

Your Claim and the Appeals Committee

An important feature of the Integrated Disability Management (IDM) program offered by Fairfax County Public Schools (FCPS) is the opportunity to appeal a decision made by the program administrator to an Appeals Committee.

The purpose of this brochure is to summarize the process for an employee's appearance before the Appeals Committee. It is not a legal document but is intended only to provide information for FCPS employees. The appeals process is detailed in the "FCPS 2004 Integrated Disability Management Program" handbook. If there is any conflict between the information contained in this brochure and the provisions described in the handbook, the handbook will govern.



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Fairfax County Public Schools

Your Short-Term Disability Claim and the Appeals Process

**Department of Human Resources
Office of Benefit Services
Disability & Leaves Unit**



The Appeals Committee

The Appeals Committee is a group of your peers. They represent you and all Fairfax County Public Schools employees. Five employee representatives from the Employee Advisory Committee on Benefits (EACB) are elected in September each year to serve during that school year. The disability and leaves coordinator from the Office of Benefit Services chairs the committee as a non-voting member.

Your Appeal

You may request a hearing before the Committee if your short-term disability (STD) claim has been denied by the program administrator and your appeal of the denied claim to the program administrator also has been denied.


Your appeal must:

- ◆ be in writing
- ◆ include any additional medical evidence not previously provided
- ◆ include the reasons why you believe the decision of the program administrator is incorrect
- ◆ include the Integrated Disability Management (IDM) Plan provision that you think was not followed.

The Committee will receive a copy of your entire medical file from the program administrator. Each Committee member will individually review the file to determine whether or not you were treated fairly by the program administrator. The Committee will verify if your file contains a medical diagnosis, if testing was required, if a treatment plan was prescribed and followed, and what specific restrictions prevented you from working.

The Committee Hearing

The disability and leaves coordinator works with the committee and with you to determine a date for your



hearing. If you have returned to work pending the result of your appeal, you are given time off with pay to attend the meeting.

During your hearing, you will have an opportunity to meet with the Appeals Committee for approximately one-half hour to discuss why you believe your claim should have been approved. The Committee will then have a half hour to ask questions regarding your presentation and any additional questions they have regarding your medical file.

The Committee will notify you in writing no later than 30 days following the hearing on whether it decided to uphold the program administrator's decision or approve your claim. If your claim has been denied, the notice will include a specific reference to the Plan provision that the denial is based. The Committee's decision shall be binding on all parties. Every effort will be made to ensure that you understand the findings of the Committee.



Your Privacy is Respected

Committee meetings are convened only when an appeal is filed. All information presented to the Committee for its consideration is confidential. The Committee members are not allowed to discuss any information presented to them outside of the Committee meeting, except to process your appeal and related matters.