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## How to make medical claims

**T**HERE will inevitably be times when an employee has to submit medical claims when a health issue arises.

In case of hospitalisation, employees may face the dilemma of whom to call and which insurer to claim from upon admission.

Those who require hospital admission or care are recommended to call the number on their company-issued medical card before informing their human resource (HR) department.

"Medical costs are expensive, and companies may ask employees to check with the HR department first on what is covered by their insurance policy before admission," says Marsh Insurance Brokers Malaysia senior vice president and national practice leader Ho Mun Kiat.

Usually, the HR department would strongly discourage admission if a procedure is not covered by the policy or advise the employee that he has to bear the cost.

This then causes additional inconvenience

to the employee, apart from the stress of suddenly having to come up with money.

Should the claimable amount be insufficient, an employee could consider supplementing the medical fees with his individual insurance policy.

Tokio Marine Life Insurance Malaysia Bhd CEO Toi See Jong says 99% of claims are processed without much ado or delay.

"It is always the exception that makes the news. Based on the number of transactions we manage, a lot of times we deal with third parties [which could contribute to the delays].

"It is easy to blame insurance companies, but over the years, the claims process has improved significantly," Toi says.

The delay in processing claims could be due to a number of reasons, including checks by the insurer on whether a condition is covered by the policy, background checks on the patient and the policy to confirm the diagnosis with the specialist or doctor responsible for the patient.



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