

EMPLOYEE USER GUIDE

THE HARTFORD'S ABILITY ADVANTAGE



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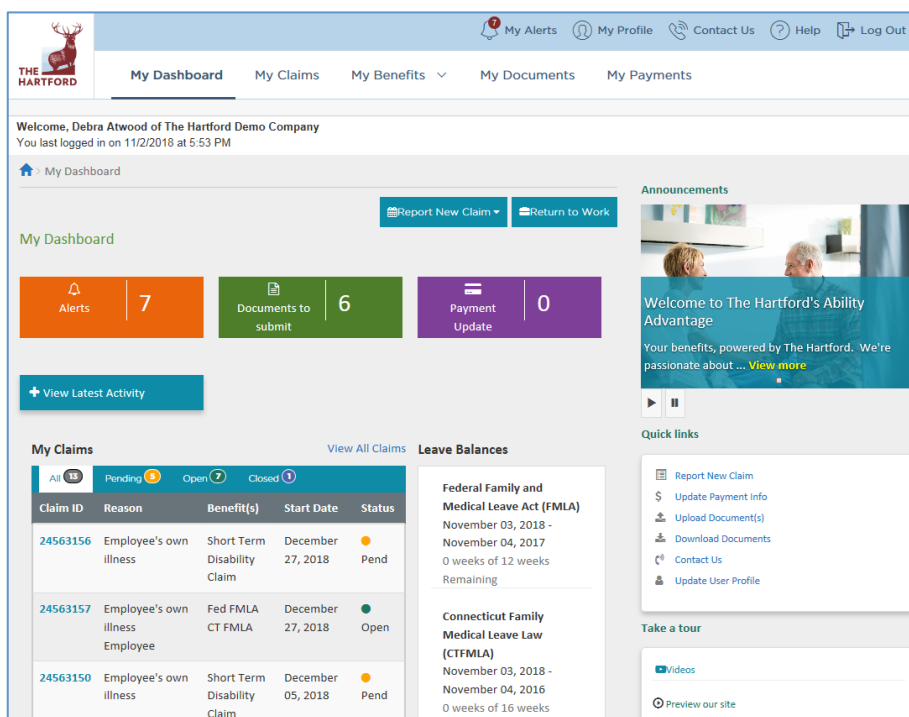
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Your benefits with The Hartford include disability insurance, which replaces a percentage of your income in case you can't work. Thanks for trusting us to bring you this important coverage.

We've made it easier than ever to access your disability benefits with The Hartford's Ability Advantage. It's a one-stop, secure portal that lets you manage your disability claims online – through your phone, laptop or tablet.

This guide will give you tips on how to start a claim, personalize your claim payments, schedule a call, and much more. It all adds up to a simpler customer experience.

Our website makes it easy to access your claims. You get online access to claims information, status updates and more. And with a mobile responsive design, you can use these features anywhere and at any time.



The screenshot shows the 'My Dashboard' of The Hartford's Ability Advantage portal. At the top, there's a navigation bar with links for 'My Alerts', 'My Profile', 'Contact Us', 'Help', and 'Log Out'. Below this, a welcome message for 'Debra Atwood of The Hartford Demo Company' is displayed. The dashboard features several key sections:

- My Dashboard Summary:** Includes buttons for 'Report New Claim' and 'Return to Work'. Below these are three colored boxes showing counts: 'Alerts' (7), 'Documents to submit' (6), and 'Payment Update' (0).
- My Claims Table:** A table with columns for Claim ID, Reason, Benefit(s), Start Date, and Status. It lists three claims:

Claim ID	Reason	Benefit(s)	Start Date	Status
24563156	Employee's own illness	Short Term Disability Claim	December 27, 2018	Pend
24563157	Employee's own illness	Fed FMLA CT FMLA	December 27, 2018	Open
24563150	Employee's own illness	Short Term Disability Claim	December 05, 2018	Pend
- Announcements:** A section titled 'Welcome to The Hartford's Ability Advantage' with a video player and a 'View more' link.
- Quick links:** A list of links including 'Report New Claim', 'Update Payment Info', 'Upload Document(s)', 'Download Documents', 'Contact Us', and 'Update User Profile'.
- Take a tour:** A section with a 'Videos' link and a 'Preview our site' button.

Here are some features you may be able to use within the portal*:

- Get a claim status
- Take action through online alerts
- View copies of letters and forms
- Complete and sign forms online
- View and print copies of pay stubs
- Sign up for direct deposit or request a prepaid debit card
- View and print copies of your tax forms (1099, W2)
- Report a new claim or leave**
- Add time to intermittent leave
- Tell us you returned to work
- Contact The Hartford and receive an email response
- Schedule a call with your claims analyst

* Your employer may not offer all of these options.

**Your employer will be notified of your request for leave.

MY DASHBOARD

The employee dashboard contains a snapshot of all of the important details:

- Most recent updates are provided through alerts.
- Electronically complete and sign important documents.
- Upload scanned copies of required forms.
- Latest activities, along with a diary of all activities.
- Claim status and access to claim details.
- Report a new claim or a return to work.
- Quickly contact The Hartford in writing or schedule a call back.
- Payments and other benefits.
- Copies of letters and other important forms.

The screenshot shows the 'My Dashboard' page for Debra Atwood. The top navigation bar includes links for My Alerts, My Profile, Contact Us, Help, and Log Out. Below the navigation bar, the dashboard is divided into several sections:

- Welcome, Debra Atwood of The Hartford Demo Company**: You last logged in on 11/2/2018 at 5:53 PM.
- My Dashboard**: A central area with three main cards: Alerts (7), Documents to submit (6), and Payment Update (0). There is also a '+ View Latest Activity' button.
- My Claims**: A table showing claim details. It includes tabs for All (13), Pending (5), Open (7), and Closed (1). The table has columns for Claim ID, Reason, Benefit(s), Start Date, and Status.
- Leave Balances**: A section showing Federal Family and Medical Leave Act (FMLA) and Connecticut Family Medical Leave Law (CTFMLA) balances.
- Announcements**: A section with a video player and a 'Welcome to The Hartford's Ability Advantage' message.
- Quick links**: A list of links including Report New Claim, Update Payment Info, Upload Document(s), Download Documents, Contact Us, and Update User Profile.
- Take a tour**: A section with a 'Videos' link and a 'Preview our site' button.

Claim ID	Reason	Benefit(s)	Start Date	Status
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24563157	Employee's own illness	Fed FMLA CT FMLA	December 27, 2018	Open
24563150	Employee's own illness	Short Term Disability Claim	December 05, 2018	Pend

Make it easy on yourself.

Visit www.abilityadvantage.thehartford.com to register and start using today.

MY CLAIMS

Real-time access to claim details:

- Claim status.
- Approval dates.
- Plan details.
- Payment details, including explanation of benefits when The Hartford is issuing the payment.
- A listing of providers The Hartford is working with.
- Workers' compensation carrier integration.
- Details of a vocational rehabilitation program.
- A listing of offsets and deductions from benefit payments.
- Appeal status.
- Quick access to important tasks and a diary of events.
- Quickly report a new claim or a return to work.

The screenshot shows the 'My Claims' section of The Hartford's employee portal. At the top, there's a navigation bar with 'My Dashboard', 'My Claims' (highlighted with a red circle), 'My Benefits', 'My Documents', and 'My Payments'. Below this, a welcome message for Debra Atwood is displayed. A search bar is present, and a filter bar shows 'All' (13), 'Pending' (5), 'Open' (7), and 'Closed' (1). The main content area lists three claims in a table.

