

# disability benefit

This guide has been created to help you navigate the process of applying for a disability benefit from OPERS. Within this document you will find a list of publications that have been sent with this guide as well as a list of the forms and documentation necessary for your disability benefit application to be processed. You will also find a section describing what to expect during the application process and information regarding counseling sessions available to you during this time. Please keep this guide for future reference. Information about the disability application process, as well as forms and applications also are available at [opers.org](http://opers.org)

## what you will find in this packet

### Educational publications

- **Disability Benefits leaflet** - contains an overview of disability benefit eligibility requirements, the application process, calculation of disability benefits, and continuing re-examination and termination
- **Health Care Coverage Guide** - an overview of the coverage available under the OPERS health care plan as well as eligibility requirements and frequently asked questions

### Forms and other required documentation

**The following forms are included within this packet and must be completed and returned to us for your disability benefit application to be processed:**

- **Disability Benefit Application (DR-1)** - signed, dated and notarized
- **Report of Physician (DR-APS)** you may also include supporting medical documentation of your disabling condition

**The following documentation is required to process your disability benefit application:**

- **Report of Employer for Disability Benefit Applicant (DR-4)** with your job description (upon receipt of your application, this form will be sent by OPERS to your last public employer for completion)
- **Proof of date of birth** (explanation of acceptable documents is included in this packet)

**The following documents will be needed if your disability benefit application is approved:**

- **Designation of Beneficiary for Lump Sum Death Benefit (DBO-3T)**
- **Proof of application for Social Security Disability Insurance Benefits (SSDI)** (an explanation regarding this can be found in the Disability Benefits booklet)
- **Health Care Coverage Application (HC-1G)**
- **Proof of date of birth for eligible dependents** (explanation of acceptable documents is included in this packet)
- **Copy of marriage certificate** (if applicable for health care)
- **Copy of proof of Medicare A and B** for you and your spouse (if applicable for health care)



**Forms and required documentation**  
(continued)

*The following forms and documents may be applicable to your personal situation. If you want to purchase the service credit for which you are eligible, the purchase must be made with a one-time lump sum payment. Contact us with questions.*

- Certification of Unreported Service form (for the purchase of service credit due to unreported service)
- Certification of Federal, Out of State or Municipal Service form (for the purchase of additional service credit)
- Military Discharge (DD-214) (for the purchase of military service)
- Certification of Leave of Absence Form (which states that the leave was approved, the dates of the leave and the amount of money that you would have earned during the leave period)
- Bureau of Workers' Compensation (BWC) Claim number (for the purpose of purchasing BWC credit if you have been paid by BWC during public employment)

## what to expect during the disability benefit application process

**Confirmation letter**

We will most likely be receiving completed forms from you, your employer and your physician. You have **60 days** from when we receive the Disability Benefit Application (DR-1) to have the remainder of the forms and documentation submitted. We will send you a confirmation letter after we have received all your required documentation: *Disability Benefit Application (DR-1)*, *Report of Physician (DR-APS)*, *Report of Employer for Disability Benefit Applicant (DR-4)*, job description and proof of your date of birth.

**Please note** - If we do not receive your application and required forms within 60 days of receipt of your *Disability Benefit Application (DR-1)*, the application on file will be voided and you will be required to submit a new DR-1 and the other required forms to meet eligibility requirements. You will also be subject to the disability rules and provisions that are in effect at the time OPERS receives your application.

**Benefit Processing**

The estimated time frame for processing a disability benefit application is approximately 90-120 days from the date that we receive all required forms and documentation.

- By applying for a disability benefit, you will be subject to a medical evaluation conducted by OPERS' third party administrator who will evaluate your condition(s) and the medical information submitted with your application in order to render an opinion as to whether you are or are not considered to be disabled from the duties of your most recent public employment position. OPERS' third party administrator may determine that additional information or an in-person Independent Medical/Psychiatric Evaluation (IME/IPE) is necessary.
- OPERS pays the fee for this medical evaluation including the IME/IPE, if necessary. The IME/IPE is performed by a licensed and credentialed medical provider (IME/IPE Examiner) who performs an independent evaluation of the disabling condition(s). To ensure a complete and accurate evaluation process, the following key components must be available to the IME/IPE examiner: 1) history provided by the claimant, 2) medical records and diagnostic studies, and 3) physical or mental status evaluation.
- It is very important that all applicable medical records are provided to our third party administrator prior to the examination date, so that these medical records can be sent to the IME/IPE Examiner in advance of the appointment. As an applicant for disability benefits, it is your responsibility to make sure that medical records are submitted. Providing a complete medical claim file is necessary to ensure an accurate decision is made regarding your application. After the medical evaluation is complete, our third party administrator will provide a recommendation to OPERS regarding the disability application. An OPERS medical consultant reviews the recommendation from our third party administrator and then makes a final recommendation to the OPERS Board.

