RGA GROUP DISABILITY CLAIMS APPEALS

The Group Disability Claims Appeals Survey is a first-ever snapshot of common practices across the U.S. market. It reveals what group disability carriers can expect from this complex process.

DEDICATED

What are the average caseloads of staff reviewing disability claims appeals?

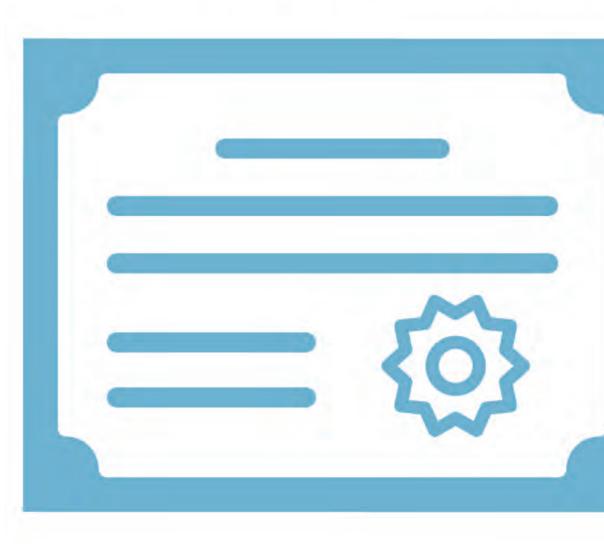


AVERAGE U.S. CASELOADS **EMPLOYEE**

All U.S. carriers in the survey used dedicated (in-house staff) to manage appeals. Appeals staff typically receive case assignments based on availability versus complexity.

HIGH SKILL

What are the average tenure levels of staff reviewing disability claims appeals?



OF INSURERS CONSIDERED THE ROLE OF APPEALS SPECIALISTS TO BE AT A HIGHER LEVEL THAN LONG-TERM DISABILITY CLAIM ANALYSTS.

Appeals specialists have an average tenure of 11 years in disability claims experience.

ADVERSE DECISION

What are the top five reasons for adverse decisions on long-term disability (LTD) claim appeals?

- 1. Not totally disabled (Own Occ/Any Occ)
- 2. Pre-existing conditions
- 3. Failure to provide proof of loss
- 4. Conditions in the policy
- 5. Eligibility issues



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PROCESS CHECK How many insurers require at

least one external peer review during the appeals process? OF U.S. CARRIERS REQUIRE PEER

REVIEW (LONG-TERM DISABILITY)

HUMAN TOUCH How many insurers are

currently incorporating artificial intelligence into appeal reviews?

IN THE U.S., THE DISABILITY CLAIMS

APPEALS REVIEW PROCESS IS ENTIRELY MANUAL

FAC.T.6 **CONSIDERING THE**

EMPLOYEE RETIREMENT INCOME SECURITY ACT

What are the areas of highest concern among the participant group around

these strict guidelines set by

the U.S. Department of Labor?

- TIGHT TIMELINES FOR SHARING
- LACK OF REGULATORY

INFORMATION WITH THE

ACCESS TO PHYSICIAN REVIEWERS

CLAIMANT



FOR MORE INFORMATION, CONTACT US