

Click. Submit. Smile.

Use Aflac SmartClaim® online submission process to take advantage of One Day PaySM.

To Get Started:

- Go to **aflac.com/register** to access Aflac Policyholder Services
- Click **Register Now** and follow the instructions
- If you have already registered, **verify** or **update your contact information** in My Personal Info section

Enroll in Claims Direct Deposit:

- To take advantage of the full speed of One Day PaySM, go to **aflac.com/mypolicy** and log in
- Select **Direct Deposit** from the menu on the left side of the screen
- Select **Manage Claims Direct Deposit** and agree to the terms
- **Enter** and **confirm** your basic bank account information
- Start enjoying the benefits of Direct Deposit in one business day



Use Aflac SmartClaim® to Take Advantage of One Day PaySM



USE SMARTCLAIM®
See below for instructions



UPLOAD SUPPORTING DOCUMENTS



**SUBMIT BY
3:00 P.M. ET**

Aflac SmartClaim®

1 Let's Get Started

Tell us which covered person you are filing a claim for and choose a claim type that best describes the claim.

2 Claim Details

Provide claim details by answering questions related to the services you are filing. Details regarding the claim should include:

- Date of accident, the initial date of diagnosis or oldest date of service included in the current medical documentation.
- Responses to questions for services/treatment already received.

3 Verify Submission

Confirm all questions are answered correctly.

4 Acknowledge

Electronically sign your name to confirm you understand the requirements for completing the filing process and acknowledge the information provided is true and correct.

5 Finish

Submit supporting documentation needed to complete the filing process. Either upload supporting documents at the end of the SmartClaim process (required for One Day PaySM) or upload later through **MyClaims**.



One Day PaySM available for most properly documented, individual claims submitted online through Aflac SmartClaim® by 3 p.m. ET. Aflac SmartClaim® not available on the following: Disability, Life, Vision, Dental, Medicare Supplement, Long-Term Care/Home Health Care, Aflac Plus Rider, Specified Disease Rider and Group policies. Aflac processes most other claims in about four days. Processing time is based on business days after all required documentation needed to render a decision is received and no further validation and/or research is required. Individual Company Statistic, 2015. **Individual coverage is underwritten by American Family Life Assurance Company of Columbus. In New York, individual coverage is underwritten by American Family Life Assurance Company of New York.**
Worldwide Headquarters | 1932 Wynnton Road | Columbus, GA 31999

Tips for Successfully Filing Claims

- Supporting Documentation** – UB04 and HCFA 1500 forms are the national standard billing forms used by hospitals and health care providers. These standard billing forms, if completed in their entirety, will frequently provide Aflac all the information needed to complete a claim AND significantly reduce the need to request additional information from the policyholder or provider ... which makes filing easier!

UB04

HCFA1500

- Fax Cover Sheets** – Avoid delays in processing by including a fax cover sheet for all faxed claims that do not contain a bar code. Please include the claimant's name, policy number, and line of business. If you're unsure of the policy number, log on to Policyholder Services and enter the policyholder's information to locate the policy number.

- Faxed Claims Transmissions** – Help us help you! Each policyholder's claims should be sent in a separate transmission. More than one claim for the same policyholder may be combined in the same transmission; however, do not combine claims for more than one policyholder in a transmission. Additional fax lines have been added to help eliminate busy signals and lost faxes.