

How to Submit a Claim on the Alumo Portal

QUICK REFERENCE GUIDE

Document Checklist

Please make sure you attach the relevant documents when submitting a claim:



Clinic Visit

- ✓ Invoice Copy/Proof of Payment
- ✓ Medical Records



Diagnostic Tests

- ✓ Invoice Copy/Proof of Payment
- ✓ Copy of Referral from your Physician



Prescription

- ✓ Copy of the Official Prescription Drug Receipt (with the DIN Number)



Paramedical

- ✓ Invoice Copy/Proof of Payment
- ✓ Copy of Referral from your Physician



Emergency Room Visit

- ✓ Invoice Copy/Proof of Payment
- ✓ Emergency Room Report/Discharge Summary



Dental Emergency

- (dental pain)
- ✓ Copy of Dental Standard Claim Form
 - ✓ Invoice Copy/Proof of Payment



Dental Accident

- ✓ Copy of Dental Standard Claim Form
- ✓ Copy of Dental Chart Notes
- ✓ Copy of Referral from your Physician



Specialist Visits

- ✓ Invoice Copy/Proof of Payment
- ✓ Medical Records
- ✓ Copy of Referral from your Physician



Hospitalization

- (inpatient)
- ✓ Invoice Copy/Proof of Payment
 - ✓ Complete Medical Records, including Ambulance Report; Triage Report; Consultation Notes, Test Results, and Discharge Summary



Medical Appliances

- ✓ Invoice Copy/Proof of Payment
- ✓ Copy of Referral from your Physician

How to Submit a Claim on the Alumo Portal

QUICK REFERENCE GUIDE

Use this method to submit a claim if you are a student or if you are a school administrator submitting a claim on behalf of a student using their Alumo Portal credentials.

If you need help with saving or accessing a saved draft claim, click [here](#).

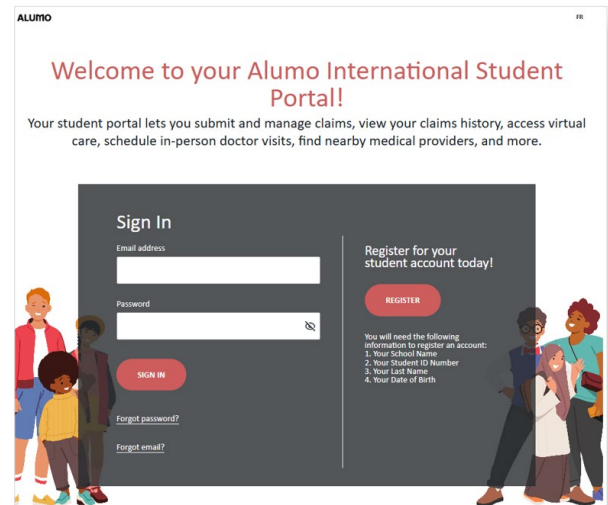
1

Navigate to your portal at www.alumportal.ca.

2

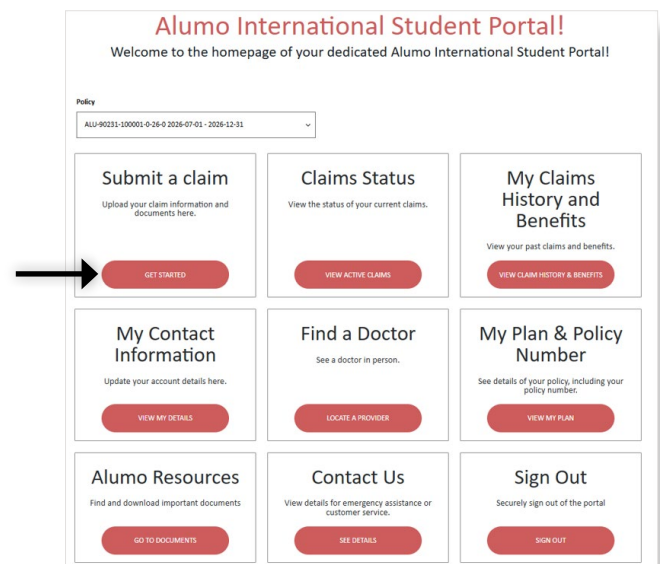
Log in to your portal using the email address and password you had signed up with.

