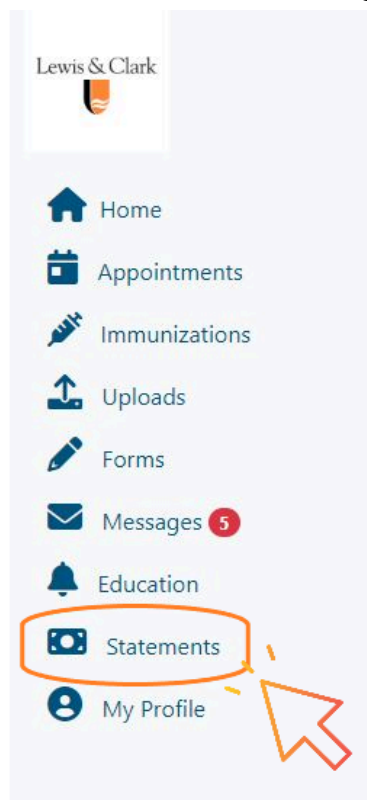


How to Submit a Claim to Your Health Insurance Company

For additional guidance, please see Case Management's Health Insurance FAQ page at https://college.lclark.edu/student_life/case-management/health-insurance-faq/ and an overview and helpsheet on submitting health insurance claims at <https://content.naic.org/sites/default/files/inline-files/filing-health-insurance-claims.pdf>

Locate and print the statement from your office visit on the Health Information Portal.

1. Go to <https://lclark.medicatconnect.com/> and sign in. If you need help with logging in, please see the second page of the document at <https://www.lclark.edu/live/files/36330-health-information-portal-guide>.
2. Click on "Statements" on the left side navigation bar.



3. Click on the date of the visit for which you want to submit.

Lewis & Clark

Health Center statements

Past Statements View and Download

- [Wednesday, March 27, 2024](#)
- [Monday, November 6, 2023](#)
- [Monday, November 6, 2023](#)
- [Monday, October 9, 2023](#)

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4. When you click on the statement date, a new tab will appear with a Walkout Statement that you can download or print.

5. Print the Walkout Statement.

Walkout Statement

Ticket Number : 67445

Lewis & Clark College Student Health Center
615 S Palatine Hill Rd.
Portland, OR 97219-8091
Phone: (503) 768-7165
Fax: (503) 768-7167

Walker Kathleen, NP
615 S. Palatine Hill Rd
Portland, OR 97219
Federal ID: 93-038-6858
NPI: 1275159048

Responsible Party
Name: Testpatient, Mom
Address: 1897394 SW Elm
Blablah, OR 97000

Account
Account Number : 2
Name: Testpatient, Abigail
OtherID: A0034
DOB: 01/10/1990
Campus Address:

Diagnosis

1. R51.9 (ICD-10)
2. Z11.59 (ICD-10)
3. J06.9 (ICD-10)

Date	CPT Code	Description	NDC	Units	Charges	Payments
03/27/2024	99214	RE: Student Health Office Visit 30 Mins.		1	\$0.00	\$0.00
03/27/2024	99213	RE: Student Health Office Visit 15 Mins.		1	\$0.00	\$0.00
Total:					\$0.00	\$0.00

Today's Balance: \$0.00
Previous Balance: \$898.00
Account Balance: \$898.00

This fee has been charged to your student account. Please forward to your insurance company for reimbursement.

Locate your member ID number

6. Locate your Member ID number. This will be on your health insurance card. If you do not have an ID card, contact your insurance company to get your member ID.

Prepare the statement for mailing

7. On the statement write: 1) your full name, 2) Member ID number, and 3) Group ID number (if a Group ID is listed on your Member ID card)



Your Name (First and Last)

[Insurance Company Name] Member ID # [member ID # from insurance card]

Walkout Statement

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Date	CPT Code	Description	NDC	Units	Charges	Payments
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Depending on insurance company: fill out and print a Claim Form

Some insurance Companies require that a claim form be mailed with the statement. These can usually be found on the company website. You can also call the phone number on your member ID card for assistance.

Mail the statement

8. Locate your insurance company's address to submit claims. Mail the printed statement to your insurance company.

After submitting your claim

After the claim is received and processed, a check will be mailed to the permanent address on file with your insurance company. If the address on file is not your current residence, you may want to notify the occupants of your permanent address. Contact your insurance company to check and/or change the address on file.



Stumped? Contact Gaby Herrmann in Case Management at gabyh@lclark.edu