Long-Term Care/Home Health Care 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.

☐ Patient's relationship to policyholder.

☐ Authorization to obtain information (AU).

☐ Facility's name, address, phone number.

☐ Primary care physician's name, address, phone number.

☐ Long-term care or home health care claim form.
(Completed by treating physician and director of nursing.)

Definitions & acronyms

- **Operative report** (surgical report).
- **Pathology report** (test results from specimen which diagnosis cancer).
- **Certified death certificate** (signed by a judge and certified through the vital records office).
- **Uncertified death certificate** (photocopy of the original death certificate).
- **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.)*

☐ **Details of diagnosis.**

- ☐ **Pathology report.**
- ☐ **Hospital discharge summary.**
- ☐ **Operative/surgical report.**
- ☐ **Medical records/physician office notes.**

☐ **Monthly itemized bill** - A bill from the provider detailing each service received each month.

☐ **Deceased patient.**

☐ **Death certificate** (copy or original).

☐ **Legal documents verifying the person authorized to handle the affairs of the deceased.**

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 Coverage
Here you'll find a copy of your policy and benefit details to see what's covered and benefit amounts.

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

Aflac coverage is underwritten by American Family Life Assurance Company of Columbus. In New York, coverage is underwritten by Aflac New York.
This checklist is intended to assist policyholders when filing claims and does not constitute a guarantee of claims payments or act as an all-inclusive list.
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