

# PATIENT AUTHORISATION FOR DIRECT BILLING 2019



Complete Healthcare International (CHI) is pleased to offer this cashless direct billing service for our valued clients. Please take a moment to read the procedures associated with this service. By signing the "Patient Authorisation For Direct Billing" form, you agree to work with the CHI Insurance Billing team to process your claims.

- **FIRST TIME VISIT, REGISTRATION AND SETTLEMENT** 
  - CHI is unable to process a claim without your insurance and credit card details
  - If you do not have your insurance card at the time of your first clinic visit, you will need to settle full payment and make the claim directly with your insurance provider
  - Once your insurance registration is completed, CHI will assist you in making future claims on your behalf
  - Please allow up to 2 working days for completion and verification of your insurance details
  
- **INSURANCE COVERAGE AND ENTITLEMENTS** 
  - CHI is **NOT** a representative of your insurance provider and has no knowledge of your policy details
  - It is your responsibility to be familiar and updated with your insurance coverage entitlements and exclusions
  - Please be assured that CHI doctors work in the best interests of our patients. We will recommend and not withhold tests and treatments because of insurance policies – you will always have the choice
  - If you have any disputes or queries regarding the amount paid or covered, CHI kindly requests that you contact your insurance provider or agent directly.
  
- **UPDATING INSURANCE AND CREDIT CARD DETAILS** 
  - CHI requires a copy of your current insurance card and a valid credit card to be placed on file at all times.
  - You are responsible for ensuring all personal contact details, insurance and credit cards details are regularly updated with CHI. This needs to be updated annually
  - All information is kept secure and confidential; and accessible only by our Insurance Billing staff
  
- **SPECIAL REQUIREMENTS BY INSURANCE COMPANIES** 
  - A **CLAIM FORM** is required by some insurance providers. Please ensure that all required data is correct and sign these forms during each visit. Your doctor will assist in completing the medical sections of your form
  - A **PRE-AUTHORISATION FORM/ LETTER OF GUARANTEE** is required by some insurance providers to be presented before treatment. Please contact your insurance provider directly **before** your visit to the clinic
  
- **INSURANCE CLAIM INFORMATION** 
  - CHI is legally bound to disclose full patient visit information including diagnoses, investigations and treatments etc to the insurers. Information related to patient visits and invoicing will not be misrepresented for any purposes.
  
- **DIRECT BILLING PROCEDURE** 
  - When processing your invoice, your insurance provider may either:
    - Fully pay the claim
    - Fully reject the claim
    - Partially pay the claim with the balance required to be paid by the patient
  - Once your insurance provider has processed the claim, they will send CHI a brief EXPLANATION OF BENEFITS (EOB) regarding the payment. The EOB states what amount will be reimbursed.
  - Please note that the EOB will not always state the reason why claims are denied or partially paid.
  - For any portion not paid by the insurance provider, you authorise CHI to deduct your credit card for this amount.
  - Again, if you have any disputes or queries regarding the amount paid or covered, CHI kindly requests that you contact your insurance provider or agent directly.
  
- **SETTLEMENT TIMELINE** 
  - All insurance companies are required to make payment within 30 days of receiving your claim from CHI. However as a gesture of goodwill to our patients, CHI will allow the insurance companies a 60-day grace period for any queries or additional information that they may require to process the claim.
  - If no payment is made **within 60 days** of submission, CHI will deduct the **full amount** from your credit card.
  - You will receive the detailed invoice and credit card receipt in the **post** after this deduction has been made (**Patient will only be notified if the amount exceeds \$250. If we do not receive a reply within three to five working days, payment will be deducted from your credit card.**)
  - CHI would then advise you to query or seek reimbursement directly from your insurance company.
  - If you are leaving Singapore, your last visit will need to be settled with CHI and self-claimed with your insurance provider.

For further information or queries regarding our direct billing procedures, please contact our clinic or email the insurance billing department at [insurance@chi-health.com.sg](mailto:insurance@chi-health.com.sg).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_