

# ALPP e-Claims Submission User Guide



The content of this User Guide will be updated from time to time.



# Content

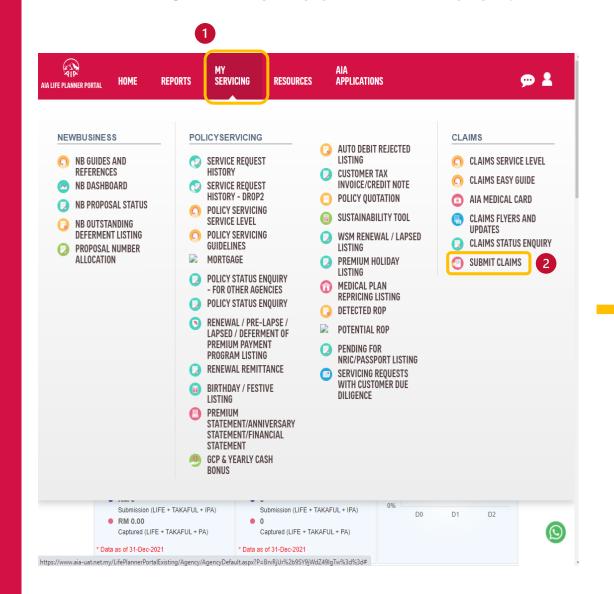


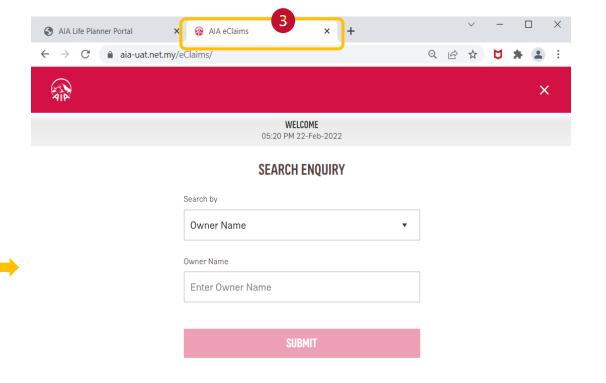
- 1. INDIVIDUAL MINOR eCLAIMS SUBMISSION
- 2. FREQUENTLY ASKED QUESTION (FAQ)
- 3. CLAIM MENU GLOSSARY

# **INDIVIDUAL MINOR eCLAIMS SUBMISSION**



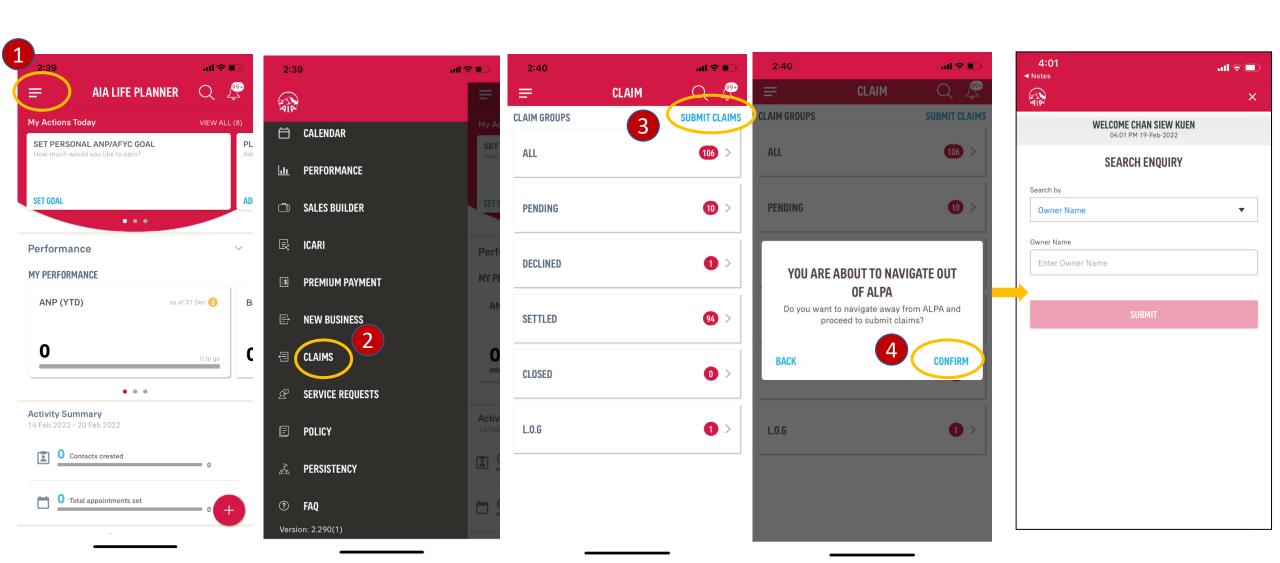
## **ENTRY POINT** FOR SUBMITTING e-CLAIM FROM ALPP



