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The preferred choice for healthcare solutions

USER GUIDE

READ CAREFULLY

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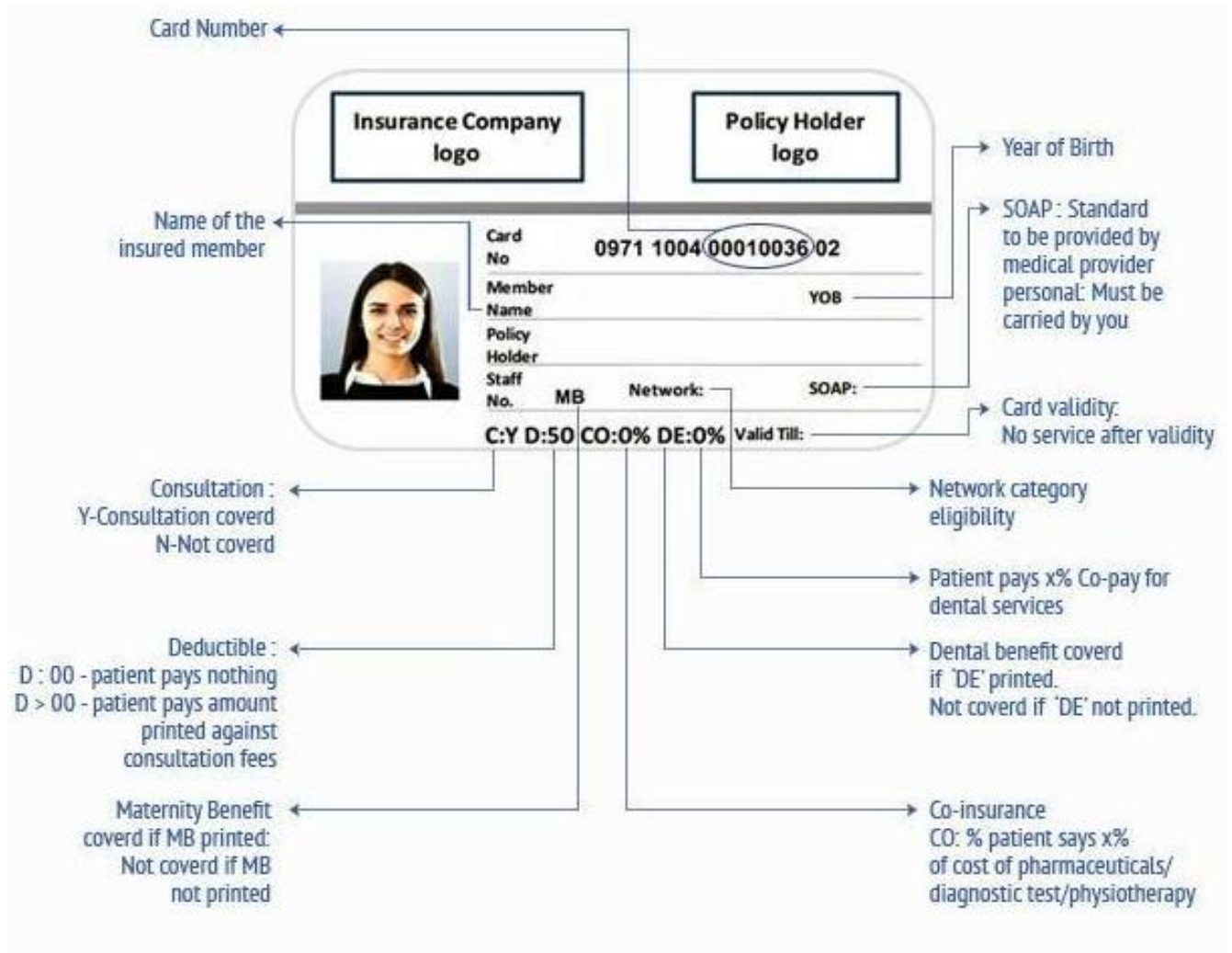
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Medical Call Center Services

As our privileged member, you have access to our 24/7 toll free number all year round. Services offered by our dedicated team of medical professionals include:

- MedNet Network Provider selection of hospitals, clinics and pharmacies you can visit.

