

# Employer guide to claims management

In today's highly-demanding business environment, the dependency on your talented employees is high. Sickness absence, particularly if long-term, can pose a serious financial problem for both employers and employees.

Your Income Protection Policy with Unum will help ensure your employees continue to receive a percentage of their income if they are unable to work because of illness or injury.

This document will give you a brief overview of our claims management process, including what we need to consider a claim, how we will pay a claim, what happens if an employee can work part-time and the support we can provide through vocational rehabilitation and return to work programmes. It also covers how other income may affect our benefits and our complaints process.

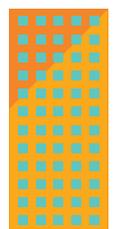
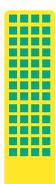
You may also want to refer to our brochure 'Keeping your business on course' UP3176 and the 'Income Protection user guide' UP841.

## What specialist support can we provide to help get an employee back to work?

Our team of specialists will work with you to help your employee achieve a supported and sustainable return to work. From the first week of an employee's absence, you can contact us to ask for general guidance.



Email us at: [RHM.Enquiries@unum.co.uk](mailto:RHM.Enquiries@unum.co.uk)



Once a claim has been submitted and a consent form completed, our team will make contact and begin to work with you and your employee.

- Each case is managed individually to take account of the particular circumstances
- The focus is on getting your employee back to work at the earliest appropriate time, helping to reduce absence costs for your business

## When to tell us about a claim

You can submit a claim as soon as you anticipate a problem. The earlier we are told about an absence, the earlier we can identify any support we can provide. This will also ensure we are ready to pay benefit at the end of the deferred period, where medical and other evidence supports the claim (by deferred period, we mean the length of time your employee has to be absent before we can pay benefit). In practice, this should be no later than halfway through the deferred period.

## Late notification

If we are notified of a claim after the end of the deferred period, it may affect our ability to manage the absence and assess the claim. If we are notified of a claim more than 90 days after the end of the deferred period, we have the right not to pay benefit.

## How to tell us about a claim

You will need to send us:

- A completed employer claim form, and
- The employee's absence records, and
- A job description for the employee's occupation

We will also need the following information from the employee:

- A completed employee claim form
- A signed consent form which gives us authority to ask the employee's doctors for further information

The employee will need to give their doctor:

- A second copy of the signed consent form
- A request for copies of medical records form

This will allow their doctor to provide us with the medical records.

### In practice

You can get our claim forms by:

**Website:** Download the forms at [unum.co.uk/claims/group-income-protection](http://unum.co.uk/claims/group-income-protection)

**Phone:** Call our Customer Care Department on **01306 873243**

**Email:** Contact us at [DorkingClaimsAdmin@unum.co.uk](mailto:DorkingClaimsAdmin@unum.co.uk)

You can return completed claim forms to us by post or email.

**Post:** Claims Department, Unum, Milton Court, Dorking, Surrey, RH4 3LZ.

**Email:** [DorkingClaimsAdmin@unum.co.uk](mailto:DorkingClaimsAdmin@unum.co.uk)

## How are claims assessed?

We will assess if the employee satisfies the definition of incapacity. We will need:

- Evidence of their medical condition
- Evidence they are receiving appropriate medical advice and treatment
- Information about their job role

We may ask the employee to attend an independent medical examination with a medical practitioner or consultant chosen by us.

We may also need to visit you or the employee. If this happens we will always make an appointment in advance.

### In practice

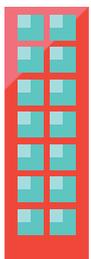
To enable us to assess and manage a claim, you must ensure that we are provided with:

- The completed claim forms and signed consent form
- Information we request to assess the claim
- Notification of any change in the employee's condition or circumstances which might affect our liability to pay benefit - e.g. a change in their condition, their contract of employment, their income or if the employee performs any work whether paid or unpaid

The information we request may include, but is not limited to:

- Medical evidence
- Proof of membership
- Details of the insured occupation
- Personnel, medical and occupational health records held by you
- Proof of earnings before and during incapacity
- A birth certificate
- Information relevant to the claim from any person the employee has consulted in connection with their incapacity
- The employee attending a medical examination when requested to do so

We will pay for any medical evidence we request in the UK.



