

ICBC 工银安盛人寿  
ICBC-AXA LIFE



微信订阅号 微信服务号 官方APP

24 小时尊贵服务热线 400-650-1278  
Hours Service Hotline

[www.icbc-axa.com](http://www.icbc-axa.com)



寰球系列高端医疗保险  
GLOBALCARE MEDICAL INSURANCE

服务指南  
SERVICE GUIDE

## ◀◀ 公司简介

工银安盛人寿由中国工商银行、法国安盛集团、中国五矿集团合资组建，公司坚持保险姓保、回归本源，坚定走好中国特色保险发展之路，**通过实施“七大工程”，向“七最目标”不断迈进**，为金融强国建设贡献更大力量。

## ◀◀ Company Profile

ICBC-AXA Life is a joint venture established by the Industrial and Commercial Bank of China, the AXA Group, and China Minmetals Corporation. Committed to the core insurance principle that insurance is about protection and guided by a development path with Chinese characteristics, ICBC-AXA Life pursues “**Seven Initiatives**” to achieve the “**Seven Goals**” and makes more contribution to building China into a financial powerhouse.

## ◀ 前言

### 尊敬的客户：

感谢您选择工银安盛人寿保险有限公司（以下简称“工银安盛人寿”、“我们”），我们致力于为您和您的家人提供优质、专业的保险服务。

本服务指南旨在帮助您了解工银安盛人寿为您提供的各项保险服务及具体流程，主要包括联系我们、预授权服务、直接结算服务、事后理赔服务、直付医疗机构、增值服务、手机自助服务、以及常见问题与解答。

请您注意：本服务指南不构成保险合同的一部分，具体保险责任以您的保险合同及保险条款为准。

工银安盛人寿祝愿您及家人身体健康、更好地享受生活！

工银安盛人寿保险有限公司

## ◀ 联系我们

### ◇ 服务热线

中国大陆地区请拨打：400-650-1278

其他国家或地区请拨打：+86 21 60970046

无论您身处何处，您都可以随时随地拨打7\*24小时免费双语服务热线，我们的客户服务代表具有流利的中英文交流能力，会针对您的提问做出悉心的解答。

### ◇ 电子邮箱

您可以通过电子邮件与我们联系，电子邮箱：[icbc-axa@healthchc.com](mailto:icbc-axa@healthchc.com)，我们的客户服务代表将会在24小时内回复您的邮件。您也可以直接联系您的销售服务人员获得相关的保险服务。

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# 预授权服务

在被保险人准备接受下列特定的医疗项目前，被保险人需要至少提前48小时向我们提出申请，获取我们对医疗项目的事先授权批准，以便我们与医疗机构对被保险人的医疗项目进行预先审核与安排，以使被保险人顺利就诊与获得保险补偿。

## 需要申请预授权的项目

任何住院治疗、手术治疗、日间护理或分娩

任何单价在8000元以上的门诊检查及治疗项目

任何保障区域外的紧急治疗

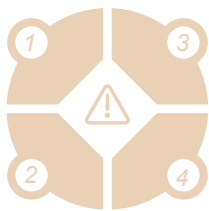
化学治疗、放射治疗、血液或者腹膜透析、器官移植后抗排斥治疗、康复治疗

紧急救援

## 预授权申请注意事项

若您对被保险人即将进行的治疗项目不能确定是否需要预授权，建议您拨打会员卡上的服务热线咨询；

紧急情况下未能及时申请预授权的，被保险人应在医疗项目发生后48小时内以书面形式通知我们。



被保险人在进行上述治疗前未获得事先授权或在紧急情况下未能于规定时间内通知我们，对于被保险人发生的合理且必须的医疗费用，我们有权按照合同约定计算的赔付金额再乘以60%的比例来给付保险金。

请您注意，批准预授权不等于承诺全额理赔，被保险人还需要支付其保险计划中可能涉及的自付部分。

## 预授权的申请流程

被保险人在我们的直付医疗机构就诊，预授权申请由您或您就诊的医疗机构协助发起，可拨打24小时服务热线400-650-1278或者发送邮件至[icbc-axa@healthchc.com](mailto:icbc-axa@healthchc.com)获得帮助。



