

New International Students' Group Medical Insurance

Medical Treatment Procedures

If you wish to receive medical treatment, please check the Remarks at the end of this sheet to ensure if your medical treatment is not included from this insurance and follow the procedures:

1. Go to a hospital or clinic near you for treatment.
2. You need to first pay the full amount of fee for the treatment, and be sure to get both the payment **receipt** and your **diagnosis**.
3. The documents you need to bring to OIC are as follow:
 - a. The original receipts of payment.
 - b. The original diagnosis.
 - c. Photocopy of your First Bank/Post Office passbook cover.
 - d. Compensation Application Form
 - e. Passport photocopy.
 - f. ARC photocopy.

Bring all documents listed in point 3 to OIC and OIC will help you deliver them to the insurance company. If your documents are complete and within the coverage policy, the insurance company will transfer the claims payment into your post office account in about 4 weeks.

Please note:

1. For the same symptoms, the insurance company covers only one visit per day. The maximum coverage per visit is TWD 1,000 but **NOT include** the following:
 - A. Hospital or clinic registration fee.
 - B. Total amount exceeding the maximum coverage TWD 1,000 per day.
2. Insurance Coverage
 - A. Outpatient:
 - a. Physicians and specialists consultations, medical treatment and surgery.
 - b. Prescribed medicines and injection.
 - c. Diagnostic laboratory tests and surgical appliances.
 - B. Hospitalization
 - a. Physicians and specialists consultation, medical treatment and surgery.
 - b. Prescribed medicines and injection.
 - c. Diagnostic laboratory tests and surgical appliances.
 - d. Basic room and board including general nursing care.

Policy Coverage:

Insurance covers accidents or sickness occurring in the Taiwan area. Accidents or sickness requiring specialized medical care or have occurred before the insurance policy was taken out will not be covered.

Remarks:

This policy does **NOT** cover medical treatment incurred by the following situation of personal behavior:

- A. Suicidal behavior, alcohol abuse, drug abuse, overdose, any sickness or damage result from illegal behavior and warfare.
- B. Complication incurred by vibriosis, pregnancy, miscarriage or labor.
- C. Health exam, optical correction, inoculation, elective cosmetic surgery, dental scaling, denture prosthesis, ocular prosthesis.
- D. Ambulance, diagnosis statement, the fee for assigning doctors, special nursing, any costs not relevant to the treatment.
- E. Systematic lupus erythematosus, Hemophilia, Hyperhidrosis, AIDS-Acquired Immunodeficiency Syndrome, sexually transmitted disease, congenital disorder, vasectomy, organ transplant, and any disease diagnosed before the insurance policy taken out.
- F. Hospitalized patients with dental therapies, medical care, and rehabilitation.

國際學生新生團體傷病醫療保險

(針對政大未加入全民健保之國際新生)

參加此保險之國際學生，在保險有效期間內（原則上為六個月內）因傷病保險事故需要使用此保險，請先確認您的醫療項目並非特殊疾病及醫療行為不給付項目（請參考下方備註）。

使用流程如下：

1. 至鄰近醫療所就診。
2. 門診費用需先自付，再向醫院索取門診費用相關**收據正本**。看診完畢，請確認領取你的**診斷書**。
3. 看完診後，請將下列文件繳交至國合處，由國合處協助辦理理賠。
 - 一、繳費收據正本
 - 二、診斷書正本
 - 三、第一銀行或郵局存摺封面影本
 - 四、保險理賠申請書
 - 五、護照影本
 - 六、居留證影本

國合處檢查文件齊全後核章，寄送給保險公司，待保險公司理賠部門確認文件齊全並為該保險理賠項目，約 4 周後核定理賠金額匯款至您的第一銀行或郵局帳戶。

請留意：門診給付相同症狀每日以一次限，每日一次理賠上限為新台幣 1,000 元，且**不包括**下列費用：

- (一) 掛號費。
- (二) 每日看診總費用超過新台幣 1,000 元上限。

保險醫療給付項目如下：

- (一) 門診：
 - 1、診療、處置或手術。
 - 2、藥劑、注射。
 - 3、治療所必需之材料及檢驗、檢查。

(二) 住院：

- 1、 診療、處置或手術。
- 2、 藥劑、注射。
- 3、 治療所必需之材料及檢驗、檢查。
- 4、 護理、三等病床及膳食之供應。

保險給付範圍；限於台灣地區之醫療行為。投保前之傷病及保險公司規定之特殊疾病及醫療行為不給付。

***備註**

投保國際學生因傷病事故必須就醫醫療時，皆可就診。但有下列情形者承保機構不負給付之責：

- (一) 自殺行為、酗酒、吸食違禁藥品或犯罪行為和戰爭變亂所致之傷害或疾病。
- (二) 不孕症、懷孕、流產或分娩及其所引致的併發症。
- (三) 健康檢查、視力矯正、預防注射、外型整形美容、洗牙、假牙、義肢、義眼或其他附屬之裝置。
- (四) 救護車、診斷證明書、指定醫師費、特別護士看護、陪伴費、非治療之用品費。
- (五) 紅斑性狼瘡（先天性）、血友病、多汗症、愛滋病、性病、先天性疾病、結紮手術、器官移植、投保前之傷病。
- (六) 牙科患者、單純之療養、靜養或復健者，不得給予住院治療。