

# Service Guide for Policyholders

*Keep this Service Guide handy for general information on your policy, how to file a claim or simply how to contact us.*

## Obtain a Claim Form:

- Download forms from [colonial-paulrevere.com](http://colonial-paulrevere.com).
- OR-
- Call 1.800.325.4368.

## Completing the Claim Form:

- Complete in full the sections of the claim form that apply to your specific claim. Be sure the information includes a diagnosis from your doctor along with medical bills.
- For disability claims, the doctor needs to verify the dates of disability and furnish dates of treatment. The employer needs to confirm dates you missed from work.
- Be sure to sign all authorizations as instructed.
- To ensure prompt processing, sign and return the certification on page 3, then sign, date and return the claims authorization on page 7.

## Optional Services:

Page 1 of the claim form explains optional services you may select. You must initial each option you choose. These options allow us to:

- Release information to your sales representative, plan administrator or a family member.
- Communicate claims information via electronic messaging to your home phone number.
- Send any applicable claim benefits by overnight delivery and deduct the fee from your claim payment.

## Submitting Your Claim:

- Fax the form to 1.800.880.9325. Include your name and Social Security number on each page of your fax. If you fax the claim, you do not need to mail the original document to us; keep this for your records.
- OR-
- Mail the completed forms to: P.O. Box 100195, Columbia, SC 29202-3195

## Wellness Claims:

- For wellness screenings performed less than 12 months from the date of your claim filing, call 1-800-325-4368.
- For wellness screenings performed more than 12 months from the date of your claim filing, submit a bill showing the date and type of your wellness screening and name and telephone number of the provider who performed the test.

## Resolving Your Claim:

- You will be notified by telephone when information is received regarding your claim.
- If you selected the electronic messaging option, you will receive a call once the claim is processed.
- If your claim is for a sickness or health condition occurring within the first year, we may need to determine whether you have a pre-existing condition. If we have to contact your doctor and/or request copies of the medical records, it may lengthen our processing time.
- We will notify you by letter if any additional information is needed from your doctor or any other source(s). We welcome your assistance in encouraging your doctor to provide the needed information as quickly as possible.
- Our goal is to provide prompt and accurate claims service. If you would like to check the status of your claim, please call our automated service line at 1.800.325.4368.

## Important Reminders:

- When mailing the claim form or other information, keep a copy for your records.
- If you have questions at any point, call 1.800.325.4368.
- Sign your claim form at the bottom of pages 1 and 3.
- Read and sign the claims authorization on page 7. We cannot obtain additional information from your doctor without proper consent.

## Ongoing Claims

Total disability benefits provided by your coverage are based on disability information submitted on your claim form. Because we cannot pay benefits for time you have not yet missed from work, you may be asked to provide verification of your ongoing disability and the dates you are unable to work. All disability dates must be confirmed by your doctor and your employer. Include medical treatment dates on your claim form.

## Change Requests

### Change of Employment

If you change jobs or take a leave of absence, you may continue your individual coverage at the premium you are currently paying. To continue your individual coverage, contact your benefits representative or call our Service Center.

### Policy/Certificate Changes

The following changes must be requested in writing:

- Cancellations.
- Loans.
- Cash surrenders.
- Withdrawals.
- Ownership changes.
- Beneficiary changes.
- Assignments.

Fax or mail the completed Request for Service form available on [colonial-paulrevere.com](http://colonial-paulrevere.com).

Changes made by telephone include:

- Name/Address
- Payment method information - converting from payroll deduction to individual pay

### Changes and Flexible Benefits Plans

The Internal Revenue Service issues regulations that govern flexible benefits plans. One of the IRS regulations requires employers to place certain limits on when their employees can change the elections they make under the plan. If you purchased coverage with pre-tax dollars, you signed an election form at the time of application, which stated that the election will remain in effect and cannot be revoked or changed during the plan year unless the revocation or new election is because of a change in status. A change in status is defined as a change in legal marital status, number of dependents, employment status, dependent satisfies or ceases to satisfy eligibility requirements, residence, adoption assistance. The election change must be consistent with the change of status.

### Taxability of Benefits

If you pay your premiums under a flexible benefits plan with pre-tax dollars, or if your employer pays part or all of your premiums, some of these benefits may be taxable. If your benefits are taxable, you may receive a 1099 or W-2 form from us and/or a W-2 form from your employer that will include the amount you should report as taxable income to the IRS. If you have questions about taxability of benefits, discuss them with your employer or contact our Service Center and ask to speak to a tax specialist.

### Contact Us

Service Center  
P.O. Box 100195  
Columbia, SC 29202-3195

**1.800.325.4368**; Monday through Friday, 8 a.m. – 7 p.m., Eastern Time. Automated service information is available 24 hours a day, 365 days a year.

- Check claim status of your claim.
- File Wellness claims.
- Other policy questions.

Have your Social Security or your policy number ready when you call.

### Spanish-Speaking Customers

**1.800.325.4368**

### Hearing-Impaired Customers

**Who Have TDD 1.803.798.4040**

(Telecommunications device for the deaf)

Colonial Voluntary Benefits products are underwritten by:  
**The Paul Revere Life Insurance Company, Worcester, MA**  
Administrative office: Colonial Voluntary Benefits  
1200 Colonial Life Boulevard, Columbia, SC 29210  
[colonial-paulrevere.com](http://colonial-paulrevere.com)

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