Cover Sheet for the Submission of Faxed Documentation

Use this cover sheet when you fax Federal Long Term Care Insurance Program (FLTCIP) documentation to FedPoint, the FLTCIP administrator, for review. Examples of FLTCIP documentation include invoices, proofs of payment, claims initiation and legal documents, and aide notes.

Please include your claim number on each page. This will help us identify you even if the transmission did not submit entirely. We may need to contact you to resubmit the forms if pages are missing.

Be sure the pages you fax are facing the right way, faceup or facedown, according to the fax model you use. Placing pages the wrong way will result in us receiving blank pages.

On receipt, our Care Coordination and Claims team will review your submission. Please allow up to 10 business days for processing. Due to high volume in calls, we are unable to contact you via phone to confirm receipt.

Date:	Number of pages, including this cover sheet:
Claimant's name	
First name	M.I. Last name
Unique ID or claim number:	
Legal representative's name	
First name	M.I. Last name
Claimant's current address	
Address	
City	State Zip code
Email	
Comments (provide any additional	l details that may be helpful to us as we review your documentation)

Please return your completed documentation by fax to 1-866-513-2674 or by mail to FLTCIP, Attn: FedPoint, P.O. Box 797, Greenland, NH 03840-0797.

