

HOW TO FILE A CLAIM

Document Requirements

- Please submit the Claims Form and all original bills together with official receipts or the scanned copies to claimsubmission@pacificcross.com
- Photocopies or screenshots will not be accepted.



Submission Deadline

All claims must be submitted within ninety (90) days from the date of services rendered, unless not reasonable possible to do so.

We reserve the right to reject any claims submitted after this period at our discretion.



Hospital Claims

- Original bills together with official receipts or the scanned copies
- A fully completed "Notification of Inpatient/Outpatient Claim Form"
- Name of patient, Member No., and Policy No.
- Date of hospital admission and discharge
- Diagnosis of disability requiring the hospitalization
- Name of surgical procedures performed (if any)
- Itemized charges/detailed breakdown of charges



Outpatient Claims

- Original bills together with official receipts or the scanned copies
- "Notification of Inpatient/Outpatient Claim Form" with Name of patient, Member No., and Policy No.
- Doctor/Service provider name and address (including the country where service was rendered)
- Date of treatment/visit with diagnosis or name of injury
- Detailed breakdown of charges/services
- Detail charges paid with official receipts
- Referral letter by the Attending Physician (for physiotherapy, diagnostic laboratory tests, x-rays, and prescribed medicine)



Dental Claims

- Original bills and official receipts or scanned copies
- A fully completed "Dental Claim Form"
- The dentist must mark the area of oral treatment on the dental chart
- Itemized charges
- A completed oral examination report (required for submission of the first dental claim only)



Personal Accident Claims

- Original bills and official receipts or scanned copies
- Physician/Hospital's report giving full details of nature and severity of injury
- Official Police Report

If death shall have resulted:

- Completed "Claim Form - Death"
- Array of the Death Certificate
- Attending Physician's Statement for Death Claim
- Full Coroner's Report



Proof of Payment: For Services in the Philippines

Effective 1 April 2026, Pacific Cross Insurance Company Limited will only accept Bureau of Internal Revenue-compliant sales/service/cash invoices for claims on services rendered in the Philippines.

Invoices must include:

- Provider name/address/TIN
- Invoice number and date
- Patient name
- Itemized services/fees and total amount

Transition Period: Claims incurred before 1 April 2026. Previously acceptable proof of payment documents may be submitted by 30 June 2026.

Applicable to: These requirements are only applicable to services rendered in the Philippines.

IMPORTANT NOTES

- We reserve the right to reject any claims submitted after this period at our discretion.
- We may request for further, formal or incontestable proof of further service for the claim processing.