

CLAIMS MADE EASY



NEED TREATMENT?

We understand that seeking treatment can be stressful. Follow the steps below so we can look after the details – while you can concentrate on getting better.

Check your level of cover

First, check that your plan covers the treatment you are seeking. Your Table of Benefits will confirm what is covered. However you can always call our 24/7 multilingual Helpline if you have any queries

Some treatments require pre-authorisation

Your Table of Benefits will show which treatments require pre-authorisation (via a Treatment Guarantee Form). These are mostly in-patient and high cost treatments. The Treatment Guarantee process helps us assess each case, organise everything with the hospital before your arrival and make direct payment of your hospital bill easier, where possible.

For further information on the Treatment Guarantee process, please refer to your Benefit Guide or contact our multilingual Helpline. Please note that we may decline your claim if Treatment Guarantee is not obtained.

GETTING IN-PATIENT TREATMENT

In the event that you or any of your dependants need to be hospitalised, please follow the steps below. Our Medical Team will then be able to verify your cover and facilitate smooth admission into care:



Download a Treatment Guarantee Form from our website:
www.allianzcare.com/members



Complete the form and send it to us at least five working days before treatment. You can send it by email, fax or post to the address shown on the form.



We contact the hospital to organise payment of your bill directly, where possible.

Once we receive all information we need, our Medical Team will review the information provided and will issue a Guarantee of Payment to the medical provider, authorising the treatment. If we need more information we may need to contact you, your doctor or your medical provider and this may delay the process.

Our team will provide you with updates at key stages throughout the pre-authorisation process (i.e. when a form is received, when further information is required or when a Guarantee of Payment has been issued).

In case of an emergency:

1. Get the emergency treatment you need and call us if you need any advice or support.
2. If you are hospitalised, either you, your doctor or one of your dependants needs to call our Helpline (**within 48 hours** of the emergency) to inform us of the hospitalisation. At this point we will take all of the required details over the phone.

*Treatment scheduled within 72 hours?
Call us, we will take the details over the
phone.*



GETTING OUT-PATIENT OR DENTAL TREATMENT

If your treatment does not require pre-authorisation, you can simply pay the bill and claim the expenses from us. In this case, simply follow these steps:



Receive your medical treatment and pay the medical provider.



Get an invoice from your medical provider. The invoice must state clearly:

- ✓ Your name
- ✓ Treatment date(s)
- ✓ Medical condition treated and type of treatment
- ✓ Date you first experienced the symptoms
- ✓ Treatment cost



Claim back your eligible costs via our MyHealth app or online portal (www.allianzcare.com/en/myhealth.html).

Simply enter a few key details, attach your invoice(s) and press 'submit'.

Please send us your claim together with all supporting documentation, invoices and receipts.

*Don't forget:
You must submit your claims
within the claiming deadline set
out in your Benefit Guide, available
at [https://my.allianzcare.com/
myhealth/login](https://my.allianzcare.com/myhealth/login)*

*The
Number 1 reason for
claims not being processed
swiftly is incomplete information.
Please ensure that all details
related to your claim are provided
provided with the claim or
invoice.*

