## How to File Your **Educator Claim**

Filing a claim should be easy. That's why we offer several options, allowing you to choose the method that works best for you.



## Which Product Are You Filing a Claim For?



Critical Illness, Accident, Hospital Indemnity, Disability



• E-mail: educatorclaims@chubb.com

• Telephonic: 888-499-0425

• Fax: 312-351-7114

• Mail: Chubb Workplace Benefits Claim Department PO Box 6700 Scranton, PA 18505-0700



Life

• Email: educatorclaims@chubb.com

• Fax: 312-351-7114

 Mail: Chubb Workplace Benefits Claim Department PO Box 6700 Scranton, PA 18505-0700



Wellness

• Telephonic: 888-499-0425

• **Self Service Portal:** my.chubbworkplacebenefits.com