

中國太平保險(香港)有限公司

China Taiping Insurance (HK) Company Limited

香港北角京華道18號15樓

15/F., 18 King Wah Road, North Point, Hong Kong

Tel: (852) 2815 1551 Fax: (852) 2541 6567 E-mail: info@hk.cntaiping.com Website: www.hk.cntaiping.com Customer Service Hotline: (852) 3716 1616

CLAIM PROCEDURE

Outpatient Benefits

1. Complete and sign one "Outpatient Medical Claim Form" for each claimant
2. Attach all original receipts signed by the attending doctor. Each receipt must show the following information:
 - Date of consultation
 - Name of Patient
 - Diagnosis
 - Itemized of charges
3. Attach referral letter from the attending doctor for any claim for expenses incurred for specialist consultation, physiotherapy, X-ray & laboratory tests. The referral letter is valid for the same disability for 6 months from the date of issuance.
4. Attach the prescription issued by registered Medical Practitioner / Chinese Medicine Practitioner (if applicable)

Inpatient Benefits

1. Complete and sign Part I of the "Hospitalization & Surgical Claim Form" by the claimant
2. Complete and sign Part II of the "Hospitalization & Surgical Claim Form" by the attending Physician or Surgeon
3. Attach all original hospital receipts and accounting statement showing the following information:
 - Date of admission and discharge
 - Name of Patient
 - Itemized of charges

All original receipts and completed claim form should be sent to China Taiping Insurance (HK) Company Limited at 15/F., 18 King Wah Road, North Point, Hong Kong.

For enquiries, please contact our Medical Insurance Hotline at (852) 3716 1616.

申請賠償手續

門診醫療福利

1. 填妥及簽署《門診醫療賠償申請表》，每名申索人須獨立填寫一份表格
2. 附上由主診醫生所簽署的收據正本，每張收據必須顯示下列資料：
 - 診症日期
 - 病人姓名
 - 病症
 - 收費項目說明
3. 任何有關專科醫生診治、物理治療、X光檢查及化驗的索償申請，須附上由主診醫生所簽發的介紹信。如屬同一病症，該介紹信於發出日起六個月內有效
4. 附上由註冊西醫／中醫所發出的處方（如適用）

住院及手術醫療福利

1. 申索人填妥及簽署《住院及手術賠償申請表》甲部
2. 主診醫生填妥及簽署《住院及手術賠償申請表》乙部
3. 附上醫療機構發出的收據正本並顯示下列資料：
 - 入院及離院之日期
 - 病人姓名
 - 收費項目說明

請將所有收據正本及已填妥的賠償申請表格，寄往香港北角京華道18號15樓「中國太平保險(香港)有限公司」如有任何查詢，請致電醫療保險熱線 (852) 3716 1616。