

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:

1. First Occurrence Claim (File when first diagnosed with internal cancer.)

- First Occurrence Cancer Claim Form** (download and print if mailing or faxing your claim)
- Physician's Statement** completed by the physician (download and print)
- Pathology Report** with the positive cancer diagnosis
- Medical records** for a clinical diagnosis of cancer (examples include results of a CT scan, MRI, or ultrasound, and consultation reports of the cancer diagnosis and treatment)
- Biopsy/surgery bill** from the surgeon's office (this should include the five-digit CPT medical billing code)

2. Cancer Claim (File after the First Occurrence claim and for skin cancer.)

- Cancer Claim Form** (download and print if mailing or faxing your claim)
- Physician's Statement** (download and print)
- Complete, itemized hospital bill**
- Surgery bill** from the surgeon's office (this should include the five-digit CPT medical billing code)
- Pathology Report for each surgery**
- Itemized chemotherapy/radiation bills**
This should include the patient's name, drug name, charges/cost and the dates of each treatment or the dates the prescriptions were filled.
- Pharmacy and prescription bills/receipts**
This should include the patient's name, drug name, charges/cost and the dates of each treatment or the dates the prescriptions were filled.
- Any other **itemized medical bills, medical records, or supporting document**

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**