





### An overview on submitting claims

We have made the claims process as simple as possible for you. The diagram below lists all the details needed when submitting a claim to LMS.

Information that MUST be on the claim	When submitting claims
 <ul style="list-style-type: none"> <li>• The correct membership number</li> <li>• Member's last name and initials</li> <li>• Full name of the patient</li> <li>• Date of birth of the patient</li> <li>• The correct dependant code</li> <li>• The date of service</li> <li>• Treatment code (Tariff/Nappi)</li> <li>• The amount charged</li> <li>• ICD-10 code on every item listed on the claim</li> <li>• The service provider's name and practice number</li> </ul>	 <p>The claim must be clear, detailed and easy to read.</p> <p>If you have settled the account, please submit proof of payment in the form of a receipt or proof of Electronic Funds Transfer (EFT)*.</p> <p>Make a copy of the above documents for your own records.</p> <p><b>The only document we will accept as proof of payment is a receipt or proof of EFT payment.</b></p> <p>* Proof of payment must be submitted with any refund that needs to be paid to a member. A written note indicating 'paid by member' or a 'paid' stamp will no longer be accepted. If the correct proof of payment is not attached, the account will be rejected.</p>
Sending claims to LMS	Sending claims to TRADITIONAL Standard
 <p><b>Electronically:</b> Most service providers have the ability to send claims to us electronically, ensuring a very short processing time.</p> <p><b>Email:</b> lms.claims@medscheme.co.za</p> <p><b>Post:</b> PO Box 38632, Pinelands, 7430</p>	 <p><b>Electronically:</b> Most service providers have the ability to send claims to CareCross electronically, ensuring a very short processing time.</p> <p><b>Email:</b> lms@carecross.co.za</p> <p><b>Post:</b> P.O. Box 44991, Claremont, 7735</p>

It is your responsibility to ensure claims are submitted for payment, to get a copy of the claim (even when the service provider submits directly to the Scheme), and to check your account compared to the services you received.

### Basic claim guidelines

- We need to get claims within four months following the month in which the services were provided. After that a claim becomes a stale claim and will not be paid. Please see more information on stale claims below.
- It is ultimately your responsibility – not your healthcare provider's responsibility – to ensure claims are submitted for payment.
- If your healthcare provider has claimed electronically and you receive a copy of the claim (for your information), you do not need to send the copy to the Scheme.
- If your provider expects you to pay for the services upfront and then claim from the Scheme, please send us the fully detailed and signed claim (not just the receipt).
- The Scheme needs the details of what is being claimed for to make sure that we process your claim quickly and correctly.

### Stale claims

- If you submit a claim after the end of the fourth month following the month in which the services were provided, as stated on the claim, LMS or CareCross (TRADITIONAL Standard only) will regard it as stale and will not pay the claim.
- If you submit a claim within the four-month period and it is partially paid, or rejected as incorrect or unacceptable for payment, it is your responsibility to check your statement(s) and resubmit a correct claim within 60 days following the date of notification of rejection.
- If not, the claim will be regarded as stale and no payment will be made.
- LMS or CareCross (TRADITIONAL Standard only) will not cover any interest or legal fees that are levied on a claim that is submitted late.

## How will you know if your claims were paid?

- After you submit a claim, you will get an SMS notification once it has been received and/or processed provided that we have your correct cell phone number on record.
- Should we have your email address on record, you will also get an email confirmation that it has been processed. This will summarise both approved and rejected claims.
- You will get a monthly detailed statement that summarises all the contributions and claims transactions that occur throughout the month.
- You can view your statements online at [www.lmsmedfund.co.za](http://www.lmsmedfund.co.za), or members on TRADITIONAL Standard can view their statements at [www.carecross.co.za](http://www.carecross.co.za).

**Please make sure we have your correct email address and/or cell phone number so that the above information will reach you.**

## When to expect payment

- LMS and CareCross (TRADITIONAL Standard only) have a weekly payment cycle for members and providers. However, payment into your bank account may only reflect after a few days, depending on which bank you use. Weekly payment is subject to meeting the relevant submission cut off times.
- Payment is subject to available benefits and submission of complete and correct information.

## Your bank details

- Please make sure we have your correct bank account details for electronic payment of your claim refunds. You can email these details to [lms.updates@medscheme.co.za](mailto:lms.updates@medscheme.co.za) or fax them to 086 111 6070.
- If you add or change your bank account details to which we should refund your claims, please send us the following documents (not older than three months):
  - A certified copy of the account holder's identity document, and
  - A stamped bank statement or a letter from the bank confirming the account number.

### Note

You can update your contact details at any time, online using your membership profile login or by contacting the LMS Call Centre on 0860 000 567/LMS.

## Third party claims

Please inform LMS when another party may be liable for medical expenses due to motor vehicle or work-related injuries.

### Work-related injuries

If you are treated for injuries because of an accident at work, these costs should be covered by the Workman's Compensation Fund. Please consult your HR practitioner to find out the steps.

### Road Accident Fund (RAF) claims

If you have been involved in a motor vehicle accident, please contact the LMS Call Centre for assistance to process a possible claim with the RAF.

As LMS or CareCross (TRADITIONAL Standard) will settle this claim on your behalf in the case of a motor vehicle accident, you must reimburse this amount to LMS at your earliest convenience once you receive payment from the RAF.

## Fraud and abuse

Fraud continues to be a major concern for most medical schemes, costing millions of Rands each year. As you know, the more fraud there is, the higher contributions become to cover these losses.

We have measures in place to detect and manage fraud and the abuse of benefits. You can contribute to this effort by contacting our Fraud Hotline anonymously if you are aware of any provider or patient abusing the system. We urge all members to check their monthly claims statements and to verify the claims information to ensure that all details are true and correct. Report anything suspicious.

## Contact details



**Third party claims:**  
LMS Call Centre 0860 000 567/LMS

**Fraud Hotline:**  
Tel 080 011 2811