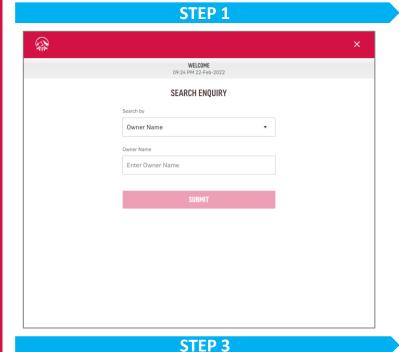


- 1. From the MENU bar on top, Click on "MY SERVICING".
- 2. Under "CLAIMS" section, click on "SUBMIT CLAIMS".
- 3. Landing page "SEARCH ENQUIRY" open in new window. (Note: Check and disable window pop-up blocker if the window is not open.)

## **ENTRY POINT** FOR SUBMITTING e-CLAIM FROM ALPA



# **SEARCH ENQUIRY**



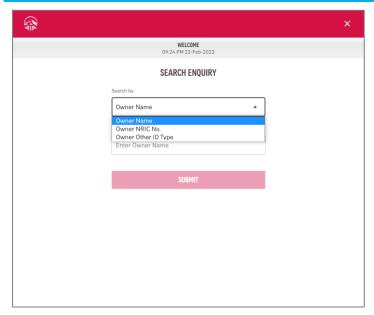
WELCOME LXFW SFYFW ZXF

SEARCH ENQUIRY

Owner Name

Liew

#### STEP 2



#### Step 1:

➤ Landing Page from Entry point, SEARCH ENQUIRY page

#### Step 2:

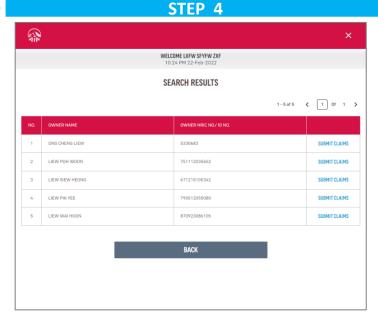
- > 3 options available in Search criteria
- > Select ONE option from the dropdown list

#### Step 3:

- Input search value based on selected Search criteria
  - Owner Name wild card search
  - Owner NRIC No. exact search
  - Owner Other ID Type exact search
- Click "SUBMIT" button

#### **Step 4:**

- Result displayed with "SUBMIT CLAIMS" function, click to proceed to start claim submission
- ➤ When click on "Back" button, user will be redirected to STEP 1



