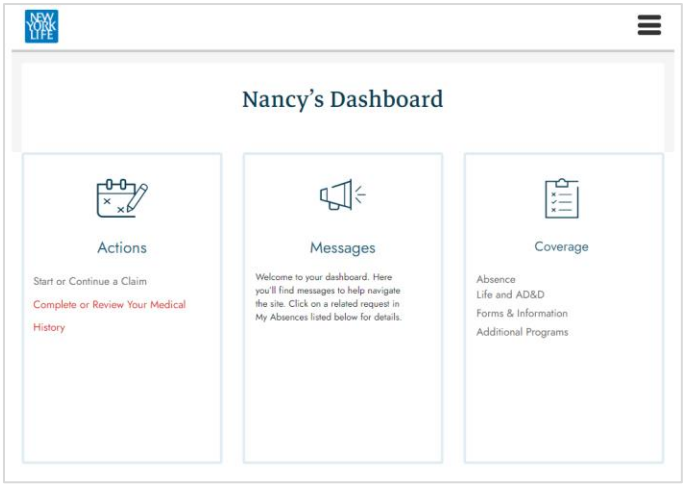
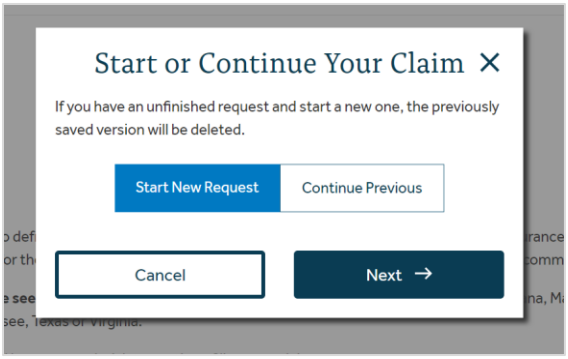
How to file a claim & check its status on myNYLGBS

Start by logging in to myNYLGBS.com. Once logged in, you'll be brought to your **dashboard**.

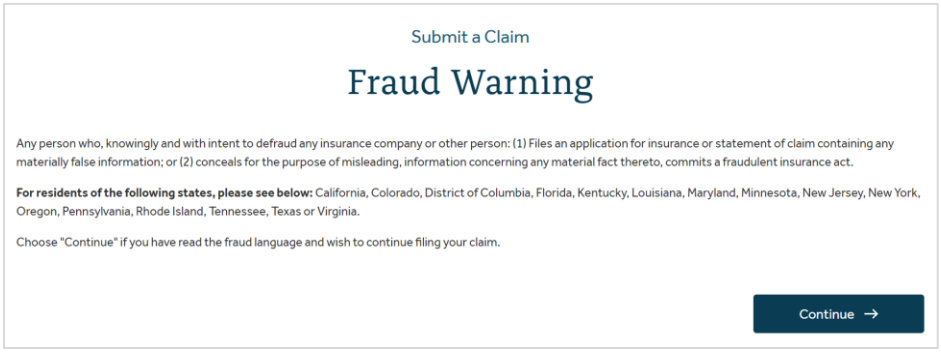
From your dashboard, click "**Start or Continue a Claim**".



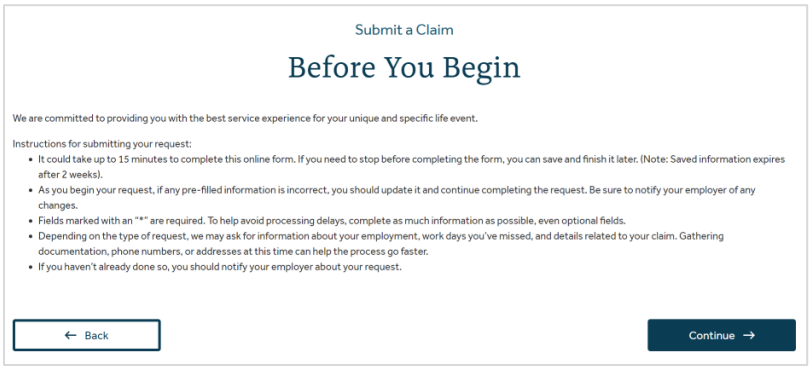
A pop-up will appear. Click "**Start a New Request**", then "Next".



Review the **Fraud Warning**, then click "Continue".

