



How To Apply For Long Term Disability Benefits

When You Need to Stop Working

By Cassie Springer Ayeni

You never thought it would happen. You thought you would work until retirement or beyond, but then along came your vestibular disorder. Now, focusing on a computer screen is a challenge; someone has to drive you to work; walking is a safety hazard; and your concentration is not what it used to be. All of these symptoms can interfere with your ability to do the material duties of your occupation, and can make an attempt to get through a workday exhausting and frustrating as you struggle to complete tasks that used to be easy for you. You see your doctor and she tells you the time has come to stop working due to your disability. Now what? How will you live without your income? Here are some options and a plan:

THERE ARE SEVERAL SOURCES FOR DISABILITY BENEFITS

Besides savings (and it is almost unheard of for someone in the prime of her working life to have sufficient savings to live decently for the rest of her days), income sources for people with disabilities include:

1. Short-term disability insurance benefits through your employer (these usually last for 6 months).
2. Long-term disability insurance benefits through your employer (these usually start after 6 months and can last until retirement age).
3. Private disability insurance plans (insurance you purchased for yourself that can last through retirement age or beyond).
4. State disability insurance (usually lasts for a year, such as through California's Employee Development Department "EDD").
5. Social Security Disability benefits (SSDI) (available after being disabled for 6 months and lasting through retirement age).
6. Workers' Compensation benefits (if your disability is due to a work-related injury).

In this article we will focus on the first two of these income sources: short- and long-term disability benefit plans offered by your employer. (*See VEDA's other articles on how to apply for SSDI.*)

Many employers offer group disability plans to their employees because the premiums are low and they can be a huge benefit to employees struck with a disability, whether short- or long-term. These benefits are usually paid by insurance companies such as Unum,

MetLife, Hartford, Principal, Standard, Cigna/Lina, Guardian, Sun Life, and others.

A complex area of law called ERISA (the Employee Retirement Income Security Act) governs these employee benefit plans, even though you apply to an insurance company for payment of the benefits. Under ERISA, there are technical rules governing timelines for the insurance company to decide whether to pay your claim. It is a good idea for you to get help with your disability application and, of course, with an appeal of any denials.

Important Tip: Even though you have a disability plan through your employer, you can still apply for all of the other disability benefits listed above. However, the benefits are usually coordinated so that you only receive a fixed percentage of your salary altogether, usually 2/3 of your previous income up to a maximum benefit per month.

YOUR DOCTOR'S ROLE

Many people with vestibular disorders have a long-standing relationship with a supportive doctor. This relationship is instrumental to getting your disability benefit claims approved. Please make sure that your doctor knows how important it is that she fills out forms promptly so that your income stream can continue while you are not working. Here are some key tips for the "Attending Physician Statements" that you submit to the insurance company.

Tip # 1: Your doctor should answer the question "why is the patient disabled now?" especially if you have been struggling to work while symptomatic for a while. Did it worsen? Have your attempts to keep working caused a decrease in your performance? Is the fatigue from managing your symptoms getting the best of you, causing you to nap during the day? Are the symptoms interfering with your ability to perform the activities of daily living, such as preparing meals? Ask your doctor to be specific and make sure this is in your medical record.

Tip # 2: One of the areas of misunderstanding with "invisible disabilities" like vestibular disorders is that a successful claim must depend on your report of "subjective" symptoms in addition to any objective tests. For the subjective symptoms to be deemed reliable by an insurance company, your doctor should point out that you are credible in your symptom reporting. When your doctor notes this, it helps prevent the insurance company from doubting your credibility, an unfortunately common reality when insurance companies are looking for a way to cut costs. A good way to keep track of these symptoms is by keeping a log to share with your doctor: when you are nauseous or have a headache or a bout with vertigo, write it down in a log with a symbol for each symptom, then bring the log to every medical

appointment. (See VEDA's [Patient Log forms](#).)

Tip # 3: If you have symptoms that can be objectively documented by testing, please get those tests done as soon as possible. For example, if you have concentration or other cognitive difficulties, ask for a referral for a neuropsychological examination, which provides objective evidence of those symptoms.

Tip # 4: Regularly schedule check-ups. Even if you have been relatively stable, it is a good idea to see your doctor at least every 6-12 months. This helps demonstrate to the insurance company that you are under the regular care of an attending physician. Insurance companies typically request medical records every 6-12 months.

Tip # 5: If you don't already have an ERISA lawyer, you might want to check in with one now. Your lawyer can work with your doctor to get the forms filled out the right way the first time.

SUBMITTING THE APPLICATION

Finally, your doctor has told you that resting without working is in the best interest of your health. You have agreed and have decided to apply for benefits. Here is a checklist:

1. Request the short- and long-term disability application forms from your Human Resources (HR) department.
2. Request a copy of the short- and long-term disability policies from HR.
3. Take a stab at filling out the application forms, but do not feel limited to the boxes on the forms. If you need extra space, include an addendum. If the question on the form doesn't really apply to you, modify the question and answer to state what needs to be said about why you are disabled.
4. Make sure that your employer knows they will have to fill out a form verifying your income and job duties.
5. If it's too overwhelming, ask an ERISA attorney to check your work to make sure that your application gives you the best shot at success.
6. If your application is denied, you should never attempt to appeal on your own without the benefit of some legal advice.

About the author: Cassie Springer Ayeni is the President and Founder of Springer Ayeni, A Professional Law Corporation, in Oakland, CA, where she focuses on ERISA disability and life insurance cases. She can be reached at cassie@benefitslaw.com or www.benefitslaw.com.

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