

Evidence of Insurability Instructions

Employee Basic Life and AD&D:

Evidence of insurability is not required for this coverage.

Voluntary Life and AD&D:

Guarantee issue is based on employer group's size.

	Employee GI	Spouse GI
Employer groups 10+ employees	\$100,000	\$25,000
Employer groups 5-9 employees	0	0
All amounts are guaranteed issue for child coverage.		

Instructions for Completing the Evidence of Insurability Form (EOI) Cover Sheet:

Note: This should be completed by the group representative.

1. Enter name of Division (group name)
2. Enter type of coverage
3. Enter the members Name, Social Security Number, Date of Hire, Employee's Annual Salary.
4. Enter amount of Employees Current Coverage, Coverage's Requested and Coverage's Requiring Evidence of Insurability
5. Enter Dependents Current Coverage, Total Coverage's requested and amount requiring EOI.
6. State the reason the member is submitting Evidence of Insurability
7. The group representative **MUST** sign and date the Evidence of Insurability Cover Sheet.

Provide the (EOI) Cover Sheet to the employee. Instruct the employee to complete the Evidence Of Insurability form. The employee must mail the completed forms to Unum.

Unum

Attn: Laurel Berry
Address: 1111 Third Avenue #2300
Seattle, WA 98101
Fax 206-442-0366

Workflow for Supplemental Life Evidence of Insurability Forms:

Employees who need to submit Evidence of Insurability must complete the (EOI) Evidence Of Insurability. The Evidence of Insurability form may be obtained from your broker or the WBBA Website. The forms should be mailed directly to Unum for review at the address listed above.

Note: The WBBA enrollment form is sent directly to Benefit Solutions Inc (BSI). **Do not submit Evidence of Insurability forms to BSI. These must be submitted directly to Unum due to the sensitive personal health information on the forms.**

If employee is electing coverage and the requested benefit amount is over the Guaranteed Issue limit, Unum medical underwriting must receive an Evidence of Insurability for review.

BSI will place the employee in the guarantee issue level applicable for the employer until an Evidence of Insurability approval is received from Unum. If the member is a late applicant as defined below, the member will not have any coverage until approved by Unum. If approved, the additional coverage will be made effective the first of the month following date of approval. If denied, the employee remains at the guarantee issue amount if a timely applicant or at zero coverage if a late applicant.

If approved, Unum will generate a letter of approval and send it directly to BSI for billing purposes. BSI will send a copy to the employer group for their records. This letter will include effective date and amount of benefit. Billing for the additional coverage will be effective the first of the month following date of approval.

If denied, Unum will generate a letter of denial. BSI receives one copy of the denial letter for their files. One copy of the denial letter is sent directly to the employee. The letter sent to the employee may indicate the reason for the denial.

If additional information is needed, Unum will request it from the employee. Unum will mail a letter to the employee at their home address requesting the additional information that is needed. This request could include the employee requesting medical records from, or a possible appointment with their physician. This may be at the employee's own cost. Correspondence is always sent to the employee's home address. This information does not go through the group's administrator, broker's office, or BSI due to the confidential nature of the correspondence. If the member does not respond within 45 days, the application will be closed and the member will not be approved for the additional amount.

How To Determine When EOI Is Required For Groups over 10 employees:

When First Offered: When the group first elects Voluntary life or when an employee is first hired, all employees are eligible to receive the guaranteed issue amount if elected of 100,000. Spouses are eligible to receive the guaranteed issue amount if elected of 25,000. All amounts are guaranteed issue for child coverage.

All applicants must elect coverage within 31 days of the effective date of the initial offering. If they do not elect coverage at this time, they are considered a late applicant.

Late Applicants: There is **NO** Guaranteed Issue amount available to an employee who does not elect coverage within 31 days of first becoming eligible. Example: A group adds Supplemental life 3/1/2006. Employee A waived coverage on 3/1/2006 and wishes to enroll on 3/1/2007. Evidence of Insurability is required and there is **NO** Guaranteed Issue amount available. **Guaranteed Issue amounts are only available during the first 31 days an employee is eligible.**

EOI During Annual Enrollment:

Child(ren) Complete section 1, #1

Employees who currently have Supplemental coverage: may increase coverage by \$10,000 up to the Guarantee Issue amount \$100,000. Amounts greater will require Evidence of Insurability.

Spouses who currently have coverage: may increase by \$5,000 up to the Guaranteed Issue amount of \$25,000. Amounts greater will require Evidence of Insurability.

Employees or Spouses who do not have current coverage/Late applicant: These members are considered late applicants if they did not enroll within 31 days of eligibility. Evidence of Insurability is required for any requested coverage amount.