

NH Paid Family and Medical Leave Claims and Appeal Process

We make it easier for you...

Administration of paid family and medical leave insurance can be challenging. MetLife makes it easier for you with our expertise in claim and absence management, our experienced professionals and our exceptional service. We'll guide you and your workers through the claims process so that you can keep your focus on your business.

Submission and Initial Evaluation

0-60 calendar days prior to leave

- Worker submits a claim online or by phone, fax or US mail
- Within 5 days of receiving the claim:
 - We send the worker an acknowledgment package with certifications and required forms, as needed
 - We send an email to the employer requesting information required to support the claim
- Within 5 days of receipt of employer information, we review the claim facts including available time and applicable regulations to determine whether the worker is eligible
 - We provide notice to the worker that the claim is under review
- Within 10 days of requesting information, if we do not receive all information needed to evaluate the claim, we will reach out to the worker by phone and writing detailing the missing information and deadlines

Initial Decision

Within 5 calendar days of receiving all materials

- We review the leave documents including certifications based on the leave reasons, such as:
 - Healthcare provider statement
 - Birth certificates
 - Military orders
- We communicate the claim decision to the worker by phone and follow up by email or US mail, based on permission and preference
- We notify the employer of all decisions
- Our claims representatives will then:
 - Develop action plans for ongoing claim management
 - Create a timeline with leave duration and expected return to work date
 - Review intermittent or reduced leave schedule, if applicable
 - Coordinate with other employer sponsored benefits, as appropriate
 - Review next steps with the worker

Ongoing Service and Follow Up

Benefit payments within 9 calendar days of decision

- Benefits can be received via check or electronic fund transfer
- Benefits are disbursed weekly
- We update the action plan as appropriate to support continuous, intermittent, or reduced-schedule leaves
- We obtain updated medical or relevant information, as needed
- We communicate all claim and leave decisions by phone, mail and online
- We coordinate NH PFML with any employer sponsored benefits, as appropriate
 - We communicate to the worker and the employer the number of payable weeks remaining when making each benefit payment

Claim and Leave Resolution

- We help coordinate NH PFML with return-to-work accommodations, where appropriate
- If benefits are overpaid, we advise by phone and letter to coordinate repayment
- We advise by phone and letter when the claim is closed, resolved, exhausted or if other benefits apply

We make it easier for you...

If a NH PFML claim is denied, we will guide you and your workers through the appeal process so that you can keep your focus on your business.