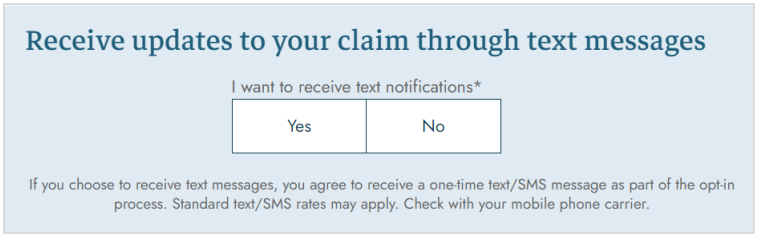


Review the list of things to keep in mind, then click "Continue". Note all **fields marked with an asterisk must be completed**. If a field is not asterisked and you do not know the requested information, you may still file your claim.

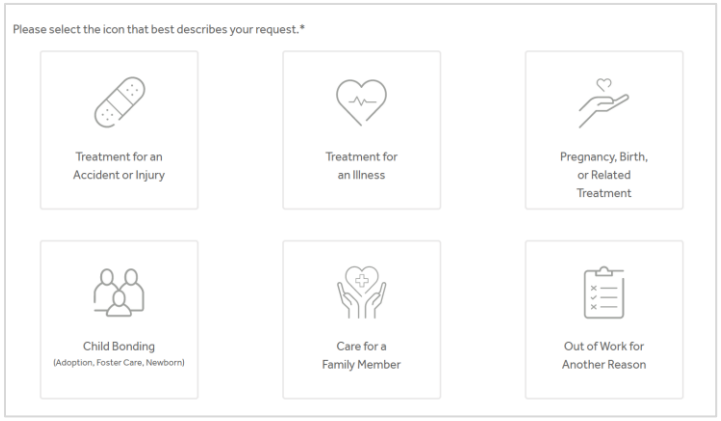


Review your **personal information**. If there are inaccuracies, contact your employer.

At the bottom of the "Personal Information" page, you have the **option to opt-in to texting for updates on your claim**. Next, click "Continue".



You will be taken to the "**Type of Claim**" page. Click the card that best describes your claim, then "Continue". Depending on the type of claim selected, you may be asked for additional details related to the claim.

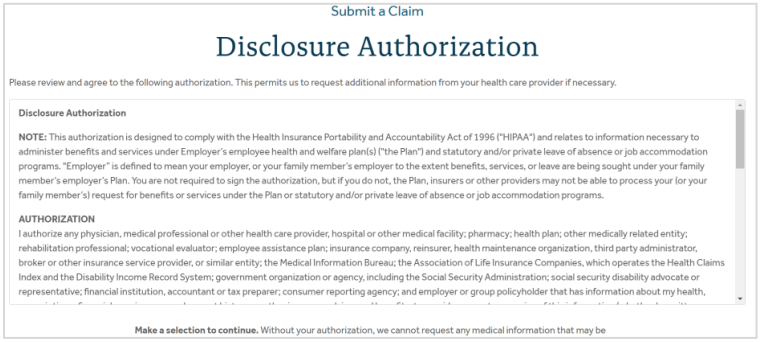


Next, choose a time period from the drop-down menu, then populate the fields related to your **claim's dates**. Once done, click "Continue".

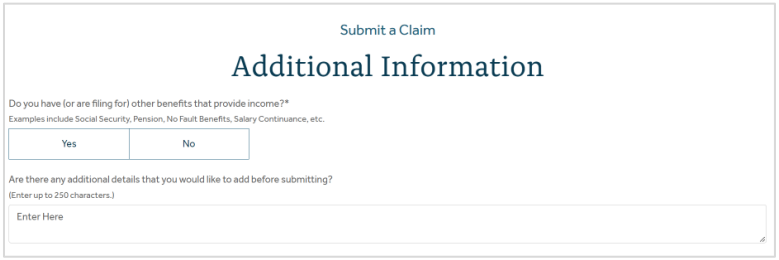
You will be asked to provide information related to your **work schedule**. Complete any required fields and click "Continue".

Depending on your claim type, you will be asked to provide **additional information** related to your claim. This could include hospital, provider and/or insurance information. Click "Continue" to proceed.