- Assistance to find the right doctor according to your need.

- Authorization of treatments that require prior approval requested by the provider.

- Assistance for case management and discharge management during hospitalization.

- Details of what your policy covers.

- Guidance on reimbursement of claims.

- Second opinion assistance.

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How to Read Your MedNet Card

Card Number ←

Insurance Company logo

Policy Holder logo

Name of the insured member ←

Card No → 0971 1004 00010036 02

Member Name → YOB

Policy Holder

Staff No. → MB → Network: → SOAP:

C:Y D:50 CO:0% DE:0% → Valid Till:

→ Year of Birth

→ SOAP : Standard to be provided by medical provider personal. Must be carried by you

→ Card validity. No service after validity

→ Network category eligibility

→ Patient pays x% Co-pay for dental services

→ Dental benefit coverd if 'DE' printed. Not coverd if 'DE' not printed.

→ Co-insurance CO: % patient says x% of cost of pharmaceuticals/ diagnostic test/physiotherapy

Consultation : ← Y-Consultation coverd N-Not coverd

Deductible : ← D : 00 - patient pays nothing D > 00 - patient pays amount printed against consultation fees

Maternity Benefit ← coverd if MB printed. Not coverd if MB not printed

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Out-Patient Care (Within the Network)

Carry your MedNet card at all times along with your identity card.

For Medical Consultation

1. Please refer to the MedNet Network according to your plan.

2. Please carry your photo ID card and your valid MedNet card.

3. Please carry a copy of the personalized SOAP form (in your custody) OR standard SOAP form which is available with the provider.

4. Deductible shown as D on the card is your share of the consultation charges.

For Diagnostic Services and Laboratory Tests

1. Please refer to the MedNet Network according to your plan (if tests are done at another provider).

2. Please carry your photo ID card and your valid MedNet card (if tests are done at another provider).

3. Your SOAP form needs to be completed, sealed and signed by the treating physician.

4. Co-payment on the card is your share for diagnostic tests and procedures, shown as CO on your card.

5. The provider will advise you if your diagnostic procedure requires a prior approval from MedNet. Selective tests need prior approval to be taken by the provider. You will receive an SMS message from MedNet confirming a request for approval has been received. MedNet will also update you on our decision, once complete medical documents are provided by the provider.

For Pharmaceuticals

1. Please refer to the MedNet Network according to your plan.

2. Please carry your photo identification card and your valid MedNet card.

3. Your SOAP form to be completed, sealed and signed by treating physician.

4. Co-payment on the card is your share for pharmacy medications.

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For Physiotherapy

1. Please refer to the MedNet Network according to your plan (if tests are done at another provider).

2. Please carry your photo ID card and your valid MedNet card (if tests are done at another provider).

3. Your SOAP form to be completed sealed and signed by treating physician.

4. The Physiotherapy center will require a prior approval from MedNet for the sessions required. We provide you an update through an SMS message as soon as we have received your request. We also update you on the status of your request once all documents are received from the network hospital or clinic.

5. Co-payment on your card is your share for physiotherapy sessions, shown as CO on your card.

For Dental

1. Please refer to the MedNet Network according to your plan.

2. Please carry your photo identification card and your valid MedNet card.

3. Your SOAP form to be completed sealed and signed by treating dentist.

4. Your coverage for dental is indicated by the letters DE (if printed) on your MedNet card with your percentage contribution (if any).

Out-Patient Care (Outside the Network)

Reimbursement for treatments availed outside of the network may be submitted directly to your insurance company or through our online reimbursement portal.

