



Voya Absence Resources

Helping you access your
Family Medical Leave and
Disability Income Benefits

ReliaStar Life Insurance Company,
a member of the Voya® family of companies

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FINANCIAL

Leave Types

Employees should contact Voya Absence Resources to request an intermittent or continuous leave of absence due to the employee's health, a family member's health, military duty, domestic violence, civic duty or other reasons which may be covered by various State leave laws or to request a Personal leave.

What is the Family Medical Leave Act (FMLA)?

The Family Medical Leave Act (FMLA) provides unpaid, job-protected leave for specific family and medical reasons. The length of leave will vary for each situation. As an example, eligible employees may be entitled to:

- Up to 12 work weeks of leave in a 12-month period for:
 - The birth of a child and to care for the newborn child within one year of birth
 - The placement of a child for adoption or foster care and to care for the newly placed child within one year of placement
 - To care for the employee's spouse, child or parent who has a serious health condition
 - A serious health condition, such as a disability, that makes the employee unable to perform the essential functions of his or her job
 - Any qualifying event/emergency arising out of the fact that the employee's spouse, son, daughter or parent is a covered military member on "covered active duty"
 - Twenty-six work weeks of leave during a single 12-month period to care for a covered service member with a serious injury or illness if the eligible employee is the service member's spouse, son, daughter, parent or next of kin (military caregiver leave).

Who is eligible?

FMLA eligibility* requires the employee to have worked for the employer for 12 months and worked 1,250 hours during the 12 months prior to the start of leave; and work at a location where the employer has 50 or more employees within 75 miles.

*These are the minimum federal requirements for employers. Many states offer additional leave protection options which are taken into account when you request leave under FMLA.

What is Group Short Term Disability Income coverage?

Group Short Term Disability Income coverage provides you with benefits to replace part of your paycheck when you can't work because of a sickness or injury. You may need to meet certain conditions to be eligible for payment, such as completing a waiting period. During the waiting period, you may be able to use your vacation or sick time if offered. Generally, short term disability benefits are paid for a few weeks to a few months.

What is the difference between FMLA and Short Term Disability Income coverage?

FMLA is a United States federal law, which provides you with job protection but does not pay you any money. Short Term Disability Income coverage is available through your employer and provides you with benefits to replace a portion of lost income but does not protect your job for your return.

While FMLA and short term disability coverage are two separate programs, they work together to:

1. ensure your job is protected when you are unable to work and
2. provide you with benefits to replace a portion of your lost income when you are unable to work.

Additionally, when you take time off for your own illness or injury, your FMLA and short term disability start and return-to-work dates will be the same.

What should I expect when I file a claim with Voya Absence Resources?

During the initial call to report your leave, the intake specialist will explain the FMLA and short term disability process and answer any questions you may have. He or she will confirm if you are eligible for FMLA, as well as begin the claim process for both FMLA and short term disability. You will receive a packet of information that will detail your rights under FMLA leave and help you understand next steps for your short term disability claim.

We will assign a designated claims analyst for you to work with throughout the duration of your short term disability claim. We will contact your treating doctors as soon as we have your authorization. Once we receive all required information, we will make a final claim decision. Your claims analyst will call you to inform you of the claim decision and help you understand any further requirements of you for the duration of your leave. You will also receive both FMLA and short term disability claim decision letters.

Work with your care team.

If additional services, such as rehabilitation or job retraining, could help you return to a healthy and productive life, your claims analyst may suggest these services. Sometimes, additional services are needed to help you return to work and/or achieve the highest possible functionality for performing daily activities.

Note: All medical decisions are between you and your doctor. We do not offer medical advice. If you have questions about your coverage, this program or alternative methods for submitting claims, please contact your employer's benefits department. It is critical we receive authorization to speak with your doctor as early in the process as possible. **Benefits may be delayed** if you do not follow the claim instructions above, or if we cannot gather the necessary medical information.

