



# Evidence of Insurability.

General information and instructions for employees electing Basic Life, Basic Dependent Life, Supplemental Life, Supplemental Dependent Life, Short-Term Disability or Long-Term Disability.

## What is EOI?

Evidence of insurability, or EOI, is proof of good health. By completing an EOI application, you are providing the additional information we need to review your request for coverage. You will still be eligible for any guaranteed issue amount of coverage available to you, regardless of whether or not your EOI application is approved.

## When is EOI required?

You will be asked to provide EOI if:

- You request an increase to any existing benefit that you elected during an earlier initial or annual enrollment period; or
- You do not elect coverage within 31 days of your initial eligibility period but decide to elect it later; or
- You elect Basic or Supplemental Life or Basic or Supplemental Dependent Life within your initial eligibility period and the amount you elect is more than the guarantee issue amount.

If you have any question about whether or not the benefits you have elected will require you to provide Evidence of Insurability, please contact your human resources department.

## Your responsibilities.

- Your employer will give you the appropriate application form. The first page of the document provides instructions for completing the form.
- Some of the information on the form may be pre-filled with information, such as the group number or information about your benefit elections. If you believe any of this information is incorrect, please contact your human resources department for clarification. Otherwise, please do not make changes to any pre-filled information.

## Evidence of Insurability checklist

- Obtain the application form from your employer.
- Fill out the application completely, then sign and date and send to us. If your spouse election requires EOI, make sure your spouse signs as well.
- Respond promptly to any requests from us for additional information.

**UnitedHealthcare**  
**Group Medical Underwriting Services**  
P.O. Box 17829  
Portland, ME 04112

**Fax #:** 1-855-290-5224

**Email:** [eoi\\_underwriting@uhc.com](mailto:eoi_underwriting@uhc.com)

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## Next steps.

If your application is complete, we may be able to make a decision based only on that information. If not, we will write to you and ask you for additional information needed to assess your application. You may be asked to:

- Undergo a paramedical examination\*; and/or
- Provide blood and urine specimens for testing\*; and/or
- Provide additional medical history detail by completing a questionnaire.

\* Medical examinations, including collection of blood or urine specimens, must be performed by our paramedical vendor – ExamOne. We cannot accept exams or lab tests performed by other practitioners or for reasons unrelated to your application for insurance. If we ask you to get lab tests or an exam, or we request medical records from any of your physicians, we will pay for these.

Whether we make a decision or need more information, we will write you to provide you with the details.

Generally, applications are reviewed within 5 business days of the date we receive them, so you may expect to hear from us within 10 to 15 business days after that. Likewise, if we require additional information from you, we ask you to help us by providing this information to us within 10 to 15 business days after you receive our request. We may withdraw your application if we have asked you to provide additional information and we do not receive this within a reasonable period of time.

## Notification about your application decision.

We will always notify you and your employer of our final decision regarding your application. Also, we will always notify you in writing. Your application may be approved or it may be declined.

If your application is approved, your employer can begin payroll deduction for the coverage as soon as the payroll period following the date of approval.

If your application is not approved, we will give you a detailed explanation of the reason and will include information regarding your right to appeal our decision. If we decline your request, the reason for the decision will not be shared with your employer.

## A couple of additional thoughts about EOI.

You are responsible for providing complete and accurate health history information for yourself and/or any members of your family who are required to provide EOI. All of the medical questions must be answered and complete details must be provided for all family members to whom any 'yes' answer applies. It may be helpful to gather the following information prior to completing your application:

- List of health conditions for all applicants;
- List of medications, including dosage and frequency, for all applicants;
- Dates of appointments with a doctor, counselor or other health practitioner for any issues other than minor illnesses such as cold or flu;
- Names, addresses and telephone numbers of physicians consulted in the past 5 years.



**For the status of your application, call 866-615-8727.** When prompted, choose option 3, then option 1.

**For questions about your benefit elections or payroll deductions,** contact your employer.



**This is an overview of the Evidence of Insurability process; please refer to your Policy and the Medical Underwriting department for additional specifics surrounding this process.**

UnitedHealthcare Life and Disability products are provided by UnitedHealthcare Insurance Company; Unimerica Insurance Company; and certain products in California by Unimerica Life Insurance Company; and in New York by Unimerica Life Insurance Company of New York. Texas coverage is provided on Form LASD-POL-TX (05/03), Form UHCLD-POL 2/2008-TX, or UICLD-POL-TX 4/5.

UnitedHealthcare Insurance Company is located in Hartford, CT; Unimerica Insurance Company and Unimerica Life Insurance Company in Milwaukee, WI; Unimerica Life Insurance Company of New York in New York, NY.

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