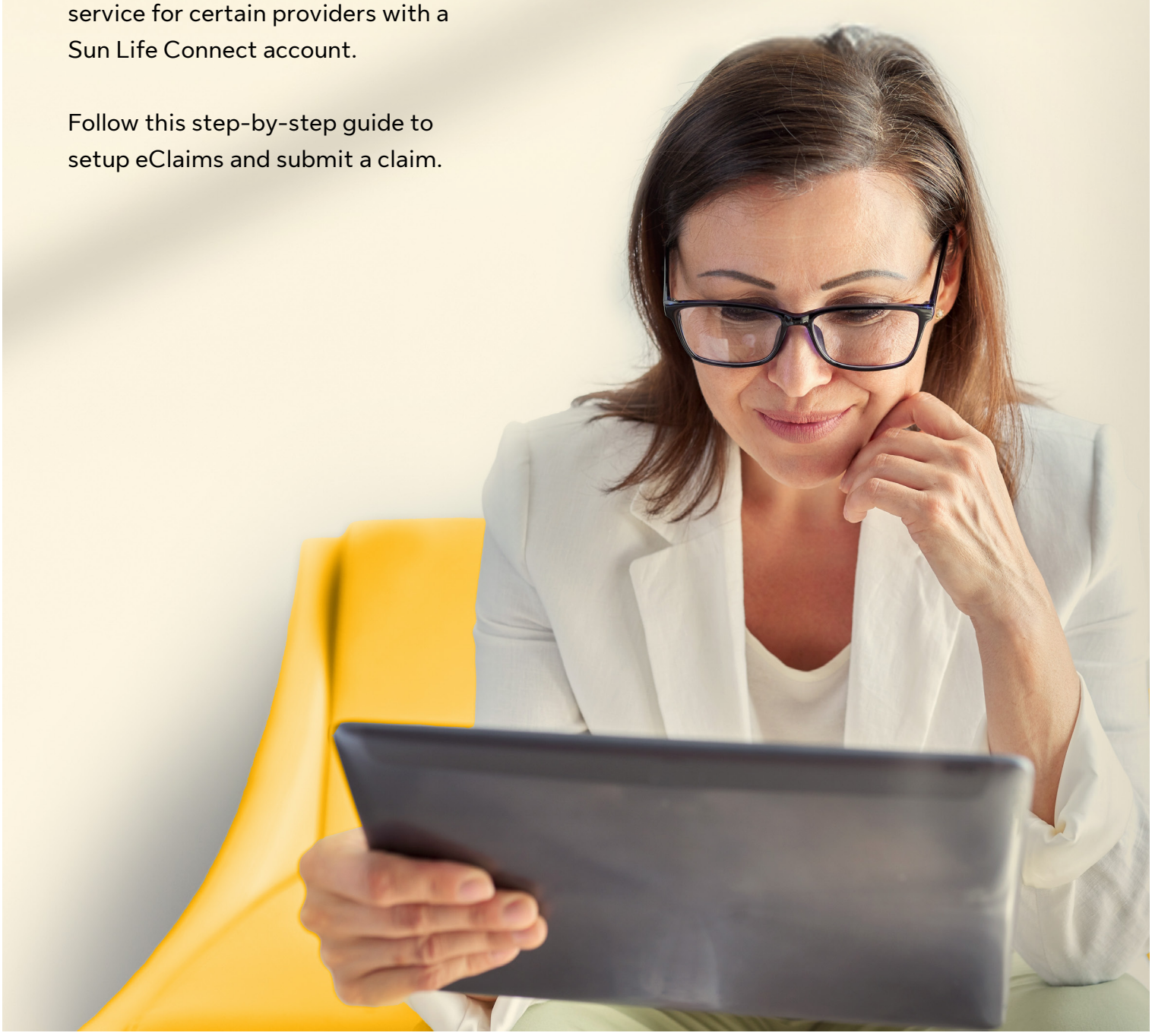
# Sun Life Connect eClaims User Guide

eClaims is a free, easy-to-use service for certain providers with a Sun Life Connect account.

