Exceptional service from experienced professionals

Our highly trained, compassionate specialists support and guide your employees throughout the claims process with the goal of helping them to return to health.

Submission and Initial Evaluation

Initial Decision

Ongoing Service and Follow Up

Claim and Leave Resolution

- Claimant submits claim by phone, web or mail
- They can access all forms online via their MyBenefits portal
- Claims Specialist reviews all medical information and contacts their treatment provider directly to determine eligibility under the disability plan
- Auto-adjudication delivers efficient claims processing

FAST: We attempt to contact the Claimant within 1-2 business days and provide direct access to their Claims Specialist

- We make a claims decision 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

EFFICIENT: About ½ of STD claims are eligible for decisions within 1 business day, with over ½ of those decisions being made instantly

- 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, including 2-way texting and video chat support

PROACTIVE: 6-8 weeks before the benefit start date, we will initiate a LTD claim to avoid payment delays, if also covered

- 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

ENGAGED: 7 days before the end of the Disability Benefit, the Claims Specialist will confirm the RTW plan with all parties

The Claims Specialist connects the Claimant to your health and wellness programs, and engages specialists throughout the claim as needed, including:

- » Rehabilitation Consultants
- » Nurses
- » Behavioral Clinicians
- » Physician Consultants
- » Social Security Specialists

An optimized online experience

Our online resources are designed to provide you and your employees with self-service support that keeps everyone informed, involved and engaged.

For You

Employers can use MyBenefits or MetLink to:

- Submit claims online
- Obtain real-time claim status and details
- Create custom reports
- Update information and add comments to existing claims

Employers can submit a claim for an employee on MyBenefits and manage their workforce.

For Your Employees

Employees can use MyBenefits and the MetLife MobileApp to:

- Submit a claim*
- Authorize an Electronic Funds Transfer
- Submit medical authorization
- Submit medical information and comments
- Review real-time claim status
- Access educational videos



Special Considerations: If you have employees who work in a state with state-mandated disability or paid medical leave benefits ("State Benefits"), they should carefully consider whether to enroll for this coverage. In California, Connecticut, Hawaii, Massachusetts, New Jersey, New York, Puerto Rico, Rhode Island, Washington, Oregon (starting 9/3/23), and Colorado (starting 1/1/24), if eligible, employees must apply for State Benefits. Your employees' STD benefit will be reduced by State Benefits or other government benefits that apply. Depending on your employees' compensation, the amount of the State Benefit, and other factors, they may only receive the minimum weekly benefit. Your employees should consider, based on their individual circumstances, whether they need additional coverage beyond the State Benefit.

Get expert guidance for confident decisions.

Contact your MetLife representative today.

metlife.com

The timeline is an example of an STD claim bridging to an LTD claim based on calendar days. The specific timing of events on each claim is driven by many factors including plan design, the disabling condition, the claimant's occupation and more. Claim submission methods may vary by product and customer size. Metropolitan Life Insurance Company, New York, NY.

Like most group disability insurance policies, MetLife's policies contain certain exclusions, exceptions, waiting periods, reductions, limitations and terms for keeping them in force. Ask your representative about costs and complete details.



^{*} not available through the mobile app