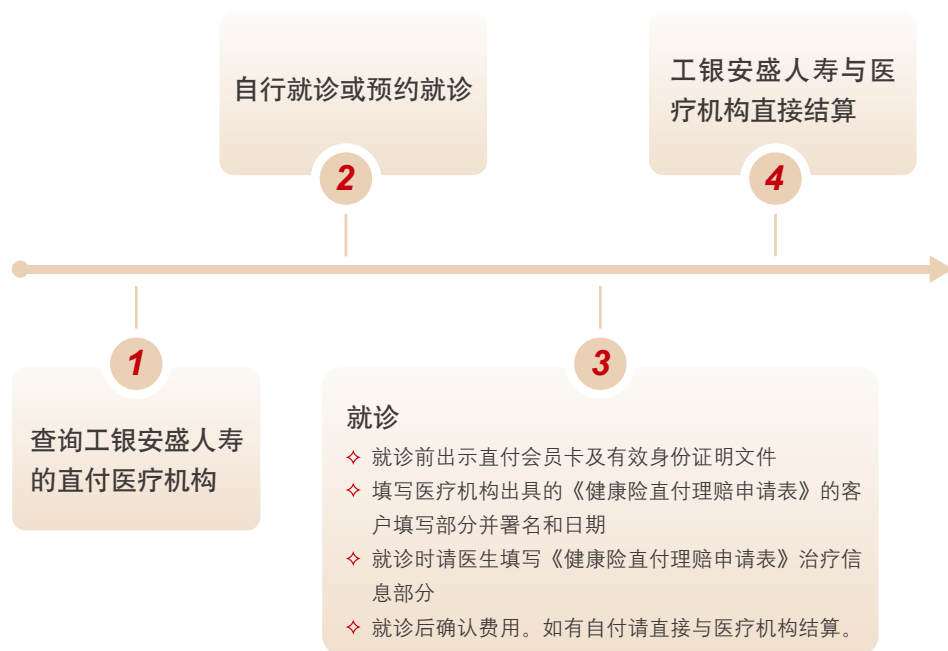
### 发起预授权申请需要提供以下资料：

- ◇ 预授权申请表（医疗信息部分须由执业医师填写并签名），申请表可以通过登陆<https://hc.icbc-axa.com>下载，或者拨打24小时服务热线400-650-1278查询，或者向您的销售服务人员索取；
- ◇ 被保险人身份证明复印件和会员卡复印件；
- ◇ 如预授权申请表中医疗信息部分填写不够完整，我们可能会需要申请人提供相关病历、检查报告等资料；
- ◇ 预估费用明细（按照申请表填写明细费用或者另附费用明细材料）。

## 直接结算服务

被保险人在我们的直付医疗机构就诊时，无需支付保险计划责任范围内的医疗费用，也无需向我们申请理赔，该部分医疗费用由我们与医疗机构直接结算。

### 直接结算服务就诊流程

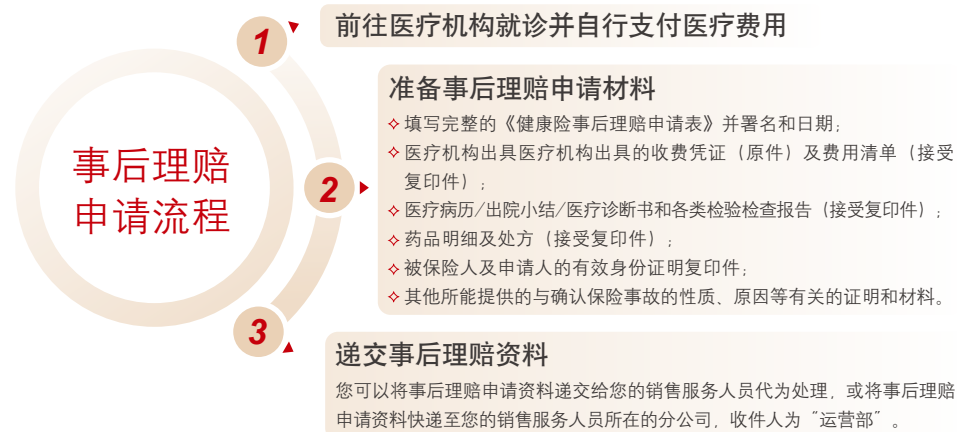


### 直接结算服务注意事项

对不属于保险计划责任范围或按合同约定应由被保险人承担的医疗费用，被保险人需要在就诊时向医疗机构支付。如应由被保险人自行承担的费用在就诊时并未支付，该费用会由我们在与医疗机构结算后向被保险人收取，或由医疗机构在收到我们拒绝相关费用结算的通知后向被保险人收取。

## 事后理赔服务

事后理赔是指被保险人在就诊时自行支付医疗费用，通过填写《健康险事后理赔申请表》，递交理赔申请资料向我们索赔，我们根据保险合同的约定，对保险事实和保险责任进行审核、确认，处理保险赔偿。



