

# Short-term disability claims

## Answers to frequently asked questions

We're dedicated to helping you file a short-term disability (STD) claim as quickly and easily as possible. To help you navigate the process, we've answered some of the most frequently asked questions about STD benefits.

### Q: When should I file a disability claim?

**A:** If you need to miss work for longer than 3 consecutive days — including weekend days — due to injury, illness, or pregnancy, you must report your absence and file a claim with Lincoln Financial.

### Q: What information do I need to provide when reporting a claim?

**A:** When reporting a claim, you'll need to provide:

- **Personal information:** Name, address, telephone number, and job title
- **Physician information:** Names, addresses, and fax/telephone information for each physician treating your illness or injury
- **Illness/injury information:** Detailed information regarding your illness or injury, including symptoms, diagnosis, and prognosis
- **Job information:** Including the day you last worked, the first day you were absent from work, and your anticipated return-to-work date

### Q: When can I expect a decision on my claim?

**A:** Once we receive all relevant information from your physician, you can expect an initial claim decision **generally** within 10 business days.

### Q: How does Lincoln handle claims submitted before the date of disability?

**A:** If you know you're going to be out, you may report your claim up to 30 days prior to your date of disability; however, the claims process will not begin until the date the disability occurs. Your early submission claim will be assigned to a claims specialist two days prior to the date of disability.



### Q: What happens after I report my claim?

**A:** Once you report your claim, a claims specialist, who will serve as your main point of contact, will contact you within two business days to discuss the details of your medical condition — including how it affects your ability to do your job — and your treatment plan.

Next, your claims specialist will contact your physician to obtain as much detailed medical information as needed and request copies of your medical records. To expedite this process, please provide your physician or medical care provider with a copy of the **Authorization to Release Information Form** at your next visit. This form gives your physician permission to release your medical information to Lincoln. You can download and print the form at [LincolnFinancial.com](http://LincolnFinancial.com).

Walk through more about what happens after the claim submission in this [video](#).

### Q: How often can I expect to hear from my claims specialist?

**A:** Your claims specialist will call you regularly to discuss your recovery and answer your questions. Your claims specialist will also periodically contact your physician to obtain updated medical information.

### Q: How long can I remain on STD?

**A:** If you continue to be disabled under the terms of your employer's plan and cannot return to work, you may remain on STD for up to 26 weeks. If your illness or disability extends beyond 26 weeks, you will automatically be considered for long-term disability (LTD) benefits.

## Q: What if my physician chooses not to share my medical information over the phone?

**A:** Providers have differing policies regarding the release of medical information. Your claims specialist will do their best to confirm information that is necessary to reach a claim decision. If your treating provider refuses to release information over the phone, your claims specialist will fax a request. You'll also be notified by mail when we send this request to your treating provider. Please note that a lack of sufficient medical documentation may result in interruption of your pay or a denial of disability benefits.

## Q: What's the process for returning to work?

**A:** If you're ready to return to work, you must notify your claims specialist of your return date. You should also contact your immediate manager to discuss your estimated return-to-work date and any special requirements, if needed. Your claims specialist may request a release from your physician that allows you to return to work. If necessary, your claims specialist will work with you and your physician to determine a return-to-work plan aimed at meeting your needs and abilities. Alternative work options may be explored, such as job modifications or accommodations.

## Q: What type of medical information will be requested from my treating provider?

**A:** We may request from your physician a completed disability form, copies of your medical records, office visit notes, a treatment plan, and test results. You'll also be notified by mail when we send this request to your treating provider.

If we don't receive the information from your physician within 45 days of the initial request, your claim may be denied for failure to provide proof of disability. If this happens, please follow up with your physician to request that they send the necessary information. If follow-up care is needed, your treating provider must provide supporting documentation within 30 days of the request.

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## Q: What if I qualify for a state paid leave as well?

**A:** Each state has its own rules and requirements when it comes to how your STD benefit will coordinate with that state paid leave. Often, your state paid benefit will pay first, and your STD benefit will be offset (or reduced) by that amount. Contact your Human Resources department or Lincoln benefits professional for information on how this may apply in your state.

## Q: Who should I contact if I have questions about my claim?

**A:** Call your claims specialist with questions or concerns Monday through Friday, between 8:00 a.m. and 5:00 p.m. Eastern.

## Q: How do I file a claim?



Online at [LincolnFinancial.com](http://LincolnFinancial.com)  
(Use company code: **MODINE**)



By phone at (888) 408-7300

Once your claim is filed, check the status of your claim online at [LincolnFinancial.com](http://LincolnFinancial.com).

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