



Queensland COUNTRY HEALTH FUND

THERE'S A FASTER WAY TO CLAIM!

Download the Queensland Country Health Fund Mobile App today for an easy, convenient and secure way to manage your membership and claim quickly!



Submit a claim
Simply take a photo of your itemised account & receipt/s and press submit



Review your claims history



View policy details including contribution details



Check your annual benefit limits and see what's remaining



Update your contact information



Order new Membership Cards



Claim Form

YOUR DETAILS

Name

Membership Number

PAYMENT

I would like my claim to be paid:

Into my existing account registered with Queensland Country Health Fund

Into my new account

Account Holders Name

BSB

Account Number

COMMENTS

Let us know if there's anything special we should know about this claim. Things like you've changed your address or if you'd like to update your email address. If not, just leave blank.

All documentation will be retained by Queensland Country Health Fund. Please keep copies for your records. A claim for benefits must be submitted within two years of the date of service.

ACKNOWLEDGEMENT

- I declare that all of the information on this form is true and correct.
- I authorise Queensland Country Health Fund to use my personal information in accordance with the Privacy Policy. For more information about the Queensland Country Health Fund Privacy policy please refer to qldcountryhealth.com.au/privacy/ or call 1800 813 415.
- I further confirm that all persons to which this claim relates have provided their consent to such use and disclosure of their personal information.
- I confirm the services listed on this claim cannot be claimed from other sources including Medicare Australia, workers compensation, motor vehicle accident insurance or third party liability.

Sign here to agree to these conditions

Date (dd/mm/yy)

Please send this form plus your itemised account & receipts to:

Email: info@qchfund.com.au or Post: PO Box 42 Aitkenvale QLD 4814

Office Use Only

Claim Number

Processor

qldcountryhealth.com.au
info@qchfund.com.au
1800 813 415
PO Box 42 Aitkenvale QLD 4814

Queensland Country Health Fund Ltd
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