Auxiant®
Independent Solutions › Real Results

Auxiant Manual Claim Process

If a provider will not submit a claim to insurance for processing, or if you pay out-of-pocket for services instead of a claim being submitted, you have the option to submit a *Manual Claim Request* to Auxiant.

1. Request appropriate documentation from your provider related to your services.
    - Itemized Bill or Claim Form- This should show all services performed, as well as their billable procedure codes and the related diagnosis code
    - Receipt or Other Proof of Payment- If you made any payment to the provider for services, include a receipt or other proof of payment showing the amount that was paid
2. Access Auxiant's *Manual Claim Submission Form* via the Auxiant online member portal.
    - Login to your member account via www.Auxiant.com, and click on *Forms and Guidance* on the left side of the screen
    - Click on the link titled *Manual Claim Submission Form*
3. Provide as much information on the form as possible.
    - Refer to the itemized bill from your provider for most of the information being requested on the form
4. Submit the form and additional documentation to Auxiant via fax or mail.
    - Fax: 608-273-4554
    - Mail:

        Auxiant
        Attn: Claims Department
        PO Box 259710
        Madison, WI 53725-9710
5. Once Auxiant receives the request, all standard benefits applicable to the services provided including deductible, coinsurance, copays, and provider discounts (if applicable) will be applied.
    - Please allow up to 15 business days for your manual claim to be processed
    - Once Auxiant enters the claim into our system, you will be able to view it via the Auxiant online member portal
6. Once the claim has been processed, payment will be remitted based on the following:
    - If you already paid for services, or if the provider's TIN is not provided, Auxiant will send payment to you/the member via a check mailed to the home address on file.
    - If you did not already pay for services and we have the provider's TIN on file, Auxiant will send payment directly to the provider.
7. After a manual claim has been processed and paid, you will receive an Explanation of Benefits (EOB) showing how the services were covered by your Plan.

If there are any questions regarding this process, or if you need assistance with submitting a Manual Claim Request, contact Auxiant's customer service team.

Manual Claim Submission Form

Visit us on the web
www.auxiant.com

Group Name: _____

Policyholder (Employee) Name: _____

Identification Number of Policyholder: _____

Patient Name: _____

Phone number we can call in case of questions: _____

Date of Service: _____**Amount paid to your provider:**_____

Provider Name: _____

Provider FEIN/Tax ID Number: _____

Diagnosis Code: _____ **CPT/Procedure Code:** _____

Brief description of services rendered: _____

_____

Please attach:

- A receipt showing proof of payment made to your provider, if applicable.
- An itemization or claim form your provider's office may have given you, if available.

Submit your request either by fax or mail to:

Fax: 608.273.4554 or Mail:
Auxiant
Attn: Claims Department
P.O. Box 259710
Madison, WI 53725-9710

Auxiant will apply all standard benefits applicable to the services provided including Deductible, coinsurance, copays, provider discounts (if applicable), etc. Please allow 10-15 business days for your claim to be processed.

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