Essential Funeral Plan _ Claims

The Claims Submission Process

CLAIMS SUBMISSIONS

WHEN ARE CLAIMS PAID?

When death has occurred, the FSP or End Member are to immediately inform the following stakeholders:

- The Regional Manager.
- Email the claim to the FMEFCClaims mailbox (<u>FMEFCClaims@oldmutual.com</u>) or,
- Drop claims to the SFTP folder (Secure File Transfer Protocol) " Dropbox" or,
- Hand deliver claims to the Sales Support Administrator (SSA) at your closest branch.

NB: Ensure all Claim documentation is completed and meets all the relevant requirements. Where hand delivered, ensure the front page of the claim form is signed and date stamped, by the SSA and the FSP.

The FSP may only claim for covered lives and a claim can be submitted where the following requirements are met:

- The premium payment of the scheme must be up to date.
- The premium payment of the Deceased must be up to date (end member reconciliation).
- The deceased must be included in the data file or bill schedule received from FSP and Old Mutual respectively on a monthly basis.



CLAIMS REQUIREMENTS

WHAT ARE THE REQUIRED DOCUMENTATION FOR SUBMITTING A CLAIM

The following requirements must be met upon submission of Claims:

Completed and signed claim form including beneficiary consent (Mandatory)



- Certified copies of Death certificate and registration of death (BI-1663)
- Certified copies of Identity Documents of:
 - Principle Member (PM)
 - Deceased
 - > Claimant Only applicable if claimant is not a Principal Member
 - > BI-1680 Only applicable if death was not certified by a medical practitioner
- Proof of full-time study is required for children between ages of 21 26 years
 - > A recent signed and stamped letter from the educational institutional (not older than 3 months)
- Medical proof of disability is required for deceased individuals who were permanently or physically disabled and fully dependent on their parents
 - A recent signed and stamped letter from a registered medical practitioner is required (not older than 3 months)
- In the case of unnatural causes of death (incl suicide) the following is required
 - Police report
 - Medical report
 - > Accident report



CLAIMS REQUIREMENTS

WHAT ARE THE REQUIRED DOCUMENTATION FOR SUBMITTING A CLAIM

Additional requirements must be met upon submission of Claims:

- Sworn Affidavit Only applicable if;
 - > ID submitted at New Bus stage does not match the death certificate
 - > ID of the deceased cannot be traced (lost or stolen)
 - > Change of surname
- Letter from Home Affairs Only applicable if;
 - > ID Number or Name/Surname differ to death certificate due to changes at Home Affairs
- Proof of Premium paid (End Member to FSP) Only applicable at New Business stage.

Exceptional Requirements

- Letter stating Services was rendered to the End Member Only applicable where the beneficiary differs to what is on the claim form.
- Proof of claim payment in cash by FSP to the End Member Only applicable where the beneficiary differs to what is on the claim form.
- A motivation letter from the FSP for any claim submitted older than 3 months i.e. where the death occurred more than 3 months prior to claims submission.

NB: All documents must be clear and legible. Certification cannot be older than 3 months.



CLAIMS STATUSES

WHAT IS DOES MY CLAIM STATUS MEAN?

Please take note of the following claims statuses as a guide on your claim submissions:

STATUS	REASON
Paid	All requirements are met.
Work in Progress (WIP)	 Received, in assessment stage.
Claim was previously submitted	The same claim was submitted more than once
Pending	 Required information not received. Documents received unclear/ Illegible or outstanding Beneficiary consent not completed on claim form.
Declined	 The deceased is not a member on your data provided. The deceased died within the waiting period of the policy. The premium for FSP has not been received. The deceased policy has lapsed due to no premium received. A letter will be sent to you with the reason for decline
Outstanding requirements not provided within SLA – Claim closed	 Claim was pended and outstanding requirements were requested, should you not send this within 15 days of request, the claim will be closed.

ADDITIONAL INFORMATION - CLAIMS

WHAT SHOULD REMEMBER?

VERY IMPORTANT additional information UPON and AFTER claim submissions:

- Upon Claim Submissions
 - > A stillborn child had to be inside the womb for at least 182 days. (Limited TBC)
 - Claims are honoured within the grace period rule of the FSP, and no off setting of outstanding premiums is allowed.
- After Claim Submissions
 - ➤ Where the deceased is the Principal Member, the FSP must submit a Principal Member replacement form with the claim to ensure there is continuation of Policy cover.

NB * Where the replacement of principal member form is not submitted inline with the FSP rules, the policy will cease and relevant waiting periods will be applicable.

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CLAIMS CONTACT DETAILS

WHO CAN I CONTACT REGARDING MY CLAIM?

CONTACT PERSON	TELEPHONE NUMBERS	EMAIL ADRESS
The claims team	021 509 8631	FMEFCClaims@oldmutual.com
Enquiries	0860 331 444	gsfmqueries@oldmutual.com
Scheme Support	021 509 1708	FMEFCClaims@oldmutual.com