**Benefit Processing (continued)**

- Upon approval of your application, we will request certification of your final day of compensation from your employer. You must terminate public employment by the end of the month following the month of the approval decision. If you do not terminate public employment within this time frame, your application will be voided and your disability benefit will not be paid and will be subject to forfeiture. If eligible, you will be required to re-apply for a disability benefit.
- Assuming you are otherwise eligible and that your application is approved, your disability benefit will be effective on the later of: 1) the first of the month following your final date of compensation or 2) attainment of eligibility.
- Your first benefit payment will be retroactive to the effective date of your disability benefit. This effective date will not be established until your application has been approved.
- If your disability benefit application is approved, you may be required to undergo continued treatment and/or annual medical review. You will also be provided with the opportunity to elect to participate in rehabilitative services. We will notify you if you are subject to any of these requirements.

**Impact of re-employment**

- **Changing employers or dual employment with any public employer during the application process will significantly impact the processing of your application.**
- **Returning to public employment or service as an elective official, while receiving a disability benefit is strictly prohibited and will result in the termination of the disability benefit.**
- If you wish to undertake employment in the private sector while you are receiving disability benefits from OPERS, you should notify OPERS before you begin employment for a determination as to whether the employment will affect your continued eligibility to receive disability benefits.

You should complete and submit a *Request for Employment Review for a Disability Benefit Recipient (DR-2)* along with a job description for the position you wish to undertake.

**Health care information**

If you are an OPERS disability recipient with a benefit effective date on or after Jan. 1, 2014, you will have access to health care coverage for the first five years of your disability. Health care coverage will be based on continued eligibility and receipt of a disability benefit during that time. The health care coverage will continue past the first five years only if: **1)** you meet age and service health care requirements or **2)** you become enrolled in Medicare due to a disability, prior to the end of the five-year period, and before reaching age 65. Please refer to the *OPERS Health Care Coverage Guide*, contained within this packet, for more detailed information.

Once your disability benefit application is approved, you will receive a health care confirmation letter confirming the coverage that you have chosen and the effective date of coverage. Health care coverage is effective on the later of: **1)** the first day of the month in which OPERS receives your disability benefit application or **2)** the effective date of your disability benefit.

- Keep your health care confirmation letter until you receive your health care identification cards. If you enroll in our health care plan, your medical and prescription cards will be mailed to you by your plan administrators within two weeks after your first monthly benefit has been paid.
- Please hold any medical claims until you receive your health care cards.
- We offer optional vision and dental insurance plans.
- If you need prescriptions after your health care coverage is effective, but prior to receiving your health care ID cards, please pay for them yourself, and request reimbursement from Express Scripts. Prescriptions filled within the first 60 days of your health care effective date are reimbursed minus the co-pay amount, subject to coverage limitations. You will receive additional information regarding reimbursement after your first payment is released.

## let us help

### One-on-one counseling sessions

Applying for a disability benefit is a detailed process. Our counselors are here to help you understand the process and ensure you make a successful transition.

We offer a number of options for scheduling a counseling session:

- A counseling session at our office; walk-ins are welcome, but appointments are preferred.
- A counseling session by telephone from your home or office.

**Please keep the following points in mind when scheduling a counseling session to discuss the disability benefit application process:**

- If you are married, you may wish to have your spouse accompany you when filing your benefit application.
- Bring copies of birth certificates for yourself, your spouse, your designated beneficiary(ies) and any dependents; marriage records; and military records (if applicable).
- We will require your written authorization to release your specific account information to your spouse, as required by Ohio retirement law.

## visit OPERS

### Visitor Parking

- Free parking is available within our garage. Visitors may enter using either the Rich Street entrance or the Town Street entrance, both at the east end of the building.
- There is also street parking available at two-hour meters along both Rich and Town streets.

### OPERS Board of Trustees

The 11-member OPERS Board of Trustees is responsible for the administration and management of OPERS. Seven of the 11 members are elected by the groups that they represent (i.e., college and university non-teaching employees, state, county, municipal, and miscellaneous employees, and retirees); the Director of the Department of Administrative Services for the State of Ohio is a statutory member, and three members are investment experts appointed by the Governor, the Treasurer of State, and jointly by the Speaker of the Ohio House of Representatives and the President of the Ohio Senate.

**For a current listing of OPERS Board members, please visit [www.opers.org](http://www.opers.org)**



Ohio Public Employees  
Retirement System  
277 East Town Street  
Columbus, Ohio 43215