

Instructions for Making Claims

Assurity: DesignMED : Cat Combo Physician's Office Visit Claims

Before you submit the claim

Before submitting office visit claims with DesignMED you need to obtain a **HCFA 1500** form from your doctor's billing office. (The HCFA 1500 is a form that doctors use to bill insurance. Your doctor will not bill DesignMED, but you will use this form to validate your claim.)

Filling out the claim form

- PAGE 1:
- Specify that this claim is for an office visit by writing "Office Visit Claim" and the date of the visit across the top. (There is no set space for this so just write it in.)
 - Complete questions 1 through 11 (See *Tips for Making Maternity Claims* below).
 - Leave questions 12 thru 14 blank. (This policy has no disability coverage.)
- PAGE 2:
- You do not need to complete page 2. (The HCFA 1500 provides the needed information.)

Submitting the claim

Simply fax the claim form with the HCFA 1500 to (402) 437-4592.

Tips for Making Maternity Claims

QUESTIONS 3 & 4: If you are not currently employed you can leave these blank.

QUESTION 5:

- When did the physician first treat you? List the date that a doctor first diagnosed you as pregnant.
- Give Other Dates of Treatment: List the date of visit you are claiming here. (If the visit you are claiming is the first diagnosis of pregnancy, leave this blank.)

QUESTION 8: For the purposes of insurance, pregnancy is considered a sickness; not an accident. Leave this blank.

QUESTION 9: For the purposes of insurance, pregnancy is considered a sickness.

- If sickness, when did it begin? List the date that a doctor first diagnosed you as pregnant.
- Nature of Illness: Pregnancy.
- Have you ever had this same illness before? No. (This is the first time you have been pregnant with this child.)

QUESTION 10: This should be answered No.

QUESTION 11:

- Were you confined to a hospital? No. (You are only making a claim for the office visit.)
- Was an operation performed? No.