EASY WAYS TO SUBMIT A CLAIM.

Cigna Accidental Injury and Hospital Care (indemnity) insurance.

When a serious illness or injury occurs, Cigna Accidental Injury (AI) and Hospital Care (HC) insurance can help you bounce back to your best, body and mind. That's why it's important to submit your claims as soon as possible. There are five easy ways to file. Simply choose the option that's easiest for you.

Phone
Call **800.754.3207** to speak with one of our dedicated customer service representatives

Online
Visit **SuppHealthClaims.com**

Fax
Send documents to **1.866.304.3001**

Email
Send scanned documents to **SuppHealthClaims@Cigna.com**

Mail
Send documents to:
Cigna Supplemental Health Solutions
P. O. Box 188028
Chattanooga, TN 37422

CIGNA SIMPLE FILE®

If you forget to file your claim, we will send you a reminder to help you receive all of the benefits you are entitled to.*

After you file

A designated claim manager will be assigned to your claim. If they have any questions or need additional information, they will contact you, the beneficiary, or provider to obtain the needed information.

- Once all requested information is submitted, Cigna will pay your claim quickly – in days, not weeks.
- Benefits are paid directly to you,** for a covered accidental injury or hospitalization.***

Together, all the way.®

Cigna®

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When should I file my claim?

Claims should be reported as soon as possible. Standard policy provisions call for the notification of claims from within 31 days of the date of the loss and "proof of loss" within 90 days. Claims outside of these time frames will still be evaluated for their timeliness, but must be reported within one year from their required 90 days "proof of loss." Once we've received all the requested information, we can begin reviewing and processing the claim.

How am I notified of the decision?

If the claim is approved, you'll receive an explanation of benefits (EOB) or approval letter advising you of the decision.

If the claim is denied, you'll receive an EOB or letter explaining why the claim was denied and instructions on how to appeal the denial.

What information will I need to file my claim?

Make sure you have this information handy:

- Completed claim and disclosure authorization forms, which can be found online at **Cigna.com/customer-forms**
- Personal information, such as your name, address, phone number, birth date, Social Security number and email address
- Employment information, such as employer's name, email address, date of hire and job title
- Doctor and hospital information – The name, address and phone number of each doctor or hospital you're using for this accident, injury or illness
- Itemized medical bills, if available

FOR QUESTIONS, OR TO CHECK ON THE STATUS OF YOUR CLAIM,
call **800.754.3207**, 7:00 am-7:00 pm (CST).

* The Simple File process is based on a one-time assessment of the initial claim documentation for the primary claim. Any subsequent events would not be identified and the customer will need to submit a claim for any supplemental health benefits.

** Benefits may be paid directly to the hospital upon assignment.

*** The term "Hospital" does not include a clinic, facility, or unit of a Hospital for: (1) rehabilitation, convalescent, custodial, educational, hospice, or skilled nursing care; (2) the aged, drug or alcohol addiction; or (3) a facility primarily or solely providing psychiatric services to mentally ill patients.

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Product availability may vary by location and plan type and is subject to change. All group insurance policies and group benefit plans may contain exclusions, limitations, reduction of benefits, and terms under which the policy may be continued in force or discontinued. Benefit waiting periods may apply. For costs and complete details of coverage, see your plan documents.

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