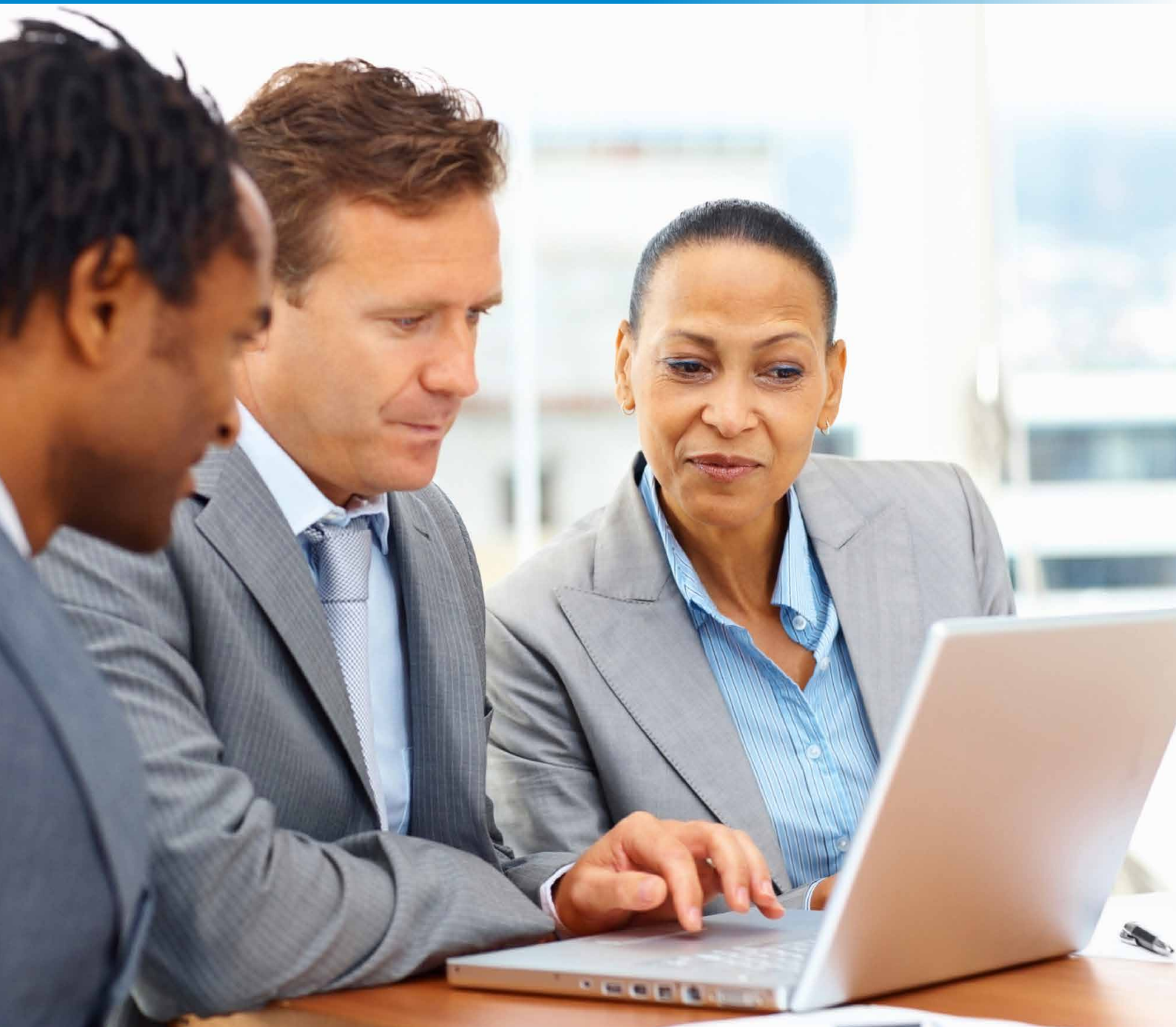




Introducing your

# **BHSF Policyholder Online Account**

A step-by-step guide

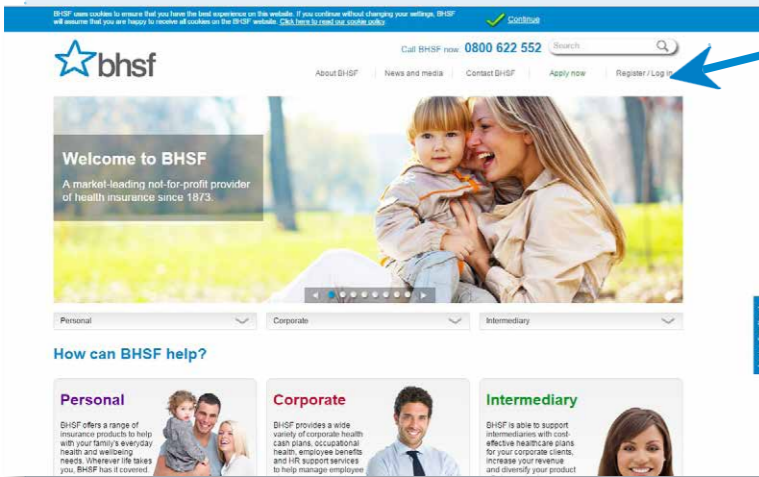


# Your BHSF Policyholder Online Account

Your online account allows you to view your policy, claim on your policy, track your claim, update your personal details and search for your local health providers.

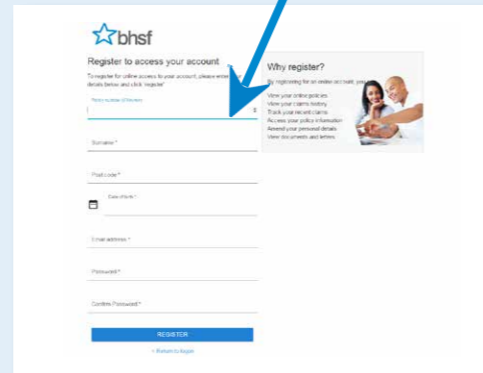
