Filing MEDlink® Series Insurance Claims

Instructions for the Insured

3 Easy Ways to File a Claim!

1. Present your ID card to the Provider

- Simply present your ID card to your medical provider so they may file your claim and accept the assignment of benefits.
- If your medical provider is unable to accept assignment of benefits, you may file a claim directly with APL.

Submit claims to:

American Public Life Phone 1-800-256-8606
P.O. Box 248950 1-877-365-9423
Oklahoma City, OK 73124-8950 www.ampublic.com
Please use In-Hospital Benefit Cert Number when



Insured: JOHN SMITH Coverage: INDIVIDUAL Policy/Cert. #: 1122334 Group #: 21212 Effective Date: 3/1/2016

Plan: MEDLINK W/BENEFIT ASSIGNMENT

2. File a Claim Online

- Register or log in to APL's Online Service Center (OSC) at secured.ampublic.com
- Go to My Claims, click "Start Now" and follow the three easy steps to upload your claim.

3. Submit a Claim by Mail or Fax

Mail
APL Claims
P.O. Box 248950
Oklahoma City, OK 73124-8950

<u>Fax</u> 877.365.9423

Documents to File a Claim

- Find claim forms on ampublic.com under "Claims & Forms." Select MEDlink® from the list of products, then click "download."
- Using the MEDlink® claim form (Form C101), complete the section entitled "Claimant's Statement." Please be sure to sign and date in the blanks provided at the bottom of the form.
- Include the Explanations of Benefits from your primary insurance carrier
- For in-hospital and outpatient hospital claims, please include a uniform itemized hospital bill from your provider (Form UB-04)
- For treatment in a physician's office, please include the physician's itemized statement of services from your provider (Form CMS-1500)

Questions?

We're Here to Help!

Call 800.256.8606, option 2 today!

AMERICAN PUBLIC LIFE

Expanding the Benefits Horizon®

Underwritten by American Public Life Insurance Company. This product may have limitations and exclusions. This product is inappropriate for people who are eligible for Medicaid coverage.

Filing MEDlink® Series Insurance Claims

Instructions for the Provider

As a healthcare service provider for APL's insured customer, you are an important customer to us. We are here to assist you in getting the information you need to provide service to your patient, our customer.

Assignment of Benefits

APL accepts assignment of benefits. Claims submitted with an assignment of benefits will allow any payable benefits to be made directly to the Provider of Services. Ask your patient for a copy of his/her ID card.

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Insured: JOHN SMITH
Coverage: INDIVIDUAL
Policy/Cert. #: 112334

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Unable to Accept Assignment of Benefits

If you are unable to accept assignment of benefits, please provide the patient with a walk out statement (Form CMS-1500) or a uniform itemized hospital bill (Form UB-04) so that the patient can file the claim with APL and receive his/her benefit. To file the claim, the patient needs a statement providing the name and NPI number of the attending physician, the name of the patient, the date of service, the procedure and diagnosis codes, and the charge.

Confirm Coverage

To confirm coverage, simply call APL at 800.256.8606, option 2, from 7 a.m. to 6 p.m. CST to speak with a claims customer service representative.

3 Easy Ways to File a Claim

Online
Register or log in to
secured.ampublic.com
and click the green
'Start Here' button

Mail

APL Claims
P.O. Box 248950
Oklahoma City, OK 73124-8950

Fax 877.365.9423

Documents to File a Claim

- The Explanations of Benefits from the primary insurance carrier must be submitted.
- A uniform itemized hospital bill (Form UB-04) must be submitted for inpatient and outpatient hospital claims.
- The physician's itemized statement of services rendered must accompany the claim form when filing for treatment in a physician's office (Form CMS-1500).

Questions?

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