

Disability



2025 KPERS Employer Conference



Today's Topics

- KPERS Long-Term Disability Plan
- Reporting Disability
- Leave of Absence: Employee's Health
- Application Timeline
- Quick Overview of Disability Administrator: Davies Life and Health, Inc.

Do's and Don'ts of Disability

Do	Don't
Report disability when member has physically left work.	Don't wait until member is no longer receiving pay.
Report "last day on payroll" as the last day of the pay period member fell below 50%.	Don't report the last day on payroll as the actual pay date.
Report the hourly rate as of member's last physical day at work.	Don't report the hourly rate as of the member's last day on payroll.



KPERS Long-Term Disability Plan

Plan Sponsor



Kansas Public Employees Retirement System

Policy Number GLD2006

Effective Date January 1, 2006

Eligibility

- All active members in a covered position.
- Active Board of Regents
- Eligible employees of the University of KS Hospital Authority
- Legislators and unclassified employees on their staff
- State officers in the State's Deferred Compensation Plan and unclassified employees on their staff

Ineligible

- All employees in non-covered positions
- KPERS retirees

Administrator



Davies Life and Health Inc.

KPERS Long-Term Disability (LTD) plan provides

- Financial protection by replacing a portion of the member's income if they become disabled as the result of an **injury** or **sickness**.
- A death benefit to the member's beneficiary should the member die while the claim is pending approval or receiving long-term disability benefits.
- Continue to earn service credit.

KPERS Long-Term Disability (LTD) plan provides

- Monthly disability benefits
- Membership protection
- Basic Group Life Insurance coverage
- Optional Group Life Insurance at the current group rate

Plan Highlights

Disability Definition	<ul style="list-style-type: none">• From own occupation first 24 months• From any occupation after 24 months
Benefit Amount	<ul style="list-style-type: none">• 60% of current compensation
Benefit Minimum	<ul style="list-style-type: none">• \$100 per month
Benefit Maximum	<ul style="list-style-type: none">• \$5,000 per month
Rehabilitation Benefit	<ul style="list-style-type: none">• 24-month maximum
Limited Benefit Periods	<ul style="list-style-type: none">• None for biologically-based mental health conditions• Other mental health conditions = 24 months• Substance abuse conditions = 24 months
Maximum Benefit Period	<ul style="list-style-type: none">• Before age 60, the period remaining to age 65 or retirement, whichever occurs first• At or after age 60, a period of five years or retirement, whichever occurs first

Benefit Payments

Once approved, benefits begin once:

- Employee completes 180 continuous days of total disability

AND

- The member ceases to draw compensation from the employer.

Returning To Work



If employee attempts to return to work for up to **30 working days** during waiting period and again becomes disabled from same cause, waiting period will be **extended** by the number of days worked.

Benefit Deductions

Disability benefits will be reduced if the member receives or is eligible to receive income from any of the following sources:

- Social Security Primary Disability or Retirement benefits.
- Worker's Compensation benefits
- Railroad Retirement Board Disability or Retirement benefits
- Other disability benefits from any other source by reason of employment.
- Earnings from any form of employment.
- Earnings from eligible rehabilitative employment.

Disability Payments

EXAMPLE

\$3,000/month salary

KPERS Disability Benefit	\$1,800
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Social Security Benefit	-\$1,750
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Balance	\$50*
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KPERS will pay minimum of \$100

Benefits Termination

Payments will terminate if member

- Is no longer disabled as defined by the plan.
- Reaches end of maximum benefit period.
- Fails to provide proof of continuing disability.
- Withdraws contributions.

Benefits Termination

Payments will terminate if member

- Refuses to participate in company-approved rehabilitation plan.
- Not working to capacity in rehabilitative employment.
- Released to return to work by physician.
- Retires
- Dies

Publications

Long-Term Disability Handbook





Report Disability

DO

When the member's injury or illness has become a disabling event,

- Report the disability on the Employee page in **Employer Web Portal before** putting member on Leave of Absence.
- Illness or injury date starts the **180-day** waiting period.

