

Reporting your Claim Online

It's easy with MyLibertyConnection.com

It's as easy as 1-2-3 to report your disability claim online!



Visit MyLibertyConnection.com

- New users
- In the registration screen, enter Company Code: **MFRM-EE**
- Click "validate" button
- Create your username and password
- Click "submit" to enter MyLibertyConnection



Click "Report a New Claim" and answer a few simple questions.



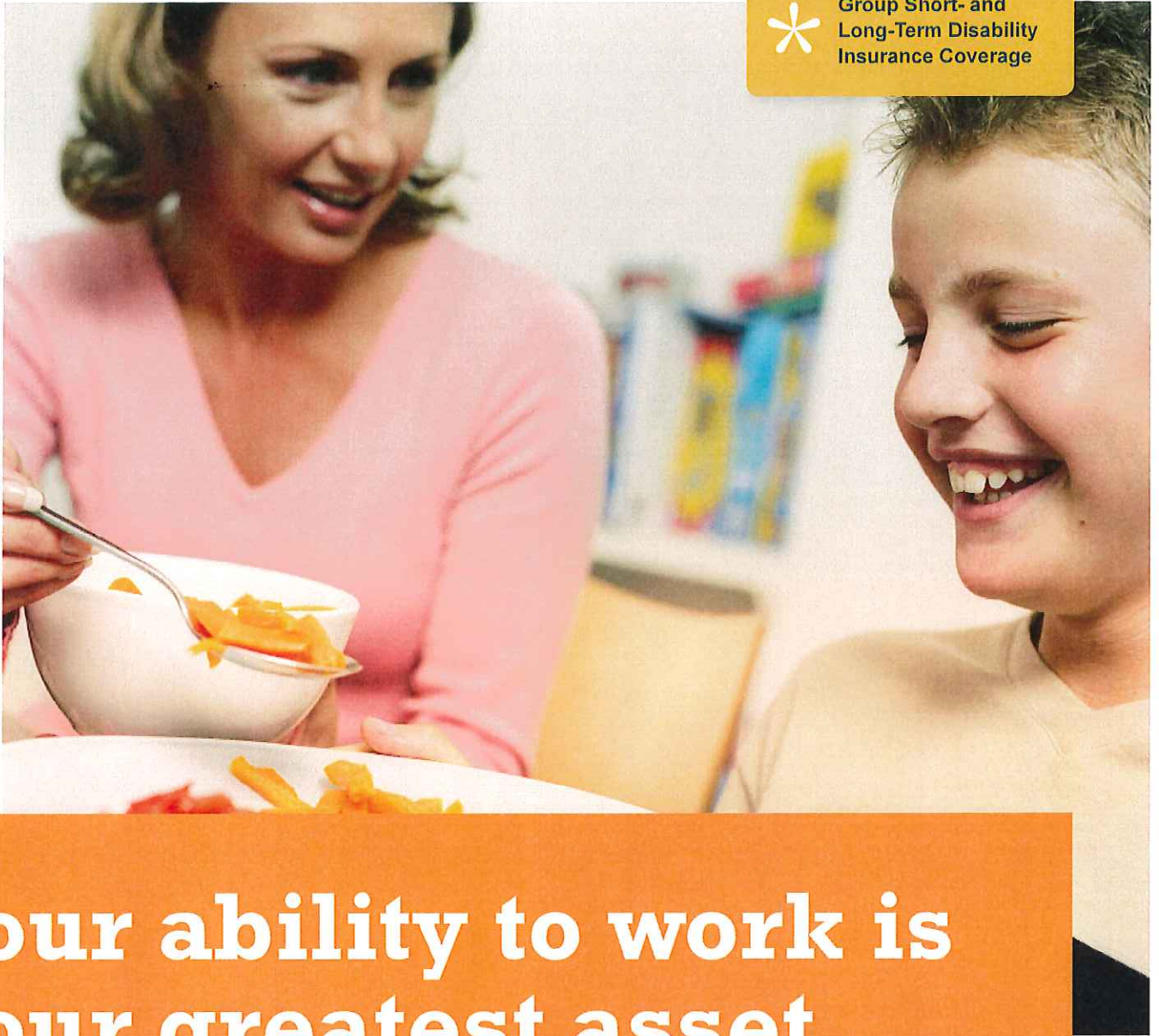
Review your answers, print your confirmation report, and send your medical authorization form to your physician.

MyLibertyConnection.com

- **Saves Time:** Takes only 5 minutes!
- **Convenient:** View and print a confirmation report.
- **Secure:** Your submission is sent securely to Liberty Mutual Insurance.

To get started, visit www.MyLibertyConnection.com or contact your HR or Benefits representative.





