



Reporting Your Leave for Disability and/or FMLA

Employee

The TreeHouse Foods Short-Term Disability Plan and Family Medical Leave policy is sponsored in partnership with Sedgwick. Administrative services for these plans are provided by Sedgwick.

The disability management procedures give you the information and support you need quickly and efficiently should you become disabled. Our partnership with Sedgwick offers you direct access to the leave resources as well as state-of-the-art technology and medical protocols.

You can call 24 hours a day, 7 days a week.

Follow the steps below.

When do I report a claim and/or leave request?

Report a claim or leave request if you believe that you are eligible for Family Medical Leave and/or Short-Term Disability benefits for reasons such as:

- Your own illness or injury;
- Caring for an immediate family member; or
- Caring for a newborn, foster, or adopted child.

If you have questions about your eligibility for Family Medical Leave or Short-Term Disability benefits, please call Sedgwick, TreeHouse Foods FMLA and Disability claims administrator at 1-844-422-7967.

How do I report a leave?

1. Contact your supervisor and/or HR representative to report your absence.
2. See your physician or medical care provider.
3. Call the Sedgwick toll-free number 1-844-422-7967 or submit your leave via Sedgwick's website: <https://claimlookup.com/TreeHouse>. You can also check the status of your leave request at <https://claimlookup.com/TreeHouse>

What will I be asked by Sedgwick?

You will be asked to provide the following information:

1. Your name and last 4 of your Social Security Number and date of birth
2. Your complete address and phone number
3. Your physician or medical care provider's name and phone number
4. Your last day worked and first day absent from work because of the medical condition

What will I receive from Sedgwick?

- Acknowledgement Letter
- Medical Certification Form – Physician must complete and return to Sedgwick
- Rights and Responsibilities
- Medical Release of Information (STD only)

What if I do not complete the Medical Certification Form for my FMLA only leave?

You will have 20 days from your requested absence date to complete the forms. If you fail to complete the form within the expected timeframe, your leave will be denied and your absence may not be job protected.

Am I required to take paid leave (i.e. vacation) during unpaid FMLA?

To the extent permitted by applicable law or any applicable collective bargaining agreement, you will be required to exhaust any available paid time off during your FMLA absence. This means that you will receive such paid leave and it will also be considered protected FMLA leave and counted against your FMLA leave entitlement.

What do I need to do when I am ready to return to work?

Prior to returning to work, you should contact your supervisor and/or local HR department and Sedgwick with your expected return to work date. Your work location may require you to complete a fitness for duty exam. When you actually return to work you should call Sedgwick to confirm your return to work.

Who do I contact with questions?

Please contact Sedgwick for all questions regarding your claim and/or leave at 1-844-422-7967.

Sedgwick
PO Box 14424
Lexington, KY 40512-4424
Phone: 844-422-7967
Hours: 7 AM-8:30 PM CST
Online: <https://claimlookup.com/TreeHouse>
Fax: 866-315-0607



TreeHouse Leave and Disability FAQ's

Employee

Contact Information: TreeHouse Foods Leave and Disability Service Center, administered by Sedgwick

Sedgwick
P.O. Box 14424
Lexington, KY 40512-4424

Phone: (844) 422-7967
Fax: (866) 315-0607
Email: claiminfo@sedgwickcms.com
viaOne Express link: www.claimlookup.com/TreeHouse

Types of Leaves that may be available to you:

Managed by Sedgwick

- Family Medical Leave Act (FMLA)
- Short-Term Disability Leave (STD) Non-ERISA
- State Leaves
- Military Leaves

Managed by MetLife

- Long-Term Disability Leave (LTD)
- New York DBL
- NY PFL
- New Jersey TDB

Managed by the State

- California (SDI and PFL)
- Rhode Island (Disability and FLI)
- New Jersey FLI

Contact Information: Long Term Disability, administered by MetLife

MetLife
P.O. Box 14590
Lexington, KY 40511

When to Contact your HR Department

- As soon as you anticipate a leave or at the start your leave
- For intermittent absences
- When you are ready to return to work
- If your return to work date changes
- If you have a restriction upon returning to work
- If you have had a baby and need to add the baby to your benefit coverage (within 31 days of the birth)
- For permanent changes to your personal information, i.e. address
- To pay premiums for benefits
- To request PTO (vacation, sick or emergency days) pay when not receiving disability pay

General

1. How do I start my claim?

You can open a claim by contacting Sedgwick (our 3rd party claims administrator).

