Automatic Claims Filing Instructions...

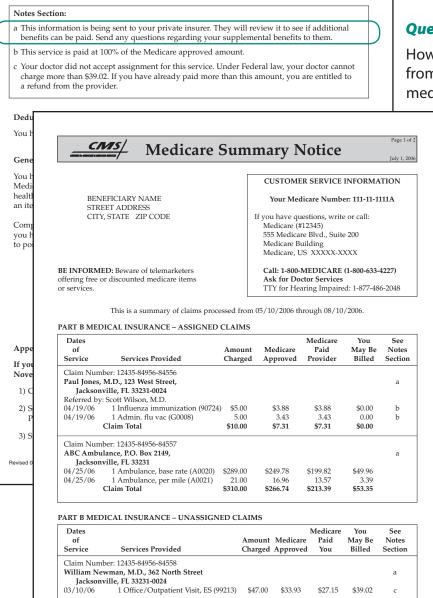
This sheet tells you how Automatic Claims Filing works to eliminate the vast majority of your claims filing with the Company. It also explains what you do in those instances when your claims are not received automatically by us.

SECTION 1: Claims You Need <u>NOT</u> File With The Company

DOCTORS' CHARGES AND OTHER MEDICAL EXPENSES NOT PROVIDED BY A HOSPITAL... are the most commonly incurred health care claims and **come to us automatically after your doctor**/

Page 2 of 2 July 1, 2006

provider has filed with Medicare. These are claims you do not need to file with the Company.



THIS IS NOT A BILL - Keep this notice for your records

Your Medicare Number: 111-11-1111A

Question:

How can I be sure you have received my claims from Medicare for doctors' charges and other medical expenses not provided by a hospital?

Answer:

Medicare will send you the **Medicare Summary Notice** (MSN) form shown here. The MSN shows all the services or supplies that providers and suppliers billed to Medicare during each 3-month period, what Medicare paid, and what you may owe the provider. **The MSN is not a bill.**

Look for a statement on the MSN form similar to the following...

"a. This information is being sent to your private insurer..."

...this means Medicare has already sent your claim to us — in other words, you do nothing. If this statement does not appear, send us a copy of all pages of the MSN form.

For a quicker review, you may visit <u>www.MyMedicare.gov</u> to track your Medicare claims online.

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SECTION 2: Hospital & Skilled Nursing Claims You Need To File

HOSPITAL CHARGES - BOTH OUTPATIENT AND INPATIENT - AND SKILLED NURSING

FACILITY CHARGES... are less frequently incurred expenses which you or the facility must file with the Company for consideration of benefits due under your policy. In most cases for inpatient, and often for outpatient services, hospitals will file the claim with both Medicare and the Company on the policyholder's behalf. Here is what to do if you need to file your claim:

1. Outpatient Hospital Charges:

[Charges for services you receive from the hospital even though you are not confined overnight.] Ask the hospital to send us a copy of the REMITTANCE ADVICE the hospital receives from Medicare.

2. Inpatient Hospital Charges:

[Charges associated with overnight confinement in a hospital.] Ask the hospital to send us a copy of the same form the hospital sends to Medicare – the UB-04 (CMS 1450). This is the fastest and simplest way to receive benefits... Or...

Another way to file your inpatient hospital claim is to wait until you receive the Medicare Summary Notice shown here and send us a copy of the section entitled PART A HOSPITAL INSURANCE - INPATIENT CLAIMS.

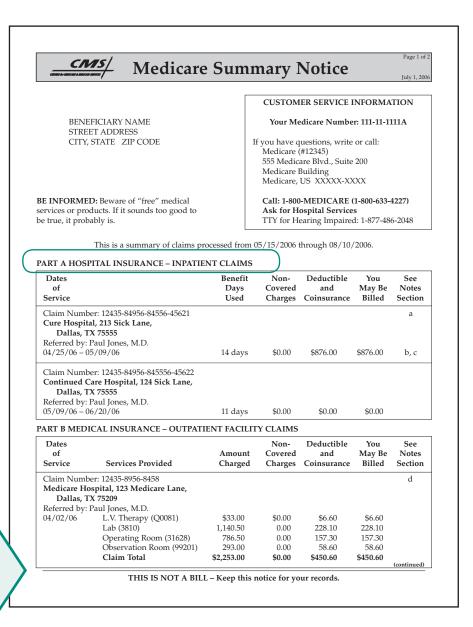
Note: You may also visit www.MyMedicare.gov to track your Medicare claims online and mail us a copy once Medicare pays the claim.

3. Skilled Nursing Facility Charges:

Medicare will send you the **Medicare Summary Notice** shown here; send us a copy.

Question:

What if I am confined in a skilled nursing facility for which Medicare pays no benefits?



Answer:

In these cases, we do not always provide benefits either. If you are uncertain whether benefits would be available under your coverage, you should send us copies of your bills from the nursing facility so that we can determine if benefits are due.