

Disability insurance administration guide





Welcome

Thank you for selecting UnitedHealthcare as your company's disability insurance benefit provider. We're happy to serve you.

This disability insurance administration guide contains important information to help you administer your company disability insurance plan. Access to the secure Employer eServices® website helps to make benefits administration faster and easier for you and your employees.

If you have questions and want to get in touch with us, please use the contact list on page 4 to help better direct your query.

We appreciate your business and value our relationship with you.

This disability insurance administration guide is merely a guide and under no circumstances does it take the place of your group policy. For specific legal guidelines and requirements, please refer to your group policy.

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Contacts



Resource	Website / Address	Phone / Fax
Employer eServices customer support Assistance with online navigation and technical support	EmployerServices.com ¹	1-800-651-5465
Customer service for benefit administrators² <ul style="list-style-type: none"> • Enrollment / eligibility² • Billing information and payment 	EmployerServices.com ¹ Enrollment / Eligibility address UnitedHealthcare Specialty Benefits PO Box 30964 Salt Lake City, UT 84130-0964 Billing address For billing address, please see your invoice remittance stub or call customer service.	1-888-842-4571 Fax 1-248-733-6062
UnitedHealthcare Short-Term Disability (STD) UnitedHealthcare Long-Term Disability (LTD) <ul style="list-style-type: none"> • Claims • Forms 	Claims address UnitedHealthcare Specialty Benefits P.O. Box 7466 Portland, ME 04112-7466	1-888-299-2070 Fax: 1-888-505-8550
UnitedHealthcare Financial & Reporting Department <ul style="list-style-type: none"> • W-2 (benefits payment report) • Tax Information 	Reporting Department address P.O. Box: 7466 Portland, ME 04112-7466	1-888-299-2070 Fax: 1-888-505-8550

¹ Employer eServices online administration may not be available to customers with 100 or more employees. Check with your UnitedHealthcare representative.

² Make eligibility changes online at EmployerServices.com. If you don't have access to the Internet, please fax or mail eligibility changes to us.

Employer eServices[®] benefits administration



Employer eServices.com allows employers and brokers to manage most of their benefits administration online and in real-time, increasing efficiency and saving time and money.

This may include:

- Enroll, verify or change eligibility status of employees and dependents
- View, sort and search current and prior month's invoices and authorize payments online
- Access to Reporting
- For ASO Business – Claim view and Banking Reporting.

If you don't have Internet access or temporarily lose Internet access, please follow the steps outlined on page 10. You may also get in touch with us. Please refer to the contact information on page 4.

Manage website access

If you provided your e-mail address on the employer application, you are registered automatically on the Employer eServices website. Also, you will designate a Client Master Administrator (CMA). Your CMA sets up, manages and controls who in your company has access to the various information and tools within Employer eServices.

The CMA can:

- Create or deactivate users
- View a list of current users
- Assign or change data access levels and privileges
- Reset users' passwords

Your CMA should have received two e-mails from us containing their Employer eServices.com user ID and password. Once received, they may log into **Employer eServices.com**, and begin setting up user access. If your CMA has questions, there's an easy-to-follow online tutorial on the website. If your CMA has not received or cannot locate their user ID and password, they may call us at **1-800-651-5465**.

⁹ Employer eServices online administration may not be available to customers with 100 or more employees. Check with your UnitedHealthcare representative.

Enrollment and eligibility information



Eligibility requirements

All newly hired eligible employees should be given the opportunity to apply for coverage within 31 days of the date the employee first becomes eligible. Please refer to your policy for exact eligibility requirements. Please follow your company eligibility policies for rehire and leave of absence situations.

Any employee who applies for disability insurance more than 31 days after the date of eligibility is considered to be a late applicant. Late applicants:

- Are required to submit evidence of insurability for each employee
- May only be added to the plan after written approval is received.

Evidence of Insurability: If your employee must provide Evidence of Insurability (EOI), you can choose from two options for EOI submission.

Option 1 – Your welcome letter will provide the name of the application to download: log on to EmployerServices.com and download and print the appropriate application. Applications are state specific so please make sure to determine the application that is appropriate for your state.

