

Your Guide to Making a Claim

Securus Group and Individual Members - Middle East (excl Abu Dhabi)

Please refer to your Insurance Certificate for full details of Eligible Benefits, Benefit Limits and Excesses which apply to your Specific Policy. Please refer to your Membership Guide for Definitions and Terms and Conditions.

Claims Administrator: MedNet UAE FZ LLC

Within UAE (Toll Free): 800 EXPA / 800 3972
Overseas Calls (Collect): +971 4 275 7802
Expacare Limited: +44 1344 233950
Fax: +971 4 390 8598
E-mail: expacareclaims@mednet.com

Address to send Claim Forms to:

MedNet UAE FZ LLC, Dubai Internet City, PO BOX 500259, Dubai, UAE

Emergency Assistance: CEGA

For 24 hour emergency medical advice and assistance worldwide, please call CEGA on:

T: +44 (0)1344 233911

Please note that our multilingual staff are available at CEGA 24 hours per day.

What to do in an Emergency

In an emergency you (or someone acting on your behalf) must contact us on the emergency telephone numbers above within 72 hours of hospital admission and before an emergency evacuation.

Claim Forms

Additional Claim Forms are available from Expacare, MedNet and from the Expacare website www.expacare.com. One claim form per medical condition must be submitted. If you are claiming for more than one medical condition, a separate claim form must be completed annually for each condition.

Timeframe for Claims Submission

Please send us your claim as quickly as you can, but no later than six months after the start date of your treatment. Claims submitted later than six months following the start date of your treatment will not be paid. It is important for you to know that we are only able to reimburse medical expenses when we have received the claim form, all the original invoices and any additional information within 6 months of the treatment date. If claims have been paid by you, we will also require proof of payment. If your course of treatment exceeds 6 months, please ensure you obtain and submit an interim invoice. We strongly recommend that you keep copies of all documents in case originals are lost in transit.

Electronic Claims Submission

Claims documentation can be submitted to us via email to expacareclaims@mednet.com. If the claim is for treatment as an in-patient or day-patient, we will require original documentation before any eligible amounts will be paid. It is important to note that you should retain all original copies of forms and invoices as Expacare reserves the right to request these documents for audit purposes.

Reasonable and Customary Costs

Your policy allows for reasonable and customary eligible costs, as determined by us, to be reimbursed or paid directly to a medical facility. You have the flexibility to choose the facility at which treatment takes place. However, you should be aware that, in the event of the costs being charged exceeding what we consider to be reasonable and customary, you may not receive a full refund of your expenses or you may need to

pay additional fees to the medical facility. If you are concerned about this, please call the above telephone number where you will be able to obtain advice on facilities where we know costs charged are reasonable and customary. This rule also applies to the Provider Network.

Ways To Make a Claim

There are three ways to make a claim:

1. Direct settlement for in-patient treatment
2. Direct settlement for out-patient treatment
3. Pay upfront and claim for reimbursement (for in-patient or out-patient treatment)

Pre-authorising your claim in advance of receiving treatment – includes all in-patient treatment

All in-patient treatment and certain procedures/treatment (see list below) must be pre-authorised by you or someone acting on your behalf and you must be in receipt of confirmation from us in writing before treatment takes place. You should inform us at least 5 days before admission or any treatment. Upon contacting us, you will be advised which documents we require in order to authorise your claim.

You should also be aware that MedNet and some medical facilities may also have their own approval requirements. These will be in addition to our pre-authorisation requirements.

Specific Procedures/Treatment Requiring Pre-Authorisation

- Emergency Medical Evacuation
- Hospital admission (In-patient treatment)
- Any claim likely to exceed USD 3,750
- Psychiatric treatment (if covered)

In respect of the above specific procedures, please ensure that you have a written pre-authorisation from us before you proceed.

Important Note: Failure to comply will affect settlement of your claim. If pre-authorisation is not obtained, the insured person shall be responsible for the first USD 1,500 of each unauthorised event.

Direct Settlement for in-patient treatment

All in-patient treatment must be pre-authorised. Please refer to Pre-authorisation section above.

We can settle in-patient treatment costs directly with the hospital. This would normally involve us providing a 'guarantee of payment' (GOP) to the hospital which they need to accept.

