



FILE A NY PFL CLAIM WITH CONFIDENCE

Your NY PFL Claim is managed by The Hartford. It's a user-friendly benefit that helps provide essential support services while you're away from your workplace.

NYPA: Power Authority of the State of
New York

Policy Number: 709424

TO FILE A CLAIM, CALL:
NYPA DEDICATED LINE
866-664-3128



Follow these steps to file a claim with The Hartford:

STEP 1: KNOW WHEN IT'S TIME TO FILE A CLAIM If you're absent from work, we can advise you on when to file your claim. If your absence is scheduled, call us within 30 days of your last day of work. If unscheduled, please call us as soon as possible.

STEP 2: HAVE THIS INFORMATION READY

- Name, address, policy number and other key identification information
- Name of your department and last day of active work
- The nature of your claim

STEP 3: MAKE THE CALL TO FILE YOUR CLAIM

With your information handy, call The Hartford at 866-664-3128.

You'll be assisted by a caring professional who'll take your information, answer your questions and file your claim.

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GET SUPPORTIVE ASSISTANCE

Even after your claim has been filed, we may be in touch to check your progress, answer questions or obtain additional information from you. Our goal is to offer a smooth and hassle-free experience until you return to work. Feel free to also call us with anything that’s on your mind. We’re here to help.

RELAX AND STAY POSITIVE

You have the assurance of our knowledge, experience and understanding of what you are going through. We’re with you all the way, so you can receive the benefits you qualify for and get back to your life.

QUICK FACTS

The Hartford’s goal is to help get you through your time away from work with dignity and assist you in any way we can. Keep the card below in a safe place for future use. We’ll be there when you need us.

TheHartford.com/employeebenefits



(Please cut here and keep in your wallet.) ✂

WHEN YOU CALL, THE HARTFORD WILL ASK YOU TO PROVIDE:

- Name, address, policy number and other key identification information.
- Name of your department and last day of active work
- The nature of your claim.

This card is not proof of insurance