#### IMPORTANT:

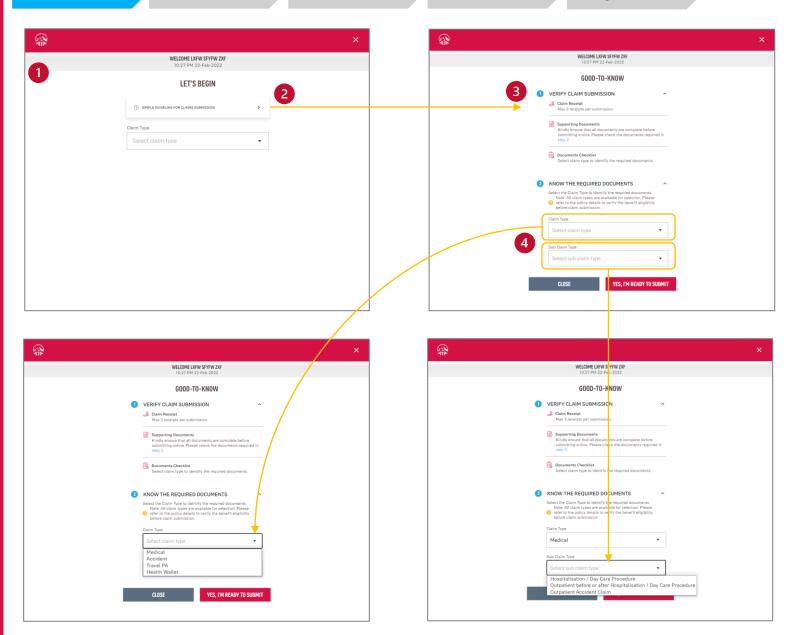
The Search Result will return only the owner with policy served by the Life Planner logs in to the respective account.

**LET'S BEGIN** 

STEP 1

STEP 2

STEP 3



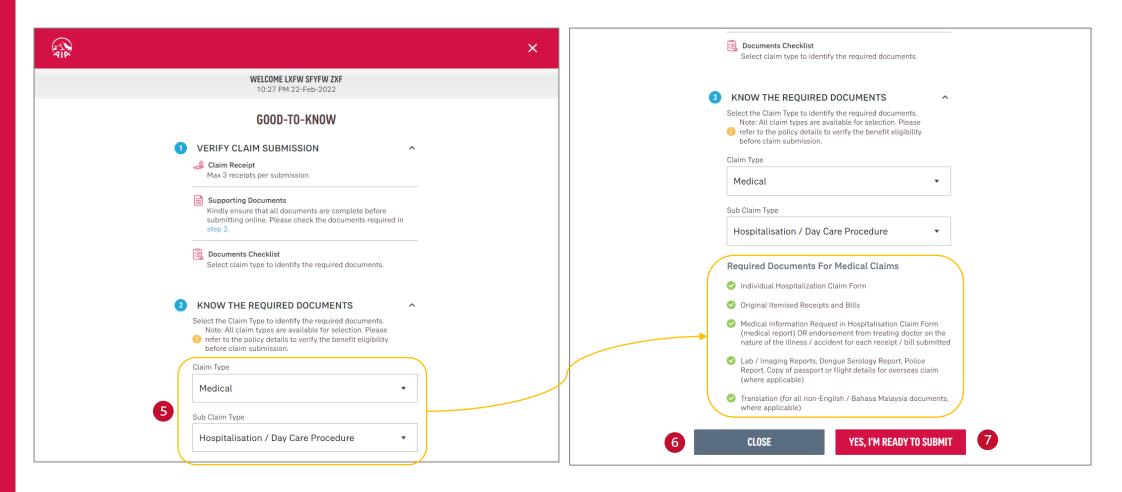
- Landing Page from SEARCH ENQUIRY STEP 4
- 2. Before starting to submit claim, you can refer to the SIMPLE GUIDELINE to prepare CLAIMS SUBMISSION.
- 3. SIMPLE GUIDELINE expanded to 2 sections:
  - VERIFY CLAIM SUBMISSION
  - KNOW THE REQUIRED DOCUMENTS.
- 4. Select Claim Type & Sub Claim Type in dropdown list.

