Your guide for filing a disability claim
What every claimant should know about Disability Income Insurance Claims

As the issuer of the policy, MassMutual is committed to providing you with personal assistance. Your claim representative will be in close contact to answer your questions and provide support. You may also consider contacting your financial professional as needed should you require additional information or assistance.

Helpful information about the disability claims process

Who can I expect to contact me?

A claim representative from the Disability Income Claims Department will contact you within several days of MassMutual receiving notice of your claim to discuss your claim, provide guidance with completing the claim forms, and answer any questions you may have.

How may I submit my claim forms?

You can choose to provide your claim information via mail, fax, e-mail or by telephone. If you choose the telephone option, a MassMutual claim representative will assist you in completing the claim forms that will be sent to you for your review and signature. Please refer to the submission instructions of your claim packet for specific details on ways to return your claim forms.

When should I return the completed claim forms to the Disability Income Claims Department at MassMutual?

You should return the completed claim forms as soon as possible, regardless of your policy’s elimination (waiting) period. Your policy contains important provisions concerning the time in which proof of loss must be presented. You should review your policy for details. We are glad to respond to your inquiries concerning benefits and any other provisions of your policy that may apply to your claim.

Which of my physicians should complete the Attending Physician’s Statement?

The licensed physician, psychiatrist, or psychologist who has been treating you for the claimed disabling condition(s), and can certify to any restrictions and limitations resulting from the condition(s), should complete the Attending Physician’s Statement.

Our Claim Adjudication Process

Throughout the claim process your claim representative will work with internal and external professional resources to assist in the claim evaluation process. Resources may include Registered Nurses, consulting Physicians or Psychologists, Certified Public Accountants, and certified Vocational Rehabilitation Consultants.

We understand the unique barriers that you may face in trying to re-enter the workplace. In
the event that you need assistance returning to work, our certified Vocational Rehabilitation Consultants may be able to offer guidance. Potential services may include ergonomic evaluations and workplace accommodations, assistance with retraining or educational programs, resume building, and job search and job placement.

**How long should I expect the claim determination process to take?**

Every claim is assessed on an individual basis. Gathering the necessary information to assess a claim may be time-consuming. Therefore, it is important that completed authorizations and claim forms are provided to MassMutual as soon as possible. Once all the information necessary to make a decision is received, and if the claim is approved, we will promptly process your initial benefit payment.

**Will my policy premiums be waived?**

Should you meet the benefit eligibility criteria, your premiums will be waived in accordance with your policy provisions as long as you remain disabled under the terms of the policy. You may also receive a refund of premiums. You should continue to pay policy premiums when they become due until you receive notice that your policy premiums will be waived.

**How will my claim be handled if I have several different policies with disability coverage?**

The various proof of loss requirements and available benefits for all of your policies will be identified and taken into consideration during the claim process. Depending on the definition of disability in your contracts, you might qualify for monthly benefits and/or waiver of premium under one contract, but not another.

**Can I expect to receive a personal visit from a MassMutual representative?**

A personal visit, by a member of the Disability Income Claims Department or our authorized
field representative can take place at any time during the claim process, and usually involves fact gathering and answering questions.

**Is my claim information kept confidential?**

Yes. All information is kept strictly confidential. It is not released except with your specific, written authorization, or as required by law.

**Is my financial professional authorized to discuss my claim with MassMutual?**

If you’d like your financial professional to be able to discuss your claim with the Disability Income Claims Department, you must provide your written authorization to MassMutual. This may be accomplished by designating your financial professional as an authorized person on the Authorization to Obtain and Disclose Information form contained in the initial claim packet and submitting this form to MassMutual.

**Once I start receiving benefits, what ongoing information will I be required to provide?**

Monthly verification of continued disability may be needed. Depending upon the nature of the disability and the circumstances of the claim, this information could include completion of a Disability Progress Report form, Attending Physician Statement, and/or financial information regarding your continued benefits eligibility. Upon receipt and review of the ongoing required information, and assuming you remain eligible for benefits, monthly payments will be considered. For ongoing claims, electronic fund transfer of monthly benefits may be a desirable option.

**What financial records should I be prepared to provide and how often will they be required?**

The Disability Income Claims Department may request financial documentation, usually in the form of all personal and business tax returns, for up to five years prior to your date of disability to establish pre-disability earnings and to document employment prior to your disability.

If you are working on a reduced or part-time basis, monthly substantiation of earnings will also be required. Tax returns will likely be requested annually to reconcile the financial information that has been provided.

Please do not discard your financial documents, but have them ready to submit in accordance with the proof of loss provision of your policy.

**Document checklist**

- Insured’s Statement for Disability Benefits
- Authorization for Release of Personal Psychotherapy Notes — HIPAA
- Authorization to Obtain and Disclose Information — HIPAA
- Attending Physician’s Statement of Disability

For more information, please call 1-800-272-2216.