#### EOI User Guide - Lincoln Financial



#### **REGISTER AS A NEW USER**

- 1. Enter <a href="www.lincolnfinancial.com">www.lincolnfinancial.com</a> in the address bar to access the Lincoln Financial portal
- 2. Click "Register" on the login page
- 3. Select the option to register as an Individual user
- 4. Enter your personal information in the corresponding fields to create a new account
- 5. When prompted, enter the following Company Code: MCLANE
- 6. Follow the directions to authenticate your account

### **SUBMIT EVIDENCE OF INSURABILITY (EOI)**

- 1. From the home page of the portal, select the option "Complete Evidence of Insurability application"
- 2. Complete the section to Verify Your Identity
- 3. Select if you are electing coverage for the first time
  - If you are existing employee, you will then be prompted to select the reason you are updating your coverage; Select the appropriate option
- 4. Review and agree to the **online terms** and conditions





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- 5. Select who is applying for coverage and the requested coverage
  - i. If **Long Term Disability** is selected, please complete the Coverage Amount questions as follows:
    - i. Under the "Current Selections" drop down Select Dollar Amount
      - In the Current "Coverage Amount" field, enter 1, 2 or 3 to represent the LTD Plan Number for which you are currently enrolled. Note, if you do not currently have LTD coverage, enter 0 In this field.
        - 1. Plan 1 = Up to 2-year duration plan
        - 2. Plan 2 = Up to 5-year duration plan
        - 3. Plan 3 = Up to Social Security Normal Retirement Age



- ii. Under the "Requesting New" drop date Select Dollar Amount
  - In the Requesting New "Coverage Amount" field, enter 1, 2 or 3 to represent the LTD Plan Number for which you are requesting.
    - a. Plan 1 = Up to 2-year duration plan
    - b. Plan 2 = Up to 5-year duration plan
    - c. Plan 3: Up to Social Security Normal Retirement Age

Coverage type —	_	Coverage amount
ease select an option		
ease select an option		
ease select an option		





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- ii. If **Optional Life** (Employee and/or Spouse) is selected, please complete the Coverage Amount questions as follows:
  - i. Under the "Current Selections" drop down Select Dollar Amount
    - In the Current "Coverage Amount" field, enter your **current benefit amount**. Note, if you do not currently have optional life coverage, enter 0 in this field.



- ii. Under the "Requesting New" drop date Select Dollar Amount
  - In the Requesting New "Coverage Amount" field, enter the **optional life benefit amount** that is being requested.





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- 6. Review and update the Employment and Contact Information as needed
- 7. After providing the Applicant Information, you will complete the **Medical Qualifying Questions**. The answers to these questions will help determine whether the application will need full medical underwriting. In some cases, you may be asked to enter information about existing medical conditions and/or prescribed medications.
- 8. Next you will be able to **review** the information you have entered to ensure all selections are accurate before providing signature and submitting the final application. Please be aware that once the application is submitted, changes are not allowed.
- 9. The final page will require you to review the **fraud warning** and **authorization disclosure** and provide an electronic signature.
- 10. Once application is submitted, a **confirmation page** will appear including your evidence of insurability event number.
  - If application was approved, a message will display confirming application has been approved
  - ii. If additional information is needed, a message will display confirming application was successfully submitted and Lincoln's next steps will be to review the application and request additional information if needed.