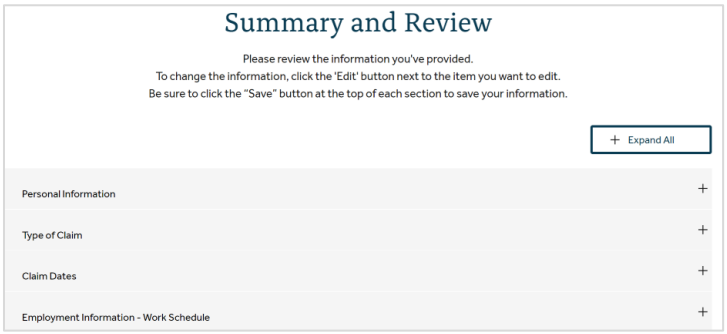
If your claim requires us to reach out to a provider(s) for additional medical information, you will be asked to review our **Disclosure Authorization** and advise if we can reach out to your provider(s) for this information. Choosing "No" may delay and/or impact our ability to make a decision on your claim. Once you've made a selection, click "Continue".



Depending on the type of claim, you may be asked **if you have filed or are filing for other benefits that provide income**. Click "Yes" or "No", choose whether you want to provide additional details, and then click "Continue".



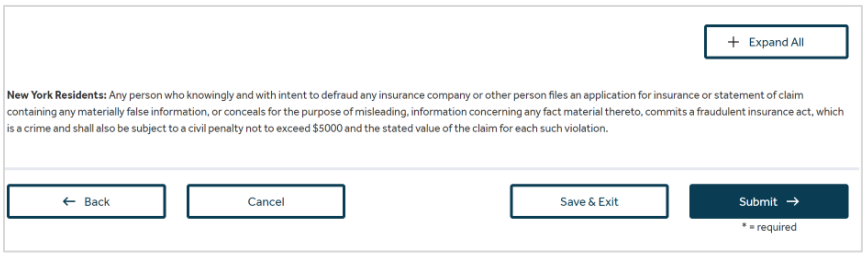
Carefully **review the full summary of your claim**, making sure to hit the "+" signs, so you can see the full details of each section.



If changes need to be made to any of the information included in the "**Summary and Review**" page, click the "**Edit**" button, make your updates, and then click "Continue".

When you are satisfied that all the information on the "Summary and Review" page is correct, click the "**Submit**" button.

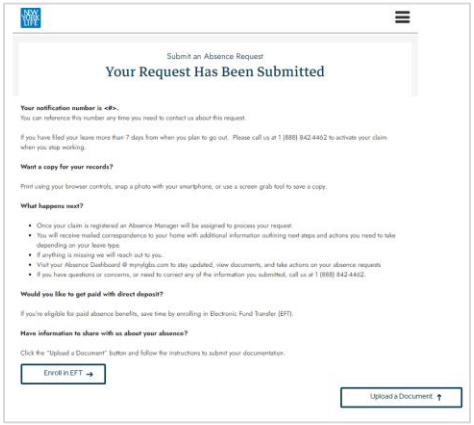
You may choose at any point in the claim submission process to **save your claim and come back to it anytime in the following two weeks**. To do so, click the "**Save and Exit**" **button** at the bottom of the screen you are on.



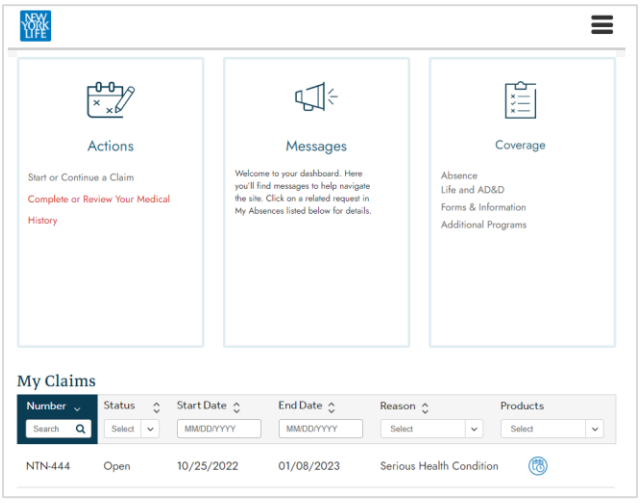
Once your claim is submitted, you will be taken to a **claim confirmation page**, which will provide your **claim number**, as well as an outline of what will happen next.

At the bottom of the claim confirmation page, you may choose to **upload a document(s)**, **if you have additional information** you would like added to your claim. You can also come back later to upload a document.