Follow this step-by-step guide to setup eClaims and submit a claim.



Sun Life

**In order to setup eClaims, you will need to have registered for a Sun Life Connect (SLC) account.**

During the SLC registration process, you will provide information about your role at the practice, business information and what specialties your facility offers.

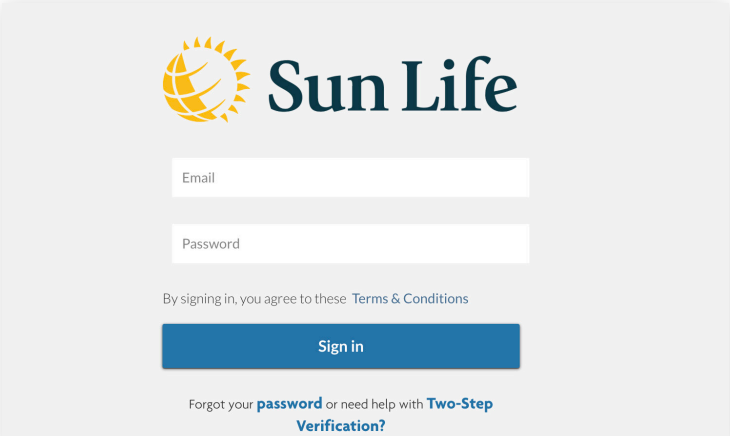
Providing this information will confirm what features are available to your facility in SLC, which includes eClaims and Provider Search. eClaims and Provider Search are free services and will be automatically added to your SLC account if you're eligible.

Eligibility is determined by your specialty. If you have questions about your eligibilty, please contact us at **provider.search@sunlife.com** or call us at **1-800-619-8835.**

# Setting up eClaims

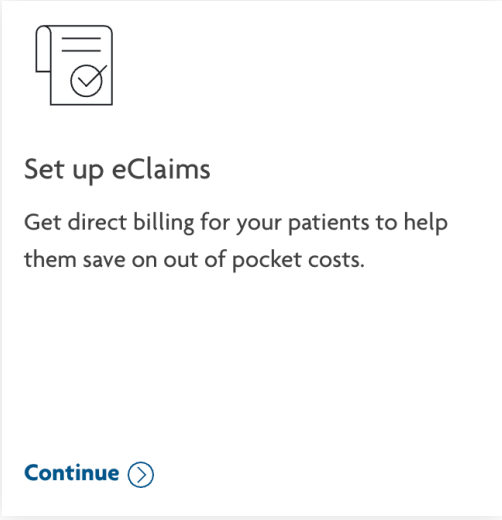
## Step 1

Log in to your Sun Life Connect account.




## Step 2

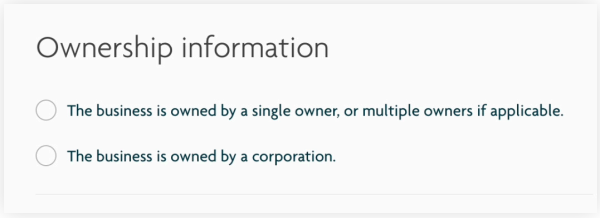
Click on the banner on the homepage to begin the quick and easy setup for eClaims.

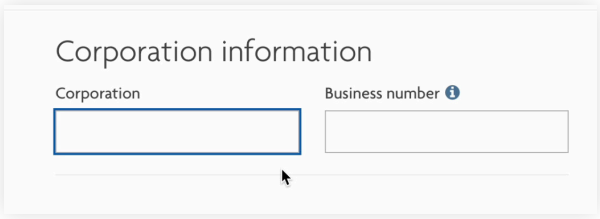


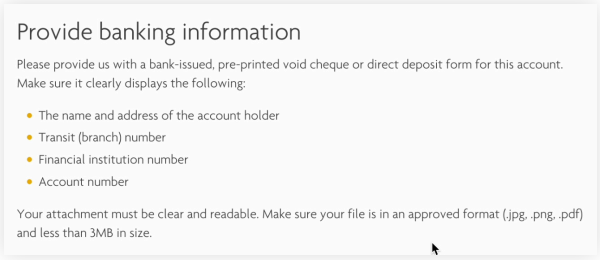
## Step 3

You'll need a few pieces of information to set up eClaims:

