



Know You Can

Your easy guide to file claims and maximize your benefits!



HEALTH REIMBURSEMENT CLAIMS REQUIREMENTS

Global Health Access (GHA)	1	2	3	4	5	6	7
Type of Claim	Reimbursement Claim Form (duly accomplished)	Official Receipts	Statement of Account (Itemized and Summarized)	Discharge Summary	Police Report (Motor Vehicular Accident)	Incident Report (Self-Accident)	Medical Records
Outpatient/Inpatient - Medical Claims	✓	✓	✓	✗	✗	✗	a. Doctor's request with diagnosis b. Drug prescription (for outpatient, pre or post hospitalization benefit) c. Clinical abstract and discharge summary (applicable to Inpatient Medical Claim)
Outpatient/Inpatient - Surgery Claims	✓	✓	✓	✗	✗	✗	a. Clinical abstract with diagnosis for outpatient surgeries b. Discharge summary (applicable only for Inpatient Surgery) c. Operative record/Operative technique d. Drug prescription (for outpatient, pre or post hospitalization benefit)
Outpatient - Emergency Claims	✓	✓	✓	✓	✓	✓	Must be filed within 24 hours to be covered.
Other Benefits: (Chemotherapy/Radiotherapy/Physical/Occupational/Speech Therapy/Chiropractic)	✓	✓	✓	✗	✗	✗	a. Medical certificate b. Treatment plan
Dental Care	✓	✓	✓	✗	✗	✗	a. Medical certificate
Routine Optical Care	✓	✓	✓	✗	✗	✗	Medical certificate with diagnosis and prescription
Vitamins and Supplements	✓	✓	✓	✗	✗	✗	Prescription (if under alternative benefit)
Health Screening	✓	✓	✓	✗	✗	✗	Not applicable

Health Care Access (HCA)

IMPORTANT: Reimbursements are only allowed for emergency availments at non-accredited facilities or if there are no available doctors with the required specialization in the area and within the accredited list of our health partner.

Type of Claim	Reimbursement Claim Form (duly accomplished)	Official Receipts	Statement of Account (Itemized and Summarized)	Discharge Summary	Police Report (Motor Vehicular Accident)	Incident Report (Self-Accident)	Medical Records
Outpatient - Emergency Claims	✓	✓	✓	✓	✓	✓	Must be filed within 24 hours to be covered.
Routine Optical Care	✓	✓	✓	✗	✗	✗	Medical certificate with diagnosis and prescription

Three easy steps to file a claim:

1. Visit the link <https://www.cognitofrms.com/axaph7/axaphclaimssubmissions/> to access the AXA PH Claims Submission online form or access the form via our website: www.axa.com.ph > Support > Claims.
2. Provide the requested information in the form and upload the supporting claim documents.
3. Receive confirmation on your successful submission.

For concerns on your filed claims, you may directly email oneclaims@axa.com.ph and use the subject line: Health Claim / Policy Number / Member / <CL number>.

Important reminders:

1. Submission should be within 90 days from date of availment or date of receipt.
2. Other relevant documents may be required on a case-by-case basis.
3. Next day payout for GCash and Metrobank accounts. For other bank accounts, crediting will be within 3-5 working days.
4. GCash payout is up to ₱10,000 only.
5. Turnaround time is 10 working days from submission of complete document requirements.
6. Proof of Account (POA) is not mandatory but is encouraged to be submitted along with the claim form.

