

Vision Claims Checklist

Have this information handy to identify your policy:

Policy number

Policyholder's name and date of birth

Policyholder's address

Here's a list of common items you will need to file a claim:

Patient's name and date of birth

Patient's relationship to policyholder

For injury: description and location

For illness: date symptoms first occurred and date of first treatment

Indicate patient's condition (refer to claim form for list)

Types of services received and details of charges

If permanent visual impairment was a result of condition, ask your physician to provide office notes and medical documentation.

Details of all requirements can be found by downloading your state-approved claim form [here](#).

Other ways to file a claim:

Fax: 1.877.44.AFLAC (1.877.442.3522)

Mail: Aflac, Attention: Claims Department

1932 Wynnton Road, Columbus, GA 31999

Helpful tips: Register on aflac.com/myaflac so you can:



Log in to MyAflac [here](#)

(If you haven't registered on aflac.com/myaflac you will need your policy number to do so.)



View benefit details

Follow your claim from start to finish with the integrated Claim Status Tracker. Are we missing anything? We will let you know right here if additional details are needed.



Sign up for direct deposit and receive benefits faster

Be sure to register at least 24 hours before filing a claim. Otherwise, your check will be mailed to you.



This checklist is intended to assist policyholders when filing claims and does not constitute a guarantee of claims payments. Documentation requirements vary by type of claim; please review requirements for your claim(s) carefully. Processing time is based on business days after all required documentation needed to render a decision is received and no further validation and/or research is required.

Coverage is underwritten by American Family Life Assurance Company of Columbus. In New York, coverage is underwritten by American Family Life Assurance Company of New York.