- First, ownership information, such as the name of who the business is owned by – be it either a single owner, multiple owners or a corporation.
- Second, ownership details (including the registered business number).
- And lastly, banking information for direct deposit. You can upload a bank issued, pre-printed void cheque or a direct deposit form.
  - Make sure it clearly displays the name and address of the account holder, transit number, financial institution number and account number.



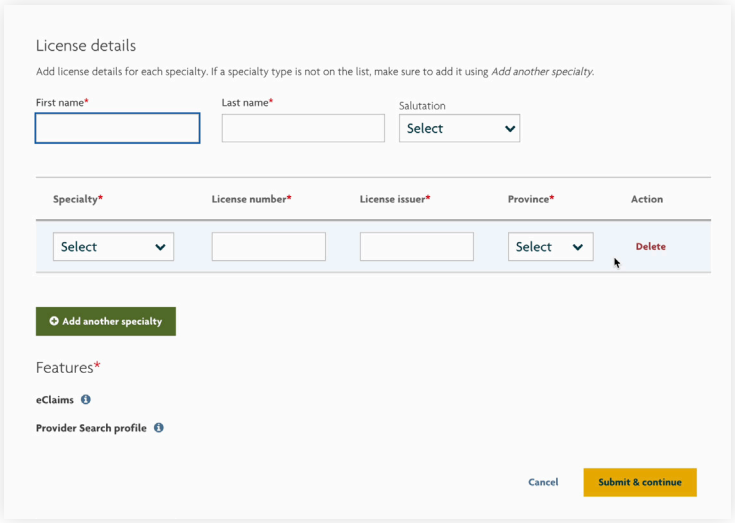

## Step 4

Once you've provided this information, you can add further details about the providers who work at your facility so that they can be set up on eClaims.

eClaims information should be for the account where you would like claims payments to be paid to.

And just like that, your work is all done.

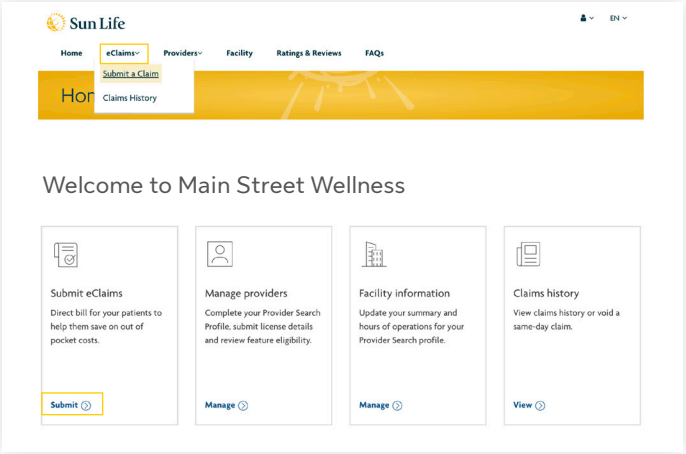
As soon as we receive your completed information, we'll begin our eClaims validation process.



# Submitting a claim

## Step 1

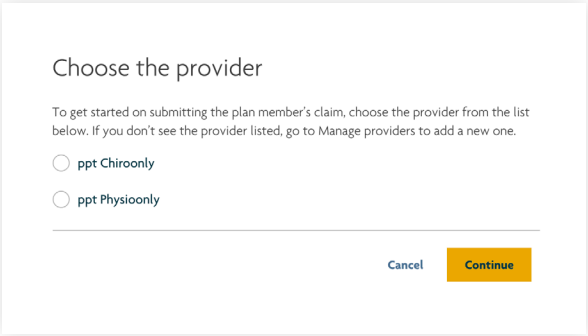
After logging in to SLC, click **Submit a Claim** under **eClaims** at the top of your screen or click **Submit** on the **eClaims** box.




