

AD&D Claims

Affidavit of Preference Beneficiary

Ancillary Accidental Death

Ancillary Eye or Limb Loss

Affidavit of Preference Beneficiary

Beneficiary Information

If the beneficiary on record dies before the insured person, or if there was no beneficiary named, benefits are paid to the estate of the insured person unless the policy has a Preferential Beneficiary provision.

If the benefits are to be paid to the estate, a certified copy of the Letters of Administration for the estate of the insured person is required. If the named beneficiary died prior to the insured person, a copy of the beneficiary's death certificate is also required.

If your policy has a provision for Preferential Beneficiary, **one** Affidavit of Preference Beneficiary must be completed, notarized and included with the claim. Use the applicable form.

You may obtain claim forms from your Group Office or visit our website.

A claim form will need to be completed by the Personal Representative who is handling the estate and submitted with the Affidavit of Preference Beneficiary.

If the beneficiary is a minor or is legally incompetent, it is necessary that we have a certified copy of the Appointment of Guardianship for the estate of the minor or for any legally incompetent individual's estate. The guardian of the beneficiary is responsible for consulting their legal counsel for assistance. A claim form will also need to be completed by the court-appointed Guardian.

Ancillary Accidental Death Claim

How to Complete The Accidental Death Form

- **Statement of Master Policyholder or Group Administrator**

These questions should each be answered as completely and accurately as possible. Please pay special attention to question number 4. The "Date of last active work" must show the last date the Insured was physically, actively employed at his/her usual place of employment.

The front side of this form must be completed by the beneficiary of record, as designated on the enrollment form or the latest beneficiary form. Each beneficiary must complete a separate form and the authorization at the bottom of the form.

You may obtain claim forms from your Group Office or visit our website.

Note: Employers MUST attach the original enrollment form/records plus any beneficiary changes to the Accidental Death Benefits form. If a dependent has a claim, you must submit to us a photocopy of the employee's original Enrollment Form and claim form.

Ancillary Accidental Eye or Limb Loss

How to Complete and File an Accidental Eye or Limb Loss Claim form:

1. Statement of Claimant and Authorization

These questions should each be answered as completely and accurately as possible.

2. Statement of Attending Physician

The physician should complete this section and return the form to you, the benefits administrator.

3. Statement of Master Policyholder or Group Administrator

Upon receipt of the completed form, you must complete this section.

You may obtain claim forms from your Group Office or visit our website.