• Visit Bupa Arabia website http://www.bupa.com.sa and a username and password will be provided to the group secretary by membership team as shown below or login if you’ve already registered.
Agenda:

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Introduction: We’ve established the online services for all our customers to ensure all their information; regarding policy and network list is safely secured and easily accessible at any time of the day. As a Group Secretary, you can reach us easily online and enjoy a variety of different services. Services is adding/deleting employees or changing class of the employees within one platform.

All our services are made to save you effort and time.

How to access the online services?

- Visit Bupa Arabia website [http://www.bupa.com.sa](http://www.bupa.com.sa) and a username and password will be provided to the group secretary by membership team as shown below or login if you’ve already registered.

  You’ll find the login and Registration pages on the homepage menu.
Here are the steps to enter the services before selecting any function:

1. To log in to the Online services, choose 'Group Security' from the drop down list.
2. Then enter your username and password which will be provided to you by the membership team upon RM request:
After you log in successfully, you will find the below main screen for the Online Services. Here you’ll find a range of services you can benefit from.

To log in to the Online Services please follow the below steps:
1. Choose from the drop down list what category are you.
2. Type your log in ID.
3. Type your password.
**Online Services “My Services”**

- **Addition of a new employee and dependent:** This function will allow you to add an employee to the insurance policy.
- **Addition of a dependent:** This function will allow you to add a new dependent to the insurance policy for an insured employee to add Spouse/Child and others.
- **Deletion:** This function will allow you to delete the Employee or the dependent from the insurance policy.
- **Addition of a Dependent:** This function will allow you to add a new dependent to the insurance policy for an insured employee to add Spouse/Child and others.
- **Change Class:** This function will allow you to upgrade or downgrade the class.
- **Change Branch:** This function will allow changing the branch of the member in case of update. *or having more than one branch.
- **Replace card data correction:** This function will allow you to order a replacement for the membership card in case the card got lost or damaged or needs to be modified + Data Correction on the card.
- **Track info:** This function will allow you to track any submitted request through a unique Reference No.
- **Required supporting document list:** The necessary documents needed for any transactions of the service.

A variety of functions to check the eligibility of the member and other medical services within the coverage.
Add Employee:

(1) Click this button to add an employee. It will reflect mandatory fields that are related to the main employee such as; to fill in order.

Addition Requirements:

1. Addition of Saudi Beneficiaries and their Dependents:
   A. Fill up the Electronic request form.
   B. Attach copy of the Saudi ID.
   C. Attach copy of the Saudi Family ID (Only if enrolling Dependents)

2. Addition of Non-Saudi Beneficiaries and their dependents:
   A. Fill up the Electronic request form
   B. Attach copy of the Employee ID/Iqama and the Dependents.

3. *Addition of outside KSA Beneficiaries:
   A. Fill up the Electronic request form.
   B. Attach copy of employee/Dependents Passport/s.
   C. Provide the company with copy of the CR that proves the commercial relationship.

4. *Addition of beneficiaries who obtained temporary visas (Business/Commercial)
   A. Fill up the Electronic request form.
   B. Attach copy of the Passport (First page and Visa page).