## Step 2

Choose the provider that performed the service.

**Tip:** If more than one provider performed services on a single client, submit separate claims for each provider.

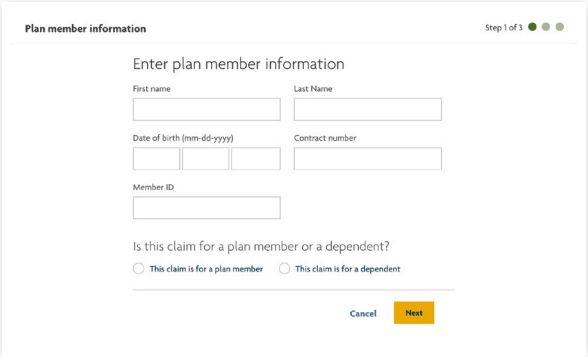


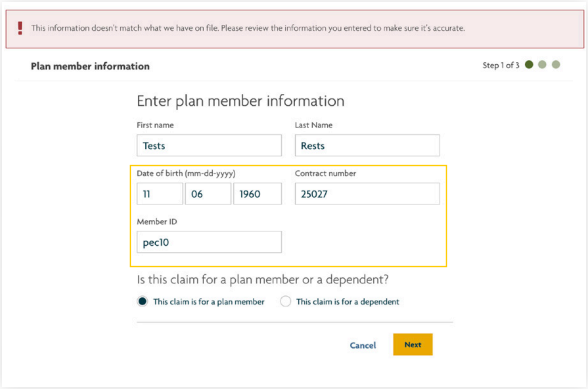

## Step 3

Enter all required information for the plan member, including:

- Contract/Policy number (up to 6 numeric digits)
- Member ID/Certificate number (alphanumeric)
- Choose who received the service(s):
  - Plan member
  - Dependent (spouse, children)

*Tip: You must enter member information (date of birth, contract # and member ID) correctly on the Plan member information page or you'll see an error.*



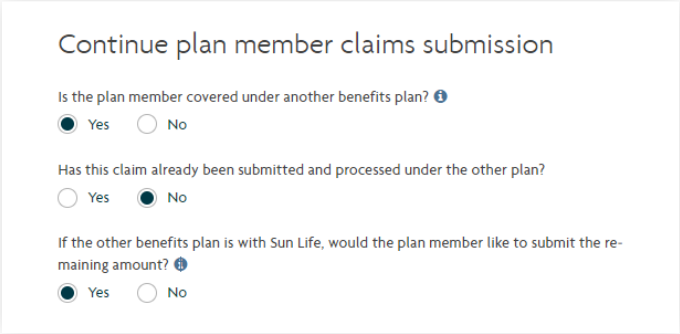



## Step 4

If the plan member has coverage under another benefit plan (such as their spouse's), coordination of benefits will apply. Click the information (i) button for more details.

There are three potential scenarios for coordination of benefits:

- **Scenario 1:** The claim has not been submitted and processed under another plan. The other plan ***is not*** a Sun Life plan.
- **Scenario 2:** The claim has not been submitted and processed under another plan. The other plan ***is*** a Sun Life plan and the plan member wants to submit the remaining amount. Enter all of the required information for the other plan.
- **Scenario 3:** The claim has already been submitted to another plan and processed.

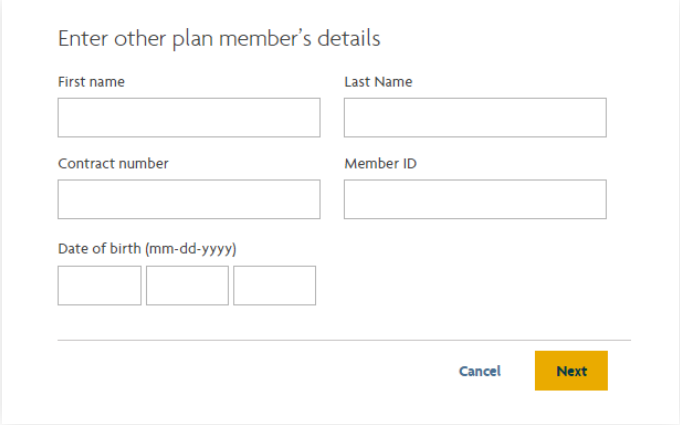



## Step 5

Enter all of the required information for any dependents. Depending on the dependent's coverage situation, multiple options are available.

