Submitting documentation through Guardian anytime website

Go to web browser and type the below:

https://www.guardianlife.com/

click on Connect with us



Several options will appear click on contact us





Scroll all the way down to Secure Channel Click on Secure Channel

click Member/Dependent/Beneficiary

guardiananytime.com/gapublic/GASecureMailWeb/secureEmail.process



Tell us who you are:



Add the plan group id of 528683 and click on Next



Select <u>short term disability or long term disability</u> depending on your situation of what you are trying to send for your type of disability claim

guardiananytime.com/gapublic/GASecureMailWeb/secureEmailGroupValidation.process					
8	Guardian Guar	dian Anytime			
Please select appropriate benefit:					
	Dental	Critical Illness	Vision		
	Accident	Group Term Life & AD&D	Long Term Disability		
	Cancer	Group Permanent Life	Hospital Indemnity		
	Short Term Disability	New York Paid Family Leave	State Mandated Disability		
	Massachusetts Paid Family Leave	Paid Medical Leave	Connecticut Paid Family Leave		

This screen will appear next.

guardiananytime.com/gapublic/GASecureMailWeb/secureEmailProduct.process				
8 Guardian Gua	rdian Anytime			
You selected Member/Dependent/Be	You selected Member/Dependent/Beneficiary Change			
Please select benefit your inquiry is regardin	g: Short Term Disability			
For immediate assistance with inqui	For immediate assistance with inquiries please contact our Customer Response Unit at: 1-800-268-2525			
There is a wealth of information available wi Go to www.guardiananytime.com to register a	There is a wealth of information available within our secure website. From benefit details; claims status; submit a short term disability claim and more. Go to www.guardiananytime.com to register and login!			
You may also submit a new claim, cla	You may also submit a new claim, claim correspondence or other document(s):			
Group plan number/Group ID *	00528683			
First Name: *				
Last Name: *				
E-mail Address: *				
Member ID: 🔞	(
Claim Number(if available):				
Document(s) attached are in reference to	* \bigcirc Claim (new, additional info for claim already submitted, etc.)			
	\odot Other (new enrollment, evidence of insurability, benefit change, etc.)			
File to be Uploaded:	Choose File No file chosen			
File to be Uploaded:	Choose File No file chosen			
File to be Uploaded:	Choose File No file chosen			
	Add additional attachments			

Cancel Submit

Complete this form to submit any documents that you wish to add to your disability case profile.

The * in red indicate that this fields are required.

There is no Member ID.

Add your claim number that Guardian has provided. This is to have your documents that you are submitting added to your appropriate case.

You can add more than three attachment documents you wish to submit.

For The document(s) attached are in reference to: select CLAIM (new, additional info for claim already submitted, etc.)

I recommend that you take a picture of this image before submitting for recordkeeping. You can use the snip & sketch tool to also save an image and can then add it to a word document for recordkeeping.

Once you submit, a thank you for submitting page will appear. Add the date of when you submit the documents for your records.

Guardian counts their processing time two days after submitting any documentation which is the date of when Guardian adds your documents to your case profile.

March 9, 2022