**LET'S BEGIN** 

STEP 1

STEP 2

STEP 3



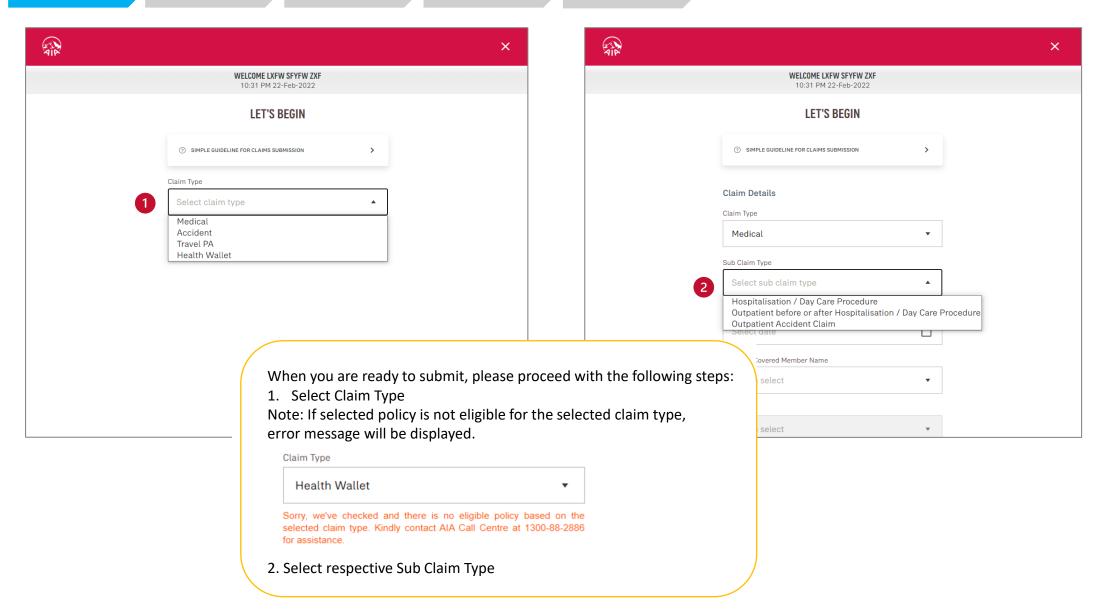
- 5. Select Claim Type and respective Sub Claim Type to know the required documents
- 6. Click "CLOSE" to end claim submission; or
- 7. Click "YES, I'M READY TO SUBMIT" button to proceed to next step