## When will we pay benefit?

Once the claim is accepted, monthly benefits are paid to you, the policyholder, in arrears, 3 working days before the end of the month.

### In practice

The deferred period can be:

- Continuous absence
- Separate periods of absence (of at least 2 weeks) from the same or related causes. The deferred period must be completed within a time span of twice the deferred period - eg. an employee would complete a 26-week deferred period if they had 26 weeks of absence within 52 weeks
- Periods where because of illness or injury an employee works part time or on restricted duties or in a lower-paid role

## How will the benefit be paid?

We will pay benefits to you, the policyholder, in sterling by direct credit. However, for partners or barristers, basic benefit will be paid directly to them. Where an employee is based outside of the UK, benefits will be paid in sterling to a UK bank account of the UK employer.

## How long do we pay benefits for?

We regularly review claims and will request any information we need to do this. Benefit payments will continue as long as the medical and other evidence supports the claim, and depends on the level of cover chosen by you.

## What happens if an employee can return to work on a reduced basis?

If an illness or injury prevents an employee from working in their own role for the normal number of hours, but they work part-time or on restricted duties or in a lower-paid role, we will pay benefit at a reduced rate where the medical and other evidence supports the claim. We call this proportionate benefit.

### In practice

- We will calculate the new salary as a proportion of the pre-incapacity salary. Benefit is then reduced by that proportion. For example, if a claimant receives 40% of their previous salary, we will reduce the benefit by 40%
- So that the employee is not penalised when we calculate proportionate benefit, we will increase their pre-incapacity salary in line with inflation
- Where the basic benefit is a percentage of salary less a deductible, we will recalculate the basic benefit without the deduction when we calculate the proportionate benefit
- We will use an assumed new salary if the employee does not receive the market rate of pay

## Does other income the employee receives affect the benefit?

If the employee receives other income it may affect the amount of benefit we pay.

Other income includes:

- Benefit from any other accident, sickness or Income Protection policies where the benefit payment period is more than 2 years
- Early retirement pensions
- Income from you
- Any other income

### In practice

We will not reduce our benefit if:

- The employee is totally and permanently incapacitated
- Contractual occupational sick pay is paid during the first 12 months of incapacity
- The employee continues to receive income that they were also receiving before they became incapacitated
- Defined contribution pensions are taken early by anyone over age 55

## Complaints

If you are not completely happy with our service or a claims decision, please speak to your usual contact who will try to resolve the issue for you immediately. However, if they are unable to do so, they will refer your complaint to our Customer Resolution Team. Alternatively, you can contact the Customer Resolution Team directly:

**Phone:** 01306 644761

**Email:** [CustomerResolution@unum.co.uk](mailto:CustomerResolution@unum.co.uk)

**Letter:** Customer Resolution Team, Unum, Milton Court, Dorking, Surrey, RH4 3LZ

**Fax:** 01306 873635

We will do our best to resolve your complaint, but if your complaint has not been resolved within 8 weeks, we will explain why it remains unresolved and inform you of your right to refer the matter to the Financial Ombudsman Service (FOS). Once we have finished investigating your complaint we will issue a Final Response Letter. If you remain dissatisfied you will have the right to refer the matter to the FOS. You must refer any complaint to the FOS within 6 months of the date of the Final Response letter. Please note that some cases may not be eligible for referral to the FOS.

The Financial Ombudsman Service, Exchange Tower, London, E14 9SR

**Consumer helpline:** 0800 023 4567

**For mobiles:** 0300 123 9 123

**Email:** [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)

**Web:** [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

For full information on our complaints process, please see our leaflet 'A Guide to Customer Complaints' which you can find at <http://www.unum.co.uk/complaints>.

Terms and Conditions apply. Cover depends on policy.

[unum.co.uk](http://unum.co.uk)

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