How do I report a long-term disability (LTD) claim?
Simply do one of the following:

- Call toll-free 1.800.36.Cigna (24462) or 1.866.562.8421 (Español). A representative will walk you through the process.
- Fill out a claim form online at Cigna.com/customer-forms using the following steps:
  - Click ‘Select Disability/Accident/Life/Critical Illness Forms’
  - Click ‘Submit a Disability Claim’
  - This will bring you to the disclosure notice page
  - Review and click ‘Continue’ at the bottom of the page
  - Click ‘Submit a Disability Claim Online’ to begin

When do I report a claim?
At least 60 days before the start of your LTD.

What information do I need?
Before you call or go online, please have this information handy:

- Your name, address, phone number, birth date, Social Security number and email address.
- Employment information, such as date hired and job title.
- The reason for your claim – illness or injury.
- A description of your illness, symptoms, and/or diagnosis. Include the date your symptoms started and if you’ve had these symptoms before.
- Workers’ compensation claims you’ve filed or plan to file.
- Details about doctor, hospital or clinic visits, including dates and contact information.

What happens next?
- During the call, we’ll ask for your permission to get your medical information. Here’s how it works:
  - After you give us your claim information, you’ll be transferred to a recorded message.
  - Listen to the recording and answer “Yes” or “No” to the questions.
  - At the end of the recording, say “Yes” if you give permission or “No” if you do not.
  - You can cancel your permission at any time by calling your Cigna claim manager.

A Cigna claim manager will call your employer for a list of your job requirements. The claim manager will also call your doctor for your medical records. This information will help us figure out how long you may be out of work, and the benefits you may be able to receive.

What happens if my claim is approved?
- Cigna will send you an approval letter that gives you an explanation of your benefits.
- Cigna will tell your employer that we approved your claim, and the date you plan to return to work.

What happens if my claim is denied?
- Cigna will send you a letter that explains why. The letter will also tell you how you can appeal the decision.
- Cigna will let your employer know the claim is denied.
- You should call your employer when you get the letter to discuss your return-to-work date.

If you need immediate medical attention, please call 911
What can I expect while I’m out?
Your Cigna claim manager will stay in touch to help you return to work quickly and safely. We may work with you, your doctor and your employer to talk about different work options. This may include an adjustment to your job or work schedule. Your employer may also call you to check on your progress and offer support.

What if I plan to return to work when my long-term disability benefits end?
Your Cigna claim manager may work with your employer on any return-to-work plans. Your benefit payments will be calculated by the exact date you return to work, and whether or not you return to work part-time or full-time. This will also help determine if you qualify for continued payments.

What if I need more information?
Cigna has a website that provides useful information for you and your family members – from submitting a disability claim and what comes next, what you need to know about family medical leave, information that can help you manage a specific condition at work, and even how to access valuable programs offered with your plan at no cost to you. Please visit the website at http://www.cigna.com/workwellness.

Question?
Call 1.800.36.Cigna (24462). A Cigna representative is available to help you between 7:00 am and 7:00 pm CST.