A guide to making a claim – Frequently Asked Questions

We aim to make the claims process as straightforward as possible. This leaflet guides you through the process and answers some of the questions we are frequently asked.

This leaflet may not answer all of your questions, as the individual circumstances of each claim will differ. If you have any further queries please get in touch with our claims team using the contact details at the end of this leaflet.

Please note that claim payments will be withheld if any information relating to any aspect of the scheme that we have asked for is outstanding or the premiums we have asked for have not been paid when due.

When should we submit a claim?
A claim should be submitted as soon as possible after an insured person suffers one of the insured critical illnesses shown in your Policy. But please note that for claims in respect of multiple sclerosis and permanent total disability, a six month period must elapse from the date of diagnosis, before we will consider a claim. With the exception of multiple sclerosis and permanent total disability (where the time limit is 12 months) you must submit your claim to us within the six months after an insured person suffers an insured illness.

How do we make a claim?
If you wish to make a claim, we will initially need:

• a fully completed original, current claim form signed by an official of the principal employer.
• a fully completed original, current Personal Statement form. This includes a consent that provides us with the authority to obtain further information from the employee’s doctors as required under the Access to Medical Reports Act.
• where a spouse’s benefit is being claimed, an original copy of the spouse’s marriage certificate.
• where a civil partner’s benefit is being claimed, an original copy of the civil partnership certificate.
• where a child’s benefit is being claimed, an original copy of the birth certificate and adoption certificate (if appropriate).

These should be sent to us at the address provided at the end of this leaflet.

How do we obtain a claim form and Employee’s Personal Statement?
Forms may be obtained from:

• your financial adviser
• Canada Life Group Insurance (see contact details at the end of this leaflet)
• our website: www.canadalife.co.uk/group

How is a claim assessed?
Once we have received all our initial requirements, we will advise you within 5 working days:

• what further information we require to assess the claim; or
• whether we can consider your claim. If we cannot consider your claim we will tell you why not.

When we start to assess your claim we will obtain details of the member’s medical history and treatment for the present illness from their general practitioner and/or consultant. We will also consider any medical reports or additional information that you or the member may wish to provide, or provide on behalf of the insured person.
**Who pays for the medical evidence?**
Canada Life will pay for any medical reports or tests in the UK, that we ask for.

**How long will it take to process my claim?**
We are unable to provide specific timescales, as to assess your claim we need reports and information from medical and other professionals, which may take some time to complete. However, we follow up all information requested and aim to keep you adequately informed.

**How will benefits be paid?**
If your claim is accepted, benefit will be paid in one lump sum for the insured amount in the form of a cheque payable to the member.

**Is the benefit taxable?**
Critical illness benefits paid to a member are not normally subject to tax.

**After a member has suffered from an insured critical illness, can another claim be made for that member?**
If a member suffers a second insured illness; and has not already received a benefit in respect of that insured illness, then a second claim may be payable, subject to the pre-existing conditions exclusion shown in your quotation, and certain other exclusions detailed below.

Once a second claim has been paid for a member (or first claim in respect of a spouse, civil partner or child) then a subsequent claim will not be payable in respect of that individual.

**Illnesses where we will not pay a second claim for any other illness**
If a claim is paid for any of the following illnesses:
- permanent total disability; or
- terminal illness
we will not pay a subsequent claim for any other insured illness for that person.

**Circulatory system related illnesses**
If a claim has been paid for any of the illnesses listed below, we will not pay a subsequent claim in respect of any of the other illnesses listed below for that person:
- aorta graft surgery,
- coronary artery bypass grafts,
- heart attack,
- heart transplant,
- heart valve replacement or repair; and
- stroke.

**Major organ transplant and kidney failure**
If a claim has been paid for major organ transplant of a kidney or kidney failure, we will not pay a subsequent claim for the other of these two illnesses for the same insured person.

**Permanent total disability**
If a claim for any insured illness has been paid, we will not pay a subsequent claim for permanent total disability for the same insured person.

**Paralysis of limbs**
If a claim has been paid for any other illness, we will not pay a subsequent claim for paralysis of limbs for the same person.
Terminal illness
If a claim has been paid for any other insured illness, we will not pay a subsequent claim for terminal illness for the same person.

Spouse, civil partner and children
A second claim cannot be paid for a spouse, civil partner or a child.

If the member suffers from a recurrence of the same critical illness condition?
No.

What happens to the claims if the Policy is discontinued?
If a member is diagnosed with an insured critical illness before the Policy is discontinued, Canada Life will assess your submitted claim as normal.

If a member’s date of diagnosis is after the Policy has discontinued, Canada Life will not be liable for the claim.

Who should we contact about our claim?
We can be contacted at:

CI Claims Team
Canada Life Limited
3 Rivergate
Temple Quay
Bristol
BS1 6ER

Fax: 01707 671100
Email: ipclaims@canadalife.co.uk
Website: www.canadalife.co.uk/group