*Note: No addition will be approved for Dependents under different sponsorship/s
*Note: Bupa Arabia pre-approval is required for item no. 3 & 4 before addition
<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sponsor Id</td>
<td>1000000000</td>
</tr>
<tr>
<td>Mobile No</td>
<td></td>
</tr>
<tr>
<td>ID Expiry Date</td>
<td></td>
</tr>
<tr>
<td>Branch Code</td>
<td>-Select-</td>
</tr>
<tr>
<td>Marital Status</td>
<td>-Select-</td>
</tr>
<tr>
<td>Joining date with company</td>
<td></td>
</tr>
<tr>
<td>Nationality</td>
<td>Saudi Arabia</td>
</tr>
<tr>
<td>Start date for medical cover</td>
<td></td>
</tr>
<tr>
<td>Title</td>
<td>-Select-</td>
</tr>
<tr>
<td>Employee No</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>-Select-</td>
</tr>
<tr>
<td>Department Code</td>
<td></td>
</tr>
<tr>
<td>Complete Name (First, Middle, Last)</td>
<td></td>
</tr>
<tr>
<td>Has the member or any of its dependents previously been covered by BUPA?</td>
<td>No</td>
</tr>
<tr>
<td>Date Of Birth</td>
<td></td>
</tr>
<tr>
<td>Previous Membership No.</td>
<td></td>
</tr>
<tr>
<td>Profession</td>
<td>-- Select --</td>
</tr>
<tr>
<td>Join reason</td>
<td>-Select-</td>
</tr>
<tr>
<td>District</td>
<td>-Select-</td>
</tr>
<tr>
<td>Mobile No</td>
<td></td>
</tr>
</tbody>
</table>
After filling up all the above mandatory fields for the addition of an employee or a dependent, an icon will be available at the end of the page that is only for uploading any documents related to the member or the process, and the format of the files should be of the following (.pdf, .jpg, .jpeg, .gif, .png, and .bmp). After uploading the supporting documents you must press on 'Upload' to upload the documents. Please note that files should not exceed 5 MB.

Finally, after filling up the information and supporting documents you need to press 'Submit Request' to submit your request successfully for an addition or an employee or a dependent.

**Bedun Nationalities**: a pop up massage will appear in the addition page in case the member is Bedoun then use the link to download the form and send it to MembershipEmail@Bupa.com.sa
Once a request has been submitted on the online services, a Reference Number will generate automatically to track your request. You may also use the number provided as a unique reference code.

(2) Adding a dependent is of the same process of adding Employee press the highlighted + Add Dependent before submitting a request uploading the member

(3) Reference No

The request has been submitted successfully.

Thank you for submitting your request. We are now validating the submitted file. Your reference no. is 3075604.
Add Dependent:

Click on this button to enable the function of adding a dependent. You will then have a field for the main membership number and then press ‘Get Details’ to go to the next stage of adding the new dependent as shown:

After clicking on ‘Get Details’, the mandatory fields will need to be filled such as; Full name, Date of Birth DOB, Saudi ID number or Iqama number..etc) then click on ‘Submit Request’. Please make sure all the information you have entered is filled correctly.

1- in the first 3 months for delivery the only documents needed is a Birth Certificate Or Birth notification when adding a new born.
2- Activation date for dependent must be the latest of all the following dates: (Birth Date + Contract inception date + effective date of the employee).
3- In case of birth outside the kingdom there must be an entry number special for him/her and must be added in the addition process.
4- The Coverage level OR class should match the same as the main member (Employee).
Delete Employee:
Press this icon to enable the function of deletion, a page will show a field to enter the membership number related to the deletion transaction. After adding the number press **Retrieve Member Details** as shown:

After pressing **Retrieve Member Details** a profile page will show related to the member and there are two fields needs to be fill, First, *Reason of deletion and the Second is to select the date of expiry related to the member.

- After making sure that all fields are submitted press on **Delete Member** to submit the request of deletion:
Delete Employee

Fields marked with asterisk [*] are mandatory.

*Membership Number: 4742382

Please review the details below and enter the required fields:

Membership no: xxxxxx
Member name: FIRST, SECOND and LAST name
Saudi ID/Iqama no: xxxxxxxxxxx
Date of birth: DD/MM/YYYY

*Reason for deletion: [Select]
*Effective date: 27/11/2013

(1) Reason of Deletion
(2) Effective Deletion
(3) Submit deletion request

*Note: Deleting the main member will cause all the dependents to be deleted automatically.
Delete Dependent:
Press this icon to enable the function of deletion, a page will show a field to enter the membership number related to the deletion transaction. After adding the number press as shown:

After pressing , a profile page will show related to the dependant and there are two mandatory fields needs to be fill, First, *Reason of deletion and the Second is to select the *date of expiry related to the member.
Delete Employee

Fields marked with asterisk [*] are mandatory.

