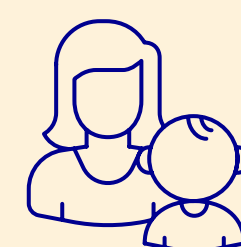


Case Maternity Management

With everything your client needs to think about when they're pregnant, wondering what their health insurance covers shouldn't be one of them. That's where our Maternity Case Managers come in.

When a customer contacts us to make a maternity claim, we'll put them in touch with their own Maternity Case Manager* who'll support them with their claims throughout their pregnancy, and offer a helping hand with any queries or questions they may have about their cover or benefit allowances. And, when the time comes, they'll direct the customer through the simple steps to add their baby to their policy where possible.



Supporting customers and their claims throughout pregnancy



Dedicated team providing personalised service, putting the customer first



Maternity Case Managers will manage all aspects of the customer's claim – helping to alleviate as much stress as possible

*Maternity Case Management is provided for customers with global or Islands health plans, and who have chosen a level of cover which includes routine maternity benefits. Customers must also be past their pregnancy claim moratorium.



How it works

When a customer contacts us to make a maternity claim, we'll ask them if they'd like to be put in touch with a Maternity Case Manager from our Case Management team. Within 48 hours, we'll assign a Maternity Case Manager who can work with the customer and their chosen hospital, midwife, and/or doctor to manage their claim and be a dedicated point of contact throughout their pregnancy.

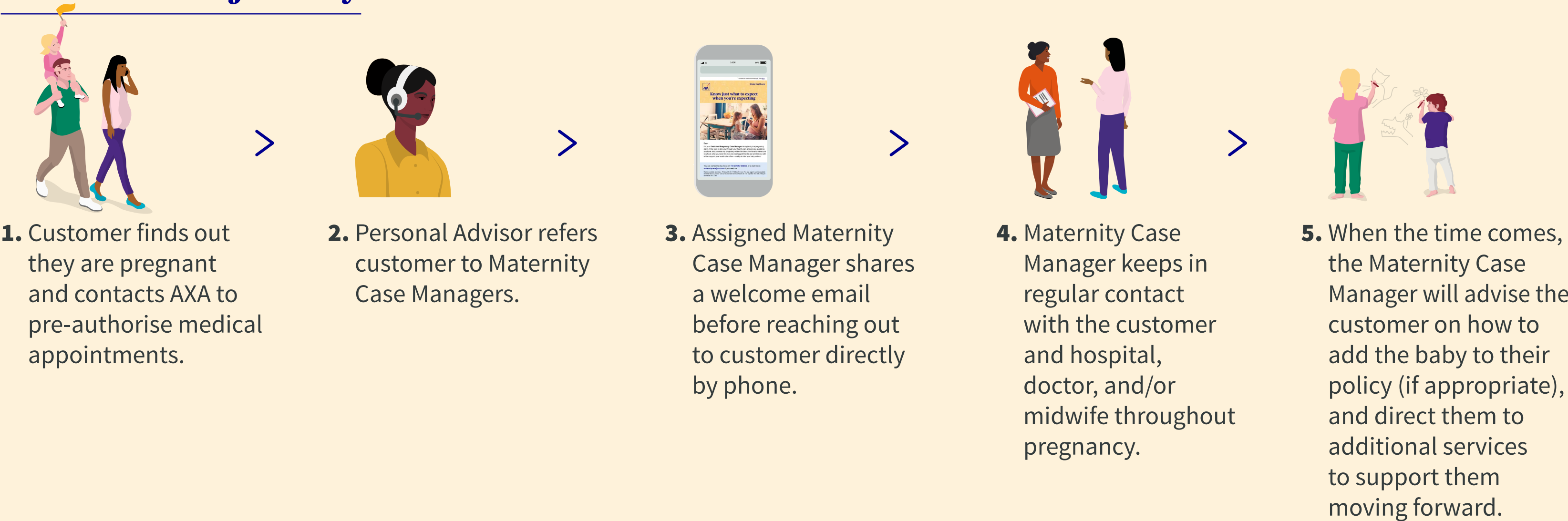
When the customer engages with the service, their Maternity Case Manager will share a welcome email with the customer before introducing themselves over the phone. From there, they'll continue to keep in touch with the customer throughout the pregnancy to make sure everything's going smoothly.

Our Maternity Case Managers can help to obtain medical reports, answer invoice queries, and resolve claims. They'll even sort a pre-approval for the birth before the customer's due date, taking away any claims administration and stress from the customer.

The Case Management team continue to engage with the customer for up to six weeks after the birth for additional post-natal care, and will let the customer know about the other services they can access for extra support for them and their baby moving forward.

This service is provided in English through a dedicated phone line (open 9am-5pm (UK time) Monday to Friday) and email inbox. Our Personal Advisors are still available 24/7 to handle any urgent queries, requests or approvals.

The customer journey



Benefits for individuals

- ✔ Maternity Case Management is provided via a dedicated phone line or email inbox. So, if the customer needs to get in touch, they have direct access to their Maternity Case Manager.
- ✔ The Maternity Case Managers offer personalised support. They'll get to know both the customer and their case, so the customer will feel reassured there's a trusted professional supporting them and their claim throughout their pregnancy, and beyond.
- ✔ The Maternity Case Manager will work behind the scenes to manage pre-approvals for treatment, file claims and handle invoices – taking away a lot of the claims administration for the customer. This means they've got more time to focus on their pregnancy.
- ✔ Providing extra support, at no extra cost.

Benefits for businesses

- ✔ Employers can feel reassured there's extra care for their employee as they grow their family – whether they're at home, or on international assignment.



Who's eligible?

Maternity Case Management is a service provided by our in-house teams for customers with global or Islands health plans, and who have chosen a level of cover which includes routine maternity benefits. Customers must also be past their pregnancy claim moratorium.

Useful links

- For you to share with your clients
 - [Guides for pregnancy and giving birth around the world](#)
 - [About our pregnancy and maternity benefits](#)
 - [Pregnancy claims guide](#)