Claim ID	Reason	Benefit(s)	Start Date - Through Date	Status	Claim Representative
24563156	Employee's own illness	Short Term Disability Claim	December 27, 2018- NA	Pend	LIM, CHRISTINE
24563157	Employee's own illness Employee	Fed FMLA CT FMLA	December 27, 2018- December 31, 2018	Open	THE HARTFORD DISABILITY AND LEAVE MANAGEMENT
24563150	Employee's own illness	Short Term Disability Claim	December 05, 2018- NA	Pend	LEACH, PAUL

Claim Details	Health Care Provider	Vocational Rehabilitation	Workers' Compensation	Offsets and Deductions	Appeals
Status: Open Benefits: Temp Partial Carrier: Crawford & Co Claim Number: AB156959 Workers' Compensation Offsets					

Claim Details	Health Care Provider	Vocational Rehabilitation	Workers' Compensation	Offsets and Deductions	Appeals																										
Offsets <table border="1"> <thead> <tr> <th>Effective date</th> <th>End Date</th> <th>Offset Description</th> <th>Offset Type</th> <th>Offset Amount(\$)</th> <th>Offset Frequency</th> </tr> </thead> <tbody> <tr> <td>March 08, 2017</td> <td>March 08, 2018</td> <td>Workers Comp Reimbursement</td> <td>Add to Gross Benefit</td> <td>35</td> <td>Weekly</td> </tr> </tbody> </table> Deductions <table border="1"> <thead> <tr> <th>Effective date</th> <th>End Date</th> <th>Deduction Description</th> <th>Deduction Type</th> <th>Tax Type</th> <th>Deduction Amount (\$)</th> <th>Deduction Frequency</th> </tr> </thead> <tbody> <tr> <td>March 08, 2017</td> <td>March 08, 2018</td> <td>401(k) Loan Repayment 25</td> <td></td> <td>Post-Tax</td> <td>15</td> <td>Weekly</td> </tr> </tbody> </table>						Effective date	End Date	Offset Description	Offset Type	Offset Amount(\$)	Offset Frequency	March 08, 2017	March 08, 2018	Workers Comp Reimbursement	Add to Gross Benefit	35	Weekly	Effective date	End Date	Deduction Description	Deduction Type	Tax Type	Deduction Amount (\$)	Deduction Frequency	March 08, 2017	March 08, 2018	401(k) Loan Repayment 25		Post-Tax	15	Weekly
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Claim Details	Health Care Provider	Vocational Rehabilitation	Workers' Compensation						
Offsets and Deductions	Appeals <table border="1"> <thead> <tr> <th>Due date</th> <th>Appeal status</th> <th>Appeal decision</th> </tr> </thead> <tbody> <tr> <td>September 16, 2018</td> <td>Closed</td> <td>Upheld</td> </tr> </tbody> </table>			Due date	Appeal status	Appeal decision	September 16, 2018	Closed	Upheld
Due date	Appeal status	Appeal decision							
September 16, 2018	Closed	Upheld							

MY DOCUMENTS

Real-time access to documents:

- Requested documents that can be electronically completed, signed and submitted.
- Copies of all claim letters.
- Copies of documents that have been completed and signed electronically or scanned and uploaded.
- Blank forms can be printed, completed and then either mailed, faxed or uploaded.
- Copies of W2 and 1099 tax forms.
- Access to upload documents scanned to the computer or captured via a smartphone.

The screenshot shows the 'My Documents' page for a user named Debra Atwood. The page has a navigation bar with links to My Alerts, My Profile, Contact Us, Help, and Log Out. Below the navigation bar, there are tabs for My Dashboard, My Claims, My Benefits, My Documents (highlighted with a red circle), and My Payments. The main content area displays a document titled 'Authorization to Share and Use Medical Information' with a claim number of 24562364 and a date of August 16, 2018. The document is in the 'Requested Documents' tab. To the right of the document, there is a 'Did you know?' section with a video thumbnail and a 'Quick links' section with links to Report New Claim, Update Payment Info, Upload Document(s), Download Documents, Contact Us, and Update User Profile. At the bottom right, there is a 'Take a tour' section with links to Videos and Preview our site.

The screenshot shows the 'My Documents' page with the 'Letters' tab highlighted with a red circle. The page displays a list of documents under the 'Requested Documents' tab. The list has columns for Link, Name, Claim Id, and Created On. There are three documents listed:

Link	Name	Claim Id	Created On
View	EE - Mixed Status	24563547	10/29/2018
View	EE - Prelim Designation	24563547	10/29/2018
View	Update Medical Authorization Form	24562364	10/07/2018

Requested Documents

Letters

Electronic Documents

Download Forms

Tax Forms

Show All

Direct Deposit Form

 direct deposit form

My Documents

My Documents

Upload Document(s)

Requested Documents

Letters

Emails

Electronic Documents

Download Forms

Tax Forms

You can now download copies of tax forms, including form W2, 1099 INT and 1099 MISC. There is no charge to download these forms and it is easy. Select the form you want to download. Once you have downloaded the form, you will be able to select another form to download. Forms for the prior year will be available by January 31 of the current year.

Tax Form W-2

Year: 2014

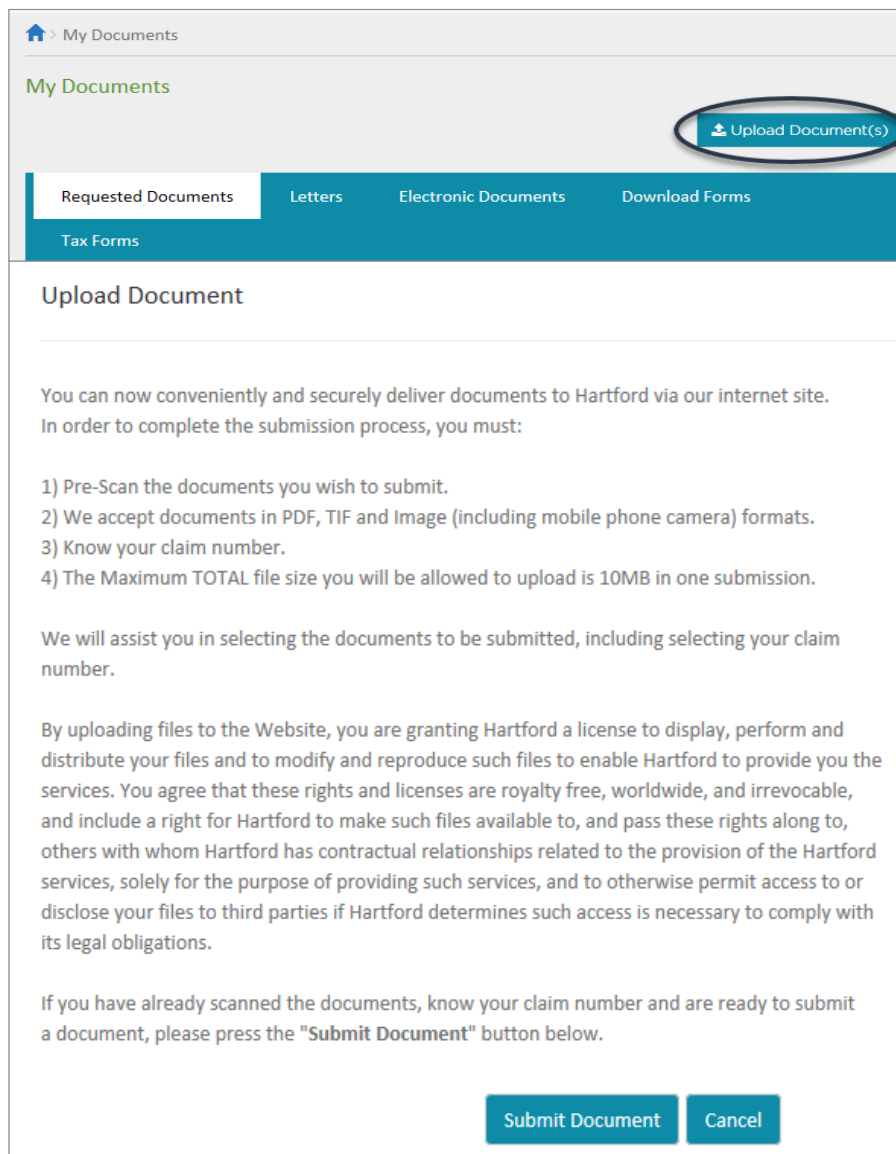
Tax Form W-2

Year: 2016

DOCUMENT UPLOAD

How to upload a document:

- Scan the document(s) or capture photos using a smartphone camera.
- Select "Upload Document." This can be found on "My Documents" and also in the Quick Links on "My Dashboard."
- Select the claim number.
- Browse and select the file.
- Select "Add Another File" and repeat until done.
- Click "Submit Documents."



The screenshot shows a web interface for 'My Documents'. At the top, there is a breadcrumb 'Home > My Documents' and a green heading 'My Documents'. A red circle highlights the 'Upload Document(s)' button in the top right corner. Below this is a teal navigation bar with tabs: 'Requested Documents' (selected), 'Letters', 'Electronic Documents', 'Download Forms', and 'Tax Forms'. The main content area is titled 'Upload Document' and contains the following text:

You can now conveniently and securely deliver documents to Hartford via our internet site. In order to complete the submission process, you must:

- 1) Pre-Scan the documents you wish to submit.
- 2) We accept documents in PDF, TIF and Image (including mobile phone camera) formats.
- 3) Know your claim number.
- 4) The Maximum TOTAL file size you will be allowed to upload is 10MB in one submission.

