

Application Form for Claimable Amount Estimate

可賠償金額估算申請書



Policy Number 保單號碼	000090001234		
Name of Policyowner 保單持有人姓名		Email Address of Policyowner 保單持有人之電郵地址 <small>*For status follow up and communicate use 用作跟進進度及聯絡</small>	
<input type="checkbox"/> <u>Life assured/policyowner</u> have enclosed the other supplementary document(s) for claimable amount estimate with this form. 受保人 / 保單持有人隨此表格附上其他可賠償金額估算申請的補充文件。			
Statement: This page is to be completed by <u>life assured/policyowner</u> , doctor and healthcare services provider, and to be signed by life assured/policyowner and doctor with stamp by healthcare services provider. The estimated charges from healthcare services provider are for reference only. Final payments are subject to charges incurred from treatment, procedures and services performed. 說明：本頁由受保人 / 保單持有人、及醫生及醫療服務提供者填寫、簽名以及醫院蓋章作實。醫療服務提供者估算費用只作參考，最終收費視乎病人實際接受的治療、程序及服務而定。			

Important Note 重要提示：

Applicable for Policyowner and Life Assured 適用保單持有人及受保人

- Prudential Hong Kong Limited ("Prudential") will provide the claimable amount estimate and the estimated out-of-pocket expense in accordance with the eligible Voluntary Health Insurance Scheme policies which cover the life assured. The claimable amount estimate reviews only the information as provided by life assured/policyowner/healthcare services provider/doctor and does not include comprehensive claim assessment and validation. The claimable amount estimate is for reference only and does not constitute a liability to Prudential for claim payment. 保誠保險有限公司(「保誠」)將根據受保人的所有合資格的自願醫保計劃的保單以估算可賠償金額及自付費用，該可賠償金額估算只供參考，並不構成最終賠償責任。
- Claims decision will depend on the submission of all supporting documents as required for claim assessment in accordance with the policy terms and conditions and benefit entitlement in the relevant policy year. The final claimable amount and out-of-pocket expense will be subject to the actual bill amounts and breakdowns as stated in the invoices or receipts issued by the healthcare services provider. 賠償將根據所有其後遞交的必要證明文件，並按保單條款及細則和保單年度內的保障限額作決定。最終的賠償金額及自付費用會根據醫療服務提供者發出的發票或收據中所列明的實際帳目和分項收費計算。
- The claimable amount estimate is only applicable for medical services received in Hong Kong. The final claimable amount is subject to benefit reduction or limitation in relation to the regions where the eligible medical services are incurred or the choice of higher ward class. 可賠償金額估算的結果只適用於香港接受醫療服務，最終的賠償金額會因接受合資格醫療服務的地域或較高病房級別作出保障調整和限制。
- The claimable amount estimate is provided with reference to the Surgical Procedure Schedule and the Benefit Limit of the relevant policy(ies) only. ANY EXCLUSION and ANY CLAIMS YET TO BE APPROVED will not be taken into account for this estimation. 可賠償金額估算只根據相關保單之手術表及賠償限額。任何不保事項及還未批核的理賠個案未有被計算在此估算內。
- You can submit your request for the claimable amount estimate through your Financial Consultant, and get the estimated results immediately after relevant information has been input into the system. 閣下可透過閣下的理財顧問(如適用)遞交可賠償金額估算申請，並可於資料輸入系統後即時得悉估算結果。
- You can also submit your request via the below channels. The estimated results will be issued around 3 working days after receipt of the request by Prudential. 閣下亦可親自提交申請，估算結果將於本公司收到估算申請書起計約3個工作天後發出。
 - Submit through myPrudential
經myPrudential提交
 - Email to service@prudential.com.hk
電郵至service@prudential.com.hk
 - Mail to P.O. Box No. 28058, Gloucester Road Post Office, Hong Kong
郵寄至香港告士打道郵政信箱28058號
 - Submit through Customers Services Centers
交予客戶服務中心
7. Receipt of this form by your Financial Consultants or your broker does not constitute receipt by Prudential. 閣下的理財顧問或經紀收到此表格並不代表保誠亦已收到。
- If you request your Financial Consultant to submit the application form for claimable amount estimate through askPRU, it means you have authorized your Financial Consultant to enter the relevant information for obtaining a claimable amount estimate. The claimable amount estimate is only based on the information entered into askPRU. 如閣下欲要求你的理財顧問透過智能助理「阿保」提交可賠償金額估算申請書，即代表閣下已授權你的理財顧問替閣下輸入有關資料作可賠償金額估算申請用途。估算結果將基於輸入「阿保」內的資料而定。
- Prudential reserves the right to reject this form or the relevant request if it fails to fulfill Prudential's relevant requirements. 若資料未能符合保誠的有關規定，保誠保留權利拒絕此表格。
- Applicants are requested to submit the application within one year from the date of signing by the doctor and the date of stamp by the healthcare services provider, otherwise Prudential reserves the right to reject this form or the relevant request. 申請人請於醫生簽署日期及醫療服務提供者蓋章日期起計一年內提交申請，否則保誠保留權利拒絕此表格。

