

Frequently Asked Questions About Filing A Short Term Disability Claim

The following questions and answers will help you file a Short Term Disability (STD) claim with Standard Insurance Company (The Standard). The steps outlined below will enable you to access our efficient claims services quickly and easily.

When Should I Report A Claim?

Report a claim as soon as you believe you will be absent from work beyond your elected benefit waiting period. If you are uncertain about how long you will be absent or whether you should file a claim or not, we suggest that you proceed with filing a claim right away. This offers you some peace of mind and allows for The Standard to begin its review and issue a timely payment if appropriate. You may report a claim up to four weeks in advance of a planned disability absence, such as childbirth or scheduled surgery.

How Do I File A Claim?

To file a claim by telephone, contact The Standard's Claim Intake Service Center at 833.228.0118.

To file a claim online, go to www.standard.com and click on "File a Claim" to begin the claim process. Instructions will be provided through the entire claim submission process.

Note: If you submit your claim online, the claim submission system will indicate a requirement for a Disability Insurance Employer's Statement to be received before a decision may be made on your claim. Although this is a requirement, you do not need to take this to your employer. Upon receipt of your Employee Statement, The Standard will reach out to the OHR leave team to obtain the necessary information needed for your claim.

To file a paper claim, contact the OHR leave team or go to www.standard.com and click on "Find a Form" to download, complete and print a Short Term Disability claim packet.

A typical application for disability benefits contains the following documents:

- Employee's Statement¹, to be completed by you
- Employer's Statement², to be completed by the OHR leave team
- Attending Physician's Statement (APS)³, to be completed by your treating provider
- Authorization to Obtain and Release Information, to be completed by you

When I Report My Claim, What Information Will I Need To Provide?

You will be asked to provide the following information — in addition to other questions about your absence:

- Employer name: **City and County of Denver | Denver Fire | Denver Police**
- Group Policy number:
 - **642061 (City and County/Denver Sheriff)**
 - **643483 (Denver Fire)**
 - **144127 (Denver Police)**
- Name and Social Security number
- Last day you were at work
- Nature of claim/medical information
- Physician's contact information (**name, address, phone and fax number**)³

What Are The Hours Of Operation For The Claim Intake Service Center?

If you choose to submit your claim by telephone, The Standard's Claim Intake Service Center representatives are available to assist you Monday through Friday, 6:00 a.m. through 6:00 p.m., Mountain Time.

Where Do I Send The Completed Forms?

Completed forms may be mailed to:

Standard Insurance Company
P.O. Box 2800
Portland, OR 97208

Or if you prefer, you may fax completed forms to our office at 800.378.6053.

How Long Does It Normally Take To Make A Claim Decision?

Once The Standard receives the required paperwork, which includes the Employee's Statement, Employer's Statement, Attending Physician's Statement and Authorization to Obtain and Release Information, it will take approximately one week to make a claim decision. If we have not made a decision within one week, you will be notified with additional details.

Is Electronic Deposit (EFT) Available?

Yes! During the intake process you will receive an Automatic Electronic Deposit (EFT) form to complete and return to The Standard if you want your STD benefit electronically deposited into your bank account. If we do not receive an EFT form, benefits will instead be paid to you by check and mailed. For your convenience, a form is provided on page 3.

If My Claim For Benefits Is Approved, How Long Will It Take To Receive My First Check?

After the Benefit Waiting Period as outlined in your group policy is served, STD benefit payments are paid in arrears on a weekly basis. In most cases, checks are deposited or mailed on Wednesday of each week (dependent on preferred payment method). STD benefit payments that are payable for retroactive claims will be mailed following claim approval.

Who Should I Call With Questions About My Claim?

If you have already filed a claim, please call The Standard's Disability Benefits toll-free number, 833.228.0118. If you are looking for general information, please contact your benefits administrator.

Who Is Responsible For Notifying City and County of Denver Of My Absence?

It is your responsibility to follow your employer's normal absence reporting procedures by notifying your manager or supervisor of your absence.

¹ If you file online or by telephone, your submission serves as the Employee's Statement and we will instruct you on which other documents need to be completed.

² The Standard will contact your Employer to obtain the information necessary on the Employer's Statement.