You may access **http://mednet-uae.com/members/reimbursement.aspx?frm=1**

List of documents to be submitted during reimbursement are:

a) Completed Reimbursement Form from the treating Doctor

b) Itemized receipts of payment for the amount claimed (The invoice must show cost per service)

c) Full and Detailed Medical report / Diagnosis / Discharge Summary from the treating Doctor

d) Copies of Results of Diagnostic Tests

Reimbursement will be based upon policy terms and conditions.

Original documents of the claims will need to be submitted to your insurer at the time of payment settlement.

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In-Patient Care – Emergency Treatment

WITHIN THE NETWORK

1. Hurry to the closest clinic or hospital OR please call MedNet Call Center for quick guidance on the closest provider to your location.

2. Your valid MedNet Card along with proof of identification is mandatory for cashless treatment.

3. As part of your final bill settlement, all excluded treatments, tests and pharmaceuticals including administration costs such as telephone calls made by you will have to be settled by you.

OUTSIDE THE NETWORK

Reimbursement of claims for treatments availed outside of the network may be submitted directly to your insurance company or through our online portal below:

http://mednet-uae.com/members/reimbursement.aspx?frm=1

List of documents to be submitted during reimbursement are:

a) Completed Reimbursement Form from the treating Doctor

e) Itemized receipts of payment for the amount claimed (The invoice must show cost per service)

f) Full and Detailed Medical report / Diagnosis / Discharge Summary from the treating Doctor

g) Copies of Results of Diagnostic Tests

Reimbursement will be based upon policy terms and conditions.

Original documents of the claims will need to be submitted to your insurer at the time of payment settlement.

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In-Patient: Elective Treatment (Non-Emergency)

WITHIN THE NETWORK

1. Please refer to the MedNet Network according to your plan.

2. All non-emergency in-patient treatment will have to be referred by your treating doctor.

3. Your valid MedNet Card along with proof of identification is mandatory for cashless treatment.

4. Provider to obtain pre-authorization from MedNet.

5. You will receive an SMS message from MedNet confirming a request for approval has been received from the provider. MedNet will also update you on our decision, once complete medical documents are received from the provider.

6. The provider will also get in touch with you as soon as approval is received from MedNet.

OUTSIDE THE NETWORK

Reimbursement of claims for treatments availed outside of the network may be submitted directly to your insurance company or through our online portal below:

http://mednet-uae.com/members/reimbursement.aspx?frm=1

List of documents to be submitted during reimbursement are:

a) Completed Reimbursement Form from the treating Doctor

h) Itemized receipts of payment for the amount claimed (The invoice must show cost per service)

i) Full and Detailed Medical report / Diagnosis / Discharge Summary from the treating Doctor

j) Copies of Results of Diagnostic Tests

Reimbursement will be based upon policy terms and conditions.

Original documents of the claims will need to be submitted to your insurer at the time of payment settlement.

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Emergency Assistance

Assist America responds quickly and efficiently when members experience travel health emergencies in another country. The global emergency services offer major advantages over competitor assistance providers, **including no caps or limits, no charge-backs, and no exclusions for pre-existingconditions, adventure sports, or geographic risk.**

Medical Consultation, Evaluation and Referral
The operations center is staffed 24/7 by medically-certified, multilingual personnel who can evaluate and make immediate recommendations for any emergency situation, including referrals to qualified medical providers.

Medical Monitoring
The team of medically trained personnel stays in regular communication with the attending physician and hospital to monitor appropriate levels of care.

Prescription Assistance
If a member forgets or loses a prescription while travelling, AA assist with replacing the medicine.

Hospital Admission Assistance
AA fosters prompt hospital admission by validating the member's health insurance or advancing funds as needed to the hospital (Advances must be re-paid within 45 days)

Emergency Medical Evacuation
If a member becomes ill or injured in an area of the globe where appropriate care is not available, AA will evacuate that individual safely to the nearest facility that meets our rigorous standards.

Compassionate Visit
AA will arrange and pay for a loved one to join any travelling member who is alone and expected to be hospitalized for more than 5 days

Emergency Message Transmission
Assist America will transmit emergency messages reliably between the patient, family, friends and employer.

