

A GUIDE TO MEMBERSWORLD

- GETTING STARTED
- MAKING CLAIMS
- CHECKING CLAIMS
PROGRESS
- SUBMITTING PRE-
AUTHORISATION
REQUESTS

WHAT CAN YOU DO ON MEMBERSWORLD?



Submit claims and pre-authorization applications



See overview of plan benefits / benefit usage



View and download key plan documents and forms



Download temporary membership cards and order replacement cards

WHO CAN USE MEMBERSWORLD?



Adult policyholders

can set up accounts for themselves, and can manage their dependants' policies from within their own accounts. If they have brokers, they can grant permission for the brokers to view policy and claims details.



Adult dependants

can create their own accounts and grant permission to the policyholder to view and manage their policies, and/or brokers to view their policy and claims details



Members under 16 years old

can call customer support to administer their account activities, and their activity will also show up automatically in the policyholder's account, within Manage Your Plan > Plan Dependants Overview.

HOW TO SET UP AN ACCOUNT ON MEMBERSWORLD



REGISTERING FOR MEMBERSWORLD: OVERVIEW



If you had an account on original MembersWorld

- **Sign in** with your usual login
- Your account information, 12 months activity history, all active claims or pre-authorisations will be available
- You will be prompted to upgrade your login credentials



New users

(or users who've forgotten their login for original MembersWorld)

- **Follow the Registration link** and provide a few details
- You will need to provide some personal / policy information

HAD AN ACCOUNT ON ORIGINAL DETAILS?

STEP 1: USE YOUR EXISTING LOGIN DETAILS



Sign in

If this is your first time on our new site, you can still sign in with your old credentials or register below.

Please enter your username

Problems logging in?

Next

Register for MembersWorld

View FAQs | Live chat

Sign in with your usual login

Can't remember your details?

Register as a new user

Don't worry! You won't lose any account details

You will be **prompted to upgrade** your login credentials

Your details are not recognised?

Register as a new user

Don't worry! You won't lose any account details

Login is changing

Even if you're a member, we need you to update your username and password for security.

Continue

Live chat

NEVER HAD A MEMBERSWORLD ACCOUNT, OR FORGOT YOUR DETAILS?

STEP 1: REGISTER WITH MEMBERSHIP DETAILS



Sign in

[View FAQs](#) [Live chat](#)

If this is your first time on our new site, you can still sign in with your old credentials or register below.

Please enter your username

[Problems logging in?](#)

Next

[Register for MembersWorld](#)

Enter details from your most recent Membership Certificate or letter.

- *Enter dates as DD MM YYYY*
- *Tick to agree to T&Cs & privacy notice*

Details must be exactly as shown on your membership

Register for MembersWorld.

Have an account on the old MembersWorld but **can't remember your details?** Simply register as a new user.

Don't worry! You won't lose any account details

Register

[View FAQs](#)

Your details are on your latest membership certificate. Enter date as DD MM YYYY.

Membership Number
BI- 0000 - 0000 - 0000

Surname

Date of birth
DD MM YYYY

I agree to the Terms and Conditions and Privacy Notice.