We will assist you in selecting the documents to be submitted, including selecting your claim number.

By uploading files to the Website, you are granting Hartford a license to display, perform and distribute your files and to modify and reproduce such files to enable Hartford to provide you the services. You agree that these rights and licenses are royalty free, worldwide, and irrevocable, and include a right for Hartford to make such files available to, and pass these rights along to, others with whom Hartford has contractual relationships related to the provision of the Hartford services, solely for the purpose of providing such services, and to otherwise permit access to or disclose your files to third parties if Hartford determines such access is necessary to comply with its legal obligations.

If you have already scanned the documents, know your claim number and are ready to submit a document, please press the "Submit Document" button below.

At the bottom, there are two buttons: 'Submit Document' and 'Cancel'.

Upload Document

Select Claim:

24563157-(Leave Of Absence)

ATTENTION: The ability to upload documents is dependent upon the speed of your individual internet connection. In the event you experience a timeout while attempting to upload, please reduce the size of your file(s) and try again. Remember, you may only submit up a maximum of up to 10 MB per attempt.

Upload Files:

Upload File...

Browse

Remove File

Add another file

Submit Documents

Cancel

Note:

- Maximum file size is 5 MB per document.
- Maximum submission size is 10 MB.
You can make as many submissions as you want.
- Check the quality of the submission by selecting “Electronic documents” within 15 minutes of the submission.

MY PAYMENTS

- See a listing of all benefit payments issued by The Hartford over the prior three years.
- View and print copies of detailed pay stubs.
- Deposit your benefits directly into your checking account or on to a prepaid debit card. This option is also available by selecting “My Profile” at the top of our site.
- Use a credit or debit card to make a payment toward an overpayment balance, if you have one.

Welcome, Debra Atwood of The Hartford Demo Company
You last logged in on 11/3/2018 at 5:18 PM

Debra Atwood Payments

Update Payment Options Make Payments

Latest Payments

1/19/2018 Claim #24562356

1/12/2018 Claim #24562356

Did you know?

Report a new leave
Learn how to report a new leave to us
Watch a video

View All Payments

* If payment method = ATP – C, this is the date that The Hartford performed the calculation which was sent to your employer.
* If payment method = Check, this is the date the check was sent from The Hartford.
** If payment method = ATP – C, this is the benefit amount as calculated by The Hartford, which has been sent to your employer.
**If payment method = Check, this is the actual amount of the Check.

Claim Number	Payment Date *	Payment Method	Payment Number	Payment From	Payment To	Payment Source	Amount **	View Pay Stub
24562356	1/19/2018	Check	1010100	1/15/2018	1/19/2018	Your Employer	\$445.39	
24562356	1/12/2018	Check	1010000	1/9/2018	1/21/2018	Your Employer	\$345.39	

**You won't see "My Payments" if your employer pays you through salary continuation or if The Hartford hasn't issued a benefit payment to you.

PAY STUBS

Hartford Life and Accident Insurance Company P. O. Box 14869 Lexington, KY, 40512-4869, USA			Pay Group: STW- HAA E2E WD (STD/INS) Claim No.: 24562356 Earnings Begin Date: 01/15/2018 Check#: 1010100 Earnings End Date: 01/19/2018 Check Date: 01/19/2018		
--	--	--	--	--	--

DEBRA ATWOOD 66 CHIMNEY CORNER PKWY GREENWICH, CT 06001	Employee ID: 98765435 EOB NO.: 25415759 Days Paid: 5	TAX DATA: Federal CT State Marital Status: Single Single Allowances: 0 0 Addl. Pct.: 0 0 Addl. Amt.: 0.00 0.00
---	--	---

BENEFIT INFORMATION	
----- Benefits Under Your Plan -----	
Benefit Salary: (amount from which benefits are calculated)	2,134.62
Benefit Percentage of Earnings Under Your Plan:	60% 0 weeks to 25 weeks
Benefit Amount:	\$1,280.77
Minimum Benefit Under Your Plan:	00.00
Maximum Benefit Under Your Plan:	500.00
Frequency:	WEEKLY

BENEFITS BEING PAID FOR THIS PAY PERIOD			OFFSET INFORMATION		
Description	Amount	Pay Period	----- Offsets applied to your benefit for this pay period -----		
Description	Amount	Pay Period	Description	Amount	Pay Period
Benefit Amount:	500.00	5 days			

HOURS AND EARNINGS						TAXES			
Description	----- Current -----			----- YTD -----			Description	Current	YTD
	Rate	Hours	Earnings	Hours	Earnings				
Gross Benefit Non-Taxable	0.00	0	500.00	0	900.00				
Total:			500.00		900.00	Total:	0.00	0.00	

BEFORE-TAX-DEDUCTIONS			AFTER-TAX-DEDUCTIONS			EMPLOYER PAID BENEFITS		
Description	Current	YTD	Description	Current	YTD	Description	Current	YTD
Dental Premium	3.28	6.56	Life Premium After-Tax	3.84	7.68			
Medical Premium	44.88	89.76	LTD Premium After-Tax	1.38	2.76			
Vision Premium	1.23	2.46						
Total:	49.39	98.78	Total:	5.22	10.44	*Taxable		

Total Gross	Fed Taxable Gross	Total Taxes	Total Deductions	Net Pay
Current:	500.00	0.00	54.61	445.39
YTD:	900.00	0.00	109.22	790.98

NET PAY DISTRIBUTION	
Check # 1010100	445.39
Total:	445.39

COMPANY MESSAGE: As of November 1, 2017, The Hartford became the administrator and reinsurer for the Aetna's group Life and Disability insurance coverage issued to your employer. Customer Service can be reached at (866)226-8143.

PERSONAL MESSAGE:

OVERPAYMENTS

How to make a payment:

- Select the option “Make a Payment” on “My Payments.” You’ll see the amount due.
- Enter the amount you’d like to pay and also select if you’ll be using a debit or credit card.
- Click “Open Secure Payment Page” and you’ll be taken to an external site that processes payments for The Hartford.
- You’ll be asked to enter your card number, expiration date, special code value and the name on the card.
- You’ll be provided with a receipt, and The Hartford will receive the funds within two business days.

The screenshot shows the top navigation bar of The Hartford's online portal. The 'My Payments' tab is circled in blue. Below the navigation bar, a welcome message for Debra Atwood is displayed. A breadcrumb trail shows 'Debra Atwood Payments'. At the bottom right, two buttons are visible: 'Update Payment Options' and 'Make Payments', with the latter being circled in blue.

The screenshot shows the 'My Overpayments' page. It includes a heading 'My Overpayments' and a paragraph explaining the payment process. Below this is a table with the following data:

Claim Number	Product	Overpayment	Payment Amount	Payment Option Selected
☐ 1517171	Short Term Disability Claim Statutory	\$517.79	\$ 0 . 00	☐ Credit Card ☐ Debit Card

Below the table is a large blue button labeled 'Open Secure Payment Page'.

The Hartford does not store your credit or debit card information. Your information will be collected in a secured manner.

CONTACT US

Contact The Hartford's claim team:

- Email our claim team anytime, anywhere.
- Enter your email address, select the claim and a category and then type your message. We'll email you back, usually within one business day.
- Call or fax us.
- Schedule an appointment and we'll call you at a time convenient for you.

THE HARTFORD

My Alerts My Profile **Contact Us** Help

My Dashboard My Claims My Benefits My Documents My Payments

Welcome, Debra Atwood of The Hartford Demo Company
You last logged in on 11/2/2018 at 5:53 PM

Home > Contact Us

Contact Us

Contact Us My Contacts Schedule A Call

Your E-Mail Address:
darren.stiles@thehartford.com

Claim ID / Claim Type
-Claim ID / Claim Type-

Category
-Select Category-

Message
4000 characters remaining
Send

Address:
PO Box 14869
Lexington KY 40512

Hearing Impaired:
1-800-735-1232

Fax:
833-357-5153

Telephone:

Leave of Absence	888-301-5615
Long Term Disability	888-301-5615
Paid Family Leave	888-301-5615
Premium Waiver	888-301-5615
Short Term Disability	888-301-5615

Questions about critical illness, accident, and/or hospital indemnity coverage?
Phone 1-877-248-5077
Fax 1-469-417-1970
www.thehartford.com/benefits/myclaim

WebTPA
P.O. box 99906
Grapevine, TX 76099

Did you know?
Report a new leave
Learn how to report a new leave to us

Quick links

- Report New Claim
- Update Payment Info
- Upload Document(s)
- Download Documents
- Contact Us
- Update User Profile

Take a tour

- Videos
- Preview our site

SCHEDULE A CALL

How to schedule a call:

- Select the eligible claim.
- Select the date and time that is most convenient.
- Provide the call back number and a brief explanation of what you would like to discuss. This will allow us to prepare for the call.
- You can either select to receive an email or a text message confirming your appointment.
- You can either select to receive an email or a text message reminding you of the call.