### 事后理赔时效

我们在收到完整理赔申请资料后的5个工作日内完成审核并反馈理赔结果；如果案件复杂，我们将在收到完整理赔申请资料后的30日内完成审核并反馈理赔结果。

### 事后理赔注意事项

- ◇ 为顺利和及时为您提供理赔服务，请清晰完整地填写理赔申请表，递交完整的理赔申请资料；未成年人的理赔申请由其监护人作为申请人提出；
- ◇ 由于理赔申请收讫通知书和理赔通知书均通过电子邮件发送，我们建议申请人填写完整有效的电子邮箱地址；
- ◇ 基于监管要求，请申请人提供本人有效银行账户信息，理赔款将转账汇入申请人指定的本人银行账户。

### 理赔申诉

如果您对理赔结果不满意，请联系您的服务人员，他/她会帮助您处理整个流程。您可在收到理赔结果后**60天内**递出理赔申诉。理赔申诉受理小组收到申诉后会审核您的案例并尽快给予答复。

# 直付医疗机构

您在我们的直付医疗机构范围内就诊，无需支付保障责任范围内的医疗费用，而由我们与医疗机构直接结算。

我们为您提供的直付医疗机构遍布国内外，在中国我们与近600家公立医院特需部、国际医疗中心及中外资私立医疗机构建立了合作。与此同时，我们也有遍布海外的医疗网络，致力于为您提供安心、便捷、舒适的医疗服务，为您的海外出行提供意外和健康保障。

## 国内直付医疗机构

与我们合作的直付医疗机构已经覆盖12个省，知名私立医疗机构如：和睦家医疗集团、百汇医疗集团、新世纪医疗集团等。知名公立医疗机构如：北京协和医院、中日友好医院、上海瑞金医院、北京大学深圳医院等。

直付医疗机构列表和昂贵医院列表会实时更新，您可以通过关注“工银安盛人寿官微”，下载“工银安盛人寿”APP，或者拨打24小时服务热线400-650-1278进行查询。您也可以通过扫描右边二维码查阅直付医疗机构列表和昂贵医院列表。



直付医院 Direct Billing Hospital



昂贵医院 Secondary Hospital

## 国外直付医疗机构

我们在全球多个地区和国家设有合作医疗网络，具体请拨打24小时服务热线400-650-1278进行咨询。

# 增值服务

## 门诊预约 01

我们为您提供直付医疗机构内的门诊及专家预约服务，请您提前5个工作日拨打24小时服务热线400-650-1278进行预约。

## 导医与陪诊 03

我们向您提供陪同就诊服务。如您需要，请提前2个工作日，拨打24小时服务热线400-650-1278进行预约。

## 电话医疗咨询 04

您如果需要医疗建议、用药咨询、慢性病建议，营养建议等，请拨打24小时服务热线400-650-1278向我们的医疗专家进行电话医疗咨询，请注意此咨询仅为医疗建议，而非医疗诊断。

## 心理热线咨询 05

如您有心理咨询需要，请拨打24小时服务热线400-650-1278获得心理热线咨询服务，由具有800小时咨询经验以上的心理咨询师为您提供职场压力、情绪管理、人际关系等心理方面的答疑解惑并给予分诊咨询建议。

### 温馨提示：

- 增值服务内容及服务细则以我司官方网站最新的公告为准，同时我司保留对各类服务内容、服务条款的最终解释权。
- 增值服务由我司合作的第三方服务商为您提供，若您与服务商因服务而产生的任何纠纷，我司会尽力协调解决，但不因此负任何责任。

## 02 第二诊疗意见

如您不幸罹患《严重疾病列表》中的特定疾病，根据您提供的完整医疗资料，我们为您提供国内外精英医疗专家的第二诊疗意见，以帮助您了解全球范围内对于该疾病及病情较新较先进的治疗方法、技术和流程，提供优质的医疗建议。

请您拨打24小时服务热线400-650-1278申请该项服务，同时您需提供特定疾病相关医疗报告资料、身份证明扫描件，并签署同意书。我们在20个工作日内向您提供详细的第二诊疗意见总结报告。

《严重疾病列表》可登录我司官网<https://hc.icbc-axa.com>查询。

## 06 全球紧急救援

当被保险人在旅行中遭受意外伤害事故或突发性病，经确认需要医疗援助的，我们将安排至距事发地就近的医院就医，或安排离事发地就近的医生至事发地治疗，在服务有效期内您可享有的服务包括但不限于：