Continue

Cancel



STEP 2: CREATE YOUR USERNAME, VALIDATE YOUR EMAIL ADDRESS AND CREATE YOUR PASSWORD

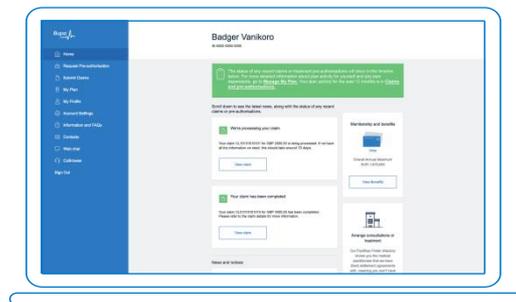
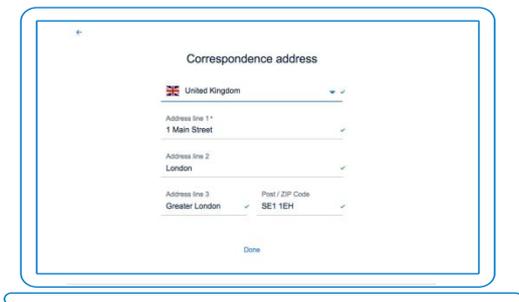
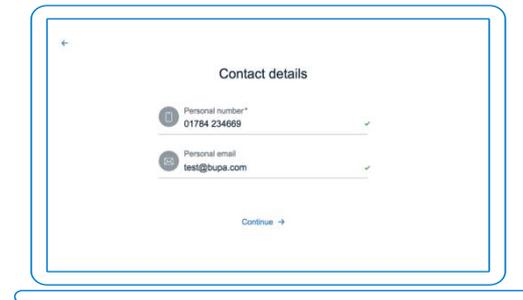
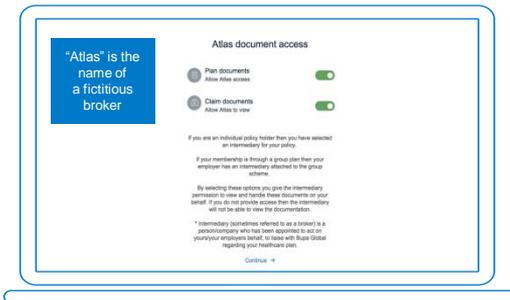
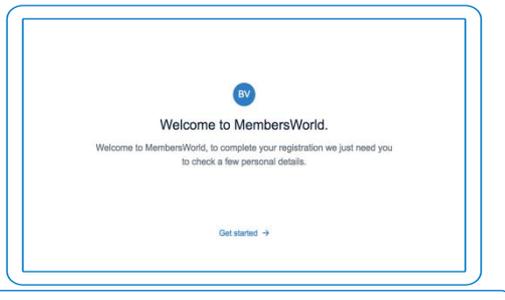
Retrieve the verification code from your email
(Top tip: copy and paste it)

NOTE: Code expires in 5 minutes. Click send new code for another

Enter an **email address** to use as your username
*(This email address can only be used for **one** MembersWorld account)*

Choose a password with 8-30 characters, including one uppercase, one lowercase, one number, one symbol (&, %)

STEP 3: CONFIRM A FEW DETAILS TO COMPLETE YOUR REGISTRATION



ALREADY HAVE A MEMBERSWORLD ACCOUNT?

CAN'T REMEMBER YOUR PASSWORD? NO PROBLEM



View FAQs | Live chat

Sign in

If this is your first time on our new site, you can still sign in with your old credentials or register below.

Please enter your username

Problems logging in?

Next

Register for MembersWorld

Click **Problems logging in?**

Enter the email address used to register for MembersWorld to receive a verification code.

(Top tip: copy and paste it)
Enter a new password.

Reset your password

Please enter the email address that is registered as your username.

