



Easy 4 Steps

Online Claim

User Guide

(For Group Medical Insurance)

Login via https://www.mic.com.mo/medical/login.php
or Scan QR code to try NEW function







Fill in Info.

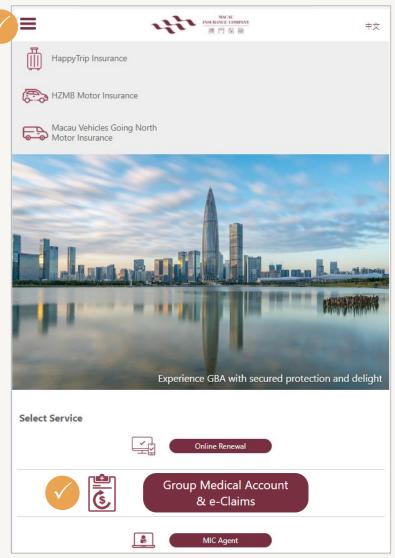


File Upload





https://www.mic.com.mo



How to access login page?

For Mobile



Open browser and visit https://www.mic.com.mo



Click the icon



Group Medical Account & e-Claims

on the bottom of the homepage

OR

Click the icon on the upper left corner, and select "Renewal & Claims >> Group Medical Account & e-Claims"



to access "Group Medical Enquiry" login page



Fill in Info.



File Upload



How to access login page?

For WeChat



Follow MIC Official WeChat Account

Approach 1: Scan QR Code and follow,



OR

Approach 2: Search "澳門保險" using WeChat official account searching function and follow

Enter MIC official WeChat account page, select "保險服務 >> 團體醫療網上索償"

to access "Group Medical Enquiry" login page





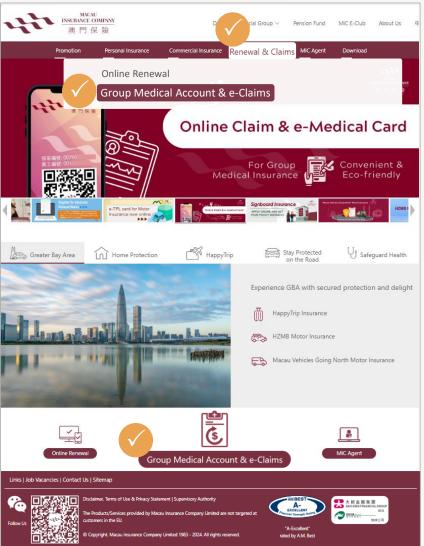
Fill in Info.



File Upload

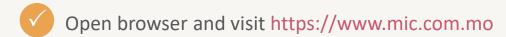






How to access login page?

For PC





Click the icon



on the bottom of the homepage

OR

Select "Renewal & Claims >> Group Medical Account & e-Claims" on the **header of the homepage**



to access "Group Medical Enquiry" login page



Fill in Info.



File Upload

Group Medical Enquiry 團體醫療賬戶查詢				
\checkmark	User Account 用戶賬號		②Login Guide 賬戶登入說明	
V	Password 密碼	[Forget Password 忘記密碼]		
	Check Code 認證碼	3262	change 換一張	
		Login 登入		

Login



User Account

Last 3 digits of Policy Number + Student No.

Example: If your Policy Number is 007900000<u>213</u>

Student No. <u>P1234567</u>

Your User Account will be 213P1234567



Fill in Info.



File Upload

Group Medical Enquiry 團體醫療賬戶查詢			
User Account 用戶賬號	② Login Guide 賬戶登入說明		
Password 密碼	[Forget Password 忘記密碼]		
Check Code 認證碼	3262 Change 換一張		
	Login 登入		

Login



Initial Password (for first-time login)

Last 3 digits of Policy Number + Student's Birthday

Example: If your Policy Number is 007900000213, your birthday is $\underline{1999/02/29}$ (YYYY/MM/DD), your Initial Password will be 21319990229

Friendly Reminder: Please change your password after first login.