Contact Us

Contact UsMy ContactsSchedule A Call

Earliest available time
November 5, 2018 11:30 AM Eastern

Choose a time slot from the list below

Available appointments for claim owner PAUL LEACH

Wednesday	November 7, 2018	02:00 PM Eastern
Wednesday	November 7, 2018	03:00 PM Eastern
Thursday	November 8, 2018	12:00 PM Eastern
Thursday	November 8, 2018	02:00 PM Eastern
Thursday	November 8, 2018	04:00 PM Eastern
Friday	November 9, 2018	03:00 PM Eastern
Friday	November 9, 2018	04:00 PM Eastern
Friday	November 9, 2018	05:00 PM Eastern

Contact Us

Contact UsMy ContactsSchedule A Call

Tell us how to send you a confirmation of your appointment. In addition, you can also ask us to remind you two hours prior to the call.

Call me at this number

(xxx) xxx-xxxx

Email Address

abc@xyz.com

Mobile Number:

(xxx) xxx-xxxx

Confirmation (Select one)

☐ Email:

☐ Text () _ - _

☐ Message:

Reminder (Optional)

☐ Email:

☐ Text () _ - _

☐ Message:

Please let us know what you want to discuss

[Total characters typed:0 | Total characters remaining:400]

Back

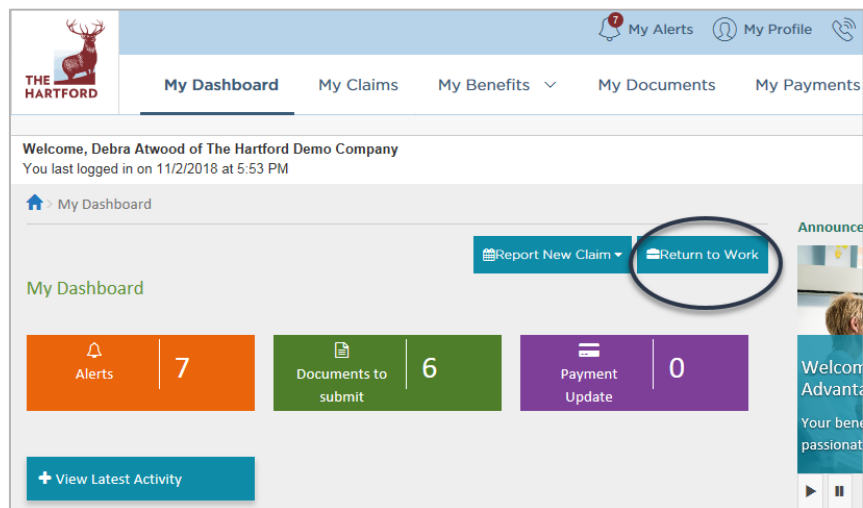
Reset

Submit Appointment

RETURN TO WORK

Back to normal:

- Report a return to work.
- Tell us if you have returned to full or partial duty.
- Tell us if you have any restrictions at work.
- Tell us if your return to work plan has changed.

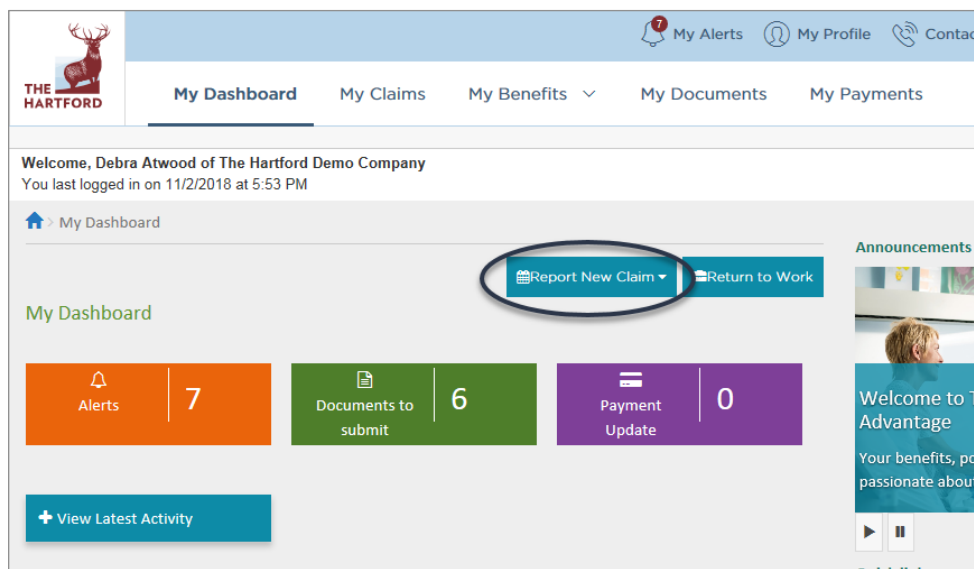


This screenshot shows the 'Return To Work' form. The user is Debra Atwood of The Hartford Demo Company, last logged in on 11/2/2018 at 5:53 PM. The form title is 'Return To Work'. It includes a 'Work Status' field with a red 'Not At Work' label and an 'Actual Return to Work Date' field. Below this, there is a question: 'What is your return to work status?'. There are two radio button options: 'Yes, I have already returned to work' and 'No, I have not returned to work'. A 'Report Return To Work' button is at the bottom right.

REPORT A NEW CLAIM

Out of work:

- Report a new claim to The Hartford online.
- Complete a claim you started with our customer care team.
- We'll ask you for information about your loss, including the date you last worked, the reason you need to be out of work, and when you think you might be able to return to work.
- If we need it, we'll ask for your doctor's information and some information about your job duties.
- Once complete, you'll receive a claim number.



Create New leave

Home > Create new leave

Are you ready to initiate your claim?

In preparation to answer questions relating to your disability, please have the following information available:

- Doctor's name, telephone number, and fax number

Note: Initiating a Disability Claim may result in the creation of an associated Leave of Absence Claim. You will be notified if this occurs upon completion of the Intake Script where you will be provided both a Disability and Leave of Absence claim number.

Please note: If you go beyond this page you will initiate a claim. Your employer will be notified and your pay may be impacted.

When 'Next page' is pressed, the claim initiation process will begin. You will be asked a series of questions related to your request for leave. Please note that all questions with a red asterisk (*) must be completed. All other questions should be completed only if applicable.

To continue, select "Next Page", otherwise select "Return to Dashboard" button to return to the previous page.

[Return to Dashboard](#) [Next Page](#)

REPORT A NEW CLAIM

Contact Information	Claim Information	Provider Details	Employer Information	Insurance Information	Customer Specific/Claim Creation	Summary/What happens next
Last saved: 11/3/2018 4:34:13 PM						
Contact Information						
Please confirm the below information:						
Employee First Name	DEBRA	Employee Last Name	ATWOOD	Employee Middle Initial		
Suffix		Employee Id	31788	SSN	--	
Address1	690 ASYLUM AVE					
Address2	NPA - CO DARREN STILES					
City	HARTFORD	State	Connecticut	Zip	06115	
Do you speak English?	☒ Yes ☐ No					
Primary Phone Number:	Home	(959) 999-9999		☐ Country Code		
Are there any other numbers you would like to provide us?	☐ Yes ☐ No					
If we are unable to reach you, may we have your authorization to leave a message containing confidential medical and benefit information?	☐ Yes ☐ No					
Do you plan to receive mail at a temporary address while on leave?	☐ Yes ☐ No					
Personal E-mail Address:						☐ No E-mail Address ☒ Prefer not to provide
* Email you can access outside work						
If you provide an e-mail address, you'll hear from us sooner when we have an update about your claim. It may help your claim get resolved more quickly.						