Email address

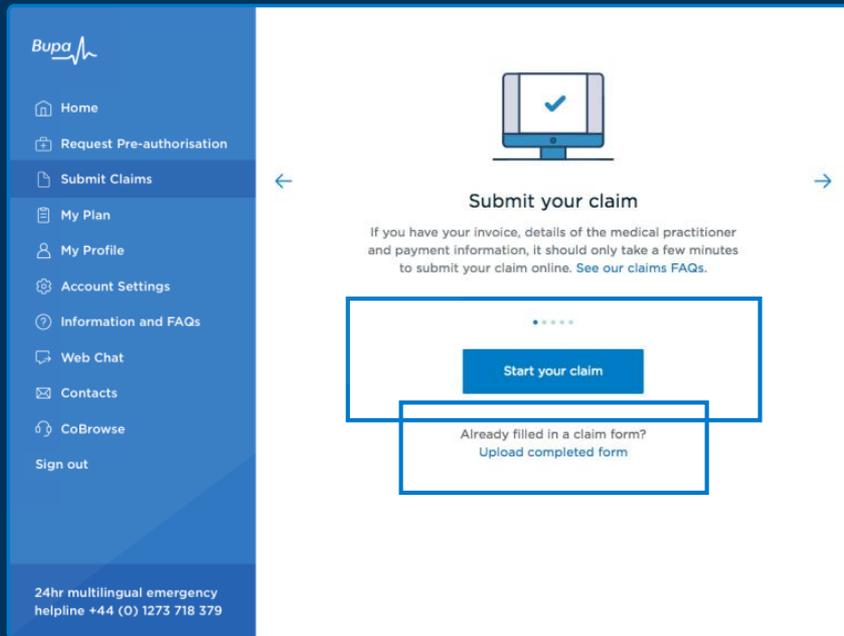
Send verification code

Cancel

SUBMITTING CLAIMS ON MEMBERSWORLD



SUBMITTING CLAIMS: AN OVERVIEW



**Submit
online claim
application**

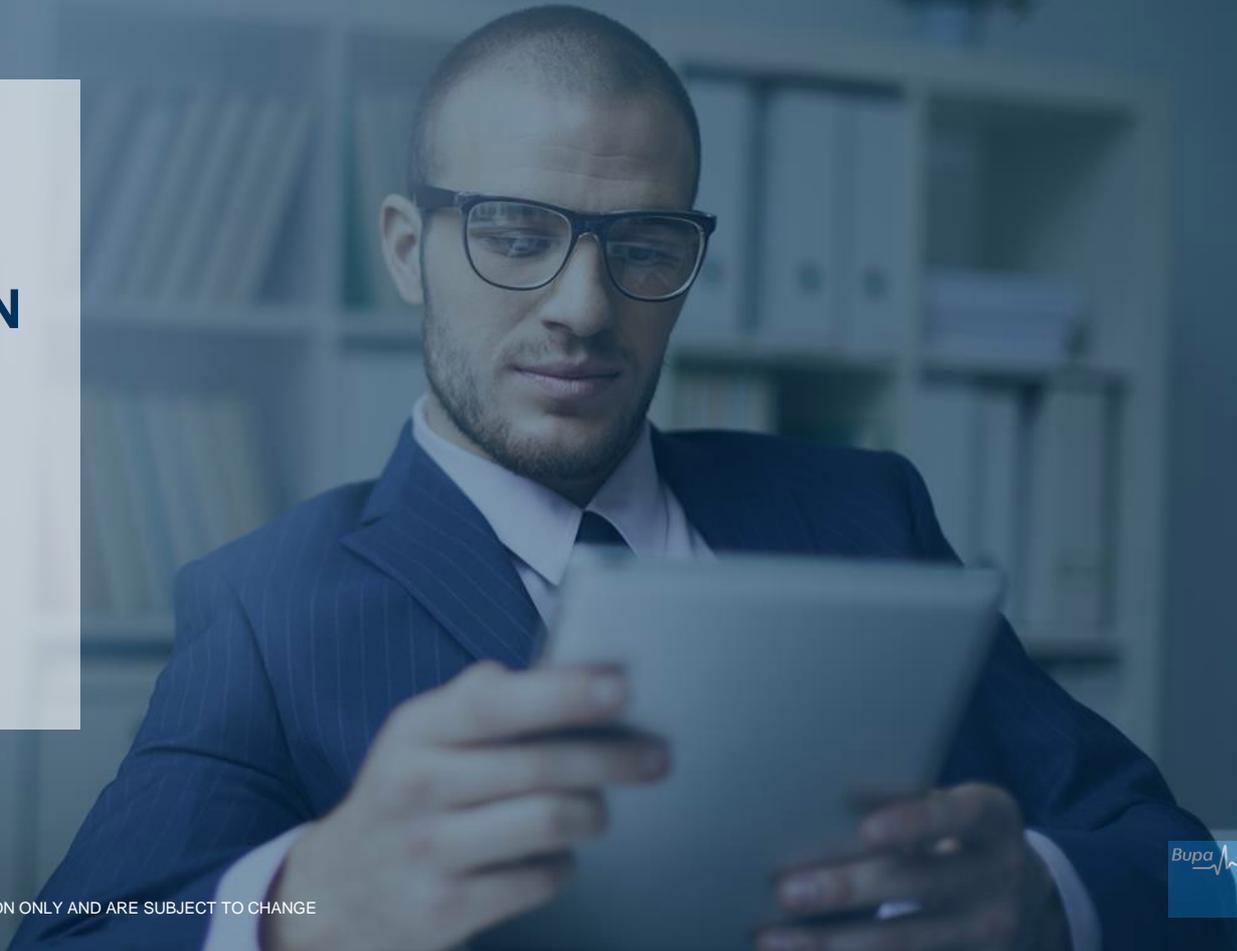
Option 1

**Upload a
completed
claim form**

Option 2

OPTION 1

**SUBMIT AN ONLINE
CLAIM APPLICATION**



SUBMIT ONLINE CLAIM APPLICATION

STEP 1: ENTER YOUR PERSONAL DETAILS

You can complete your claim application from start to finish online if you have the necessary information and the receipts and other documentation to support it. You can now upload these from your mobile phone camera for ease.