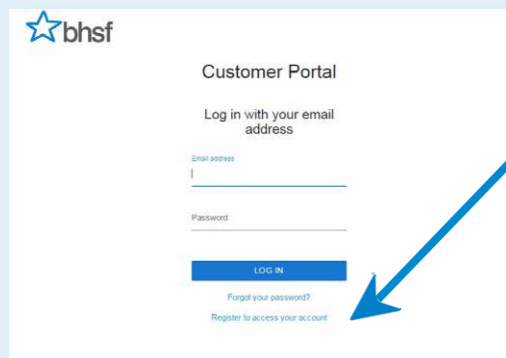
Here's a simple step-by-step guide to help you navigate through your account.

## Logging into your account

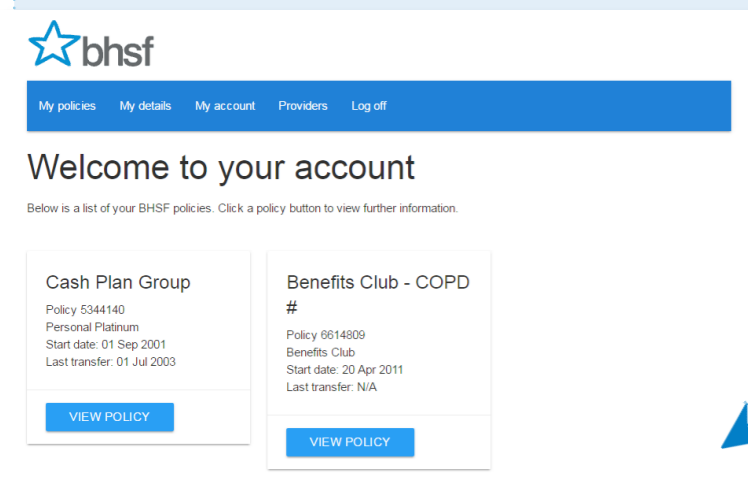


1. Go to [www.bhsf.co.uk](http://www.bhsf.co.uk) and enter your username and password details. The login tab/button can be found in the top right hand corner of the homepage. You will have already registered for these details.

