



HEALTHIER, LONGER,  
BETTER LIVES





# AIA EBENEFITS MOBILE APP

August 2021

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# Agenda

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- II. [Devices that Support the eBen App](#)
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# Agenda

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 **New**

 **New**

 **New**





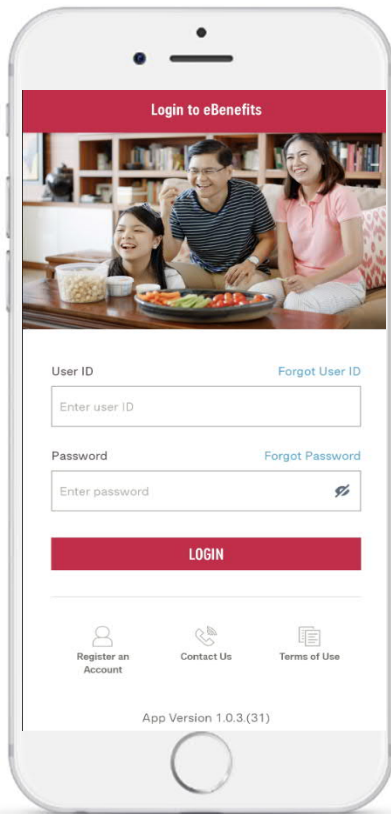
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# I. What is the AIA eBenefits Mobile App?



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# I. What is AIA eBenefits Mobile App?



The eBenefits mobile app allows insured members of AIA plans to effortlessly access and manage their policies and claims, anytime and anywhere.

Check employee benefit details



Locate the nearest panel clinics

View medical cards easily

Submit New Claims and/or View recently submitted claims



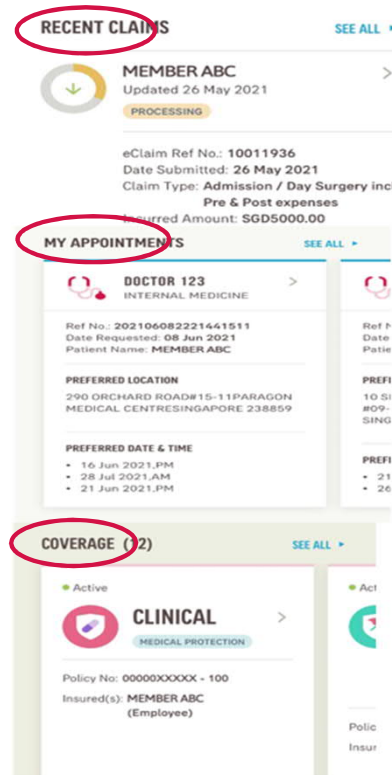
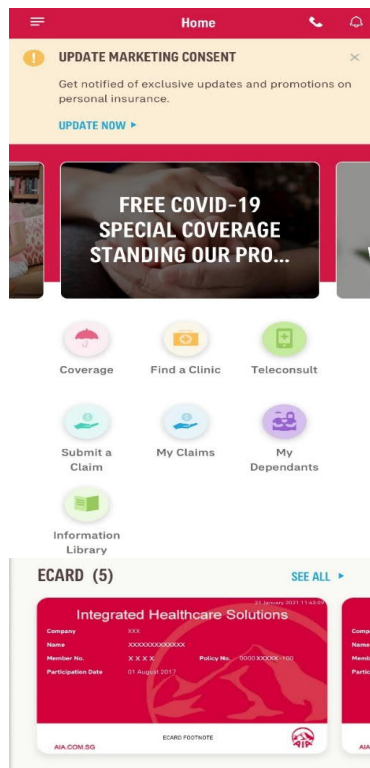
View profile details

Use biometric authentication to sign in



# The AIA eBenefits Mobile App

➔ Relevant functions are displayed in just one easy scroll



## II. Devices That Support the eBenefits App



The eBenefits mobile app is supported by iOS devices (iOS 11 and above) and Android.



## III. Device Settings

### iOS Settings

In order to use the application seamlessly, ensure certain settings on your phone have been configured before you start using it.



