

When you are faced with the unexpected, we are here to help.

If you need assistance, please contact the Claims Department at 440-922-5151.

Before you start, you will need:

- Policy Number
- Policyholder's Name and Address
- Policyholder's Date of Birth
- Policyholder's Phone Number

To file a claim, you will need:

- Patient/Claimant's Name
- Patient/Claimant's Date of Birth
- Patient/Claimant's Relationship to the Policyholder
- Supporting Documents

Please obtain the following supporting documents if applicable to your claim:

Heart or Stroke Claim

- Heart Claim Form** (download and print if mailing or faxing your claim)
- Physician's Statement** completed by the physician (download and print)
- Medical records** with the heart disease, heart attack or stroke diagnosis
Examples include a catheterization report, medical test results, hospital admission and discharge summaries, or MRI and CT scan reports, These can be obtained from the diagnosing/treating physician or the facility's medical records department.
- Complete, itemized hospital bill** listing the daily room charges
- Ambulance bill**
- Surgery bill** from the surgeon's office (this should include the five-digit CPT medical billing code)
- Itemized physical therapy bills**
- Any other **itemized medical bills, medical records, or supporting documents**

Transportation and Lodging Claim:

- Travel log form** (download and print)
- Medical records** for the consultation visit
- Itemized medical bills** for the consultation visit and/or treatments
- Lodging statement or invoice** that includes the room charges for each day
(for inpatient hospitalizations only)
- Flight/itinerary invoices**