

Claims and statements



medihelp

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YEARS

Healthcare practitioners usually submit claims for their services directly to Medihelp on your behalf, but some healthcare practitioners require that you should pay your account first and then claim a refund from Medihelp.

To ensure that claims are valid according to the Medical Schemes Act and Medihelp's Rules, please verify that the following details are printed on the account:

1. Your membership number
2. Your name and surname
3. The name, surname, and date of birth of the patient
4. Medihelp Medical Scheme – not "Private" (this has tax implications)
5. The healthcare professional's name and practice number
6. Proof of payment (attach this to the claim)
7. The amount paid
8. The amount charged per item
9. The relevant codes such as ICD-10, NAPPI, and item codes
10. The date on which the service/procedure was rendered/performed

The account may not contain any modifications made by hand, as this will cause the claim to be invalid. Medihelp does not accept accounts in Word or Excel format.

How to submit claims

Member app

Take a photo of the account and proof of payment and submit it in a few easy steps.

Member Zone

Log in to Medihelp's **Member Zone** and use the "Submit a claim" option.

Use the General enquiries function on the **Member Zone** to submit amended claims.

Email

Email new claims to:
enquiries@medihelp.co.za

Submit your dental (**DRC**) claims to:

claims@dentalrisk.com

Submit your optometry (**Opticlear**) claims to:

medihelp@optics.co.za



Scan to open the
Member Zone



Scan to open the
Medihelp app



Claims submission period

4 months for new
claims from the
date of service

60 days* to
resubmit amended
claims

*This includes requests for information or payment queries from the date of the statement on which Medihelp reported the claim.

What is split billing?

Split billing occurs when a healthcare practitioner provides two accounts for the same service, where one account is sent to Medihelp and the other to the patient. In these cases, Medihelp will only process the first account we have received.

It is your responsibility to:

- Confirm that all services rendered appear on the account.
- Ensure that the claim is submitted within the prescribed submission period.
- Ensure that Medihelp has processed the claim within the prescribed submission period.
- Check your claims statements, even if the healthcare practitioner submitted a claim on your behalf.

Claims statements

You can receive claims statements up to three times a month via email, depending on when claims are submitted to Medihelp. You can also compare your statement with the claims you have submitted to ensure the information is the same.





Claims statements contain the following summary:

- Claims received;
- Services that were claimed and the medical service providers involved;
- Any co-payments payable by you to a healthcare practitioner (if applicable);
- The benefit pool from which benefits were paid (for example, core benefits or the savings account);
- Any amounts rejected and the reasons for the rejection; and
- A summary of benefits, how much you have already used, and the benefits that remain available.

Claims statements for visually impaired members

Our visually impaired members can receive their claims statements in audio format. Should you wish to receive your statement in this format or know of a Medihelp member who is visually impaired and would prefer this means of communication, please email enquiries@medihelp.co.za and we will link you to this service.

Remember

- You must always open your claims statements and read the information carefully.
- Make sure all the information is correct.
- If you don't agree with the information, or if you have any questions about the processing of claims, email enquiries@medihelp.co.za.
- In case of any other enquiries, or to submit a new claim or request pre-authorisation for a hospital admission, refer to the handy contact details on the first page of the claims statement.

Claims enquiries

Please email queries about claims already processed to enquiries@medihelp.co.za.

You can also phone our Client Care centre on 086 0100 678, Mondays to Thursdays from 07:00 to 17:00 and Fridays from 08:00 to 16:00.

Dental claims and enquiries (DRC):

- General enquiries: medihelp@dentalrisk.com
- To submit claims: claims@dentalrisk.com
- To authorise dentistry and dental procedures performed in hospital: auth@dentalrisk.com

Optometry claims and enquiries (Opticlear)

Send email to medihelp@optics.co.za to:

Get general benefit information | Submit claims | Submit motivations

medihelp.co.za

Medihelp is an authorised financial services provider (FSP no 15738)

