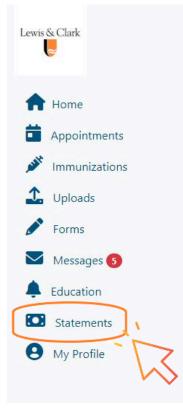
How to Submit a Claim to Your Health Insurance Company

For additional guidance, please see Case Management's Health Insurance FAQ page at <u>https://college.lclark.edu/student_life/case-management/health-insurance-faq/</u> and an overview and helpsheet on submitting health insurance claims at <u>https://content.naic.org/sites/default/files/inline-files/filing-health-insurance-claims.pdf</u>

Locate and print the statement from your office visit on the Health Information Portal.

- 1. Go to <u>https://lclark.medicatconnect.com/</u> and sign in. If you need help with logging in, please see the second page of the document at <u>https://www.lclark.edu/live/files/36330-health-information-portal-guide-2024-25</u>.
- 2. Click on "Statements" on the left side navigation bar.



3. Click on the date of the visit for which you want to submit.

.ewis & Clark	Health Center statements			
✿ Home	Past Statements View and Download			
Appointments	🔁 Wednesday, March 27, 2024			
Munizations	Wednesday, March 27, 2024			
C Uploads	Monday, November 6, 2023			
Opioads	🔁 Monday, November 6, 2023			
Forms	🔁 Monday, October 9, 2023			

4. When you click on the statement date, a new tab will appear with a Walkout Statement that you can download or print.

5. Print the Walkout Statement.

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					Walkout	Statement		
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Responsible Name: Address:		0	Account Name: Testpat OtherID: A0034 DOB: 01/10/		Account Number :	2		
Diagnosis 1. R51.9 2. Z11.59	(ICD-10) (ICD-10)		Campus Address:					
2. 211.05	(100-10)							
3. J06.9 ((CD-10) CPT Code	Description	NDC	Units	Charges	Payments		
Date 03/27/2024		Description RE: Student Health Office Visit 30 Mins. RE: Student Health Office Visit 15 Mins.		Units 1 1	Charges \$0.00 \$0.00	Payments \$0.00 \$0.00		
Date 03/27/2024	CPT Code 99214	RE: Student Health Office Visit 30 Mins.		1 1 tal: ce: tce:	\$0.00	\$0.00		
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Locate your member ID number

6. Locate your Member ID number. This will be on your health insurance card. If you do not have an ID card, contact your insurance company to get your member ID.

Prepare the statement for mailing

7. On the statement write: 1) your full name, 2) Member ID number, and 3) Group ID number (if a Group ID is listed on your Member ID card)

Your Name (First and Last) [Insurance Company Name] Member ID # [member ID # from insurance card]						Walkout Statement				
[in all the company g	initial (initian i	p a [monior ip		(our at the our all	Ticket	Number :	6744		
615 S Pa	Clark College Student I latine Hill Rd. , OR 97219-8091 (503) 768-7165 (503) 768-7167	Health Center	Walker Ka 615 S. Palat Portland, O	ine Hill Rd		Federal ID: NPI:	93-038-6858 1275159048			
Responsibl	e Party			Account		Account	Number :	2		
lame:	Testpatient, Mom			Name:	Testpatient, Abigail					
Address:	1897394 SW Elm			OtherID:	A0034					
	Blahblah, OR 97000			DOB:	01/10/1990					
				Campus Ad	dress:					
liagnosis										
	9 (ICD-10)									
	59 (ICD-10) 9 (ICD-10)									

Depending on insurance company: fill out and print a Claim Form

Some insurance Companies require that a claim form be mailed with the statement. These can usually be found on the company website. You can also call the phone number on your member ID card for assistance.

Mail the statement

8. Locate your insurance company's address to submit claims. Mail the printed statement to your insurance company.

After submitting your claim

After the claim is received and processed, a check will be mailed to the permanent address on file with your insurance company. If the address on file is not your current residence, you may want to notify the occupants of your permanent address. Contact your insurance company to check and/or change the address on file.



Stumped? Contact Gaby Herrmann in Case Management at gabyh@lclark.edu