



DENTAL · VISION · LIFE · DISABILITY

SHORT TERM DISABILITY CLAIMS FAQ

WHERE DO I SEND THE COMPLETED FORMS?

- 1.) **BY MAIL:** 2 Court Street, Suite 102, Binghamton, NY 13901
- 2.) **BY SECURE EMAIL:** groupclaims@renaissancefamily.com
- 3.) **BY SECURE FAX TO:** 607-773-2276

PLEASE RETAIN THE ORIGINAL COMPLETED FORMS IN CASE THE ELECTRONICALLY SENT FORMS ARE ILLEGIBLE. FOR QUESTIONS CONTACT 844-368-6485.

SHORT TERM DISABILITY CLAIMS—FREQUENTLY ASKED QUESTIONS

WHO IS RESPONSIBLE FOR SUBMITTING THE FULLY COMPLETED CLAIM FORM?

After obtaining the forms from your employer, it is your responsibility as the Claimant to submit fully completed claim forms.

HOW DO I KNOW WHICH CLAIM FORM TO COMPLETE?

Your Employer will supply the claim form you will need to submit.

WHO MUST COMPLETE THE CLAIMANT'S STATEMENT?

For prompt handling of your disability claim, please answer all questions on the form. If you as the Claimant are unable to complete the form, another person may complete the form. His/Her name and relationship to you as the Claimant must be stated on the form.

WHEN SHOULD I SUBMIT MY CLAIM FORMS?

Claim forms should be submitted within 30 days of becoming disabled and stop working. If you are unable to submit within this time frame then proof needs to be submitted within 90 days of the end of your elimination period. Refer to your policy provisions.

WHAT IF MY CLAIM FORM IS COMPLETED BEFORE I AM ACTUALLY DISABLED?

Claim forms fully completed will be accepted only two weeks prior to disability commencing.

AFTER MY CLAIM IS RECEIVED AND APPROVED, WHEN WILL MY CHECK BE PROCESSED?

- 1.) Claims are processed within 7 to 10 working days after receipt and approval.
- 2.) New York statutory disability (DBL) claims are processed within 4 days after initial receipt and approval of claim.

IS MY BENEFIT TAXABLE?

Disability benefits may be subject to FICA and Medicare tax withholding. Please consult your legal or tax advisor.

HOW ARE BENEFITS PAID FOR MATERNITY CLAIMS?

Following completion of any unpaid elimination period if applicable in the policy, benefits are paid through 6 weeks post-delivery for natural delivery and eight weeks for a C-Section delivery. If there are complications that may extend the disability beyond or before the 6 or 8 week periods, medical verification of all complications will be required.

HOW OFTEN WILL I RECEIVE A CHECK?

Checks are routinely issued every 2 weeks. However, if medical information was requested with your last benefit payment, this information must be furnished to Renaissance before another benefit payment check is issued.

SHORT TERM DISABILITY CLAIMS—FREQUENTLY ASKED QUESTIONS (CONTINUED):

HAS MY CHECK BEEN MAILED?

1. Please contact the Renaissance Group Claims Department at 844-368-6485 Option #2, or email the Group Claims Department at GroupClaims@RenaissanceFamily.com.
2. If your Employer has access privileges to the Renaissance online administration portal, you may check the status of your claim through the website.

DO I HAVE TO SUBMIT A FOLLOW-UP CLAIM FORM?

1. Updated medical information may be required throughout the course of your disability.
2. When updated medical information is required, you will receive with your disability check an Attending Physician's Statement for your doctor to complete.

CAN I HAVE MY DISABILITY CHECK DIRECT DEPOSITED INTO MY BANK ACCOUNT?

No, at this time we are unable to offer direct deposit for disability payments.

WHAT IF MY CLAIM IS DUE TO AN INJURY?

If your claim was the result of an injury, please be sure to advise how, when and where the injury occurred. If the police were involved it is also helpful to include a copy of the police report.

IF I WAS TREATED IN THE EMERGENCY ROOM OR URGENT CARE FACILITY SHOULD I SUBMIT THIS INFORMATION?

Yes, any proof of treatment you had during your period of disability is helpful. For example: You were treated in the emergency room but the provider completing your disability form is your primary care doctor or specialist, the emergency room information establishes the first day of treatment for your disability.

WHAT IF MY HEALTH CARE PROVIDER IS A NURSE PRACTITIONER OR PHYSICIAN'S ASSISTANT?

A Nurse Practitioner or Physician's Assistant can complete the claim form.

DO I NEED TO SUBMIT THE ORIGINAL FORM?

1. We will work from a faxed or emailed copy of the form. The original does not need to be submitted.
2. We do recommend that you retain a copy in the event we are unable to read the form or do not receive the faxed or emailed copy.

WILL I NEED TO COMPLETE AN AUTHORIZATION FORM?

There is a possibility that during the course of your claim review Renaissance may require an authorization form to obtain additional medical information. If the form is needed, the claim examiner handling your claim will send the form to you to be completed.

WHAT IF MY CLAIM FORM IS DUE BACK BEFORE I HAVE MY NEXT DOCTOR'S APPOINTMENT?

If you have a timing issue with your appointment and returning the form, please contact your claim examiner to discuss.

For Questions or Assistance Filling out Claims Forms:

Phone: 844-368-6485 (Option #2)

Email: GroupClaims@RenaissanceFamily.com

RenaissanceFamily.com



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