Group Short- and
Long-Term Disability
Insurance Coverage

Your ability to work is your greatest asset

What if your last paycheck was your *last* paycheck?

Disability is often called the “forgotten risk,” as few employees think about how they would survive financially with no earned income. The impact of a disabling illness or injury, both financially and emotionally, is devastating. While insurance may cover most medical bills, daily living expenses such as rent or mortgage, car payments, and utilities continue.



KNOW THE FACTS:

The Risk of Disability

- Over 56 million Americans, or 19% of the population, are considered disabled.¹
- In the home, a disabling injury occurs every 3 seconds.²
- In the United States, a disabling injury occurs every second.²
- Almost 25% of today's 20-year-olds will become disabled before reaching the age of 67.³

How would you pay your bills?

You may make the mistake of assuming that if you become sick or injured and are unable to work and earn a paycheck, you could rely on the following:

Social Security: Social Security disability insurance (SSDI) benefits may be available to you depending on your income and how long you have been working. There is a five-month waiting period for SSDI benefits and the Social Security Administration has very strict definitions of disability. You may qualify for benefits under a group disability insurance program, but may not be eligible for SSDI benefits. Finally, SSDI benefits may not be sufficient to cover your expenses—the average monthly benefit is only \$1,111.⁴

Workers Compensation: Workers Compensation covers only injuries and illnesses that are work-related. Close to 90% of disabling accidents and illnesses are not work related.²

Personal Savings: Do you have sufficient savings to replace your income in case you were without a paycheck for several weeks? How about several months or years? According to a recent survey, 71% of American employees live from paycheck to paycheck.⁵

How the MFRM Short- and Long-Term Disability Insurance Plan Protects You

If you suffer a disability from a covered illness or injury while insured by the MFRM short- and long-term disability insurance program, you will be eligible to receive monetary benefits to replace a portion of your lost income.

1. U.S. Census Bureau, December 2010
2. National Safety Council, Injury Facts, 2008 Edition
3. Social Security Administration Fact Sheet, 2012
4. Fast Facts & Figures About Social Security, 2008
5. American Payroll Association, "Getting Paid in America" Survey, 2008

TO LEARN MORE:

See **MFRM's enrollment materials** or contact your **Human Resources Department**





Reporting Your Disability Claim

The **MFRM** Short-Term Disability Policy is issued by Liberty Life Assurance Company of Boston, a member of the Liberty Mutual Group.

Liberty offers employees direct access to claims resources and information. You can easily report a claim and check the status of your claim through Liberty's dedicated secure website or by telephone. Please visit: www.mylibertyconnection.com to access employee resources and online tools, as referenced below.

When Do I Report a Claim?

Liberty is available 24 hours a day, 7 days a week. You may report a claim up to 30 days in advance of a planned disability absence (such as childbirth or prescheduled surgery) OR as soon as you are aware that you will be disabled due to illness or injury for 7 or more calendar days.

How Do I Report a Claim?

1. Contact your supervisor to report your absence.
2. Print this document, sign and date the Authorization to Release Information section below, and leave with your physician or medical care provider at your next visit.

Note: Liberty requires your physician to provide information about your medical condition. If this information cannot be obtained, benefits may be delayed.

3. Report your claim via www.mylibertyconnection.com. First time users must register using Company Code **MFRM-EE**.

Please have the following information available when you report your claim:

- Your physician or medical care provider's name, address, fax and telephone numbers
- Your manager's name, telephone number and e-mail address
- Reason you are out of work (diagnosis/symptoms)
- Your last day worked, first day absent from work, and anticipated return to work date

Or you can call **1-888-404-5096** and speak with an Intake Specialist to report your claim.

4. Keep a record of your claim number. Reporting your claim online provides the added convenience of printing a claim report which includes your claim number and a summary of your claim details.
5. You may securely check the status of your claim online at www.mylibertyconnection.com or by calling your Case Manager at **1-800-291-0112**.

Authorization to Release Information

I authorize any health care provider having information about my physical or mental condition and treatment to give all information to the Company in the Liberty Mutual Group of companies and/or Plan Sponsor to which I am submitting a claim. I understand the information obtained by this Authorization will be used to determine eligibility for benefits. Information obtained under this Authorization or directly from me may be released to persons/organizations providing medical treatment or claim management/advisory services in connection with my claim, including Employee Assistance Programs (EAP), or other similar disease management/assistance programs providing services to the Plan Sponsor and/or the Company. This Authorization is valid for two years from the date appearing below with my signature. I have the right to revoke this Authorization by notifying the Company. I know that I may request a copy of the Authorization and I agree that a photographic copy shall be as valid as the original.

Employee Signature

Date

Print Employee Name

Group products and services are offered by Liberty Life Assurance Company of Boston, a member of Liberty Mutual Group.