



# Temporary Disability Insurance Information for Employers

## What is Temporary Disability Insurance?

Temporary Disability Insurance (TDI) benefits can partially replace wages during an employee's own non-work-related injury, illness, or other disability, including pregnancy.

## Applying for Benefits

An employee who is unable to work due to an injury, an illness, or a scheduled surgery should complete the first section of the application for Temporary Disability Insurance benefits (Form DS-1). They may complete the form online at [nj.gov/labor](http://nj.gov/labor), or download and complete a paper form. The employee must give the last day that they physically worked (this date must agree with your statement) and the first day that they were unable to work and under the care of a medical professional (this date must agree with the date given by the treating physician). They must also list all of their employment in the past 18 months, with accurate dates of employment and work locations.

## Illness or Injury

Once your employee has completed their portion, they must submit a medical certification of the conditions that prevent them from working. This is the Medical Certificate (Part B) portion of the application (Form DS-1), which must be completed by the medical professional treating them. If they are filing online they will see an instruction sheet they can give their physician. The physician can enter the medical information online.

## Pregnancy Claims

Individuals may be eligible for TDI benefits while they are pregnant and after they deliver. The customary length of a pregnancy disability period is 4 weeks before the expected delivery date and 6 weeks after a natural delivery (8 weeks after a Cesarean section), but the duration can vary depending on the doctor's evaluation of their condition.

## The Medical Professional's Role

The medical professional determines whether your employee's physical condition prevents them from being able to work. Since this is subject to change, we periodically require your employee's physician to complete a supplemental medical form, confirming that the employee remains under the care of a medical professional and still cannot work or has not recovered. In the case of pregnancy, this supplemental form must include the date and type of delivery, the expected date of full recovery, and any complications that extend the recovery period beyond what we consider customary. It is your employee's responsibility to see that this form is completed.

## Disclosure of Medical Information

When patients sign a TDI claim form, they authorize their doctor to share their medical information with the Division of Temporary Disability Insurance only. We cannot discuss your employee's condition with you without their written authorization.

The Division of Temporary Disability Insurance is not a "covered entity" under the federal Health Information Portability & Accountability Act (HIPAA). All of your employee's medical

records, except to the extent necessary to administer the Temporary Disability Benefits Law, are confidential and are not open to public inspection. We protect all records that may reveal the identity of your employee.

## The Employer's Role

As the employer, you are required to provide information about your employee's duration and location of employment, the wages earned, and if the employee received any paid time off after the last day they worked (not including wages previously earned). Information you provide must agree with the claimant's statement, or you both will receive additional questionnaires to clarify your statements. This can significantly delay the determination of the claim. Be sure to use exact dates, provide gross wages, use Saturday week-ending dates when providing the last 10 weeks of wages, and sign and date the form. Never attach payroll records in lieu of completing one of our forms.

## Filing an Employer Statement

Our new online portal makes filing your employer statement simple. If your employee has filed their claim online, they will give you an instructional sheet with a form identification number. Use this number to enter your Employer Statement (Form E-01) on their specific claim by going to our website. The information you submit is encrypted, and the system meets all security standards mandated by the state of New Jersey. It's easy to use, and you'll get an immediate confirmation of your statement filing. It's safe, easy, and fast – file your statement online today.

Alternatively, you can supply the necessary information by completing every question on Part C of the application for Temporary Disability Insurance benefits (Form DS-1).

You may be required to provide information for any claimant who has been in your employ within the last six months. They may give you an instructional sheet to complete the E-01 online or you may receive a Request for Information (Form E-15) from us. The wage information you provide is required to determine your former employee's benefit amount, so be sure to complete and return this form promptly. Failure to do so can result in substantial monetary penalties.

## Integrity of the Temporary Disability Insurance Program

To protect the integrity of the Temporary Disability Benefits Fund, we verify claims and review diagnosis/ICD coding and the claimant's estimated date of recovery to determine whether it is consistent with the normal expectancy for the claimed illness, injury or other disability.

### For More Information

Go online: [nj.gov/labor](http://nj.gov/labor)

Call Customer Service: 609-292-7060

Write: **Division of Temporary Disability Insurance**  
P.O. Box 387  
Trenton, NJ 08625-0387

**Remember: To receive *timely payments*, your employee depends on you to *promptly complete and return* the employer statement of the claim form.**

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[nj.gov/labor](http://nj.gov/labor)

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