



CMN
Corporate Medical Network™



Provider Welcome Package



WELCOME AND THANK YOU FOR BEING A PART OF THE CORPORATE MEDICAL NETWORK™

As a Corporate Medical Network™ Provider, Europ Assistance - Global Corporate Solutions (GCS) ITPA Division wants to welcome you. You have chosen to be a part of an esteemed provider network through your partnership with us – a partnership which extends to clients of the GCS - ITPA Division and their members living, working and travelling worldwide.

YOUR WELCOME PACKAGE INCLUDES THE FOLLOWING INFORMATION:

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Please ensure that your partnership with the GCS - ITPA Division is communicated to your frontline staff. This package provides you and your team with all the necessary information you need to facilitate our partnership.

CMN

CORPORATE MEDICAL NETWORK™

The Europ Assistance Group is a global provider of Care Services, a new generation of innovative services that help people in all of life's circumstances in the areas of Health, Home and Family, Automotive and Travel.

Leveraging its 8,000 employees, its 37 subsidiaries and its 423,000 partners, the Europ Assistance Group provides personalised assistance and practical support to over 300 million customers on an occasional or on-going basis.

In order to meet new needs linked to globalisation, increased life expectancy and new lifestyles and markets, the Europ Assistance Group has invented Care Services, a new generation of services that harnesses the power of new technologies in order to provide its customers all over the world with an immediate, effective, concrete response for healthcare, home and travel needs, both every day and in emergencies.

WHO WE ARE

Europ Assistance Group, fully owned by the Generali Group - one of the largest insurance companies in the world, with assets totaling more than € 400 billion, has built a worldwide network for corporate clients named the Corporate Medical Network™. Europ Assistance - Global Corporate Solutions (GCS) ITPA Division, a division of Europ Assistance Group, is the operating entity and third party administrator (TPA) for the Corporate Medical Network™.

The GCS - ITPA Division specializes in international third party administration and health management and assists clients, including insurance companies and government entities, and their insured members to successfully navigate the increasingly complex global healthcare system through access to the best healthcare facilities in the world.

Our medical case management, North American and international proprietary provider networks, customized services, and technology are all seamlessly interwoven to ensure patients receive the best possible medical care and service, no matter where in the world their travel or employment takes them.

OUR VISION

Recognized as the service leader for borderless healthcare management and cost containment.

OUR MISSION

"Managing with Care" - managing global healthcare and insurance programs to the highest levels of client satisfaction, patient satisfaction and cost reduction.

OUR GLOBAL REACH

As a member of the Europ Assistance Group, pioneer of the Assistance concept 50 years ago, we have a presence on five continents, and a network consisting of over 10,000 acute care facilities and over 600,000 physicians across 130 countries, we are your most experienced and trusted partner for unrivalled access to the best medical care in the world.

- Credentialed provider network in over 130 countries
- Over \$800 million in travel for treatment bills processed per year
- 300 million customers covered by Europ Assistance or its partners
- Ground agents located in 208 countries and territories
- 38 customer assistance centres located around the globe
- An average of 11.8 million assistance cases open per year
- 6,300 air ambulance flying hours to repatriate Group customers
- An average of 58.2 million telephone calls handled each year
- Over 8,000 employees worldwide

* Information is based on the entire Europ Assistance Group of Companies.

CONTACT INFORMATION FOR CLIENT SPECIFIC 24/7/365 ASSISTANCE & SERVICE CENTRE TEAMS

Agents are available 24/7/365 at the Assistance and Service Centre to answer questions you may have with regards to benefit verification, pre-authorisation and claims status. Please refer to the member's insurance card for specific contact information; however, general contact information for the GCS - ITPA Division clients you are most likely to see is listed below.



Contact your local agent or call the number on the back of the card presented.



Telephone: 1-905-532-3648
E-mail: medical@generalihhealth.com



Telephone: 1-905-762-5193
E-mail: medical@generalihhealth.com



Telephone: 1-954-370-6404
Email: customerservice@gmmi.com



Telephone: 1-905-669-4920
E-mail: gbgcare@managingwithcare.com



Telephone: 1-905-762-5196
E-mail: gms@cmn-global.com



Telephone: 441-278-9873
Toll Free: 1-800-660-2074



Telephone: 246-467-7100
Toll Free: 877-540-0265

For GCS - ITPA Division clients who do not appear on this list, the relevant contact information will be noted on the back of the member's insurance identification card, or you can call the 24/7/365 Assistance and Service Centre's main line at +1-905-669-4333, prompt #2 to be directed to the appropriate team.

