

Step-by-Step Guide to Making a Claim

For: Global Infrastructure Management LLP

Please refer to your Policy Wording and Certificate of Insurance which confirms your Benefits together with any Exclusions which may apply.

Should you require any assistance or have any queries please contact our

24 hour Helpline +44 (0) 330 333 6686

or the number on the back of your membership card

Section 1:	Emergency Treatment; Evacuation or Repatriation
Section 2:	Types of Claim
Section 3:	In-patient & day-patient Treatment
Section 4:	Out-patient Treatment

Please follow these simple steps to make a claim.

Section 1: Emergency Treatment

If you need, or have received, emergency treatment, it is important to call our **24 hour Helpline +44 (0) 330 333 6686** (or the number on the back of your membership card) as soon as possible to arrange for your treatment costs to be covered.

Evacuation or Repatriation

Please ensure you contact our **24 hour emergency Helpline +44 (0) 330 333 6686** (or the number on the back of your membership card) as soon as possible, who will make the necessary arrangements.

For all other claims please follow this Guide.

Section 2: Types of Claim

Please refer to the correct section of this document for the **type of claim you wish to make**. There are 2 types of claims:

- **In-patient / Day-patient:** these cases are alike in that you are **admitted to a hospital** for treatment. If this involves at least one overnight stay it is 'in-patient'; if you are admitted to a bed in a hospital during the day for diagnosis or treatment but you do not stay overnight, then it is 'day-patient'.
- **Out-patient:** in this case, you are not admitted to a hospital. Instead, you attend an out-patient clinic at a hospital, or visit a specialist clinic, Doctor or Dentist for diagnosis or treatment.

Section 3: In-patient & day-patient Treatment

Planned Treatment

Step 1: Pre-authorisation

We will need to confirm that your treatment is covered **before** you have it, so that we can arrange to pay your costs (pre-authorisation).

To do this you need to:

Contact us on **+44 (0) 330 333 6686** (or the number on the back of your membership card). With your permission, we will arrange to contact your medical practitioner or treating doctor in order to obtain the information required.

If your medical practitioner or treating doctor has already completed a Medical Certificate or provided a medical report then please send it to us by email **preauthorisation@alchealth.com**. Please note we will contact your medical practitioner or treating doctor if we require any further information.

Contact us using one of the options below:

Telephone	24 hour Helpline +44 (0) 330 333 6686 or the number on the back of your membership card
Email	preauthorisation@alchealth.com

Step 2

Once we have received all the medical information we need, we will contact you within 24-48 hours to pre-authorise your treatment. **If you need to be admitted into hospital more quickly, please call our 24 hour Helpline.**

Treatment that has not been pre-authorised

We will only pay 50% of your treatment costs if you have not arranged for us to pay these for you in advance. Please note, for Emergency Treatment, you must advise us as soon as possible.

Section 4: Out-patient Treatment

Planned Treatment

Please note the special cases, A and B below. For all other out-patient treatments, see C.

A) Psychiatric Treatment

Before you have any psychiatric treatment you **must** call our 24 hour Helpline. Your treatment will not be covered unless you have done so.

B) Physiotherapy and any Complementary Treatment

A referral letter is required from a medical practitioner or specialist before you can go for the treatment.

For all other planned out-patient treatment please follow the steps below. In most cases, you will need to pay your own treatment costs upfront and claim the money back from us.

C) All Other Planned Treatment

Step 1

You **do not** need to pre-authorise your treatment in advance (unless psychiatric). If you are unsure if your policy covers the treatment, please check your Policy Wording or call our 24 hour Helpline.

If you would like to pre-authorise your treatment you can do so by calling our **24 hour Helpline**, or email **preauthorisation@alchealth.com**

If you have chosen to pre-authorise your treatment or the treatment is taking place in hospital, please follow the in-patient procedure in Section 3.

Step 2

If you have already paid for your out-patient treatment and would like to send us your claim.

Please email **vipclaims@alchealth.com**

Please complete the appropriate Claim Form, downloadable from our website **www.alchealth.com/library.htm** and send this, together with any accompanying receipts, invoices, prescriptions, medical reports or medical certificates.

Please note that you must keep your original invoices and receipts for 6 months for audit requirements other than sending by post when originals should be included, in which case photocopies should be kept.

Summary of Pre-Authorisation and Referral Guidelines, for the ALC Heath 'Prima Platinum' Plan

Prepared for Global Infrastructure Management LLP, January 2021

For detailed instructions, please see the preceding pages of this 'Step-by-Step Guide to Making a Claim'

Please note: you do not need to contact ALC Health beforehand for most types of out-patient treatment. You can visit any hospital, doctor or consultant in your Area of Cover.

Must Pre-Authorise	All Planned Hospital Admissions	Please contact us to pre-authorise all planned admissions (i.e. in-patient & day patient treatment). Ideally, this should be at least five working days prior to the admission.
Must Pre-Authorise	All Emergency Admissions	Please notify us as soon as possible after the admission.
Must Pre-Authorise	All Psychiatric Treatment	For both in-patient and out-patient planned treatment.
Must obtain Doctor's Referral	Out-Patient Physiotherapy	Must first obtain a referral letter from a medical practitioner or specialist.
Must obtain Doctor's Referral	Complementary Medicine	Must first obtain a referral letter from a medical practitioner or specialist.
Optional Pre-authorisation	Other Out-Patient Treatment	Other than special cases above, most out-patient treatment does not need to be pre-authorised. But you can pre-authorise it if you wish, typically for higher costs such as MRI/CT scans. Doing this will allow us to confirm in advance that your out-patient treatment is covered. We will also offer to settle the costs directly with the medical facility. Please see separate list of UK facilities with which we have arranged to settle costs in this way.

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