Please note the policyholder must submit claim applications for dependants under 16.

Also, only the policyholder can submit claims on behalf of other policy members.

< Back

Submit Claim

Step 1 About the patient

* Indicates required field

Patient name
More information

Select the patient

Preferred mailing address *
More information

Select postal / mailing address

Preferred email address
More information

your-email@address.com

Preferred contact telephone number
More information

+ (99) 1234 5678

What was the reason for the appointment or procedure?*
More information

E.g. back pain, throat infection

0500

Cancel Continue

- Select Patient name
- Select Preferred mailing address
- Enter the reason for the medical appointment or procedure

SUBMIT ONLINE CLAIM APPLICATION

STEP 2: TREATMENT / CONSULTATION DETAILS

1. Add your treatment / appointment date
2. Tick **Yes** if your treatment required admission to a medical facility or hospital. If not, tick **No**

If **Yes**, add your:

- a) hospital admission date
- b) hospital discharge date

3. Choose your **claim type**

The image shows two smartphone screens illustrating the 'Submit Claim' process. The left screen displays the 'Submit Claim' form with the following fields and questions:

- 1** Treatment / consultation date* (Date picker: 23, 04, 2018)
- 2** Did the treatment require admission to a medical facility as an in-patient?* (Radio buttons: Yes, No)
- 3** What was the hospital admission date?* (Date picker: DD, MM, YYYY)
- What was the hospital discharge date, or the last date of the hospital stay that this claim is for? (Date picker: DD, MM, YYYY)

The right screen displays the 'Submit Claim' form with the following fields and questions:

- 1** Treatment / consultation date* (Date picker: 23, 04, 2018)
- 2** Did the treatment require admission to a medical facility as an in-patient?* (Radio buttons: Yes, No)
- 3** What was the hospital admission date?* (Date picker: DD, MM, YYYY)
- What was the hospital discharge date, or the last date of the hospital stay that this claim is for? (Date picker: DD, MM, YYYY)
- Is this claim for medical or dental treatment?* (Radio buttons: Dental, Medical)

SUBMIT ONLINE CLAIM APPLICATION

STEP 2: TREATMENT / CONSULTATION DETAILS

4. Choose or enter the **best description** of your treatment
5. Select **country** where the treatment took place
6. Let us know **who** provided the treatment

The image shows two smartphone screens side-by-side, representing the 'DENTAL' and 'MEDICAL' claim application steps. Between the screens are three decorative boxes containing the numbers 4, 5, and 6, corresponding to the instructions on the left.

DENTAL SCREEN:

- Radio buttons: Dental, Medical
- Question: "Which best describes the dental treatment?" (More information)
- Dropdown menu: "Dental accident or injury" (34/80)
- Question: "In which country did the treatment take place?" (More information)
- Dropdown menu: "France" (26/80)
- Question: "Who provided the treatment or consultation?*" (More information)
- Text input: "Dr Bruno Giles at Cabinet Dentaire" (34/80)
- Buttons: "Cancel", "Continue"

MEDICAL SCREEN:

- Radio buttons: Dental, Medical
- Question: "Please describe the medical procedure or appointment that this claim is for.*" (More information)
- Text input: "Steroid Injection" (17/500)
- Question: "In which country did the treatment take place?" (More information)
- Dropdown menu: "United States of America" (26/80)
- Question: "Who provided the treatment or consultation?*" (More information)
- Text input: "Dr D. McCoy at the General" (26/80)
- Buttons: "Cancel", "Continue"

DENTAL

MEDICAL

SUBMIT ONLINE CLAIM APPLICATION

STEP 3: PAYMENT DETAILS

1. Select the currency of the invoice
2. Input the claim amount
3. Choose **Yes** if we should pay the medical provider directly (i.e. if they haven't yet been paid)
OR
3. Choose **No** if you want us to pay you instead (you have already settled the bill and want to be reimbursed)
4. Select the currency in which you would like to be reimbursed and choose bank account details or add a new account

The image shows two smartphone screens illustrating the 'Your claim application' form for Step 3: Payment details. The left screen shows steps 1, 2, and 3. The right screen shows steps 3 and 4.

