



Claims

Participants may assign benefits to their provider, who will usually file the claim on their behalf; otherwise, they may submit their claim to Administrative Concepts, Inc. (ACI) directly using the information on their ID card.

About the claims process

1. Claims information cannot be shared with the Group Administrator, due to HIPAA privacy requirements. If a claimant needs help with a claim, the Participant must access and complete the **Authorization to Disclose PHI form**. This form is available on the Group Administrator and Participant Portals. You or the Participant may also request the form by calling **888-585-9038**.

How Participants can submit claims for Group Limited Indemnity (GLI) Insurance

1. Patients may **present their ID card and assign benefits to their medical service provider** at the point of service, so the provider can submit claims to ACI on their behalf.
2. Providers may submit the itemized bill by mail or electronically. **No claim form is necessary.**
 - **For GLI**, we only require an itemized bill; no EOB is necessary.
3. Once we have processed and approved the claim, payment will be sent directly to the provider. Claims are typically processed in 10-15 days.

How Participants can check claim status

Participants can check the status of a claim, either by:

1. Logging into the Participant Portal at acitpa.com and clicking **Member**.
2. Calling **888-585-9038** with questions about claims or benefits.

Flexible claim submission options for GLI claims:

- **By email:** claims@acitpa.com
- **By mail:**
Globe Life Benefits
c/o Administrative Concepts
Inc. PO Box 4000
Collegeville, PA 19426-9000
- **Fax:** 610-293-9299

*If participants prefer not to assign benefits, they may submit the claims to us directly, in which case claim payment will be sent to the Insured, who is responsible for paying the provider.