紧急运送和返回



遗体送返



紧急探亲

若您遇到紧急情况，请拨打24小时服务热线400-650-1278进行报案，核实情况后，我们会为您安排紧急救援服务。



## 首次登录

## 方式一：“工银安盛人寿”APP

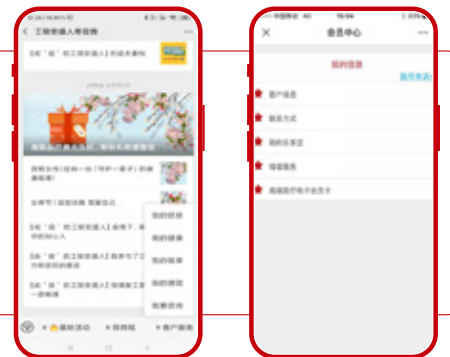


## 方式二：微信

- 1** 扫描右方微信服务号二维码进行关注，或在微信界面右上方“+”处点击“添加朋友”，搜索“ICBC-AXA95359”或“工银安盛人寿官微”后关注我司微信服务号



- 2** 在右下角“客户服务”中点击“我的信息”，进入会员中心页面后，点击“客户信息”跳转至客户身份认证页面，按照页面提示进行操作，完成高级认证。



## 线上服务内容

- ❖ 查询保单信息，了解保险福利涵盖范围
- ❖ 查询理赔情况，在线递交自助理赔申请
- ❖ 查询最新的直付医疗机构列表
- ❖ 查询电子会员卡，e卡在手，就诊无忧

# 常见问题与解答

## Q 就诊后，我应当如何申请理赔？

A：如您在工银安盛人寿直付医疗机构就诊并且使用直接结算服务，您无需向我们申请理赔，直付医疗机构会与我们进行结算；如您未在我们的直付医疗机构就诊并且已向医疗机构支付医疗费用，请您填写事后理赔申请表，并将与本次就诊相关的病例资料和发票原件通过您的销售服务人员将材料递送给我们或者通过工银安盛人寿官微或工银安盛人寿APP递交自助理赔。目前我们暂不接受电子邮件或传真方式递交，除了在您首次递交资料后我们要求您补充其他相关资料的情况。

## Q 我应当在就诊后多久向工银安盛人寿申请理赔？

A：按本计划约定，您应当在就诊后的30天内通知我们，并在60天内向我们申请理赔。我们建议您尽早向我们递交理赔，使您的权益能尽早得到保障。

## Q 申请理赔时，可以使用发票复印件吗？

A：发票必须是由医院出具，并且须同时有医院收费章与税务章。如您在境外医院就诊，没有原始发票的，请尽可能向我们提供您已支付该笔医药费的凭证，例如收银单、签购单或收据等。

## Q 理赔款会支付给谁？

A：理赔款应当支付给被保险人本人或其监护人。

## Q 理赔款的币种是如何确定的？

A：理赔款与保费支付的币种都是人民币，暂不支持外币结算理赔款。

## Q 我在境外就诊，申请理赔的币种与保单币种不同，汇率是如何确定的？

A：按照保险条款约定，如果您申请理赔的币种和我们应给付币种不同，我们将按照我们保险事故发生日当天的官方公布汇率进行兑换。我们不对任何由于货币兑换的浮动而可能对您造成的经济损失负责。

## Q 如我对理赔结论有异议该怎么办？

A：如您对理赔结论有异议，请您将您的意见形成书面材料并通过快递或电子邮件的方式递交给我们。我们在收到您的申诉后，将重新审核您的理赔申请。如您有新的证明材料，也请一并递交给我们。

## Q 如果我的会员卡或者保单不慎遗失该如何操作？

A：您可以与您的销售服务人员联系，工银安盛人寿在收到您的书面申请后将在2个工作日向您补发新的会员卡或者保险合同。

## Q 我就职的公司为我投保了团体高端医疗保险，当我从公司离职后，会员卡和保险合同需要如何处理？

A：在您办理离职手续时，请将您的会员卡和保险合同(若有)交还给贵公司的保险经办部门。

## Q 如果保单年度中我想变更我的个人资料或增加被保险人等如何操作？

A：您可以联系您的销售服务人员、经纪公司或拨打我们的服务热线，我们将在第一时间与您联系并处理。

## Q 为什么我在官微和工银安盛人寿APP上都不能注册认证成功呢？

A：请确保您在注册和认证页面输入的五要素信息与您持有的合同信息保持一致，建议与您的销售服务人员联系，在销售服务人员的帮助下完成相关申请。



## ◀ BRIEFING

Dear customers:

Thank you for choosing ICBC-AXA Assurance Co., Ltd. (hereinafter referred to as ICBC-AXA Life or We). We are committed to providing quality and professional insurance services for you and your family.

