

CLAIMS PROCEDURE

GROUP LIFE INSURANCE

Claim Notification

To register the claim, claimant needs to notify us within 30 calendar days from the date of the event via email to life.claims@sukoon.com with the below details. Claim reference number will be sent within 4 working days of receiving the notification email.

- Group Life policy number
- Employee name
- Date of birth
- Employee number
- Subunit name – full name of the unit (if applicable)
- Date of joining the company
- Benefit claiming (death / disability / sick leave / ame)
- Date of loss
- Cause of loss (accident or sickness)
- Place of loss
- Details of illness, injury, or diagnosis
- Monthly salary at the time of loss with break up as per policy agreement (basic and fixed allowances)

Please note that it is mandatory to provide the above information in tabular format while notifying claims via email.

Claim Settlement

The client needs to send the scanned copy of duly signed and stamped discharge receipt along with bank details in the below format on the company letterhead. The details need to be shared within 7 days of receiving the discharge receipt from Sukoon Insurance PJSC (hereinafter referred to as “Sukoon”) for processing the payment.

- Name of the company as per bank account
- Account number
- IBAN number
- Name of the bank and branch
- Swift or IFSC code
- Bank account currency

Once this is received, the amount will be transferred through Sukoon’s bank account within 14 working days. Client will receive an automated payment advice response from MATRIXOnline@mashreq.com

Turnaround Time (TAT)

Action	TAT
New claim registration	3 working days
Claim review	7 working days
Credit note issuance.	3 working days
Bank Transfer by Sukoon accounts department	10 working days from the credit note issuance date

For any queries or follow up on your claim, please contact Life claims team on +971 4 2337257 or +971 4 2337219 or write to us at life.claims@sukoon.com



Document Requirements

a. Death claim

For processing the claim, please send the scanned copy of below listed documents to life.claims@sukoon.com within 30 days from the date of notification of claim.

- Duly filled signed and stamped claim form. To download the claim form, kindly visit <https://www.sukoon.com/downloads?product=Life&productcategory=Business>
- Official **Death Certificate** issued by the Government body from the registry of births and deaths.
- Medical report or death notification report detailing the cause of death.
- Copy of passport including valid visa page.
- Copy valid national ID card
- Copy of labour contract
- Copy of salary slips for last 3 months prior to date of death.
- **Accidental Death:** Police report or postmortem report or autopsy report
- **Death outside UAE:-**
 - Copy of leave application form submitted prior to leaving to home country.
 - Copy of passport page in which date of exit from the country of work location is stamped.

Original documents required for death claims if applicable.

- If death happened outside the country of work location, client should submit original death certificate attested by the Embassy/Consulate of the country where death occurred. This will be returned after verification by the claims team.
- If repatriation expenses are covered within the policy, provide original repatriation expenses invoices.

The original documents can be sent to the below address.

Life Claims Team

Sukoon Building | Omar Bin Al Khattab Street | Next to Al Ghurair Mall | Deira P.O. Box 5209
Dubai | United Arab Emirates
Tel: +971 4 2337257 or +971 4 2337219

b. Disability (permanent total and permanent partial disability) claim

For processing the claim, please send the scanned copy of below listed documents life.claims@sukoon.com within 30 days from the date of notification of claim.

- Duly filled signed and stamped claim form. To download the claim form, kindly visit <https://www.sukoon.com/downloads?product=Life&productcategory=Business>
- Copy of Disability certificate should be assessed and certified by the Government Medical Board (GMB) / hospital of the country of work location mentioning the percentage of disability.
- Copy of medical reports based on which GMB has issued disability.
- Copy of passport including valid visa page.
- Copy Valid national id card
- Copy of labour contract
- Copy of salary slips for last 3 months prior to date of death.
- **Disability due to major accident:** Police report detailing the accident.



c. Sick leave and accidental medical expenses claim requirements

For processing the claim, please send the below listed documents in **original** within 30 days from the date of notification of claim to the below mailing address.

- Duly filled signed and stamped claim form. To download the claim form, kindly visit <https://www.sukoon.com/downloads?product=Life&productcategory=Business>
- **Original** sick leave certificate for the period of sick leaves claiming.
- **Original** medical expenses invoices.
- Copy of Medical report from treating doctor detailing the diagnosis and treatment provided
- Copy of Doctor's prescription for medicines purchased
- Copy of X-ray and Laboratory reports for the lab bills submitted. (Please **do not** send any CDs or original X-ray films unless specifically requested by claims team.)
- Copy of passport including valid visa page.
- Copy Valid national ID card
- Copy of salary slips for last 3 months prior to date of loss.
- **If claim due to major accident:** Police report detailing the accident.

Sukoon reserves its right to ask for additional documents as may be required and relevant for claim assessment. If the claim is approved, discharge receipt will be sent to the client for confirmation of the claim amount payable.

Sukoon's Data Privacy Notice and Data Subject's Consent

Sukoon Insurance PJSC (hereinafter referred to as "Sukoon") respects your privacy and is committed to protecting it. Sukoon abides by Federal UAE Data Protection regulations as is applicable to Sukoon within UAE. Each of the applicant(s), proposer(s), insured member(s), beneficiary(ies), insurance intermediary(ies), any person(s) contacting Sukoon for any purpose (altogether referred to as "Data Subject"/"you"/"your") hereby consents and authorises Sukoon Insurance PJSC ("Sukoon") to collect, use, store, maintain, transfer, disclose, Process, Data Subject's personal data (which includes but is not limited to personal identification data, personal sensitive data, personal health data as provided to and/or obtained by Sukoon) in accordance with Sukoon's data privacy policy as published on <https://www.sukoon.com/privacy-policy> ("Privacy Policy"), which each Data Subject confirms to have been notified and having read, consented to the same. The Data Subject confirms to have notified all other relevant Data Subject(s) about Sukoon's Privacy Policy and to have obtained their relevant consents prior to transferring any of their personal data to Sukoon.

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