

HOW TO MAKE A CLAIM FOR MEDICAL EVACUATION

NEW PROCEDURES

(Effective from 1st January 2000)

"better health for Fiji"

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FORM 3

HOW TO MAKE A CLAIM FOR MEDICAL EVACUATION NEW PROCEDURES

(Effective from 1st January 2000)

1 Obtain Report from Treating Doctor Recommending Overseas Treatment

- a) In order to make a claim for overseas evacuation for medical treatment, you should first obtain a letter from your treating doctor, certifying the need for treatment overseas and medical evacuation. Such letter should state the diagnosis and the reasons for the recommendation.
- b) A recommendation by your doctor for overseas treatment does not necessarily mean that your policy covers such evacuation. This will depend on the type of policy you hold and level of cover.

2 Notify FijiCare of Illness Immediately

It is a requirement under your policy that you notify any illness or event which <u>may result in a claim</u> for medical evacuation within 31 days of the event. Hence should a patient be suffering from any illness requiring hospitalisation, e.g. heart attack, FijiCare should be notified immediately. Prior notice regarding an imminent claim will avoid unnecessary delays in organising an evacuation should it become necessary.

3 Forward Doctors Report to FijiCare

If you hold insurance through a group scheme, you may forward the report to your broker or liaison officer who will liaise with FijiCare on your behalf, or you may also communicate directly with FijiCare to avoid delays.

4 Fill Out Claim Form for Medical Evacuation

On receipt of your doctor's report, FijiCare will forward a Claim Form for Medical Evacuation to you.

- a) This form should be filled in by yourself and your treating doctor. You are responsible for paying the doctor for his examination and for his part in completing the claim form.
- b) In the event that you cannot get a doctor to complete the form, you can request FijiCare to nominate a doctor and FijiCare will arrange for the form to be completed swiftly.
- FijiCare will not process a claim for evacuation unless the <u>Claim Form for Medical Evacuation</u> is completed satisfactorily.
- d) Before filling out your claim form, we ask you to read your current policy to check the extent of your cover. A copy of the policy should be with your broker or liaison officer, or a copy can be obtained directly from the FijiCare office.
- e) Not all policies have the same conditions and therefore you should check what is provided and what is not provided and check also that your policy is current.
- f) FijiCare will not be able to process your claim further until the Claim Form for Medical Evacuation is received. The date of receipt by FijiCare of the Claim form for Medical Evacuation will be regarded as the date of first notification. Any other forms of notification such as by telephone, initial doctor's letter, communication via a third party e.g. broker, will not be sufficient and FijiCare will not accept liability for any claim unless the Claim form for Medical Evacuation is properly completed, forwarded, received and we will advise our decision accordingly.
- g) If you have any queries regarding the terms of your policy, please contact FijiCare for clarification and assistance.

5 Forward the Completed Claim Form for Medical Evacuation to FijiCare for Processing

FijiCare will contact you in the case of non-emergencies within 7 days regarding the outcome of your claim and you will be informed how to proceed.

6 For Emergencies - must still contact FijiCare prior to Evacuation

- a) In-patients of a hospital in Fiji who are in need of urgent treatment and evacuation so certified by their treating specialist should contact FijiCare directly themselves, or through a relative or the specialist.
- b) Urgent evacuation on a hospital-to-hospital basis can then be arranged provided FijiCare makes or approves the necessary arrangements.

Please note:

Should the patient be evacuated through his/her own arrangements <u>before FijiCare is notified in writing</u>, claims for reimbursement of all medical and evacuation costs will be declined.

7 Obtain Medical Visa

- a) All patients requiring evacuation for medical treatment are required to obtain a medical visa from either India, New Zealand or Australia respectively (FijiCare will arrange for a medical visa, once your claim has been approved by FijiCare).
- b) If you hold a valid visa for other purposes e.g. multiple entry, permanent residency, business etc. <u>a</u> <u>medical visa must still be obtained</u>. Failure to obtain a medical visa may result in embarrassment and delay upon entry to the country of destination, and even withdrawal of your other visa.
- c) If you obtain medical treatment without obtaining a medical visa, FijiCare will not accept liability for costs incurred and not paid for (see When Making Your Own Arrangements below).
- d) If you obtain medical care without obtaining a medical visa, FijiCare reserves the right to notify the High Commission involved, and to decline cover for medical and other costs.