**LET'S BEGIN** 

STEP 1

STEP 2

STEP 3



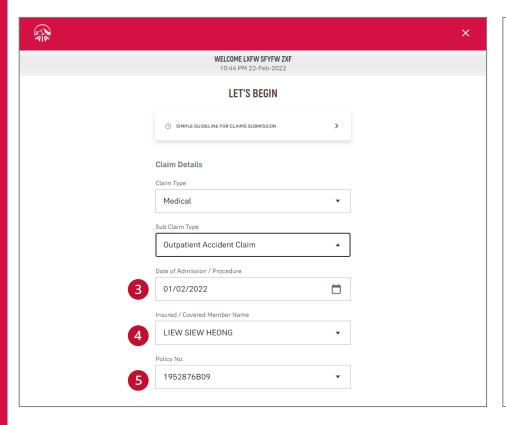
**LET'S BEGIN** 

STEP 1

STEP 2

STEP 3

STEP 4



Claim Receipt Max 3 receipts per submission IPC-122335 1000.00 01/02/2022 **TERMS & CONDITIONS** Add Receipt The insured/person covered is not allowed to submit the same claim to a different insurer/takaful operator. In the event that we discovered such instance or the claim is fictitious, we have the right to reject the claim and/or proceed with necessary action. I hereby acknowledged and confirmed that I: The insured/person covered is required to keep all records, original receipts and other supporting · am authorised by the Insured/Person documents in relation to this claim for a period of seven (7) years. Covered to submit the online claim on his/her behalf; The insured/ person covered may be requested by AIA Bhd./AIA PUBLIC/AIA General Berhad to · have verified the accuracy of the information submit the original record, bill, receipt or other supporting documents for verification or audit provided in the claim form and the purposes. If failed to do so, AIA Bhd./AIA PUBLIC/AIA General Berhad reserve the right to reject the claim or request for refund (if payment has been made). supporting document with the Insured/Person Covered; and The claim submission is considered received by AIA Bhd./AIA PUBLIC/AIA General Berhad if it is have explained the terms & conditions submitted during AIA Bhd.'s/AIA PUBLIC's/AIA General Berhad's official business hour i.e. Monday submitting online claim to the to Friday between 8,30 am to 5,30 pm, Any claim submission outside AIA Bhd.'s/AIA PUBLIC's/AIA General Berhad's official business hour shall be considered receipt on the next official business Insured/Person Covered. hour. The claim must submit within ninety (90) days from the date of visit. Please ensure that all information provided is correct and true. BEGIN

- 3. Fill in Date of Event (Event description will vary according to Claim Type)
- 4. Select Insured/Covered Member Name
- 5. Select the Policy No. that would like to claim from.

- 6. Select currency type
- 7. Fill in the Receipt No., claim amount and date for each receipt. If there is more than 1 receipt, click "Add Receipt". Take note of the maximum no. of receipt allowed.
- 8. IMPORTANT Check the Declaration section and ensure T&C has been explained to customer. Then tick the Declaration box to proceed claim submission.
- 9. Click "Begin" to move to the next page.

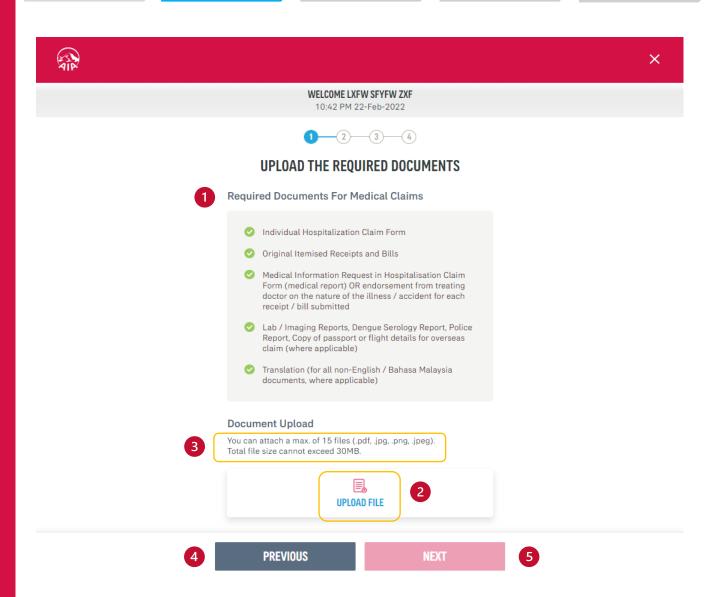
**LET'S BEGIN** 

STEP 1

STEP 2

STEP 3

STEP 4



- Go through every required document of your claim, ensuring all mandatory information are filled up. Customer must complete & sign Declaration of Authorization of the Claim Form.
- 2. Upload all required documents as stated in checklist.
- 3. Take note of the file size and type as well as the no. of files allowed.

#### IMPORTANT:

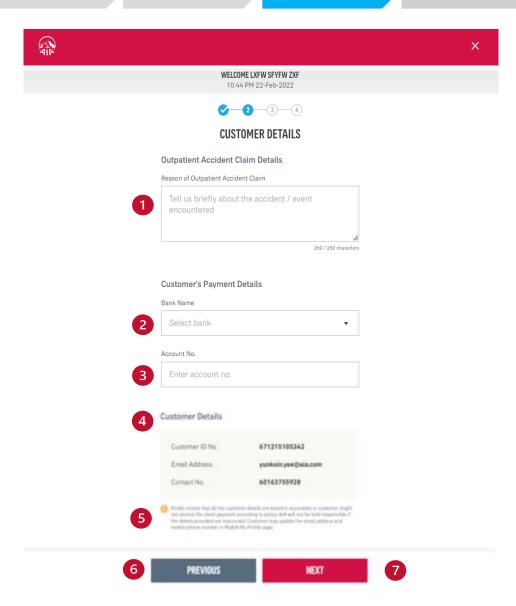
- ☐ Maximum 15 files
- ☐ Total file size cannot exceed 30MB
- Not allowed for encrypted file
- □ Not allowed for limited permission file
- Not allow for duplicated file name
- ☐ Allow file type: .pdf, .jpg, .png, .jpeg
- 4. Click "PREVIOUS", page navigate to LET'S BEGIN page
- 5. Click "Next" to proceed next step.