Screen 1 (Left):

- 1** What is the currency of the invoice?*
More information
Euro
- 2** What is the amount you are claiming for?*More information
EUR 3,500
- 3** Should we pay the medical provider directly?*More information
Yes (selected) No
- The payment will be sent to the medical practitioner.
Dr Bruno Giles at Cabinet Dentaire
- Buttons: Cancel, Continue

Screen 2 (Right):

- 3** Should we pay the medical practitioner directly?*More information
Yes No (selected)
- 4** Preferred currency for payment*
More information
Great British Pound
- Bank account details for: *
More information
Select account
- Buttons: Cancel, Continue

SUBMIT ONLINE CLAIM APPLICATION

STEP 4: UPLOAD YOUR DOCUMENT OR SAVE YOUR COMPLETED FORM

1. Upload documents

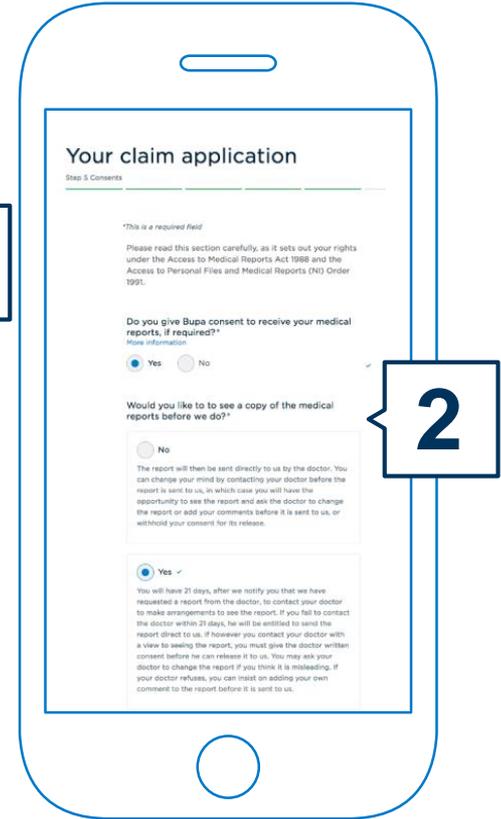
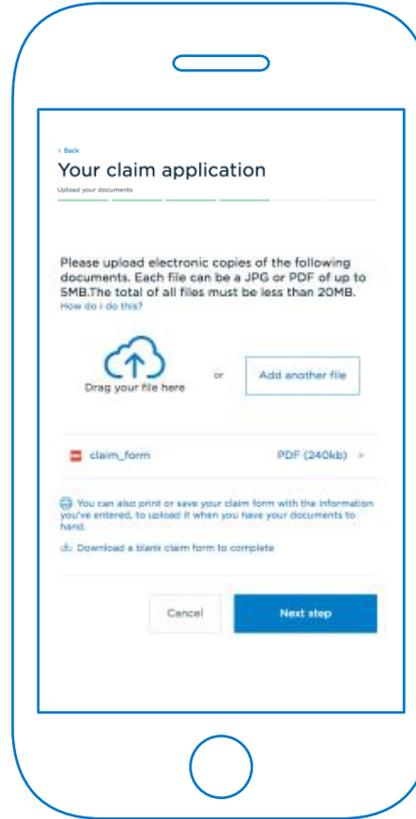
- Upload electric copies of all documents related to your claim, such as receipts and prescriptions
- You can upload saved files, or use photo upload from your camera
- Click **Next Step** to proceed