*Membership Number: 4742382

Please review the details below and enter the required fields.
- Membership no: xxxxx
- Member name: FIRST, SECOND and LAST name
- Saudi ID/Iqama no: xxxxxxxxxxx
- Date of birth: DD/MM/YYYY

*Reason for deletion: Select
*Effective date: 27/11/2013

Reason of Deletion
Submit deletion
Delete Member
### Deletion Requirements:

1. **Deletion of Saudi Beneficiaries and their Dependents:**
   - A. Fill up the Electronic request form for fax and email requests.
   - B. Attach copy of the resignation or termination letter.

2. **Deletion of Non-Saudi Beneficiaries:**
   - A. Fill up the Electronic request form.
   - B. Attach the documents that prove the validity of deletion which is as follow:

3. **Final Exit:**
   - A. Copy of final exit visa stamped from the exit port (Issued by Jawazat or Muqeem Services).
   - B. Copy of proof of final exit from Muqeem Services or Personal Resident Print Out from Jawazat.
   - C. The insured shall record the actual exit date on the form as the transaction effective date (Not more Than 30 days back).
   - D. In case the exit visa doesn’t hold exit port stamp, the customer shall provide a confirmation letter states the employee name, ID No. & actual exit date from KSA.

4. **OutSide KSA Runaway (Exit no Return):**
   - A. Attestation of no return (Must be stamped by Jawazat).
   - B. Resident Information print-out from Muqeem.
   - C. Copy of the new Iqama shows the new sponsor name.
   - D. Proof of another approved medical insurance from (CCHI) E-Services website.

5. **Death:**
   - A. Copy of death certificate.
   - B. Availability of another approved medical insurance:
   - C. Proof of another approved medical insurance coverage from (CCHI) E-Services.
   - C. All the deletion conditions applicable to the beneficiaries
**Change Class:**

click on this icon to enable the function change class the member, it will show the below page a field to enter the main membership number that needs to change the class, after submitting the number press as shown below:

After pressing it will reflect the details page related to main member that needs a class change, then please fill up the below fields to proceed with the change class and then submit required documents attached with the request as supporting documents and finally press.

### Change Class Requirements:

1. Fill up the Electronic request form.
2. Attach copy of the documents that support the Change Class which is as follow:
   - **Upgrade:** Copy of the Promotion Letter.
   - **Downgrade:** A letter clarifies the downgrade letter.
**Change Branch:**

Press this icon to enable the function change branch for the employees, a page will show to enter the membership number that needs to change the branch and then press **Get Details** as shown below:

**Change Branch**

Fields marked with asterisk (*) are mandatory.

*Membership Number* [ ]  **Get Details**

After getting the details a page will show information related to the member that needs a branch change, to complete the transaction some documents are required to proceed with the transaction successfully. After submitting the supporting documents click on **Submit Request** as shown below:

**Change Branch**

Fields marked with asterisk (*) are mandatory.

*Membership Number* 4742382

**New Branch**
**Reason for Change**
**Effective new Branch change**
Change Branch Requirements:

1. Fill up the Electronic request form.
2. Specify the transaction effective date.

* Note: Currently there are no documents requirements to perform “Change Branch” however; the documents upload function will be optionally available.

Replace Card Data Correction:

Press this icon to enable the function change\correction details and the replacement reasons on the card for the employees, a page will show to enter the membership number that needs to change the card details and then press as shown below:
After getting the details a page will show information related to the member that needs to change/correct card information, to complete the transaction some documents are required to proceed with the transaction successfully. After submitting the supporting documents click on as shown below:

Depending on the chosen reason the web will reflect the fields that need to be amended.
Card Replacement and Data Correction

