

Alliant National Benefit Advocates

Who are the Benefit Advocates?

Benefit Advocates are highly trained professionals with extensive insurance industry experience. They are available to assist you with your benefit needs.

How can a Benefit Advocate help me?

Call your Benefit Advocate for:

- Insurance claim questions
- Denied claims appeals
- Benefit questions or clarifications
- Prescription problems
- Flexible Spending Account questions
- COBRA inquiries
- General questions

Benefit Advocates cannot answer questions on Workers Compensation claims, Medicare, or Medicaid.

What do I need to provide the Benefit Advocate or insurance carrier in order to receive assistance?

- Member ID Number or Social Security Number
- Date of birth
- Your employer's name
- An itemized bill of services from your provider or an explanation of benefits (EOB) from the carrier

When should I contact my health insurance carrier directly?

- To request a new or additional ID card
- For the initial submission of claims
- To verify your physician is in the network
- HSA and FSA card inquiries

Benefit Advocate Contact Information



Benefit Advocates are available to assist you Monday through Friday, 8 a.m. to 8 p.m. ET. All calls are kept confidential and are tracked and monitored to resolution. Benefit Advocates also work with an interpretation service that supports 125 different languages. If you are in need of this service, please be prepared to tell the Benefit Advocate what language you need when you call.

phone: (800) 489-1390
fax: (203) 568-8396
email: benefitsupport@alliant.com
hours: Monday - Friday, 8 a.m. to 8 p.m. ET

When should I expect a response?

Our service standard is to respond to your inquiry (phone or email) by the end of the next business day. If your matter is urgent, please mention this in your message so we can prioritize your inquiry appropriately.

Creative. Experienced. Engaged. Responsive. That's the Alliant difference.