**LET'S BEGIN** 

STEP 1

STEP 2

STEP 3



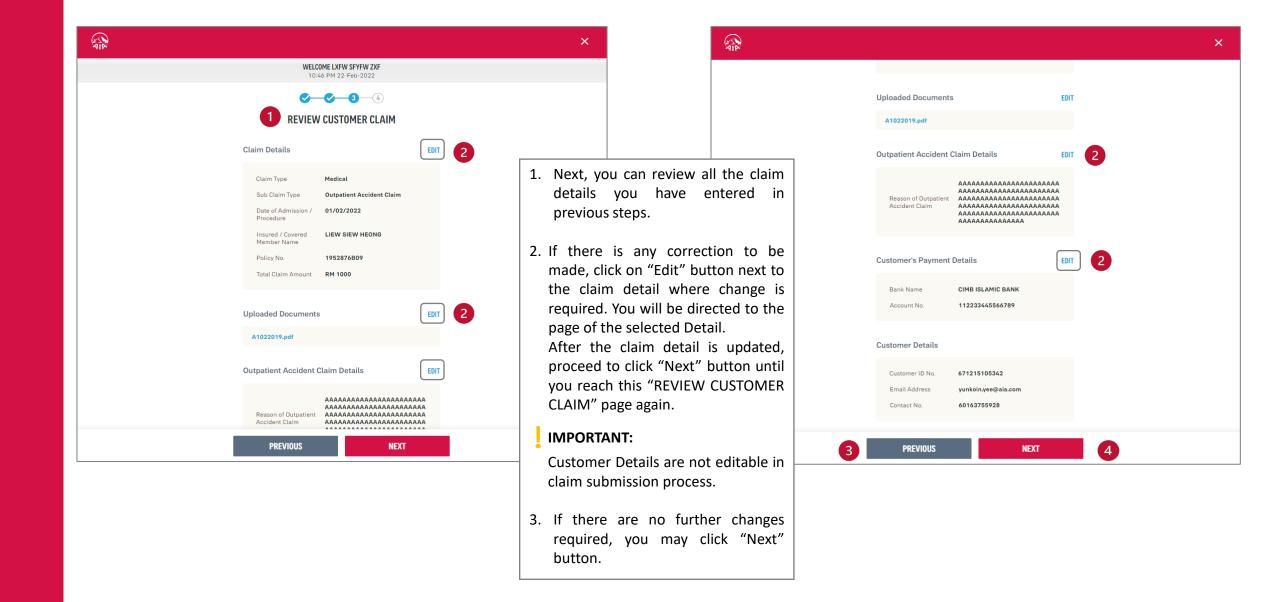
- 1. Fill in the reason of event / accident encountered by customer where applicable for selected claim type, whichever relevant.
- 2. Select the Bank Name of customer's choice.
- 3. Enter the Bank Account No. that customer would like the payment (if any) to be made to.
- 4. Ensure the Customer Details are accurate, this section is not editable.
  - Note: good practice to remind customer to review their personal details & update as soon as changes required.
- 5. You may read through the note on how the customer details can be updated.
- 6. Click "PREVIOUS", page navigate to STEP 1 page
- 7. Click "NEXT" to proceed to next step.

