

Claim Instructions

Claims Enquiry Hotline: (852) 2526 0918
Emergency Hotline: (852) 3723 3031 or (852) 3723 3033
Claims Enquiry Email: universalclaims@globalhealthasia.com
General Enquiry Email: globalhealthuniversal@globalhealthasia.com

Outpatient Claims

Out-patient Direct Billing

Available to members insured under nil deductible policies with optional Out-patient benefits.

Out-patient direct billing entitles members to enjoy “cashless” billing at clinics that are in our Outpatient Direct Billing Network for eligible medical expenses. Simply go to a listed clinic and present your member card. The clinic may contact us by telephone in order to verify your membership and levels of benefits. If out-patient direct billing is used within the limits of your policy, we will pay the clinic directly for services and medicines rendered meaning you do not need to pay anything.

Out-patient direct billing is not available for dental treatment, vaccinations and medical check-ups.

Out-patient Pay and Claim

If not using Out-patient Direct Billing, members will have to pay for the treatment and then claim for reimbursement. Patients should ensure that bills include required information from the doctor’s office, laboratory, or pharmacy for the claim to be considered. Here is a summary of the basic details required:

- ❖ Name of the patient
- ❖ Date of treatment
- ❖ Doctor’s name, professional qualifications and clinic address
- ❖ The sum paid by the patient
- ❖ An explanation of the services rendered and the charge for each
- ❖ The diagnosis or other reason for the visit

A laboratory and pharmacy bill should normally be submitted with the bill from the doctor who prescribed/ordered it. If not, the client should submit a copy of the prescription, a doctor’s report or a fully completed claim form showing the diagnosis and date(s) of treatment.

Section A of the Medical Claim Form always required? Yes. We need to identify who is making the claim.

Section B of the Medical Claim Form always required? Section B of the Medical Claim Form is required for new claims. A claim is a course of treatment for a specific diagnosis (e.g. the first time a member is claiming for a specific ailment, illness or injury). GlobalHealth Asia reserves the right to ask for Section B to be re-completed if there has been a long pause in treatment or if treatment is ongoing with poor results.

Dental Pay and Claim

Please complete Section A of the Medical Claim Form and attach supporting documents including a breakdown of services rendered and the diagnosis treated.

Hospital/Surgical Claims

Letter of Guarantee

A Letter of Guarantee (LOG) is a letter issued by GlobalHealth Asia or our emergency service partner AA International to a clinic or hospital. It guarantees the medical establishment that we will pay your medical expenses for a particular procedure and hospital stay.

A LOG can be set up for any hospital confinement or surgery with any hospital in the world. In order to facilitate the LOG set up, we need to be informed as soon as possible of any hospitalisation whether it is an emergency or not. For any hospitalisation, if you are paying and claiming or wish us to set a LOG for you, we need the following information provided to us at your earliest convenience:

- ❖ Section C of the Medical Claim Form completed by the attending physician
- ❖ An estimated value of the claim (provided by the hospital)
- ❖ Any supporting documents regarding the condition, including diagnosis, medical reports, admission reports
- ❖ The name, contact details and location of the hospital or clinic

In most instances we will work directly with the hospital to ensure smooth service. In general please just get in touch with us as early as possible if you need our assistance regarding a hospitalisation. Generally 3 working days are required to issue a LOG in a non-emergency situation, particularly outside of Asia.

In-patient and Surgical Pay and Claim

The procedure to pay and claim for in-patient or day-patient services is much the same as the procedure to set up a Letter of Guarantee. The difference is that you supply all documents and information as listed above to us after you have paid. Even if you wish to pay and claim for inpatient or surgical claims, please do contact us and inform us of your confinement.

In case of Accident or Injury

The member should provide GlobalHealth with a statement written by the member giving full details of how the accident occurred (including date, time, and place). GlobalHealth may also require other documentation, such as a police report.

Filing Period

Claims must be submitted within 90 days of the date of service unless it is shown that it was not reasonably possible to file within this time. Claims not submitted within 12 months of the date of service will not be entertained under any circumstances.

How to File your Claims

We require the original documents (Medical Claim Form, invoices, receipts etc.) to be mailed to us in order to release funds. If you wish to fax or email the claims ahead, please send to the following:

- ❖ **Email universalclaims@globalhealthasia.com**
Insert your policy number into the subject line of your email
- ❖ **Fax (852) 2526 0769**

NOTE: In some cases your policy may have special terms and conditions on accessing particular medical facilities. Always check your policy documents for any specific limitations on your cover.