

# How to submit a claim for life insurance

We want to make filing a life claim as stress-free and easy as possible, for you and the beneficiary. Here's some information that explains how to submit a claim, how we review the claim, and how we communicate with the beneficiary.

## 1. Submitting the claim

### You can submit a Life claim in several ways:

**Online:** [www.sunlife.com/account](http://www.sunlife.com/account)

**Email:** [USEBGLifeClaimsInbox@sunlife.com](mailto:USEBGLifeClaimsInbox@sunlife.com)

**Fax:** 800-979-5128

**Mail:** Sun Life  
Group Life Claims  
P.O. Box 81365  
Wellesley Hills, MA 02481

**Overnight:** Sun Life  
Group Life Claims  
96 Worcester Street  
Wellesley Hills, MA 02481

**[Click here](#) for instructions on how to submit a Life claim online.**

## Information we will need<sup>1</sup>

### ✓ Completed employer's information

This statement provides the Sun Life claims analyst important eligibility information such as the employee's date of hire, hours worked per week, last day worked and the reason for last day worked. We need this information to determine the employee's eligibility for coverage, and whether he or she was actively at work prior to his or her last day worked. We may also need this information to verify a benefit calculation.

### ✓ Copies of the employee's payroll records

We will need copies of the employee's payroll records for one (1) month prior to their last day physically at work. We may also request additional payroll documentation to confirm the employee met actively-at-work requirements. The copies should clearly illustrate the payroll dates, hours worked, last day worked, paid vacation/time off, paid leave and deduction amounts for voluntary benefits.

If the total Life and AD&D claim coverage amount for the deceased is equal to or less than \$25,000, payroll verification is not needed.

### Why do we request this?

These records provide the Sun Life claims analyst with supporting documentation of the employee's minimum hours worked and premium payment (Optional/Voluntary Life coverage). If the claim filed is for a dependent, we still require payroll records to verify that the employee was working prior to the dependent's death and, if applicable, to verify that the employee was contributing to the cost of coverage up until the dependent's death.

## ✓ Copies of current and historical enrollment information and forms

We will need copies of the most current enrollment confirmation/form and the employee's initial benefits enrollment confirmation/form. If the employee made any changes to their benefits enrollment elections, we will also need copies of their historical enrollment confirmations/forms. Acceptable documentation includes hardcopy enrollment forms, online enrollment screenshots and benefit confirmation statements. This documentation should show coverage volumes and the signature date/effective date of coverage.

If the total Life and AD&D claim coverage amount for the deceased is equal to or less than \$25,000, enrollment verification is not needed.

### Why do we request this?

We need this information to confirm the employee's enrollment in Sun Life's Life benefit, and to help us determine if Evidence of Insurability was required and completed. This includes providing us with the prior carrier's enrollment form. We must be able to construct an enrollment timeline and support the increases in coverage in accordance with the policy guidelines. This information is different than the information you provided to us during implementation.

## ✓ Copy of the beneficiary designation form

Providing the most current beneficiary designation form on file will allow the Sun Life claims analyst to communicate with and pay the appropriate beneficiary. Acceptable forms of beneficiary designations can be a hardcopy enrollment form, online enrollment screenshot, or benefit confirmation statement dated prior to the claimant's passing. The coverage name and the percentage of coverage to be paid the beneficiary(ies) should be shown. Prior Group Life carrier designations can be used if specific to their Group Life coverage. If there is no beneficiary on file, Sun Life will pay the claimant in accordance with your group's policy.

## ✓ Death certificate

If the total Life and AD&D claim coverage amount for the deceased is equal to or less than \$25,000, we do not require a death certificate for this amount if we can confirm the death in other ways, such as with an obituary.

If the total Life and AD&D claim coverage is more than \$25,000, Sun Life will reach out to the claimant to obtain a copy of the original death certificate confirming the **cause and manner** of death. **Sun Life requires the long-form death certificate.** The short-form certificate does not provide proof sufficient to satisfy the claims requirements. We cannot pay claims with a pending manner of death indication.

