

## frequently asked questions



### NCFlex Cancer and Wellness Benefit Claims FAQs

NCFlex Cancer Insurance and Wellness Benefit support from Allstate Benefits: **866-232-1517**

#### **Q1. Who submits a claim?**

**A1.** The insured or covered person will submit the claim for processing.

#### **Q2. When can I submit a claim for benefit payment under my Cancer coverage?**

**A2.** You can submit claims for covered benefits any time after the coverage effective date.

Example: If the coverage effective date listed on your certificate is January 1, 2025, you may file claims for covered services and treatment received on or after January 1, 2025.

Following enrollment, your coverage certificate is available by registering online at [mybenefits.allstate.com](https://mybenefits.allstate.com).

#### **Q3. When a claim is filed and benefits are paid by Allstate Benefits, who receives the proceeds – me or the doctor?**

**A3.** Claim payments are sent to you unless otherwise assigned to someone else. If you wish to have your benefit sent to your doctor, you will need to complete a form requesting assignment of your benefits, available at [mybenefits.allstate.com](https://mybenefits.allstate.com).

#### **Q4. How will I receive my claim payment?**

**A4.** You may receive your claim payment either by direct deposit into your bank account or paper check by mail.

For direct deposit, register with [mybenefits.allstate.com](https://mybenefits.allstate.com) and complete your claim online. You'll be asked which payment method you would like. Choose direct deposit/ACH and provide your bank account and routing number information.

For paper check payments by mail, complete your claim form and mail or fax your claim form and all required documents to us. Our claims mailing address and fax number are listed on your claim form.

#### **Q5. How do I submit a claim?**

**A5.** Download and save the **Allstate Cancer Claim Form** from NCFlex.org at <https://oshr.nc.gov/ncflex-cancer-insurance-documents>.

Instructions for completing and submitting your claim are on the form.

You may also register with our website, MyBenefits, at [mybenefits.allstate.com](https://mybenefits.allstate.com) to access your benefit and coverage information and to file fast, secure claims.

To receive a claim form by mail or for assistance with your claim, you may call our NCFlex Allstate Benefits Customer Care Center at **866-232-1517**.

#### **Q6. What documentation is required to process my cancer claim?**

**A6.** It depends on the type of claim. Acceptable supporting documents are listed by claim type in the [Cancer Coverage with Optional Riders Claim Form](#) (see pages 2 and 3), which is accessible via the [NCFlex Cancer Insurance Documents web page](#).

Please ensure the following information is included with each claim: patient information, date of service, description of service/procedure code, and itemized charges. Note that an EOB (Explanation of Benefits) alone does not include all of the required information. For assistance with your claim, call our NCFlex Allstate Benefits Customer Care Center at **866-232-1517**.

#### **Q7. When will I receive my claim payment?**

**A7.** To receive your claim payment as fast as possible, submit your claim online and provide all required documents at [mybenefits.allstate.com](https://mybenefits.allstate.com). Claim verification and processing varies; however, as part of the Good Hands® promise, we strive to pay all approved claims as quickly as possible.

For all cancer and specified disease diagnosis claims submitted online, you may check your payment status online at [mybenefits.allstate.com](https://mybenefits.allstate.com). You may also call our NCFlex Allstate Benefits Customer Care Center at **866-232-1517** to check your claim status.

Cancer Wellness claims may be paid in as little as 48 hours when you file your Wellness claim online at [mybenefits.allstate.com](https://mybenefits.allstate.com) and choose direct deposit/ACH.

#### **Q8. Can someone assist me with my claims and coverage benefits?**

**A8.** Yes! We provide dedicated customer care for NCFlex benefit policy participants and eligible family members. Our professional claims and benefits associates will help you gather the appropriate forms to help make filing your claims easy. Just call our NCFlex Allstate Benefits Customer Care Center at **866-232-1517**.

#### **Q9. What specified disease diagnoses are covered under my Cancer Insurance?**

**A9.** For a list of specified diseases covered in addition to cancer diagnoses as well as a summary of benefits, go to <https://oshr.nc.gov/ncflex-cancer-insurance-documents>. Covered benefits may also include continuous hospital confinement (payable daily), transportation, lodging (including family lodging), nursing services (including at-home nursing), physical therapy and more.

#### **Q10. If I am covered under more than one policy from Allstate Benefits, which policy do I file my claim under?**

**A10.** Refer to your coverage certificates to see which policy pays benefits for your diagnosis and treatment. Some medical diagnoses, treatments and services may be eligible for benefits under multiple policies. For questions about benefit eligibility, please call our NCFlex Allstate Benefits Customer Care Center at **866-232-1517**.

## Q11. How are claims paid?

**A11.** Approved cancer claims due to a covered cancer or specified disease diagnosis are evaluated for doctor visits, treatment and transportation costs. Approved claims are paid directly to you or your covered family member. Example of covered benefits payable (Premium Option):

- Surgery = up to \$4,500
- Anesthesia = \$1,125 (up to 25% of Surgery benefit)
- Radiation/Chemotherapy = up to \$10,000
- Total benefits payable = \$15,625

Benefits are payable based on actual charges up to the maximum amount listed in the Summary of Benefits outlined in your coverage certificate. View your Summary of Benefits at <https://oshr.nc.gov/ncflex-cancer-insurance-documents>.

