## Insurance for Overseas Students in China

## ： 4008105119

## Service Procedure—Whole Process Health



## 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 <br> Document <br> 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：
1．Before seeing a doctor，please call 4008105119 for medical advice；
2．For accidents，accident reports or qualitative documents from relevant authorities（for example，traffic accident responsibility definition issued by traffic authority for traffic accident）；
3．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 8105119

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