

Hospital Indemnity Claims Checklist

Identify your policy *(Please include at least three pieces of identifying information.)*

Policy number. Policyholder's name. Policyholder's date of birth. Policyholder's address.

What you need to file a claim

Patient's name and date of birth. Date of injury or when symptoms first occurred.
Patient's relationship to policyholder. Physician's name, address and phone/fax number.

Definitions & acronyms

- Emergency room (ER).
- Itemized hospital bill (IHB).
- UB04 (itemized hospital bill).
- HCFA 1500 (non-hospital bill).
- Operative report (surgical report).
- Authorization to obtain information (AU). *(This allows Aflac to request additional documentation on your behalf.)*

Proof of services *(Please obtain the supporting documents for the corresponding benefit.)*

ER visit.

ER report.

Laceration - Must include length of laceration.

Physician's visit benefit.

Physician office notes.

Medical records.

Ambulance - Only need one from below.

Ambulance bill.

Discharge summary.

IHB - Indicating ambulance drop off.

Surgery.

Operative report - Must include the type of procedure or procedure code.

Hospital confinement/short stay benefit.

IHB or UB04.

Date and time of admission and discharge.

Medical diagnostic imaging.

Scan/image report.

Pregnancy - Must indicate type of delivery.

IHB or UB04.

Discharge summary.

MyAflac® helpful tips:

My Claims



Follow your claim from start to finish and receive alerts if we need additional information through our integrated Claim Status Tracker.

My Account



Enroll in direct deposit and receive claims benefits faster. Be sure to enroll at least 24 hours before filing a claim. Otherwise, we will mail you a check.