This Customer Service Guide is designed to help you understand the various insurance services and detailed process offered by ICBC-AXA Life, including contact us, pre-authorization service, direct-billing service, reimbursement claim service, network providers, value-added services, mobile self service and FAQs.

Please note that this Service Guide is not a formal part of insurance contracts. For benefits, please refer to your insurance contract and insurance clauses.

We wish you and your family good health and a better life!

ICBC-AXA Assurance Co., Ltd.

## ◀ Contact Us

### ◇ Service Hotline

Mainland China: **400-650-1278**

Other regions: **+86 21 60970046**

No matter where you are, we offer a 24/7 toll-free bilingual service hotline. Our customer service representatives can fluently speak English and Chinese and will answer your questions in detail.

### ◇ Email

You can also contact us via email at [icbc-axa@axa-assistance.com.cn](mailto:icbc-axa@axa-assistance.com.cn). Our customer service representatives will reply to your email within 24 hours. You can also contact your sales advisor directly to obtain relevant insurance services.

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# Pre-authorization Service

Before the insured intends to accept the following specific medical treatments, the insured shall apply for our pre-authorization at least 48 hours in advance so as to obtain our pre-authorization of the medical treatments, allow us and network providers to conduct preliminary review and arrangement of the medical treatments, and ensure that the insured can receive insurance compensation.

## Projects that require pre-authorization

Any inpatient treatment, surgery, daycare treatment, or childbirth;



Any single outpatient test which is charged



Emergency medical treatment



Chemotherapy, radiotherapy, blood or peritoneal dialysis,



Evacuation

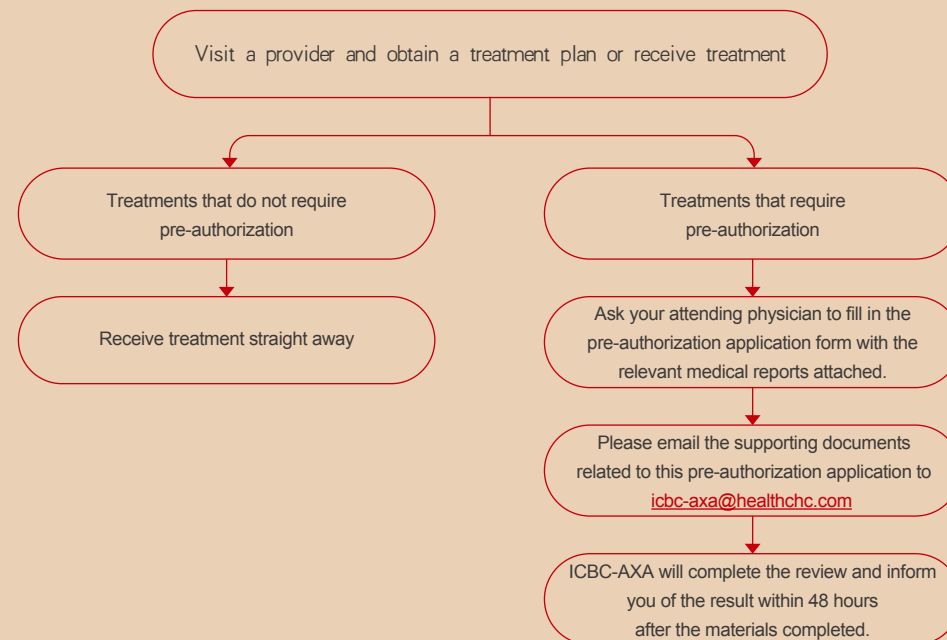


## Notes on pre-authorization application

- ❖ If you are unable to determine if the treatment to be received by the insured requires pre-authorization, we recommend you to call the hotline on the membership card.
- ❖ In case of failure to apply for pre-authorization beforehand under an emergent circumstance, the insured shall notify us in writing within 48 hours since the occurrence of the medical treatments.
- ❖ If the insured does not obtain pre-authorization before the aforementioned treatments or fails to notify us within the specified time, as agreed in the contract, only 60% of the calculated benefits will be covered by us for any incurred fee that is reasonable and necessary.
- ❖ Please note that approval of your pre-authorization application does not mean that we commit to paying the full amount of your claim. The insured also needs to pay self-paid items, if any, in his/her insurance plan.