**Location** (in **Privacy**, ensure **Location Services** is switched on)



**Photos** ( Set access to **Read and Write**)



**Camera** (**Switched on**)



**Face ID** ( In **Face ID & Passcode > Other Apps >** ensure eBenefits Mobile App is switched on for Biometric authentication)



These permissions can be updated in Settings.



# Device Settings

## Android Settings

For Android users, the app must be allowed these permissions:



- ✓ Location
- ✓ Photos
- ✓ Camera
- ✓ SMS
- ✓ Touch ID



These permissions can be updated in Settings.





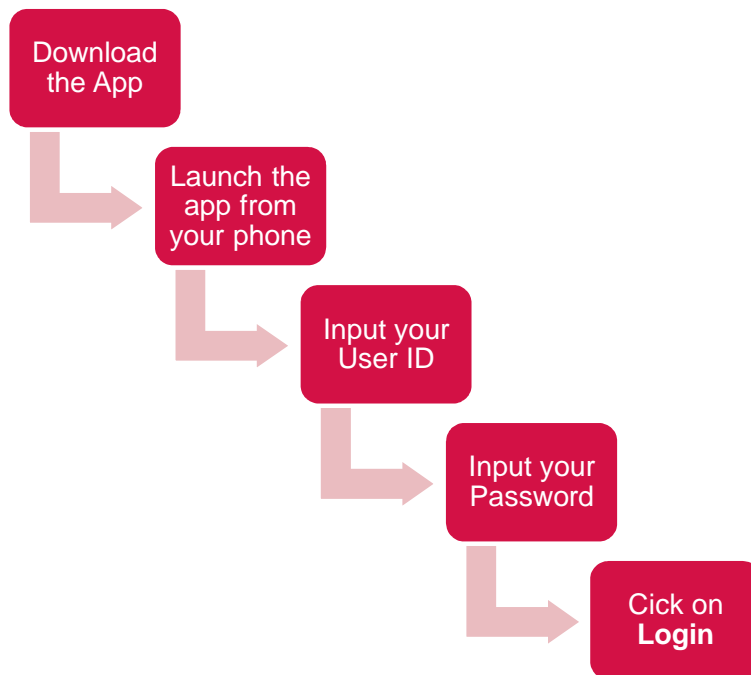
HEALTHIER, LONGER,  
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# IV. LOGIN

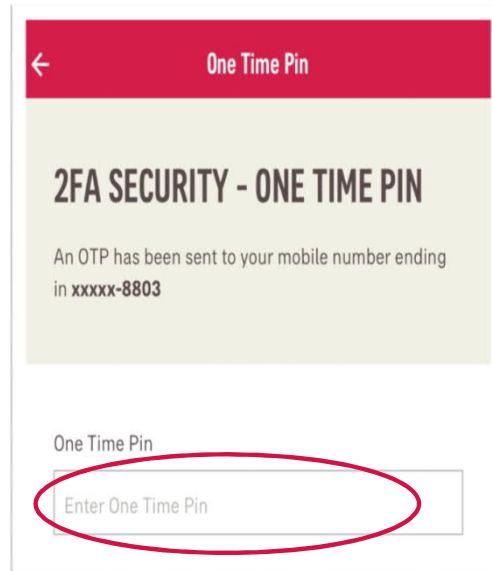
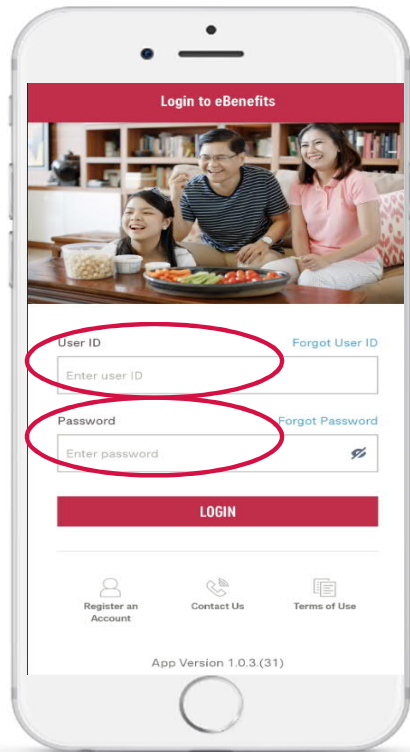


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## IV.1. Login to eBenefits Mobile App



# Login to eBenefits Mobile App



A One-Time Password (OTP) text will be sent to your mobile number. Enter the OTP.