If you are eligible for paid benefits, you may click the "**Enroll in EFT" button** to enroll in Electronic Funds Transfer, which will get eligible paid benefits to you faster than a hard check.

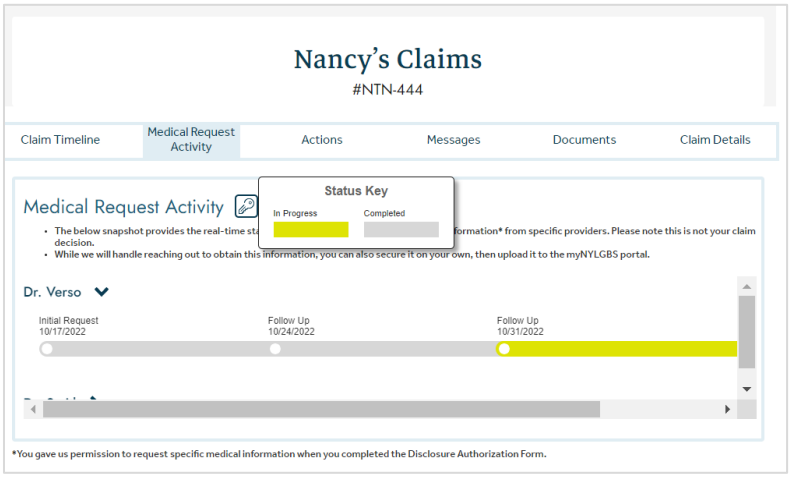


To **check the status of your claim, view messages, upload documents and more**, you can log in to myNYLGBS.com anytime. Once logged in, scroll down to the "**My Claims**" section of your dashboard and click on the applicable claim.

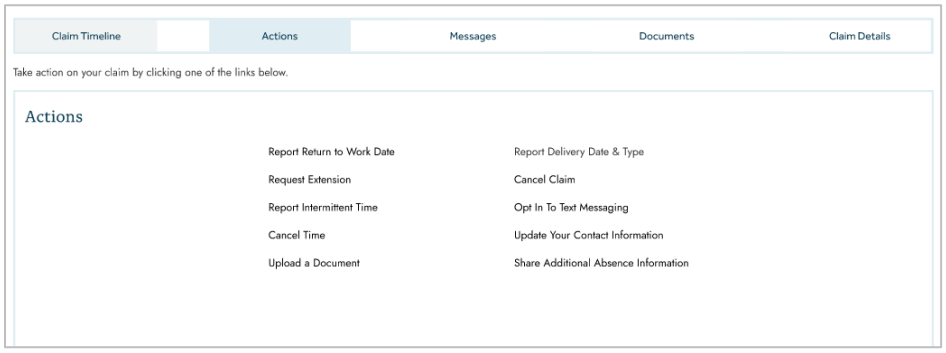


From there, you will be able to **click any of the available tabs** ("Claim Timeline", "Actions", etc.). The "**Claim Timeline**" tab provides a visual of your claim, including plan type(s), status, and start and end dates.

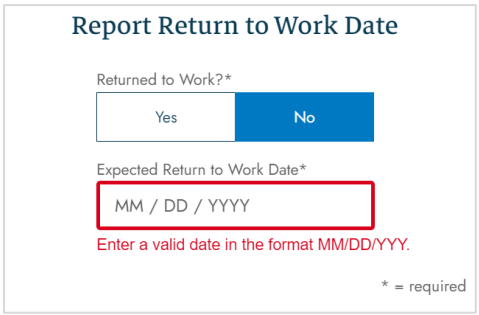
The "**Medical Request Activity**" tab provides a quick snapshot of the real-time status of requests for medical information on Disability claims. If you have a Disability claim and you have given us permission to reach out to your provider(s) for medical information, you will be able to see those requests, how many times they have been sent, if the information has been received, and when. If your claim does not require us to reach out for medical information, this tab will not display.



The "**Actions**" tab provides a list of actions you can take that are tied to your claim, such as uploading a document, reporting a return to work date or one-way messaging your Claim Manager directly.

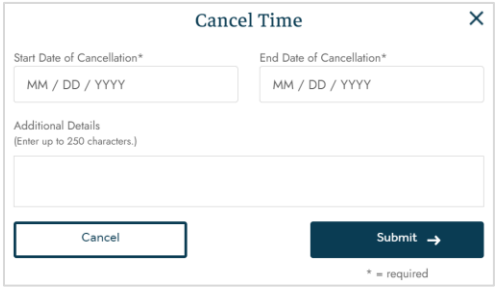


Click the "**Report Return to Work Date**" link on the "Actions" tab to submit the date you are returning/have returned to work.

