

Submitting a hospital indemnity insurance claim

We're committed to making claims submission easy for you, by offering a simple, straightforward process that helps you focus on your recovery. Simply fill out the form, collect your required documentation (listed below), and submit your claim mail, by fax, or via our website. Your claim will typically be reviewed within 4 to 6 business days.

Step 1

Access your account

Step 2

Go to "Your tasks"

Step 3

Select "Submit your hospital indemnity claim online"

Go to quardianlife.com and select "Log in" to register or access your account.

Click "Start a Claim," and select applicable coverage and review coverage description.

Review the summary of the information entered and confirm its accuracy. Submit your claim.

Typically, a claim will be processed within 4 to 6 business days1.

Hospital indemnity claim submission

Secure channel: Visit <u>quardianlife.com</u> and follow the steps outlined above. Please be sure to have all the information listed in the required information section when you do.

Phone: To submit your claim, call 800-541-7846.

Fax: 920-749-6417

Mail: Guardian Life Insurance Guardian Life Insurance Hospital Indemnity Claims PO Box 14752 Lexington, KY 40512

Claim forms and supporting documents can also be emailed to: hospitalindemnitybenefits@glic.com

Required information

Personal

- Group plan number and member ID
- Name and address
- Phone number and email address
- Birth date
- Dependent information, if applicable
- Bank routing and account number for direct deposit

- Medical bills from the provider(s)
- Medical records including diagnosis, progress notes, test results, admission or discharge summaries, and operative reports
- Emergency room reports
- A statement of transportation and lodging expenses, if applicable

Unacceptable medical documentation

After care instructions

The Guardian Life Insurance **Company of America**

guardianlife.com

New York, NY

How to file a claim - Hospital Indemnity (04/26) NC

¹ Provided all required information is received.

Guardian's Group Hospital Indemnity Insurance is underwritten and issued by The Guardian Life Insurance Company of America, New York, NY. Products are not available in all states. Policy limitations and exclusions apply. Optional riders and/or features may incur additional costs. This is a limited plan of supplemental health insurance that provides the specified financial support, as a lump sum or indemnity payment, following a covered hospitalization. This is not minimum essential coverage as defined by federal law. This coverage will not reimburse for hospital or medical expenses. Generic Policy Form # GP-1-HI-15. The state approved form is the governing document.

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