FijiCare needs to comply with the visa regulations of the various High Commissions. It cannot be a party to medical evacuation without the proper medical visas being obtained, and it may for that reason, decline to make re-imbursement or pay for hospital bills. FijiCare is under an obligation to report evacuations not in accord with High Commission requirements. In order to obtain medical visas at short notice in emergency cases, FijiCare has to co-operate with the High Commissions and to comply with their strict requirements. FijiCare has to maintain good relations with the High Commissions and cannot endanger other emergency cases by not complying strictly with High Commission requirements in every case.

8 Which Country for Evacuation?

Your policy covers you for medical treatment <u>in India, Australia or New Zealand only</u>, unless you have obtained prior approval for evacuation to another country but such approval and cover will not extend to airfares or accommodation for that other country.

9 When Making Your Own Arrangements

- a) If, for some reason, you choose to make your own arrangements for medical treatment overseas, you
 must first notify FijiCare of the intended treatment and seek approval in writing from FijiCare
 beforehand.
- b) Failure to seek approval beforehand will result in your claim being declined.
- c) If your treatment and evacuation is approved, you will be required to pay for all costs yourself up front and you will be directly responsible for settling all bills, for later presentation to FijiCare.

2

	d)	In such evacuations, your limit of cover will be lower than that provided in cases where FijiCare makes the arrangements.
		i) If it is shown that the treatment received overseas or an alternative treatment to ameliorate the disability is available in Fiji, the maximum limit of cover would be F\$5,000.00 or the cost of treatment in a Fiji Government facility, whichever is the lower.
		ii) Under the terms of your policy, out-patient treatment and diagnostic tests are excluded and would only be covered if approved by FijiCare beforehand – refer to your policy for details on what is covered and the exclusions.
	e)	On return from overseas, you should notify FijiCare that you wish to make a claim and a Reimbursement of Medical Evacuation Costs Form will be sent or delivered to you. This form is also available from our website. This should be filled in and returned with all the required documentation including all the original receipts, update detailed medical reports and invoices to show the breakdown of medical costs.
	f)	If your claim is approved, you will be reimbursed based on the original receipts only.
	g)	If your claim is approved, allow for some time for re-imbursement of costs whilst Fijicare verifies and processes the claim.
10	When '	Travelling Overseas : Essential to take our separate Travel Policy
	a)	If you intend to travel for reasons other than medical emergency or approved evacuation e.g. on business or holiday, you are strongly advised to take out travel insurance to cover you for emergencies whilst outside of Fiji (see policy wording re Geographical Limits).
	b)	If outside Fiji you discover that you require treatment that is not covered by any other form of insurance e.g. travel, National Health, Medicare etc. you will have to return to Fiji and make your claim from Fiji.
	IMPORTANT POINTS TO NOTE	
1	Please read the above information carefully. If you follow all procedures when making a claim for overseas evacuation, we can assure you that the claim will be processed efficiently and you will be covered for any treatment provided for under the terms of the particular policy you hold. In the event that your claim is declined, you will be given the opportunity to appeal first to FijiCare and if need be, to ask for the dispute to be determined by arbitration. However arbitration will be an optional remedy requiring the consent of both the policy holder and Fijicare.	
2	We red interes	commend to policy-holders not to make their own arrangements. It would be in their better sts to allow FijiCare to make the necessary arrangements to a FijiCare approved facility.
3	Cover should be checked carefully before entering upon a course of medical treatment in order to avoid financial embarrassment, should your claim be declined or re-imbursement delayed.	

OFFICE PROCEDURE FOR APPROVED CLAIM

- On receipt of a request from a policy holder requesting medical evacuation overseas, whether in writing, by telephone, or through a third person e.g. broker, the Claims Assessor should immediately acknowledge the claim by forwarding to the customer:
 - a) A Claim Form for Medical Evacuation (Form 1)
 - b) How to make a claim for medical evacuation (Form 2)

Alternatively, you may print these forms from our website.

- On receipt of a completed Claim form for medical evacuation, the Claims Assessor should forward the following to the medical practitioner appointed for the purpose by FijiCare Insurance Limited, after liaising with the Underwriting Department to ascertain current cover i.e.
 - a) Proof of Cover
 - b) Original letter of recommendation for evacuation from treating doctor (Update & detailed medical report).
 - c) Completed Claim Form for Medical Evacuation.
 - d) Minute details of any other communications including telephone calls and correspondence.
- The medical practitioner appointed for the purpose by FijiCare Insurance Limited is required to assess all the information and then, contact the Claims Assessor regarding any further medical information which may be required.
- Following discussion with management regarding the medical information received from the medical practitioner appointed for the purpose by FijiCare Insurance Limited, the Claims Assessor will update you on progress or advise a decision on your claim.

4