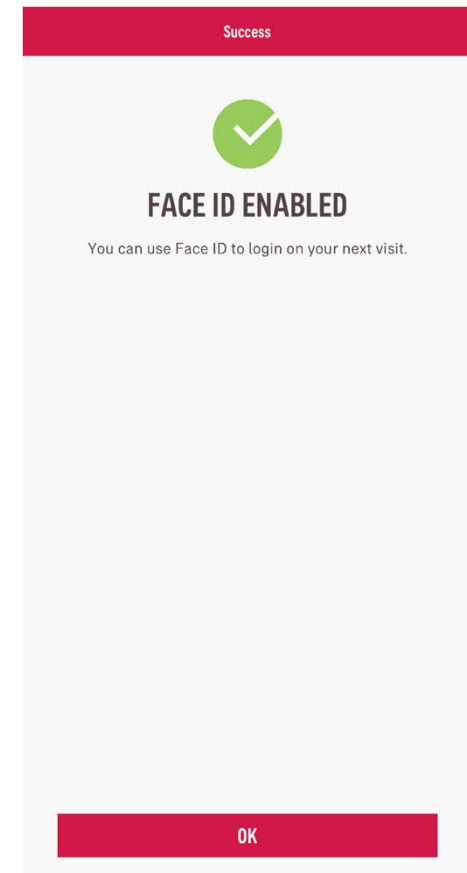


# Login to eBenefits Mobile App

After your OTP has been entered correctly, you will be prompted to allow the enabling of biometric authentication (Face ID/ Touch ID) for future login.

By tapping on **Enable**, it will allow biometric authentication to be used at login.

If you tap on **Not Now**, “**Enable Face ID**” will appear in every login. Select “**Don’t remind me again**” to disable subsequent prompts.

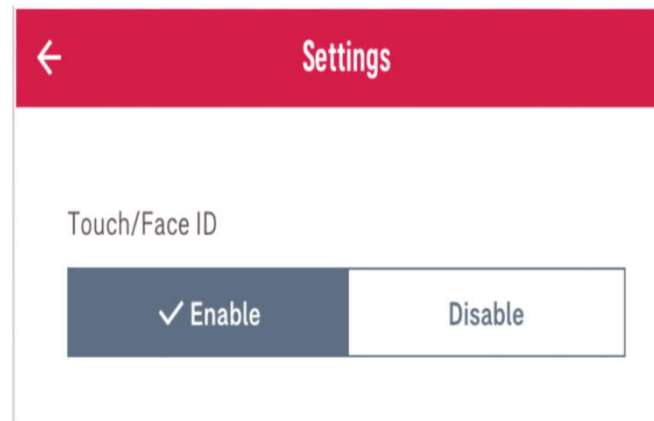


# Login to eBenefits Mobile App

Upon successful set-up, press **OK** and you will be directed to the home page.



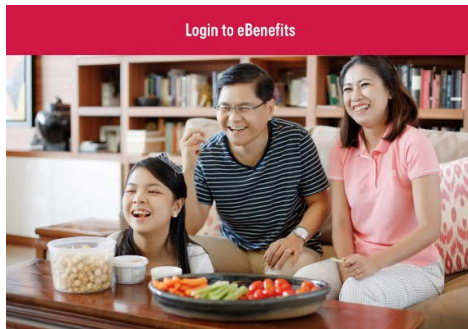
If you do not wish to enable the biometric authentication function at login, you will have to disable it in the settings.



To disable Face ID, go to the sidebar > click on "View Profile" > select "Settings" > select "Disable".



## IV.2. Forgot User ID



Login to eBenefits

User ID [Forgot User ID](#)

Password [Forgot Password](#)

**LOGIN**

When you forget your User ID, press FORGOT USER ID on the Login Page.

Key in your User ID and Date of Birth or Identification Number.



Upon pressing SUBMIT, you will be prompted to confirm if you wish to reset your User ID.

