

Checklist – Living Benefit Claim Requirements Sun Grepa Fit and Well (Child Conditions)

Important Reminders:

- Submit only certified true copies
- Documents submitted will not be returned

Basic Claim Requirements

1. **Claimant's Statement** [form to be supplied by Sun Life Grepa Financial, Inc.]
2. **Attending Physician's Statement** [form to be supplied by Sun Life Grepa Financial, Inc.]
3. **Authorization** [form to be supplied by Sun Life Grepa Financial, Inc.]
4. **Admitting History** or its equivalent inclusive of other hospital records containing patient's past medical history
5. **Discharge Summary** or its equivalent
6. Two (2) valid **Proofs of Identity** (*preferably government issued IDs with photo and signature*) of the insured
7. **Statement of Account** from hospital (for Sun Grepa Fit and Well Advantage plans only)

If cause of critical illness is violent or accidental

8. **Police Report**
9. **Medico-Legal Report**
10. **Driver's License** if accident occurred while insured was driving a vehicle

Additional Claim Requirements (*submit requirements appropriate to your health condition*)

If diagnosis is **Dengue Hemorrhagic Fever (Grades III and IV)** (*must be confirmed by Pediatrician, Hematologist or Infectious Disease Specialist*)

- All objective laboratory and diagnostic reports

If diagnosis is **Hemophilia A and Hemophilia B** (*must be confirmed by Hematologist*)

- **Blood Tests**
- **Clotting Factor Tests**

If diagnosis is **Insulin Dependent Diabetes Mellitus** (*must be confirmed by Pediatric Endocrinologist*)

- All laboratory tests and work-ups done

If diagnosis is **Kawasaki Disease** (*must be confirmed by Pediatrician or Cardiologist*)

- **Echocardiography**
- All objective laboratory and diagnostic reports

If diagnosis is **Osteogenesis Imperfecta** (*must be confirmed by Pediatrician*)

- **Medical records** indicating growth retardation and hearing impairment
- **X-ray Studies Results**
- **Skin Biopsy** or equivalent diagnostic test, if any
- All tests that support the diagnosis

If diagnosis is **Rheumatic Fever with Valvular Impairment** (*must be confirmed by Pediatric-Cardiologist*)

- **Echocardiography**
- **Medical records** showing valve incompetence persisting for at least 6 months

Note: Coverage will terminate on the policy anniversary on or following the life insured's 17th birthday. Other requirements may still be required after initial review of submitted documents. Contestable claims are subject to investigation and will affect processing time.

For further inquiries, please contact our Client Care at telephone number 8849-9633 from Mondays to Fridays, 8:00 a.m. to 5:00 p.m.