

Faculty Disability



When to report a disability claim or request a leave

Your own serious health condition (illness or injury, including pregnancy)

If you become aware that you will need to be out for more than three days due to your own serious illness or injury, report this absence, as you may qualify for short-term disability benefits and/or job protection offered by the federal Family & Medical Leave Act (FMLA) or California State Family Rights Act (CFRA).

A family member's serious health condition

If you become aware that you will need to be out for a reason listed below, your claim report will start the process to request Family or Medical Leave (FMLA) and job protection. If the leave will be continuous, you must be out a minimum of three days. You may request a leave to care for:

- An immediate family member suffering from a serious health condition, or
- To bond with a newborn, foster or adopted child.

Note: Intermittent leave for family care need not be continuous. It may be taken by the hour, as long as you report each period of absence to your Faculty Affairs Administrator and Liberty Mutual.

How to report a claim or request a leave

You can start a claim on Liberty Mutual's secure Web site or by phone.

- www.mylibertyconnection.com (claimant service ID: stanford)
- (800) 896-9375

You will find a wallet card on page 3 of this brochure. It provides the toll-free number and medical authorization for your physician. In the event of your illness or injury, Liberty Mutual will need your physician to provide certain information about your health condition. When a copy of this card is signed and left in your physician's office, it is your authorization for your physician to release information to Liberty Mutual. Without the information, benefits may be delayed or denied.

Be sure to keep the authorization card with you in case you have a disability claim. Here's what to do:

- Contact your Faculty Affairs Administrator to report your absence.
- See your physician or health care provider.
- Make a copy of the authorization card, date and sign it, then give it to your physician.

This brochure gives you information on what to do if you become ill or injured, or need to care for a family member with a serious health condition.

It includes:

- **When to report a claim**
- **How to report a claim or leave request**
- **A list of information you will need when you report a claim**
- **A summary of your income sources**

Be prepared

You will be asked for information about yourself, your physician or health care provider and your medical condition. Be prepared to provide the following information:

- Your Stanford employee ID number
- Your physician's or health care provider's name, phone number and fax number
- Your last day worked *and* the first day absent from work because of your injury or illness

Be sure to have a pen ready. You will receive:

- Your claim or leave number
-
- The telephone number for your Liberty Claim Team
-
- The telephone number for your FMLA leave administrator
-

Keep this information handy, since you will continue to need it as your claim progresses.

As a Stanford employee, you have certain responsibilities when you are going to be out of work due to an illness or injury. You should:

- Call your Faculty Affairs Administrator to report your absence.
- Contact Liberty Mutual to start your disability claim (see instructions on front).
- Call your local Human Resources Manager or Faculty Affairs Administrator to discuss any questions you have.

In an emergency, you can have a friend, relative or your health care provider contact Human Resources and Liberty Mutual for you.

To extend your time off

- Call your Faculty Affairs Administrator and Liberty Mutual again to make sure they are aware your leave will be longer than first reported.
- Make sure your doctor calls Liberty Mutual to confirm the extended time off. **Without specific information from your health care provider, Liberty Mutual will not extend your claim.**

Reporting your return to work

- Contact your Faculty Affairs Administrator to confirm your return to work date.
- Report your return date to Liberty Mutual by calling your case manager at the number provided to you during your first call. Your Liberty Mutual case manager's contact information is also on all claims correspondence.

Questions?

For questions on eligibility or a claim, call Liberty Mutual at (800) 896-9375.

Once Liberty Mutual approves your claim, you start receiving disability income. Generally, this can take up to two weeks from the date the claim is approved. If you have not heard anything by the end of that time, call Liberty Mutual again. Be sure to have your claim number handy.

For general information on disability, go to <http://benefits.stanford.edu>. Look at the *Disability* section under the *Medical & Life* tab.

A note on Salary Supplement

For faculty, during the first 90 days you are out on Voluntary Disability or Short-Term Disability leave, Stanford supplements the disability payment you receive from Liberty Mutual up to your base appointment salary (for School of Medicine faculty, appointment salary includes base plus variable salary). If you are a Clinician/Educator, you may be required to use your time off with pay allotment to supplement temporary disability leave.

