

ManhattanLife GAP ID Card

Stone County Board of Supervisors

Dependents are covered if they are enrolled*

Submit Claims to:

ManhattanLife VB Claims Department
P.O. Box 926169
Houston, TX 77292

Member Services

1-855-448-6982

	Member Name Stone County Board of Supervisors	Plan Type: GAP 891945
Group Name :	Policy Number:	
Group GAP ID Card PRESENT TO PROVIDERS		

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Submit Claims to:

ManhattanLife VB Claims Department
P.O. Box 926169
Houston, TX 77292

Fax: 1 (502) 405-7107
Email: VBClaimsSubmissions@ManhattanLife.com

Claim filing directions for Healthcare Providers and Insureds:

<https://www.manhattanlife.com/group-gap-claims>

**If you have any questions regarding claim submissions or to verify benefits, please
contact Customer Service at 1-855-448-6982**