Contact Information	Claim Information	Provider Details	Employer Information	Insurance Information	Customer Specific/Claim Creation	Summary/What happens next																																																																																																																																																																								
Last saved: 11/3/2018 4:35:52 PM																																																																																																																																																																														
Claim Information																																																																																																																																																																														
Can you tell us why you will be absent from work? ---Select---																																																																																																																																																																														
Below is the time that has been requested:																																																																																																																																																																														
<<< Prev Month November 2018 Next Month >>> <table border="1"> <thead> <tr> <th colspan="7">October 2018</th> <th colspan="7">November 2018</th> <th colspan="7">December 2018</th> </tr> <tr> <th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th> <th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th> <th>Su</th><th>Mo</th><th>Tu</th><th>We</th><th>Th</th><th>Fr</th><th>Sa</th> </tr> </thead> <tbody> <tr> <td></td><td></td><td>01</td><td>02</td><td>03</td><td>04</td><td>05</td> <td>06</td><td></td><td></td><td></td><td>01</td><td>02</td><td>03</td> <td></td><td></td><td></td><td></td><td></td><td></td><td>01</td> </tr> <tr> <td>07</td><td>08</td><td>09</td><td>10</td><td>11</td><td>12</td><td>13</td> <td>04</td><td>05</td><td>06</td><td>07</td><td>08</td><td>09</td><td>10</td> <td>02</td><td>03</td><td>04</td><td>05</td><td>06</td><td>07</td><td>08</td> </tr> <tr> <td>14</td><td>15</td><td>16</td><td>17</td><td>18</td><td>19</td><td>20</td> <td>11</td><td>12</td><td>13</td><td>14</td><td>15</td><td>16</td><td>17</td> <td>09</td><td>10</td><td>11</td><td>12</td><td>13</td><td>14</td><td>15</td> </tr> <tr> <td>21</td><td>22</td><td>23</td><td>24</td><td>25</td><td>26</td><td>27</td> <td>18</td><td>19</td><td>20</td><td>21</td><td>22</td><td>23</td><td>24</td> <td>16</td><td>17</td><td>18</td><td>19</td><td>20</td><td>21</td><td>22</td> </tr> <tr> <td>28</td><td>29</td><td>30</td><td>31</td><td></td><td></td><td></td> <td>25</td><td>26</td><td>27</td><td>28</td><td>29</td><td>30</td><td></td> <td>23</td><td>24</td><td>25</td><td>26</td><td>27</td><td>28</td><td>29</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td> <td>30</td><td>31</td><td></td><td></td><td></td><td></td><td></td> </tr> </tbody> </table> New Request Previously Requested Approved, Pending, or Denied Full Day Previously Requested Approved, Pending, or Denied Partial Day Previously Requested Canceled Full Day Previously Requested Canceled Partial Day Get Details							October 2018							November 2018							December 2018							Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa			01	02	03	04	05	06				01	02	03							01	07	08	09	10	11	12	13	04	05	06	07	08	09	10	02	03	04	05	06	07	08	14	15	16	17	18	19	20	11	12	13	14	15	16	17	09	10	11	12	13	14	15	21	22	23	24	25	26	27	18	19	20	21	22	23	24	16	17	18	19	20	21	22	28	29	30	31				25	26	27	28	29	30		23	24	25	26	27	28	29															30	31					
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REPORT A NEW CLAIM

Contact Information

Claim Information

Provider Details

Employer Information

Insurance Information

Customer Specific/Claim Creation

Summary/What happens next

Last saved: 11/3/2018 4:40:30 PM

Provider Details

What's the name of your doctor or other provider that is taking you out of work? [Hide Search](#) [www.google.com](#)

i You can perform a search either by the last name of the provider or the Tax ID of the provider. If a telephone number search is performed, phone number must be entered in the format xxx-xxx-xxxx.

Last Name: First Name:

City: State:

Phone Number: Tax ID:

☒ Partial match

i To add a new Health Care Provider when a match is not found, complete the fields below and select the Add New Health Care Provider button.

[Clear All Fields](#)

Health Care Provider Last Name: Health Care Provider First Name:

Address 1:

Address 2:

City: State/Province:

Zip:

Health Care Provider Phone #: ☐ Country Code Health Care Provider Fax #: ☐ Country Code

Specialty:

i To remove a selected Health Care Provider, highlight the name in the right side of the Selected Providers grid and select the left arrow.

Are you seeing more than one doctor? ☐ Yes ☐ No

If you are not seeing a specific Health Care Provider, are you treating at a facility? ☐ Yes ☐ No

Contact Information

Claim Information

Provider Details

Employer Information

Insurance Information

Customer Specific/Claim Creation

Summary/What happens next

Last saved: 11/3/2018 4:41:31 PM

Employer Information

Are you a Full Time or Part Time employee? ☐ Full Time ☐ Part Time

Are you hourly or salary? ☐ Hourly ☐ Salary

What is your normal schedule?

Work Schedule Grid

Schedule Effective Date:

Select Time Automatically:

Work Day From: To:

Select Time Manually:

Week 1	Day Type	Start Time	End Time	Daily Hours
☐ Sunday	Non Work Day	:	: insert	
☐ Monday	Work Day	9 am :	5 pm : insert	8 hrs 0 min
☐ Tuesday	Work Day	9 am :	5 pm : insert	8 hrs 0 min
☐ Wednesday	Work Day	9 am :	5 pm : insert	8 hrs 0 min

REPORT A NEW CLAIM

Contact Information	Claim Information	Provider Details	Employer Information	Insurance Information	Customer Specific/ Claim Creation	Summary/ What happens next
---------------------	-------------------	------------------	----------------------	-----------------------	-----------------------------------	----------------------------

Last saved: 11/3/2018 4:42:31 PM

Insurance Information:

Who is your Health Insurance Carrier?

 [Complete Medical Authorization Now](#)

Contact Information	Claim Information	Provider Details	Employer Information	Insurance Information	Customer Specific/ Claim Creation	Summary/ What happens next
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Last saved: 11/3/2018 4:43:23 PM

Customer Specific

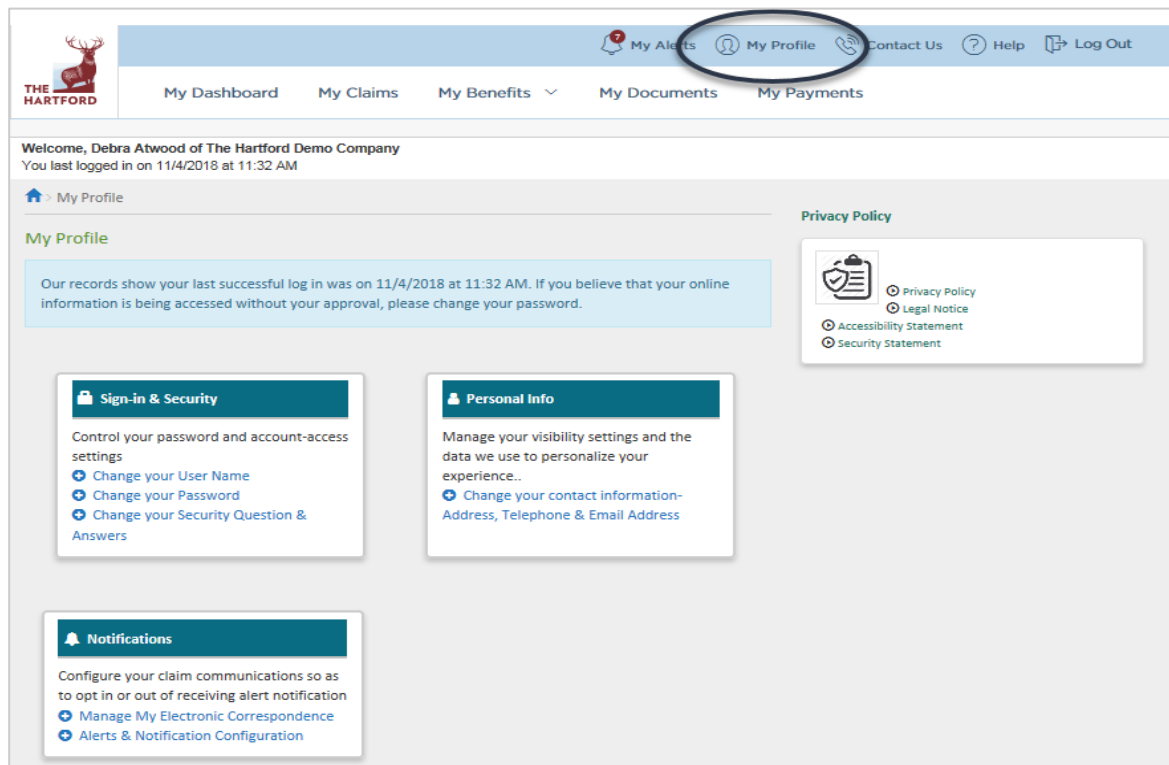
Have you previously worked for your current employer as a temporary or contracted employee? ☐ Yes ☐ No



MY PROFILE

Your experience, your way:

- Change your user name, password and security questions.
- Change your mailing address, telephone number, email address and mobile telephone number.
- Enroll in direct deposit or request a prepaid debit card.
- Request updates on your claim by email or text message.