Option 2 – Paper copy application: call 1-888-842-4571 to request a paper copy of the application.

Whichever option you choose, please fill in the appropriate company sections and give the application to the employee to complete the employee sections. You can help the EOI process by indicating the products, and entering the amounts of coverage, that require EOI before you give the form to your employee.

Note: Do not begin payroll deductions for insurance premiums that require EOI until you receive a written notice of approval from our company.

Effective date

New hires are effective on the date of hire, the first day of the month following the date of hire, or the first day following the completion of any designated waiting period. The waiting period is defined in your policy. Changes in waiting periods can be made for future effective dates and only upon renewal.

If the employee is on leave and covered under the Family Medical Leave Act, the coverage begins on the date the group policy becomes effective unless the approved leave is due to the employee's illness. When an employee is absent from work due to an illness on the date the group policy becomes effective, the employee's coverage begins on the date the employee returns to full-time work.

Active Employment and Minimum Hours

To be eligible for coverage, employees must work a minimum number of hours and be actively employed as defined in your policy. The minimum hours requirement for disability products may differ from those for health coverage. Please refer to your policy for more details.

Retroactive eligibility adjustments

All requests for additions, changes and terminations of eligibility must be submitted within 60 days of the effective date. The 60-day limit is used unless prohibited by state law or by the disability policy.

Billing and payment information



The Billing tab⁴ on EmployereServices.com offers fast service, simplified invoices, downloadable data, real-time calculations, and payments.

- A reminder e-mail is sent every month when your invoice is ready for review and payment on Employer eServices.
- From Employer eServices, click the **Billing** tab to view, sort or download current activity, view account balance and past due aging payment history, as well as submit payments.
- If you make eligibility changes after the original invoice generates, you can request a new adjusted invoice online.
- You can elect to submit payments electronically through Scheduled Direct Debit located on the Billing tab. Scheduled Direct Debit is an automatic monthly debit made on the due date of your invoice from a designated checking account. To set up Scheduled Direct Debit or establish an electronic payment method, go to the Billing tab of EmployereServices.com and select Edit Payment Method in the menu bar.

If you don't have access to the online billing tool, please call customer service at **1-888-842-4571** to pay by phone or see page ten (10) for information on paying paper invoices.

Payment due date

To ensure uninterrupted disability coverage, we must receive your payment by the payment due date each month. If we do not receive your full premium payment by the end of the month when payment is due, your disability policy is subject to termination (see your master group policy).

Waiver of premium

Premiums for long-term disability are automatically waived once a claim is approved, provided the disability extends beyond the period required to qualify. The employee and employer receive a notification from the claims area indicating "Your waiver of premium is effective MM/DD/YYYY." The premiums will be adjusted.

⁴Employer eServices online billing may not be available to customers with 100 or more employees. Check with your UnitedHealthcare representative.

How to file a short-term disability or long-term disability claim



STD claim submission

For assistance regarding STD claims, please call **1-888-299-2070**.

How do I submit an STD claim?

Complete the STD claim form, which includes separate portions for the employer, employee and the employee's physician. To avoid delay in processing a claim, be sure to completely answer all questions on the claim form and include a signed authorization by the claimant/employee.

1. Complete the Employer's portion of the claim form.
2. Ask the employee to complete the Employee portion of the claim form, and get the physician's portion of the form completed. Tell the employee to include as much information as possible.
3. Submit all pages of the claims form (original copy is not required):

- **FAX** completed forms to: **1-888-505-8550**

or

- **MAIL** completed forms to:

UnitedHealthcare Specialty Benefits
PO Box 7466
Portland, ME 04112-7466

LTD claim submission

For assistance regarding LTD claims, please call **1-888-299-2070**.

How do I submit an LTD claim?

