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18.01.35 - Guidelines Respecting the Use of Claim Forms for Disability Insurance Claims

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**IDAPA 18
TITLE 01
CHAPTER 35**

**18.01.35 - GUIDELINES RESPECTING THE USE OF CLAIM FORMS
FOR DISABILITY INSURANCE CLAIMS**

000. LEGAL AUTHORITY.

Idaho Code, Section 41-211, Section 41-2110, Chapter 22, Section 41-3221(2), Chapter 34, Section 41-3930, and Section 41-4020. (7-1-93)

001. -- 010. (RESERVED).

011. APPLICATION.

This guideline applies to individual policies of disability insurance, group and blanket policies of disability insurance, contracts with fraternal benefit societies for accident and health benefits, contracts with hospital and professional service corporations for health care services, contracts with health maintenance organizations, and self-funded health care plans. (7-1-93)

012. GUIDELINE FOR USE OF CLAIM FORMS.

Any hospital, nurse or nursing service, or medical or surgical service provider who makes a claim for direct payment may request from the insurer, fraternal benefit society, hospital and professional service corporation, health maintenance organization, or self-funded health care plan, a supply of such forms as are usually furnished for filing proofs of loss, in a number calculated by the hospital or medical service provider to be adequate for anticipated claims during a period of six (6) months. If such forms are not furnished within fifteen (15) days after request, the claimant may submit written proof of loss for such period of time on the uniform claim form for accident and health insurance prepared by the Division of Medical Practice, American Medical Association. If the requested number of forms is furnished to the hospital or medical provider, and is exhausted, the hospital or medical provider will request an additional supply of forms prior to using the AMA uniform claim form. (7-1-93)

013. -- 999. (RESERVED).

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