About this Booklet
The purpose of this booklet is to present an easy-to-understand reference guide to getting the medical service.

This booklet does not replace or override the definite policy or contract signed between the insurance company and your organization.

Please take your time to read the Medical Plan Handbook when in doubt on how to get the service.
Introduction

**Congratulations!** You are now covered under a Group Medical Insurance Plan that gives you access to some of the best medical benefits facilities.

Our goal is to help you reach your **dreams** and **protect** them.

The vehicle you depend on should have coverage you can count on. MetLife Alico offers comprehensive medical coverage (that suits your needs and is designed especially for you)

Some benefits of your plan include:

- Consultation and Hospitalization
- Coverage for acute and chronic medical conditions
- Diagnostic, radiology and laboratories
- Prescription drugs
- And much more ….
BENEFITS OF YOUR MEDICAL PLAN

In-Network Medical Benefits

Access to Unparalleled Network of Medical Providers:

At MetLife, we have contracted with over 2000 medical providers in Egypt to provide you with the access to an unparalleled network of preferred providers.

You can get the list of approved medical providers by visiting our website metlife.eg.

Advantage of Visiting In-Network Medical Providers

- Direct Settlement Facility
- No claim forms to fill, no documents to collect
- Get your medication on the spot without having to pay for it as specified in your medical plan

Out-Patient Benefits/Services

- Clinical Examination
- Investigation services
- Medicine & Treatment
- Follow – Ups
- Minor surgeries and day care

In-Patient Benefits/Services

- Hospitalization Benefits: Daily Benefits (Room & Board)
- Hospital Special Services
- Intensive Care Benefits
- Ambulance Transportation
- Surgical Benefits

Outpatient: A patient who is not hospitalized overnight but who visits a hospital, clinic or associated facility for diagnosis or treatment.

In-Patient: An Insured who is registered as a bed patient in a hospital and incurs a daily room and board.
• Doctor’s In-patient Visits
• Diagnostic Investigations and Laboratory Expense Benefits

BENEFITS OF YOUR MEDICAL PLAN

How to use the Medical Network Provider?

• To use MetLife’s Medical Network all you have to do is to visit a treating physician within MetLife’s local network of providers, presenting your medical card. You will also be required to provide additional identification such as a passport or national ID copy.

• Upon examination, the attending physician will provide you with the medical prescription along with the relevant managed care claim form for any further needed medical service (laboratory tests, medical investigations, radiology….etc.

NOTE

 Managed Care Claim forms are of 5 types:

• WHITE “for the attending physician’s own use”
• YELLOW “for lab. Investigations”
• RED “for Radiology tests”
• BLUE “for the Pharmacy”
• GREEN “other services like physiotherapy”
Important notes:

- If you have not started the cycle by visiting a physician inside MetLife’s local network, extra lab/radio/or medication services will be needed, please acquire the relevant color form from MetLife’s onsite doctor present daily at your premises.
- No colored form will be needed if the extra lab tests will be done at either Al Mokhtabar or Metalab lab chain, extra radio tests at Technoscan, or the extra medications will be purchased from Ezaby or Roshdy pharmacy chains. You will need to carry with you the medical card, copy of personal ID (passport or Egypt national ID), and the physician’s original prescription containing the diagnosis.

Chronic medication:

If you need to dispense chronic medication, please directly to Chronic.Post1@alico.com.eg – and include the below information in your request:

- Member name
- Group and certificate numbers (Grp & Crt numbers on your local card)
- Diagnosis
- Drug name
- Drug concentration
- Times per day (3 tablets per day/3 boxes per month/etc.)
- Mobile number

You will also inform us that you need to dispense the quantity for 3 months in advance. After that you can go to any pharmacy only with the card and ID to dispense the medication. No extra forms are needed. In the event that brand chronic medication is unavailable, the pharmacy can dispense the equivalent in price or cheaper generic alternative (with the same active ingredient and concentration). This avoids you from having to get a new prescription.
BENEFITS OF YOUR MEDICAL PLAN

How to use your medical card inside the pharmacy?

- Direct the attending physician’s prescription along with the blue MetLife Managed Care Claim Form
- *I.E.*: You will need to present the following:
  1. The treating physician’s prescription, clearly stating the dosage needed
  2. MetLife’s blue Managed Care Claim Form
  3. Your medical card
  4. Extra identification, like passport or national ID copy.

