

How to file a claim

Policy #:

Policyholder:

When using MyGO for the first time,
please use the policy information above to
self-register before submitting a claim.

Contact us:

sbclaims@symetra.com
symetra.com/MyGO

Call 1-800-497-3699

Monday–Friday

6:30 a.m. to 5 p.m. CT

Fax: (715) 682-5919

Mailing address:

P.O. Box 440

Ashland, WI 54806

Option 1

Use your Symetra benefits ID card

- 1 Present your card at the time of service, and assign your benefits to your provider.
- 2 Your provider will file a claim with Symetra, and Symetra will pay the provider according to the policy.
- 3 Symetra will send you an Explanation of Benefits (EOB) showing how the claim was paid. You are responsible for paying any remaining balance.

Option 2

Use My Group Online (MyGO)

Initiate a claim within minutes on MyGO. This secure, user-friendly platform is available 24/7 through your computer or mobile device.

To submit your claim:

- 1 Log in to your account at symetra.com/MyGO and click “Submit my claim.”
- 2 Fill out a few simple fields and upload documents.
- 3 Hit “Submit.”

Option 3

Email, mail or fax a claim

- 1 Request an itemized bill (form UB04 or HCFA 1500) from your provider with a diagnosis code. For accident claims, you also need to write a statement explaining the date, place and cause of the accident.
- 2 Complete a claim submission form, which can be found on symetra.com/MyGO under “Forms.” We can also email, mail or fax this form to you.
- 3 Submit the above information to Symetra by email, mail or fax.

More with MyGO

With MyGO, you can also:

- Check the status of a claim.
- View an Explanation of Benefits.
- Download important forms.
- Request and/or view a benefits ID card.
- Submit scans, photos or electronic versions of claim documents.
- Set up direct deposit for benefit payments.

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Frequently asked questions

Do I need a referral to see a specialist?

No. Referrals are not required, and you do not need pre-authorization to see a specialist.

How much time do I have to file a claim?

You have 90 days from the date of service to file a fixed-payment insurance claim. The first expense for an accident claim must be incurred within 60 days after the date of accident.

When will Symetra make a decision on my claim?

Symetra typically makes a decision on a claim within 10 days of receiving completed claim forms and any additional required information. Depending on the complexity of the claim, this review period may be extended up to an additional 15 days. If your claim is approved, you can expect to receive payment within 7-10 days.

Can Symetra help me gather any remaining information from my medical provider?

Yes. Additional information such as doctor notes may be requested, and we're happy to help you gather the remaining details after you or a provider initiates a claim. We'll just need you to sign a release of information form so we can contact the provider on your behalf.

Does the policy have to be effective to receive benefits?

Yes. The services received must occur while the policy is active.



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