LONG-TERM DISABILITY (LTD) Employer Guide

Eligibility • Enrollment • EOI • Claims • Employer Responsibilities

New Mexico Public Schools Insurance Authority

EASI Edu INCORPORATED

Before You Get Started

Know your entity's LTD plan selection and where to find the current forms.

Employer Checklist

Confirm your entity’s elected waiting period: 30, 60 or 90 days.

Know which employees meet the LTD eligibility requirements.

Use the current NMPSIA/The Standard LTD Claim Packet.

Know who handles payroll deductions and leave reporting.

What Employees Need

Enrollment access or Employee Enrollment/Change Form

Accurate email address for EOI communication

LTD claim packet when a disability occurs

Benefit administrator contact information

Employer Mindset

Enroll correctly.

Report changes promptly.

Do not determine whether an employee is medically disabled — The Standard evaluates the claim.

Help keep the process moving.

LTD at a Glance

Long-Term Disability insurance provides income replacement when a covered employee meets the policy definition of disability.

Monthly Benefit

66⅔% of the first $7,500 of predisability earnings, reduced by deductible income.

Maximum / Minimum

Maximum: $5,000 per month before deductible income.
Minimum: $100.

Waiting Period

Employer selects one plan option:
30 days • 60 days • 90 days

Benefit Duration

Maximum benefit period is age-based and may extend to Social Security Normal Retirement Age depending on age when disability begins.

Who Is Eligible for LTD?

Verify eligibility before enrollment.

- Active employee of a participating NMPSIA employer.
- Actively At Work means the employee is fulfilling the employer required minimum hours worked (No less than 20 hours per week).
- With a NMPSIA Board-approved Annual Part-Time Resolution: 15 or more hours per week.
- Must meet the policy's Member and Active Work requirements.
- Seasonal employees, leased employees, substitutes and certain other classifications are excluded under the certificate.

Employer Tip

Do not assume that eligibility for another benefit automatically means LTD eligibility. Verify the employee’s hours, classification and your entity’s requirements.

New Hire/Special Enrollment

The first 31 days matter. No Evidence of Insurability (EOI) required.

1. Confirm Eligibility

Verify the employee meets LTD eligibility and Active Work requirements.

2. Enroll Timely

The employee must apply for coverage and authorize payroll deductions. Applications received more than 31 days after becoming a new hire or qualifying event are considered late applications.

3. Start Deductions

Coverage not subject to EOI becomes effective on the first day of the calendar month following the date the employer begins payroll deductions, subject to Active Work requirements.

Late Enrollment & Evidence of Insurability (EOI)

LTD can be requested after the initial enrollment period, but additional approval is generally required.

When EOI Is Required

A late application — generally when the employee applies more than 31 days after becoming eligible.

The employee completes the enrollment request on MyBenefits Portal first. It will go to the Employer for approval, and then to EASI Edu for processing. EASI Edu will submit to The Standard and The Standard then sends the employee an email with a link for the Evidence of Insurability (EOI).

EOI may include a medical history statement, authorization to obtain health information, and additional information or examination if required.

Employer Role

1. Have the employee process the LTD enrollment request.
2. Make sure the employee's email is accurate.
3. Approve the transaction on MyBenefits portal.
4. Explain that The Standard will communicate directly regarding EOI.
5. Do not treat the coverage as approved until approval/effective-date requirements are met.
6. Follow the approved effective date and payroll process once notification from The Standard or EASI Edu is received, confirming that the employee was approved.

Access a Step-by-Step Guide for The Standard EOI Process here: EOI Information

EOI Information for Employer & Employees

[Employer EOI Flyer]

[Employee EOI Flyer]

TheStandard®

New Mexico Public Schools Insurance Authority

Connected EOI™ – Streamlined for Employers

New and improved for a streamlined Evidence of Insurability and medical underwriting experience.

Give your employees the tools they need to easily apply for coverage. The Standard's new Connected EOI radically improves collecting Evidence of Insurability from employees. This means an easier application process, faster underwriting decisions and automated communication to applicants.

You asked, we listened. Connected EOI enables employees to apply for coverage faster and easier than ever before.