The screenshot shows the 'My Profile' page of The Hartford's online portal. At the top, the navigation bar includes 'My Alerts', 'My Profile' (which is circled in red), 'Contact Us', 'Help', and 'Log Out'. Below the navigation bar, the user is logged in as 'Debra Atwood of The Hartford Demo Company'. The main content area is titled 'My Profile' and contains a message about the last successful login. There are three main sections: 'Sign-in & Security' (with links to change user name, password, and security questions), 'Personal Info' (with a link to change contact information), and 'Notifications' (with links to manage electronic correspondence and alerts). A 'Privacy Policy' section is also visible on the right side of the page.

THE HARTFORD

My Alerts My Profile Contact Us Help Log Out

My Dashboard My Claims My Benefits My Documents My Payments

Welcome, Debra Atwood of The Hartford Demo Company
You last logged in on 11/4/2018 at 11:32 AM

My Profile

Our records show your last successful log in was on 11/4/2018 at 11:32 AM. If you believe that your online information is being accessed without your approval, please change your password.

Sign-in & Security

Control your password and account-access settings

- Change your User Name
- Change your Password
- Change your Security Question & Answers

Personal Info

Manage your visibility settings and the data we use to personalize your experience..

- Change your contact information- Address, Telephone & Email Address

Notifications

Configure your claim communications so as to opt in or out of receiving alert notification

- Manage My Electronic Correspondence
- Alerts & Notification Configuration

Privacy Policy

- Privacy Policy
- Legal Notice
- Accessibility Statement
- Security Statement

MY PROFILE: CHANGE MY USER NAME

Sign-in & Security

Control your password and account-access settings

- [+ Change your User Name](#)
- [+ Change your Password](#)
- [+ Change your Security Question & Answers](#)

Change My User Name

[Home](#) > [My Profile](#) > Change User Name

** Indicates a Required Field*

You must first Enter your Current Password and New User Name. Then press Check Availability to see if the User Name you want to use is available. If it is available, you can change your User Name.

* Enter Current Password:

For security purposes, please enter your current Password.

* Enter New User Name:

For security purposes,
The user name must be at least 6 characters in length.
No more than 20 characters in length. The user name cannot contain any spaces.
The user name is case sensitive, so capitalization matters. Make sure you record your user name for future reference.

Check Availability

Clear

Exit

MY PROFILE: CHANGE MY PASSWORD

Change My Password

[Home](#) > [My Profile](#) > Change Password

** Indicates a Required Field*

To change your password you must first enter your current password and then enter the new password twice.

* Current Password:

Please enter your current password

* New Password:

Must be a minimum of 8 characters in length. Must contain a capital letter, lower case letter, special character and at least one number

Password strength

* Re-Type New Password:

Save

Clear

Exit

MY PROFILE: CHANGE MY SECURITY QUESTION

Security Questions

[Home](#) > [My Profile](#) > Change Security Questions

For your security, we may occasionally ask you to answer a security question. Please select 3 security questions below, answer them and then press 'save'.

Question 1

Who is your favorite actor, musician, or artist?

Answer

Question 2

In what city were you born?

Answer

Question 3

What is your favorite movie?

Answer

Sometimes it is necessary to discuss confidential and personal information and we want to make sure that we are always speaking to the right person. Please choose to provide us either your mother's maiden name (up to 20 characters) or a 4 digit PIN.

Which you would like to provide us?

☐ Mother's Maiden Name

☒ 4 Digit PIN

Please provide the value. You can enter up to 20 characters of your mother's maiden name or a 4 digit PIN.

6666

Exit

Save

MY PROFILE: CHANGE MY CONTACT INFORMATION

 **Personal Info**

Manage your visibility settings and the data we use to personalize your experience..

[+ Change your contact information- Address, Telephone & Email Address](#)

 **Change my Contact Information**

[Home](#) > [My Profile](#) > Change Contact Information

Home Address
** Indicates a Required Field*

*** Address 1:**

Address 2:

Address 3:

*** Country:**

USA

▼

*** City:**

*** State:**

CT Connecticut

▼

*** Zip:**

*** Home Phone:**

959

Country Code

Area Code

Extension

Mobile Phone:

203

Country Code

Area Code

Extension

Home Email Address:

Save

Clear

Exit

EMAIL CORRESPONDENCE

- Request an email when there are new letters available.
- There are some claims letters that we'll also mail to you, even if you ask us not to.
- You'll receive an email from us around 8pm ET with directions on how to read the new letter.
- If you don't read the letter within one week, we'll print it and mail it to you.
- You can always print or save a local copy of any letter online.

 **Notifications**

Configure your claim communications so as to opt in or out of receiving alert notification

- [+ Manage My Electronic Correspondence](#)
- [+ Alerts & Notification Configuration](#)

✉ Configure Your Electronic Preferences

[Home](#) > [My Profile](#) > Configure Electronic Preferences

Please configure your preferences here. You can change these preferences at any time by accessing the "User Profile".

** Indicates a Required Field*

Error: You have elected to receive Electronic Notifications but your Email Address has not been confirmed.
To confirm your Email Address please complete the form above and save.

*Email Address:

Enter an e-mail address that you have constant access to whether it be home or work.
In the event your password is reset, the new password will be e-mailed to you at the e-mail address provided here.

*Confirm Email Address:

Electronic Communications:

☒ Yes ☐ No

☐

I have read and agree to the [Electronic Communications Terms and Conditions](#).

Save

Clear

Exit

ALERT NOTIFICATIONS

We'll text or email you updates:

- Request an email with updates to your claim. You can also ask us to send you a text message.
- If you ask us to send you text messages, you must give us your approval to do so. Standard message rates will apply to any message we send you, in case you don't have an unlimited text message plan.
- The Hartford recommends you select "Daily" notifications either by text message or email. Notifications are sent out at 8pm ET.

Alerts & Notification Configuration

[Home](#) > [My Profile](#) > Alerts & Notification Configuration

Home Email Address: darren.stiles@thehartfc

EditSaveCancel

☒ Notification Settings: Summary of Open Alerts

☐ Notification Settings: By Individual Alert

Summary Type	Enable Notification	Notification Method
Daily	☐	Home Email
Weekly	☐	Home Email
None	☒	N/A

☐ I have read and agree to the [Text Message Communications Terms and Conditions](#)

Would you like The Hartford to send you text messages?

☒ Yes☐ No

Mobile Phone Number: (203) 972-8112

PAYMENT OPTIONS

Direct Deposit:

- Request deposit of your disability check into your checking or savings account.
- You'll need to provide your routing number, account number and authorization.
- We can also suppress printing of your benefit pay stub if you prefer to view it online.
- If you ask us to send you an email or text message notification, we'll notify you of new payments.
- The process to set this up with your bank usually takes 2-3 weeks. And you can stop it at any time.

 **Payments**

Manage your direct deposit and pre-paid debit card info

[+ Request Direct Deposit/ Request a pre-paid debit card](#)

 **Payments**

Manage your direct deposit and pre-paid debit card info

[- Request Direct Deposit/ Request a pre-paid debit card](#)

☐ **Set Up Direct Deposit**

 Hartford Life and Accident Insurance Company now offers Direct Deposit of your disability benefit. A bank account is required.