**Tip:** If a dependent is covered under more than one plan, submit claims to the primary plan first. Claims submitted to the secondary plan first will be declined.

**Tip:** If dependent children are covered under a second plan that is not a Sun Life plan, submit claims under the member's/parent's plan whose birthday occurs earliest in the year. The parent's plan whose birthday occurs later will become the secondary plan. If you try to submit a claim to the secondary plan first, an error message will appear that prevents you from submitting the claim.

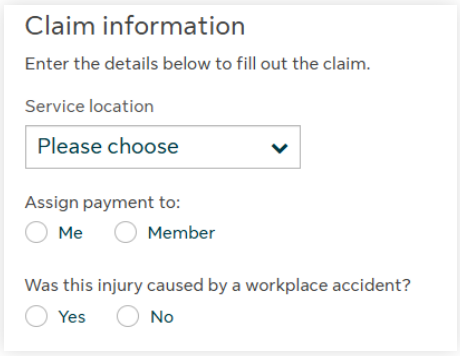


## Step 6

Fill in details about the service location, choose who to assign payment to and confirm if the claim was to treat an injury caused by a workplace accident.

**Notes:** If coordinating benefits with two Sun Life plans, both payments will follow the same assignment request - to yourself or to the member.

If a member's plan doesn't allow payment assigment; the payment will go directly to them.




## Step 7

Choose the service provided from the expense type drop-down menu.

Enter the service date either manually or by using the calendar icon. This date has to be within the last 30 days.

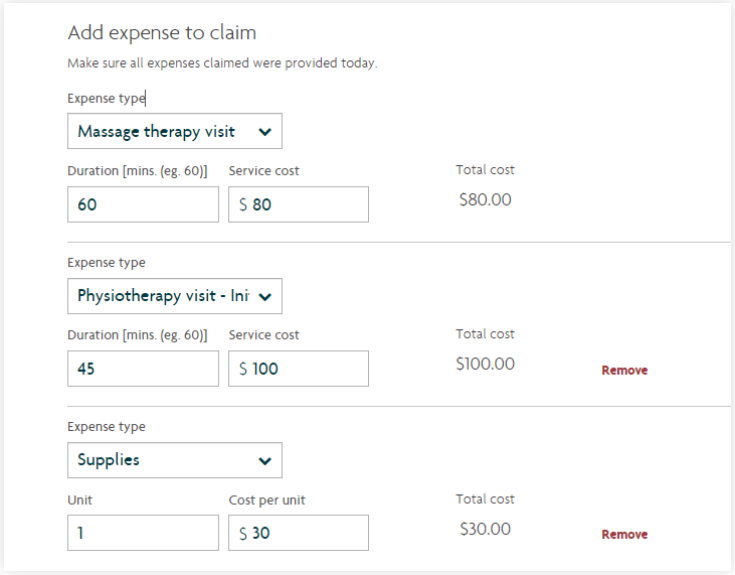
Enter the duration in minutes or units.

Enter the cost minus any gratuity. Use a period (.) to separate dollars and cents, not a comma (,).

If there is more than one service from the same provider, select **Add a new expense** and repeat as needed. You can't add expenses of the same type under a new line. You must combine them under one line. For example, enter two physiotherapy services of 60 minutes for $60 each as one physiotherapy service of 120 minutes for $120.

Click **Remove** to delete an expense line.

If you confirmed that the claim has already been submitted to another plan and processed in the previous steps, then you'll see a box to enter the amount paid by the other plan.

