

Procedures to File an Accident/Medical Insurance Claim

You can download a claim form off the website. Please do not use previous forms as they are obsolete. You will need the Acrobat reader to display the form.

Complete Sections I, II, IV, V and VI. **NJSRC must complete Section III.**

- The first line of Section 1 is the referee and is the same as the patient.
- Send the completed form to the NJSRC office within 90 days of the injury. Do not wait for bills from your medical service providers or payments made by your insurance carrier.

1. **IMMEDIATELY** submit a claim for all medical expenses to the Company that administers your own personal or group insurance or healthcare plan (including Major Medical coverage). If you have coverage through an HMO or similar facility, you must use that facility first or the claim will not be covered under this policy.

2. After your other insurance or healthcare plan has paid the medical expenses up to the policy limits, attach any unpaid bills and copies of payments made by your insurance company (Explanation of Benefits) to this claim form and mail to the New Jersey State Referee Committee office at the address shown below. Do not send the claim form directly to Gracechurch Associates. They will not accept a claim without the authorization of the NJSRC Office.

3. Please check and make sure that:

- a) You have completed and signed the Parent/Guardian or Insured's Statement of other Insurance.
- b) The Medical Records Authorization **MUST** be signed and dated. If you want payments to be sent directly to your doctor or healthcare provider, sign the Payment Authorization Section.
- c) You have attached all unpaid bills to this form.
- d) You have attached any Explanation of Benefits forms that you have received from your Primary insurance carrier or other healthcare plan.
- e) You have completed only Sections I and II on the front of claim form.

4. Subsequent bills should be sent in as you receive them. Please write the claimant's name, policy number and date of accident on all subsequent bills. A new claim form is not necessary. Once the claim has been filed with NJSRC, the bills may be submitted directly to:

Gracechurch Associates
83 Big Oak Road
Morrisville, PA 19067

Mail original claim forms to:
New Jersey State Referee Committee
109 White Oak Lane
Suite 72H
Old Bridge, NJ 08857

If you have questions regarding the policy, please contact Tony Petruzzi at 215-295-0725 or e-mail at apetruzzi@gracechurch.biz.