Input the Check Code,

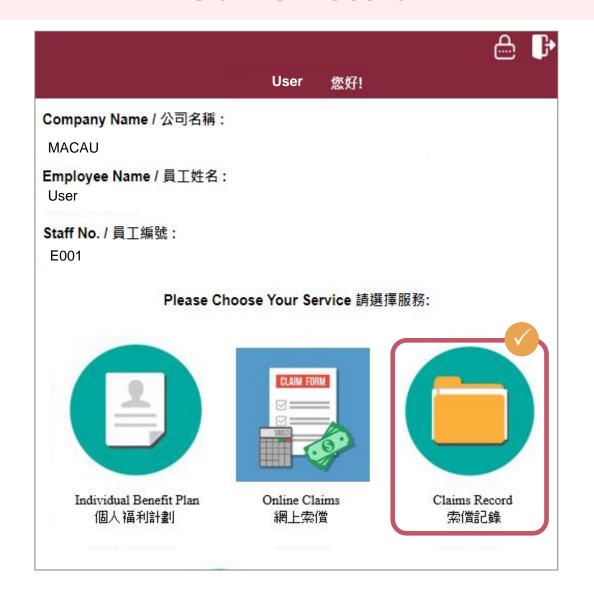
then click

Login 登入

to access

your Account page

Claims Record









File Upload



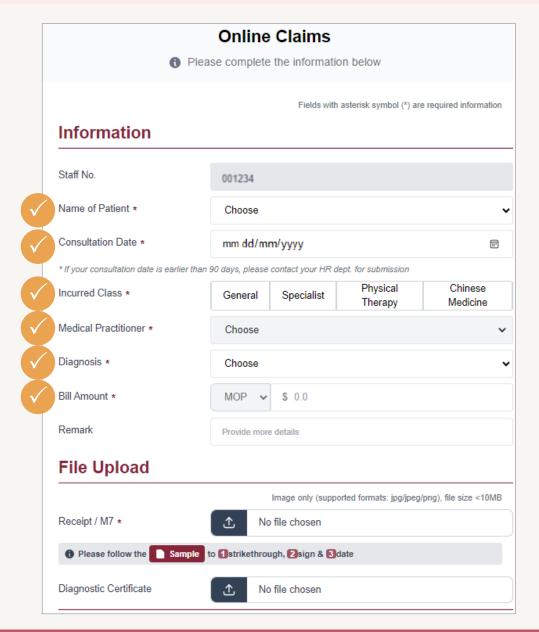
Your Account Page

Click "Online Claims", fill in information and upload receipts (and other relevant diagnostic certificates, if any)



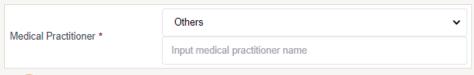


File Upload



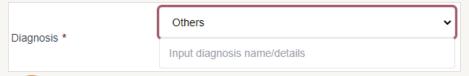
Fill in Information

- Name of Patient
 Select name of patient.
- Select "Consultation Date^", "Incurred Class"
- Hospital
 you can select "Others" and fill in information of the 3
 Hospitals





The system provides a list of common diagnoses for selection. If there is no applicable item, you can select "Others" and fill in information



Bill Amount(For the consultation fee is MOP1,000 or over, original receipt must be submitted to MIC)

Fill in the total amount of your receipt&

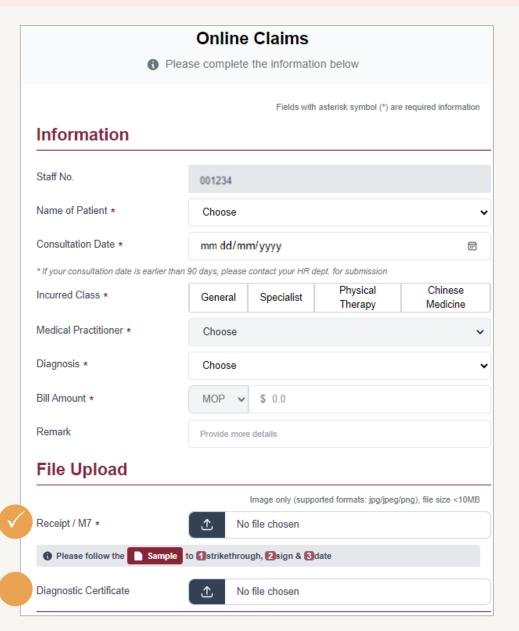
^ If your consultation date is more than 90 days prior, please contact your HR dept. for submission & Amount covered by Healthcare Vouchers issued by Macau SAR Government will not be reimbursed





Fill in Info. 3 File Upload





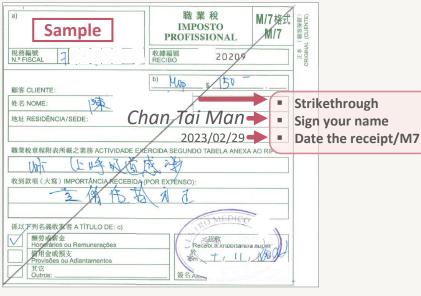
File Upload



Receipt/M7

Sample to 1) Strikethrough, Please follow the

2) Sign & 3) Date the receipt/M7. Receipts not following the requirements may result in non-acceptance



Diagnostic Certificate Diagnostic certificates, sick leave certificates



Fill in Info.



File Upload





Declaration and Authorization

I hereby declare that the answers to the above questions are full and true to the best of my knowledge. I further authorize any physician, hospital, insurance company, claims investigation company, government authority or organization that has any record or knowledge of me, my health or my activities (including records relating to Social Welfare, Employees' Compensation, credit, financial, earnings and employment history) to furnish to Macau Insurance Company Limited ("Macau Insurance") or its authorized representative such information including without limitation all information with respect to any illness or injury, medical history, consultation, prescription or treatment and copies of all hospital or medical records. A copy of this authorization shall be as effective and valid as the original.

I understand and agree that Macau Insurance has the right to reverse / claim back any incorrect payment caused by incorrect information provided by me.



I have read and accepted the Personal Data Information Collection Statement

← Back



Submit →



Your submission has been received!

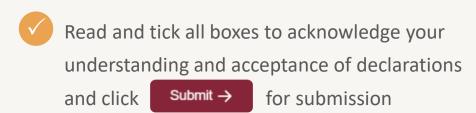
- We are processing your submission, we may contact you if any additional information is required.
- Please keep all the receipts and related disease certificates for your submission could be proceeded successfully.

Reference No.: 202302 Submission Time: 2023-02-24

+ Submit Another Application



Submit



Submission Complete!



Please keep all original receipts and relevant diagnostic certificates to satisfy any subsequent need for verification#

After the application is approved, please go to Macau Insurance to collect the cheque in person.

Should you need any assistance, please feel free to contact us during office hours at

(853) 8396 9538 / 8396 9535

Subject to policy coverage, system may remind you to submit original receipts and relevant diagnostic certificates via your HR department within 90 days.

