+44 (0)20 7590 8800
claims@healthcareinternational.com
healthcareinternational.com

How to Make a Claim

Out-Patient / Dental Claims

For all out-patient and dental treatment payment is arranged by the Policyholder, at the time of receiving treatment. Provided that the treatment costs are within your plan limits and subject to the policy deductible, the costs incurred will be reimbursed by HealthCare International.

We recommend the following steps:

1. Whenever you visit a general practitioner, dentist, physician or specialist on an out-patient basis, please make sure you take a Claim Form with you.
2. Fill in the section that is assigned to you, then date and sign the Claim Form.
3. Make sure that your doctor provides all relevant medical information, including diagnosis, in the specified section and then dates, signs and stamps the Claim Form.
4. Attach all supporting documentation, invoices and receipts along with the Claim Form (e.g. general practitioner/physician invoices, pharmacy receipts with related prescriptions, if available), and email to our claims department at claims@healthcareinternational.com.
5. Remember, a separate Claim Form will be required for each person claiming and for each medical condition being claimed for.
6. Specify on the Claim Form how you would like to be reimbursed and also the currency in which you wish to be paid. Otherwise the benefit due to you will be paid in the currency of the invoice.
7. **Please note that any medical costs you incur will be settled or reimbursed in accordance with your policy benefit limits, and the amount payable will be net of relevant deductibles and/or co-payments.**

In-Patient Claims

Where possible, and with sufficient notice, we will arrange direct settlement with providers in the event of hospitalisation. Payment will be subject to any deductibles, co-payment, and benefit limits.

Pre-authorisation is required to arrange direct billing with your medical provider and is also required to access other policy benefits (please refer to your policy wording). Your doctor may also need to complete a treatment guarantee form. We recommend that you contact us at least **five days** prior to your planned hospital admission so that we can arrange for payment facilities to be set up.

What to do in an Emergency

As soon as you know that you need hospital treatment, contact our Emergency Medical Assistance Help-line. Should you find yourself in a position where the urgent medical treatment you need is not available locally or you cannot get to the telephone, please arrange for someone to telephone our 24-hour Emergency Assistance Centre on +44 (0)20 7590 8816 within 48 hours.

Our 24-hour Emergency Assistance Centre is run by a team of multi-lingual specialists who will be able to make all the necessary arrangements on your behalf (including air evacuation / repatriation if this is necessary) and answer any medical queries and advise you what to do next.

Claims Administration

Worldwide Excluding Far East Claims & Emergency Assistance

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Far East Claims & Emergency Assistance*

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*For residents in the following countries: Cambodia, China, Hong Kong, Indonesia, Japan, Laos, Malaysia, Myanmar, Philippines, Singapore, South Korea, Thailand, Timor-Leste, Vietnam

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What is Pre-Authorisation?

Pre-Authorisation is a process whereby our claims department guarantees cover for certain in-patient or outpatient treatments and costs. The process requires that a Treatment Guarantee Form is completed by your physician and emailed or faxed to our claims department for approval prior to treatment. Alternatively we can accept a medical report with a cost estimate sent directly by your healthcare provider.

We recommend that you contact us at least five days prior to your planned hospital admission

When is Pre-Authorisation required?

Pre-Authorisation is required for the following:

- All in-patient benefits as listed,
- MRI (Magnetic Resonance Imaging) scans,
- Convalescence facility and home nursing care,
- Psychiatric, mental, nervous, disorders, alcohol, drug abuse and speech therapy,
- Pregnancy and childbirth (in-patient treatment only),
- Eye surgery,
- Chronic disease/dread disease/AIDS (in-patient and daycare treatment only),
- Medical evacuation or repatriation,
- Expenses for one person accompanying an evacuated/repatriated person,
- Repatriation of mortal remains.

Why is Pre-Authorisation required?

Pre-Authorisation is necessary in order to ensure that all costs are fully covered within your plan. As with all health insurance policies, your plan with us will only cover treatment that is medically necessary and charges that are reasonable and customary. Therefore, it is vital that you contact us prior to treatment so that we can confirm the medical necessity of your treatment, as well as the appropriateness of costs.

By following the Pre-Authorisation process, we can ensure that your treatment will be free from financial worries, allowing you to concentrate on getting better. In addition, Pre-Authorisation will help us to provide you with a better service:

- In the case of planned treatment, we will have time to communicate with the hospital to facilitate smooth admission and guarantee direct payment.
- In the case of an evacuation/repatriation, we will be able to organise and co-ordinate the evacuation on your behalf.

What happens if I don't obtain Pre-Authorisation?

We reserve the right to decline a claim should Pre-Authorisation not be obtained for the benefits for which it was required. If it subsequently transpires that such treatment is proven medically necessary, we may only pay 50% of the eligible benefits.

In the case of hospital charges guaranteed by us prior to the Insured Person receiving treatment, the Policyholder agrees to reimburse us with the amount of the deductible and any co-insurance specified in the Certificate, at the time, if we are required to guarantee such hospital charges.

What exchange rate will be used to settle my claim?

We will settle your claim / invoices in the currency of your policy unless we are specifically requested to do otherwise. We are not responsible for any loss you may incur due to fluctuations in exchange rates, or for any bank charges you may suffer when you receive a bank transfer, foreign bank draft or when you cash a cheque from us.

E&OE

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