Sending your claim documents

Before you start

- Scan or take photos of the documents you want to send.
- Save the documents on your computer, tablet or smartphone with a descriptive file name (e.g., medical report), so they're easy to find later.

IMPORTANT Document requirements

Maximum	14 MB per file
file size	You can attach multiple files, as long as each file is under 14 MB.

Accepted PDF, file JPEG formats TIF T

PDF, DOC, DOCX, JPG, JPEG, PNG, GIF, PPT, PPTX, XLS, XLSX, ODT, ODS, BMP, TIF, TIFF, TXT.

 Once you've saved your claim documents, you're ready to send them to us.

Instructions

Go to the secure site: <u>www.DesjardinsLifeInsurance.com/Send</u>.



Provide the requested information in **Step 1 – Information**.

Step 1 Information	Step 2 Validation	
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Special instructions for completing the fields

Provide the **sender's** information (not necessarily one of the contract's insured persons):

- Title (Ms. or Mr.)
- First name
- Last name
- Email
- Phone number (you can add an extension, if needed)

Provide the **insured person's** information:

- First name
- Last name
- Date of birth



If the insured person and the sender are the same person, check this box:

Same person as sender

Indicate the **type of insurance** for which you're making a claim by selecting one of the three options:

Тур	be of insurance
\bigcirc	Group insurance through your employer or an association
\bigcirc	Individual insurance purchased online, by phone or in person
\bigcirc	Individual insurance linked to a credit card or loan

Click the arrow to select the **coverage type**:

overage type	
Select	~

Select the **type of claim** that you are making:

Type of claim
Accident
O Disability
O Critical illness
O Healthcare
🔿 Life

You must enter a contract number, certificate number, provider number or claim number. For help finding this number, click the question mark icon:

Provider or claim number	0
E.g., 045678912	

Click **Add** to attach your claim forms and supporting documents.

O Add

Select the claim documents you've saved on your computer, tablet or smartphone. In the example below, we've added a claim form and a medical report:

Claim form.pdf	342 ko	Î
Medical report.pdf	342 ko	Ô

If you upload the wrong document by mistake, simply click the trash can to remove it.

If you'd like to provide any other information about your claim, you can add a message here.

Once you've provided all the necessary information, click **Next** to go to **Step 2 – Validation**.

Step 1	Step 2
nformation	Validation

Check all the information in your claim.

- To change any of your answers, or add or remove a document, click Modify at the bottom of the screen to go back to Step 1 – Information.
- Once you've made sure all the information in your claim is correct, click **Send.**



Write down your confirmation number: it's proof that your documents have been sent to Desjardins Insurance.