Applicable for healthcare services provider/doctor 適用於醫療服務提供者/醫生

- Any changes or amendments in this form must be countersigned by the doctor/healthcare services provider with stamp. 如醫生/醫療服務提供者曾於表格內作出任何更改，醫生/醫療服務提供者必須於曾修改位置簽署及蓋章作實。



Part 1 第一部分 Claimable amount estimate 可賠償金額估算			
To be completed by healthcare services provider/doctor* 由醫療服務提供者/醫生*填寫			
*Please delete as appropriate *請刪去不適用者			
1a. Patient Name 病人姓名 (English) (英文)		1b. Patient Name 病人姓名 (Chinese) (中文)	
2. Patient's Identity Document Number 病人之身份證明文件號碼			
3. Provisional Diagnosis 初步診斷			
4. Name of healthcare services provider to be admitted 將入住的醫療服務提供者名稱			
5. Estimated Length of Stay 預計住院時間	Day(s) 日	6. Class of Ward 病房級別	
7. Treatment / Surgical Operation 治療 / 手術			
8. Referral / Attending Doctor* 轉介 / 主診醫生*			
Estimated charges of healthcare services provider 醫療服務提供者費用估算			
9. Currency 貨幣		Minimum Charge 最低費用	Maximum Charge 最高費用
10. Room charges 病房費用	Day(s) 日		
11. Meal charges 膳食費用	Day(s) 日		
12. Attending doctor's visit fee 主診醫生巡房費	Day(s) 日		
13. Surgeon's fee 外科醫生費			
14. Anesthetist's fee 麻醉科醫生費			
15. Operating theatre charges 手術室費			
16. Diagnostic Imaging Tests 診斷成像檢測	Body Parts: 身體部位:		
17. Miscellaneous charges 雜項開支			
18. Total 總計			

Please continue on a separate sheet if required. 如不敷應用，請另頁補充。



Part 2 第二部分 Personal Information Collection Statement 收集個人資料聲明

Prudential Hong Kong Limited (referred to as "Company", "our", "we", or "us") take the privacy and protection of your personal information seriously. We collect personal information from you that is necessary or helpful for us to either provide you with the product or service you have requested or to comply with statutory or contractual requirements (including the purposes mentioned below), or even for security purpose. We may collect personal information including, but not limited to, full name, address, contact details, contact details history, date of birth, gender, nationality, family members, beneficiaries, identity card copy and details, travel document information, health/medical records, credit information, product history, claims history, biometric data including but not limited to your voice pattern, fingerprint and facial images, your location information based on your device, financial and medical information ("Personal Information") to provide you with the insurance or financial products or services. "Personal information" shall also include, but not be limited to, the personal information relating to your beneficiaries (or any other person designated or entitled to receive any benefits under an insurance policy), dependents, authorised representatives, company staff, and other individuals in relation to which you have provided personal information. If you provide personal information about another person to us, you confirm that you are either their parent or guardian or you have obtained that person's consent to provide such personal information for use and transfer by the Company for the purposes set out in this PICS. We may also collect Personal Information about you from third parties such as other insurance companies, agents, credit reference/reporting agencies, vendors, financial institutions, fraud prevention agencies, government agencies, medical personnel, courts or public record.