If you do not have an account, register using your School Name, Student ID, Last Name, and Date of Birth. If you need help to register, refer to the instructions in the [document on this link](#).



3

After you have successfully logged on to your portal, click on the 'Get Started' button on the 'Submit a claim' tile.



How to Submit a Claim on the Alumo Portal

QUICK REFERENCE GUIDE

4

On the next page, ensure that you have ticked your name under the 'Claimant' section and check that all details are correct. Click on 'Continue' when you are done.

5

On the next page, select the type of claim you want to file, depending on the category. Make sure you select any relevant additional fields as well and click 'Continue' at the bottom.

Hint: You can click the 'Back' button at any stage to go back to the previous page.

If you need help with saving or accessing a saved draft claim, click [here](#).

6

On the next page, ensure you have answered all questions regarding your provider (i.e. your service provider for this claim) and click 'Next' at the bottom of the page.

How to Submit a Claim on the Alumo Portal

QUICK REFERENCE GUIDE

7

On the next page, ensure you have answered all the questions related to your claim and treatment, and click 'Next' at the bottom of the page.

The screenshot shows the 'Submit a Claim' portal with a progress bar at the top indicating four steps: 1. New Claim, 2. Select Claim Type, 3. Information about the claim, and 4. Claim Summary. Step 3 is currently active. Below the progress bar, the section is titled '3b: Claim Questions'. A disclaimer states: 'All claims submitted are subject to review and will be processed in accordance with the applicable policy benefits, exclusions, and limits.' The section is titled 'Claim and Treatment Information'. It contains two questions, each with a 'Further information' dropdown and a date picker set to '19'. The first question is 'When did your symptoms start or when did you get hurt?'. The second question is 'What date did you get medical care or buy medicine?'.

8

On the next page, ensure that you put in all the details regarding any benefit coverage you or your covered dependent has. Click on the 'Next' button at the bottom when you are done.

The screenshot shows the 'Submit a Claim' portal with a progress bar at the top indicating four steps: 1. New Claim, 2. Select Claim Type, 3. Information about the claim, and 4. Claim Summary. Step 3 is currently active. Below the progress bar, the section is titled '3c: Coordination of Benefits'. A disclaimer states: 'Complete this section to indicate whether you or your covered dependant has benefit coverage under any other health care plan.' The section contains a question: 'Does the insured person currently have provincial or government coverage of any kind?'. There are two radio button options: 'Yes' and 'No'. Below the radio buttons, there is a text input field labeled 'IF YES, provide the name of the provincial or government agency providing coverage:'.

9

On the next page, answer the questions related to payment information so we know where to send your claimed amount.

The screenshot shows the '3d: Claim Questions' section. A disclaimer states: 'All claims submitted are subject to review and will be processed in accordance with the applicable policy benefits, exclusions, and limits.' The section is titled 'Payment Information'. It contains a paragraph: 'Please provide receiving bank information so we can deposit your payment directly. Selecting international bank transfer may incur fees. Using a Canadian bank account will avoid these fees. Your information will be stored securely.' Below this, there is a section titled 'Additional Info' with a paragraph: 'Payment to a service provider is only possible for outstanding hospital claims. Important: Provider banking details must be provided and must be accurate for provider claims.' The section contains two main input areas. The first is 'Payment to' with a dropdown menu showing '-- Select --'. The second is 'Total Claimed' with a text input field showing '0.00'. To the right of this is a section titled 'Billed Currency' with a dropdown menu showing '-- Select --'. At the bottom, there is a section titled 'Amount Paid' with a text input field and a section titled 'Payment Currency' with a dropdown menu.

How to Submit a Claim on the Alumo Portal

QUICK REFERENCE GUIDE

10

Finally, on the next page, please ensure you upload all the relevant supporting documents (medical notes, emergency/hospital reports, receipts, paperwork, etc.) for your claim. Simply, put in the name of the document in the 'File Description' field and then upload your document. You can upload up to 10 documents with a maximum of 10 MB per file. Once you are done uploading all your documents, click on 'Submit' at the bottom.

