

# How to claim guide

# Minor claims (Ex: out-patient/ dental treatment)

Please submit your claims via e-mail to <a href="mailto:claims@foyerglobalhealth.com">claims@foyerglobalhealth.com</a> to request refund for out-patient treatments.

# Major claims (Ex: In-patient treatment)

Please contact Foyer Global Health before starting an in-patient treatment. We will assist you in choosing the most appropriate medical provider in your area and will help to arrange for cash-free takeover of the treatment cost. You can easily join us by calling the number indicated on your service-card.

#### What do I have to do in case of a claim?

To allow a smooth reimbursement process we recommend to promptly submit all medical claims received. We are only obliged to refund when having received all invoices and other supporting documents. These documents and invoices become our property and we reserve our right to keep them.

## What information has to be included in the invoices?

All **invoices** have to contain the following information:

- Name, first name and date of birth of the insured person.
- An exact diagnoses of the condition or description of the symptoms by a doctor
- The individual medical services and treatment information including price per unit
- For dental treatment the invoice has to include information on which teeth have been treated or replaced and which treatment was applied.

#### Other important criteria:

- All documents and invoices should preferably be in English, German or French and Arabic figures, the Latin alphabet (1, 2, 3 etc./a, b, c etc.) as well as the ICD-Code (International Classification of Diseases) 9 or 10 should be used.
- Prescriptions should include first name and last name as well as the date of birth of the insured person aside from the name of the prescribed medication, the price and the receipt of payment
- Prescriptions have to be submitted with the invoice of the prescribing doctor. Invoices for treatments and therapeutic aids have to be submitted with the corresponding prescriptions.
- In case a substitute hospital cash plan benefit is claimed a confirmation of the treatment must be submitted. This confirmation must include aside from first name, last name and date of birth of the patient, the diagnosis, the date of admission in and dismissal from the hospital as well as if applicable the duration of absence from the hospital during that period of time.



### How is my claim treated?

Insurance benefits for out-patient and dental treatments

For out-patient and dental treatments the insured person is the contracting party for the doctor or the therapist. Before starting the treatment the doctor/ therapist concludes a treatment contract with the insured person. On the basis of that contract the doctor/ therapist can charge for the treatment. The insured person can then submit the invoice to Foyer Global Health for refund as contractually agreed.

Insurance benefits for in-patient treatments

- Upon demand fix costs such as nursing fees and cost for in-patient accommodation as well as for patient transport can be paid directly to the invoicing party.
- Insured persons can cede their claims of reimbursement vis-à-vis of Foyer Global Health to the service provider. For this you sign a declaration stating that you cede your claim to the hospital.
- We can only guarantee the direct settlement when the hospital agrees to this process and when the direct settlement by the insurer is conform to the usual settlement process of the concerned country.

## What to do in case of emergency?

As an insured person you can reach us at any time of the day and around the clock. All addresses, phone numbers and e-mail addresses are available in your insurance documents. We offer immediate call back to all insured persons who contact us concerning a claim, especially following an accident, a medical emergency or in case you need in-patient medical care.

#### How is the cost for claims refunded?

As a rule all claims are paid based on the principal of cost reimbursement. That means that we reimburse all eligible cost incurred based on an out-patient medical treatment. As a special service and on demand we can pay the insurance benefits directly to the service provider who issues the invoice, for example in cases where the claim amount is extremely high (over 2.000 EUR).