China Personal Information Protection Law (PIPL)

The PIPL Addendum supplements the Personal Information Collection Statement and applies to you if you are located in Mainland China. The PIPL Addendum is available on our website at <https://www.prudential.com.hk/en/china-personal-information-protection-law/>

1. Purpose of Collection

We may use your Personal Information for the following purposes: (a) the administration of our products and services, including to provide any relevant services as discussed with you prior to any purchase of a product or service; (b) to process your application; (c) to administer and process insurance policies, insurance claims, medical, security and underwriting checks; (d) to process payment instructions; (e) to verify your eligibility for insurance, financial or wealth management products and services; (f) to design and provide you with insurance, financial and related products and services; (g) to communicate with you;

(h) to comply with any regulatory or other legal requirements or other internal business requirements (whether imposed on us or any third parties in Section 2 below), including but not limited to anti-money laundering and Know-Your-Client obligations; (i) to investigate and settle claims and detect and prevent fraud (whether or not relating to the policy issued in respect of this application) and/or other illegal activity, or security or technical issues; (j) to carry out checks using agencies including credit reference agencies, tracing companies or publicly available information; (k) to provide customer services; (l) to perform automated decision-making or profiling; (m) to perform a policy review or needs analysis; (n) to conduct research and statistical analysis (including use of new technologies); (o) to administer lucky draws and other contests; (p) to enable us to perform our obligations to you; (q) to keep your information on record and carry out other internal business administration; (r) with your specific consent where required for direct marketing as explained in Section 3 below, personalise and tailor, customised promotions, messages and suggestions to you; and (s) any other purpose directly relating to any of the above purposes. With your consent, we may also use your personal data to send you marketing communications, as described in Section 3 below.

Some of the purposes above are necessary to allow us to perform our contractual obligations to you and to enable us to comply with applicable laws and regulation. We may also use and share your Personal Information for the purposes described above to improve our products and services. Your Personal Information will be stored either for as long as you (or your joint policyholder) are our customer, or longer if required by law or as is otherwise necessary.

2. Classes of Transferees

We may disclose your Personal Information to the group of companies including the Company and those of other entities whose ultimate parent company is Prudential plc including but not limited to Prudential General Insurance Hong Kong Limited ("companies within the Prudential Group") and their respective insurance agents, and to our financial/medical/wellness/health business partners. We may also disclose your Personal Information to the following third parties (within or outside Hong Kong) for the purposes outlined at Section 1 above: (a) insurance agents; (b) insurance brokers; (c) re-insurance companies; (d) claims investigation companies; (e) organisations that consolidate claims and underwriting information for the insurance industry, fraud prevention organisations, other insurance companies (whether directly or through fraud prevention organisations or other persons named in this paragraph) and databases or registers (and their operators) used by the insurance industry to analyse and check information provided against existing information; (f) third party service providers who provide administrative, telecommunications, computer, information technology, data processing and storage, customer satisfaction analysis, payment, printing, redemption or other services to us to enable us to operate our business (including without limitation other insurers, lawyers, bankers, accountants, professional advisors, financial institutions and trustees, auditors, IT service and platform providers, insurance intermediaries, investment managers, agents, pension trustees (and other stakeholders), scheme advisors, introducers, and selected third party financial and insurance product providers); (g) industry associations and federations; (h) medical bill review companies; (i) your joint policy or investment holder; (j) researchers; (k) credit reference agencies; (l) debt collection agencies; (m) partnering financial institutions and partnerships; and (n) financial crime prevention agencies, any legal, regulatory, law enforcement or government bodies and the courts. We may also disclose your Personal Information to an actual or proposed assignee or participant in connection with a transaction with another company which affects the control, governance, structure and/or management of all or a substantial part of our business, or if required to satisfy applicable legal or regulatory requirements. With your consent, we may also disclose your personal data to third parties to allow them to send you marketing communications, as described below.

3. Use and Transfer of Personal Data for Direct Marketing Purposes

With your consent, we intend to use your name and contact details for promotional and marketing purpose including sending marketing communications and conducting direct marketing to you by electronic and non-electronic means including by post, in relation to the following products, services and subjects, and we require your consent in order to do so: insurance; annuities; retirement schemes; pensions; wealth and financial management; estate management; investment; financial; medical/wellness/health related products, reward/loyalty programme services and subjects ("Classes of Marketing Subjects").

