

# How to file a claim

## Waiver of premium, accelerated benefit or accidental dismemberment

**Policy #:**

**Policyholder:**

### ① Collect the following information

- Member's employment and insurance information, including life insurance class, company division, date of hire, coverage effective date, last day worked and—if applicable—employment termination date and salary if benefit is a multiple of earnings.
- Member's and if applicable dependent's demographics, including address, Social Security number and date of birth.

### ② Initiate a claim

- Visit [www.symetra.com](http://www.symetra.com) and click "My Account."
- Under "Forms & Reports," click on "Forms."
  - Download the appropriate claim packet (Waiver of Premium, Accelerated Benefit or Accidental Dismemberment).
  - Enter all required information.
  - Mail the completed claim form and supporting documentation as instructed in the packet.

### Supporting documentation:

- Copies of all enrollment and beneficiary forms completed by the member.
  - Screenshots of electronic enrollment and beneficiary elections are acceptable if the history can be shown.
  - Beneficiary forms are not needed for accidental dismemberment claims.
- Attending Physician's Statement completed by the member, or by the dependent<sup>1</sup> for a dependent claim, and his or her treating physician.
- Authorization for Release of Medical Information form completed by the member, or by the dependent<sup>1</sup> for a dependent claim.
- Proof of earnings as defined in your policy for claims over \$100,000 when benefit amount is based on earnings.
  - You may request that the member mail the Attending Physician's Statement and authorization documents directly to Symetra.

### Contact us:

**LADCLA@symetra.com**  
**[www.symetra.com/MyGO](http://www.symetra.com/MyGO)**

**Call 1-877-377-6773**

Monday–Friday  
8a.m. to 8 p.m. ET  
Fax: 1-877-737-3650

Mailing address:  
P.O. Box 1230  
Enfield, CT 06083

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## Frequently Asked Questions

### What happens after the claim is submitted?

The claim will be assigned to a life claims specialist the day it is received. Letters acknowledging receipt will be sent to you and beneficiary (or beneficiaries, if more than one). The claim will be reviewed within 48 hours. If additional information is needed to make a claim determination, it will be requested from you or the beneficiary.

### Who do I contact if I have a question about a claim?

Call our toll-free number, 1-877-377-6773 or send an email to LADCLA@symetra.com. Refer to the claim number found in the acknowledgment letter.

### How can I check the status of a claim?

Contact Symetra by phone at 1-877-377-6773 or log in to the GO portal through [www.symetra.com](http://www.symetra.com) to view your claim data.

### What if an enrollment and/or beneficiary form is not available?

Submit the claim with the documents you have available. Include a note explaining that you have no enrollment or beneficiary forms and why.

### When should a waiver of premium claim be filed?

If a member has been continuously off work due to illness or injury for the elimination period specified in your policy, a waiver of premium claim should be filed. In no event should it be filed more than one year after the member's last day of work.

### Will life premium payments continue during the waiver of premium elimination period?

Premium payments should continue as long as the member's coverage has not ended.

### Should the member apply for conversion and/or portability if a waiver of premium claim has already been submitted?

If the member's coverage ends during the waiver of premium elimination period, the member may exercise the conversion and/or portability opportunities specified in the policy. This will ensure continued coverage in the event the waiver of premium claim is not approved. If approved, you must surrender your conversion or portability coverage in order for the waiver of premium benefit to become effective.

### If the member is not able to work due to a terminal illness, should a waiver of premium claim be filed?

We will automatically open a claim if the member is unable to work due to a terminal illness. Once the waiver of premium period specified in the policy ends, you and the member will be notified in writing of the claim determination.

### How long does it take to determine eligibility for the waiver of premium?

A decision will be communicated to you and the member near the end of the elimination period specified in your policy, provided all necessary documentation has been received. Should all documentation be received after the elimination period ends, a decision will be communicated within five business days of receipt.

### Can a member be approved for long-term disability but not waiver of premium or vice versa?

Yes. The eligibility criteria for long-term disability, Social Security Disability Income and waiver of premium benefits are not the same. It is possible to be approved for one but not the other.

### How long does it take to determine eligibility for an accelerated benefit or accidental dismemberment claim?

Once all necessary information is obtained, a decision usually takes less than five business days. Payment is sent directly to the member and written notice of the payment is sent to you.

### Is an accelerated benefit taxable?

Accelerated benefit proceeds may be considered taxable income. If an accelerated benefit payment is made, Symetra will send an IRS 1099-MISC form to the recipient in January of the year following the claim payment. The recipient should consult a tax advisor for more information.

### What if my claim or payment of a benefit is denied?

Symetra will send an explanation letter to the member with instructions on how to file an appeal if they disagree with our decision. You will receive written notice that the claim or a benefit has been denied. If we receive additional information to support the original claim, a life claims specialist will conduct a review. If the new documentation supports reopening the claim, we will do so. If no new information is sent with the appeal, or if the original decision is upheld, the file will be assigned to an appeals specialist for further review.



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[www.symetra.com](http://www.symetra.com)

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This is a brief description of some claim procedures that may apply to your Symetra Group Life policy. It is not intended to become part of your plan nor does it replace the information or benefits contained in the policy. If there is any conflict between the provisions in this document and the policy, the policy will prevail.

Group life policies, insured by Symetra Life Insurance Company, 777 108th Avenue NE, Suite 1200, Bellevue, WA 98004, are not available in any U.S. territory.

Coverage may be subject to exclusions, limitations, reductions and termination of benefit provisions. For costs and complete details of the coverage, call your HR representative.

<sup>1</sup> Dependent must be 18 years or older to complete forms.