

Before making a claim, read your policy document together with your certificate of insurance and the table of benefits to check you have the relevant cover available to you. If you have any questions concerning your cover, contact Freedom Health Insurance.

Freedom Health Insurance claims helpline

Phone: +44 1202 756 350
Email: intclaims@freedomhealthinsurance.co.uk
Web: www.freedomhealthinsurance.co.uk

1. Medical evacuations or emergency inpatient/day patient pre-authorisation

In a medical emergency, where you require admittance to a hospital or a medical evacuation, you or your representative must contact Freedom Health Insurance immediately.

2. Outpatient treatment including routine and minor dental treatment

Outpatient claims such as doctor visits, dental treatments, pharmacy, therapies and tests are reimbursed to you on a 'pay and claim' basis. This means you must pay the provider for your treatment at the time and claim it back from us afterwards. We do not usually settle outpatient costs directly with the doctor or hospital.

We will reimburse the expenses you have incurred in line with the cover you have under your Freedom worldwide policy and the normal policy terms and conditions.

2.1 Claims reimbursement process for outpatient treatment

If you need any help or advice, you can contact the Freedom Health Insurance claims helpline, but you do not need to contact us for pre-authorisation of these costs.

- Visit your doctor, therapist, specialist or hospital as normal.
- Pay the bill for the treatment you received on the day, keeping copies of all invoices and receipts.
- Complete a claim form – there are separate claim forms for medical and dental claims. You can get a claim form by contacting Freedom Health Insurance, but you can also download a claim form from our website at www.freedomhealthinsurance.co.uk/documents.
- Send your completed claim form along with clear and complete copies of all itemised invoices, receipts and medical reports to the Freedom Health Insurance worldwide claims team at the address on the claim form. You do not need to send the originals but keep them safely for at least six months in case we ask to see them later.

Complete the claim form in full and send all requested documentation to prevent any delays in reimbursement. These are 'self-certification' claim forms so we don't require your medical practitioner to sign the claim forms, but it is important you provide as much medical information as you can so we fully understand the circumstances of your claim.

Reimbursement normally takes three to four weeks from the time your claim has been processed and will be sent to your bank account using the details you provide on the claim form.

3. Inpatient and daypatient treatment

If you need inpatient or daypatient treatment, we will usually be able to set up a direct billing arrangement with the medical practitioner, consultant, hospital or clinic through one of our chosen third party partners. This means as long as the claim is valid, and you have sufficient cover under your policy, you will not need to pay for any treatment unless you have an excess (deductible) or co-payment on your policy.

You must obtain pre-authorisation for any inpatient or daypatient treatment from us. If you do not pre-authorise this treatment, we will only pay 50% (half) of the costs incurred.

3.1 Pre-authorisation process:

As soon as your specialist tells you that you need inpatient or day-patient treatment, you must contact us to start the pre-authorisation process.

- Have your policy number available, as shown on your card, when you contact us.
- We will ask you some questions about your claim including what treatment is being proposed, where and when it will take place, and what the likely cost is (if known).
- We will also ask you for copies of any medical reports or letters you have been given by the specialist in preparation for your treatment.
- We will then arrange for your specialist and the hospital or clinic where you are having the treatment to be contacted so arrangements can be made for direct billing and settlement of the costs.
- We will also confirm authorisation and the arrangements which have been put in place for direct billing for your treatment. You will not need to complete any claim forms.
- You can then proceed with your treatment at the hospital or clinic.