We also intend to transfer your name and contact details to our insurance agents, other companies within the Prudential Group and their respective insurance agents, our Business Partners, and our Marketing Partners, to enable them to market any of the Classes of Marketing Subjects to you, and your written consent is required in order for us to do so. We may provide your personal data to such transferees for gain.

If you change your mind, and / or you would like to opt-out of receiving direct marketing, you can advise our Data Protection Officer at service@prudential.com.hk.

4. Consequence of failing to provide Personal Information

Unless otherwise specified by us, it is mandatory for you to provide the Personal Information requested by us. If you do not provide such Personal Information, we may not be able to provide you the product or service that you've requested.

5. Access and Correction Rights

Under the Personal Data (Privacy) Ordinance (the "Ordinance"), you have the right to request access to and correction of any Personal Information that you provide to us. If want to exercise your rights, or if you require any other information, you can advise our Data Protection Officer at service@prudential.com.hk or contact us using the details on "Contact Us" section of the Company website (<https://www.prudential.com.hk/scws/pages/en/contact-us/contact-us-home/index.html>) or our Privacy Notice.

If you move/moved to a European Union ("EU") jurisdiction, we may be required to provide you with further information, and you may have additional rights, under the EU General Data Protection Regulation. This information and these rights are set out in the Privacy Notice on our Company website.

We update our Privacy Notice from time to time. We encourage you to familiarise yourself with the Privacy Notice on our Company website. The Privacy Notice is available on our Company website at <https://www.prudential.com.hk/scws/pages/en/privacy-policy/index.html>. By completing and progressing with this form, you confirm that you have read and understood this PICS.

Business Partners means our service providers who provide administrative, telecommunications, computer, information technology, data processing and storage, customer satisfaction analysis, payment, printing, redemption or other services to us to enable us to operate our business, accountants, auditors, IT service and platform providers, insurance intermediaries, reinsurers, investment managers, agents, pension trustees (and other stakeholders), scheme advisors, introducers, selected third party financial and insurance product providers, and our legal advisers.

Marketing Partners means our service providers who provide administrative, telecommunications, computer, payment, printing, third-party rewards/loyalty/privileges programs, medical/health/wellness related products, redemption or other services to us to enable us to operate our business, insurance intermediaries, pension trustees (and other stakeholders), scheme advisors, introducers and selected third party financial and insurance product providers.



Part 2 第二部分 Personal Information Collection Statement (Con't) 收集個人資料聲明(續)

保誠保險有限公司(簡稱「本公司」或「我們」)認真對待閣下個人資料的私隱及保護。為使我們可以向閣下提供閣下要求的產品或服務,或為遵守法定及合約要求,我們會向閣下收集必要或有幫助的個人資料。為向閣下提供保險或金融產品或服務,遵守法定或合同要求(以下概述的其他目的),及保安目的,我們可能會向閣下收集個人資料,包括但不限於全名、地址、聯絡資料、過往聯絡資料、出生日期、性別、國籍、家庭成員、受益人、身分證副本及資料、旅遊證件資料、健康 / 醫療紀錄、信貸資料、過往產品紀錄、過往索償紀錄、生物辨識資料,包括但不限於閣下的聲音模式、指紋及面部圖像、基於閣下的流動或其他電子裝置收集閣下的位置資料、財務及醫療資料(「個人資料」)。「個人資料」將包括但不限於與有關以下人士的個人資料:閣下的受益人(或任何其他根據保單被指定或有權獲得任何利益的人)、收養人、授權代表、公司職員和閣下曾提供其個人資料的其他人士。如閣下向我們提供其他人士的個人資料,即表示閣下確認閣下是該人的父母或監護人或閣下已取得該人士的同意以提供個人資料供本公司按此收集個人資料聲明的目的使用和轉移。我們亦可能會從第三方,如其他保險公司、代理、信貸資料服務 / 報告機構、供應商、金融機構、防欺詐機構、政府機構、醫務人員、法院或公開紀錄,收集關於閣下的個人資料。