³ The Standard will fax an Attending Physician's Statement (APS) to your doctor for completion and will make up to three follow up attempts to obtain a completed APS from your doctor. We encourage you to contact your doctor and ask their assistance in completing the APS on your behalf.

Section I. Claimant Information

Full Name	Phone Number	Claim Number(s)	
Address	City	State	ZIP Code

Section II. Banking Information *Note: there may be a delay in receiving your benefits electronically if you do not provide accurate and necessary information on this form.***As proof of account ownership, I have attached an official bank-printed document with the following:**

(See reverse for acceptable types of documentation)

- **Claimant's name**
- **Account number**
- **Routing number**
- **Financial institution's logo**

Type of account <input type="checkbox"/> Checking <input type="checkbox"/> Savings	Account number	Routing number
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Section III. Request and Agreement with Standard Insurance Company (The Standard)

- I authorize and request The Standard to electronically deposit my disability benefit payments into my bank account indicated on this form. I authorize The Standard to contact my bank to verify the information on this request form and resolve problems related to electronic deposits or errors in deposits.
- I understand I may receive benefit checks via U.S. Mail for up to two benefit periods after submitting this form in order to allow the necessary transactions to take place between The Standard and my financial institution. I understand that not all financial institutions update their records at the same time, so my deposit may not be posted to my account until the evening of the payment due date. I understand that there may be a delay in receiving my benefits electronically if I do not provide accurate and necessary information on this form.
- I agree to notify The Standard as soon as reasonably possible of any changes to my designated bank account. This agreement will terminate if my designated bank account is closed or the account number is changed. If this agreement terminates, I understand that my disability benefit payments will be paid by check via U.S. Mail until a new EFT request is successfully submitted. Any future EFT requests submitted to The Standard will replace this request.
- I understand that deposit of my disability benefits into my account will satisfy The Standard's obligation to pay benefits to me, and that my entitlement to benefits is subject to the terms of my policy with The Standard.
- I acknowledge that electronic deposits under this request are made in payment of disability benefits because of my inability to work. With each deposit I accept into my account, I am certifying that I have made no false claims or statements or concealed any material fact.
- I may terminate this authorization at any time by contacting The Standard. I understand that discontinuation of my electronic payments may take up to two benefit periods to take effect, and once the change occurs I will receive any remaining benefits due to me by check unless I select another payment option.

By signing this document, I authorize and request The Standard to electronically deposit my disability benefit payments into my bank account indicated on this form.

Claimant Signature_____
Date***Please sign and return this form with documentation proving account ownership.******See FAQ on page two for more information.*****FOR INTERNAL USE ONLY**

Analyst:

Routing code:

FAQ

What type of banking documentation do I need to provide?

As the claimant, you must provide banking documentation that shows proof of account ownership.

Examples of approved forms of documentation:

- Voided check with your name printed on it
- Direct deposit enrollment form preprinted by your financial institution
- Letter from your financial institution on official letterhead

Banking documentation must be preprinted with your account number, routing number and your full legal name, as well as your financial institution's logo. We cannot accept banking documentation with handwritten account information.

We cannot accept deposit slips due to routing number inconsistencies.

What if The Standard has a different name for me than my banking documentation?

Banking documentation needs to have the same name that is printed on claim documents or letters received from The Standard. Please contact us if your name has changed.

What if I don't have a check with my full legal name printed on it?

Contact your financial institution and ask for printed documentation on official letterhead or a form that includes your account number, routing number and full legal name. We will not accept starter checks without your name printed on them or checks that only show your initials.

My financial institution is an online bank and I don't have checks. What can I do?

Contact your bank's customer service department and ask for a letter or form with your name, full account number and routing number on letterhead.

What happens if my banking information changes (for instance, because of a bank merger, new account, etc.)?

Contact The Standard and ask for a new EFT form to fill out. You will need to provide banking documentation if your banking information changes.

I am a personal representative of the claimant, such as an attorney-in-fact under a power of attorney (POA) or legal guardian or conservator. What do I need to submit?

The Standard will need documentation supporting that you have legal authority to sign this form on behalf of the claimant, such as a copy of the POA or court order and letters of guardianship or conservatorship. In addition, the bank documentation you submit must show that the claimant is an owner of the account.