1. Fill up the Electronic request form.
2. Choose the desired Replacement/Correction reason and upload the support documents as mentioned bellow:
   - Lost Card: No documents required.
   - Damaged Card: No documents required.
   - Wrong Member Name: Copy of Saudi ID/Iqama.
   - Wrong Date of Birth: Copy of Saudi ID/Iqama.
   - Wrong Employee No: No documents required.
   - Wrong Nationality: No documents required.
   - Wrong Saudi ID/Iqama: Copy of Saudi ID/Iqama.
   - Wrong Gender: Copy of Saudi ID/Iqama.
   - Change Entry Number to Iqama: Copy of the Entry Visa and Iqama.
   - Wrong Member Type: Copy of the Family ID Card/Iqama/Entry Visa.
   - Wrong ID Type: Copy of the correct ID.
Wrong ID Expiry Date: Copy of the ID.
Wrong Profession: Copy of the Iqama/Entry Visa.
Wrong District: No documents required.
Wrong Mobile: No documents required.
Complete New CCHI Requirements: Copy of the ID/Iqama/Entry Visa

Track Info:
This function will enable the client to track any submitted requests or transaction related to the employees, then a page will reflect fields to submit any of the following numbers to track with, either with the provided reference number after submitting the request or the data of submission or even the staff number as shown below:

After submitting the required search method a page will show related information only to the member as shown below:
Submit Required & Supporting Documents:

If there is a transaction rejected due to missing document this icon will reflect the needed documents in order to proceed successfully with the services used in the web. You can simply add the missing documents referring the number as shown below and then press submit.
My Details:
This icon will enable you to view personal profile and policy related to your staff and employees and you can search by either entering the Membership No. or Staff No if available in the system and press Search and it will reflect the information related to the member.

My Coverage:
This function will enable you to view your coverage and reflect the policy benefits by search with the Membership no. Or staff no of the employee as shown below, once typing the number press Search to show the coverage related to the main member.
**My Network:**
This function will allow you to view your providers under your network and the eligibility of getting the health care needed from any of the shown providers. You can search by the membership no. and staff no of the employee as shown below, once typing the number press to show network coverage related to the member.

![Search button](image1)

**Certificates:**
By clicking on this function it will enable you to print certificates for health insurance related to the member, after that a page will reflect a space to enter either membership number or staff no. related to the member, after putting the number in the field press to search.
After that a page will show two fields needs to be entered in order to proceed. In this first field you have to indicate what is the purpose of having the certificate and the 2nd field you have to enter the membership number related to the member in order to reflect these information in the certificate and then press

**Please choose the purpose of your request**

**Select member**

**Type of certificate**

**Membership No.**

---

**Claim history:**

By clicking on this function it will enable you to view your claims history related to the member, after that a page will reflect a space to enter either membership number or staff no. related to the member, after putting the number in the field press

**Claim History**

**Search**

*Note: the claim request will remain pending until Bupa receives the original copy of the invoices in order to proceed.*
Pre-auth History:

This function allows you to view your pre-auth medical history related to the employee in the company after that a page will reflect a space to enter either membership number or staff no. related to the member, after putting the number in the field press as shown below:

Review Online Invoices:

click on this button and it will enable you to get information on the financial invoices related to the company and then it will reflects fields related to the invoice such as type of invoice date of the invoice, branch details and then press to get information related to the invoice as shown below:
Account Statements:

By pressing this function it enables you in case there are account statements reports needed either by full, premium, sundry or short statements. In case of requesting the full statements it will reflect all the transactions even pain invoices and by choosing short statements it will reflect the un-pain statements only and then press Print as shown below:
Statement of Accounts

Type of Statement
- Premium
- Full Statement
- Sundry
- Short Statement

1. Full Statement means all transactions including fully settled payments.
2. Short statement means only outstanding unsettled transactions.