《中華人民共和國個人信息保護法》

中國內地補充內容是對本個人信息收集聲明的補充,如果您在中國內地則適用此補充內容。您可在本網站 <https://www.prudential.com.hk/tc/china-personal-information-protection-law/> 查閱中國內地補充內容。

1. 收集資料之目的

我們可能會使用閣下的個人資料作下列目的:(a) 管理我們的產品和服務,包括在購買產品或服務之前提供已與閣下討論的任何相關服務;(b) 處理閣下的申請;(c) 管理和處理保單、保險索償、醫療、抵押和承保檢查;(d) 處理付款指示;(e) 核實閣下申請保險、金融或財富管理產品及服務的資格;(f) 設計及為閣下提供保險、金融及相關的產品和服務;(g) 與閣下進行通訊;(h) 遵守任何監管或其他法律規定或其他內部業務規定(不論是向我們或下述第2部分所列的任何第三方實施),包括但不限於打擊洗錢和認識你的客戶(KYC)義務;(i) 就索償進行調查及和解,以及偵查及防止欺詐(不論是否有關就本申請簽發的保單)及/或其他非法行為或安全/技術問題;(j) 使用代理機構(包括信貸資料服務機構)、追蹤公司或公開可得資料以執行核實;(k) 提供客戶服務;(l) 執行自動決策或資料剖析;(m) 進行保單審查或需求分析;(n) 進行研究和統計分析(包括使用新科技);(o) 進行管理幸運抽獎和其他比賽;(p) 使我們能夠履行對閣下的義務;(q) 保持閣下的資料記錄並執行其他內部業務管理;(r) 為直接市場推廣需要並在有需要時經閣下的特定同意下,如以下第3部分所述,為閣下量身訂製個性化的促銷、消息和建議;及(s) 與上述任何目的直接相關的任何其他目的。經閣下同意,我們亦可能會按照以下第3部分所列使用閣下的個人資料以向閣下發出促銷通訊。

為履行對閣下的合約責任及至使我們能夠遵守適用法律及法規,上述部分目的屬必要的。我們亦可能會為上述所列的目的使用及分享閣下的個人資料以改善我們的產品及服務。只要閣下(或閣下的聯名保單持有人)仍為我們的客戶,我們將一直保存閣下的個人資料,或如法律有所規定或因其他原因而為必要,我們則將其保存更長時間。

2. 被資料轉交者的類別

我們可能會向該公司集團,包括本公司以及其他母公司為英國保誠集團的實體包括但不限於保誠財險有限公司(「保誠集團內的公司」)及他們各自的保險代理,及我們的金融/醫療/保健/健康業務夥伴,透露閣下的個人資料。為達到上述第一部分所列之目的,我們亦可能會向下列第三方(在香港境內或境外)透露閣下的個人資料:(a) 保險代理;(b) 保險經紀;(c) 再保險公司;(d) 索償調查公司;(e) 為保險業整合索償及承保資料的組織、防欺詐組織、其他保險公司(不論直接或透過防欺詐組織或本段指名的其他人士),及保險業用作分析及核實現有資料與及後提供的資料而使用的數據庫或登記冊(及其營運商);(f) 提供行政、電訊、電腦、信息技術、數據處理及儲存、客戶滿意度分析、付款、印刷、贖回或其他服務以令我們的業務可以運作的第三方服務供應商(包括但不限於其他保險公司、律師、銀行家、會計師、專業顧問、金融機構及受託人、審計師、IT 服務及平台供應商、投資經理、代理、退休金受託人(及其他持份者)、計劃顧問、介紹人及選定的第三方金融和保險產品供應商);(g) 行業協會及聯會;(h) 醫療賬單審查公司;(i) 閣下的聯名保單或投資持有人;(j) 研究人員;(k) 信貸資料服務機構;(l) 收賬代理;(m) 夥伴金融機構及合作夥伴;及(n) 預防金融罪案機構、任何法律、監管和執法機構或政府機構及法院。在有關影響到我們全部或重大部分業務的控制權、治理、結構及/或管理的與另一公司的交易時,或在必須符合適用的法律或監管要求下,我們亦可能會透露閣下的個人資料予該等的實在或擬議受讓人或參與人。經閣下同意,我們亦會向第三方透露閣下的個人資料以讓該等第三方向閣下發出促銷通訊(如下文所述)。

