

香港灣仔譚臣道 141 號 大業大廈 23 樓 電話: (852) 2591 5388 傳真: (852) 2591 5880 http://www.insu-value.com 23/F., Tai Yip Building, 141 Thomson Road, Wanchai, Hong Kong. Tel: (852) 2591 5388 Fax: (852) 2591 5880

Member of Professional Insurance Brokers Association (PIBA) 香港專業保險經紀協會會員

Registered MPF Intermediary (Corporation) 註冊強積金中介人公司

醫療保險

索償須知

欲盡快到賠償,在遞交賠償申請前,請檢查下列各項已完成:

- 1. 簽署及填妥賠償申請表。
- 2. 連同所有列明病症的醫療收訖單據正本,及有關文件一併提交。
- 3. 收據正本必須清楚列明以下資料,並由主診醫生簽署:
 - 診治日期(門診醫療計劃)或入院/出院日期(住院醫療計劃或住院現金計劃)
 - 病人姓名
 - 病症
 - 收費項目說明(如診金、藥費、檢驗費等)
- 4. 經醫生署之病歷報告、診斷結果、檢驗結果等有關資料。
- 5. 如申請專科或 X 光檢驗及化驗費索償, 請提供普通科醫生轉介信。
- 6. 如需取回收據, 請註明。

Medical Insurance

Important Notes

In order to speed up the process of your claim, please check if you have done the following before sending in claim(s):

- 1. Sign and complete the claim form.
- 2. Attach all original medical receipts with diagnosis and supporting reports.
- 3. Original receipts must clearly indicate the following information and be signed by the attending physician:
 - Treatment date
 - Name of patient
 - Diagnosis
 - Breakdown of charges
- 4. Attach referral letter from your General Medical Practitioner, if you are claiming for Specialist Consultation or Diagnostic X-ray and Laboratory test.
- 5. Attach Pre-authorization confirmation form if pre-authorization is applicable.
- 6. Indicate if you require us to return original receipt(s).