

How to File Your Claim and Important Tips

YOUR CLAIM FORM

1. Your claim form should be fully completed and submitted within 90 days from the date of injury.
 - a. Be sure to provide your **email address** and **cell phone number** so that we may, if needed, contact you while away from home. **You may receive a text message from 972-645-9092 if we are unable to reach you via a phone call.**
 - b. Fully complete the section regarding “**OTHER INSURANCE STATEMENT**”, marking either Yes or No, sign and date.
 - c. Sign and Date both lines under “**AUTHORIZATION TO PAY BENEFITS TO PROVIDER**”. This will ensure that HSR and your doctors/hospital may communicate directly concerning your claim.
2. Only one claim form for each accident needs to be submitted.
3. Once completed, make a photocopy for your records and submit to HSR via email, fax or USPS mail. Mailing information can be found at the top of the claim form.
4. DO NOT assume that anyone else will mail this claim form to HSR for you.

YOUR BILLS

1. Please be sure and advise all doctors/hospitals of this coverage so they will provide itemized bills to us.
2. **If you have already been treated by a doctor/hospital and did not know about this coverage, then please send all your itemized bills to HSR.** (An itemized bill is usually in the HCFA-1500 or UB-04 format) See attached examples.
3. The bills should include the name of the doctor/hospital, their complete mailing address, their Tax Identification Number (TIN), telephone number, the date you were treated by the doctor/hospital, the diagnosis codes and the specific itemized charges incurred. Also known as CPT codes.
4. If this information is not on the bills that are sent in to HSR, it will delay the handling of your claim. “Balance Due” statements do not contain sufficient information to complete your claim.

EXCESS OR OTHER INSURANCE

1. Your coverage through the PRCA pays on a secondary/excess basis. If you have any other primary insurance, you need to send the bills to your primary insurance first.
2. HSR will consider benefits after your other, primary insurance has processed the claim.
3. You will need to send to HSR a copy of the Explanation of Benefits (EOB) you received from your primary insurance showing what was paid or denied, and the reason for denial. Due to HIPAA regulations HSR is unable to obtain this information from your primary insurance carrier on your behalf.
4. HSR will not be able to consider your claim without this information.

If you have any questions, please contact Debra Black, Customer Service Manager at (877) 534-7669. Debra is available from 8:00 a.m. to 5:00 pm Central Time, Monday – Friday. You may also forward any documents by fax to (972) 512-5820, via email to Rodeo@hsri.com or via USPS to:

Health Special Risk, Inc.
8400 Belleview Drive, Suite 150 Plano, TX 75024