Step-by-step instructions to request a leave from work:

- 1. Call your manager:** Call your manager every day you are absent, until your leave is approved.
- 2. Provide your doctor with authorization to release information to us.** We will need medical information to support your FMLA and/or short term disability claim. Ask your doctor to keep a copy of this with your medical records, as this will help speed the processing of your claim.
- 3. Contact us at 1-888-464-FMLA (3652) to report your leave from work.**

You will speak with an intake specialist, who will gather all information necessary for us to understand your leave. Please have the following information available:

- Your name, address and contact information
- Your date of birth
- Your marital status
- The company you work for
- The name and contact information of any doctors providing your treatment
- Your job title and brief description
- Your last day worked
- The date you expect to return to work (if known)
- A brief description of your medical condition, including details, such as date of first treatment
- Any work restrictions already noted by your doctor

You will have a point of contact every step of the process. You will always know who to call with any questions.

Leave Management instructions

GROUP NUMBER: _____

If you anticipate being absent from work for a leave due to FMLA or disability, first call your supervisor and then call the number below. In addition, please ensure that you sign any authorization for release of health information that your doctor requires, so that we are able to contact his/her office for review of your disability absence.

HOURS:

**Mon-Fri 8:30 a.m. – 10:30 p.m. (EST)
1-888-464-FMLA (1-888-464-3652)**

You can also call this number to obtain a status of a claim in process.

Disability certification administered by ReliaStar Life Insurance Company. FMLA services provided by ComPsych® Corporation.

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Instructions for attending physician

URGENT: Your patient's income continuation depends on our evaluation of the information we have obtained about their disabling condition. Our office will contact you shortly. Please make a copy of the employee's authorization for your records.

Employee name (print)

Employee signature (for release of information)

Date

I hereby authorize my attending physician to furnish ReliaStar Life Insurance Company all facts, including medical records if requested, concerning my condition for the purpose of determining my eligibility for disability benefits. A photocopy of this authorization is as valid as the original.

cut here for a convenient wallet-sized card

Required fraud warnings

Alabama, Alaska, Arkansas, Delaware, Idaho, Indiana, Louisiana, Maine, Minnesota, Ohio, Oklahoma, Rhode Island, Tennessee, Texas, Washington, West Virginia: Any person who, knowingly with intent to defraud any insurance company or other person files a statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime, and may subject such person to criminal and civil penalties, and denial of insurance benefits.

Arizona: For your protection Arizona law requires the following statement to appear on this form. Any person who knowingly presents a false or fraudulent claim for payment of a loss is subject to criminal and civil penalties.

California: For your protection, California law requires the following to appear on this form. Any person who knowingly presents false or fraudulent claim for the payment of loss is guilty of a crime and may be subject to fines and confinement in a state prison.

Colorado: It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado Division of Insurance within the Department of Regulatory Agencies.

District of Columbia: WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

Florida: Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete or misleading information is guilty of a felony of the third degree.

Kentucky: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

Maryland: Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

New Hampshire: Any person who, with purpose to injure, defraud, or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is subject to prosecution and punishment for insurance fraud, as provided in RSA 638:20.

New Jersey: Any person who knowingly files a statement of claim containing any false or misleading information is subject to criminal and civil penalties.

New Mexico: Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to civil fines and criminal penalties.

Pennsylvania: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact materials thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

FMLA services are provided by ComPsych® Corporation, Chicago, IL.

FMLASource®, Inc. is a ComPsych® company which offers an alternative to internally administering FMLA that reduces an organization's FMLA costs and liability. A service that reviews, approves, processes and tracks leave requests with the oversight of an expert legal staff, FMLASource helps organizations greatly reduce the amount of absences while protecting against legal action.

Group Short Term Disability Income Insurance is underwritten by ReliaStar Life Insurance Company (Minneapolis, MN), a member of the Voya® family of companies. ReliaStar Life Insurance Company provides only administrative services for self-funded disability income plans. Product availability and specific provisions may vary by state.

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