Report Disability

DO



EMPLOYER

Home

Employer Inf

EMPLOYEE INFO

Enroll

Look Up

Employee Search

2

Employee SSN

Last Name

Member Type

Employment Status

First Name

Search

Clear

Search Result

Export To Excel

SSN 3	First Name	Last Name	Member Type	Start Date	Membership Date	Years of Service
XXX-XX-2023	Joe	Doe	KPERS 3	11/01/2023	11/01/2023	0

Report Disability - KBOR

DO



Welcome, yensley
EMPORIA STATE UNIVERSITY
Agency S379

EMPLOYER

Home

Employer Info

EMPLOYEE INFO

Enroll

Look Up

Report Death/Disability

Report Death/Disability

Report Death/Disability

Report Death

Report Disability

You haven't submitted it yet

SSN	Last Name	First Name	Request Type
No records to display.			

Report Disability

Do Not enter an end date or
leave of absence until
disability has been reported.

Employee Info

Doe, Joe J

XXX-XX-2023

01/15/1998

[Report Death](#)

[Report Disability.](#)



Report Disability

Step 1

Disability Info

Step 2

Pay Info

Step 3

Other Benefit Info

Step 4

Review & Submit

Step 5

Confirmation

Mailing address

15075 Wyandotte Dr

City

Olathe

State

Kansas



Zip

66062

Email

Joejdoe@emailcity.org

Phone

(785) 000-000

Date of disabling
event

07/12/2023



Next

Report Disability

Step 1

Disability Info

Step 2

Pay Info

Step 3

Other Benefit Info

Step 4

Review & Submit

Step 5

Confirmation

Is member salary or
hourly? ☐ Contract/ Salary ☒ Hourly

Hourly rate

\$29.99

Annual hours

2080

Last day physically at work

09/18/2023



Last day on payroll



☒ Still on payroll

Back

Next

Report Disability

Step 1

Disability Info

Step 2

Pay Info

Step 3

Other Benefit Info

Step 4

Review & Submit

Step 5

Confirmation

Did the member have other employment?

☐ Yes ☒ No ☐ Do not know

Has workers' compensation been filed?

☐ Yes ☒ No ☐ Do not know

Will member receive payments from any sources during the 180-day waiting period?

☒ Yes, Check all that apply ☐ No ☐ Do not know

☒ Sick or vacation leave

☒ Shared leave

☒ Short-term disability

Benefit Provider

Met Life

☐ Other

Back

Next

Report Disability

Step 1

Disability Info

Step 2

Pay Info

Step 3

Other Benefit Info

Step 4

Review & Submit

Step 5

Confirmation

Disability Info

Name Joe J Doe

SSN XXX-XX-2023

Date of birth 01/15/1998

Plan KPERS

Mailing address 15075 Wyandotte Dr

City Olathe

State Kansas

Zip Code 66062

Email Joejdoe@emailcity.org

Phone (785) 000-0001

Date of disabling event 07/12/2023

Please type your name as signature

Employer Signature

Back

Submit



Leave of Absence

Leave of Absence


Leave of Absence and End Date is not used until employee is earning less than 50% of full pay for **10 consecutive days**.

- Regular pay
- Sick and vacation leave

End date will be the first pay period that was below 50%.

Reason Code: Leave of Absence.

