

来华留学生保险

全程医疗管理服务电话: **400 810 5119**

服务流程----全程医疗管理

从不舒服开始

打电话
4008105119

保险确认

责任告知

疾病咨询

疾病诊治指导

网络医院指导

门诊科室建议

门诊就医

就医注意事项指导

理赔单证留备指导

门诊治疗:

学生先支付,后期材料快递
服务公司进行垫付报销

病情确实需住院治疗:

提交委托书及护照复印件,
启用服务公司垫付

理赔应备:

按要求备齐下列资料→邮寄到保险公司

所需材料 申请项目	护照复印件 及签证页复 印件	医院发票 原件	病历复印件(每次 就诊病历日期与 发票日期相对应)	费用 明细	意外事故 证明	出院小结 或住院病 历复印件	银行存折复印 件或银行卡客 户信息表	理赔 申请书
意外门诊	需要	需要	需要		需要		需要	需要
疾病门诊	需要	需要	需要				需要	需要
住院(因意外)	需要	需要		需要	需要	需要	需要	需要
住院(因疾病)	需要	需要		需要		需要	需要	需要

注意事项:

1. 就诊前务必拨打电话 **400 810 5119** 进行寻诊。
2. 意外事故需提供【意外事故证明】及相关部门的定性材料(如: 交通事故必须出具交通管理部门的交通事故责任认定书等)。
3. 银行账户信息必须包括账号、账户名和开户行信息。

理赔材料寄送地址: 北京市西城区金融街 23 号平安大厦 9 层(邮编 100033)

收件人: 留学保险项目组

电话: 400 810 5119

欢迎关注来华留学生保险微信服务号



Insurance for Overseas Students in China

Whole Process Health Service Hotline: **400 810 5119**

Service Procedure—Whole Process Health

Feeling uncomfortable

Call 4008105119

Insurance confirmation

Responsibility notification

Illness consulting

Illness diagnosis guidance

Internet hospital guidance

Outpatient advice

Outpatient Services

Guidance for medical-seeking precautions

Guidance for claim documents

Outpatient Care:

Students need to pay first and then submit required claim documents through express service for reimbursement.

Hospitalization Care:

Students need to submit power of attorney and copy of passport and initiate the advance payment process of the Service Company.

Claim Settlement Preparation:

Prepare below documents according to requirements--- send these documents to insurance company through

Required Document Application Item	Copy of passport and visa page	Original Invoice from hospital	Copy of medical record (the date of each medical care should correspond with date in invoice)	Original of detailed expenditure sheet	Accident report	Copy of discharge summary or copy of hospitalized medical record	Copy of Bank deposit book or client information table for bank card	Claim application form
Accident outpatient	Required	Required	Required		Required		Required	Required
Illness outpatient	Required	Required	Required				Required	Required
Inpatient (accident)	Required	Required		Required	Required	Required	Required	Required
Inpatient(illness)	Required	Required		Required		Required	Required	Required

Note:

- Before seeing a doctor, please call 4008105119 for medical advice;
- For accidents, accident reports or qualitative documents from relevant authorities (for example, traffic accident responsibility definition issued by traffic authority for traffic accident);
- Bank account information needs to cover account name, number and opening bank information.

理赔材料寄送地址：北京市西城区金融街 23 号平安大厦 9 层(邮编 100033)

收件人：留学保险项目组

电话：400 810 5119

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