If you apply for Long-Term Disability and are approved, you will receive $66\frac{2}{3}$ of your base appointment salary from Liberty Mutual less any offsets (for School of Medicine faculty, appointment salary includes base plus variable salary). Contact your Faculty Affairs Officer or Human Resources Manager to see if other benefits are available.

What happens to your Retirement Contributions

No Stanford Contributory Retirement Plan (SCRIP) contributions are taken from disability payments you receive from Liberty Mutual. If you receive salary continuation, normal retirement contributions will be taken from this portion of your pay.

For information on what happens to your other benefits, contact the Benefits Service Center at (650) 736-2985 and press option 9.

Your Sources of Income

Type of Income	From Liberty Mutual	From Stanford
<i>Voluntary Disability (VDI) for California employees only with Salary Supplement</i>	Weekly disability check equal to the lesser of 60% of your appointment salary or \$1104 per week.	The remainder from Stanford on the 7th and 22nd of each month for the first 90 days of disability. ¹
<i>Short-Term Disability (STD) for non-California employees only with Salary Supplement</i>	Weekly disability check equal to the lesser of 60% of your appointment salary or \$1104 per week.	The remainder from Stanford on the 7th and 22nd of each month for the first 90 days of disability.
<i>Family Temporary Disability (FTD) for California employees only with Salary Supplement</i>	Weekly disability check equal to the lesser of 60% of your appointment salary or \$1104 per week.	Contact your Faculty Affairs Officer or Human Resources Manager to see if other benefits are available. ¹
<i>Long-Term Disability</i> ²	Monthly disability check equal to 66 ⅔ of your appointment salary. ³	Contact your Faculty Affairs Officer or Human Resources Manager to see if other benefits are available. ¹

¹ Lecturers should contact your Faculty Affairs Officer or Human Resources Manager to determine if this source of income is available to you.

² From your first day of disability up to 52 weeks, you continue to receive part of your benefit from VDI.

³ The amount you receive from Liberty Mutual may be reduced by other disability income. Your total benefit from all sources will equal 66 ⅔ of your base pay.

Authorization Card

Cut out entire card and fold back to back. Sign and keep the card with you.



STANFORD UNIVERSITY

Use this card if you:

- ▶ Are hospitalized or out of work due to your own injury or illness more than 3 business days, OR
- ▶ Need to be out to care for an immediate family member with a serious illness or injury, OR
- ▶ Need to care for a newborn, foster or adopted child.

Make a photocopy of the back of this authorization card. Sign and date the copy and leave it with your physician or medical care provider.

Disability & Leave Authorization Card

CALL
1-800-896-9375 to speak to a Customer Service Representative

GO ONLINE
www.mylibertyconnection.com to submit your claim
Claimant Service ID: stanford

LIBERTY LIFE ASSURANCE COMPANY OF BOSTON

Authorization to Release Information

I authorize any licensed physician or medical care provider having information available with respect to any physical or mental condition and/or treatment of me, to give any and all information to the particular Company within the Liberty Mutual Group of companies and/or Plan Sponsor to which I am submitting a claim. I understand that the information obtained by use of this Authorization will be used by the Company to determine eligibility for benefits. This Authorization is valid for the duration of my claims. I know that I may request a copy of this Authorization and I agree that a photographic copy shall be as valid as the original.

Employee's Signature _____ Date _____

Human Resources contact:

Name _____

Phone number _____

Overpayment

Important: Any overpayments on the part of Stanford University will be recovered in a subsequent paycheck or through an agreed upon payment plan. Failure to repay an overpayment could result in disciplinary action.



L.A. Cicero/Stanford News Service

*Your disability benefits are governed by contracts, policies and applicable state and federal laws.
If there is a conflict between the wording of this summary and the policies or contracts,
the policies, contracts and applicable laws govern.*