**LET'S BEGIN** 

STEP 1

STEP 2

STEP 3



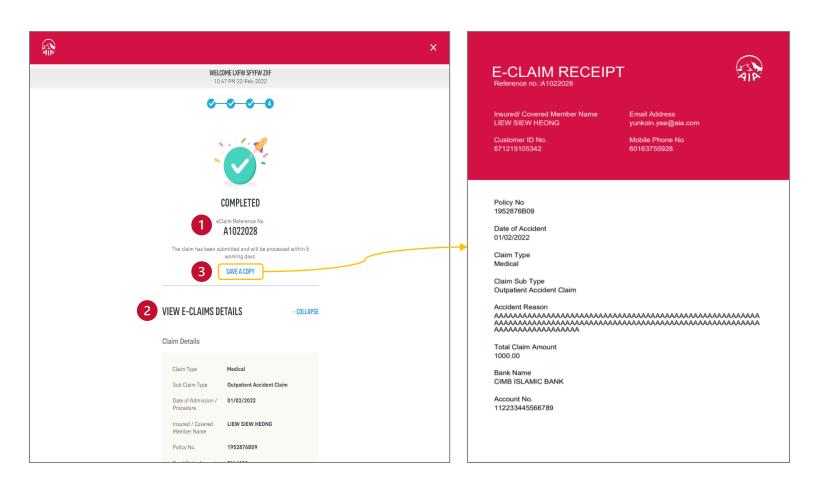
**LET'S BEGIN** 

STEP 1

STEP 2

STEP 3

STEP 4



- 1. Lastly, you will land on the "Completed Page" now. Please take note of the eClaim Reference No. and save it for your future reference.
- 2. You may view the eClaim details in the subsequent expanded section in the same page.
- 3. You may also select "SAVE A COPY" to download an e-Claim Receipt with details of submitted claim.

#### IMPORTANT:

Once claim submission is completed, close this page on browser or window.

# FREQUENTLY ASKED QUESTION (FAQ)



#### 1. What is ALPP / ALPA eClaims?

AIA Life Planners can submit new claim online on customer's behalf via AIA LIFE PLANNER PORTAL (ALPP) and APP (ALPA).

#### 2. When can I start submitting claims online via ALPP or ALPA?

AIA Life Planner can start submitting eClaims via ALPP effective from 1 Mar 2022; via ALPA effective from 7 Mar 2022.

#### 3. What are the claim types allowed to submit online via ALPP and ALPA?

New Individual Minor Reimbursement claims:

- Accident Claim
- Medical Claim
- Travel PA Claim
- Health Wallet Claim

(refer to Claims Menu Glossary for simple guidance.)

#### 4. Where do I search SUBMIT CLAIMS in ALPP & ALPA?

- Login to ALPP >> go to My Servicing >> go to Claims >> select SUBMIT CLAIMS
- Login to ALPA >> go to App Menu >> go to Claims >> select SUBMIT CLAIMS

#### 5. Is My.DMC\_eclaims@aia.com still a valid submission channel for Individual Minor Reimbursement Claims?

Effective 16 November 2021 the MY.DMC\_eclaims@aia.com will not accepting Individual hospitalization claims submission.

#### 6. Is there any claim amount threshold for e-claim submission?

No.

#### 7. With eClaims, do I still need to submit hardcopy claim documents to AIA branches?

No. Life Planners are advised to return original documents to customers after submission.

#### 8. Do customers need to submit copy of NRIC or ID document for each claim submission?

If the customer has not submitted any forms of ID document such as NRIC, passport to AIA before, he or she is advised to submit a copy during new claim submission. The record will be used for verification purpose in subsequent claims; hence customers do not need to submit copy of ID documents for each subsequent claim.

#### 9. How do customers update personal details with AIA?

Customers can update personal details (e.g. passport number, address, payment method and so on) via Service Request in MyAIA app.

#### 10. Do customers need to keep original claim documents?

Yes. Customers shall retain the original claims for at least 7 years, it may be requested in event that AIA or any relevant authorities may perform a verification exercise with regards to the claims submitted.

