

LTD Payment Options

TO BE COMPLETED BY THE CLAIMANT

FORM



1133 SW Topeka Blvd, Topeka, KS 66629-0001
Phone (785) 273-9804 or Toll-free (800) 530-5989
FAX (785) 273-6121 advanceinsurance.com

Claimant:	Date of disability:
Policyholder:	Policy No.:
Social Security No.:	Date of birth:

The policy under which you are covered provides that Long Term Disability (LTD) benefits will be reduced by the amount of Social Security Disability benefits that **you, your spouse, and children**, may be eligible to receive for this disability. The policy issued to the Policyholder, also provides that if you do not apply for Social Security Disability benefits, the LTD benefits will be reduced by the amount of Social Security Disability benefits **you, your spouse, and children** would be eligible to receive if application had been made.

AICK understands that the Social Security Administration will not make a decision concerning your benefits in a timely manner. Until you receive word of your approval for the Social Security Disability benefits, your LTD benefit payments can be handled in one of the following two (2) ways.

You must choose one of these options by checking box #1 or box #2 and signing this form below.
If you do not apply for Social Security Disability benefits, we will use approach #1.

1. Estimate your Social Security Disability benefits and begin deducting the estimated benefits from your monthly LTD benefit.

We can estimate the amount of Social Security Disability benefits you, your spouse and children will receive and begin deducting this amount from your monthly LTD benefit. If we use this method, we will recalculate your LTD benefit after you begin receiving Social Security Disability benefits and make any necessary adjustments.

2. Pay you the full LTD benefit amount.

If you chose this option, you are agreeing to REPAY ADVANCE INSURANCE COMPANY OF KANSAS THE TOTAL OVERPAYMENT AMOUNT IN ONE LUMP SUM.

Your monthly LTD benefit will not be reduced by the estimated Social Security Disability benefit amount. This will result in you being overpaid on your LTD benefits. If you choose this option, you must supply us with a copy of your Social Security application, and any correspondence you receive from Social Security. When Social Security makes an award, we will reduce your monthly LTD benefit by the amount of Social Security benefits you, your spouse, and children receive from Social Security and calculate the overpayment of your benefits. You will be required to repay the overpayment in one lump sum.

I understand that any amount I am overpaid on my Long Term Disability benefits shall become due and payable, in one lump sum, immediately upon my receipt of benefits from Social Security Disability. I will notify Advance Insurance Company of Kansas (AICK) immediately of my approval for Social Security Disability benefits.

I do hereby agree to repay to AICK any overpayment of this Long Term Disability claim paid to me by AICK. I understand that should I fail to reimburse AICK of such overpayment within 60 days of my SSDI benefit letter, AICK may seek any and all remedies to collect the overpayment, including the utilization of a collection agency or the filing of a civil action.

(Signature of Claimant)

(Signature of Witness)

(Date)

(Date)