

GROUP MEDICAL TAKAFUL POLICY

MEDICAL CLAIM PROCESS

DIRECT BILLING FACILITY WITHIN NETWORK PROVIDERS:

The member can avail direct billing facility from our network providers by presenting their Medical Takaful card to the providers.

Here is a simple step to be followed for the same:

- a) Visit the Healthcare Providers Network included under the network list agreed in your plan.
- b) Show your Medical Takaful Card.
- c) The network provider will then deal with the claims administration team. Receive your treatment.
- d) You must pay any deductible or co-insurance that applies to your plan. This deductible or co-insurance will be shown on your Medical Takaful Card.

If we declined a direct billing claim under the terms and conditions of the plan, you will have to pay the cost of such claim to the Network provider.

REIMBURSEMENT BASIS-OUTSIDE NETWORK & OVERSEAS:

All medical services incurred by an insured, outside the agreed Healthcare Providers Network or any claims incurred (subject to the geographical limits of the Policy) outside the United Arab Emirates are payable as per Policy terms and conditions on re-imbursement basis.

Our claim settlement procedure is prompt and hassle free. It is advisable to consult us for detailed assistance while filing your policy claim.

Here is a simple step by step procedure to be followed when you make a claim for reimbursement:

- See your medical practitioner or specialist in the usual way.
- Pay your bill for the treatment you have received.
- Make sure you get an original itemized invoice and original receipts as you will need to send these to us with your completed claim form.
- Make sure that you complete one claim form for each individual visit or course of treatment.

- <u>Claim Form Part A (Membership Details Section)</u>: It should be completed by the Patient /Principal Member with the requested details. Read the declaration section carefully and remember to sign and date the form.
- <u>Claim Form Part B (Medical Provider's Section)</u>: You must ask your medical practitioner to complete this part and please ensure that the doctor completes each question of this section in full and then signs and stamps it.

Please send the Claim Form to Abu Dhabi National Takaful Co. PSC through your HR Department along with the following required documents to make sure that we can process your claim promptly:

- The fully completed claim form.
- Detailed Medical Report.
- The original itemized bill/invoice.
- The original receipt.
- A copy of the Doctor's prescription.
- A copy of the investigative tests results/reports where relevant (e.g. Blood tests, x-rays, ultrasound, MRI, etc.).
- Discharge summary for Inpatient (Hospitalization Cases).
- Copy of police report (if claim relates to an accident).
- Referral from Doctor for Physiotherapy.
- Any other document pertinent to the claim.

IMPORTANT NOTE:

- Documents in other languages required to be translated into Arabic or English prior to claim submission.
- Please retain copies of receipts and documents enclosed with your claim as the original will not be returned.

Kindly send the above items as soon as possible from the date of treatment. It is recommended that you send these within a maximum period of 30 days from the treatment date inside the United Arab Emirates and with a maximum period of 60 days from the treatment outside the United Arab Emirates. Claims submitted after these days shall not be accepted.

CLAIM PROCESSING:

Your claim will be assessed in full confidentiality and, if Abu Dhabi National Takaful Co. PSD has received all required documents and information, the claim will be processed and the cheque along with a claim report and explanations in the case of declining amounts will be provided to your company's HR department for internal disbursement.

If you need any help or advice, please contact our Medical Claims Department on the following: Telephone: +971 2 410 7700 Fax: +971 2 410 7800