

**MRIGlobal** 962714

## How to submit your claim

Sun Life provides easy access and steps to assist you with submitting your disability and absence claim<sup>1</sup>.

## 1. Submitting your absence claim online.

We have an easy to follow online tool that walks you through the claim submission process. To get started, sign in to your Sun Life account at www.sunlife.com/account and click on "Submit a claim."



Call our toll-free number, 888-444-0239, Monday through Friday, 8:00 a.m. to 8:00 p.m. ET.





· Certification form

• Instructions on next steps • Rights and Responsibilities notice

**3.** Send complete forms to us. You will need to complete the forms provided in your acknowledgment packet. You can send them back to us using the methods below. Please be sure to include your name and claim number (e.g. NTN-12345).

Online: www.sunlife.com/account

Email: myclaimdocuments@sunlife.com

Fax: 781-304-5599

Sun Life Mail:

P.O. Box 81915

Wellesley Hills, MA 02481-0011

Your case specialist will notify you if additional information, forms or certifications are required.

**4.** Claim management and review. A case specialist will review your claim as soon as we receive all completed forms and paperwork.

- · We will contact you with our claim decision as well as send a letter explaining the details of our decision.
- If you're taking an intermittent absence and you need additional time than originally approved, you need to re-certify your request.



During the claim submission process, we will ask you for the following information:

- · Why you're requesting an absence
- Whether your absence request is for a continuous, intermittent or reduced schedule
- · Information about the treating healthcare provider(s)
- Dates expected to be absent from work, if applicable (estimated dates are ok)

For information about your claim, sign in to your Sun Life account at www.sunlife.com/account and click on "View claim status" or call us at 888-444-0239, Monday through Friday, 8 a.m. to 8 p.m. ET.

When calling please reference your claim number.





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