#### 11. Can I submit customer's pending reply or additional claim documents via ALPP or ALPA?

No. Pending reply or additional documents of submitted claims need to be submitted through AIA branches. However, this function will be enhanced and be available in the ALPP and ALPA in near future.

#### 12. How do I track the claim status?

You may track the claim status via Claim Status Inquiry via ALPP or ALPA. Besides, your customer can check his / her claim status in Claim History via MyAIA app. Please allow up to 48 hours for your latest status to be updated.

#### 13. When I access eClaims via ALPP, the SUBMIT CLAIMS page is not responsive.

You may need to check your respective browser's site permission setting to un-block pop-ups and redirects.

#### 14. How do Life Planners contact AIA for relevant inquiries?

You can check out eClaims Submission User Guide in the ALPP site.

Alternatively, if you are unable to find the solution you required, you can reach out to AIA Contact Centre (Careline: 1300-88-2886 or Email: my.assist@aia.com).

# **CLAIMS MENU GLOSSARY**



Title	Selection	Description
Claim Type	Medical	Claim on a Medical rider/policy
	Accident	Claim on an Accident rider/policy
	Travel PA	Claim on a Travel PA policy
	Health Wallet	Claim on a Medical rider/policy with health wallet balance/value
Sub Claim Type (Medical)	Hospitalisation/ Day Care Procedure	Claim for an event due to hospitalisation or outpatient day care surgery/procedure
	Outpatient claim before or after Hospitalisation/Day Care Procedure	Claim for outpatient visit before or after hospitalisation/ day care procedure
	Outpatient Accident Claim	Outpatient claim for an accident event (with no hospitalisation) on a medical rider/policy
Sub Claim Type (Accident)	Food Poisoning	Event caused by food poisoning
	Assault	Event caused by injury sustained from another
	Accidentally Bitten by animals/insects	As it is

Title	Selection	Description
Sub Claim Type (Accident)	Burns/Cut	As it is
	Motor/Non-motor vehicle accident	Accident caused by a moving vehicle
	Accidental Fall	As it is
	Ingestion or infiltration of foreign body	Injury caused by accidental swallowing/exposure of objects/chemical in the mouth, eye, ear or nose
	Hit by heavy object	As it is
	Occupational/ industrial accident	Injury at workplace
	Natural Disaster	As it is
	Sports accident	Sudden traumatic injury caused by playing sports (not due to fatigue or muscle ache)
Sub Claim Type (Travel PA)	Medical Expenses	Medical expenses incurred during a covered trip
	Cancellation, Delay or Curtailment of Journey / Loss of Deposit	As it is

Title	Selection	Description
Sub Claim Type (Travel PA)	Baggage & Personal Effects (Damage / Delay) / Loss of Money or Travel Documents	As it is
Sub Claim Type (Health Wallet)	Health Screening / Vaccination	As it is
	Mobility and Hearing Support / Recovery Care for Cancer, Stroke and Heart Attack	As it is
	Mental Health Benefit	As it is
	Congenital Conditions / Plastic or Cosmetic Surgery due to Accident or Cancer	As it is
Date of Event	Date of Admission/Procedure (Medical)	Date admitted to hospital/for outpatient surgery
	Date of Accident/Event/Admission (Accident)	Date of accident or event/admission covered under this plan
	Date of Accident/Event (Travel PA)	Date of accident or event covered under this plan

Title	Selection	Description
Date of Event	Date of Procedure/Event (Health Wallet)	Date of outpatient surgery or screening/ vaccination/support purchase/consultation event
Insured/ Covered Member Name	Dropdown list if more than 1 record.	The customer in which the claim event is filed upon for this claim submission. Please select the claimant name from the list.
Policy No	Dropdown list if more than 1 record.	Select the relevant policy no. that you would like to make your claim on. If you have selected a claim type which do not match with your policy benefit coverage, the intended policy no. will not appear for selection.



