



# CLAIMS MADE EASY

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## A guide to *TransConnect*<sup>®</sup> claims

Your *TransConnect* supplemental medical expense insurance can help bridge the gap between out-of-pocket expenses and your major medical plan coverage. After enrollment, you will receive a welcome package containing your *TransConnect* ID card and instructions on how to access your member website and details on how to file your claims online.

### HOW IT WORKS

Claims can be submitted two ways:

- 1 BY YOUR PROVIDER**  
Present your ID card to your medical provider at your next visit. The ID card contains a payer ID for the provider to submit claims electronically.
- 2 BY YOU**  
There are multiple ways you can file your claim. See the next page for detailed instructions on how to submit your claim.

### REIMBURSEMENT DEPENDS ON HOW YOUR CLAIM IS SUBMITTED

- If your provider submits your claim, benefits for covered services will be paid directly to the provider.
- If you submit your claim, benefits for covered services will be paid to you and you are responsible for your provider's payment.

### DO YOU HAVE WHAT YOU NEED TO FILE A CLAIM?

Have everything you need ready to go before you call or submit. All documents should be clear and readable.

- Explanation of Benefits (EOB) including the deductible, co-pay, and/or co-insurance amount(s)
- Completed claim form
- Itemized statements from care provider showing diagnosis and procedure codes

*Please note, there may be instances where additional forms and information are needed to make a decision on a claim. In these scenarios, you may be asked to supply more documentation, and this may require extra review time.*

## HOW TO FILE YOUR CLAIM



### Online\*

1. Log in at [webtpa.com/member-portal-login](https://webtpa.com/member-portal-login). If you're not registered, click **"CREATE ACCOUNT"** and accept the License Agreement.
2. On the Registration Page, enter your information as follows:
  - **Member ID Number** — as shown on the front of your ID card.
  - Use the following format **XXXXXXXXXX-01**  
(Please Note: the **-01** is not reflected on your ID Card, but is required for website registration)
  - **Home Zip Code**
  - **Date of Birth (MM/DD/YYYY)**
3. Complete the Transamerica Online Claim Submission Form.



### Phone

1. Contact the Claims Customer Service Department at **800-476-4491**.
2. Press **(1)** for Claims and then press **(2)** to be connected with a claims representative.



### Fax

1. Fax claim documents to **469-417-1960**.
2. Include the insured's name and SSN/Member ID Number (as shown on the front of your ID card).



### Mail

1. Mail completed claim documents to:  
**WebTPA**  
**P.O. Box 310**  
**Grapevine, TX 76099-0310**
2. Include the insured's name and SSN/certificate number.

\*Preferred method — online filing ensures accurate claim submission and lets you track your claim status at [webtpa.com](https://webtpa.com)

## Questions about your claim?



**800-476-4491**

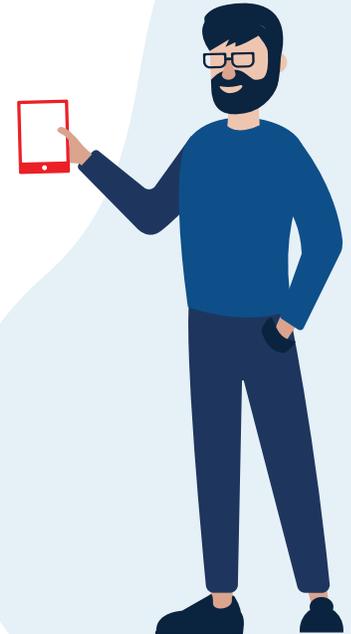
Mon-Fri: 8 a.m. to 8 p.m. Eastern Time

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