BRAN Making a Health/Dental Insurance Claim

A health insurance claim is when you request reimbursement or direct payment for medical or dental services obtained.

Options to file a Health Insurance Claim

There are two ways that you can file a health insurance claim:

- 1. The most convenient way is when your medical services provider submits the claim directly to BF&M.
- 2. The other way is to submit your receipts and invoices to BF&M for reimbursement. This process will require you to complete a <u>Health Insurance Claim Form</u> and attach all claim receipts and invoices where you have paid your health and dental charges directly to a service provider. This process applies if your health/ dental service provider has collected all claim charges up front and will not be filing a claim on your behalf.

Get Set up for Electronic Reimbursement (EFT)

If you have not applied for electronic reimbursement. This is an opportunity to have your reimbursement paid directly into the financial institution of your choice. Simply download the electronic fillable <u>Electronic Funds Transfer Form</u>, complete all details and submit to <u>eftinfo@bfm.bm</u>.

Steps to filing your Health Insurance Claim Form

If you have to file your own health insurance claim, here are the steps you will need to take along with some helpful tips on submitting your insurance claim form.

1. Download your Claim Form

We have an electronic fillable <u>Health Insurance Claim Form</u> that you can download from our <u>website</u>. Your claim form will also give you additional instructions pertaining to what other information they may need from your doctor or healthcare facility.

2. Review the information required for completing the Health Insurance Claim Form

The claim form will ask the following:

- Insured Information Your insurance policy number, group plan number and employer (group insurance) or member certificate number (individual insurance)
- Patient Information Who received the services (for example if it was the primary insured or a dependent like a child, spouse or domestic partner)
- Claim Information Purpose of the visit (medical care, accident, workers compensation, prescription medication, eye exam and glasses/contacts, etc.), date of services, place of services, descriptions of services, provider/facility name, and claimed amount

3. Obtain itemised receipts

Ask your health care provider for an itemised bill listing every service provided, including the appropriate medical, vision or dental codes, and outlining the cost of each of the services provided.

Request to have all medications or drugs provided during any treatment clearly listed with itemised costs.

Receipts should show proof that a payment for services has been made to the health or dental provider.

Attach the original itemised bills to the Health Insurance Claim Form.

4. Important things to know about your claim submission

- *Time constraints (limitations)* Clients and providers have 12 months to submit personal reimbursement claims from date of service
- Language When submitting foreign overseas claims, BF&M must receive English translated receipts and invoices
- *Complexity* Complex overseas claim submissions require a more extensive review to determine eligibility for coverage. These reviews may take more time than the standard 10 day turnaround time



5. Review your documentation

Review all the paperwork you have completed to ensure it is complete and accurate prior to submitting. Once you have everything in order, submit the Claim Form and supporting invoices/receipts to BF&M.

6. Make copies

Once you have your claim form filled out and your itemised bills from your doctor, don't forget to make copies of everything for your records and to verify your claim reimbursement once the transaction is completed.

7. Submitting your Claim

You may submit your <u>Health Insurance Claim Form</u> and receipts, accompanied with an itemised list of receipts via email: <u>healthclaims@bfm.bm</u>. Alternatively, you may submit your claim by hand to BF&M's front desk, or by mail at the address provided below:

BF&M Insurance Company Limited

P.O. Box HM 1007 Hamilton HM DX Bermuda *Attention: Health Claims Department*

8. Track your Claim

Personal claim submissions are processed within 10 business days from receipt in the Claims Department. Please allow a few additional days for payment processing.

EFT payments are the quickest method of reimbursement. If you are not <u>set up for EFT</u>, please be aware that the alternative payment method is by cheque, which is sent out in the mail and may take several weeks to arrive.

Keep an eye out on your calendar for the claim date that you marked and contact BF&M if you have questions about your EFT or cheque payment. You can review all claims payment information on BF&M's online platform <u>MESA</u>. You can access this in the Health section via BF&M's website at <u>www.bfm.bm</u>.

General contact information:

Telephone: 441-295-5566Facsimile: 441-296-8740P.O. Box HM 1007, Hamilton HM DX, Bermuda