3. 使用及轉移個人資料作直接促銷用途

經閣下的同意,我們擬使用閣下的姓名和聯絡資料,用於宣傳和市場推廣用途,包括通過電子和非電子方式(包括郵寄)向閣下發送市場推廣通訊和進行直接促銷,就以下產品、服務和目的,我們需要閣下的同意才可以這樣做:保險;年金;退休計劃;退休金;財富和財務管理;遺產管理;投資;金融;醫療/保健/健康相關產品;獎賞/優惠計劃服務及目的(「促銷標的類別」)。

我們亦擬將閣下的姓名和聯絡資料轉移給我們的保險代理人、保誠集團內的其他公司及其保險代理人、我們的業務合作夥伴和營銷合作夥伴,以使他們能夠向閣下推銷任何促銷標的類別,並且需要閣下的書面同意才能這樣做。我們可能因此向此類受讓人提供閣下的個人資料而獲得利益。

如閣下改變主意,及/或閣下想選擇不接受直接市場推廣,可以與我們的資料保護主任聯絡(service@prudential.com.hk)。

4. 未能提供個人資料的影響

除非我們另有規定,否則閣下必須提供我們要求的個人資料。若閣下未提供有關個人資料,我們可能無法為閣下提供所要求的產品或服務。

5. 查閱和更正的權利

根據《個人資料(私隱)條例》(「條例」),閣下有權要求查閱及更正任何閣下提供給我們的個人資料。閣下如欲行使閣下的權利,或如閣下需要任何其他資料,請聯絡我們,閣下可以發送電郵至 service@prudential.com.hk 或使用本公司網站(<https://www.prudential.com.hk/scws/pages/tc/contact-us/contact-us-home/index.html>)或我們的私隱通知中「聯絡我們」部分所列的資料與我們的資料保護主任聯絡。

如閣下搬遷/已搬遷至歐洲聯盟(「歐盟」)司法管轄區,我們可能需要向閣下提供進一步資料,且閣下可能在歐盟《通用數據保障條例》下享有額外權利。此類資料及此等權利均載於本公司網站上的私隱通知中。

我們會不時更新我們的私隱通知,並建議閣下瀏覽本公司網站以了解該私隱通知。該私隱通知可在本公司網站(<https://www.prudential.com.hk/scws/pages/tc/privacy-policy/index.html>)上查閱。閣下填妥並繼續提交本表格,即表示閣下確認已閱讀並理解本收集個人資料聲明。

業務合作夥伴指我們的服務供應商、提供行政、電信、電腦、信息技術、數據處理及儲存、客戶滿意度分析、支付、印刷、贖回或其他服務予我們,以使我們能夠經營我們業務,會計師、審計師、IT 服務和平台供應商、保險中介機構、再保險承保人、投資經理、代理、退休金受託人(和其他持份者)、計劃顧問、介紹人、核准的第三方金融和保險產品供應商以及我們的法律顧問。

營銷合作夥伴指我們的服務供應商提供行政、電信、電腦、支付、印刷、第三方獎賞/會員/優惠計劃、醫療/健康/保健相關產品、贖回或其他服務,以使我們能夠經營我們業務、保險中介、退休金受託人(和其他持份者)、計劃顧問、介紹人和核准的第三方金融和保險產品供應商。



Are you currently a customer in mainland China? 您現在是否是個中國內地客戶?

Yes 是

(If "Yes", please tick below box to agree the following statement. If you disagree with this statement, we may not be able to process your request / application. 如「是」, 請勾選以下選項以同意下列聲明。如您不同意以下聲明, 我們可能無法處理您的指示/申請。)

By ticking this box, you agree that as an international group company, in order to provide insurance-related products or services, we may need to store and process your personal information outside of mainland China. Please refer to our Privacy Notice (<https://www.prudential.com.hk/en/china-personal-information-protection-law/>) for more information. 勾選此項, 表示您同意, 我們作為國際集團公司, 為提供保險相關產品或服務, 可能需要在中國內地境外存儲或處理您的個人信息。更多資訊, 請參閱我們的隱私聲明 (<https://www.prudential.com.hk/tc/china-personal-information-protection-law/>)。

