ACCIDENT/SICKNESS INSURANCE

How to File for Benefits

To file for benefits under this Plan of Insurance, please take the following steps:

1. **Use the claim form that has been provided to you. It is up to the individual to file claim with the Southwest Florida Council and provide all documentation. Additional claim forms are available through the Southwest Florida Council. Do not send claim forms to Health Special Risk, Inc. Send all claim forms to the Southwest Florida Council, 1801 Boy Scout Dr., Fort Myers, Fl. 33907.**
2. **Complete the leader's statement on the claim form, sign and include unit leader's name, address and phone number supervising activity** (line 11).
3. **Have the claimant, if adult, or the parents (guardian) of the youth for whom the claim is presented, sign their respective statements on the claim form.**
4. **Attach with copies of all bills after you have received your primary insurance Explanation of Benefits (EOB) forms. For identifying the patient, the date(s) of treatment(s) and the condition treated withand send them along with the completed claim form to your Council office (original bills must be submitted with claim form).**
5. **The Southwest Florida Council will forward all information to HSR, Inc.**
6. **Note - Accidents to Scouts at Camps or other district/council/regional activities: Claim forms must be submitted by parent (guardian). All bills from local physicians/hospitals should be billed to the individual. The Southwest Florida Council is not responsible for handling bills not submitted in this manner.**

After the claim form and initial bills have been sent to the Southwest Florida Council, direct any additional bills and questions to:

Health Special Risk, Inc.
HSR Plaza
4001 N. Josey Lane
Carrollton, TX 75007-1520
Telephone: 1-866-726-8870
Fax: 972-492-4946

In all correspondence to HSR, be sure to show the name and number of the Council (088) and the name of the member sustaining the loss. Normally, benefits will be sent directly to the provider of the treatment, that is, the physician or hospital. However, if the bill for services has been paid by the person applying for benefits, benefits can be paid directly to this person.

***If you have any questions regarding a claim, please direct them to HSR at the above address. Claimant is responsible for settling claim directly with HSR after claim is forwarded by the Southwest Florida Council. Please contact the council if you need assistance once your claim has been filed.**

BSA'S PROGRAM OF INSURANCE FOR YOUR COUNCIL IS UNDERWRITTEN BY Health Special Risk, Inc.

NOTE: This brochure has been prepared by Health Special Risk, Inc.. The information given is a description of the coverage, benefits and exclusions contained in the Master Policy issued to the National Council of the Boy Scouts of America and the Certificate of Insurance issued to your local Council. All information given is subject to the terms and conditions of the Master Policy. The policy is renewable, subject to the Company's approval.