If you haven't already registered, you can do this by clicking on the same tab and then clicking 'register to access your account'. You will then need to fill in your details to register.

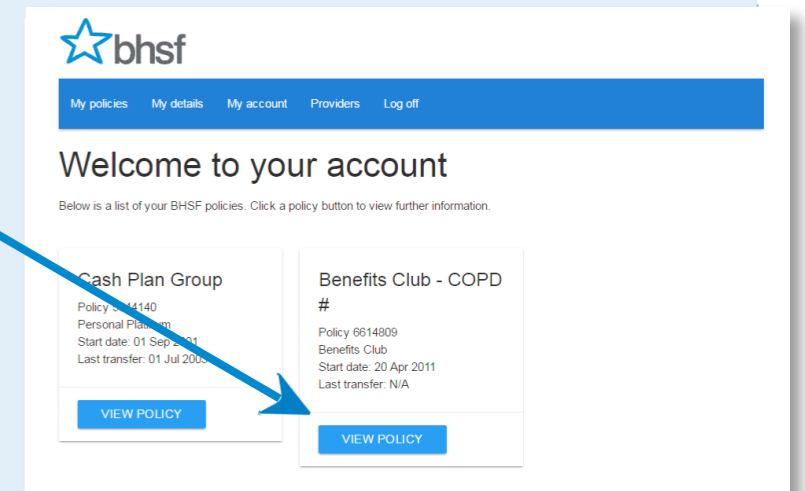


2. Once you have logged in, you will reach this page. Here you can see an overview of your policies and can access the following: **My policies, My details, My account and Providers.**

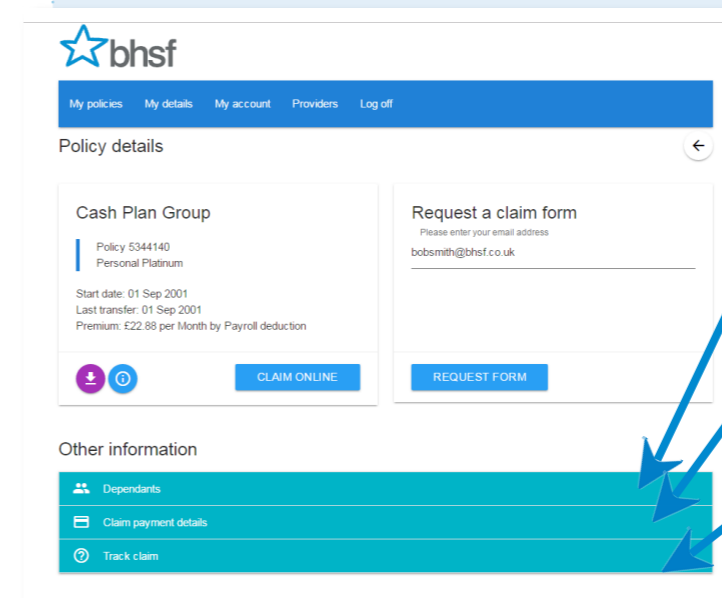


## Viewing your policy details

To view your policy click 'view policy'.



Once you have clicked 'view policy' you will be led to the page below. This page allows you to claim on your policy, request a claim form (for claims that cannot be made online), view dependents, check and update bank details and track your claim payments.



### Other Information

1. If you have any dependents on your policy, you can view them here.
2. By clicking 'claim payment details' you will be able to check and update your bank details to which the payments will be made.
3. To make claiming back even easier, you can track your claim to see when your payment has been authorised.

## Making a claim

To claim online, go to view policy and click claim online.

**My policies** | My details | My account | Providers | Log off

### Welcome to your account

Below is a list of your BHSF policies. Click a policy button to view further information.

<b>Cash Plan Group</b> Policy 5344140 Personal Platinum Start date: 01 Sep 2001 Last transfer: 01 Jun 2003	<b>Benefits Club - COPD #</b> Policy 6614809 Benefits Club Start date: 20 Apr 2011 Last transfer: N/A
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**My policies** | My details | My account | Providers | Log off

### Policy details

**Cash Plan Group**  
 Policy 5344140  
 Personal Platinum  
 Start date: 01 Sep 2001  
 Last transfer: 01 Sep 2001  
 Premium: £22.88 per Month by Payroll deduction

**Request a claim form**  
 Please enter your email address  
 bobsmith@bhsf.co.uk

**CLAIM ONLINE** | **REQUEST FORM**

**Other information**

- Dependants
- Claim payment details
- Track claim

You will then see this page, where you will find the terms and conditions to your claim on the left hand side and your payment details on the right hand side.