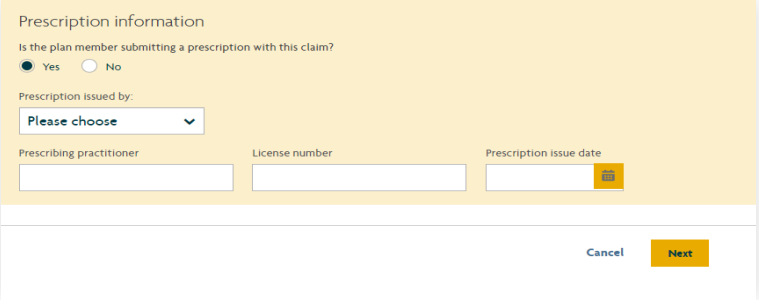


## Step 8

A prescription information box will appear only if the expense type selected requires a prescription or doctor's referral. Otherwise, this will not appear, and you won't need to provide information for it.

If no prescription is available, select **No,** and then **Next.**

If prescription information is available, select **Yes,** fill out the required information and then **Next.**

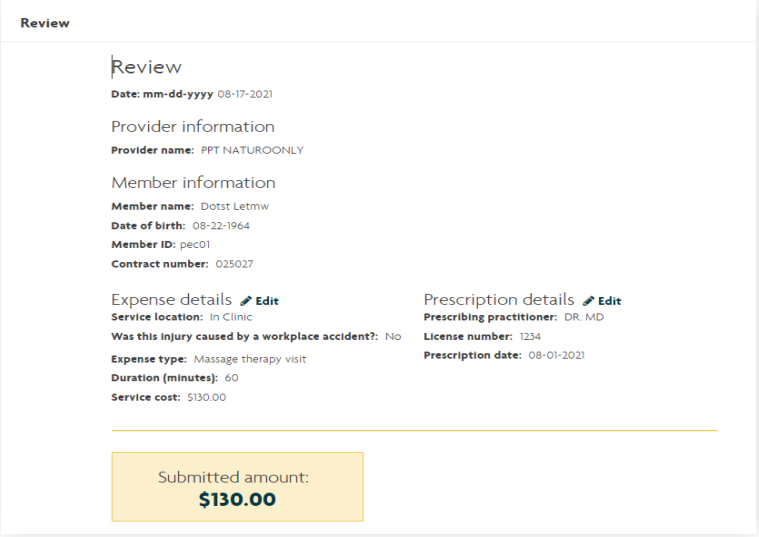


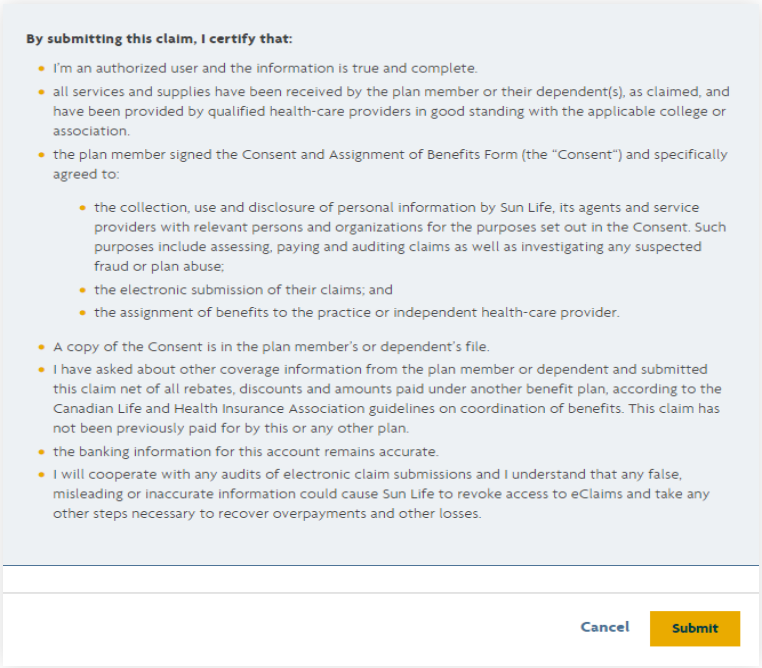

## Step 9

You will now be able to review all the information you've entered. Take a moment to ensure all the information is accurate and correct. Click the **Edit** button to make any corrections.

