U65 Policyholder Portal How to Series

Submitting a Claim via Quick Request

What's Quick Request?

Quick Request is a feature within your Policyholder Portal that allows you to submit various requests and documents directly to us.

Please Note: There have been no changes to the process by which providers submit claims.

Steps to submit a claim via Quick Request

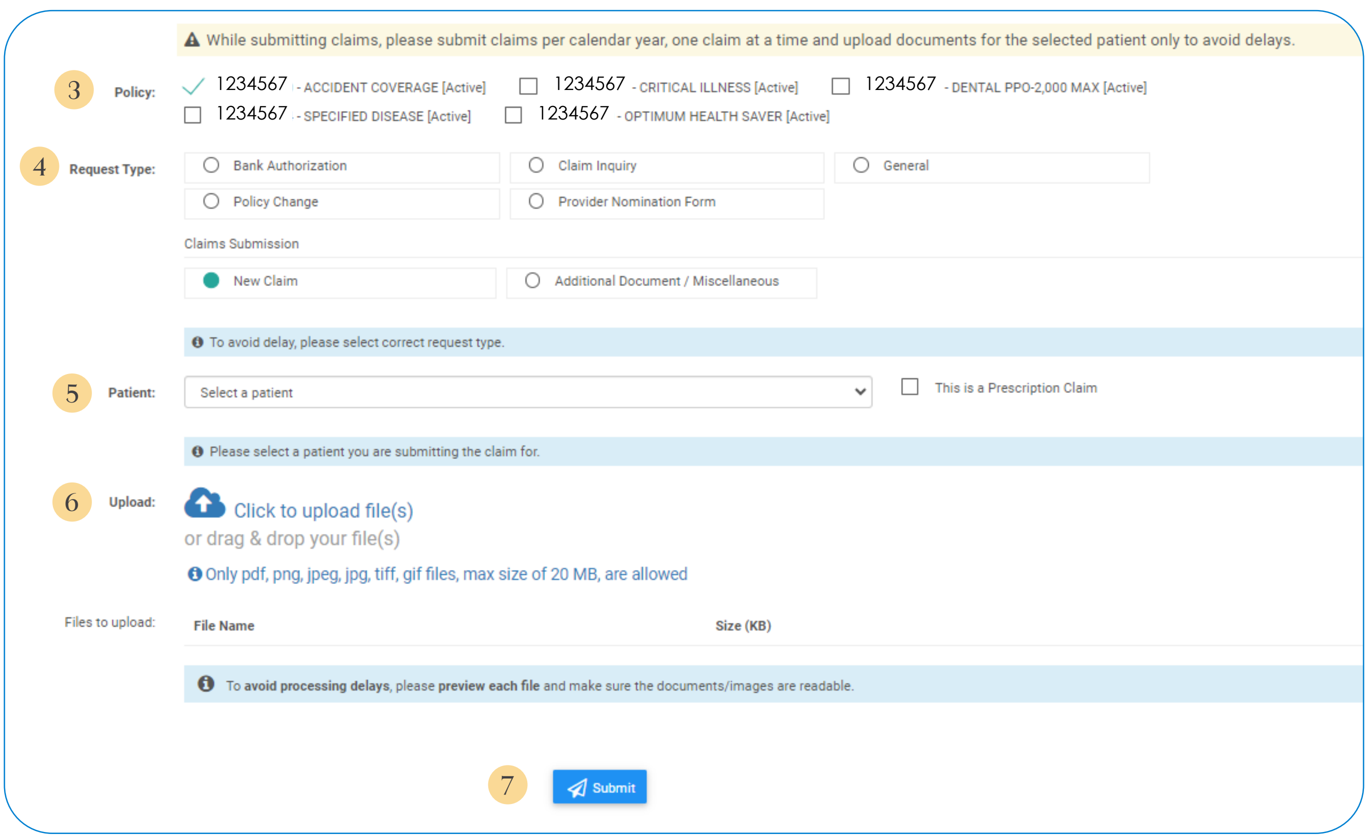
1. Login to your Policyholder Portal
2. From the *Main Navigation* menu, select *Quick Request*
3. In the *Policy* section, select the policy for which you are filing a claim
4. For *Request Type*, select *New Claim*
5. From the *Patient* drop down, select the policyholder you are filing a claim for
6. Select *Click to upload file(s)* to upload applicable document(s)

Important Note
To ensure a smooth claims process, please submit claims with the following rules in mind:

- One policyholder per claim
- Per calendar year
- One claim at a time

7. Select *Submit*

And just like that, your claim submission is complete!



What to expect after submission...

- ✓ You can check the status of your claim by using the *My Claims* feature in your Policyholder Portal. Simply login to your Policyholder Portal online and navigate to the *My Claims* section on your *Dashboard*.
- ✓ We'll send you an email or letter to the address on file if we need any additional documentation to process your claim (i.e. medical records, missing forms, etc.).
- ✓ Once processed, you'll be able to view your Explanation of Benefits (EOB) online within your Policyholder Portal; we'll also mail you a copy to the address on file.
- ✓ We'll mail your claim check for eligible benefits to the address on file.

  Please note: If you assigned your benefits to your provider, your claim check for eligible benefits will be mailed to your provider instead.
- ✓ If your claim is not payable, the reason will be listed on your EOB as a remark code; please review this area as we may not have received all documentation needed for processing.