LEAVE OF ABSENCE
Checklist



LEAVING FOR EMPLOYEE HEALTH REASONS

Situation	Employer Checklist
Member on leave of absence is earning 50% or more of full pay*	<input type="checkbox"/> Leave member on payroll <input type="checkbox"/> Deduct KPERS contributions from member's salary <input type="checkbox"/> Deduct optional insurance premiums if member has coverage
Member on leave of absence earning less than 50% of full pay for 10 consecutive days	<input type="checkbox"/> Give member Leaving Employment Flier <input type="checkbox"/> Login to employer web portal (EWP) <input type="checkbox"/> Report disability in EWP <input type="checkbox"/> Enter end date & select " Leave of Absence " when member is no longer receiving compensation <input type="checkbox"/> Give member Optional Life Continuation form (KPERS 79-C)**
Member returns to work after leave of absence	<input type="checkbox"/> Login to EWP <input type="checkbox"/> Enter end date & select " Return to Payroll " - The system will auto-enroll

Leave of Absence

Compensation above 50% reportable to KPERS

- Salary
- Short-term disability paid by the employer

Do not report Workman's Compensation payments to KPERS.

Leave of Absence- Shared Leave

If employee uses
SHARED LEAVE,
call Fiscal Services

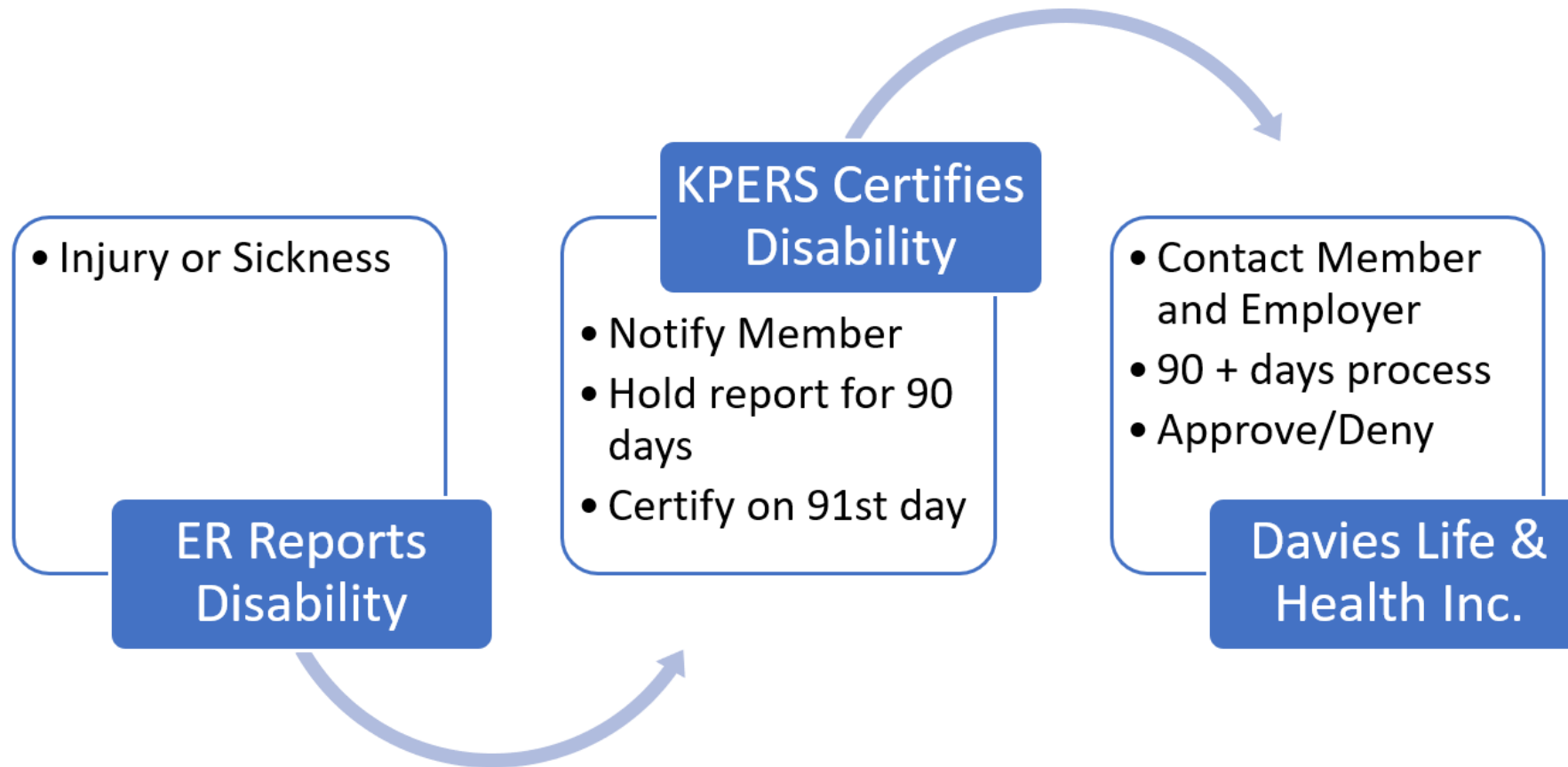
Withhold KPERS:

- Withhold KPERS if shared leave goes back to the first day member was on LOA.
- Do NOT withhold KPERS if shared leave does not go back to the first day member was on LOA.

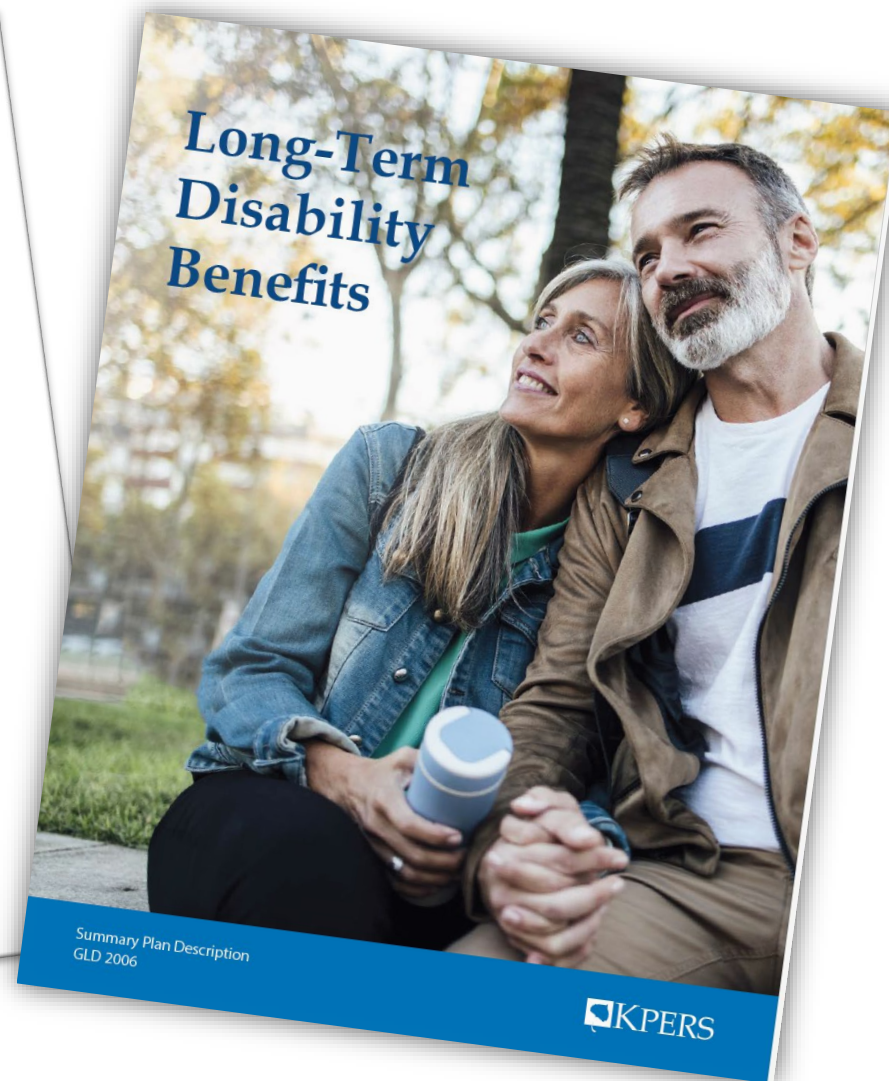
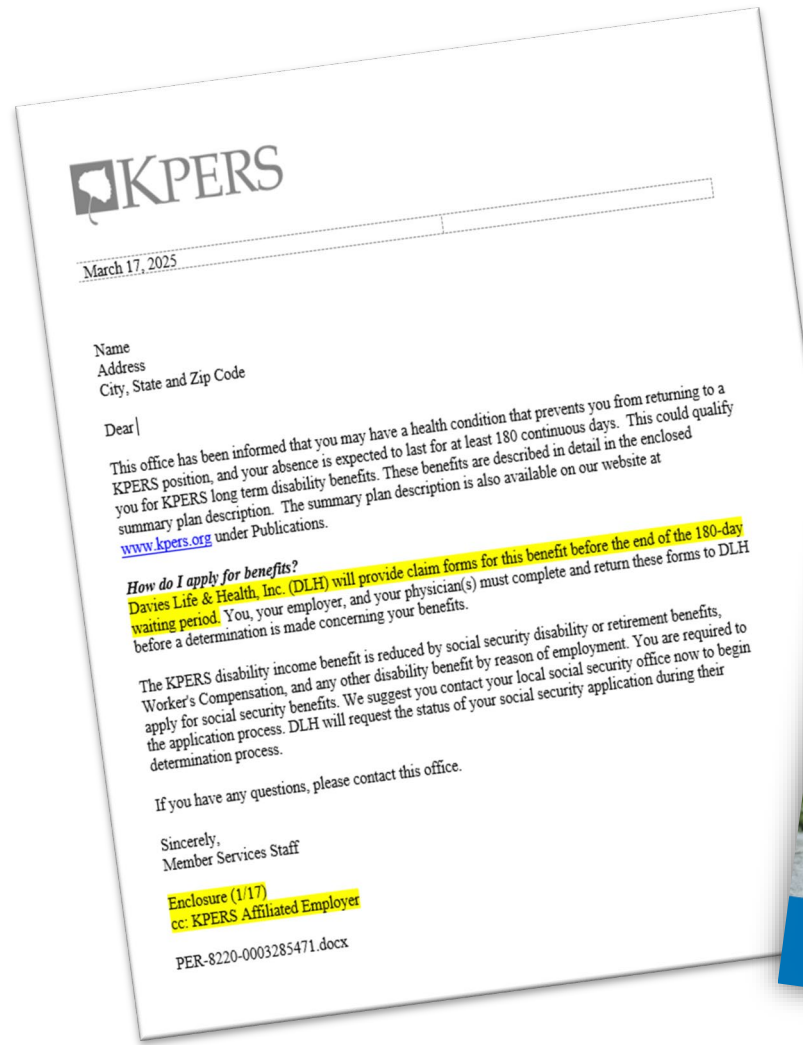


Application Timeline

180 Day Waiting Period



Application Timeline





Disability Administrator



Davies Life and Health, Inc.
1500 Main Street, Suite 1400
Springfield, Massachusetts 01115

Third Party Administrator of Disability

New Notice Claim Documentation



Information from the Member

Completed Member Statement
Signed Authorization
Financial Information about other
income
Claimant Interview



Information from the Employer

Completed Employer Statement
Job Description with Physical Demands
Other Employer Benefit Information such
as workers' compensation, short term
disability
Last day on payroll
Return to work periods
Performance issues



Information from the Physician

Completed Physician Statement
Medical Records
Restrictions and Limitations
Potential Return to Work Date

Contact Information



Toll-Free

1-888-275-5737

Email

employers@kspers.gov



Toll-Free

1-844-762-6447

Mail

**1500 Main St. Suite 400
PO Box 15189
Springfield, MA 01115-5189**

Thank You!



Questions