☐ **Request a Reloadable Pre-Paid Card**

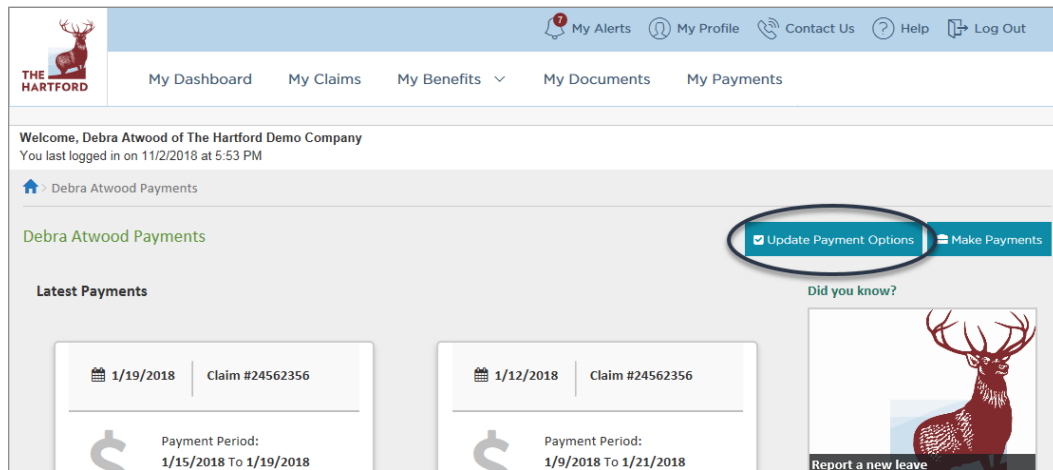
 Simply verify some basic information, acknowledge the terms and conditions of the program and your request will be entered. You will receive an introduction package within 10 business days from the Money Network.

Next

PAYMENT OPTIONS

Prepaid Debit Card:

- You can ask us to deposit your disability check onto a prepaid debit card.
- A bank account is not required.
- The Money Network will send you the prepaid card.
- You can cancel at any time.



FULL ADMINISTRATION LEAVE OF ABSENCE

A dashboard view that contains a snapshot of all the important details:

- Leave balances provide a quick glance at the number of weeks an employee has available to take leave.
- Leave balances are shown only for the “current period,” which is usually the prior 12 months.
- If the employee hasn’t taken any leave during the “current period,” there will be no balances shown.

The screenshot shows a user interface for a dashboard. At the top is a teal navigation bar with links: My Dashboard, My Claims, My Benefits, My Documents, and Contact Us. Below this is a breadcrumb trail 'My Dashboard'. On the right side of the dashboard, there are two buttons: 'Report New Claim' and 'Return to Work'. The main content area features three large colored boxes: an orange box for 'Alerts' with a count of 0, a green box for 'Documents to submit' with a count of 1, and a purple box for 'Payment Update' with a count of 0. Below these is a blue button labeled '+ View Latest Activity'. The 'My Claims' section contains a table with two tabs: 'All' (2) and 'Open' (2). The table has columns for Claim ID, Reason, Benefit(s), Start Date, and Status. It lists two claims: one for 'Care of a Family Member Father' starting May 10, 2016, and another for 'Care of a Family Member Mother' starting September 05, 2013, both with an 'Open' status. To the right of the claims table is a 'Leave Balances' section titled 'Federal Family and Medical Leave Act (FMLA)' showing a period from March 17, 2017, to March 18, 2016, with 11.4 weeks of 12 weeks remaining.

Claim ID	Reason	Benefit(s)	Start Date	Status
1496632	Care of a Family Member Father	Fed FMLA	May 10, 2016	Open
1270253	Care of a Family Member Mother	Fed FMLA	September 05, 2013	Open

Leave Balances

Federal Family and Medical Leave Act (FMLA)
March 17, 2017 - March 18, 2016
11.4 weeks of 12 weeks Remaining

Make it easy on yourself.

Visit www.abilityadvantage.thehartford.com to register and start using WorkAbility today.

MY CLAIMS

Real-time access to claim details:

- Leave details includes the first date and most recent request on the claim.
- Leave balance details includes the benefit period, total benefit amount, time used within the current period, future time approved and remaining time available.
- Absence detail shows the absences with the work schedule for the day.

The screenshot shows the 'My Claims' page with the 'Claim Details' tab selected. The page displays information for a 'Leave Of Absence - Claim Details' with the following fields:

- Claim Number: 24563558
- Last Requested Date: November 01, 2018
- Leave Type: Continuous
- Start Date: November 01, 2018
- Status: Open
- Date Reported: November 01, 2018 11:08:00 AM
- Last Updated: November 01, 2018 11:09:00 AM
- Leave Reason: Pregnancy
- Relationship: Employee
- Projected Return to Work:
- Actual Return To Work:

Below the claim details is a section titled 'Balances' with a table showing benefit information:

Benefit Type	Benefit Period From	Benefit Period Through	Total Benefit Amount	Time Used	Future Time Approved	Remaining Time Available
Federal Family and Medical Leave Act (FMLA)	11/6/2018	11/7/2017	12 weeks	0.8 weeks	0 weeks	11.2 weeks

The screenshot shows the 'Absence' tab selected. It displays 'Absence Details' with a search bar and a table of absence entries. The table has columns for 'Dates Of Absence', 'Benefit', 'Eligibility', and 'Status'.

Dates Of Absence	Benefit	Eligibility	Status
10/8/2018 12:00 PM - 5:00 PM	Federal Family and Medical Leave Act (FMLA)	Eligible	Pend - Awaiting certific
10/3/2018 12:00 PM - 5:00 PM	Federal Family and Medical Leave Act (FMLA)	Verify	Pend - Awaiting certific

MY BENEFITS

Benefits forecast:

- You can find out how many weeks of job protected time away from work is available to you based on a future date.
- We'll calculate the number of weeks based on the leave time you have taken, plus the leave time you'll earn back and any future time you've requested.
- The leave of absence benefits will always be shown as a number of weeks to comply with federal and state law.

THE HARTFORD

My Alerts My Profile Contact Us Help Log Out

My Dashboard My Claims **My Benefits** My Documents

Home > Leave Management

My Benefits

Benefit Forecast

We can calculate for you the amount of leave time you'll have available in the future based on the time you have used and the benefits available to you.

To start, select the date you expect to need to take leave from work.

Next three months

Pregnancy

Employee

Forecast Date: February 06, 2019

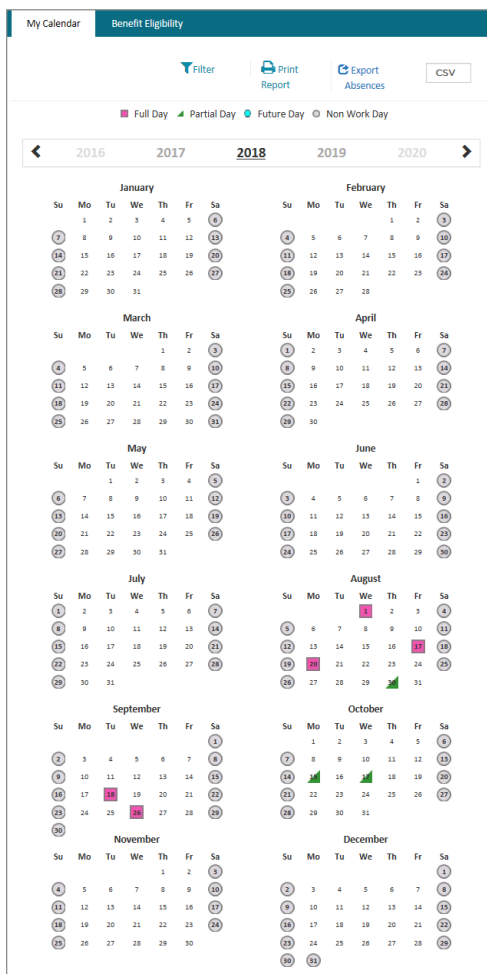
Federal Family and Medical Leave Act (FMLA)	11.2 WEEKS
---	------------

Clear

MY BENEFITS

My Benefits Calendar:

- Use the benefits calendar to see all of your requests for leave for the year.
- You can scroll backward and forward by year.
- By selecting a date, you can see the details of that date, including the hours you were scheduled to work, your absences, and the status of your approval for that day.
- You can print a report that shows you all of your absences for the year.