Branch
All branches

Premium Statement of Account

<table>
<thead>
<tr>
<th>Customer Name</th>
<th>Swipe Cards - Dummy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Customer No.</td>
<td>10594000</td>
</tr>
<tr>
<td>Branch/Division/Cost Centre</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td>03/12/2013</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Reference</th>
<th>Description</th>
<th>Debits</th>
<th>Credits</th>
<th>Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Total Movement

Print
Submit Reimbursement:

- Submitting a successful claim is based on two important steps:

1. **1st step**
   - Fill the claim form accurately and correctly
     1. Reading the instructions very carefully and understand them before starting.
     2. Writing the correct name of the member (the one in the invoices).
     3. Writing the correct membership number.
     4. Writing the correct IBAN (24 number). Ex: SA1234567891011121314151617
     5. Writing the total amount of the claim.

2. **2nd step**
   - Knowing the required documents for each type of claim

**Optical claim**

1. Submitting the original invoices showing the date (not more than 180 days' from treatment date) and itemization for the frame and lenses.
2. Submitting the eye test report stamped and signed by ophthalmologist. (Hospital or clinic)
3. Submitting the claim by yourself or authorized person.
4. Cash receipt

*Note:* *Unauthorized submission will not be reimbursed.

*The claim request will remain pending until Bupa receives the original copy of the invoices in order to proceed.*
Dental claim

1- Submitting the original invoices showing the date (not more than 180 days' from treatment date) & itemization for the services done and the tooth number for which tooth treatment was done.

2- Panoramic X-rye.

3- Medical report from a dentist

4- Cash receipt

Out Patient

1- Medical Report.

2- Laboratory and images (x-ray & CT scan & MRI and Ultrasound) report.

3- Submitting the original invoices showing the date (not more than 180 days' from treatment date) & itemization for the services done.

Cash receipt.
# Claim Details

Please fill the invoices details in the below field and press Add button.

<table>
<thead>
<tr>
<th>Number of Invoices</th>
<th>Total Amount</th>
<th>Currency Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td><strong>Saudi Arabia – SAR</strong></td>
</tr>
</tbody>
</table>

## Payment Details

- **Payment Type**
  - EFT (Electronic Fund Transfer)
  - Cheque

- **Bank Country**
- **Name of the Bank**
- **IBAN Number**

## Upload invoices and supportive documents

Please upload related documents here (allowed types are .pdf, .jpg, .jpeg, .gif, .png, .bmp) 5MB limit per file.

[Upload]
Please read the following declarations and undersigned by pressing the tick that you have read and agreed to Bupa terms and conditions and press Submit.
All the Rules and Regulations listed below are complied with SAMA, CCHI and BUPA Arabia Policy.

Any attempt to change and/or modify the rules and regulations listed below by any person or entity without the prior written approval from the competent authorities will be dealt with legally.

**Additions:**

<table>
<thead>
<tr>
<th></th>
<th>بالإضافات</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Addition of Saudi Beneficiaries and their Dependents:</strong></td>
<td></td>
</tr>
<tr>
<td>A. Fill up the Electronic request form.</td>
<td>ا. إكمال طلب الطلب الالكتروني.</td>
</tr>
<tr>
<td>B. Attach copy of the Saudi ID.</td>
<td>B. مرفقة نسخة من رخصة سيد.</td>
</tr>
<tr>
<td>C. Attach copy of the Saudi Family ID (Only if enrolling Dependents)</td>
<td>C. مرفقة نسخة من رخصة العائلة (إذا تم تسجيلك بنكًة.)</td>
</tr>
<tr>
<td><strong>2. Addition of Non-Saudi Beneficiaries and their dependants (Under Sponsorship):</strong></td>
<td></td>
</tr>
<tr>
<td>A. Fill up the Electronic request form.</td>
<td>ا. إكمال طلب الطلب الالكتروني.</td>
</tr>
<tr>
<td>B. Attach copy of the Employee ID/Iqama and the Dependents.</td>
<td>B. مرفقة نسخة من رخصة العامل/Iqama وبنكًة.</td>
</tr>
<tr>
<td><em>Note: No addition will be approved for Dependents under different sponsorship/s.</em></td>
<td><em>ملاحظة: لا يتم قبول أي إضافة للمستفيدين تحت تمويلات مختلفة.</em></td>
</tr>
<tr>
<td><em>Note: BUPA Arabia pre-approval is required for item no. 3 &amp; 4 before addition:</em></td>
<td><em>ملاحظة: تأكيد من BUPA Arabia مطلوب قبل الإضافة.</em></td>
</tr>
<tr>
<td><strong>3. Addition of outside KSA Beneficiaries:</strong></td>
<td>الإضافات من خارج منطقة الرياض.</td>
</tr>
</tbody>
</table>
**A. Fill up the Electronic request form.**