The submitted amount that appears is based on the sum of all services being claimed.

Terms and conditions are at the bottom of the page. By clicking **Submit,** you agree to the terms and conditions listed.



## Step 10

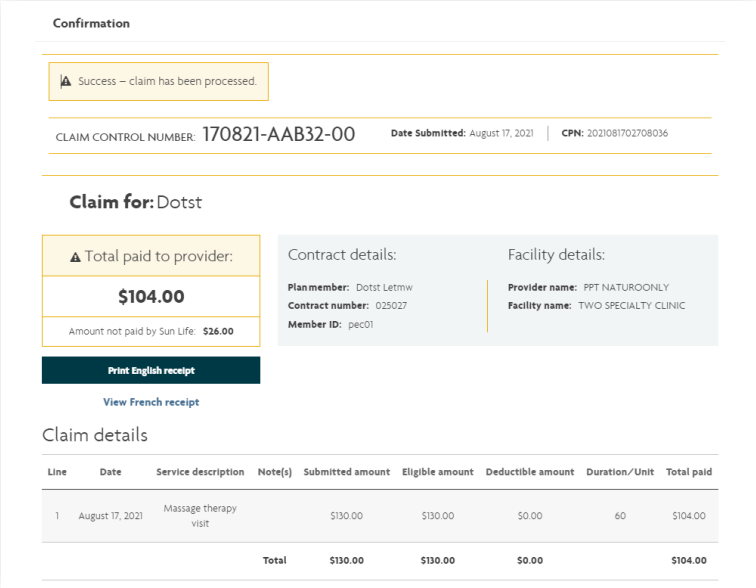
On the claim confirmation page, you'll see the status of the submitted claim.

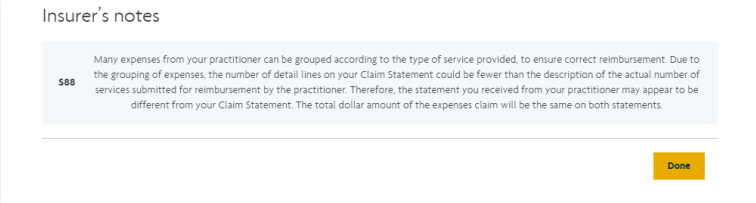
The **Claim Control Number** is a unique number assigned to the submitted claim.

The **Total paid** section will indicate the total paid to the provider or the total paid to the member. Depending on the payment assigment selection and coordination of benefits, you may need to collect payment from the plan member.

If client requests a receipt, you can use the **Print English/French receipt** button.

Under **Insurer's notes,** you can see any messages from Sun Life to the customer or yourself related to the claim.



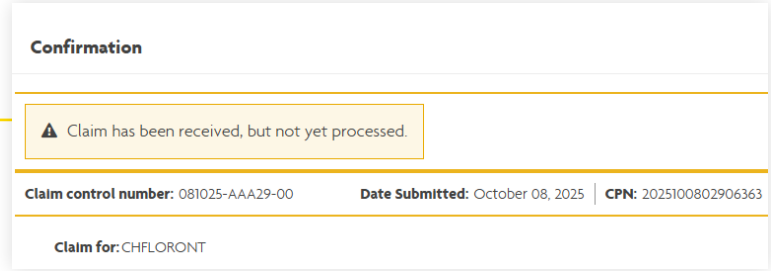

**Tip:** Remind your clients you have submitted the claim on their behalf, so that they don't need to. If they submit a duplicate, it will be declined.

## Pending claims

There are a small number of claims that 'pend'. This means that they haven't been processed and require further review by Sun Life. Claims can pend for a number of reasons, including:

- The patient's plan has a special instruction that requires review
- Or a possible duplicate was flagged

You'll know a claim has been pended if you see at the top of the confirmation page a note indicating that the claim was received and not yet processed.