2. How do I complete and submit my application for a leave?

You can contact Sedgwick and you will receive an Initial Packet via US mail or email, if you opt in to have the packet sent via email. The Initial Packet will include all of the forms you need to have your provider or your family member's provider complete. Forms can also be faxed to your provider at your request.

Complete and send the Release of Information (ROI) Form and the completed Health Care Certification Form to Sedgwick (see contact information above).

Once Sedgwick obtains the information from you as specified above, Sedgwick will inform you within 5 business days whether or not your leave will be designated as leave under the FMLA and/or State Leave law and/or Disability Leave .

3. How can the SCR help me with my claim?

The SCR provides information to you to start your claim, answers questions about the status of your claim, and other basic claim, policy and process information.

4. How quickly will examiners return voice mail or email messages?

Within 1 business day.

5. How do I change my contact information?

Contact your local HR department to update your contact information if it is a permanent change. That information will be shared with Sedgwick once the HR update is complete. If you have a temporary change in address due to your leave, contact Sedgwick with your new, temporary information.

6. Who do I call if I have questions about my Health and Welfare Benefits or a copy of the FMLA or Short-Term Disability Policy?

Contact your local HR department.

7. If my treatment provider requires payment for completing disability forms or providing medical records, who is responsible for making these payments?

You are responsible for any payment required for form completion or medical records.

8. What happens to my health, life and welfare deductions while I am receiving disability benefits?

If you are on unpaid FMLA leave, you are still responsible for all benefit premium payments. If you are unpaid for more than 30 days, you must contact your HR Department to make arrangements to continue to make your share of the premium payments on your health insurance to maintain health benefits while you are on leave. If you are on unpaid leave for less than 30 days, you can make up missed payments through payroll deduction when you return to work. If you are on paid leave, all benefit deductions will continue. Any missed payments will be deducted from your paychecks upon your return to work.

9. What happens if I experience a qualified status change (also known as a “life event”)?

Contact your local HR department to make this change within 31 days.

10. How do I enroll my newborn into a healthcare plan?

Contact your local HR department to discuss how to add your child to your health coverage (including medical, dental and vision benefits) within 31 days of the birth. Reporting the birth of your child to Sedgwick or Blue Cross Blue Shield of Illinois, does not add the newborn to your health coverage.

Family Medical Leave Act (FMLA)

1. What is the difference between FMLA and disability?

FMLA is unpaid and offers job protection. Disability is paid but does not offer job protection. The disability claim may be job protected if FMLA is approved concurrently with the disability claim.

2. Does FMLA require me to take my time continuously?

Depending on the reason for the leave and documentation provided, you may be able to take FMLA on an intermittent basis.

3. Do I need to report an intermittent absence?

Yes. Report the absence within 3 business days of the occurrence and if it meets the frequency and duration guidelines certified by your provider, the absence will be approved. If Sedgwick has questions about your absence or needs additional information before your absence can be approved, you will be contacted by your leave specialist within 2 business days of your reported absence.

4. How do I report my intermittent time off?

If you have been approved for an intermittent leave, you are required to report all intermittent absences whether full or partial days by calling Sedgwick’s Absence Reporting Line at **(844) 422-7967** option 2 and say “Absence” or press option 2.

- Your intermittent absence must be reported within 3 business days of the absence.
- You are also required to report your intermittent absences according to your attendance policy and following your department’s regular call-in procedure for such absences.

5. If both my spouse and I work for TreeHouse, are we entitled to 12 weeks of FMLA each, or do we have to split the 12 weeks?

If the FMLA is taken to bond with a child or to care for a parent, you will need to split the 12 weeks or the remaining balance of FMLA (if any time has been used prior to the referenced case types). If FMLA is taken for a serious health condition of your own or to care for a family member other than your parent, you will each have a full bank of FMLA to use.

6. Will I receive pay while I am on an FMLA leave?

To the extent permitted by applicable law or any applicable collective bargaining agreement, you will be required to exhaust any available paid time off during your FMLA absence. Please contact your local HR department for additional information.

7. If my FMLA claim is denied, can I appeal? Can I appeal the denial of my FMLA case?

No, FMLA does not allow for appeals.