GOPs can only be placed where treatment is due to take place within 30 days of notification. GOPs will not be placed where treatment is due to take place after the expiry of the policy. Any costs not covered (including excesses which are not paid by the member), which remain unpaid, will result in future GOPs being declined. If you are using a provider, which is not part of the provider network, you will be asked to pay for your bill and claim for reimbursement.

In situations where a hospital does not accept our GOP, treatment can either be sought at an alternative hospital or you would need to pay for the treatment and submit a reimbursement claim to us for these costs.

Within the UAE

- Check that the provider you wish to use is part of the MedNet Provider Network. This can be done by either calling MedNet on **800EXPA** or checking the Provider Network List on **www.expacare.com**
- When you visit the provider, present your Expacare Membership Card together with evidence of identity (such as driving license, labour card etc).

Ask your provider (doctor/consultant) to contact the MedNet claims centre for pre-authorisation. The provider will be required to fax a pre-authorisation form together with an estimate of costs to MedNet.

Outside of the UAE

- Contact MedNet and provide details of the treatment required and the preferred location.
- MedNet will advise whether they have an agreement in place with the provider and, if they have, the procedure above will be followed.
- If MedNet do not have an agreement with the chosen provider, you will be asked to contact the Expacare Claims Team who will arrange to place the 'guarantee of payment' for this claim.

Direct settlement for out-patient treatment

Check that the provider you wish to use is part of the MedNet Provider Network. This can be done by either calling MedNet on 800EXPA or checking the Provider Network List on **www.expacare.com**.

- When you visit the provider, present your Expacare Membership Card together with evidence of identity (such as driving license, labour card etc).
- When visiting a pharmacy, you will also be required to present a doctor's prescription.
- You will be required to pay for any deductible / co-payment as mentioned on the card.
- You will also be required to pay for any part of the treatment, which is specifically excluded.
- You may be required to sign a form, which will be provided, already completed, by your provider as evidence that you have received the benefit.
- Any pharmaceutical medications issued for treatment beyond one month require pre-approval (which will be sought by your pharmacist).

- Some providers may be required to contact MedNet for instant approval and they will contact us directly.

For out-patient claims outside of the UAE or where the provider is not part of the Provider Network, you will need to pay for the services/treatment you receive and follow the reimbursement procedure.

Reimbursement claims including claims for out-patient treatment

Where direct settlement with a provider has not been possible, it will be necessary for you to pay the treatment costs and for you to claim reimbursement of these costs. To ensure that your claim is processed as quickly as possible, you must:

- Complete an Expacare Claim Form in full.
- Ensure that the form is signed by the person providing the service or treatment (Section B).
- If the claim is in respect of prescription drugs (including repeat prescriptions), please ensure that either a copy of the prescription and pharmacy receipt is attached to the claim form OR that the doctor completes the details of the medication prescribed on the claim form and a pharmacy receipt is provided.
- Ensure that you have signed the claim form (Section A). If the claimant is a child, the form must be signed by the policyholder.
- Submit the claim form, together with original invoices and proof of payment if the claim is made by you, to MedNet at the address shown on the claim form and on the front page of this guide or by email to **expacareclaims@mednet.com**.
- Claim payments are made by cheque.
- If you are claiming Hospital cash benefit a certificate confirming the in-patient treatment, the diagnosis, the date of admission and discharge will be required.

Use of Provider Network

The Direct Settlement Provider Network includes the medical providers where you are able to obtain treatment for valid medical conditions and where the expenses will be settled directly by us. You are still responsible for any co-insurance or deductible applicable to your policy, which must be settled directly with the medical providers at the time of treatment.

Where you receive treatment for a medical condition that is not covered within the terms of your policy, you remain liable for the costs of such treatment, which must be settled in full upon request. Failure to act accordingly will result in the suspension or cancellation of your policy, without refund of premium.

You should also be aware that:

- Abuse of the network facility and membership card may result in the suspension or immediate cancellation of your policy.
- If a provider has refused to accept your Membership Card, there is a possibility that their charges are not reasonable and customary and you may not receive full reimbursement of the expenses you have paid.
- Your medical information will be shared with Expacare automatically and also specifically on our request.