



## How to File a Claim

**To process your claim please submit the following three pieces of information:**

1. Completed and Signed Claim Form
2. Itemized Bills
3. Explanation of Benefits from your Primary Insurance Carrier

**These documents should be mailed, emailed or faxed to:**

A-G Administrators, Inc.

Claims Department

P.O. Box 979

Valley Forge, PA. 19482

[Claims@agadm.com](mailto:Claims@agadm.com)

(610) 933-4122 Fax

(610) 933-0800 Phone

(800) 634-8628 Toll Free

1. The Claim Form enables us to open a claim for the treatment of your injury. To avoid delays in claim processing please be sure the “other insurance” portion of the claim form is completed in full. The claim form must be signed by a school official such as coach or athletic trainer.
2. Itemized Bills: Please include copies of all medical bills, showing the name and address of the provider of service, date of service, type of service and the charges. Account statements or “balance due” statements are helpful, but do not contain all the information needed to process the charges.
3. Explanation of Benefits: If you have other medical insurance, all medical bills must be first submitted to that carrier for their determination of eligibility. If the charges are not paid in full by the other medical insurance carrier we will need to see a copy of the “Explanation of Benefits” from that carrier prior to issuing benefits from this office. If you have no primary medical insurance the need for an “Explanation of Benefits” will not be applicable to your claim.