

Covid-19 Private Hospitalisation Assistance Programme (PHAP) Claim Submission Requirement Checklist

Note

Photocopy of documents **MUST** be duly certified by authorised parties, i.e. Claims Officer or Customer Service Officer or Notary Public or Advocate & Solicitor or Justice of Peace or Ketua Balai Polis or District Officer or Medical Officer or Group Sales Manager or Unit Sales Manager or Servicing Agent and Policy Holder.

Disclaimer

The list below serve as a guide for basic requirement. The Company reserves the right to request further document(s) for the purpose of this claim.

Please tick (✓) the documents submitted.

CTC = Certified true copy

1. Private Hospitalisation Assistance Programme

- ☐ Registered e-Connect user
- ☐ Direct Credit Facility Form duly completed by Claimant
- ☐ CTC of Claimant's NRIC/ passport if different from Life Assured
- ☐ CTC of Life Assured's NRIC/ Passport/ Birth Certificate
- ☐ Hospitalisation & Surgical -Claimant's Statement
- ☐ Hospitalisation & Surgical-Attending Physician's Statement
- ☐ Original bill(s)/tax invoice(s)
- ☐ Original receipt(s) including deposit and refund receipt (if any)
- ☐ Itemised Breakdown of total bill(s)/tax invoice (s)
- ☐ CTC of Reverse Transcriptase-Polymerase Chain Reaction (RT-PCR) for Covid-19 Infection
- ☐ CTC of laboratory, X-ray, MRI, CT scan, ultrasound, histopathology report, all diagnostic tests report (if any)

2. Private Hospitalisation Assistance Programme -For Claim Partially Settled By Third Party

- ☐ Registered e-Connect user
- ☐ Direct Credit Facility Form duly completed by Claimant
- ☐ CTC of Claimant's NRIC/ passport if different from Life Assured
- ☐ CTC of Life Assured's NRIC/ Passport/ Birth Certificate
- ☐ Hospitalisation & Surgical -Claimant's Statement
- ☐ CTC of medical report by third party
- ☐ CTC of bill(s)/ tax invoice(s)
- ☐ CTC of receipts (Original receipt and/ or original tax invoice are required for noncovered charges by third party, if any)
- ☐ CTC of Itemised Breakdown of total bill(s)/tax invoice (s)
- ☐ CTC of Reverse Transcriptase-Polymerase Chain Reaction (RT-PCR) for Covid-19 Infection
- ☐ CTC of laboratory, X-ray, MRI, CT scan, ultrasound, histopathology report, all diagnostic tests report (if any)
- ☐ Settlement letter issued from Third Party which list down in detail the name and charges for each covered and uncovered item (for reimbursement of balance of medical expenses)

* Please send the documents to us via mail to:

Menara Great Eastern
Level 16 Healthcare Services Department
303 Jalan Ampang
50450 Kuala Lumpur

or submit the documents to our Customer Service Centre located at the 1st floor (Health Claims drop box) at our Head Office or the nearest branch.

** Covid-19 Private Hospitalisation Assistance Programme will only be paid for claims with complete documents, subject to fund availability. Submitting an incomplete claim does not reserve the fund.*