No 否

Part 3 第三部分 Declaration & Authorization 聲明及授權

- I/We hereby declare that the above information is accurate, true and complete to the best of my knowledge and belief, and I/We have not withheld any material information connected with this estimation.
- I/We hereby confirm my understanding of and agreement to the contents of the above part entitled "Personal Information Collection Statement".
- I/We provide the information herein on a voluntary basis and understand that failure to provide relevant information as per Prudential's request may result in Prudential being unable to process with this estimation.
- (If applicable) I have verified the above information and authorize my financial consultant to input the same to askPRU on behalf of myself for the application of claim budget certainty. I/We understand that the claim estimation will be only based on the information entered into askPRU.
- I/We understand that the estimated charges of healthcare services provider above and the claimable amount estimates from Prudential are for reference only and do not constitute a liability to Prudential for claim payment. Additional charges incurred from complications or other reasons are not covered. Claim decision will depend on the submission of all supporting documents as required for claim assessment in accordance with the policy terms and conditions and benefit entitlement in the relevant policy year. The final claimable amount and out-of-pocket expense will be subject to the actual bill amounts and breakdowns as stated in the invoices or receipts issued by healthcare services providers. I/We understand that the final claimable amount may be different from the estimate.
- I/We understand and agree that this form and all other documents submitted to Prudential for this estimation shall be the property of Prudential, and will be non-returnable under all circumstances.
- If there is any subsequent change to the information provided herein, I/We undertake to notify Prudential as soon as practicable.
- 本人/吾等特此聲明就本人/吾等所知所信, 以上資料均為真實、正確和完備。
- 本人/吾等在此確認本人/吾等明白並同意上述在題為「收集個人資料聲明」之部分中的內容。
- (如適用)本人/吾等授權我的理財顧問替本人輸入上述資料至智能助理「阿保」作可賠償金額估算申請用途。估算結果將基於輸入「阿保」內的資料而定。
- 本人/吾等知悉上述醫療服務提供者費用估算及保誠其後提供之可賠償金額估算僅作參考, 並不構成最終賠償責任。所示金額不包括因併發症或其他原因所產生的額外費用。賠償將根據所有其後遞交的必要證明文件, 並按保單條款及細則和保單年度內的保障限額作決定。最終的賠償金額及自付費用會根據醫療服務提供者發出的發票或收據中所列明的實際帳目和分項收費計算。本人/吾等並知悉最終理賠金額可能與上述估算費用不同。

If the life assured is at the age of 18 or above, this form should be signed by him/her. If the Life Assured is below the age of 18, the policyowner should sign on behalf of the life assured.

如受保人年滿18歲, 則由受保人簽署。受保人未滿18歲, 則由保單持有人簽署。

Name of Life Assured
受保人姓名

Signature of Life Assured
受保人簽署

Date (DD / MM / YYYY)
日期 (日 / 月 / 年)

Signature of Policyowner
保單持有人姓名

Signature of Policyowner
保單持有人簽署

Date (DD / MM / YYYY)
日期 (日 / 月 / 年)

Please DO NOT sign on BLANK form. 請勿在空白表格上簽署。

Part 4 第四部分 Doctor's and healthcare services provider's declaration 醫生及醫療服務提供者聲明

I hereby declare that the above information is accurate, true and complete to the best of my knowledge and belief. I have explained to the Patient (as the Life Assured) the details of the above estimated charges and have sought his/her consent to the estimate.
本人特此聲明就本人/吾等所知所信, 以上資料均為真實、正確和完備。本人已向受保人/病人解釋上述估算費用, 並徵得其同意。

Name of Attending Doctor
醫生姓名

Signature of Attending Doctor
醫生簽署

Date (DD / MM / YYYY)
日期 (日 / 月 / 年)

This healthcare services providers has noted the above estimate charges. 本醫療服務提供者知悉上述估算費用。

Name of healthcare services provider
醫療服務提供者名稱

Chop by healthcare services provider
醫療服務提供者蓋章

Date (DD / MM / YYYY)
日期 (日 / 月 / 年)

