

# Your Guide to MetLife Absence Reporting



## MetLife

University of Missouri offers valuable Long Term Disability benefits. If you are unable to work in excess of 149 calendar days due to sickness or accidental injury, MetLife Long Term Disability benefits may replace a portion of your lost income. This can help you keep your bills under control while maintaining your current lifestyle.

MetLife makes it easier to report your disability claim. You can file your claim quickly and efficiently by phone or by web; thus, eliminating the cumbersome process and occasional delays associated with paper claim filing. This brochure explains how to file your disability claim and what to expect. MetLife professionals will address your needs quickly and treat you with compassion and respect.

### Reporting Your Absence

If you are absent or expect to be absent from work in excess of 149 calendar days due to sickness or accidental injury, you must report your absence:

1. Notifying your Supervisor and;
2. Calling the MetLife Claims Center at  
**866-729-9200**

The Claims Center is available 7:00 a.m. – 10:00 p.m. (Central Time), Monday through Friday.

3. You may instead choose to report your absence to MetLife through the MyBenefits Website at  
[www.metlife.com/mybenefits](http://www.metlife.com/mybenefits).

### Information We May Need from You

Here's the information you should have available when reporting a disability.

- **Personal Information**—name, address, telephone number, Social Security Number, Employee Identification Number, and job title
- **Supervisor / Manager Contact Information** – name, telephone number, and e-mail address.
- **Job Information**—workplace location and address, work schedule, and date of hire
- **Sickness/Injury Information (if applicable)**—last day worked, nature of the illness/absence, how, when, and where the injury occurred, when the disability commenced and actual or approximate date you anticipate returning to work (if known).

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DETACH AND KEEP THIS CARD

If you are absent or expect to be absent from work in excess of 149 calendar days due to sickness or accidental injury you must report your absence by:

- Advising your Supervisor that you will be absent.
- Calling our toll-free number:

**866-729-9200**

- Or you may choose to report your absence via web on  
[www.metlife.com/mybenefits](http://www.metlife.com/mybenefits).

**When you report your absence, you may need to verify or provide the following information:**

- Personal Information
- Job Information
- Sickness/Injury Information (if applicable) – last day worked, nature of the illness, how, when, and where the injury occurred, and when disability commenced
- Physician Information (if applicable)— name, address, telephone number, and fax number for each treating physician

## Information We May Need from You (cont'd)

- **Treatment provider Information (if applicable)**—Name, address, telephone number, and fax number for each treating Health Care Provider.
- **Authorization to Release Your Medical Information (if applicable)** - the release of your medical information to MetLife may be required. If applicable:
  - You should inform your Health Care Provider(s) that MetLife will be administering your claim and that you authorize the release of your medical information to the MetLife claims office.
  - An “Authorization to Disclose Information About Me” form may be mailed to you from MetLife after you report your disability claim. You can expedite this process by downloading this form from MyBenefits at [www.metlife.com/mybenefits](http://www.metlife.com/mybenefits). Click on the “Forms” link in the upper right hand corner of the navigation bar. You should sign and return this form as soon as possible. This release authorization will expedite the processing of your disability claim.

## What to Expect Initial Notification

When you report a disability claim MetLife will send you written acknowledgement of your request. You may be contacted by a MetLife Case Manager within a few business days if we need to discuss additional information with you.

## What to Expect Initial Notification (cont'd)

For disability claims:

- You may be contacted to discuss your medical condition, including the impact it has on your ability to do your job, and your treatment plan.
- Your Health Care Provider may also be contacted, if applicable to discuss your medical information, treatment plan, prognosis and functional abilities.
- University of Missouri may be contacted to discuss your specific job duties in detail. Confidential medical information will not be shared with University of Missouri except for plan administration purposes such as return to work purposes.

For your convenience, a wallet *InfoCard* that outlines claim reporting procedures is attached to this brochure. You should retain this card in your wallet for future use.

Effective communication is a two-way process; therefore, you are encouraged to call your Case Manager anytime you have questions or concerns about the program or your case. A Customer Service Unit is also available from 7:00 a.m. – 10:00 p.m. (Central Time) to answer your questions. The toll-free number is 866-729-9200

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- Authorization to Release Your Medical Information (if applicable):
  - You should inform your Health Care Provider(s) that MetLife will be administering your disability claim and that you authorize the release of your medical information to the MetLife claims office.
  - An “Authorization to Disclose Information About Me” form may be mailed to you from MetLife after you report your disability claim. You can expedite this process by downloading this form from MyBenefits at [www.metlife.com/mybenefits](http://www.metlife.com/mybenefits). Click on the “Forms” link in the upper right hand corner of the navigation bar. You should sign and return this form as soon as possible. This release authorization will expedite the processing of your disability claim.

**Keep this important card with you.**

This card provides you with the telephone number and key items of information you will be asked to provide when initiating your claim.

**MetLife**

**MetLife**

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