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Frequently Asked Questions About Long Term Disability (LTD) Benefits

Standard Insurance Company (The Standard) appreciates the opportunity to provide County of Riverside employees with LTD Benefits. This document answers some basic questions about your LTD Benefits. This is not meant to replace your Certificate of Insurance. If you do not have a Certificate of Insurance, please contact your Human Resources Department.

When should I report a LTD Claim?

For Class 1 Members, report a claim as soon as you believe your absence from work may extend beyond 60 calendar days. For Class 2 and 3 Members, report a claim as soon as you believe your absence from work may extend beyond 30 calendar days.

How do I initiate the LTD Claim process?

Please call Kerri Frahm in your Human Resources Department to request an application for LTD Benefits. The telephone number is 951.955.4988. Upon notification, your Human Resources Department will send you an application for LTD Benefits. This application will include an Employee's Statement, Attending Physician's Statement, and an Authorization to Obtain Information. Please read the instruction sheet, before completing your portions of the LTD Benefits application.

Where do I send the completed forms?

Completed forms may be mailed to:

Standard Insurance Company
Employee Benefits Department
P.O. Box 2800
Portland OR 97208

Or if you prefer, you may fax completed forms to The Standard. Our toll-free fax number is 866.420.2555.

What can I expect after I submit the completed forms?

In approximately one week after The Standard receives your completed LTD Benefits application which includes the form your Employer will be completing, your Benefits Analyst will review the information and contact you to discuss any additional information that may be necessary to complete the processing of your claim and to answer any of your questions.

If my claim for LTD Benefits is approved, when will I receive my first check?

Before LTD Benefits become payable, you must serve a Benefit Waiting Period (BWP). The BWP is the period of time you must be continuously disabled before Benefits become payable. No LTD Benefits are payable during the BWP. For Class 1 Members, the BWP is 60 calendar days. For Class 2 and 3 Members, the BWP is 30 calendar days.



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LTD Benefit payments are paid in arrears on a monthly basis based on your date of disability. LTD Benefit payments that are payable for retroactive claims will be paid immediately following claim approval. Your checks may be mailed directly to the address provided on your Employee's Statement or you may elect Electronic Funds Transfer (EFT) to your bank account. Your Benefits Analyst will provide you additional information regarding this option when you are notified of your claim approval.

How often will updated medical information be requested for the ongoing management of my claim?

Claims are regularly monitored and evaluated based on the medical data received and the facts of the claim. Updated medical information will be requested as necessary based on the individual claim facts. If the status of your claim changes, you will be notified immediately.

What steps do I take if I am returning to work or thinking about returning to work?

If you are interested in return to work opportunities at the County of Riverside please contact:

Phone: 877-RET-2WRK (738-2975)
E-mail: return2work@rc-hr.com
Address: 3880 Lemon Street, Ste. 100
PO Box 1120
Riverside CA 92502-1120

Additionally, if you are thinking of returning to work or have returned to work, please notify your Benefits Analyst immediately. Your Benefits Analyst will partner with you as you return to work and provide return to work assistance when needed. By contacting your Benefits Analyst promptly, you will minimize any financial impact (i.e. overpayment) from occurring on your claim.

What if I have additional questions?

At any time, you are encouraged to contact your Benefits Analyst with any questions.