HOW TO SUBMIT OUT-OF-NETWORK CLAIMS

Submitting claims to Collective Health

After an out-of-network provider visit, you can easily submit claims online in your account to apply your out-of-network benefits. Start your claim at Collective Health on the web or in the app.

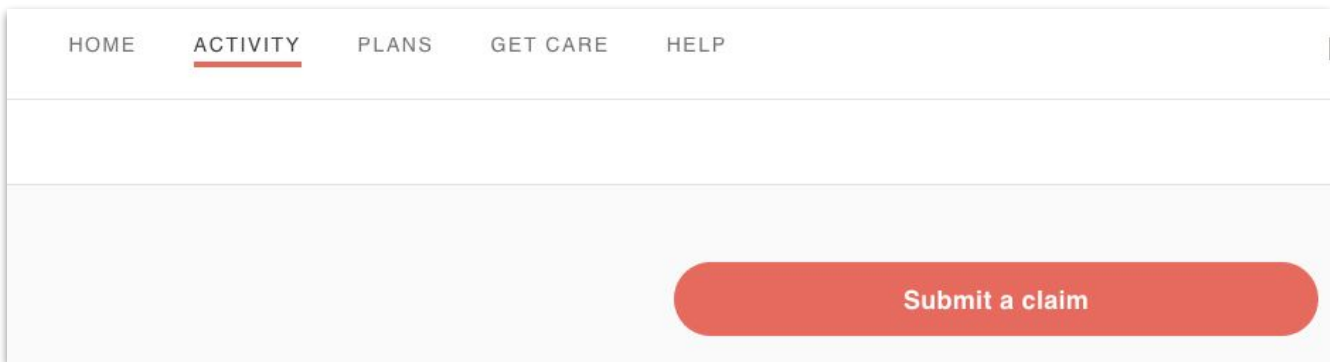Submit an out-of-network claim by following these three steps**:**

STEP

1 Sign in to Collective Health to begin your claim

Visit my.collectivehealth.com or open the app on your mobile device.

- Navigate to the Activity section and select 'submit a claim' to begin.

HOME	ACTIVITY	PLANS	GET CARE	HELP

Submit a claim

Reminder, you'll first need to be registered to sign in to your account. You can register on the sign in screen of my.collectivehealth.com.

STEP

2

Review prompts & answer according to your claim

Choose your claim type:

- ● Medical
- ○ Pharmacy
- ○ Dental
- ○ Vision

Next

📖 Learn more about submitting claims

Review the prompts and check what applies. Make sure that you have the following on your claim:

- Patient name and date of birth
- Date(s) of service
- Diagnosis (ICD-10) code
- Description of each service (procedure or CPT code) and charges
- Provider's name and address

STEP

3

Upload your bill and submit

Watch your mailbox

Keep an eye on your mailbox for any reimbursements that may arrive in the mail for your out-of-network claim.

Attach the bill as a PDF, PNG, or JPEG (up to 10mb). Once uploaded, select 'submit'.

- A team member will review, transcribe, and process the claim to reflect your out-of-network benefits.
- Please allow up to four weeks for a bill to be transcribed and processed.
- You'll receive a Medical Benefits Statement (MBS) in your account once the claim is finalized.

Go ahead and attach your bill(s)

You can attach up to 10 bills for the same provider and patient. They can be PDFs, PNGs, or JPEGs up to 10MB.

⊘ A. Test Out of Network Claim.pdf 🗑

🗅 **CHOOSE FILE(S) TO UPLOAD**
or drop file here

Submit