
(View the booklet online at de.gov/statewidebenefits)

- Correspondence from the Office of Pensions that includes important information regarding continued eligibility for medical, dental and/or vision benefits as an LTD beneficiary through the State of Delaware

- Group Universal Life (GUL) Insurance Program - Premium Waiver Benefit
(View the *Premium Waiver Benefit* online at de.gov/statewidebenefits: Here you will also find the contact information for Securian)

- Forms to enroll or refuse medical, dental and vision benefits:
 - Office of Pensions Application for Health Care Coverage
 - Complete and sign if you do want medical coverage

 - Office of Pensions Health Insurance Coverage REFUSAL
 - Complete and sign if you do not want medical coverage

 - Office of Pensions Dental Application
 - Complete and sign if you do want dental coverage

 - Office of Pensions Dental Insurance Coverage REFUSAL
 - Complete and sign if you do not want dental coverage

 - EyeMed Vision Care Enrollment/Change form
 - Complete and sign if you do want vision coverage

 - Office of Pensions Vision Insurance Coverage REFUSAL
 - Complete and sign if you do not want vision coverage

 - Request and Authorization for Deductions from LTD Benefit
 - Sign authorizing The Hartford to withhold full and/or partial current and/or retroactive health care deductions from your Long Term Disability (LTD) benefit for the purpose of paying health care

premiums due for your chosen medical, dental and/or vision care coverage through the State of Delaware.

All completed forms to enroll or refuse health, dental and vision benefits must be sent to the Office of Pensions as soon as possible *to avoid difficulties with your benefits.*

Choose one of the options below.

1. Scan and e-mail to pensionoffice@delaware.gov
 2. Fax to (302) 739-6129; or
 3. Mail to Office of Pensions, McArdle Building, 860 Silver Lake Blvd, Ste 1, Dover, DE 19904-2402
- Spousal Coordination of Benefits Policy, Self-Service Guide and Online Form for Pensioners (Located at de.gov/statewidebenefits)
 - Complete the online form if you cover your **non-Medicare** spouse on your State of Delaware health plan.
 - Dependent Child Coordination of Benefits Policy and Form (Located at de.gov/statewidebenefits)
 - Complete the appropriate health carrier's (Aetna or Highmark Delaware) Dependent Child Coordination of Benefits Form if you are enrolling a dependent(s) **for the first time** on your State of Delaware health plan **AND** your dependent(s) have other health coverage.

If you have any questions regarding your transition from STD to LTD, please call your organization's HR Department at _____.

If you have any questions regarding your medical, dental or vision benefits, please contact the Office of Pensions at 302-739-4208 or 1-800-722-7300.