

Disability Income (2025)

Disability Income Interrogatories

		Yes/No Response	Explanation
01	Does the company have Individual Voluntary Short-Term coverage to report?		--
02	Does the company have Individual Voluntary Long-Term coverage to report?		--
03	Does the company have Individual Employer-Paid Short-Term coverage to report?		--
04	Does the company have Individual Employer-Paid Long-Term coverage to report?		--
05	Does the company have Group Voluntary Short-Term coverage to report?		--
06	Does the company have Group Voluntary Long-Term coverage to report?		--
07	Does the company have Group Employer-Paid Short-Term coverage to report?		--
08	Does the company have Group Employer-Paid Long-Term coverage to report?		--
09	Did the reporting entity have a significant event or business strategy change that would affect the data for this reporting period?		--
10	If Yes, explain.	--	
11	Has all or part of the reporting entity's disability income protection business been sold, closed, or moved to another insurer during the reporting period?		--
12	If Yes, explain.	--	
13	Number of class action lawsuits?	--	
14	Additional state specific Underwriting comments (optional):	--	
15	Additional state specific claims comments (optional):	--	
16	Additional comments (optional):	--	

Disability Income Claims Information

	Individual Short- Term	Voluntary Long- Term	Individual Short- Term	Employer Paid Long- Term	Group Short- Term	Volunteer Long- Term	Group Short- Term	Employer Paid Long- Term
17	Pending benefit determinations, beginning of reporting period.							
18	Active paid claims, beginning of reporting period.							
19	Claims received during reporting period.							
20	New paid claim determinations during reporting period.							
21	Claim denials during reporting period.							
22	Paid claims closed during reporting period.							
23	Pending benefit determinations, end of reporting period.							
24	Active paid claims, end of reporting period.							

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Disability Income Claims Decisions Processed

		Individual Short- Term	Voluntary Long- Term	Individual Short- Term	Employer Paid Long- Term	Group Short- Term	Volunteer Long- Term	Group Short- Term	Employer Paid Long- Term
25	Number of claims processed with initial claim decision within 1-14 days.		--		--		--		--
26	Number of claims processed with initial claim decision within 15-30 days.		--		--		--		--
27	Number of claims processed with initial claim decision within 31-45 days.		--		--		--		--
28	Number of claims processed with initial claim decision over 45 days.		--		--		--		--
29	Median Processing Time: The median processing time for claims resulting in payments reported in lines 25 through 28.		--		--		--		--
30	Number of claims processed with initial claim decision within 1-30 days.	--		--		--		--	
31	Number of claims processed with initial claim decision within 31-60 days.	--		--		--		--	
32	Number of claims processed with initial claim decision within 61-90 days.	--		--		--		--	
33	Number of claims processed with initial claim decision over 90 days.	--		--		--		--	
34	Median Processing Time: The median processing time for claims resulting in payments reported in lines 30 through	--		--		--		--	

Disability Income Resulting in Closed Without Payment

		Individual Short- Term	Voluntary Long- Term	Individual Short- Term	Employer Paid Long- Term	Group Short- Term	Volunteer Long- Term	Group Short- Term	Employer Paid Long- Term
35	Number of claims closed without payment within 1-14 days.		--		--		--		--
36	Number of claims closed without payment within 15-30 days.		--		--		--		--
37	Number of claims closed without payment within 31-45 days.		--		--		--		--
38	Number of claims closed without payment over 45 days.		--		--		--		--
39	Median Processing Time: The median processing time for claims closed without payment reported in lines 35 through 38.		--		--		--		--
40	Number of claims closed without payment within 1-30 days.	--		--		--		--	
41	Number of claims closed without payment within 31-60 days.	--		--		--		--	
42	Number of claims closed without payment within 61-90 days.	--		--		--		--	
43	Number of claims closed without payment over 90 days.	--		--		--		--	
44	Median Processing Time: The median processing time for claims closed without payment reported in lines 40 through 43.	--		--		--		--	

