

## EXCESS VOLUNTEER ACCIDENT COVERAGE

The Archdiocesan Insurance Program makes available excess accident medical insurance for assigned volunteers. Volunteers are eligible to file a claim for accidents which occurred as a part of an assigned volunteer work activity. The Insurer will review and consider the costs not covered by your primary health insurance carrier. If you have no health insurance coverage, review of covered services will be completed on a “primary” basis.

### Processing the Claim Form

**1. Part 1: POLICYHOLDER & INSURED**

Complete the information for the insured volunteer to include: (3) Name, (5 & 6) address, (7) date of birth, (9) phone number, (10-13) information pertaining to the injury and any treatment, (14-19) should not apply.

2. **Part 2:** Complete all requested information regarding the claimant along with the primary insurance policy information.

3. The claim form must be signed by the volunteer and the Pastor or Principal.

4. **You must attach copies of your primary carrier’s Explanation of Benefits (EOB) and all itemized medical bills (known as HCFA’s, UB-04’s or UB-92’s). Medical bills should show the ICD-9 codes for the services provided.**

5. If you have already paid the medical service provider and wish to be reimbursed directly, please attach a paid receipt or statement that verifies the payment.

6. Submit the completed claim form, itemized bills and primary insurance Explanation of Benefits to the insurance company NAHGA Claim Services.

7. You may contact NAHGA Claim Services at 800-952-4320 to discuss your claim. Please be aware that processing of your claim may take several weeks. When contacting NAHGA, please have your claim form available to ensure prompt assistance.

**Submit to:**

Archdiocese Insurance Program  
Risk Management  
2838 E. Burnside Street, Portland, Oregon 97214  
503-234-5334 Fax: 503-234-2903  
[riskmanagement@archdpdx.org](mailto:riskmanagement@archdpdx.org)