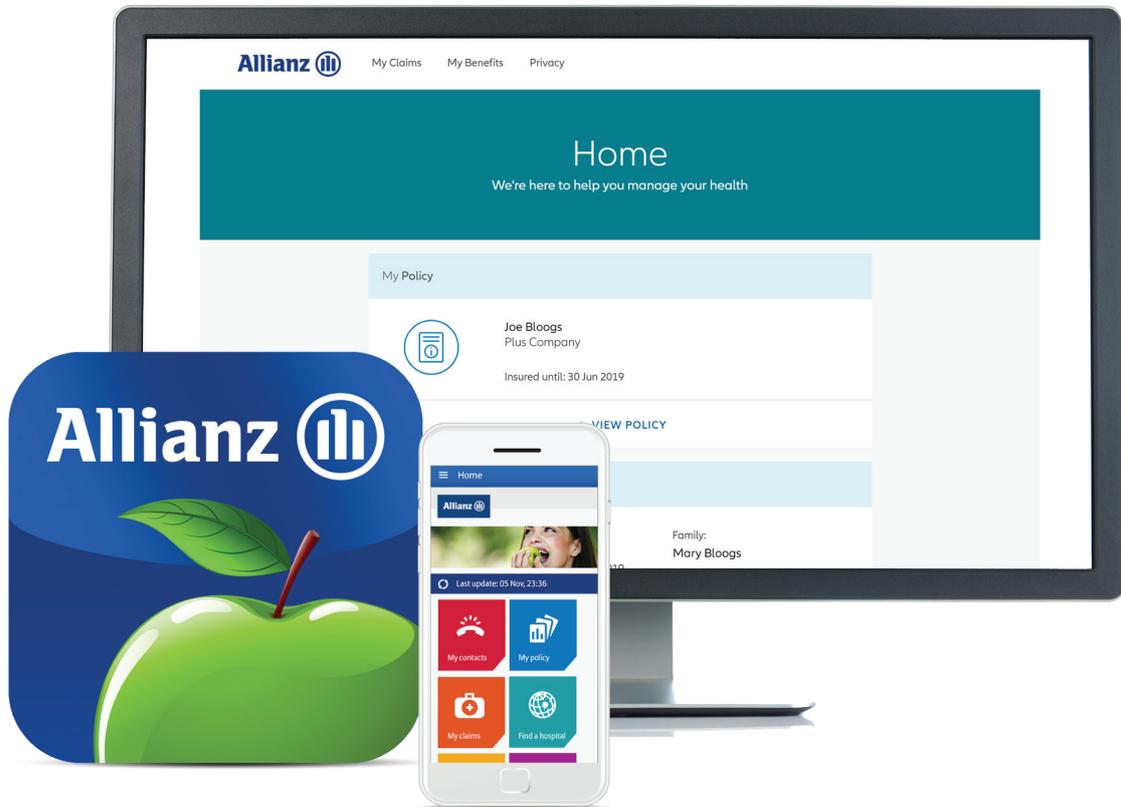
Quick claim processing

Once we have all the information required, we can process and pay a claim within 48 hours. However, we can only do this if you have told us the medical condition treated, so please make sure you include this with your claim. Otherwise, we will need to request the details from you or your doctor.

We will email or write to you to let you know when the claim has been processed.

MYHEALTH DIGITAL SERVICES

Our MyHealth Digital Services gives you easy and convenient access to your cover, no matter where you are or what device you are using.



MyHealth app and online portal features:



MY POLICY:

Access your policy documents and membership card on the go



MY CLAIMS:

Submit your claims in 3 simple steps and view your claims history.



MY CONTACTS:

Access our 24/7 Helpline.

MyHealth app additional features:



Symptom checker:

Get a quick and easy assessment of your symptoms.



Find a hospital:

Locate medical providers nearby and get GPS directions.



Pharmacy Aid:

Look up the local equivalent names of branded drugs



Medical term translator:

Translate names of common ailments into 17 languages



Emergency contact:

Access local emergency numbers worldwide



Medi24:

Talk to a nurse on the phone on a wide range of health topics

Most features are available offline but you must be online to submit a claim and use some health services.

MyHealth online portal additional features:



Update your details online: email, phone number, password, address (if it's the same country as the previous address), marketing preferences etc.



View the remaining balance of each benefit which is in your Table of Benefits.



Pay your premium online and view payments received.



Add or change your credit card details (if you are responsible for paying your own premium, rather than your employer).



EVACUATIONS AND REPATRIATIONS

At the first indication that you need medical evacuation or repatriation, please call our 24 hour Helpline and we will take care of it. Given the urgency, we would advise you to phone if possible. However, you can also contact us by email. If emailing, please write 'Urgent – Evacuation/Repatriation' in the subject line.

Please contact us before talking to any providers, even if they approach you directly, to avoid excessive charges or unnecessary delays in evacuation. In the event that evacuation/repatriation services are not organised by us, we reserve the right to decline the costs.

 + 353 1 630 1301

 medical.services@allianzworldwidecare.com

Please refer to your Table of Benefits to confirm if Evacuations and/or Repatriations are covered under your plan.



Talk to us, we love to help!

If you have any queries please do not hesitate to contact us:

24/7 Helpline for general enquiries and emergency assistance



Telephone:

English: + 353 1 630 1301

German: + 353 1 630 1302

French: + 353 1 630 1303

Spanish: + 353 1 630 1304

Italian: + 353 1 630 1305

Portuguese: + 353 1 645 4040

Toll-free numbers: www.allianzcare.com/toll-free-numbers

If you are not able to access the toll-free numbers from a mobile phone, please dial one of the Helpline numbers listed above

Calls to our Helpline will be recorded and may be monitored for training, quality and regulatory purposes. Please note that only the policyholder (or an appointed representative) or the Group Scheme Manager can make changes to the policy. Security questions will be asked of all callers to verify their identity.



Fax: + 353 1 630 1306



Email: client.services@allianzworldwidecare.com



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www.linkedin.com/company/allianz-care



www.youtube.com/c/allianzcare



www.instagram.com/allianzcare/