OR

- save your claim form, with the information you have, to upload later

2. Choose/confirm consents

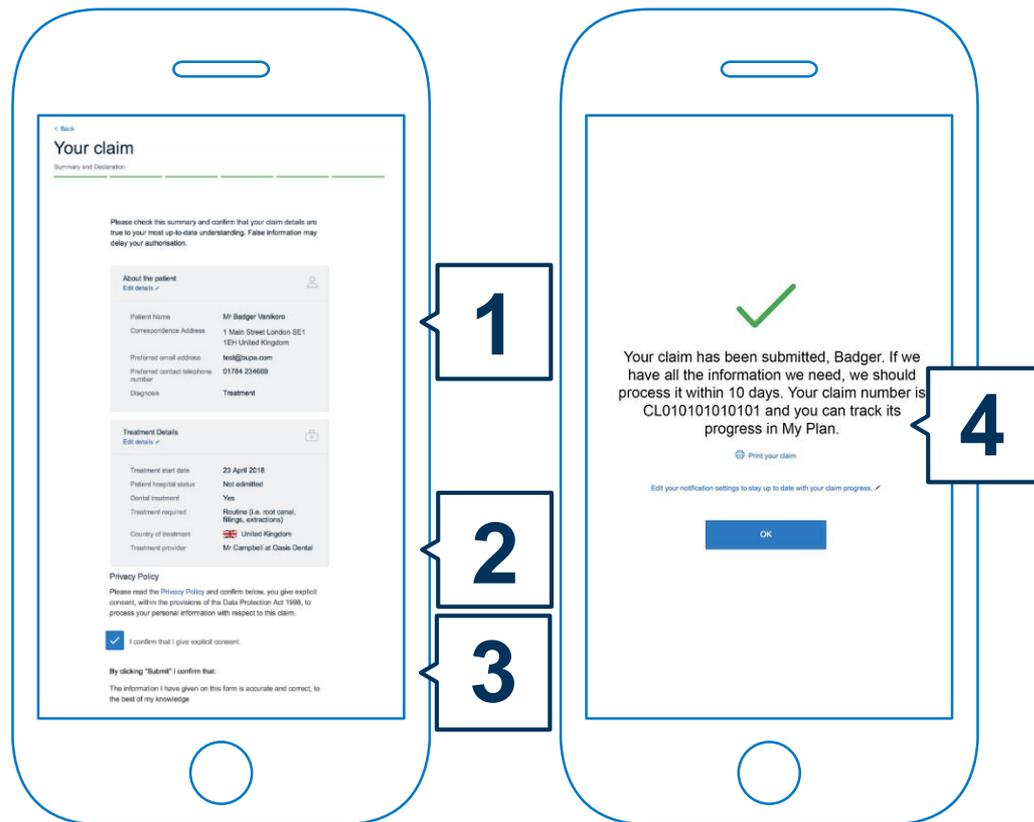
- Tick **Yes** to give us consent to receive your medical reports or we cannot accept the online claim
- Indicate whether you would like to see a copy of the medical reports before Bupa does



SUBMIT ONLINE CLAIM APPLICATION

STEP 5: SUMMARY, DECLARATION AND SUBMISSIONS

1. Review the summary of your claim information
2. Read the Privacy Policy
3. Tick to give your consent
4. Click **Submit** to complete the claim





OPTION 2

**UPLOAD A
COMPLETED
CLAIM FORM**

SUBMIT ONLINE CLAIM APPLICATION

STEP 1: INPUT PERSONAL INFORMATION

- Select the person who received the treatment / consultation
- Select the country in which the treatment / appointment took place
- Select the currency on the invoice
- Input the value of the claim

Upload a claim form

Step 1 Personal Information

* Indicates required field

Who is the patient?*

More information

Talbot Bates

Where was the treatment?*

More information

United Kingdom

What currency is the invoice in?*

More information

British Pound

What's the value of the claim?*

More information

GBP 3,250

Cancel Continue

You can also upload a completed claim application if you have the required information and supporting documents (receipts, prescriptions, etc.) to hand.

You can upload documents using your mobile device camera, for convenience.

