TEMPORARY DISABILITY INSURANCE ("TDI") CLAIMS ADMINISTRATION

All three parts of the TDI Claim Form must be completed, signed and dated by each responsible party, and submitted to Pacific Guardian Life along with any supplemental information to timely process a claim.

- Part A Claimant's Statement. The employee completes this section.
- Part B Employer's Statement. The employer completes this section.
- Part C Doctor's Statement. The employee's physician completes this section.

Upon receipt of all three parts of the TDI Claim Form, the claims administrator reviews all parts of the form, including the supplemental information, for completeness. Additionally, the claims administrator verifies that Pacific Guardian Life is the carrier, and that the account is in good standing.

Claim Payments

After all the information of the claim has been verified and the claimant is eligible for TDI benefits, the benefit amount is calculated and approved for payment. The processing of the TDI benefit payment may take up to 3 to 5 working days.

Claims Requiring Additional or Missing Information

For claims that require additional or missing information, the claim administrator will obtain the information by phone, email and/or mail.

Ongoing Claims

In situations where a claimant continues to receive benefit payments after the initial benefit payment is made, the claims administrator will mail a Supplementary Claimant's Report form to the claimant requesting updated medical information. The claimant must complete and submit the form to Pacific Guardian Life to continue to receive TDI benefit payments.

FOR EMPLOYER'S ONLY: Disability Income Reports (also referred to as FICA Reports)

- In the first week following the end of the month, the employer will receive a month-end report showing all benefit payments paid to employees.
- In the last week of December, the employer will receive a year-end summary report of all benefit payments paid to employees.