The screenshot shows the 'Make a Claim' process with a progress bar at the top indicating four steps: 1. New Claim, 2. Select Claim Type, 3. Add supporting documents (current step), and 4. Claim Summary. Below the progress bar, the text '3e: Add supporting documents.' is displayed. There is a 'File Description' input field containing 'Medical Notes' and an 'Add' button. Below this is an 'Upload Files' section with a note: 'You can upload up to 10 files. (Recommended format: PDF, PNG, JPEG. Maximum 10 MB per file)'. To the right of this note is a large box with the text 'Drop files here to upload'. At the bottom of the form are two buttons: '< BACK' and 'SUBMIT'.

11

Read the terms and conditions, check the 'I acknowledge and agree to these terms and conditions' and click on the 'Continue' button.

The screenshot shows a terms and conditions screen. At the top, there is a text box containing the following text: 'benefits with any insurance carriers that may have a liability for this claim and assign to Lloyd's and MSH International (Canada) Ltd. any benefits payable from any other sources for losses covered under this policy, and authorize and direct such payers to forward payment directly to Lloyd's and MSH International (Canada) Ltd.' Below this text box is a checkbox with the text 'I certify that the information provided in connection with this claim is complete, true, and accurate.' The checkbox is checked. Below the checkbox is the text 'I acknowledge and agree to these terms and conditions.' At the bottom of the screen are two buttons: 'CANCEL' and 'CONTINUE'. An arrow points to the 'CONTINUE' button.

12

Congratulations, you have successfully submitted your claim! On this page, you will see all the details about your claim including your case number.

Tip: You can always check the status of submitted claims or your claims history by clicking on the "Claims Status" and "Claims History" tiles on the home page of the portal!

The screenshot shows the 'Make a Claim' process with a progress bar at the top indicating four steps: 1. New Claim, 2. Select Claim Type, 3. Information about the claim (current step), and 4. Claim Summary. Below the progress bar, the text 'Claim successfully submitted' is displayed. There is a 'Claim number: ALU104' field. Below this is a table with the following columns: SectionID, Name of medical provider, Reason for visiting the doctor & diagnosis, Date of service, Amount billed, Amount paid, Claim is payable to, Attachments, and Date of submission. The table contains one row of data: 852546 - Retail, Testing, 2026-07-28, 1.00, 1.00, Insured, MedicalNotes.pdf, 2026-07-29 4:17:07 PM. Below the table is a button labeled 'Submit Additional Related Invoice/Receipt'. At the bottom of the screen is a button labeled 'Return home'.

SectionID	Name of medical provider	Reason for visiting the doctor & diagnosis	Date of service	Amount billed	Amount paid	Claim is payable to	Attachments	Date of submission
852546 -	Retail	Testing	2026-07-28	1.00	1.00	Insured	MedicalNotes.pdf	2026-07-29 4:17:07 PM

How to Save and Access A Saved Draft Claim

QUICK REFERENCE GUIDE

1

After selecting the type of claim, you can save a draft of your claim to access later by clicking on the “Save” option at the bottom of the page. After clicking “Save”, your draft will be saved and a box will pop up with your Claim Reference Number.

2

To access your saved claims, click on the “Submit a Claim” tile after logging onto your Alumo Portal. Scroll down and you will see a list of your saved claims after your Alumo Policy Number.

3

Select a saved claim to manage it. You can delete a claim, continue filling it, or submit a new claim.

CALL US FOR ASSISTANCE

DIRECT **+1.416.644.4873**
TOLL-FREE **+1.855.219.1587**

Intrepid 24/7™ Assistance is available 24/7 to help with:

- Locating the nearest medical facility
- Coordinating billing
- Questions about coverage
- Submitting a claim
- Arranging emergency transportation

Notify Intrepid 24/7™ Assistance within 48 hours if you:

- Need to be hospitalized for any reason
- Require surgery of any kind (including dental)
- Need an MRI or CT scan
- Need air transportation
- Need medical attention outside Canada