## Special scenario: No assignment of benefits

Certain plans don't allow assignment of benefits, meaning plan members need to pay the provider directly. Sun Life will then reimburse the plan member for any covered amount.

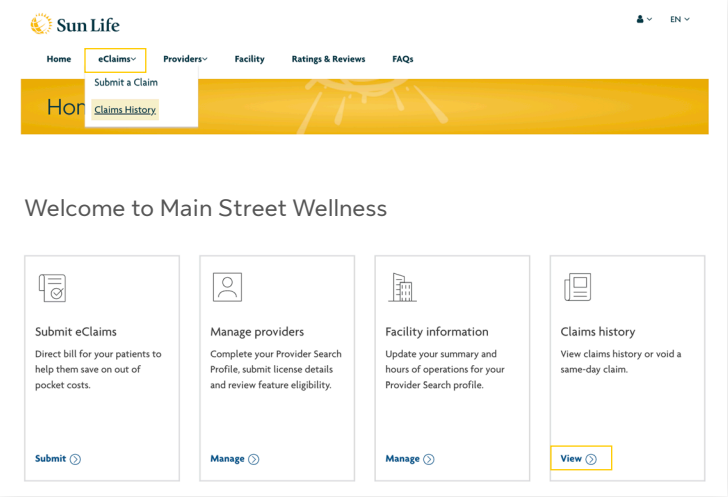
You can still submit claims for plans with no assignment of benefits. However, the **Total paid to provider** will be $0 and an **insurer note** will appear at the bottom stating that payment will be issued to the plan member instead.

# Seeing your claims history

You can access reporting by selecting:

**Claims History** from the top menu OR

**View** under the Claims History option boxes in the middle of the screen.




# Claims history lookup basics

Sun Life Connect retains data from the current month plus two months prior.

You can search by:

1. Control Number
2. Deposit ID
3. Amount Submitted
4. Date Range
5. Provider

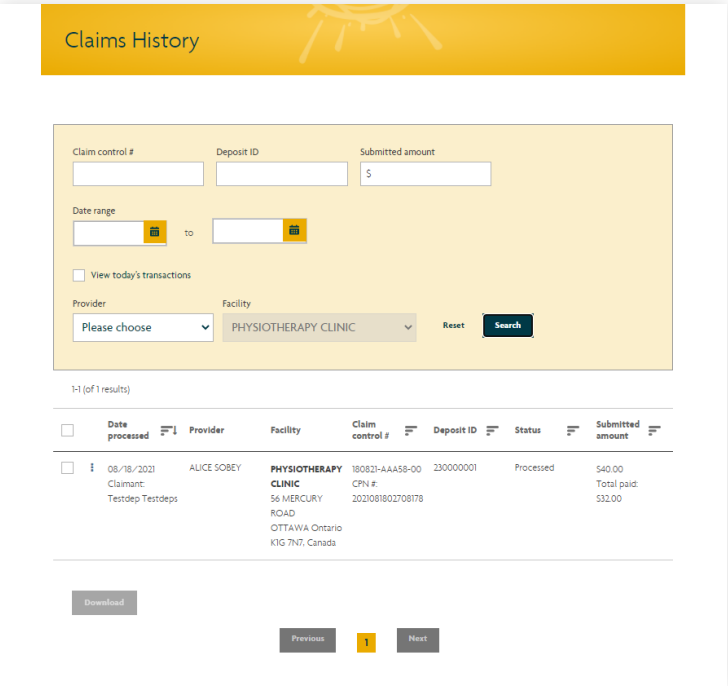
Select **Search** to generate results.

You can sort and filter your results by the headings.

To **void** a claim, click the three dots next to check box then select **void claim** from the drop-down menu. You can only void claims on the same day it is submitted.

**Tip:** Select the three dots next to any claim to print a receipt.

**Tip:** Download several claims by selecting the boxes and choosing download at the bottom of the page.



Sun Life

**Coverage and claims support**

1-855-301-4786

Group Benefits are provided by Sun Life Assurance Company,
a member of the Sun Life group of companies.