GHA/HCA PRE-AUTHORIZATION REQUIREMENTS

	1. Policy number 2. Names of who will avail (indicate all names especially if it's a family plan) 3. Preferred medical facility 4. Chosen executive check-up package (for Global Health Access plans) 5. Three (3) preferred dates Issuance of LOA (Letter of Authorization): • Submit health screening requests at least 10 days prior the preferred date to allow time for Maxicare to coordinate with the facility on the date availability. • Once date is confirmed, the client and the distributor will get a confirmation email from Maxicare but the LOA will only be issued 3 days prior the scheduled appointment/confirmed date. • If date is no longer available, Maxicare to coordinate with the facility on the availability of the date.	TURNAROUND TIME
Health Screening Benefit		10 working days
Outpatient Consultation	1. Consultation request 2. Reason for consult 3. Onset of symptoms 4. Preferred accredited facility 5. Preferred accredited doctor 6. Preferred date of appointment	3 working days
Outpatient Diagnostics and Surgery	1. Doctor's request with diagnosis 2. Presenting symptoms 3. Onset of symptoms 4. Preferred accredited facility 5. Preferred date of appointment	3 working days
Outpatient Treatment (Chemotherapy, Radiotherapy, Physical Therapy)	1. Treatment plan/schedule of treatment 2. Doctor's request with diagnosis	3 working days
Inpatient Procedure	1. Admitting order with treatment plan 2. Estimated cost of confinement for international availment 3. History and onset of symptoms Note: No requirements for Emergency Outpatient and Emergency leading to confinement.	Inpatient Letter of Guarantee admission: 2 working days Inpatient Letter of Guarantee discharge: 4 hours upon receipt of final statement of account Note: Inpatient preauthorization turnaround time for emergency and admission cases will start once relevant documents from the medical facility are received.

Easier Health Claims Experience when you use the Emma by AXA PH Mobile App

You can file for your health reimbursement claims and Letter of Guarantee for laboratory and consultation in a few clicks.





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FAQs on Health Claims Submission and Requirements



1. What is the Global Health Access/Health Care Access One-Pager Health Claims Requirements for?

This is a quick reference guide that shows the documents needed for each type of claim and outlines the steps to follow. This guide is designed to make the claims process easier for your Global Health Access or Health Care Access policy.

2. How to use the one-pager?

Use it as a handy guide to check required documents, follow the correct submission process, and ensure everything is complete and accurate. It simplifies your claims process and helps you access your benefits smoothly.

3. What happens if I miss the 90-day submission window?

Reimbursements must be filed within 90 days from the date of receipt. Otherwise, following the provisions of the contract, these will be declined.

4. Can someone else submit on my behalf?

Yes, you may contact your assigned financial partner/any authorized representative to submit your claims on your behalf, especially when you're unable to.

5. How do I check the progress of my claim?

- You can get live updates if you've submitted your claim/s through the Emma by AXA PH app.
- For claims submitted via the AXA PH Online Claims Submissions, you may check the status of the claim using the claim reference number provided.
- For claims submitted outside of the above channels, please send your inquiry to any of the contact information below:
 - Contact Center Landline: (+632) 8 581-5292
 - Contact Center Mobile: (+63) 917 170-9292 (Globe) or (+63) 919 056-5292 (Smart)

6. What is the difference between a medical claim and a surgery claim?

A **Medical Claim** is for **treatment without surgery** such as doctor consultations, lab tests, medications, or hospital stays for conditions like pneumonia or dengue. A **Surgery Claim** is for any **treatment involving a surgical procedure**, like an appendectomy, C-section, or tumor removal.

7. Can I submit the other requirements while waiting for the clinical abstract?

It is best to complete all required documents before submission. This avoids delays and ensures your claim is fully assessed without pending requirements.

8. Do I need a clinical abstract for outpatient medical claims?

No. Clinical abstracts are only required for outpatient surgery claims.

9. Do I need to submit outpatient emergency claims within 24 hours?

Yes. For outpatient emergency accident treatment, claims must be filed within 24 hours to be covered under the policy, as stated in the provisions.

10. How do I contact AXA claims?

For inquiries, follow-ups, or claims submission, you may contact the following channels:

- Contact Center Landline: (+632) 8 581-5292
- Contact Center Mobile: (+63) 917 170-9292 (Globe) or (+63) 919 056-5292 (Smart)
- Email: customer.service@axa.com.ph or oneclaims@axa.com.ph
- AXA service centers across the country.
Visit <https://www.axa.com.ph/support/information/find-a-branch> to view the list of AXA service centers.
Business hours- 8:30 AM - 5:30 PM, Monday – Friday (except holidays).
- AXA Emma app for:
 - Health Claims Reimbursement (e.g., OTC Vitamins, Health Screening, etc.)
 - Letter of Guarantee (Outpatient Laboratory and Consultation)
 - Fulfillment Tracker (Track the status of health claims submitted in Emma)
 - Other health features: Teleconsultation and Medical Network & AXA Branches

Note: Mobile lines are exclusive for calls and not yet available for SMS. Telco Charges will apply for cross-network calls.

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