



# Vision 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

For injuries:

For illnesses:

Patient's name and date of birth.

Date and description of injury.

Date symptoms first occurred.

Patient's relationship to policyholder.

Location of the injury.

Date of first treatment.

## Definitions & acronyms

- UB04. (Itemized hospital bill.)    ■ HCFA 1500. (Non-hospital bill.)    ■ 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.)*

### Physician office notes or receipt.

**Eye exam.**

**Vision correction.**

**Visual impairment** - Office notes/medical documentation showing level of impairment.

**Surgery** - Operative/surgical report.

**Specific eye disease/disorder** - Physician office notes, scan report or test results showing diagnosis.

**Macular degeneration.**

**Retinal detachment.**

**Proliferative diabetic retinopathy.**

**Retinitis pigmentosa.**

**Glaucoma.** (Excluding preglaucoma and/or borderline glaucoma.)

## 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 claims benefits faster. Be sure to enroll at least 24 hours before filing a claim. Otherwise, we will mail you a check.