**Step 1.** Once you have read and understood the terms and conditions you can tick the 'agree' box.

**Step 2.** You will then need to select the date of your treatment. A calendar will open up for you to select the date.

**Step 3.** Click 'continue' to move to the next stage of claiming on your policy.

**My policies** | My details | My account | Providers | Log off

### Make a claim

Before you begin, please read the terms of use below.

I have read and agree to the terms of use

**Please select the date of treatment**

**Payment details**  
 Sort code (99-99-99)  
 11-91-00  
 Account number  
 911746  
 Account name  
 B SMITH  
 Confirm your password

**Download your policy terms**  
**POLICY TERMS**

**CANCEL** | **CONTINUE** | **UPDATE DETAILS**

You can access all of your policy terms here in a handy PDF.

In the next section in making a claim, there are four easy steps:

**Step 1.** Select who you are making a claim for, this would be yourself, your partner or your dependents.

**Step 2.** Select what you are claiming for.

If your benefit does not appear in the drop down menu, this means you cannot make an online claim for that benefit. You will need to refer back to your 'Policy details' and request a claim form.

**Step 3.** State how much the claim is for.

**Step 4.** Upload your receipts.

**My policies** | My details | My account | Providers | Log off

### Make a claim

Date of treatment: 06 Feb 2017

Who are you claiming for?  
 -- PLEASE SELECT --

What are you claiming for?  
 Benefits currently available for you to claim online are listed below. If the benefit you are claiming is not listed, please request a claim form by post. Your policy terms contain a benefit schedule listing all the benefits included on your policy, and also describe what is covered by each benefit. Please read the policy terms before selecting to check that your claim is eligible. Your policy terms can be accessed from the policy details on this page.

How much is your claim for?  
 Please enter the amount you personally paid for your treatment/service and for which you would like to receive a reimbursement from your insurance policy.

Upload your receipts  
 Please upload your original receipts as images in jpg or png format or you can upload a PDF. Please note that credit and debit card slips do not provide us with sufficient information and additional documentation will be required.

**ABANDON** | **CONTINUE**

## Uploading your receipts

### Upload your receipts

Please upload your original receipts as images in jpg or png format or you can upload a PDF. Please note that credit and debit card slips do not provide us with sufficient information and additional documentation will be required.

**Images must meet the following criteria**

- The information is clear and legible and the entire document(s) can be seen, including the edges of the page(s)
- Only one page of the original receipt(s) is shown within each file or photograph.
- The photograph(s) are taken from directly above the original receipt(s) without any glare/reflection that conceals the information.
- The provider/practitioner's details are shown, including their address and telephone number and for therapy claims, confirmation of their professional registration such as a registration number and/or the name of the registering organisation.
- The claimant's name is shown.
- The claimant's purchases are shown, including a list of the item(s) received and their cost(s), the date(s) the items were purchased and/or received, the date(s) of payment and the date the account was finally settled. Please settle any outstanding balances before submitting your claim.

Upload one or more files

**ABANDON** | **CONTINUE**

You can upload one or more images if you have multiple pages to your receipt.

When uploading your receipts there is information provided to help you.

Once you have done this you can click continue and you will then be confirming your information and submitting your claim.

## Confirming your claim

The example on the right shows the final stage to confirm your claim. Once you have read, understood and agreed to the terms and conditions listed, you can submit your claim.