Before the claim can be processed, all portions of the LTD claim form must be completed, including:

1. Employer portion
 - Completed Employer portion
 - Job description and physical requirements
 - Enrollment documentation (if the Employee pays any portion of their premiums)
 - Payroll records (refer to your policy definition of Pre-Disability Monthly Earnings for details on what is needed)
2. Employee portion
3. Physician portion

Submit the completed claim form to UnitedHealthcare for processing:

- **FAX** completed forms to: 1-888-505-8550

or

- **MAIL** completed forms to:

UnitedHealthcare Specialty Benefits
PO Box 7466
Portland, ME 04112-7466

Note: Claims should be submitted as soon as the employee believes that the disability will last as long as the elimination period. For disability tracking purposes, it is preferable to receive a claim during the elimination period rather than have to obtain medical information retroactively after the elimination period has been satisfied. Advise the employee to include as much medical information as possible.

Tax withholding, reporting and W-2 services



Federal IRS regulations require that employees who received sick pay (or disability benefit payments) from a third-party vendor during the current tax year must be issued a Form W-2 no later than January 31 of the following year. Therefore, it is your responsibility to provide the current year Form W-2 to your employees which must include all the following information as applicable:

- Sick pay subject to income tax;
- Sick pay not subject to income tax;
- Sick pay subject to social security and Medicare tax; and
- The employee's social security, Medicare and federal and state income tax withheld and deposited by the third-party payer.

UnitedHealthcare offers tax withholding, reporting and W-2 services to our fully insured customers. To request this service, contact us at the phone number or address on the Contacts page. We must receive your request no later than December 31st.

We will provide you an annual Benefit Payment Report for the calendar year that ended December 31st in January of the following year. This report contains details of payments we made under your disability program, including taxes withheld, and may help with your Form W-2 filing requirements.

Please remember that it is employer's responsibility to remit the employer FICA match amount, and calculate and remit the unemployment tax amount for all disability benefit payments subject to FICA withholding.

We understand that tax laws governing disability benefit payments are complex. We recommend reviewing the report with a tax advisor before completing your Form W-2 filings.

Please contact your UnitedHealthcare representative with any questions about our tax withholding, reporting and W-2 services.

Administering benefits offline



If you don't have or temporarily lose access to the Internet, please follow the process outlined below to help us administer your benefits. Refer to page 4 for contact information.

Enrolling employees

- Employee completes, signs and dates the Employee Enrollment form within 31 days of the date they become eligible to enroll. (See eligibility requirements in your group policy.)
- Employer completes the Employer section of the Employee Enrollment form, and reviews the form for accuracy and completeness. Refer to the Contacts page for the mailing address or fax number. You should keep a copy of all completed forms.

Reporting employee changes

Call us immediately with any employee name, address or telephone number changes. Please have available your group number and the employee's identification number available.

When an employee's hours are reduced and fall below the minimum hours to be eligible for coverage, they may fall out of an eligible group. Different products may have different minimum hour requirements for eligibility. Please refer to your policy for more details.

Terminating employees

- Call us immediately to report an employee's termination. If you do not call, you will continue to be charged for that employee's coverage.
- Please have your group number, and the employee's name and identification number available.

Note: We will continue to charge you for a terminated employee's coverage if you do not process the termination online or call to notify us of a termination.

Paying paper invoices

If you receive a paper invoice, please pay the amount billed and do not adjust your invoice. If we do not receive your UnitedHealthcare Specialty Benefits changes in time to be reflected on your current invoice, additions or terminations will be reflected on the next invoice. Any refunds, credits and back charges will appear as an adjustment on next month's invoice.

The bottom portion of your invoice is the return payment stub. To ensure that we apply your payment correctly, return the payment stub and check only to the address on the payment stub.

Important: Do not send any other correspondence or materials with your paper payment. Written changes included with your payment stub will not be processed.

UnitedHealthcare Disability products are provided by UnitedHealthcare Insurance Company and in California by Unimerica Life Insurance Company. Disability products are provided on policy form UHCLD-POL 2/2008 et al., in Texas on form UHCLD-POL 2/2008-TX and in Virginia on UHCLD-POL 2/2008. The policies have exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, call or write your insurance agent or the company. Some products are not available in all states. UnitedHealthcare Insurance Company is located in Hartford, CT and Unimerica Life Insurance Company is located in Milwaukee, WI.

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