

CHECKLIST

FAST TRACK

Use this checklist to make sure you have provided everything to keep your Cancer Insurance claim on the ***FAST TRACK***.

- Is this a wellness claim for your annual cancer screening?

No claim form is needed. Just submit a copy of the test results or billing showing which test was performed and mail to PO Box 9006, Phoenix, AZ 85068-9006.

- I have completed the claim form in full.

You can avoid delays in claim processing by completing the required information on the claim form.

- I have completed the signature field on the second page of the claim form.

Please sign and date in the space provided at the bottom of Part 1 of the claim form to verify all statements on the form are complete and true.

- I have included copies of the itemized bills needed to support my claim. If I received treatment at a Veterans Administration Hospital, I have provided the admission/discharge paperwork and/or daily progress notes in place of an itemized bill.

- I have verified that my itemized bills include the dates of service, description of services provided, the charged amount, the diagnosis for the treatment provided, and the medical coding associated with my treatment.

- I have included a copy of the pathology report that diagnosed my cancer.

THE BELOW IS **ONLY REQUIRED IF CLAIM DATE OF SERVICE IS WITHIN **ONE YEAR** OF INSURED'S EFFECTIVE DATE OF COVERAGE.**

- I have provided the name and address of any physician who treated me in the year prior to my policy effective date in Part 2.a.

- I have included Part 3 - Attending Physician's Statement which has been completed by my physician.

Please note: If required information is omitted, this may result in a delay in the processing of your claim. Should you have questions, please feel free to call a claims representative at 877-883-8800. Please allow up to 30 days for claims processing.