## Application procedures for pre-authorization

If the insured has a medical visit to one of our network providers, the pre-authorization application should be initiated by you or the medical institution. For assistance, call the 24-hour service hotline on 400-650-1278 or send an email to [icbc-axa@healthchc.com](mailto:icbc-axa@healthchc.com)



The following materials are required to initiate the application for pre-authorization:

- ❖ Pre-authorization Application Form (The part on medical information must be filled out and signed by a certified doctor). You can download the form from <https://hc.icbc-axa.com>, or call the 24-hour toll hotline : 400-650-1278 or ask for it from your sales advisor
- ❖ Copy of the ID card or passport and membership card of the insured;
- ❖ If the part on medical information of the **Pre-authorization Application Form** is not filled out completely, we may need the applicant to provide relevant medical records, medical examination reports, and so on;
- ❖ Estimated cost details (Fill out cost details according to the **Pre-authorization Application Form** or attached materials on cost details).

## Direct-billing service

When the insured has a medical visit to our network providers, he/she neither pays the medical costs covered by the insurance plan nor applies for claim from us. We shall directly settle the payment with the network providers.

### Procedures for direct-billing service

- 1 Inquire about the hospitals in the network cooperating with ICBC-AXA Life
- 2 See a doctor or make an appointment with a doctor
- 3 See a doctor
  - ◇ Present your direct billing membership card and valid identification document before seeing a doctor
  - ◇ Fill out and sign the part of the Direct Billing Medical Claim Form to be filled out by customers and date
  - ◇ Ask the doctor to fill out the part of the Direct Billing Medical Claim Form of treatment information
  - ◇ After the visit, the insured needs to confirm medical cost. If your policy requires you to pay for co-payment, please settle these costs directly with the hospital.
- 4 ICBC-AXA Life directly settle the payment with the network providers.

### Notes on Direct-billing service

For medical costs not covered by the plan or those agreed to be paid by the insured, the insured needs to pay the network providers during his/her medical visit. If the costs to be paid by the insured are not paid during the medical visit, we will settle the costs with the network providers and collect them from the insured, or the medical network providers can collect them from the insured after receiving our notice on the rejection of relevant cost settlement.

## Reimbursement claim service

Reimbursement claim service refers to the situation that after the insured pays his/her medical costs by himself/herself, the insured fills in the Medical Reimbursement Claim Form and submits claim materials. As agreed in the insurance contract, we will review and confirm the insurance truth and responsibilities and process insurance compensation.

### Application procedures for reimbursement claim

- |   |   |  |
|---|---|--|
| <ol style="list-style-type: none"> <li>1 Visit network providers and pay his/her medical costs by himself/herself.</li> </ol> | <ol style="list-style-type: none"> <li>2 prepare reimbursement claim materials           <ul style="list-style-type: none"> <li>◇ A Medical Reimbursement Claim Form fully completed and signed by the applicant with date;</li> <li>◇ The original invoice and breakdown (Duplicate version is acceptable) issued by network providers;</li> <li>◇ Medical records/summary of discharge/formal diagnosis and various examination reports (Duplicate version is acceptable);</li> <li>◇ Drug list and prescription (Duplicate version is acceptable);</li> <li>◇ ID or passport copy of the insured/the applicant;</li> <li>◇ Other materials or confirmation which are helpful for the claim.</li> </ul> </li> </ol> | <ol style="list-style-type: none"> <li>3 Submission reimbursement claim materials           <p>You can submit your reimbursement claim materials to your sales advisor or send them via express to the branch office where your sales advisor is located. The recipient shall be "Operation Department".</p> </li> </ol> |
|---|---|--|

### Standard Level Agreement of reimbursement claim

After receiving the complete claim materials, we will complete the assessment and feedback the claim result within 5 working days. In case of complicated cases, the above procedures will be completed within 30 days.

### Notes on reimbursement claim

- ◇ For the purpose of smooth and timely claim service, please clearly and completely fill out the claim application form and submit complete claim materials. The reimbursement claim for child shall be submitted by her/his guardian.
- ◇ Since the Claim Acknowledgement and Claim Settlement Letter are sent by e-mail, we recommend the applicant to provide a complete and valid e-mail address.
- ◇ Based on regulatory requirements, the applicant is required to provide a valid bank account. The reimbursement will be transferred to the authorized bank account of the applicant.

