nib Claims Information Service.





The nib Claims Information Service provides you with real-time information about your nib clients' new and active pre-approvals and claims. This new service is part of nib's commitment to helping you better support your clients, our members.

The nib Claims Information Service has two components:

- Details of your clients' pre-approvals and claims, accessed through nib adviser access, our information hub for advisers and,
- 2. A daily email to alert you when new pre-approvals and claims are submitted by your nib client's or when the status of their existing pre-approval or claim changes.



Here's how it works:

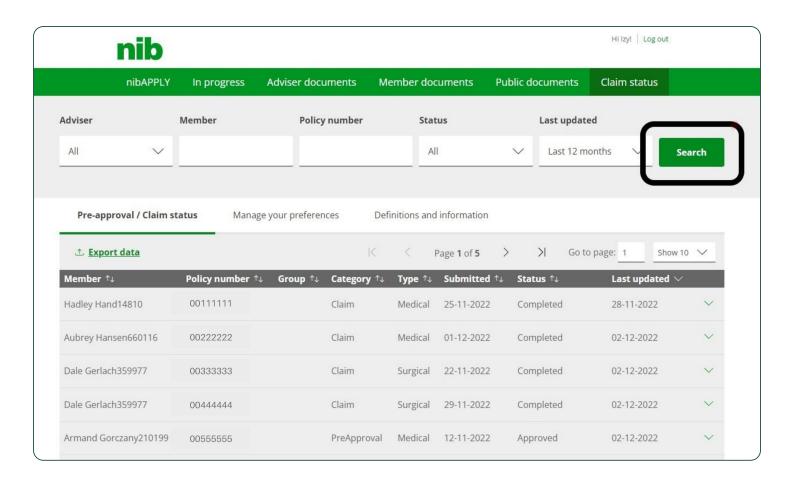
Accessing claims information through nib adviser access

When you sign into nib adviser access, you'll notice a new "Claim status" tab where you'll find real time information about your nib clients' pre-approvals and claims.

Under "Claim status", you'll see three tabs: "Pre-approval / Claims status", "Manage your preferences" and "Definitions and information".

Pre-approval / Claims status

Under the "Pre-approval / Claims status" tab, you'll see a full list of your nib client's claims under each of your nib Unique Adviser Numbers (UANs). If you have multiple UANs, select the "All" option to show claims and pre-approvals for all of them together.



Initially, each of your nib member's claims over the last 12 months will be available, with new claims added as they are received. To make it easier for you, we've included functionality to search for an individual claim or to sort the claims by claim status, date, and more.

For advisers who want offline access to the data or to incorporate it into their client records, there's an "Export data" button at the top left.



Click on the down chevron to find the information you need to discuss the claim with your client, apart from information that has been redacted for privacy reasons. For example, you'll see the amount of each claim, the applicable excess if any, claim payments made and information about the claim, all updated in real time.

Member \vee	Policy number ↑↓	Group ↑↓	Category ↑↓	Type ↑↓	Submitted $\uparrow \downarrow$	Status ↑↓	Last updated 🛆	
Gino D'Amore157125	00111111	123456	Claim	Medical	22-12-2022	Completed	05-01-2023	^
Claim number 001111	11*23*001	Requested Approved	\$220.00 \$100.00	Excess Payable By	Member	\$0.00 \$120.00	nib payment \$100.00	
Claim det Claimer Requested Payment t	Gino D'Am \$220.00	nore157125 er	Claim cost Approved Not covere	\$10	00.00 20.00			

Manage your preferences

The "Manage your preferences" tab is where you, at the click of a button, can turn off the nib Claims Alert emails.

Definitions and information

The "Definitions and information" tab explains the common terms used throughout the nib Claims Information Service, along with various questions and their answers.



nib Claims Alert

At the start of each weekday, you'll receive an nib Claims Alert email if one of your nib clients has lodged a new pre-approval or claim, whether submitted by the member's health service provider or by the member themselves, or if the status of an existing pre-approval or claim has changed.

The nib Claims Alert will include an attached summary of the pre-approval / claim.

For more detailed information, you'll just log into nib adviser access.



Using the nib Claims Information Service

We know all advisers want to provide great service to their existing clients and to recommend health insurance to prospective clients. Many advisers already do this and the nib claims information can enhance these client service and acquisition activities.

Try incorporating nib claims information in the following ways:

- · Contact your clients when they have a new claim. You may be able to:
 - Suggest actions they could take to mitigate the financial impact of their health condition, based on your experience with other clients.
 - Help them identify other health insurance benefits they could claim on, for example and depending on their cover, counselling or treatment related travel cost reimbursement.
 - Identify and help them claim on other insurance policies they may have such as income protection.
- Use the claims information during your annual review to remind your client of the value they get for their premiums and the costs they might have incurred had they not had the cover you recommended.
- Ask for feedback about the value of the cover after the claim has been completed. Use this as
 an opportunity to remind the client of other financial risks you previously discussed with them
 that they have not covered.
- At an appropriate time, ask the client if they have family members or friends who don't have health insurance, and whether they would recommend you to them.
- Use the understanding you get from talking to clients who've had a serious health condition in
 your healthy client conversations with prospective clients. It's another way of bringing to life the
 importance of having nib health insurance. (Make sure you don't disclose personal or identifying
 information about your clients).
- Include summary information of the number of clients you have assisted and value of the benefits in your marketing material.

There are lots of ways to use claims information and to demonstrate the value of the advice you provide.

Need help?

The nib Claims Information Service has been designed to be simple and easy to use. However, if you need more information or assistance, refer to the "Definitions and information" tab or contact your Adviser Partner Manager.

Haven't registered for nib adviser access yet?

If you haven't got around to registering for nib adviser access, this would be a good time to do it, otherwise you might miss out on an opportunity to assist your clients and to demonstrate how good an adviser you are.

To register, email advisersupport@nib.co.nz requesting an invitation to register (including in your email your mobile number, UAN and Business name).