Forgot User ID

**FORGOT USER ID**

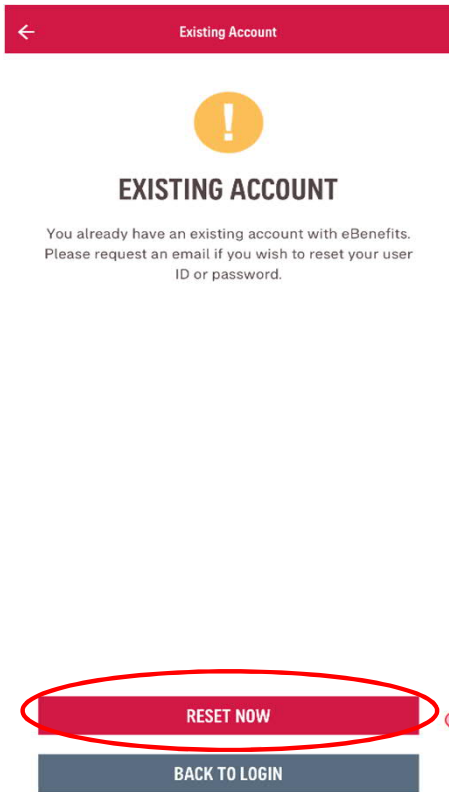
**Identification No**

**Date of Birth**

**SUBMIT**

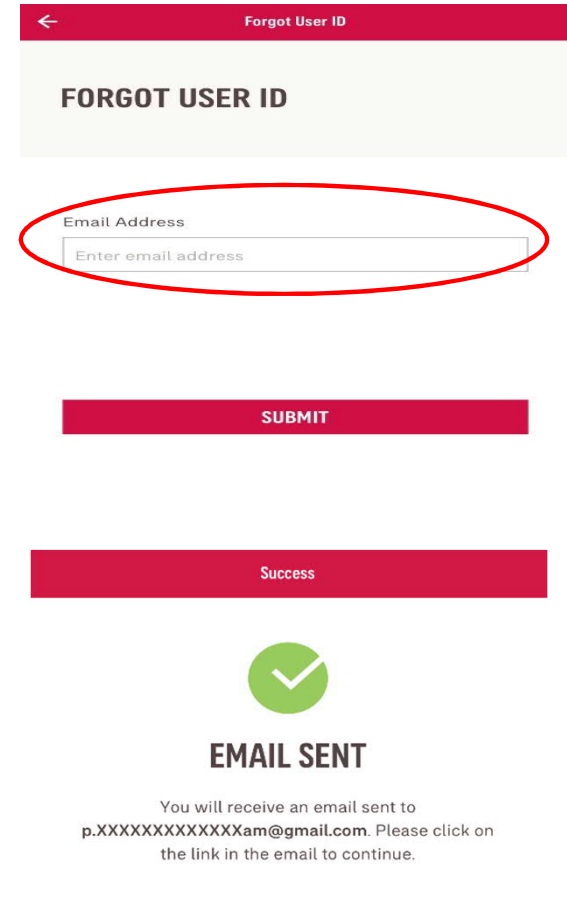


# Forgot User ID



Upon pressing SUBMIT, you will be prompted to confirm if you wish to reset your User ID. Press RESET NOW to proceed.

Key in your email address. You will receive an email for the link to change your User ID.





# Forgot User ID

Sample email

Verify your email to access AIA eBenefits

[sg.eb.customer@aia.com](mailto:sg.eb.customer@aia.com)

To

Dear Member,

Thank you for registering with AIA. To confirm your registration, please [click here](#) to verify your email address.

Thank You.

AIA Corporate Solutions



# Forgot User ID

User ID and Password

## USER ID AND PASSWORD

User ID

User ID must be alphanumeric with at least 8 characters. User ID cannot be your NRIC/FIN/Passport No.

Password

✓ Password must be 8-20 characters  
✓ Password must be alphanumeric

Verify Password

**SUBMIT**

Input your new User ID.

User ID needs to be at least 6 characters long with a limit of 50 characters. The characters (' ) and ( " ) are not allowed.


Forgot User ID

## FORGOT USER ID

Email Address


**SUBMIT**

Success



### EMAIL SENT

You will receive an email sent to p.XXXXXXXXXXXXXam@gmail.com. Please click on the link in the email to continue.



