

## ONLINE CLAIMS FOR HOSPITAL INSURANCE

### Submit Hospital insurance claims online in 20 minutes or less — it's that easy!

USABLE Life provides flexibility in submitting supplemental claims with our new online claims submission option, which offers an enhanced customer experience that is easy, convenient, and secure. From start to finish, an online claims submission typically takes 20 minutes or less. Our customers still have the option to submit claims by mail, email, phone, or fax. Visit us online at [USABLELife.com](http://USABLELife.com) for those instructions.

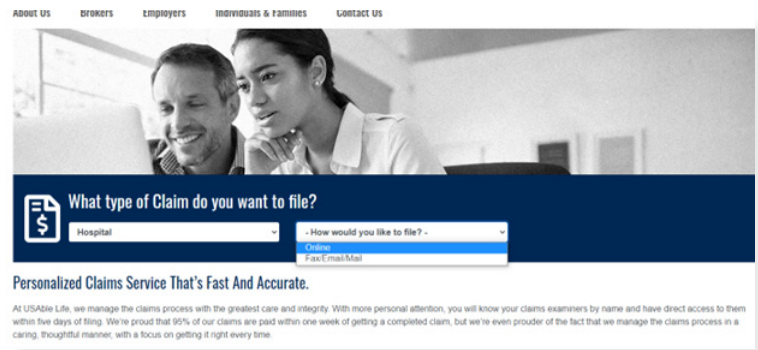
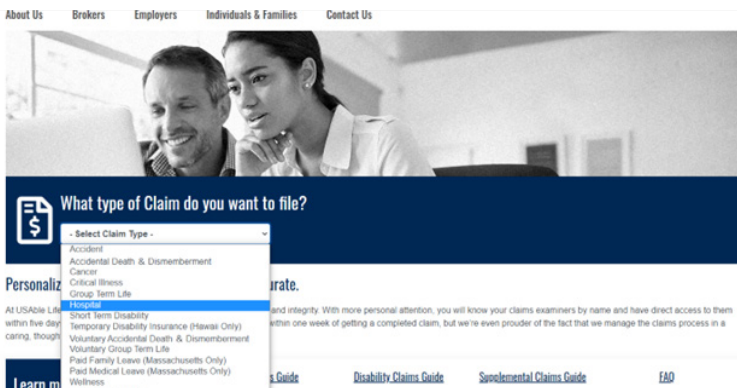
### Employee quick reference guide to online claim submissions

To get started, navigate to [USABLELife.com/claims](http://USABLELife.com/claims) and complete the drop-down menu questions:

1. Select **Hospital** from the drop-down list under "What type of claim do you want to file?"
2. On the same screen, select **Online** from the drop-down list under "How would you like to file?"

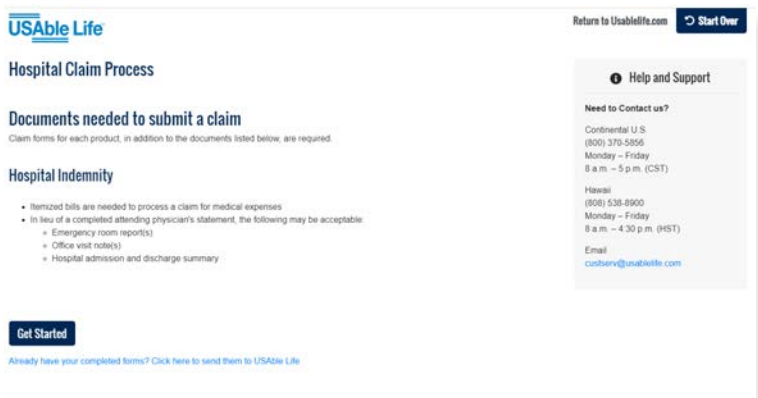
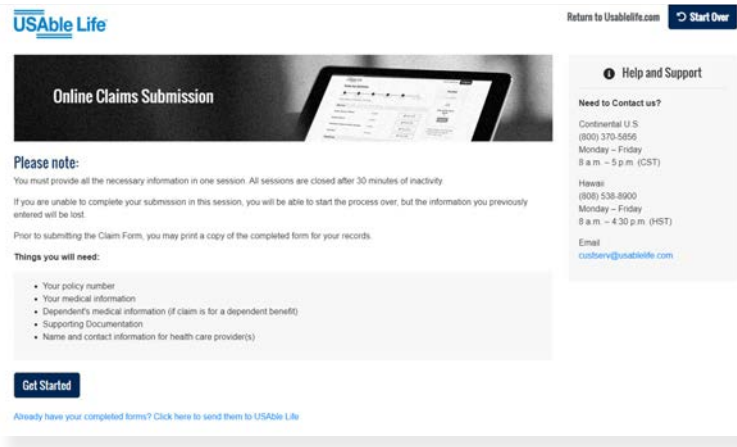
### SIX EASY STEPS:

1. *Disclaimer (electronic delivery consent notice)*
2. *Demographics (name and policy number)*
3. *Employee Statement*
4. *Authorization for Release of Medical Information (online form)*
5. *Fraud Notice (online form)*
6. *Review and submit*



You will then progress to the "Online Claims Submission" screen. Before you continue, please note the "Things you will need" section. You must have the group policy number ready to go for the next steps.

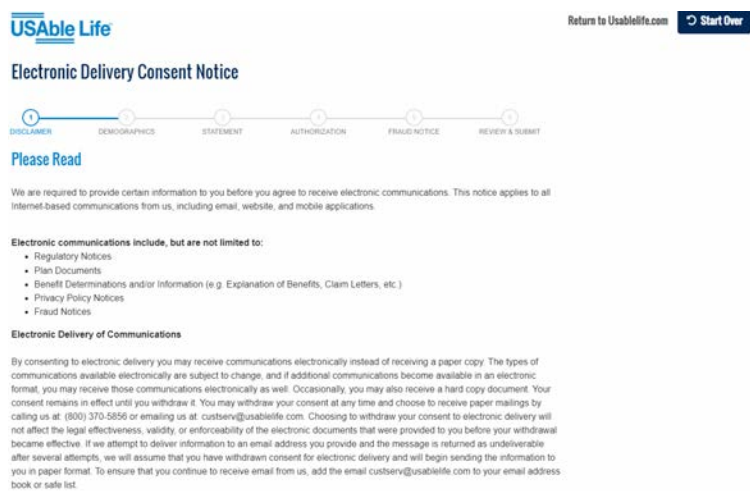
Select **Get Started**. Carefully read the information and steps for the claims process. This is the last step before you begin steps 1-6 of the Hospital claims submission process. Select **Get Started**.



## Step 1: Disclaimer (electronic delivery consent notice)

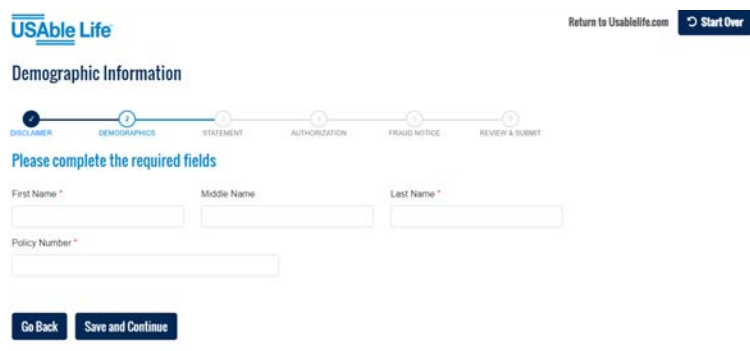
This is the “*Electronic Delivery Consent Notice*” screen. Please review carefully. We are required to provide certain information to you before you agree to receive electronic communications. This notice applies to all internet-based communications from us, including email, website, and mobile applications. By completing this acknowledgment, you are consenting to receive electronic communications from US Able Life.

Check the “*I acknowledge this disclaimer*” box, enter your name in the e-signature field (or representative’s name if you are completing this claim on behalf of the employee), and check the “*I’m not a robot*” box. Select **Save and Continue**.