**My policies** | My details | My account | Providers | Log off

### Confirm your claim

Please confirm your claim details

Date of treatment: 06 Feb 2017  
 Claimant: BOB SMITH  
 Benefit claimed: Dental  
 Receipt amount: £25.00

Please read and accept the terms

- I wish to submit the information and image(s)/photograph(s) of the original receipt(s) to BHSF
- I agree to the terms of use.
- The information I provide to BHSF is true and correct.
- I confirm that any medical or other practitioner or any other person who has provided healthcare or services for which the benefit is being claimed may give BHSF information necessary for the processing of this claim.
- I understand that serious action may result from the submission of a false or misrepresented claim.
- I understand that we may inform the Police of the details of any fraudulent or misrepresented claim(s).

I agree to the above

**SUBMIT CLAIM**

**Payment details**  
 When making a claim, your payments will be paid by BACS into the following account. Edit the details to change the account the payment will be made into.  
 Sort code (99-99-99)  
 11-91-00  
 Account number  
 911746  
 Account name  
 B SMITH  
 Confirm your password

**UPDATE DETAILS**

**Download your policy terms**  
**POLICY TERMS**

## Maintaining your account

### My details

#### Checking and updating your details

Here you will find your personal details; you can update your address, phone number or email address when you need to. You can also update your contact preferences.

My policies My details My account Providers Log off

### Edit your details

Your personal details are displayed below. If you would like to make any amendments then please do so and click Update. If you need to change your name or date of birth then please call the Helpdesk.

**BOB SMITH** Birth date: 06 Apr 1970

Address line 1: 10 Any Road Email address: bobsmith@bhsf.co.uk  
Line 2: Anywhere Daytime telephone: 0121234567  
Line 3: Anyhow Evening telephone:  
Line 4: Mobile telephone:  
Line 5:  
Post code: A10 9QW

#### Contact preferences

We may occasionally contact you with regards to other products and services that we feel may be of interest to you. Please tick your preferred method of communication(s).

Telephone  SMS  Email  Post

Confirm password: \_\_\_\_\_

**UPDATE**

### My account



My policies My details My account Providers Log off

### Maintain your online account

Here you can change your password or the email address that you use to log on to your account.

#### Change your password

Enter your new password and confirm it in the boxes below. Passwords must be at least 7 characters long.

Current password: \_\_\_\_\_ New password: \_\_\_\_\_ Confirm password: \_\_\_\_\_

**CHANGE PASSWORD**

#### Change your username

To change the email address you log on with, please enter the new address below.

Enter your new username: \_\_\_\_\_

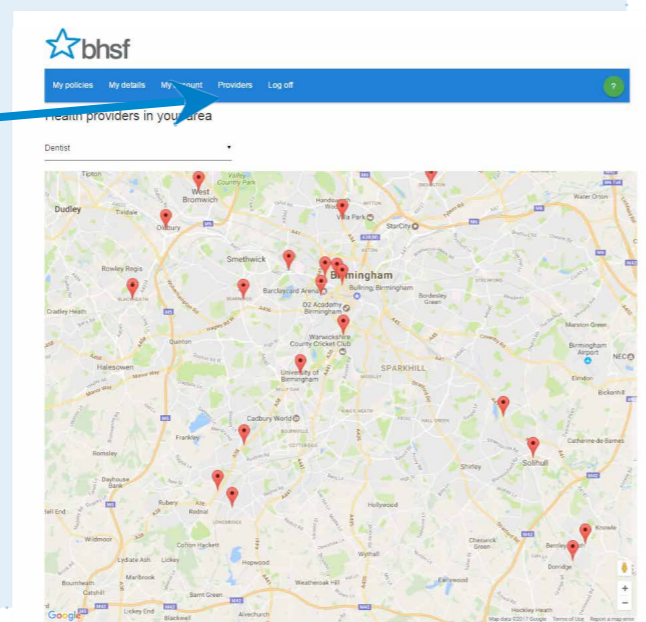
**CHANGE USERNAME**

### Maintain your online account

By clicking on 'My account' you can change your password or your username, whenever you need to.

### Providers

By clicking on 'Providers' you can search for your local health providers. A dropdown menu will appear showing you a list of different providers, such as dentists or opticians. A detailed map will pinpoint where these providers are in your area.



For technical support, or if you require further information about the online portal, please call us on **0800 622 552**, or email **[enquiries@bhsf.co.uk](mailto:enquiries@bhsf.co.uk)**



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