

You should review your Central States Health & Life Co. of Omaha (CSO) credit insurance contract for complete information and details about any coverage, benefits, exclusions or claim questions. The answers below do not alter or modify the terms of your contract.

What is credit disability insurance?

- Credit disability insurance provides a benefit designed to pay the scheduled loan payment, or a portion of it, in the event of your total disability due to a covered sickness or injury.

If claim benefits are payable, who does the payment go to?

- The Creditor Beneficiary is the name of the lender to whom you make your loan payments. Any claim benefits that are payable are first paid to the Creditor Beneficiary to be applied to your outstanding loan balance. The Creditor Beneficiary is the irrevocable beneficiary meaning that it cannot be changed.

What information is required in order for me to file a disability claim?

- A Report of Disability claim form and the Authorization to Disclose Personal Information must be completed after you have been continuously totally disabled beyond your waiting period. CSO will mail this form to you or you can print it off our website, CSO.com. There are 4 parts that must be completed: (1) Loan Information - includes name and address of the lending institution and requires a copy of the monthly loan statement or payment coupon; (2) Insured's Statement - completed by you and includes your signature; (3) Employer's Statement - must be completed by your employer (or you, if self-employed) and; (4) Attending Physician's Statement - must be completed by your medical provider. Incomplete claim forms can delay the processing of your claim.

What is my waiting period?

- Your waiting period is shown on your contract. Your waiting period duration would be one of the following: 7, 14 or 30 days. There are two types of waiting periods: a retroactive waiting period or an elimination waiting period. Please refer to your contract for the definition of your type of waiting period, but these are generally defined as:

- ◆ Retroactive – you have to be totally disabled for the duration of the waiting period, but benefits are paid retroactively back to the date of first medical treatment.
- ◆ Elimination – you have to be totally disabled for the duration of the waiting period, benefits are paid the first day after the required waiting period is met.

Is additional information going to be required?

- If CSO is in receipt of conflicting information, CSO may request additional documentation of your loss, or to determine if your loss is impacted by a pre-existing condition, or to validate your eligibility for coverage. This information may affect or compromise your benefits. Please refer to your contract as it provides information about your rights and CSO's rights.

If CSO requests additional information from my medical provider(s), how long will that take?

- It varies depending on how quickly CSO is in receipt of the authorization and how quickly your medical provider(s) respond to CSO's request. Unfortunately, a part of this process is outside of CSO's control and depends on the medical provider(s) and what their requirements are in order to release medical information.
- It is important that all medical providers are listed on the Authorization to Disclose Personal Information form. If incomplete information is provided at the onset of the claim, it can cause delays in the claim handling.

Do I have to make my next loan payment?

- CSO recommends you continue to keep your loan current until CSO has all the required information necessary to make a claim determination. CSO also recommends you contact your lender for further guidance.

My loan payment is due on the 15th. When will the benefit check go out?

- Claim benefits are paid according to the date you first become totally disabled and have stopped working, as

defined in your contract, and are paid every 30 days as long as you remain totally disabled and continue to submit proof of your continuing total disability. The date benefits are paid may not line up with your loan payment due date. CSO recommends you contact your lender in order to assure your account remains current. The insurance does not cover late fees charged by your lender.

My benefit payment was less than my loan payment. Why?

- Claim benefits are paid according to the dates you are actually totally disabled and after you have stopped working and your waiting period has been met. Payments are 1/30th of the available benefit for each day you remain totally disabled.

I sent in my first claim form. Why is CSO asking for another one?

- The first claim form is considered the initial notice of the total disability. Your contract provides CSO with the right to request ongoing verification of your total disability. Monthly claim forms are required to certify the continuing total disability and must be completed by you and your medical provider(s).
- Sending in the claim forms early can actually delay the claim benefit. Continuing claim forms should be submitted no sooner than the date listed on your Explanation of Benefits (EOB) statement.

My physician charges me a fee each time I have to have the paperwork completed. Does CSO pay for this fee?

- No, the fee charged by your medical provider(s) is between you and your medical provider(s). If your condition worsens, or your disability is considered total and permanent, contact CSO about reducing the frequency of the claim forms. CSO may be able to help, depending on the circumstances.

Please contact our Claim Department at 1-800-826-6587 for any further questions.

My doctor released me to work light duty. I still can't work full time. Why did my benefit payments stop?

- The credit disability insurance you purchased provides benefits while you are totally disabled. It does not cover 'partial disability'. If your medical provider(s) released you to work light duty, then you may no longer be considered 'totally disabled' as defined in your contract and benefits may stop. Please refer to your contract as it provides information about your rights and CSO's rights.

I was disabled while I was making my loan payments. I didn't realize I had the insurance until recently. Now I want to file a disability claim. Will the claim benefits be paid to me, since I was making the payments while I was disabled?

- Your contract specifies under the Proof of Loss provision that written proof of loss must be furnished no later than 15 months (18 months in Hawaii) after the date of loss, unless you are legally incapacitated.
- If you file within the time constraints of the insurance contract and there is an outstanding loan balance, claim benefits will be paid to the Creditor Beneficiary as required by your contract. If the loan was paid off prior to the Scheduled Expiration Date of the Insurance and benefits are still due for the period of total disability prior to date the loan was paid off, then payments will be made directly to you.

I made my loan payments while the claim was being processed. The claim is now payable; will CSO reimburse me for the loan payments I made?

- The Creditor Beneficiary is the name of the lender to whom you make your loan payments. Any claim benefits that are payable are paid to the Creditor Beneficiary first, as long as there is an outstanding balance on the loan. The Creditor Beneficiary is the irrevocable beneficiary meaning that it cannot be changed.

Can I fax my claim form?

- CSO accepts faxed claim forms, however, we request you also mail the original claim form to us.

Please contact CSO's Claim Department at 1-800-826-6587 for any further questions.

CREDIT DISABILITY INSURANCE CLAIMS

COMMONLY ASKED QUESTIONS