See how Connected EOI works here
https://bcove.video/3usAI1U

Automated decisions
Eligible applicants may receive automated approvals or declines.

Automatic reminders
Employees who haven't started or haven't finished applications receive scheduled reminders.

Demographic and data integration
Employees sail through application submissions with prepopulated enrollment data.

Reduced administrative load
Scheduled invitations and reminder communications eliminate extra work for HR.

Save progress
Employees can start the application, save and return later to complete.

Questions about Connected EOI?

Contact Andrea Vargas at andrea.vargas@standard.com or 971.321.7192.

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TheStandard®

New Mexico Public Schools Insurance Authority

Connected EOI™ Streamlines Applying for Coverage

Apply for coverage with a few clicks of a button.

The Standard's new Connected EOI lets you apply for coverage faster than ever before. Your personal information and elected amounts are seamlessly imported and pre-filled, making the application and medical underwriting process a cinch.

If you elect coverage that requires evidence of insurability, you will receive an invitation to apply message from The Standard at the e-mail address we have on record. Prior to receiving this link, you must submit an enrollment/change form to your Benefits Specialist. There will be a link and log on instructions within the e-mail. Those coverage amounts will be pended until your application is submitted and approved by The Standard.

Connected EOI makes submitting your medical history easy.

What can you expect from Connected EOI?

Improved turnaround time
Faster application processing including some instant approvals.

Progress reminders
Email reminders help keep you on track to start or finish an application.

Auto-filled forms
You don't have to remember the policy number, coverage amount or other information. Connected EOI will have that filled out for you.

Simplified process
Easy-to-understand steps so you don't get lost in the details.

Status tracking
Always know where you are in the underwriting process.

Family applications
Spouse and child applications can be completed together in the same process, saving you time.

Apply anywhere
Fill out all your applications from the comfort of your own home, on your own time.

Questions about Connected EOI? Contact Andrea Vargas at andrea.vargas@standard.com or 971.321.7192

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Active Work Requirement

Enrollment approval and an effective date are not the only considerations.

Key Rule

The employee must be capable of Active Work on the scheduled effective date. If the employee is incapable of Active Work because of physical disease, injury, pregnancy or mental disorder, coverage does not become effective until the employee returns to Active Work as an eligible Member.

What is Active Work?

Performing with reasonable continuity the material duties of the employee's own occupation at the employer's usual place of business.

Employer Tip

If an employee is already out of work when coverage is scheduled to begin, verify the Active Work rule before assuming coverage is effective.

When an Employee Becomes Disabled- Filing an LTD Claim

Think CLAIM — not just leave.

C - Confirm Coverage
Confirm the employee had LTD coverage in force when disability began.

L - Locate the Packet
Provide the current NMPSIA Long Term Disability Claim Packet.

A - Act Promptly
Do not wait until the benefit waiting period is over to begin gathering information.

I - Identify Responsibilities
Employee, physician and employer each have portions to complete.

M - Mail/Submit
Make sure the employer, employee and physician's portion is completed and sent to The Standard via email.

Filing an LTD Claim

The claim packet has multiple moving parts.

Employee

Completes the Employee's Statement.

Signs required authorization(s).

Provides information about work, condition, other benefits and income sources.

Signs and dates the form.

Physician

Employee completes Part A of the Attending Physician's Statement.

Physician completes Part B.

More than one treating physician may require more than one statement.

Physician sends the form to The Standard.

Employer

Completes the Employer's Statement.

Provides employment, earnings and coverage information requested in the packet.

Sends the completed packet to The Standard.

LTD CLAIM EMAIL

The Standard

Receives and evaluates the claim documentation.

May request additional information.

Determines whether the employee meets policy requirements for LTD benefits.

Employer Statement: Get It Right the First Time

Incomplete or inconsistent information can slow claim review.

- Verify the employee's last full day worked and disability/absence dates.
- Provide accurate job title, duties, work schedule and employment status.
- Provide requested earnings information and confirm the employer's LTD plan/waiting period.
- Report salary continuation, sick leave or other employer-paid income accurately when requested.
- Make sure coverage and premium information match your records.
- Respond promptly if The Standard requests clarification or additional documentation.

Helpful Tip

Before sending the Employer’s Statement, compare it to payroll, leave and enrollment records so the dates and earnings are consistent.