**We will accept a scanned copy of all death certificates, excluding those for deaths that occur outside U.S. territories.**

## ✓ Claimant Statement

This statement provides the Sun Life claims analyst the beneficiary's contact information and claim payment selection (lump-sum check, direct deposit, or interest-bearing account, if applicable). Once we have verified all beneficiaries, Sun Life will request a claimant statement from each beneficiary.

## ✓ Authorization forms

In some situations, the Sun Life claims analyst will need to request accident or police reports, or medical records. The authorization forms will enable the analyst to request and obtain any health-related information and non-health-related information that must be reviewed as part of the claim decision process. **The claimant (at least one named beneficiary)** should complete the authorization forms.

AD&D claims require review of medical examiner and/or toxicology reports. Unfortunately, these reports can take some time to become available from the state. Sun Life has a process for continual outreach on these types of pending reports. If possible, we will process payment on the Basic or Optional/Voluntary Life piece while we wait to receive any required medical examiner and/or toxicology reports.

## ✓ Funeral Home Assignment (optional)

If applicable, the **claimant** should obtain a Funeral Home Assignment form directly from the funeral home and submit it with the death certificate. If the claim is approved, we will pay the benefit proceeds directly to the funeral home, and then pay any remaining proceeds to the named beneficiary(ies). The beneficiary should reference Sun Life and the Group Policy number on this form, and all beneficiaries need to sign and date it.

## 2. Reviewing the claim

After the claim packet is submitted, a Sun Life claims analyst will review the initial submission within five business days. Not all initial claim submissions will be considered “in good order,” which means some of the documents we need to make a decision are missing. If this happens, the claims analyst may request additional information by phone, email or letter. We will review any additional information within five business days of receiving it.<sup>2</sup>

Once the claim submission is deemed complete, if the claim is determined payable, the analyst will issue the payment within 10 business days.

All correspondence will include the direct phone number of the Sun Life claims analyst who is reviewing the claim. The beneficiary can contact the analyst directly to inquire about the status of his or her claim. Employers can determine the status of a claim by visiting Sun Life Connect.

## 3. Notifying the beneficiary

### Claim approval

If we approve the claim, the Sun Life claims analyst will mail a payment letter along with the benefit payment directly to the beneficiary. The payment letter will outline the amount of the claim and the coverage the employee had in place under the policy.

The beneficiary can receive the benefit payment by check, direct deposit, or interest-bearing account:

- If the claim is approved and the benefit payment is less than \$10,000, Sun Life will send the beneficiary a check or direct deposit for the full benefit amount.
- If the claim is approved and the benefit payment exceeds \$10,000, the beneficiary can choose to receive the payment by check or direct deposit for the full benefit amount, or choose to have the benefit amount set up in an interest-bearing account (subject to state availability).
- For direct deposit, the “Direct Deposit Authorization” form will need to be completed and sent to Sun Life. Sun Life can also send the form via DocuSign for a faster turnaround.

If the claimant submitted a funeral home assignment, the proceeds will first be paid to the funeral home, and the remainder will be paid to the beneficiary. If there are multiple beneficiaries, the remainder will be paid in accordance with the percentages indicated in the beneficiary designation.

### Claim denial

If the claim is denied, we will send the beneficiary a letter of explanation detailing the right to appeal. If the denial letter contains any medical information, the analyst will send a generic denial letter to the employer for its records. The timeframe to appeal is 180 days from the date the claim decision was made.

**Questions?** Contact your Client Relationship Executive, call us at 800-247-6875, or email us at [client.services@sunlife.com](mailto:client.services@sunlife.com).

1. In the event of changes to Sun Life forms or requirements, additional information from the employer or claimant might be required. Information needed regarding a claim may change on a case-by-case basis.

2. Instances such as, but not limited to, claim handling for minor beneficiaries, lost beneficiaries, claims without beneficiaries and situations where death may be the result of a suspected criminal act may result in the delay of a Life claim. Additionally, police reports, toxicology screens, autopsy reports and the death certificate may be required for an AD&D claim. The level of review for these claims may result in a processing delay.

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