How to use your medical card during a laboratory investigation?

- In case the treating physician has requested a laboratorial/radiology investigation, your medical card shall be presented along with the prescription and the yellow Managed Care Claim Form to the laboratory present inside the network.

- *I.E.*: You will need to present the following:
  1. The treating physician’s prescription stating the need for the lab/radio test
  2. MetLife’s Managed Care Claim Form
  3. Your medical card
  4. Extra identification, like passport or national ID copy.
BENEFITS OF YOUR MEDICAL PLAN

Out of Network Medical Benefits

Flexibility to use providers’ outside MetLife medical network

On treatments availed outside the preferred providers’ network, you should submit completed claim form and all original bills within 90 days from the date of occurrence:

Claim Submission

WHAT TO SUBMIT?

Duly filled claim form attaching the following to the form:

Outpatient Treatment:

1. Doctor visit:
   • Physician’s prescription showing the patient’s name and diagnosis.
   • Official receipt showing the attending physicians’ detailed charges along with his stamp and signature.
   • In case of non-availability of official receipt, the doctor’s declaration of amount charged should be stated on the stamped invoice.

2. Medication
   • Copy of physician’s prescription showing the patient’s name and diagnosis.
   • Official and stamped itemized pharmacy bill showing the date of purchase, name of patient, quantity and name of drugs.

3. Laboratorial tests & investigations
   • The respective physicians request to undergo examinations and copies of the results of examinations undertaken.
   • Official receipt showing detailed charges with breakdown for each of the lab test, X-ray, films and other examinations done.

4. Physiotherapy
   • The respective physicians request to undergo a physiotherapy sessions
   • Official receipt showing detailed charges
   • Copy of follow up card
5. Optical
   • Copy of the eye test showing insured name, date of service, and cost of eye test.
   • Official stamped detailed invoice from the optical store showing insured name, date of purchase, shop address.

6. Dental
   • Official stamped detailed invoice, showing insured name, date of service, breakdown of services done with cost of each service.
   • In case of non-availability of official receipt, the doctor’s declaration of amount charged should be stated on the stamped invoice.

7. Maternity (antenatal)
   • Copy of ultrasound sonography or pregnancy test, medical report showing insured name, date of service, date of inception and last menstrual period date.
   • Refer to previous guidance related to services rendered during maternity period (e.g. labs, investigations, drugs).

8. Maternity (delivery)
   • Official stamped detailed hospital invoice, supported by an official stamped hospital receipt showing total amount paid.
   • Official receipt showing attending physician’s or surgeon’s charges along with his stamp and signature.
   • Detailed hospital discharge medical report.
   • All documents must clearly show dates and name of insured.

For Inpatient Treatment
   • Official stamped detailed hospital invoice, supported by an official stamped hospital receipt showing total amount paid.
   • Official receipt showing Attending Physicians’ or Surgeon charges along with his stamp and signature.
   • Detailed hospital discharge report.
   • All claim documents should clearly show dates of service and name of patient.

Important notes:
  - Dental and maternity medications will be dispensed on cash reimbursement basis.
I.E. all these documentations whether for the Attending Physician/ Pharmacy/Laboratory needs to include and clearly specify the following (Insured Member’s name – Date of Service – Diagnosis – Receipt of the total amount paid with proof of payment official and stamped)

WHERE TO SUBMIT

Please send your claim documents to  egyclaims.department@metlife.com cc Waleed.Mahgoub@metlife.com, Fady.Shafik@metlife.com, and Ahmed.Razaz@metlife.com – subject of the email should be “CAC cash claim”

Claim Settlement

Upon receipt of MetLife form and completed claims documents, reimbursement will be done within 10 working days from the date of full-submission of claim documents

MetLife will reimburse the claimant for the incurred expenses

Claims are refunded with a cheque issued to your benefit.
How can you reach us?

- After choosing your language preference, please press number (4). Although this option is not declared in the recorded message, it will give you direct access to an agent aware of CAC’s benefit plan.

- Working hours for the helpline are from 8am till 5pm Sunday to Thursday.

- If in any doubt as to the validity of your claim, indemnity, benefits, or service, always call MetLife helpline in advance of taking treatment quoting the membership number on your card.

- You can also reach our customer service for any queries by sending an email to EgyptClaimsCSdepartmentstaff@metlife.com