### Claim Appeal

If you are not satisfied with the decision of your claim, please contact your sales advisor, who will assist you with the appeal process. You can submit an appeal within **60 days** after being notified of the claim result. After receiving your appeal, the claim appeals team will review your case and notify you of their decision as soon as possible.

## Network providers

When you have a medical visit to our network providers, you need not pay the medical costs covered by the insurance plan. We shall directly settle the payment with the network providers.

The network providers of ICBC-AXA Life providing direct-billing service are spread all over domestic and overseas. We have direct-billing service cooperation with over 600 VIP departments and international medical centers of public and private medical facilities. Moreover, we also have overseas network providers that can provide your assured, convenient and comfortable medical services and assistance for accident and healthcare during your trip.

### Domestic network providers

The medical institutions in our network are located across 12 provinces and include renowned private medical institutions such as United Family Healthcare, Parkway Health and New Century Healthcare, as well as leading public medical institutions such as Beijing Union Medical College Hospital, China-Japan Friendship Hospital, Shanghai Ruijin Hospital, Peking University Shenzhen Hospital etc.,

Direct Billing Hospital List and Secondary Hospital List are updated on a real time basis. For more information, you can follow our We Chat service account "工银安盛人寿官微", download the "工银安盛人寿"APP, or call our 24-hour service hotline on 400-650-1278. You can also check Direct Billing Hospital List and Secondary Hospital



直付医院 Direct Billing Hospital



昂贵医院 Secondary Hospital

### Overseas network providers

We have established an extensive worldwide network of medical institutions. For details, please call our 24-hour service hotline on 400-650-1278.

## Value-added Services

### 01 Outpatient appointment

Our direct billing network providers access to outpatient services and specialist appointments. To schedule an appointment, please call our 24-hour service hotline on 400-650-1278 five working days in advance.

### 02 Second medical opinion

If you unfortunately suffer from a specific disease in the "Critical Diseases List", base on the medical information provided by you, we will provide you with the second medical opinion from elite medical specialists at domestic or/and international medical institutions, and help you understand the world's most advanced treatment methods, technologies and procedures according to your condition, and provide the better medical advice.

To access the service, please call the 24-hour service hotline on 400-650-1278. You will be required to provide scanned copies of relevant medical reports and your identification document, and sign the informed consent form. We will provide you with a detailed second medical opinion within 20 working days.

"Critical Diseases List" is available on our website <https://hc.icbc-axa.com> to inquiry.

### 03 Medical guidance and consultation

We offer an escort service. If you require this service, please call the 24-hour service hotline on 400-650-1278 at least two working days in advance.

### 04 Medical Advice via Telephone

If you require advice on medical treatments, medication, chronic diseases, nutrition, or other issues, please call our medical experts at 400-650-1278 to seek for medical advice. Please note that it is only a medical advice, rather than medical diagnosis.

### 05 Psychic Hotline

If you need any psychological counseling, you can obtain the psychological counseling by calling the 24-hour service hotline 400-650-1278. A psychological counselor who has consultation experience of at least 800 hours will answer your questions concerning workplace stress, emotion management, interpersonal relationship and other psychological problems, and provide triage advice to you.

### 06 Worldwide evacuation and repatriation

When the insured suffers from an accident or acute illness and requires medical assistance upon confirmation, we will arrange the insured to receive medical treatment at the nearest local hospital or dispatch a local physician closest to the site to offer treatment. Within the period of service validity, you are entitled but not limited to the following services:



Evacuation & repatriation



Repatriation of mortal remains



Compassionate emergency visit

In the event of a medical emergency, please call the 24-hour service hotline on 400-650-1278. After verifying the situation, we will arrange emergency medical assistance for you.

#### WARM REMINDER:

- For details of value-added services and relevant terms and conditions, please refer to our latest official announcement on our official website. We reserve the right to final interpretation of service provisions and relevant terms and conditions.
- Value-added services are provided by a third-party service providers cooperate with us. In the event of a dispute between you and the service provider in connection with such services, we will try our best to mediate, but shall not assume any responsibility for the dispute.

## First login



Press and hold  
QR code to get more information

## 1.Login

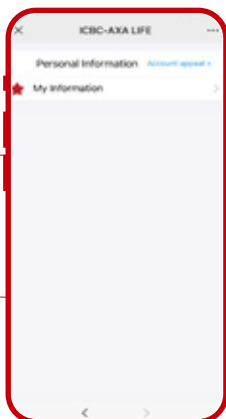
1

Go to the ICBC-AXA Life official English WeChat account (Account Name: ICBCAXA LIFE ASSUR-ANCE) and click on **【MyInfo】** → **【Personal Information】** on the bottom right.