Short-Term Disability (STD)

1. Who is eligible for disability benefits?

Disability coverage is available to most full-time employees. Contact your local HR department to determine whether disability benefits are available to you.

2. How can I obtain a copy of the disability policy?

Contact your local HR department.

3. Who can report a disability claim?

You, or your local HR manager, may report a claim on your behalf by contacting Sedgwick.

4. How much time do I have to report a disability claim?

No later than the 30th calendar day of absence is considered timely reporting of a disability claim.

5. After I call to report an absence, will I receive a call or anything in writing?

Your disability specialist will contact you within 2 business days to explain your benefits, the claim process and what actions you must take to be considered for benefits. Your disability specialist will contact you to:

- follow-up on requested medical information/records/forms
- update you on your claim status
- ask for an update on your condition and return to work status.

You will also receive your initial packet, which contains additional information and instructions regarding your claim.

- An “Authorization for Release of Protected Health Information” form is a document that you must sign the authorization to give your provider permission to release medical information to this office for consideration of STD benefits.
- An Attending Physician’s Statement (APS) is a form for your treating provider to complete that asks questions about the provider’s assessment, treatment, prognosis and your functional capacity during the period you are off work.

If you are enrolled in text messages, you will also receive a text message to confirm receipt of your claim.

6. What is a waiting period?

A waiting period is the applicable period that must be satisfied prior to receiving disability benefits. See the STD Policy for more information.

- Hourly employees have a 7-day waiting period for illness, no waiting period for injury, hospitalization or outpatient surgery.
- Salaried exempt and salaried non-exempt have a 7-day waiting period.

7. What day is considered to be the start of my leave?

The first full-day of absence is considered the first day of your leave.

8. What type of medical information is needed?

Objective medical documentation must be provided to support both the medical condition and actual limitation(s) caused by the medical condition, as determined by the Plan. Examples include x-rays, MRI or CAT scan results, blood test results; items that have definitive results.

9. When is my medical information due?

Initial Determinations: Information to support your disability and concurrent leave of absence is due 20 calendar days from the date that your claim is reported or the first day absent (FDA), whichever gives you more time. The date that your claim is reported or the FDA is considered day zero.

Ongoing Determinations/Extensions: Updated medical information is needed if you continue to be disabled after your ongoing approval through date. Ongoing information is due 13 calendar days from the last approved date which is day zero.

10. Why should I sign the “Authorization for Release of Protected Health Information” form?

Under the guidelines of the Health Information Portability and Accountability Act (HIPAA), your treatment provider must have your permission to release any information to the disability specialist relating to your illness. While your disability plan is not a covered health plan under the HIPAA rules, physicians generally require this HIPAA compliant form before they will release your medical

information. You provide that permission by signing this form. If your disability specialist does not receive medical information to support your claim, it will be denied. Your information will remain confidential and your privacy will be protected.

11. What is the impact to my disability benefit if medical information is not received timely?

It is your responsibility to ensure that medical information is submitted timely. If your disability specialist does not receive your information timely, your claim may be denied or terminated and you may not receive STD benefits payments and/or leave approval.

12. How long before a benefit decision be made?

A decision is usually made within 3-4 business days of Sedgwick receiving all necessary medical information.

13. How will I know the status of my claim?

Your disability specialist will make one attempt to call you to notify you of your claim decision. If you are enrolled in text messages, you will receive your approval notice via text message instead of a phone call. In addition, you will receive a letter informing you of your claim decision. You can check the status of your claim by calling Sedgwick and using the automated voice response system or by speaking with a SCR. You can also log into viaOne Express (vOE), Sedgwick's claim system.

14. What happens once my disability benefits have been approved?

Once your disability specialist approves your claim, you must continue to remain compliant with the requirements of the disability plan. This includes remaining under the care of an appropriate treatment provider, being available for contact, timely submission of updated medical information that continues to support your absence, and updating Sedgwick and your HR department regarding your estimated and actual return to work date. Remember that if you are eligible and entitled, your disability benefits will run concurrently with Federal and State leaves of absence for your own condition.

15. What is the disability period for the birth of a child?

You will be considered disabled for 6 weeks of absence for a vaginal delivery and 8 weeks for a cesarean delivery, beginning with the date of delivery, absent any unusual circumstances or complications. Use of STD and leave for any reason previous to your delivery may impact your STD and leave balance available after you deliver. When your STD approval ends, you may qualify for additional time off for unpaid bonding time. Be aware that you may not be entitled to job protection once you have exhausted available FMLA or State leave.