Return of Mortal Remains
In the unfortunate event that a covered individual passes away while travelling, AA will complete the necessary paperwork, and arrange and pay for the necessary body preparations, shipping container and transport to bring the mortal remains home.

Pre-Trip Information
AA offers comprehensivepre-trip insights on our websitewww.assistamerica.com, (only available in English).

Legal and Interpreter Referrals
AA can make recommendations for trustworthy legal counsel and interpreter services in any country. AA can also arrange bail bonds in jurisdictions where they are legal.

Lost Luggage or Document Assistance
AA works with airlines to recover and deliver lost bags, liaise with transportation companies to replace lost travel tickets and contact necessary agencies to solve issues of lost passports and licenses.

And Much More………..

Emergency Assistance

Care of Minor Children

If any minor children were travelling with an ill or injured parent, AA will arrange and pay for them to return home, with a qualified attendant if necessary, to a family member, or they will arrange childcare locally. Care of children will also be arranged at home who are left unattended due to the parent's unexpected absence.

Medical Repatriation

When the member has been stabilized to the satisfaction of AA's doctor and the attending physician, they will arrange transport back home or to a rehabilitation facility under medical supervision if required.

Every case they face is unique and requires its own set of customized solutions. That is why Assist America has been saving lives since 1990 without preset parameters. They are committed to resolving the emergencies of our members – whatever it takes – and they have the talent and resources to do so.

Contact In USA Call: 877 488 9857
Worldwide (Call Collect): +1 609 275 499
For more information, visit www.assistamerica.com

www.mednet-mea.com

Contact Us

International Phone	:0097143900749
International Fax	:0097143908598
UAE Toll Free No.	:8004882
UAE Toll Free Fax	:8004883
Oman Helpline	:0096824821054
Bahrain Helpline	:0097317564099
Qatar Helpline	:0097430004882
Jordan Helpline	:00962778450450
India Toll Free	:0008009713011
Pakistan Toll Free	:0080090971015
E-mail	:customerservice@mednet-uae.com
Website	: www.mednet-mea.com

www.mednet-mea.com

Glossary of Terms

1. Authorization – A system of pre-approving payment of certain benefits.

2. Case Management – A process of indentifying special healthcare needs, coordinating and monitoring care.

3. Co-Insurance – A method of cost sharing that requires the member to pay a percentage of eligible medical expenses.

4. Consultation – Discussion with a health professional for treatment or for medical opinion.

5. Deductible – A set amount a member must pay on consultation, before the insurer will make any benefit payments.

6. Diagnosis - The identification of the nature of an illness by examination of the symptoms.

7. Discharge Management - A smooth process which helps determine what activities must occur before the patient is ready for discharge.

8. Elective – A procedure is one that is chosen (elected) by the patient or physician that is advantageous to the patient but is not urgent or an emergency.

9. Emergency Treatment –An injury or illnesswith acute symptoms that poses an immediate risk to a person's life or long term health.

10. In-Patient - A patient who is admitted to a hospital or clinic for treatment that requires at least one overnight stay.

11. Network – List of physicians, hospitals, and other medical care professionals that a managed care service has contracted with, to deliver medical services to its members.

12. Out-patient – Treatment that is provided to a patient who is able to return home after care without an overnight stay in a hospital or other inpatient facility.

13. Physiotherapy – Therapy that uses physical agents such as exercise, massage and other modalities.

14. Provider – A hospital, clinic, healthcare professionals who provide service to patients.

15. Reimbursement – Out-of-pocket expenses incurred by a person.

16. Second opinion – A patient privilege of requesting an examination / evaluation of a health condition by a second physician to verify the diagnosis done by a first physician.

17. SOAP form – stands for Subjective, Objective, Assessment Plan
Pers. SOAP – A SOAP form in your custody that is pre-printed with pre-set conditions and exclusions.
Std. SOAP - A SOAP form that is available at the provider's premises.