#### REFERENCE GUIDE TO SUBMITTING MEDICAL CLAIMS

Important: You must receive treatment within 90 days of your accident and your first report of the injury should be to your Student Health Service or Athletic Trainer for advisement on treatment.

### Claims and Questions can be addressed to:

Administrative Concepts, Inc. Toll Free: 855-760-9862 994 Old Eagle School Road Fax: 610-293-9299

Suite 1005 Email: <u>aciclaims@visit-aci.com</u>.

Wayne, PA 19087-1082

www.visit-aci.com Hours of Operation: 8am-8pm EST, Monday through Friday

# Helpful information for submitting claims and expediting payment:

- A claim form for your incident can be obtained at <a href="http://info.visit-aci.com/LACCD">http://info.visit-aci.com/LACCD</a> and needs to be completed for each accident incurred.
- If you have insurance through your parents, spouse or employer, submit the itemized claim to the other insurance for payment before sending it to the Intercollegiate Sport and On-Campus Accident Policy.
- In order to ensure we receive complete claim information, we suggest providers submit standardized billing statements (called "UB-04" for hospital charges and/or a "CMS-1500" for Physician Charges).
- Unless proof of payment is submitted with the medical bill (a copy of the check, paid receipt, credit card statement, etc...) claim payment is sent directly to the medical providers.
- This Plan pays covered medical expenses after any other medical coverage. If other insurance exists, submit the primary insurance company's Explanation of Benefits (EOBs) with each itemized bill.

**PLEASE NOTE:** It is the responsibility of the insured patient or parent to send in the correct information. Failure to send this information will result in claims not being paid.

### **Claim Status**

To obtain Claim Status, go to the Member Resources page of <a href="www.visit-aci.com">www.visit-aci.com</a>. Select 'Claim Status' and then 'Insured'. Complete the 'New Web User' section and click 'Register'. Agree to the Terms and Conditions and click 'Claims' to view Claim Status.

## **Appeal Procedure**

If your claim is denied, you will be notified of the reason with a description of any additional information necessary to appeal the denial.

If you or your provider would like additional information or have a complaint concerning the denial, please contact Administrative Concepts, Inc. (ACI) at **855-760-9862** or make a request in writing. Please submit your appeal to the above address and your claim will be reviewed. ACI will address concerns and attempt to resolve the complaint. When sending an appeal, please include your name, social security number, home address, policy number and all documentation to support your appeal. Upon receipt of your appeal, the claim will be reviewed and a determination will be rendered to you within 30 days.

<sup>\*</sup>Please include the members name, Group Name, and the Policy Number on all submissions.