



HOW TO CLAIM

TIPS FOR A QUICK AND EASY CLAIMS PROCESS



WHEN SHOULD A DISABILITY CLAIM BE SUBMITTED

WHEN AN EMPLOYEE

- Is unable to work due to an extended period of illness or injury
- Is unable to perform their duties after being off work due to illness or injury
- Has a chronic / progressive medical condition that is affecting their ability to perform their key work requirements
- All claims should be submitted as soon as possible, but not later than 12 months from the date that the employee was last able to perform their duties at work.

WHAT DOCUMENTATION SHOULD BE SUBMITTED?

Please refer to the checklist on page 1 of the Application for Disability Benefits form, and ensure that all the information on the checklist is included.

www.oldmutual.co.za/groupassurance



WHAT MEDICAL INFORMATION IS REQUIRED?

An employee applying for a disability benefit should have been examined, diagnosed and treated by a medical specialist for the health condition or injury for which the claim is being submitted. The medical specialist may complete either a medical questionnaire or provide a separate comprehensive medical report, whichever is more convenient.

The medical report / questionnaire should comment on past medical history, diagnosis, clinical findings and symptoms, current treatment and treatment plan. Test results and reports should be attached, if applicable. Unfortunately sick certificates or confirmation of a diagnosis alone is insufficient for the purposes of a claims assessment.

WHO PAYS FOR THE MEDICAL INFORMATION?

Payment for all diagnostic tests, assessments, treatment, and the provision of the medical information for submission of a claim is for the claimant's cost.



HOW LONG DOES IT TAKE TO FINALISE A CLAIMS ASSESSMENT?

The standard for the validation and assessment of a new claim is a maximum of 8 days. However, if the claims package is incomplete, or if additional / independent medical information is required, the overall cycle time will increase while we await the additional information. Submission of complete information facilitates a fast and efficient claims process.

WHEN WILL THE DISABILITY BENEFIT BE PAID?

If a claim is approved, the benefit will be paid in accordance with the terms and conditions of the employer policy contract.

For more information, contact our HR911 line on 021 509 3911 or visit our website at www.oldmutual.co.za/groupassurance.

This document does not comment on the detail of benefit structures or specific structures or specific level agreement. The terms and conditions of the specific policy, contract will prevail in the event of disputes.



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