## Step 2: Demographics (name and policy number)

Complete the fields requested on this page, including first, middle, and last name, as well as your group policy number. Select **Save and Continue**.



## Step 3: Employee Statement

Complete all required fields then complete the “*Sign & Date Below*” section, check the acknowledgment box, and complete the employee e-signature field. Select **Save and Continue**.

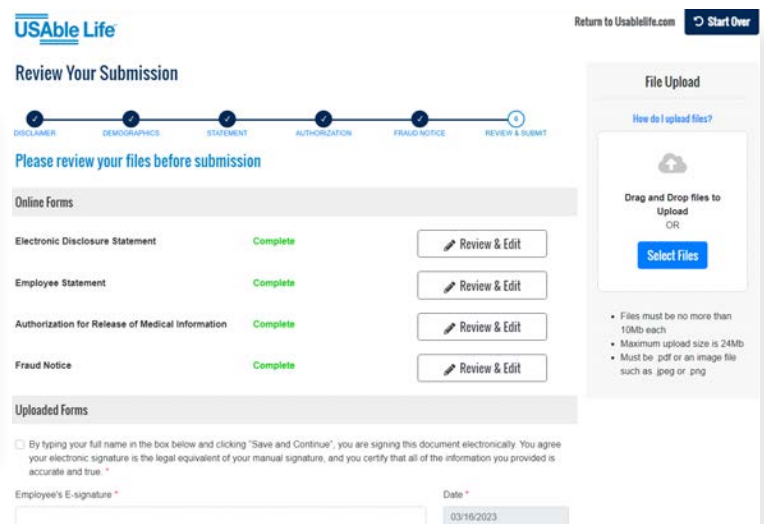


## Steps 4 and 5: Authorization for Release of Medical Information and Fraud Notice (online forms)

Complete the “*Authorization for release of medical records*” and “*Fraud Notice*” screens. For each screen, complete the “*Sign & Date Below*” section, check the acknowledgment box, and complete the employee e-signature field.

Throughout the submission process you can upload supporting documents or completed forms, such as Attending Physician Statement, Accident or Incident Report, etc. that will assist in the review of your claim. The file size and format must adhere to the specifications noted.

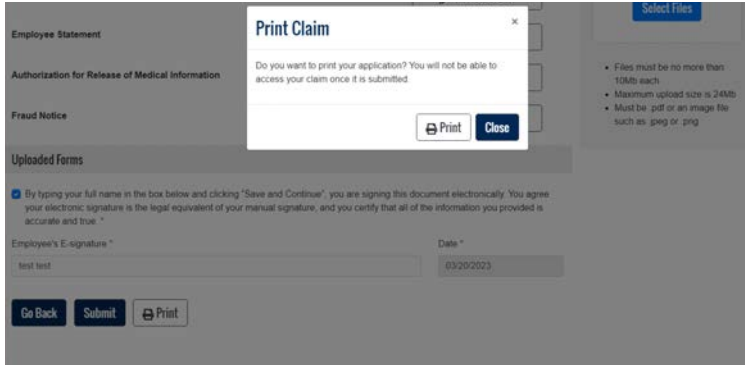
Please review this page to ensure all forms have been completed. Select **Save and Continue**.



## Step 6: Review and submit

Once your online Hospital claims submission is ready, select **Print**. A "Print Claim" screen will appear. Note that you cannot access your claim once submitted. After printing, select **Submit**.

A "Success!" screen will appear stating that a confirmation email has been sent to the email address you provided. Congratulations, your Hospital claim has been successfully submitted to USABLE Life!



The screenshot shows a web form for claim submission with a 'Print Claim' dialog box overlaid. The dialog box contains the text: "Do you want to print your application? You will not be able to access your claim once it is submitted." Below this text are 'Print' and 'Close' buttons. The background form includes sections for 'Employee Statement', 'Authorization for Release of Medical Information', 'Fraud Notice', and 'Uploaded Forms'. The 'Uploaded Forms' section has a checkbox checked and a warning message. At the bottom, there are input fields for 'Employee's E-signature' and 'Date', and buttons for 'Go Back', 'Submit', and 'Print'.