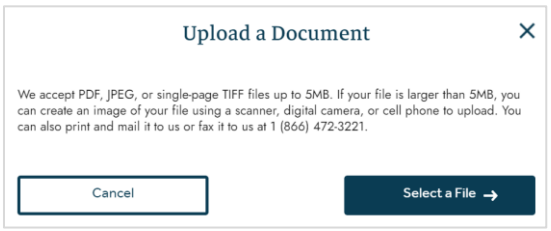


Click the "**Request Extension**" link on the "Actions" tab to submit a request to extend a current absence claim.

Click the "**Cancel Time**" link on the "Actions" tab to cancel time you submitted for an existing Absence claim.

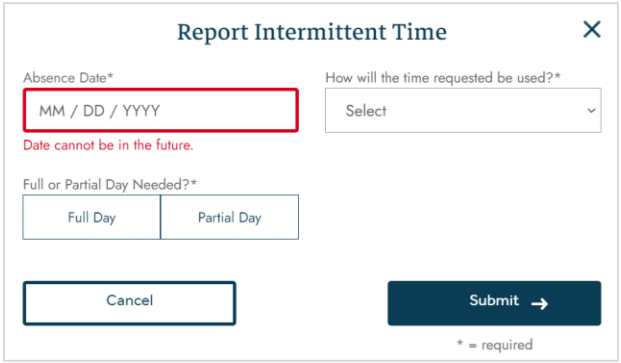


Click the "**Upload a Document**" link on the "Actions" tab to select and upload a file to your claim.

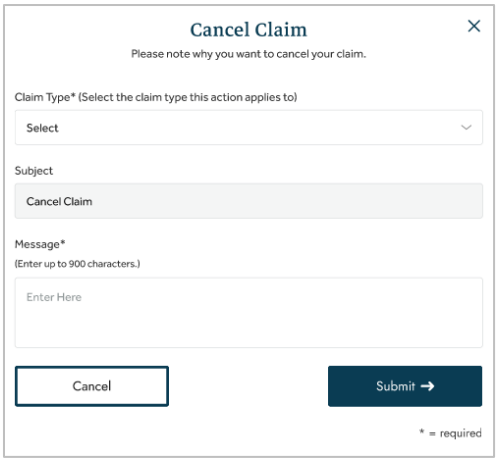


For a pregnancy-related claim, click the "**Report Delivery Date & Type**" link on the "Actions" tab to submit the date and type of delivery.

Click the "**Submit Intermittent Time**" link on the "Actions" tab to submit the date and time needed for an intermittent leave of absence.

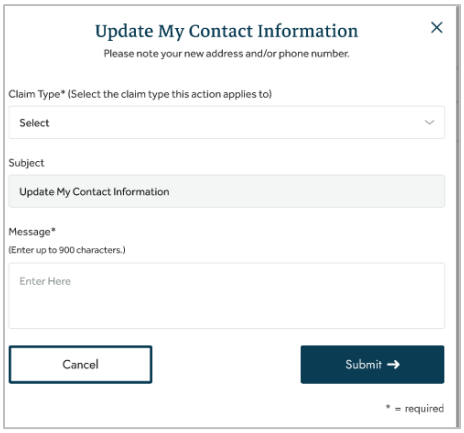


To cancel your claim, click "**Cancel Claim**", then choose the claim the cancellation applies to from the "Claim Type" dropdown, and provide a brief message about why you are cancelling your claim.

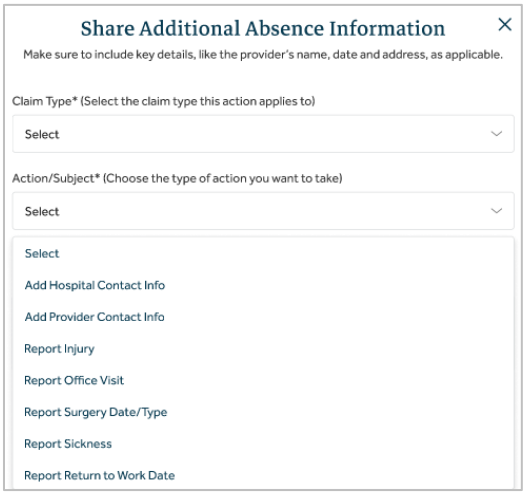


To receive text messages about your claim, click "**Opt in to Text Messaging**", then choose the claim the opt-in applies to from the "Claim Type" dropdown, and provide your mobile phone number in the free-from "Message" section.