## IV.3. Forgot Password

App Store

Login to eBenefits

WELCOME

Password

Enter password

[Forgot Password](#)

LOGIN

Not you?  
Switch User

Contact Us

Terms of Use

- 1 When you forget your password, click on Forgot Password on the Login Page.
- 2 Key in your User ID and Date of Birth or Identification Number.

Forgot Password

**FORGOT PASSWORD**

User ID

Enter user ID

User ID must be alphanumeric with at least 8 characters. User ID cannot be your NRIC/FIN/Passport No.

Date of Birth

DD MMM YYYY

SUBMIT

# Forgot Password

3

Key in your new Password.

4

Key in a New Password.

Reset Password

RESET PASSWORD

Password

Enter password

✓ Password must be 8-20 characters

✓ Password must be alphanumeric

Verify Password

Enter password again

SUBMIT

**Note:** Ensure that your password is at least 8 characters long, with a mixture of alpha and numeric characters. You are advised not to use common passwords such as “1234”, “password” for security purposes.



# Forgot Password

← One Time Pin

## 2FA SECURITY - ONE TIME PIN


An OTP has been sent to your mobile number ending in **xxxxx-4207**

One Time Pin

Request a new OTP (57 secs)

A One-Time Password (OTP) will be sent to your mobile number. Enter the OTP.

Success



## UPDATED

Your password has been successfully updated.  
Please login with your new password.

Your password have been successfully reset.



# Forgot Password

You will also receive a notification from your email inbox.

## Forgot Password Notification



sg.eb.customer@aia.com  
To



Mon 3/29/2021 1:45 PM

### Forgot Password Notification

Dear Member,

Your password has been successfully changed on 29 March 2021 13:45:26.

If this request was not made by you, please contact us at [sg.eb.customer@aia.com](mailto:sg.eb.customer@aia.com) or email to [sg.eb.customer@aia.com](mailto:sg.eb.customer@aia.com).

Thank you.

AIA Corporate Solutions



## IV.4. Registering an Account



Register an account at the Login page.




User ID [Forgot User ID](#)

  
Password [Forgot Password](#)

LOGIN

-  Register an Account
-  Contact Us
-  Terms of Use

Key in your User ID and Date of Birth.



Register eBenefits Account

### REGISTER EBENEFITS ACCOUNT


Identification No.

Date of Birth

**SUBMIT**

An email containing the verification link will be sent. Click the link to proceed.

Success



### EMAIL SENT

You will receive an email sent to paXXXXXXXXXXXXXXXXXam@aia.com. Please click on the link in the email to continue.



# Registering an Account

Input your new User ID.

User ID needs to be at least 6 characters long with a limit of 50 characters. The characters (' ) and ( " ) are not allowed.



A One-Time Pin (OTP) will be sent to your mobile number. Enter the OTP from the message you received.

Upon entering the OTP, your account would have been successfully registered and you may now login.

User ID and Password

### USER ID AND PASSWORD

User ID

User ID must be alphanumeric with at least 8 characters. User ID cannot be your NRIC/FIN/Passport No.

Password

- ✓ Password must be 8-20 characters
- ✓ Password must be alphanumeric

Verify Password

**SUBMIT**

One Time Pin

### 2FA SECURITY - ONE TIME PIN

An OTP has been sent to your mobile number ending in **xxxxx-4207**

One Time Pin

Request a new OTP (57 secs)

Success

## SUCCESS

You can now access eBenefits.