16. If my STD claim is denied what are my options?

You have 180 calendar days from when you receive the denial letter to file a written appeal and to provide additional information with that appeal. An appeal form is included in your denial letter for this purpose but you are not required to use the form, you can write a letter stating that you would like to appeal your claim, including your name and claim number. An appeal specialist will complete a separate review of the claim and make a benefit decision within 45 days of our receipt of your appeal request. There is one level of appeal.

17. If my claim is denied how can I obtain a copy of my disability file?

You may request, in writing, a copy of your disability file from Sedgwick. Mail or fax your request to Sedgwick (see contact information above).

18. When and how will I receive my disability benefits?

Once disability benefits are approved, you will be paid by TreeHouse Foods on your normal payroll schedule.

19. How is my disability rate determined?

Your disability rate is determined by your plan details. Contact your local HR department or Sedgwick to determine your plan details.

20. Is my disability benefit taxable and will the benefit show on my W-2?

Yes, the benefit is taxable. Your regular W-2 will include your benefit; you will not receive a W-2 from Sedgwick.

21. If I'm eligible for other state leaves/benefits, who takes care of verifying my eligibility and making sure I'm signed up for those benefits?

- a. California: Apply for California State Disability Insurance (SDI). Contact the Employment Development Department (EDD) at 800-480-3287 or go to www.edd.ca.gov to apply and determine if you are eligible.
- b. New York: MetLife will manage your benefits on behalf of the state of NY and Paid Family Leave.
- c. New Jersey: MetLife will manage you benefits on behalf of the state of NJ.
- d. Rhode Island: Apply for TDI from the State of Rhode Island. Contact the Rhode Island Department of Labor and Training at 401-462-8420 or go online to <http://www.dlt.ri.gov/tdi> for more information.

Note: To receive the full disability amount to which you are entitled, you must apply for your state benefits. Any company disability benefit payable is offset by the benefits you are eligible for under the state program regardless of if you actually apply.

22. Where do I send the California State EDD form to for the employer information to be completed?

Send to your local HR department.

23. When will I receive my state benefits and who will pay my state benefits?

State benefits may pay on a different schedule.

- a. California: You will receive your compensation directly from the state of California.
- b. New York: You will receive your compensation directly MetLife.
- c. New Jersey: You will receive your compensation directly MetLife.
- d. Rhode Island: You will receive your compensation directly from the state of Rhode Island either in the form of direct deposit or electronic payment card.

24. Can I receive Workers' Compensation (WC) Benefits and disability benefits at the same time?

No.

25. How do I file/report a WC Claim?

Contact your local HR department.

26. What happens if I become disabled again?

Immediately contact Sedgwick to advise you on next steps about additional disability or leave time.

Return to Work

1. What do I do when I'm ready to return to work?

You should contact your disability specialist and your local HR department to inform both of your expected return to work date.

2. Do I need a release to return to work from my provider to be accepted back to work?

Yes, have a written release/RTW form with you when you return to work to give to your supervisor and/or local HR department.

3. What do I do if I need to return to work with an accommodation?

When your provider indicates you are able to return to work with restrictions, you must provide a copy of those restrictions (with appropriate medical information) to your disability specialist. Your disability specialist will work with you, your local HR and your medical provider, as needed, to facilitate your return to work.

4. What happens when I am unable to return to work when I originally planned?

Immediately contact your disability specialist and your local HR department to provide your new expected return to work date. You must provide updated medical information to support your extended absence.

5. What happens if I am unable to RTW at the exhaustion of my disability claim?

If you are enrolled in a Long Term Disability (LTD) program, Sedgwick will work with MetLife as your STD claim nears the end of your benefit period to transition to LTD. If you are not enrolled in LTD, benefits will exhaust.

Transitioning to Long-Term Disability (LTD)

1. What happens when I exhaust my short-term disability?

Sedgwick will contact MetLife on your behalf to begin your Long Term Disability (LTD) application.

2. What happens to my benefits at TreeHouse?

Your benefits will end the day you exhaust STD. You will be offered COBRA benefits through TaxSaver and the ability to port and convert your life insurance through MetLife.

3. Does my employment terminate?

Whether and when you are replaced in your position and/or terminated from employment during LTD will be determined on a case-by-case basis.