Θ	三 空 洲 保 險 ASIA INSURANCE
Policy Enquiry	Main >> Claim Application
Claims Enquiry	*ALL • 4
Network Doctor	incurred Date
Claim Application	Inpatient Outpatient Create
Tile 🗸	Image: Status August 2023 > Image: Status T W T F S Image: Status Type of Treatment Image: Status Total O Record Image: Status Image: Status Total O Record Image: Status

- 1. Click "Claim Application" "신청서 청구" 선택
- 2. Click calendar 달력 선택
- 3. Select your doctor visit date 의사 방문날짜 선택
- 4. Select "Inpatient" or "Outpatient" "입원환자" 혹은 "외래환자" 선택
- 5. Click "Create" "생성" 선택

	Application								
Outpatient	Claim					1	2		
Policy No.	Policy Year	Status New Constant	Insured Person		(ctor Name	1	
Incurred Date	Type of Trea	atment						d Amount	
					3	4	5		
File Description	1		- 6+	either drag-	and-drop or press t	to select docum	ent for upload		
File Add: max. Please attach f	size per docur he medical rec	ment (5MB), max. r ceipt and the releva	o. of documents upload: 5 docun int documents(if any)	ients					
Add	D 7								
1. S	elect Pa	atient's n	ame 환자 선택						
2. T	ype in l	Doctor's r	name 의사이름	- 입력					

- 3. Select type of treatment * 치료* 선택
- 4. Select currency 화폐 선택
- 5. Type in the total amount 총비용 입력
- 6. Click "+" and attached the picture of the invoice and claims document (if any) ** "+" 선택 후 송장사진 및 청구서(필요시) 첨부
- 7. Click "Add" 추가하기 선택

*Type of treatment (outpatient) *치료 종류(외래환자)

Out-patient Physician's Visit 내과의사 진료 환자

Physiotherapist's Visit / Chiropractor's Visit* 물리치료사 / 지압사 진료 환자

Out-patient Specialist's Consultation 전문의 상담 환자

Chinese Medicine Practitioner's Visit 한의사 진료 환자

Out-patient X-ray & Laboratory Tests* 엑스레이 & 병원 검사

Dental Treatment 치과

Prescribed Medicines (any source)* 처방약*

Optical 안과

**Claims document 증거서류

- Invoice / receipt from clinic 병원 송장/영수증
- Referral letter 병원 소견서
- Medical report(s) 의료 진단서