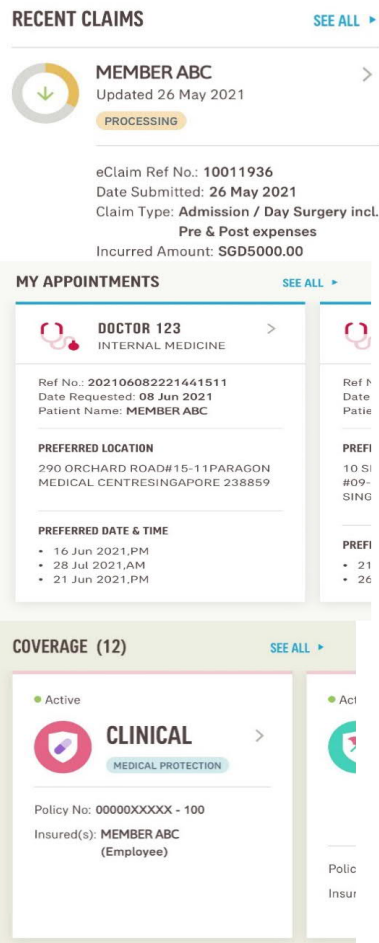
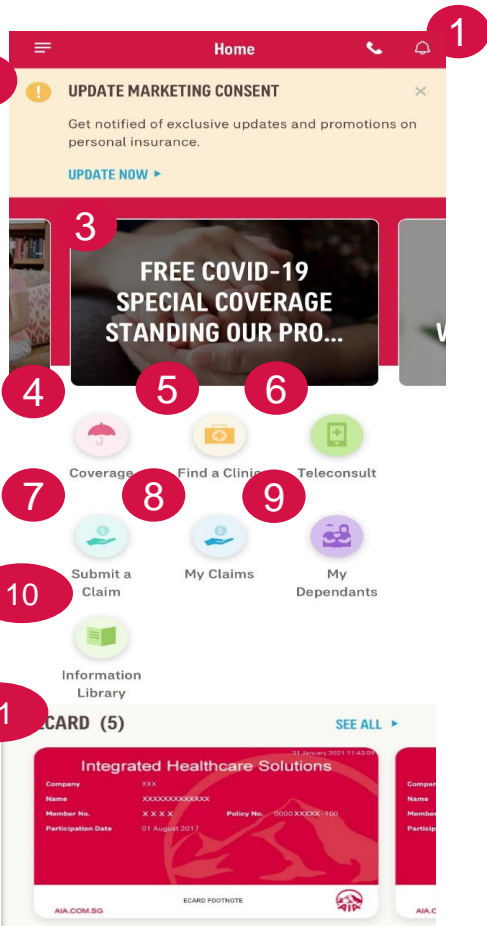




