

Hospital & Surgical Claim Frequently Asked Questions (FAQs)

- 1. What are the documents required when submitting a claim? For Outpatient claims
  - A copy of the final tax invoices, itemised bills/ receipts, showing patient's name and date of consultation.
  - A copy of referral letter from a General Practitioner/Specialist/Attending Doctor (if you are submitting a claim for a Specialist visit)
  - A copy of the Attending Doctor's prescription for claims for purchase of drug(s)
  - Any laboratory test report(s)/examination result(s)

For Inpatient/ Day Surgery at a Public Hospital/ Private Hospital/ Specialist Clinic in Singapore:

- A copy of the final tax invoices and itemised bills/ receipts
- Inpatient Discharge Summary/Ambulatory Form /Hospital Pre-Admission Form (Public Hospital)
- HSBC Life Medical Report (Private Hospital/ Specialist Clinic)

For Inpatient/ Day Surgery claim outside Singapore

- All original final tax invoices and itemised bills/ receipts
- HSBC Life Medical Report
- Proof of travel For example, passport copy/boarding pass/airticket(s)
- 2. What is the grace period to submit a claim?

30 days (SmartCare Policy)/ 90 days (International Exclusive Policy) from the date of consultation/treatment/surgery/discharge from the hospital.

Please note that we may decline your claim if we are not notified within the grace period.

Do I need to submit original final tax invoices/ bills/ receipts?
 For Outpatient/Inpatient/ Day Surgery claim in Singapore
 HSBC Life accepts soft copies of final medical tax invoices/ bills/ receipts.

Please retain your original documents for 3 months (Outpatient claims)/ 6 months (Inpatient/Day Surgery claims) from the submission date as HSBC Life reserves the right to call for them.

If the original final bills / invoices / receipts are not available during our review, HSBC Life will request a declaration from the Policy Holder/ Employee. If there are any double claims, HSBC Life reserves the right to recover any claims that have been paid by HSBC Life to the Policyholder/ Employee.

<u>For Inpatient/ Day Surgery claim outside Singapore</u> Please submit the original final medical tax invoices/ bills/ receipts.



- 4. How will I know if my medical bills/ tax invoices are final copies?
  - a) The bill is a final bill, not an estimated or interim bill.
  - b) The bill is not a duplicate/ certified true copy.
  - c) There is no outstanding amount due to the medical institution.
  - d) The amount covered by Medisave is approved, if applicable
  - e) The amount covered by Medishield Life and/ or Integrated Shield Plan is printed on the bill, if applicable.
- 5. If I have used Medisave to for my medical expenses, what document do I submit?

Please submit a copy of the Medisave Transactions Statement that contains these information:

- a) Medical institution and Hospital Registration Number (HRN)
- b) Name of the patient
- c) Amount deducted from Medisave Account

You may download the MediSave payment and claims statement (with transaction dates within the last 15 months) by logging in to <<u>www.cpf.gov.sg/healthcare</u>> with your Singpass and proceed to 'Latest healthcare payments and claims' to view the payment details.

6. What is the order of reimbursement?

We will pay according to the order listed below.

- Policy Holder/ Employee if they have settled the eligible medical bills by cash
- Medisave account as indicated in the tax invoices or bills
- Patient's CPF MediShield Life or Integrated Shield Plan (if applicable) in accordance with the CPF Act.
- Can I claim for the Medical Report fee?
  This depends on the benefit entitlement in your policy. Please refer to the Schedule of Benefits.
- If I have claimed from Medishield Life/ Integrated Shield Plan/ another insurer for my medical expenses, what document do I submit?
  Please indicate in the claim form that you are lodging a claim with another insurer and submit a copy of the Medishield Life/ Integrated Shield Plan/ another insurer settlement advice.
- When can I get my claim reimbursement? Claims are processed within 21 (Outpatient)/ 28 (Inpatient/ Day Surgery) working days <u>after we</u> receive all required documents.

For claims that require further clarification, HSBC Life will inform you as we need more time to review your claim. For incomplete claim submission, HSBC Life will get in touch with you for more information.



10. Who do I contact if I need any help or clarification? Please contact/ email us at the following: -

i) Claims Email: ask@alliancewe.com cc: sales@alliancewe.com

II) Superior Incharge: +65 97876986 Tommy Chew(sales@alliancewe.com)

Disclaimer: Claim of insurance will take time as it involve CPF board(Medisave Team), MedishieldLife Team, Hospital(Billing Team), Clinic(if not using inhouse doctor), Insurer(integrated Shield Plan), Insurer(Corporate Insurer). We will do our best to help on the complex process with multi department.