

Submit Long-Term Care Claim

To initiate a new Long-Term Care claim, call 1-800-228-9100.

To submit information on an existing Long-Term Care claim, fax, mail or go online.

Fax: 402-633-1020

Mail: Physicians Mutual Insurance Company
PO Box 2018
Omaha, NE 68103-2018

Go online at www.physiciansmutual.com:

1. Click on [Providers Information](#) on the Homepage.
2. Click on Submit Claim Information.
3. Enter the Policy Number. (Required)
4. Enter the Insured's Date of Birth. (Required)
5. Enter the Health Claim Number. (Optional)
6. Click Choose File to upload documents.

Note: Document format must be a PDF, JPG or PNG.

Note: A cover sheet is preferred when submitting claim information and may be the Physicians Mutual cover sheet (see Download Forms). Include provider's name, provider's phone number, customer's policy number and customer's claim number, if available.

7. Click Submit Claim Information. A confirmation page will appear.

Note: Additional documents can be uploaded via the confirmation page.