**B. Attach copy of employee/Dependents Passport/s.**

**C. Provide the company with copy of the CR that proves the commercial relationship.**

### 4. Addition of beneficiaries who obtained temporary visas (Business/Commercial)

- A. Fill up the Electronic request form.
- B. Attach copy of the Passport (First page and Visa page).

### Deletion:

#### 1. Deletion of Saudi Beneficiaries and their Dependents:

- A. Fill up the Electronic request form.
- B. Attach copy of the resignation or termination letter.

#### 2. Deletion of Non-Saudi Beneficiaries:

- A. Fill up the Electronic request form.
- B. Attach the document that proves the validity of deletion which is as follow:
  - **Final Exit:**
    - Copy of final exit visa stamped from the exit port (Issued by Jawazat or Muqeem Services)
    - Copy of proof of final exit from Muqeem Services or Personal Resident Print Out from Jawazat.
    - The insured shall record the actual exit date on the form as the transaction effective date (Not more than 30 days back).
    - In case the exit visa doesn’t hold exit port stamp, the customer shall provide a confirmation letter states the employee name, ID No. & actual exit date from KSA.
  - **Out Side KSA Runaway (Exit no Return):**
    - Attestation of no return (Must be stamped by Jawazat) or.
    - Resident Information print-out from Muqeem.
  - **Transfer of Sponsorship:**
    - Copy of the new Iqama shows the new sponsor name.
    - Proof of another approved medical insurance from (CCHI) E-Services website.
    - Copy of death certificate.
Availability of another approved medical insurance:

- Proof of another approved medical insurance coverage from (CCHI) E-Services.

C. All the deletion conditions applicable to the beneficiaries under the sponsorship of the insured are applicable for those who are under different sponsorship except (Transfer of Sponsorship).

Change Class: 

1. Fill up the Electronic request form.
2. Attach copy of the documents that support the Change Class which is as follow:
   - Upgrade: Copy of the Promotion Letter.
   - Downgrade: A letter clarifies the downgrade reason.

Change Branch: 

1. Fill up the Electronic request form.
2. Specify the transaction effective date.

* Note: Currently there are no documents requirements to perform "Change Branch" however; the documents upload function will be optionally available.

Card Replacement and Data Correction 

1. Fill up the Electronic request form.
2. Choose the desired Replacement/Correction reason and upload the support documents as mentioned below:
   - Lost Card: No documents required.
   - Damaged Card: No documents required.
   - Wrong Member Name: Copy of Saudi ID/Iqama.
   - Wrong Date of Birth: Copy of Saudi ID/Iqama.
   - Wrong Employee No: No documents required.
   - Wrong Nationality: No documents required.
   - Wrong Saudi ID/Iqama: Copy of Saudi ID/Iqama.
   - Wrong Gender: Copy of Saudi ID/Iqama.
| Change Entry Number to Iqama: Copy of the Entry Visa and Iqama. |
| Wrong Member Type: Copy of the Family ID Card/Iqama/Entry Visa. |
| Wrong ID Type: Copy of the correct ID. |
| Wrong ID Expiry Date: Copy of the ID. |
| Wrong Profession: Copy of the Iqama/Entry Visa. |
| Wrong District: No documents required. |
| Wrong Mobile: No documents required. |
| Complete New CCHI Requirements: Copy of the ID/Iqama/Entry Visa. |