## Q12. How can I help ensure that my surgery benefits are approved and paid?

**A12.** To receive your eligible surgery benefits quickly, you must provide your surgical bill from your surgeon's office. This is separate from your hospital bill and will help us approve your claim as fast as possible.

Example of claim documents that you can provide to help us speed up claim approval:

1. Hospital bill/invoice (if applicable) detailing services provided and costs.
2. Surgery bill from your surgeon's office (if applicable) detailing surgery performed and costs.
3. Transportation and Lodging receipts (if applicable). This should include a statement of where you traveled to and from, lodging receipts, mileage and confirmation of treatment during this time (Attending Physician's Statement included on your claim form).

## Q13. My coverage includes benefits for Non-Local Transportation and Lodging. What do I have to submit to receive reimbursement for these expenses?

**A13.** First, review your certificate to see which expenses are covered. Then, complete the section titled **Transportation and Lodging** on your claim form. Finally, send us a statement with the following information:

- Mileage
- Where you traveled from and to
- Lodging receipts
- Verification of treatment during this time (this information can be included in the Attending Physician's Statement section of your claim form)

## Q14. I had another surgery to ensure that the cancer was fully removed. How do I submit a claim for this follow-up surgery?

**A14.** You can submit another claim just like your initial claim. It must include your pathology report and your surgeon's bill with procedure codes (also called CPT codes).

## Q15. What happens if a covered person dies while covered under the Cancer coverage?

**A15.** Allstate Benefits may make benefit payments for approved and unpaid claims directly to the named beneficiary or estate.

## Chemotherapy and Radiation Therapy Claims

### Q16. How can I help ensure that my claim(s) for Chemotherapy and/or Radiation therapy are approved faster?

**A16.** Providing us with an itemized bill/invoice with the following information can help speed up approval of your claim:

1. The bill should have a charge for each separate service or procedure.
2. The bill should have specific dates for each service or procedure.
3. The bill must have a procedure code or the name(s) of the Chemotherapy drug(s) administered.
  - Common Procedure Technology (CPT) Codes – number code assigned to every service a medical practitioner may provide, including medical, diagnostic and surgical services.
4. For radiation, the bill should have the procedure code or a full description of the radiation procedure.

## Wellness Benefit Claims

### Q17. What is the Cancer Wellness benefit? How much does it pay?

**A17.** Your Cancer Insurance includes a Wellness benefit that pays you and your eligible family members annually when you undergo a covered preventive examination. These Wellness benefits can be used for anything you wish.

- Low policy option – pays each covered individual \$25 annually
- High/Premium policy options – pays each covered individual \$100 annually

The annual Cancer Wellness benefit is payable once per year if an insured person has an examination performed by a physician or physician's assistant for one of the following:

- Biopsy for skin cancer
- Blood test for triglycerides
- Bone Marrow Testing
- CA15-3 (cancer antigen 15-3 – blood test for breast cancer)
- CA125 (cancer antigen 125 – blood test for ovarian cancer)
- CEA (carcinoembryonic antigen – blood test for colon cancer)
- Chest X-ray
- Colonoscopy
- Doppler screening for carotids
- Doppler screening for peripheral vascular disease
- Echocardiogram
- EKG (Electrocardiogram)
- Flexible sigmoidoscopy
- Hemocult stool analysis
- HPV (Human Papillomavirus) Vaccination
- Lipid panel (total cholesterol count)
- Mammography, including Breast Ultrasound
- Pap Smear, including Thin Prep Pap Test
- PSA (prostate specific antigen – blood test for prostate cancer)
- Serum Protein Electrophoresis (test for myeloma)
- Stress test on bike or treadmill
- Thermography
- Ultrasound screening of the abdominal aorta for abdominal aortic aneurysms

## Q18. How do I submit a Wellness claim?

**A18.** Download and save the **Allstate Wellness Benefit Claim Form** from NCFlex.org at <https://oshr.nc.gov/ncflex-cancer-insurance-documents>.

Instructions for completing and submitting your claim are on the form. You may also register with our website, MyBenefits, at [mybenefits.allstate.com](http://mybenefits.allstate.com) to access your benefit and coverage information and to file fast, secure claims.

To receive a claim form by mail or for assistance with your claim, you may call our NCFlex Allstate Benefits Customer Care Center at **866-232-1517**.

This coverage does not constitute comprehensive health insurance coverage (often referred to as “major medical coverage”) and does not satisfy the requirement of minimum essential health coverage under the Affordable Care Act.

**Rev. 8/24. This material is valid as long as information remains current, but in no event later than August 1, 2027.** The coverage provided is limited benefit supplemental insurance, policy form GVCP2 or state variations thereof. This is a brief overview of the benefits available under the group policy underwritten by American Heritage Life Insurance Company (Home Office: Jacksonville, FL). The coverage has exclusions and limitations. Contact your Allstate Benefits Representative for costs and complete details. Allstate Benefits is the marketing name used by American Heritage Life Insurance Company, a subsidiary of The Allstate Corporation. ©2024 Allstate Insurance Company.