

HOW YOUR HOSPITAL INDEMNITY CLAIM IS PROCESSED



If you or your dependent are admitted or confined to the hospital, you must complete and submit a hospital indemnity claim form.

Here's How to Submit a Claim

Hospital indemnity claim forms are available online. To access the claim form, visit mutualofomaha.com/support/forms. You can file a claim in different ways depending on what is most convenient for you, including:



Online via the Employee Portal

1. Visit mybenefits.mutualofomaha.com/my-benefits/ui/registration. Register for an account.
2. Click on the "submit claim" icon on the portal homepage.
3. On the forms page, select "I am a Plan Member (Employee)" and choose the relevant state.
4. Select the necessary form, then select "Complete form online."

Already have an account? Log in at mybenefits.mutualofomaha.com/my-claims/ui/home to submit your claim.



Mail them to:

Mutual of Omaha Insurance Company
Group Hospital Indemnity Claims
3300 Mutual of Omaha Plaza | Omaha, NE 68175-0001



Over the phone:

Submit over the phone by calling 1-800-877-5176 and follow the steps below:

1. **Option 4** (questions about life, critical illness, accident or hospital indemnity policies)
2. **Option 4** (for hospital indemnity)
3. **Option 1** (to start a new claim)



Via Fax/Email:

Fax: (402) 997-1898
Email: submitgrphi@mutualofomaha.com

When Should a Claim Be Submitted?

A hospital indemnity claim should be submitted after you or a covered dependent have had a hospital stay as the result of a covered illness or injury, after receiving services performed as a result of a covered illness or injury, or after undergoing a health screening.

What Happens After My Claim is Submitted?

After the claim form is submitted, a Mutual of Omaha claims specialist will review your information within 4 business days. From there, if additional documentation is required to complete the claim, the claims specialist will reach out directly to you.

Approval Process and Payment Process

Once a claims specialist reviews your submitted claim and ensures all additional documentation has been submitted, you will receive a phone call with the result of the claim. If the claim is accepted, benefits will be issued within 2-3 business days. Standard mail times will apply (if applicable).

Mutual of Omaha does not require a complete claim submission to start the initial review of a claim meaning a claims specialist will review your claim as soon as the form is submitted, even without medical documentation.

Ready To File a Claim?

To not delay your hospital indemnity claim being processed and paid, make sure you include the following upon your submission:

Information You'll Need:

- Employer name
- Group number/ID (Ask your HR team to provide the group number if you don't have it or refer to your plan summary for the Group ID)
- Employer Address
- Employee name
- Employee date of birth
- Employee mailing address
- Employee social security number
- If the claim is for a dependent, you'll also need:
 1. Dependent's name
 2. Dependent's date of birth
 3. Dependent's social security number
- Hospital information, including if claimant was hospitalized, name of the facility, discharge date, and reason for admission/confinement

Examples of Supporting Claim Documentation

- Medical records including:
 1. Hospital and/or Physician Office Records
 2. Admission and Discharge Summaries
 3. Diagnostic Test Results
 4. Radiology Reports
 5. Laboratory Results
 6. Operative or Procedure Reports
 7. Physician Consultation Notes
 8. Home Nursing Visit Notes

We Are Here For You

If you have questions regarding your claim, please contact our dedicated toll-free number:
(800) 775-8805 | Monday - Thursday, 7:00 a.m. - 5:30 p.m. CST
Friday, 7:00 a.m. - 5:00 p.m. CST