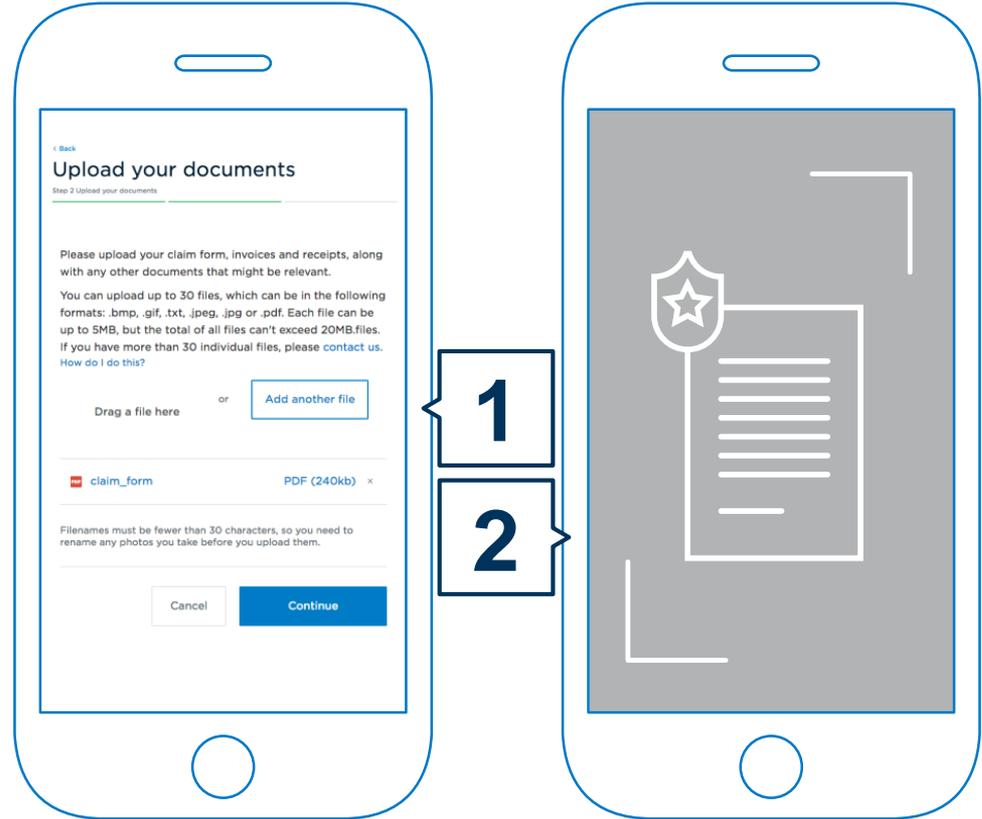
SUBMIT ONLINE CLAIM APPLICATION

STEP 2: UPLOAD YOUR DOCUMENTS

Upload your claim form, receipts, invoices and prescriptions, noting the guidelines provided for file type and size.

EITHER:

1. Search for saved files from your computer or device
2. Take photos of the documents with your mobile device to upload



SUBMIT ONLINE CLAIM APPLICATION

STEP 3: SUMMARY AND SUBMISSION

1. Check your details and confirm they are correct
2. Click **Submit** to proceed

Upload a claim form

Step 3 Summary

Please check your details and confirm they are correct. Incorrect information may cause delays in your claim being reimbursed.

Personal information
Edit details /

Patient	BI-6000-0238-3206
Country of invoice	United Kingdom
Currency of invoice	British Pound
Total amount of claim	GBP 3250

Invoices and receipts
Edit details /

Attachments claim_form.pdf

By clicking Submit, I confirm that the information I have given on this form is accurate and correct to the best of my knowledge.

Cancel Submit

1

2



**REQUESTING
TREATMENT
PRE-AUTHORISATION
USING
MEMBERSWORLD**

REQUEST TREATMENT PRE-AUTHORISATION

STEP 1: ADD PATIENT DETAILS

Through MembersWorld you can easily request pre-authorisation for a medical treatment or consultation to confirm that it is covered by your plan.

Please note that the policyholder must submit pre-authorisation applications for dependants under 16, or they can phone for approval.

Pre-authorisations are valid for up to 31 days. If it expires, you can request another.

Request Pre-authorisation

Step 1 Patient information

*This is a required field

About the patient
More information

Badger Vanikoro

Preferred email address*
More information

Home Work

Home Email*
More information

test@bupa.com

Please provide an email address that we can use to contact you about your account, should we need to. We will update your profile with this address automatically.

In which country is the proposed appointment / treatment?*

More information

United Kingdom

Have you booked the appointment or procedure? If so, please provide the date.
More information

07 05 2018

Will the patient be admitted to a hospital or medical facility?*

More information

Yes No

When is the patient scheduled to be admitted to the hospital?*

More information

DD MM YYYY

Enter some details:

- Select **Patient name**
- Choose **country** where the treatment will take place
- Enter **date** of appointment if you know it
- Tick **Yes** if the patient will be admitted to hospital – you will be asked to enter the date of admission and discharge

REQUEST PRE-AUTHORISATION

STEP 2: ADD TREATMENT DETAILS

You should receive a response by email within 48 hours.