Selected Date: August 17, 2018 ✕

Scheduled Hours
 August 17, 2018 09:00 AM - 05:00 PM

Leave Id for the request(s)
24562421

Transaction Id for the request(s)
24562630

Leave Continuity
Intermittent

Type Of Day
Full Day

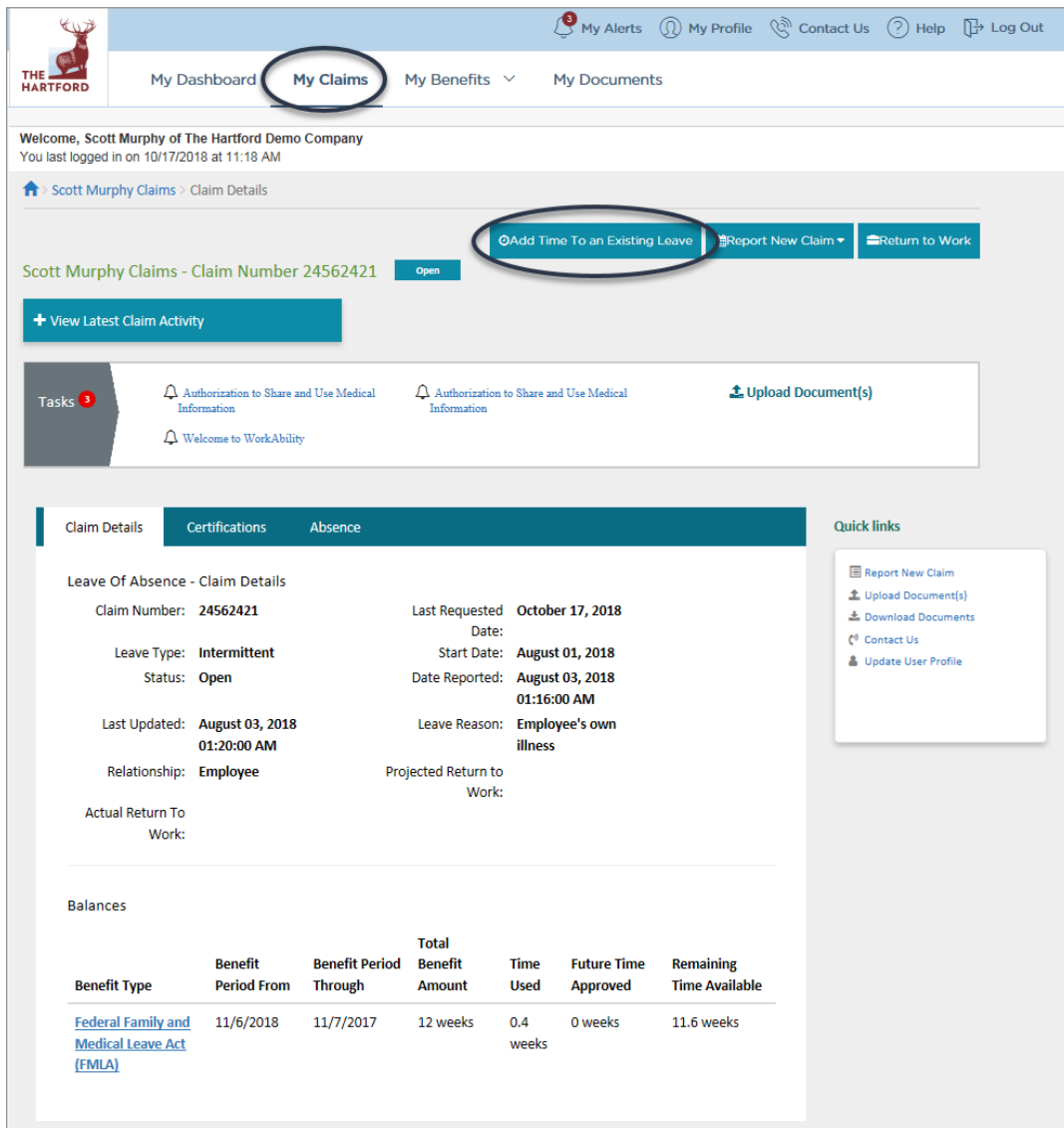
Reason for Leave
Employee's own illness

Start Date	End Date	Hours	Reason	Status	Absen Type
08/17/2018 09:00 AM	08/17/2018 05:00 PM	8.00 Hours	Federal Family and	Approved	Appoir

MY BENEFITS

Add time to an intermittent leave:

- Once an intermittent leave of absence claim has been established, you can use our online tool to update your leave.
- You can select days for leave, enter your work schedule, any breaks and your absence for the day.
- You can select multiple days and you can apply a work schedule, breaks and absence periods to each one individually or as a group.



THE HARTFORD My Alerts My Profile Contact Us Help Log Out

My Dashboard **My Claims** My Benefits My Documents

Welcome, Scott Murphy of The Hartford Demo Company
You last logged in on 10/17/2018 at 11:18 AM

Home > Scott Murphy Claims > Claim Details

[Add Time To an Existing Leave](#) [Report New Claim](#) [Return to Work](#)

Scott Murphy Claims - Claim Number 24562421 [Open](#)

[+ View Latest Claim Activity](#)

Tasks 3

- Authorization to Share and Use Medical Information
- Authorization to Share and Use Medical Information
- Upload Document(s)
- Welcome to WorkAbility

Claim Details Certifications Absence

Leave Of Absence - Claim Details

Claim Number: 24562421	Last Requested Date: October 17, 2018
Leave Type: Intermittent	Start Date: August 01, 2018
Status: Open	Date Reported: August 03, 2018 01:16:00 AM
Last Updated: August 03, 2018 01:20:00 AM	Leave Reason: Employee's own illness
Relationship: Employee	Projected Return to Work:
Actual Return To Work:	

Balances

Benefit Type	Benefit Period From	Benefit Period Through	Total Benefit Amount	Time Used	Future Time Approved	Remaining Time Available
Federal Family and Medical Leave Act (FMLA)	11/6/2018	11/7/2017	12 weeks	0.4 weeks	0 weeks	11.6 weeks

Quick links

- [Report New Claim](#)
- [Upload Document\(s\)](#)
- [Download Documents](#)
- [Contact Us](#)
- [Update User Profile](#)

MY BENEFITS

Add time to an intermittent leave:

Step One:

- Select the option “Add Time to an Existing Leave” and select the claim.
- Select the date(s) from the calendar.
- From “Preview – Absence Requested” select the day(s) to edit. Any edits applied to a group of selected dates will be applied to all of those dates.

Step Two:

- You can edit the work schedule if needed.
- You can add any unpaid breaks if needed.
- You can select the start and end time of your absence.
- You can enter notes and then click “Update Days” and verify the absence is accurate.
- Click “Submit Claim” and you’ll be provided with a confirmation.



[My Alerts](#) [My Profile](#) [Contact Us](#) [Help](#) [Log Out](#)

[My Dashboard](#) [My Claims](#) [My Benefits](#) [My Documents](#)

Welcome, Scott Murphy of The Hartford Demo Company
You last logged in on 10/17/2018 at 11:18 AM

[My Claims](#) > [Add time to existing leave](#) > Claim 24562421

[Report New Claim](#) [Return to Work](#)

Claims

Claim Number 24562421 [Open](#)

Benefit Type	Reason	Relationship	Start Date	End Date	Current Request Duration
☐ Federal Family and Medical Leave Act (FMLA)	Employee's own illness	Employee	August 01, 2018	October 17, 2018	1.28 Weeks

3 Simple Steps to Add Days to Your Absence

Step 1: Select the available day(s) in the calendar and review the selected absence days in the preview pane.

< Oct 2018 Nov 2018 Dec 2018 >

Su	Mo	Tu	We	Th	Fr	Sa
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

☒ Full Day ☒ Partial Day ☐ Cancelled Full Day ☐ Cancelled Partial Day ☐ Non Work Day

Enter Work Schedule [Edit](#)

Start Time

End Time

Enter Unpaid breaks [Edit](#)

Start Time

End Time

Time Off Frequency

per Day

Start Time

End Time

AM PM

Appointment(s)

Notes

[Update Day\(s\)](#)

Step 2: If there are any changes needed, check each date in the preview pane. The work schedule, unpaid breaks, and absence period then can be modified.

Preview - Absence Requested

Review the dates added for the absence requested

Date	Hours	Start-End Time	Work Schedule
☐ 11/19/2018	8 Hours 0 Mins	09:00 AM - 5:00 PM	09:00 AM - 5:00 PM

Step 3: If you have finished reviewing the dates, please click on 'Submit Claim' button to submit the absences.

[Submit Claim](#)

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Together We Prevail™

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7318a NS 11/18



Business Insurance
Employee Benefits
Auto
Home