2

After entering the personal information page, click on **【My Information】** to go to the customer ID authentication page.



## 2.Customer ID Authentication (Only Passport Supported)

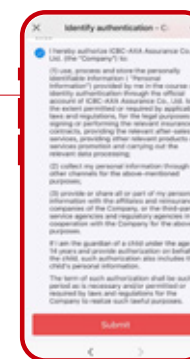
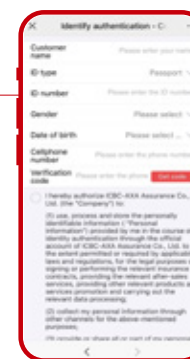
1

Take relevant photos as required and then submit.



2

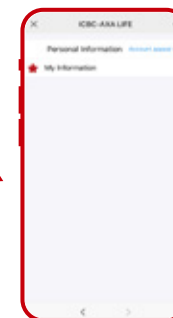
Manually enter ID information (**must be the same as the ID information of your insurance application, your name must be the same as your membership card**). Enter your cellphone number and verification code to submit the application. We'll send you the feedback in one working day.



## 3.Account Appeal

Click on **【My Info】** → **【Personal Information】** → **【Account appeal】** to go to the appeals page.

The process for appeals is the same as the process for ID authentication as described above. Customer information authentication details will be removed once the appeal is successfully completed.



## Online service content

- ❖ Inquire about policy information to find out more about your coverage
- ❖ Inquire about claim status and submit self-service claim applications online
- ❖ Inquire about the latest list of hospitals in our direct billing network
- ❖ Apply for electronic membership card to make billing easier

# Frequently Asked Questions (FAQs)

## Q How should I apply for a claim after seeing a doctor?

A: If you have a medical visit to our network providers and used the direct billing service, you do not need to apply for a claim with us as we shall directly settle the payment with the network providers; if you saw a doctor and already paid the medical expenses to the hospital, please fill in the **Medical Reimbursement Claim Form** and submit materials related to your visit including medical record and original copy of the invoice through your sales advisor. You also can submit your claim via our official WeChat and 工银安盛人寿APP. Currently, we do not accept submissions via email or fax, unless we request supplementary information from you following the initial submission.

## Q How many days after my visit should I apply for a claim with the ICBC-AXA Life Insurance?

A: As agreed in this plan, you should notify us within 30 days and apply for a claim within 60 days of your visit. We recommend that you submit your claim to us as early as possible so that we may provide the earliest protection of your rights and interests.

## Q Can I use a copy of the invoice when applying for a claim?

A: The invoice must be issued by the hospital and stamped with both the receipt seal and the tax seal. If you visited a doctor at an overseas hospital where invoice was not issued, please provide us with physical proof of your payment for such medical expenses, such as a cash receipt, payment slip or receipt, etc.

## Q To whom will the claim be paid?

A: The claim reimbursement should be paid to the insured or a guardian thereof.

## Q How about the currency of claim reimbursement?

A: Both the claim reimbursement currency and premium currency are in RMB, foreign currency settlement is not supported currently.

## Q If I visited a doctor at an overseas hospital and the currency for claim settlement is different from the policy currency, how will the exchange rate be set?

A: As agreed in the insurance clauses, if the currency in which you apply for a claim is different from the currency that we should pay, we will convert the claim based on the exchange rate officially published by the relevant authority on the day when the insured event occurred. We bear no responsibility for any economic loss that may arise on your part due to fluctuations in the exchange rate.

## Q What am I supposed to do if I disagree with conclusion of an claim?

A: If you disagree with conclusion of an claim, please submit your concerns in a written format via express delivery or e-mail. After receiving such, we will re-assess your claim application. If you have any additional supporting material, please also make sure to submit this.

## Q What shall I do if I lost my membership card or insurance contract?

A: You can contact your sales advisor. ICBC-AXA Life will re-issue your membership card or insurance contract to you upon receipt of your written application within 2 working days.

## Q My company buys group medical insurance for me. After I resign, how will my membership card and insurance contract be processed?

When you go through your resignation procedures, please return your membership card and insurance contract (if have) to the insurance contact person of your company.

## Q What should I do if I want to change my personal information, or add insured in the middle term of the policy ?

A: You can contact your sales advisor, broker or call our service hotline. We will get back to you as soon as possible.

## Q Why can't I register and verify my identity via the official WeChat account or the app?

A: Please ensure that the information you entered on the registration screen is consistent with the details in your policy contract. For assistance with your application, we recommend that you contact your sales advisor.