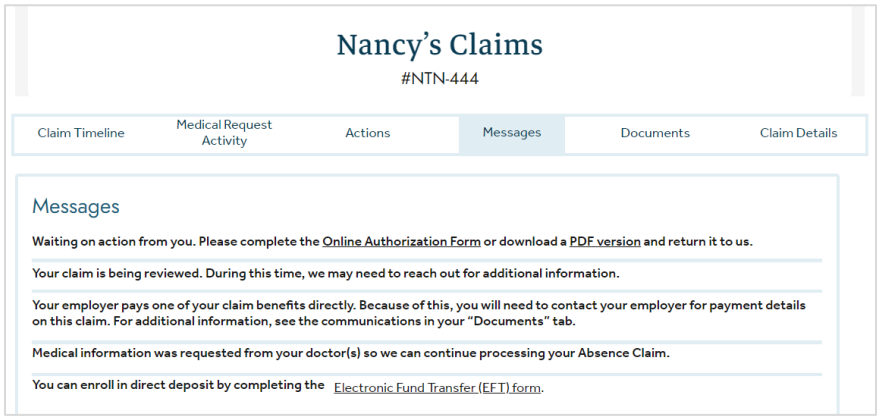
To share updated contact information, click "**Update Your Contact Information**", then choose the claim the update applies to from the "Claim Type" dropdown, and add your updated contact information to the free-from "Message" section.



To share hospital or provider contact info, report an Absence return to work date, or report an injury, illness, surgery or office visit, click "**Share Additional Absence Information**". After choosing the claim the message applies to from the "Claim Type" dropdown, select the type of action you want to take, and provide the necessary information in the free-from "Message" section.

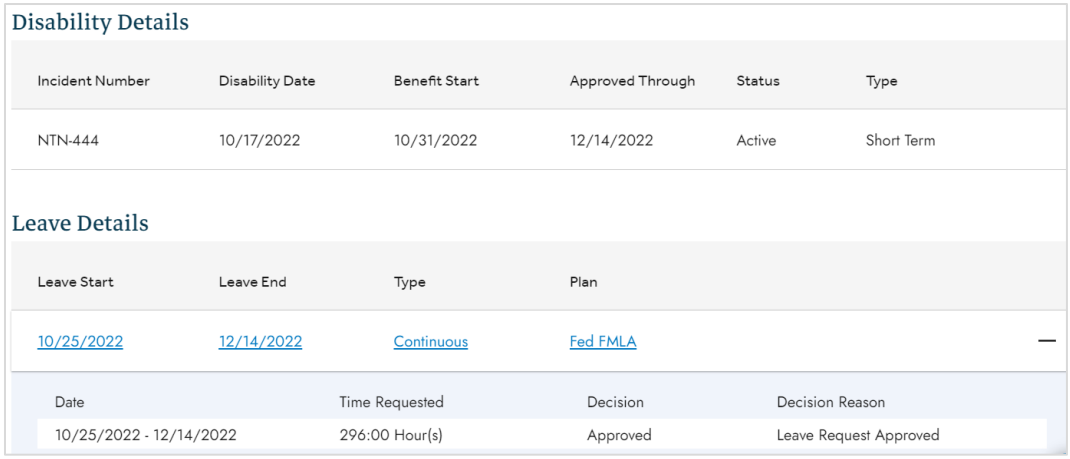


The "**Messages**" tab is where you can see messages from NYL GBS that are tied to this claim, such as information we need from you.



The "**Documents**" tab is where you can view letters NYL GBS has sent you and the documents you uploaded, specific to this claim. You will not see materials NYL GBS received from others, such as providers and/or your employer, if applicable

The "**Claim Details**" tab is where you can review specific details of your claim, such as payments, plans, start and end dates, etc., as applicable.



If you have **questions** that are not answered on the portal, we are here to help. Contact us at **(800) 644-5567**, Monday – Friday, from 7:00 a.m. – 7:00 p.m. CST.