

CLAIM INSTRUCTIONS



Preauthorisation

The following services on the Benefits Schedule require preauthorisation from us:

- Hospital benefits
- Surgery performed while a day-patient in a clinic or in a physician's office
- Rehabilitation treatment

Services not preauthorised by us will be subject to a 20% co-payment.

The co-payment for non-preauthorised services will not apply where you can show the service was medically necessary due to an emergency and you contacted us within 24 hours after admission.

To obtain preauthorisation, you must submit your request at least 5 working days in advance before admission or treatment. Please complete an Advance Request Form to submit your preauthorisation request.

For details on preauthorisation, please refer to **Section 17** of the Policy Terms and Conditions

Letter of Guarantee (LOG)

Hospital and Surgery benefits are subject to preapproval. Please submit an Advance Request Form at least 5 working days before your admission.

If your treatment is covered, we will issue a **Letter of Guarantee (LOG)** to the healthcare practitioner. A LOG guarantees the healthcare practitioner that we will pay your medical expenses (procedure, hospital stay).

You will be responsible for the items not covered by your policy at the time of discharge.

Outpatient Direct Billing

Outpatient Direct Billing is subject to eligibility.

- **Direct billing in Indonesia (AdMedika Network)**

You will receive a **physical insurance card**:

- ✓ **If the code DB is displayed on it**, you can go to a listed healthcare practitioner from AdMedika network, present your card and enjoy the direct billing service (Outpatient cashless facilities).
- ✗ **If there is no DB code** displayed on the physical card, it means that Direct billing is not available under your policy. You can refer to the outpatient pay and claim paragraph below.

- **Direct billing outside Indonesia (APRIL Network)**

Please check your **electronic insurance card**, available on your Easy Claim app:

- ✓ **If the code "DB" is displayed**, you can enjoy direct billing outside Indonesia

In that case, you can enjoy cashless service for eligible expenses in medical facilities that are part of our network. Download the full listing of medical providers at <http://healthbyapril.com/generalnetwork>

Visit a listed healthcare practitioner and present your **electronic insurance card**, available on your Easy Claim app.

If outpatient direct billing is used, we will pay the clinic directly for eligible services rendered.

If you are planning to receive any complex procedures such as outpatient surgery, scans, MRIs, lab tests, please contact us at least 5 working days in advance of your visit to enable us undertake the necessary verification and approval process (so we can provide the provider with the necessary verification and approval) prior to your visit.

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Please note that medical check-ups, dental treatment, medication, services, treatments excluded by the plan are not available for direct billing. Please refer to your Policy Terms and Conditions for the full list of exclusions.

- ✗ If there is **no DB code displayed on your electronic insurance card**, it means that Direct billing is not available under your policy. You can refer to the outpatient pay and claim paragraph below.

Outpatient Pay and Claim

“Pay and claim” means that you can receive treatment, settle the payment at the point of service and then file a claim for reimbursement. For Outpatient Pay and Claim, the following documents/information will be required:

- Name of the person who received treatment.
- Date when service was rendered
- Diagnosis and/or symptoms requiring treatment must appear on your documents
- Detailed invoices (including breakdown of medicine if any) and payment receipts
- For treatment related to physiotherapy or any investigation (MRI, CT scans, blood tests, X-rays...), a Claim Form will be required

Please submit your claims within 90 days of treatment. **We reserve the right to request a Claim Form at any time.**

Inpatient and Surgery Pay and Claim

The procedure to pay and claim for inpatient services is similar to the procedure for outpatient claims. You will be required to complete the Claim Form fully to ensure prompt processing of your claim. You will also need to ensure the following information is provided.

- The attending physician’s contact information
- Name, contact details and location of the hospital
- Diagnosis or reason for the hospitalisation
- Admission date and length of stay
- Breakdown of the expenses incurred
- Proof of payment for the services rendered (e.g. receipt from the hospital)
- Any supporting documents regarding the medical condition, including diagnosis, medical reports, admission letter

Even if you wish to pay and claim for inpatient or surgical expenses, please contact us to verify that your hospitalisation is eligible for coverage and to comply pre-authorisation requirements of the policy.

How to File Claims

Via the Easy Claim app

Easy Claim is the fastest and most convenient way to submit your claims for reimbursement

1. Download the APRIL Easy Claim app on your smartphone
2. Launch the app and log in with the email address and password you provided when you registered on your Online Portal. (If you haven’t activated your account on the Online Portal, please go to <http://healthbyapril.com/portal> and click on “Register as a Member/Policyholder”. Once your account has been activated, you will also be able to log in the Easy Claim app with the same email address and password. If you need a new PIN letter, just let us know by emailing us at contact.indo@april.com)
3. Then, simply follow the instructions on your smartphone screen to send us your medical bills and prescriptions.

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By Email

1. Please email copies of original claims to claims.indo@april.com
2. In the email, please provide the following information in the subject line of the email. This information can be found on your member card.
 - a. First and Last name
 - b. Policy Number
 - c. Member Number
3. Contact information where the member can be reached

If you submit claims by email or via Easy Claim, you must retain a copy of the original documents for a minimum period of 1 year from when you submit the claim.

By Mail

Please mail your claim originals to the address below and retain a copy for your records.

PT. Asuransi Artarindo

Gedung Hermina Tower Lt. 12,
Jl. HBR Motik Blok B-10 Kav. 4
Gunung Sahari Selatan, Kemayoran, Jakarta Pusat 10610

Claim Status

You can easily track the status of your claims once they are submitted.

- **From your Online Portal:** click on "Claims > Show All Claims" (If you haven't activated your Online Portal, please find the instructions above).
- **From your Easy Claim app:** from the Homepage, simply click on "Claims History".

Once your claim has been settled, you will receive an email advising you that your claim has been processed. Your EOB (Explanation of Benefits) will be attached to the email and you will also be able to find it on your Online Portal and Easy Claim. Once received, please read carefully your EOB to understand how your claim has been paid. **Claim reimbursement may be pending if some mandatory documents or information are missing.**

If you do not understand your EOB or have trouble accessing it, please send an email to claims.indo@april.com for additional assistance.

Underwritten by:

PT. Asuransi Artarindo

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