How to Effectively Use Your Health Insurance Program

Your Health Insurance package is made up of two components, your <u>Major Medical Plan</u> and <u>The Major Complement</u> (SIS) GAP Plan. You will receive an ID Card for both plans this year. Please keep both the major medical & SIS ID Cards together and present both cards at time of service. This will enable willing Providers to handle claims with both carriers and may minimize or eliminate the up front out of pocket costs to you.

Remember: Your GAP Insurance will help cover Inpatient care & many Outpatient procedures that are subject to deductible and/or coinsurance under your major medical plan. This is a huge value to you, as part of your Health Insurance package. (Please keep in mind that the GAP Insurance <u>Does Not</u> cover out of pocket costs for Office Visit Charges, Routine Wellness, Prescription Drugs & Prescription Medical Equipment, nor for treatment of Mental Illness disorders or Substance Abuse).

STEPS TO HELP MAKE THE CLAIMS PROCESS EASIER

- 1. Complete and submit to SIS the one time per calendar year per insured Claim/Release form regardless if you assign the benefits to your provider or submit the claim yourself. You can mail, fax or e-mail this form to SIS. Please Note! Without a completed form, your claims will not be processed. A Claim/Release form has been attached to this flyer for your use. You may also obtain a copy from your Human Resources Department.
- 2. Give the Provider both your major medical & SIS GAP ID Cards. The Provider will file the claim with your major medical as Primary Insurance. If the provider accepts the GAP coverage as Secondary Insurance, they will supply SIS with the detailed billing statement and Provider EOB for the GAP claim. Please Note! Your SIS ID Card contains the toll free number for Providers to verify coverage. You may be required to sign an Assignment of Benefits at time of service. Assignment of benefits is legally binding, so benefits will be paid to the provider unless you show proof of prior payment when the claim is submitted.
- 3. When the Provider submits the billing statement and EOB for your GAP claim, you will receive notices from SIS advising you of any missing information that is necessary to process the claim. Please Note! The SIS Claims Dept will do everything they can to process claims in a timely manner. However, they may ask you for follow up if they experience difficulties obtaining what they need. An example of this may be a copy of your EOB from the major medical carrier, if the Provider EOB is insufficient to determine out of pockets costs applied to deductible, coinsurance or copayment, or if SIS is in need of medical records in order to determine if the service provided was medically necessary. Please be sure to review all communications from the SIS Claims Dept so that you can respond, if necessary.

If you need to request a duplicate ID Card for your GAP Plan please call Allstate Benefits at 1-866-510-5859.

SIS Customer Service Specialists are also on standby at the number below to answer questions about your coverage and/or to assist you with claim matters. Mailing Address, Phone Number, Fax Number and E-mail are as follows:

ATTN: Claims Department Special Insurance Services, Inc. PO Box 250349 Plano, TX 75024-0349 Phone: (800) 767-6811

Fax: (214) 291-1301

customerservice@specialinc.com