Disability Income Claims Denied - Reasons

		Individual Short- Term	Voluntary Long- Term	Individual Short- Term	Employer Paid Long- Term	Group Short- Term	Volunteer Long- Term	Group Short- Term	Employer Paid Long- Term
45	Claimant not covered under the policy as of date of disability onset.								
46	Claimant returned to work during elimination period.								
47	Pre-existing condition.								
48	Claimant not disabled under the policy definition of disabled.								
49	Lack of documentation.								
50	Disability arising from diagnosis excluded under the policy.								
51	Disability due to work-related injury or condition excluded under the policy.								
52	Disability caused by excluded circumstance other than a work-related injury.								
53	Misrepresentation.								
54	All other denials.								

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Disability Income Claims Closed After Initial Payment(s)

		Individual Short- Term	Voluntary Long- Term	Individual Short- Term	Employer Paid Long- Term	Group Short- Term	Volunteer Long- Term	Group Short- Term	Employer Paid Long- Term
55	Claimant returned to work - own occupation/job.								
56	Claimant returned to work - any occupation/job.								
57	Lack of documentation.								
58	Non-participation in evaluation.								
59	Death of claimant.								
60	Failure to participate in rehabilitation.								
61	Misrepresentation.								
62	Claimant had offsetting compensation.								
63	Maximum benefit reached.								
64	Not disabled with respect to "own occupation" but <u>has not returned to work.</u>								
65	Not disabled with respect to "any occupation" but <u>has not returned to work.</u>								
66	Other closed after payment.								

Disability Income Underwriting Activity (Group & Individual)

		Individual Short- Term	Voluntary Long- Term	Individual Short- Term	Employer Paid Long- Term	Group Short- Term	Volunteer Long- Term	Group Short- Term	Employer Paid Long- Term
67	Number of policies in force at the beginning of the reporting period.								
68	Number of new policies issued during the reporting period.								
69	Dollar amount of direct written premium.								
70	Number of policyholder cancellations and non-renewals.								
71	Number of insurer non-renewals.								
72	Number of insurer cancellations.								
73	Number of rescissions within two years from policy issue.								
74	Number of rescissions after two years from policy issue.								
75	Number of policies in force at the end of the reporting period.								

Disability Income Covered Lives Related to Underwriting Activity (Group Only)

		Individual Short- Term	Voluntary Long- Term	Individual Short- Term	Employer Paid Long- Term	Group Short- Term	Volunteer Long- Term	Group Short- Term	Employer Paid Long- Term
76	Number of lives covered under policies in force at the beginning of the reporting period.	--	--	--	--				
77	Number of lives covered under new policies issued during the reporting period.	--	--	--	--				
78	Number of lives covered under policyholder cancellations and non-renewals.	--	--	--	--				
79	Number of lives covered under insurer non-renewals.	--	--	--	--				
80	Number of lives covered under insurer cancellations.	--	--	--	--				
81	Number of lives covered under rescinded policies.	--	--	--	--				
82	Number of lives covered under policies in force at the end of the reporting period.	--	--	--	--				

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Disability Income Complaints and Lawsuits

		Individual Short- Term	Voluntary Long- Term	Individual Short- Term	Employer Paid Long- Term	Group Short- Term	Volunteer Long- Term	Group Short- Term	Employer Paid Long- Term
83	Number of complaints received directly from any entity other than the DOI.								
84	Number of lawsuits open as of the beginning of the reporting period.								
85	Number of new lawsuits opened during the reporting period.								
86	Number of lawsuits closed during the reporting period (total).								
87	Number of lawsuits closed during the reporting period with consideration for the consumer.								
88	Number of lawsuits open as of the end of the period.								

Disability Income Attestation

		First Name	Middle Name	Last Name	Suffix	Title	Comments
89	First Attestor Information						--
90	Second Attestor Information						--
91	Overall Comments for the Filing Period	--	--	--	--	--	