YOUR CLIENT REFERENCE DISPLAY CARD

To make it easier for you and your frontline staff to identify GCS - ITPA Division clients and their members, the contact information above is also on your client reference display card with frame included in this package. Please ensure that your card is displayed and visible in your offices for members and staff to reference.

FREQUENTLY ASKED QUESTIONS

WHAT IS THE DIFFERENCE BETWEEN EUROP ASSISTANCE MEMBERS AND GCS - ITPA DIVISION MEMBERS?

Europ Assistance members are predominantly tourists and in all cases, membership will be formally confirmed by EA or its local service provider. Continue with the normal contacting process with EA patients.

GCS - ITPA Division members are major medical, expatriates or local nationals. Please call the number on the back of the member's ID card.

Both EA members and GCS - ITPA Division members are being directed to your facility in return for your partnership in our network.

HOW DO I CONTACT THE GCS - ITPA DIVISION IF I HAVE QUESTIONS ABOUT AN INSURED MEMBER?

Simply refer to your client reference display card provided to you, or the back of the member's insurance identification card for the appropriate contact information. For any contracting questions or concerns, please do not hesitate to contact your Regional Provider Relations Representative.

WHAT TYPES OF QUESTIONS CAN I CONTACT THE GCS - ITPA DIVISION WITH?

We are here to assist you with any questions you may have when seeing one of our members; this includes, but is not limited to:

- Verifying benefits
- Providing pre-authorisation for services
- Obtaining claim status
- Answering billing questions
- Requesting a Letter of Guarantee (LOG)

HOW CAN I AVOID A DELAY IN RECEIVING MY PAYMENT?

When submitting claims for processing, please ensure the following information is legible on your invoices:

- Member's full name
- Member's complete date of birth (DOB)
- Member's insurance identification number
- Date of service (DOS)
- Description of diagnosis/nature of illness
- Procedures performed
- Billed charges with a clear indication of funds already collected from the member (if applicable)
- Currency in which your claim is submitted
- Billing address where you would like payment sent
- An itemized bill with all hospital claims

WHAT SUPPORTING MEDICAL DOCUMENTATION IS REQUIRED?

Member's cases are monitored to ensure quality of care and benefits so that our healthcare partners are always aware of the relevant details of the member's policy. In order to do so, regular updates, including clinical notes, will be required. The following documentation will also be required in order to validate your claims and ensure accurate processing and prompt payment:

- Consultation notes
- Medical reports
- Discharge summaries

WHERE DO I SUBMIT MY CLAIMS?

To ensure that claims are processed, obtain the correct address from the back of the member's insurance identification card. This ensures that your claims are sent directly to the client specific claims team responsible for processing your claim.

FREQUENTLY ASKED QUESTIONS

WHAT CLAIMS PAYMENT AND REIMBURSEMENT OPTIONS ARE AVAILABLE?

The standard reimbursement method is payment via cheque in USD or your local currency. If you prefer to be reimbursed via wire transfer, please ensure that your banking details are submitted along with your claims and clearly indicate the currency in which you would prefer to be reimbursed.

WHEN DO I REQUIRE PRE-AUTHORISATION?

Certain procedures require pre-authorisation and the member and/or provider will need to contact the 24/7/365 Assistance and Service Centre. Refer to the member's insurance identification card for a list of these services or contact the 24/7/365 Assistance and Service Centre. If pre-authorisation is not obtained, coverage for services may be subject to a denial or a reduction in benefits.

For Europ Assistance members, you will always have a formal confirmation from EA or its local service provider for each step.

HOW LONG DO I HAVE TO SUBMIT A CLAIM?

Most clients require that claims are submitted within 180 days from the date of service. This can be confirmed by contacting the 24/7/365 Assistance and Service Centre.

HOW DOES DIRECT PAYMENT WORK?

