

## Claims guide.

Trauma, Terminal illness & Total permanent disability.

# Your guide to making a claim.

## We're here for you.

When something has happened to you or your loved one, when it comes to making a claim this can feel overwhelming. You may find yourself in a place doing things you've never had to do or even thought of doing before. And that's ok. We're here to guide & support you through every step of the way.

### Top tip:

You can nominate a support person to help you manage the claim process, such as a relative, your adviser, or your legal representative. In this document, when we say you, we are referring to yourself or anyone you nominate to support you.



## Your checklist.

Keep track of where you're at through the process by ticking each step below.

### Step 1.

Check your cover.

### Step 2.

Start your claim.

### Step 3.

Complete your claim form.

### Step 4.

Your dedicated claims specialist.

### Step 5.

Assessing your claim.

### Step 6.

Claim outcomes.

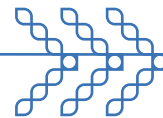


## Step 1: Check your cover.

First thing to do is to find your policy documents and check if your injury or illness is covered. Your policy wording, policy schedule and any endorsement schedule form the insurance contract between us and you, and set out all the details of what you're covered for. It's good to read through it so you know what it covers and if there are any conditions that must be met in order to make a claim.

### Top tips:

- If you can't find your policy wording give our claims team a call and we can send them to you.
- If you get stuck or need help to understand if you're covered, contact your financial adviser or give our claims team a call.
- If you have any endorsements (these form part of your policy) you will need to read these together with your policy wording to understand what you are covered for.



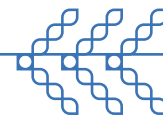
## Step 2: Start your claim.

You can let us know that you want to make a claim:

- over the phone (0800 88 22 88),
- by email ([claims@fidelitylife.co.nz](mailto:claims@fidelitylife.co.nz)),
- by post (Fidelity Life Assurance Company Limited, PO Box 37–275, Parnell, Auckland 1151, New Zealand), via your adviser, or
- by using our online claims form ([fidelitylife.nz/claims/make-a-claim/](https://fidelitylife.nz/claims/make-a-claim/)).

### Top tips:

- We're here for you though the claims process. It's also a good idea to ask your financial adviser to support you.
- If you want our claims team to discuss your claim in full with your financial adviser (e.g. share your medical or financial information), please ensure you complete the adviser consent section in your claim form.

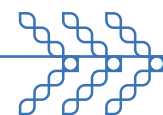


## Step 3: Complete your claim form.

We'll send some claim forms for you to complete to give us all the necessary information to help us assess your claim. You'll receive a letter listing what we need you to do including the documents or information you need to send us. We need your personal information, to assist us in identifying you and to help us ensure that your insurance benefits reach the right person; we may also need certain medical information relating to you or your loved one's medical condition. Please refer to the privacy statement on the claims form to understand what your personal information will be collected and used for.

### Top tip:

- If you don't understand why certain documents are required, please ask our claims team or your adviser to explain. They can also help you gather the supporting documents once we have your consent.



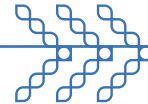


## Step 4: Your dedicated claims specialist.

Once we receive your claim form and any other required information, you'll be assigned a dedicated claims specialist. They're there to understand your situation, answer your questions and support you. Sometimes they may ask you for additional information to ensure accurate assessment.

### Top tips:

- The illness and injury definitions can often be quite technical, ask your claims specialist to explain what they mean if you don't understand them.
- If you're not sure if your illness or injury would fall under your policy definitions you can call the claims team to talk it through first.



## Step 5: Assessing your claim.

We'll make an assessment of your claim based on the information provided. Because everyone's situation is different, the length of time it takes to assess your claim is dependent on a few things, including:

- The type and complexity of your claim.
- Whether any independent medical assessments are required.
- The amount of information we must review as part of your claim.
- How quickly we're provided with the information we need.

### Top tip:

- Your claims specialist will keep you updated throughout the claim process and you can reach out at any time if you have any questions.



## Step 6: Claim outcomes.

We will notify you as soon as possible once we make a decision about your claim.

If your claim is accepted, we'll make arrangements for payment and discuss any alterations that need to be made to your policy as a result of the claim.

If we're unable to accept your claim because your illness or injury doesn't meet the requirements of your policy, your claims specialist will contact you to discuss this in detail.

If we don't have sufficient information to accept your claim, your claims specialist will explain what further information or steps may be needed for us to review or continue with your claim.

### Top tips:

- Discuss the outcomes with your adviser, claims specialist or treating medical practitioner.
- If you don't believe we have reached the right decision you can provide additional information, or make a complaint to appeal our decision.

