

How to submit Supplemental Health claims

You can submit your claim online, by phone, or by mail/fax. Online submission is the fastest way to get your claim started!

Online

Our easy system lets you enter all the information we need to start your supplemental health claim.

1. First gather the paperwork related to your claim. You may have to ask your doctors or other health care providers for these records:
 - Doctor notes
 - Emergency room or hospital discharge papers
 - Lab reports
 - Itemized hospital or doctor bills
 - Medical summary of benefits
 - Childcare, transportation, and/or lodging receipts
 - Police reports (if your claim involves a car accident).

2. Go to <https://myspecialtyappsanthem.com/claims/abclhc> and follow these simple steps to submit your claim:
 - Choose as **Supplemental Health** the *Type of Claim*, then the *Type of User* field will appear
 - Choose **Employee** for *Type of User*
 - Enter the characters you see under “**Please retype the characters from the picture**” then click *Next*
 - The system will guide you through all information needed to get started on your claim.

During the claim submission process, you can download, complete, scan, and upload a claim form.

3. If you give us your email address, you will receive a confirmation email.
4. Once you submit your claim, you’ll receive a **claim reference number**. Be sure to keep the claim reference number handy in case you need to call us with questions.

Example – submitting your claim online

The screenshot shows a web form for submitting a claim. At the top, there is a breadcrumb trail: Claim Type > User Details > Claim Details > Supporting Documents > Review > Confirmation. Below this, a heading reads: "Welcome to the Claims Entry site. Please enter details below to submit your claim." A note states: "Fields marked with an asterisk (*) are required". The form contains three main sections: 1. "Type of Claim:" with a dropdown menu set to "Supplemental Health". 2. "Type of User:" with a dropdown menu set to "Employee". 3. "Please retype the characters from the picture:" which shows a distorted image of the characters "JHW3". Below the image are two buttons: "Change Words" and "Audio Version". At the bottom right of the form is a "Next" button. Four callout boxes with blue borders and lines pointing to the form elements contain the following text: "Choose Supplemental Health" (pointing to the dropdown), "Choose Employee" (pointing to the dropdown), "Retype the characters" (pointing to the image area), and "Click Next" (pointing to the "Next" button).

By Mail

You can download a claim form at <https://myspecialtyappsanthem.com/claims/abclhic> and print it.

Complete the form and mail it to us with all required documentation:

Supplemental Insurance Benefit Department
P.O. Box 2076
Grapevine, TX 76099

By Fax

You can download a claim form at <https://myspecialtyappsanthem.com/claims/abclhic> and print it.

Complete the form and fax it to us with all required documentation to 1-469-417-1977

Do you have questions about how to submit your claim?

We're here to help. You can reach us at 888-828-2432.