



Estimated Costs	
Please provide a breakdown amount in point a-f if you do not provide package prices, or please advise the package quote in point g.	
a) Surgeon's /Doctor' s Fees:	d) Radiology Fees:
b) Anaesthetist's Fees:	e) Hospital Theatre Fees:
c) Laboratory Fees:	f) Medicines/consumables:
	g) Estimated package price if applicable:

*Please note:* If the patient is on a Moratorium Policy, we may need to obtain further details of previous medical history, before being able to approve costs for this medical treatment. Your assistance in providing this form, fully completed, at least 48 hours prior to discharge, is much appreciated.

#### Out-patient Treatment for agreed Direct Billing Hospitals

If an InterGlobal patient presents a gold membership card for out-patient treatment and you are a hospital on the InterGlobal Direct Billing Network, the insured will be entitled to receive out-patient treatment under the agreed direct billing terms. Please follow the agreed direct billing procedures that apply as no pre-approval is required for an out-patient procedure. If an InterGlobal client shows a non gold membership card, then they will have to pay and claim for their out-patient treatment.

**Please fax this form back to us:**

**If you are in Kenya, Uganda, Tanzania or Rwanda:**

**+254 20 271 5328**

**If you are anywhere else in the world:**

**+64 9 356 1700**

Should you wish to contact the International Helpline please use the details below:

If you are calling from Kenya, Uganda, Tanzania or Rwanda:  
E-mail:

+254 20 271 7374 / 5 / 6  
customerservice@aar.co.ke

If you are calling from the UK:  
If you are calling from the United Arab Emirates:  
If you are calling from any other country:  
Email:

0800 0327 921  
800 0640 1957  
+64 9 356 2276  
help@faops.com