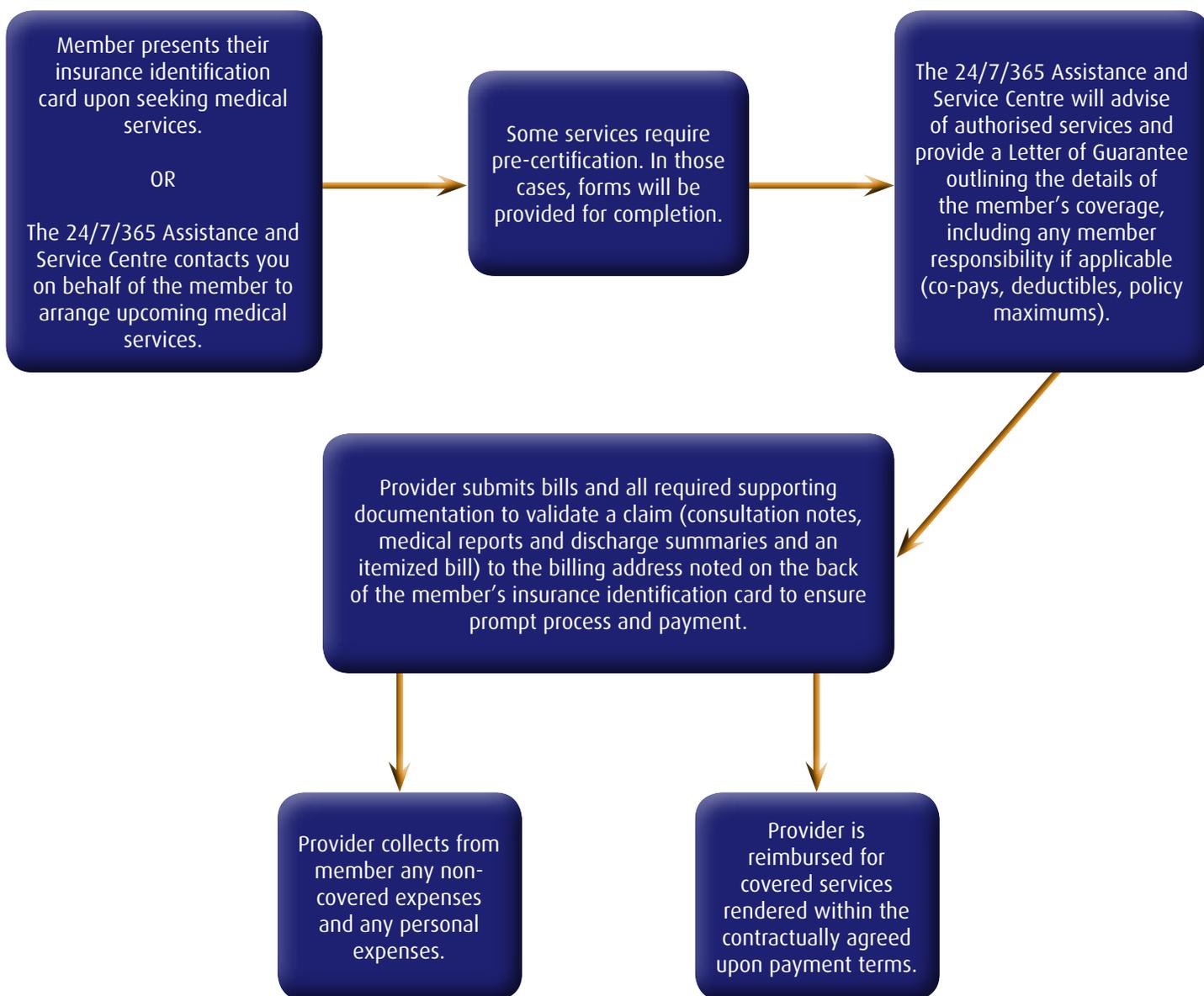
When a member presents their insurance identification card, healthcare partners should contact the 24/7/365 Assistance and Service Centre to obtain all the required benefit information. Upon request, a Letter of Guarantee (LOG) will be submitted. Upon the completion of medical services, healthcare partners are required to submit their claims along with all the necessary supporting documentation to the appropriate billing address to receive prompt payment for covered services rendered within the agreed upon time line.

WILL GCS - ITPA DIVISION CLIENTS ALWAYS PAY THE TOTAL EXPENSES?

If there is any member responsibility such as a co-pay or deductible, healthcare partners will be notified by the 24/7/365 Assistance and Service Centre and on the Letter of Guarantee (LOG). These monies can be collected from the member as per your own internal business practices. Covered services rendered will be paid as per the terms and conditions of the member's policy.

DIRECT SETTLEMENT WORKFLOW

Direct-settlement arrangements allow members to better manage their out-of-pocket expenses and concentrate on their health while benefiting our healthcare partners through streamlined admissions procedures and expedited payment processes.



Welcome to the world of Care Services:
Automotive, Travel, Home and Family, Health.



The GCS - ITPA Division has a fully dedicated, multi-lingual and regional Provider Relations team that is here for you to address any contracting questions or concerns.

For more information or to have a Provider Relations Representative contact you, please email providerrelations@tpa.ea-gcs.com



Global Corporate Solutions - ITPA Division

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