Understanding the Benefit Waiting Period

The waiting period is not the same thing as the enrollment waiting period.

30-Day Plan

LTD benefits become potentially payable after the employee has been continuously disabled for the employer-selected 30-day waiting period and all policy requirements are met.

60-Day Plan

LTD benefits become potentially payable after the employee has been continuously disabled for the employer-selected 60-day waiting period and all policy requirements are met.

90-Day Plan

LTD benefits become potentially payable after the employee has been continuously disabled for the employer-selected 90-day waiting period and all policy requirements are met.

Employer action: know which option your entity elected before counseling employees.

Premiums, Leave & School Breaks

Coverage administration continues to matter while an employee is away from work.

Premium Contributions

LTD is contributory under the policy. Coverage can end when the last period for which a required premium contribution was made ends.

Once LTD benefits are payable, The Standard waives premium for the employee's LTD insurance.

Approved Leave

The certificate contains specific continuation rules for sick leave, employer-approved temporary leave, and state/federal mandated family or medical leave.

Do not assume all leaves are treated the same.

School Breaks

If an employee ceases to be a Member because of a school break or vacation, the certificate provides for continued insurance during that period.

Return to Work & Added LTD Features

LTD is designed to support appropriate return-to-work efforts, not just replace income.

Return to Work

The policy includes a Return to Work Incentive. An employee may serve the benefit waiting period while working if the employee meets the Own Occupation disability definition.

Rehabilitation

The policy includes rehabilitation plan provisions and a reasonable accommodation expense benefit that may support approved return-to-work efforts.

Other Features

- Assisted Living Benefit
- Lifetime Security Benefit
- Survivors Benefit
- Temporary Recovery provision
- Waiver of premium while LTD benefits are payable

Common Employer Errors — and the Fix

Small administrative errors can create big delays.

Waiting too long to start the claim	Provide the packet and begin the employer portion when it appears the absence may extend into the LTD waiting period.
Incomplete Employer's Statement	Complete every applicable field and verify dates/earnings against payroll and leave records.
Assuming EOI = coverage	EOI approval, effective-date rules and Active Work requirements must all be satisfied.
Stopping or changing premiums incorrectly	Review the policy's continuation and waiver-of-premium rules before changing deductions.
Giving a medical eligibility opinion	Explain the process; let The Standard determine whether the employee meets the policy definition of disability.

Employer Scenario

Use the facts — then decide the next administrative step.

Scenario

An employee has LTD coverage and your entity elected a 60-day waiting period. The employee has been out for 35 days following surgery and does not yet have a firm return-to-work date.

What should you do?

A. Wait until day 60
B. Provide the LTD claim packet now
C. Tell the employee LTD is automatically approved

Best Answer: B

Start the claim process now. The waiting period determines when benefits may become payable; it does not mean everyone should wait until the waiting period ends before submitting the paperwork.

Employer Quick Reference

When in doubt, follow this sequence.

1 VERIFY

Coverage, eligibility, waiting period

2 PROVIDE

Current LTD claim packet

3 COMPLETE

Employer's Statement accurately

4 SUBMIT

Send employer portion promptly

5 RESPOND

Answer follow-up requests from The Standard

6 TRACK

Leave, payroll, premium and return-to-work changes

Employer role = accurate administration + timely support. The Standard determines claim eligibility.

LTD: THE EMPLOYER'S ROLE

Enroll correctly. Start claims timely. Provide accurate information.
Keep the employee informed.

1. Enrollment

Know the 31-day window, EOI process and Active Work rule.

2. Claim

Use the current LTD claim packet and complete the Employer's Statement.

3. Follow Through

Track payroll, premiums, leave status and return-to-work updates.

QUESTIONS OR NEED ASSISTANCE?

NMPSIA Benefits Team 1-800-548-3724
We're here to help with eligibility, enrollment, employer procedures, and general LTD questions.
The Standard 1-888-609-9763
For LTD claims, EOI, claim status, medical documentation, and disability determinations.
When in doubt, ask before you process.
Accurate information + timely action = a smoother experience for you and your employee.
THANK YOU!

New Mexico Public Schools Insurance Authority

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