

Living Benefits Claims: -

1. Maturity/Pension Maturity Claims:

A Maturity/Pension Maturity Claim becomes payable at the end of the policy term. In order to process the maturity claims the customer should submit the following documents at the nearest SBI Life branch:

- I. Original Policy Document (OPD) – In lieu of OPD, Indemnity Bond
- II. Discharge Voucher
- III. KYC Documents (Identity Proof as well as Residence Proof),
- IV. Direct Credit Mandate along with supporting documents (cancelled cheque/Bank statement attested by banker).
- V. For Pension Maturity – Duly filled Option Sheet along with Annuity Plus Proposal Form

2. Survival Benefit Claims:

Survival Benefit is a special feature of Money Back and Scholar Plans, where a predetermined percentage of the Sum Assured is payable to the Life Assured upon his survival up to a specified period of the policy term.

The claim cheques are sent 15 days in advance to the policy holders due for Survival Benefits. For the policy holders, who have submitted their direct credit mandate, the Survival Benefit amount is directly credited to the bank account on the due date.

However, **KYC Documents of customers is mandatory** for Survival Benefit Claims where the date of commencement of the policy is prior to 01.08.2006 and the annualized premium is more than Rs 10,000.

3. Health Claims:

Currently we have Hospicash Policy under our Health Portfolio. Hospicash is a pure health benefit product covering the event of hospitalization of the Life Assured.

For settling **Hospital Cash Claims**, the following process needs to be followed:-

- I. Any hospitalization must be intimated to E-Meditek TPA services Ltd before the hospitalization in case of pre planned hospitalization or within 24 hours in case of emergency hospitalization. The information such as Policy Number, Name of the Policy Holder and Name of the Insured Member/Life Assured Hospitalized, Name and Address of the Hospital with Contact details, Date and Probable Duration of Hospitalization should be provided.
- II. After the Hospitalization, Claims has to be registered with E-Meditek TPA services within 30 days of discharge from Hospital.

- III. The claim form can be obtained from TPA call Center or SBI Life Website – www.sbilife.co.in or E-Meditek website – <http://emeditek.co.in> . The Hospital Cash Claim form can also be obtained from the nearest branch of SBI Life or E- Meditek.
- IV. Documents required to be submitted along with the completed Hospital Cash Claim form includes:
- ❖ Copy of the Hospital Cash Policy Document
 - ❖ Hospital Cum Treating Doctor's Certificate
 - ❖ Discharge Card and Copy of the all medical documents / reports related to hospitalization
 - ❖ Identity Proof of the Policy holder
 - ❖ Age proof of the insured member /Life Assured
 - ❖ PAN Card copy of the Policy Holder (For Online Policies)
 - ❖ Direct Credit Mandate of the Policy Holder
 - ❖ Any other document as per the requirement of the TPA/Company depending on the type / cause of the claim.
- V. The claim form along with the above mentioned documents should be sent to the following address :
- E- Meditek (TPA) Services Limited,**
208-209, Turf Estate, Off Dr. E Moses Road,
Near Mahalaxmi Station,
Mahalaxmi, Mumbai 400011
- VI. On receipt of the completed Claim form along with necessary documents, E- Meditek would acknowledge the receipt of claim through an SMS and / or email on the registered mobile and or mail id.
- VII. E-Meditek will process the claim and respond to the claimant with 15 days from the date of submission of all the claim documents.

4. Annuity Claims:

Annuity Claims are installment amounts payable from the accumulated pension savings of a customer at regular intervals as decided by the customer.

Certificate of Existence needs to be submitted by a customer on yearly basis to enjoy continued benefits under the annuity policy along with a direct credit mandate to avoid the hassles of cheque payments.

5. Critical Illness (CI) Claims:

- I. It is an optional rider available in most of the SBI Life products covering 6 to 13 critical illnesses - details & definitions of which are given in the policy document.
- II. For lodging a CI claim, the CI claim form needs to be submitted to any SBI Life Office, along with **all the hospital / treatment papers** for which the CI rider benefit is being claimed
- III. The admission of CI rider claim is subject to establishment of the CI to the satisfaction of SBI Life as per the definition given in the policy document.

6. Total & Permanent Disability (TPD) Rider and Income Sustainer (IS) Rider

- I. Under these riders, the rider benefit (either in lump-sum or in installments) is payable on the life assured becoming totally and permanently disabled due to an accident (and in some products even due to any sickness)
- II. For lodging a disability claim, the TPD claim form needs to be submitted to any SBI Life Office, along with **all the hospital / treatment papers**, Disability Certificate (if any)
- III. The admission of TPD/IS rider claim is subject to establishment of Total & Permanent Disability to the satisfaction of SBI Life.

All forms and Formats related to Claim are available on SBI Life website –
http://www.sbilife.co.in/sbilife/content/17_3121