

HOW TO FILE CLAIMS

Please note: These instructions assume that your provider of medical services will not be directly filing a claim with BlueLincs for the services rendered to you and your dependents and therefore you are choosing to file your own claims. All services must be authorized, in advance, by your primary care physician or BlueLincs.

1. Complete the "Patient and Member Information" sections on the claim form. If you wish to have your medical benefits paid directly to your doctor, be sure to sign the Member signature line. A separate form should be submitted for each family member.
2. Have your doctor complete the "Physician/Supplier Information" section or submit completely itemized bills. An itemized bill is one that shows the patient's name, relationship, date of service, the type of service rendered and the nature of the condition being treated, and the physician's taxpayer identification number, if benefits are assigned.

Send the claim form:
BlueLincs HMO
P.O. Box 21318
Tulsa, OK 74121-1318

If you have questions or need claim
forms, please call:
1-800-580-6202

IMPORTANT REMINDER:

- Have you remembered to include your member number?
- Completely itemized bills showing the nature of illness or injury are required.
- Failure to complete requested information may result in a delay in processing this claim.
- Either the physician or the member (not both) should submit a claim.

If your provider is filing or will file the claim for you, it is not necessary for you to file a duplicate claim. Please advise your provider to send the claims to BlueLincs at the address above.