# Short Term Disability Claim Flow

Intake

1st - 2nd Business Day

3rd - 5th Business Day

Ongoing

### Claim begins

Employee may submit claim via paper form, online/mobile app, fax or





#### Intake team reviews the information received

- Provides Employee with "next steps"
- · Requests physician's statement

IClaim is assigned to Customer's designated Benefits Team

# **Benefits Specialist opens** communication lines

- · Emails Customer indicating new claim/leave
- Customer can access claim status reports via self-service, customized dashboard 24/7
- · Sends Employee Claim Initiation Letter



## **Benefits Specialist partners** with employee, employee's supervisor and HR

- Emails **Employee** to gather/share information
- Reviews contractual eligibility
- Ensures restrictions/limitations are medically supported
- · Assesses for clinical/vocational intervention

# Yes

Is claim compensable

#### No

## **Short Term Disability claim** is approved

#### **Benefits Specialist**

- · Sends Approval Letter to Employee
- · Emails notification to Customer
- Customer can access claim status reports via self-service, customized dashboard 24/7

# Leave closed

· Benefits Specialist sends Denial Letter to Employee

is not compensable

**Short Term Disability claim** 

- · Emails notification to Customer
- · Customer can access claim status reports via self-service, customized dashboard 24/7

# **Benefits Specialist provides** ongoing claim support

- · Monitors claim and duration
- Partners with Employee, Customer and clinical resources to assess potential return-to-work opportunities (until file closure)

File

closed

- Clinical resources
- Nurse-to-nurse calls
- Roundtables and physician support
- · Transition to long term disability (LTD) if applicable

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