# Long-Term Disability Income Protection Plan

**ENROLLMENT**  
Employees may enroll in the Long-Term Disability (LTD) Plan within the first 31 days as a new hire OR enroll in the Plan during the annual State sponsored group insurance “Open Enrollment Period.” Placement in LTD Plan I or Plan II is based on sick leave balance at the time of enrollment.

**PLAN I BENEFIT PERIOD**  
Employees who have 183 or fewer hours of accumulated sick leave may be eligible for LTD payments for 24 months.

**PLAN II BENEFIT PERIOD**  
Employees who have 184 hours or more of accumulated sick leave may be eligible for benefits to age 65 (age 70 for the Administrative Support and Human Services Unit enrollees). Plan II employees will not be reclassified to Plan I if their sick leave balance falls below 184 hours as long as they remain continuously enrolled in the LTD Plan.

**PREMIUM RATE CHANGE**  
Premium rates are provided annually for Plan I and Plan II classes. Plan and premium class rate changes take place at the beginning of the pay period following the pay period in which 184 or 528 sick leave hours are accumulated, or sick leave balance falls below 184 hours.

**WHEN TO FILE A CLAIM**  
Claims should be filed as soon as possible by contacting the Human Resources (HR) Office or the Civil Service Disability Management Office (DMO), as applicable, or the LTD Plan Third Party Administrator (TPA) for claim filing information. Submitting a medical statement to the HR Office or DMO does not constitute the filing of an LTD claim. The LTD Plan TPA will send the employee an initial claim packet containing the forms that must be completed and returned. The LTD Plan TPA will determine whether the medical documentation submitted supports a total disability.

**WAITING PERIOD**  
Employees must wait 14 calendar days (30 days for Troopers and Sergeants) from the date of disability or the date their sick leave is exhausted, whichever comes later, before LTD payments begin.

**PRE-EXISTING CONDITION RULE**  
The LTD Plan does not cover pre-existing conditions in the first year of coverage. A pre-existing condition is an illness, injury or pregnancy for which the employee was seen by a physician, received medical treatment or services from a physician, or was prescribed medication by a physician during the 6 months immediately before the date the employee enrolled in the LTD Plan. After continuous enrollment in the Plan for more than 1 year, this rule does not apply.

**TOTAL DISABILITY**  
A “period of total disability” starts when the employee becomes totally disabled, but not earlier than 31 days before the date they were personally treated by a “licensed physician.”

During the first 24 months, Plan I and Plan II employees must be totally disabled from their “usual occupation.” After the first 24 months, Plan II employees must be totally disabled from working at any “reasonable occupation.”

**MENTAL HEALTH DIAGNOSIS**  
Only a psychiatrist or a mental health care provider, as determined by the employee’s group health plan, can evaluate, provide treatment, and submit documentation of a mental health condition. If a claim is based on a claim of total disability due to a mental health condition, LTD payments will terminate at the end of 24 months of disability benefits. This limitation is not applicable for the Administrative Support and Human Services Unit enrollees.

*Nothing contained in this information shall be construed to modify the Long-Term Disability Income Protection Plan.*

Rev. 5/2015
**State of Michigan**  
**Office of the State Employer - Employee Health Management**  

**Long-Term Disability Income Protection Plan**

<table>
<thead>
<tr>
<th>LTD PAYMENTS</th>
<th>During the first 6 months of disability, employees will receive LTD payments twice each month. During the 7th and subsequent months of disability, the LTD payment is received near the last day of the month.</th>
</tr>
</thead>
<tbody>
<tr>
<td>LTD PAYMENT AMOUNT</td>
<td>For full-time employees, the gross monthly payment before deductions and offsets is 66 and 2/3 of their monthly rate of basic earnings. Bonuses, overtime pay and other extra compensation are not included. For less than full-time employees, the gross monthly payment is based on the number of basic hours paid in the prior fiscal year. The monthly LTD payment is subject to a monthly maximum and is reduced by any other income payable for the same month as provided in the LTD Plan. The most common sources of “other income” are Social Security Disability Insurance (SSDI) benefits, State of Michigan Retirement income and an employee’s post injury work earnings.</td>
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<tr>
<td>HEALTH INSURANCE AND LTD RIDER</td>
<td>If an LTD claim is approved and the employee is enrolled in either the State Health Plan or an HMO, the State will pay both the employee's and employer's share of the health insurance premium for the period of disability for up to 6 months. This provision is called the LTD Rider. Dental and vision premiums are not paid by the LTD Rider. Contact the Civil Service Commission Employee Benefits Division for information about continuing dental, vision or life insurances while on LTD and continuing health insurance after the LTD Rider has expired.</td>
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<tr>
<td>RETURNING TO WORK</td>
<td>Employees released to return to work must submit written authorization or a release to return to work without restrictions to their HR Office, or DMO, and the LTD Plan TPA. Any request to return to work with restrictions must be submitted to the HR Office, or DMO, for approval.</td>
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<tr>
<td>RETURNING TO WORK ON REDUCED HOURS</td>
<td>Partial LTD payments are calculated by subtracting 80% of the gross pay for hours worked from the employee’s gross LTD payment.</td>
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<tr>
<td>UNABLE TO RETURN TO WORK</td>
<td>The TPA will assist employees who are permanently unable to return to work at their “usual” or a “reasonable occupation” with applying for SSDI benefits. Employees must contact the Office of Retirement Services to inquire if they are eligible for any type of State retirement benefit.</td>
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<tr>
<td>TERMINATION OF BENEFITS</td>
<td>Your benefits will terminate at the end of the calendar month in which you attain age 65 (age 70 for the Administrative Support and Human Services Unit enrollees) or the expiration of 12 months of total disability following the waiting period, whichever occurs later. If you have attained the age of 65 or 70 prior to the expiration of the waiting period, your benefits will terminate at the expiration of 12 months of total disability following the waiting period.</td>
</tr>
</tbody>
</table>

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