**Need a quicker response?
Please call us.**

Request Pre-authorisation

Step 2 More information

*This is a required field

When did the symptoms first appear?*

More information

DD MM YYYY

Can you describe the symptoms in a bit of detail please?*

More information

E.g. back pain; headache

What medical treatment would you like to have pre-authorised now? *

More information

e.g. Examination, steroid injection

Have you scheduled the treatment or consultation? If so, please tell us who is providing the medical treatment.

More information

Dr Smith / General Hospital

Cancel Continue

We will need a few details about the treatment or consultation:

- Enter **date** when the symptoms started (Top tip: it's OK to estimate)
- Be **descriptive** about the issue or diagnosis
- Briefly describe any known proposed treatment or next steps
- Tell us who the appointment is booked with (the medical provider / facility)

REQUEST PRE-AUTHORISATION

STEP 3: CHECK DETAILS AND SUBMIT

1. Check your details and confirm they are correct
2. Click **Submit** to proceed

< Back

Request Pre-authorisation

Step 3 Summary

Please check the summary to make sure the details are complete and correct.

Personal information
Edit these details ✓

Patient name	Badger Vanikoro
Contact email address	test@bupa.com
Country of treatment	United Kingdom
Treatment start date	07 May 2018
Patient status	In Patient
Hospital admission date	07 May 2018

Pre-authorisation summary
Edit details ✓

Symptom onset	01 May 2018
Symptoms / diagnosis	Pain in left knee
Proposed treatment / consultation	Physiotherapy
Treatment facility	Mr Campbell at the Cromwell

Cancel Submit

HOW TO MANAGE YOUR PLAN, POLICY DETAILS AND PAYMENTS IN MEMBERSWORLD



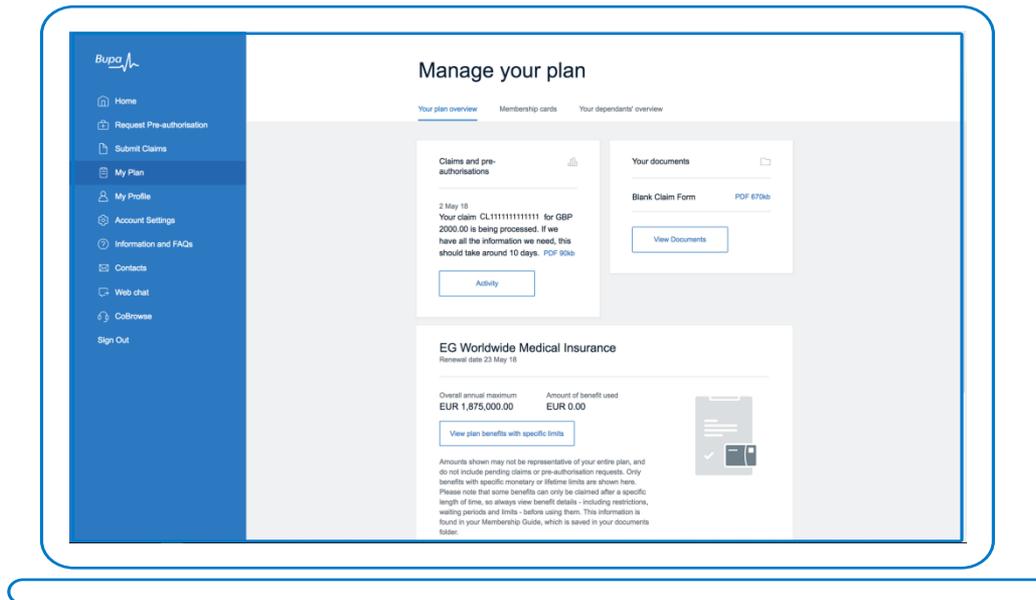
MANAGE YOUR PLAN

TRACK CLAIMS, VIEW DOCUMENTS, ORDER MEMBERSHIP CARDS AND MORE

Visit Manage Your Plan to view and manage your policy activity – and dependants' plans too, if they are under 16, or are over 16 and give you permission.

Here you can:

- View your plan overview
- View and download documents, including blank claims forms
- View your claims history in details
- View pre-authorization history in detail
- Order new membership cards and download temporary replacements
- Check your remaining benefits
- Make payments



MANAGE CONTACT DETAILS,
ACCOUNT SETTINGS AND MORE

YOUR PROFILE AND ACCOUNT SETTINGS

Through MembersWorld you can easily update usernames and password settings.

You can also update contact information for yourself and for any eligible dependants.

