



WORKMEN'S COMPENSATION CLAIM PROCEDURE

1. Choose the nearest hospital to the accident location from Arope Healthcare Providers Network attached to your Policy (WRK Network of Hospitals).
2. Complete immediately the Declaration Form attached to your Policy.
3. Provide the Declaration Form to the chosen Hospital upon arrival of the Injured Worker to the Emergency.
4. Keep the last 2 copies of the Form after being completed, signed and stamped by the Hospital.
5. Send back to Arope the following documents:
 1. The Company Copy of the Declaration Form that was filled, signed and stamped by the Hospital.
 2. Original detailed Medical Report signed and stamped by the Doctor stating the Medical case and the Requested Treatment.
 3. Original Invoices and Receipts of the Prescribed Medications, if any.
6. Arope Insurance will assess the case then proceed with the reimbursement, if any.