## V. Modules in the eBenefits Mobile App



# V.1 Homepage

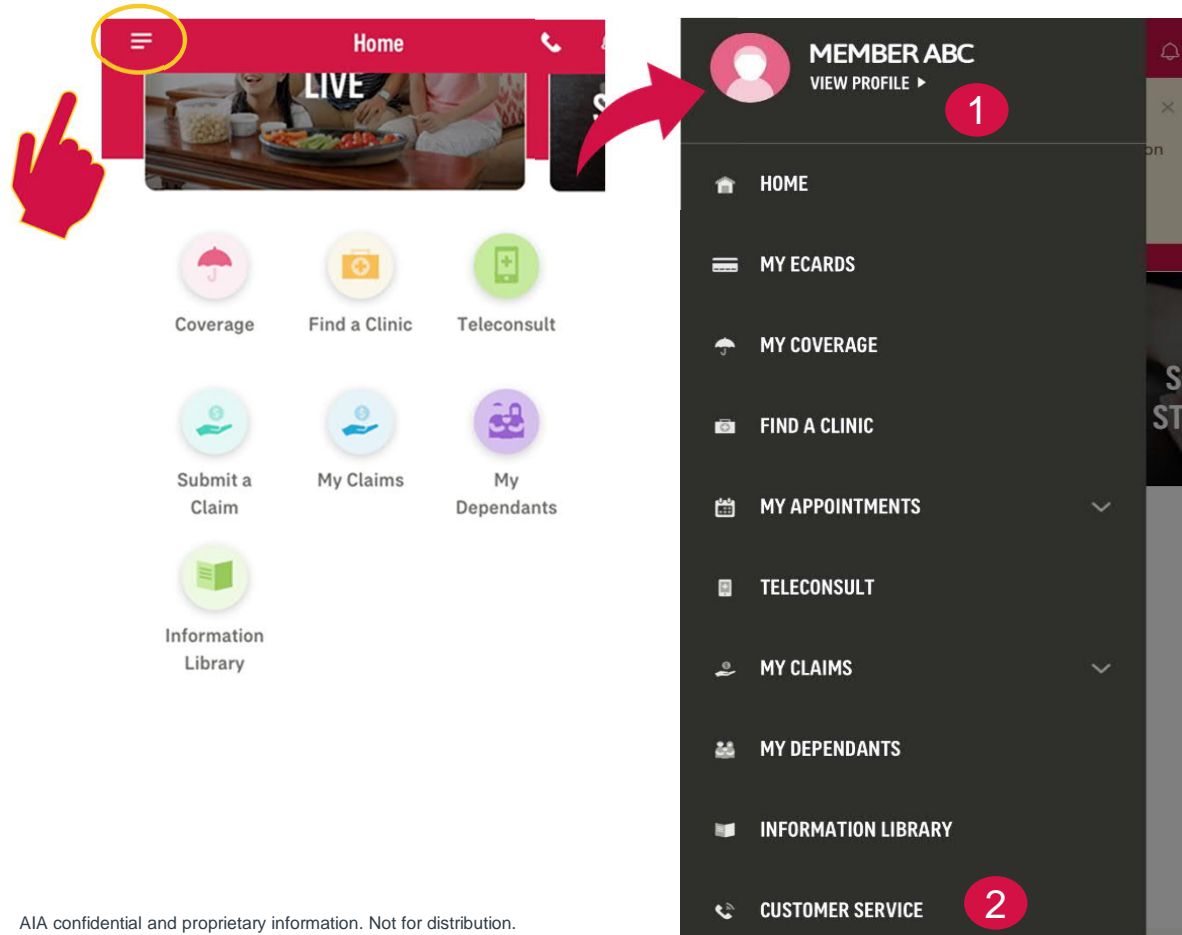


1. Notification – View policy information and product details
2. Marketing Consent– Locate panel clinics, Download panel listing
3. Banners- View promotions from AIA
4. Coverage – View policy information and product details
5. Find a Clinic- Locate panel clinics, download panel listing
6. Teleconsult
7. Submit a Claim – View the history of submitted claims and their status
8. My Claims- Submit claims online
9. My Dependants- View and manage dependants
10. Information Library- View and Download forms
11. eCard- View medical eCards

and more....



## V.2 The Sidebar Menu



On the top left corner of the homepage, you may view the eBenefits sidebar menu. The features found here are similar to the homepage, plus other 2 features:

- 1 **Member Profile** – View and Edit or Update your member account settings
- 2 **Customer Service**



# V.3 Member Profile Settings

← My Profile



Employee since 05 October 2020

ACCOUNT DETAILS >

CONTACT DETAILS >

BANK ACCOUNT DETAILS >

SETTINGS >

- In Member Profile, you may view/edit the details of your eBenefits account, such as:
  - ✓ Account Details – eBenefits account password
  - ✓ Contact Details – Phone numbers, Email and Mail Addresses
  - ✓ Bank Account Details – Bank Name, Bank account number (masked), Bank Branch Code
  - ✓ Settings – Enable/Disable Touch/ Face ID

Please contact your AIA representative if you would like this module “Updating of Bank Account Details’ to be available.

Note that ‘Updating of Contact Details’ is currently unavailable for clients with AIA Corporate Vitality.



# Member Profile Settings

To change password, go to the sidebar menu > click on “View Profile” > select “Account Details” > tap on “Change password”.

**Account Details**

CHANGE PASSWORD >

**Change Password**

**CHANGE PASSWORD**

- 1 Old Password  
Enter old password
- 2 New Password  
Enter new password  
✓ New Password must be 8-20 characters  
✓ New Password must be alphanumeric
- 3 Verify Password  
Enter new password
- 4 **UPDATE**

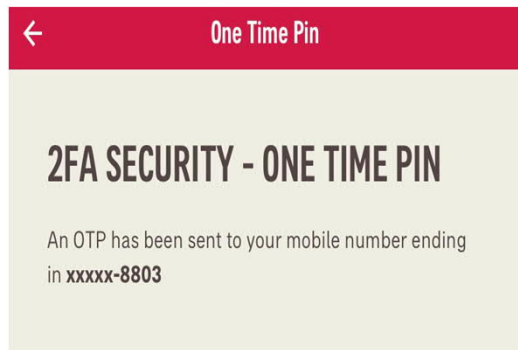
Enter your old and new password.

- 1 Input your old password
- 2 Input your new password
- 3 Input your new password again for verification
- 4 Press “Update”



## V.3.1 Change Password

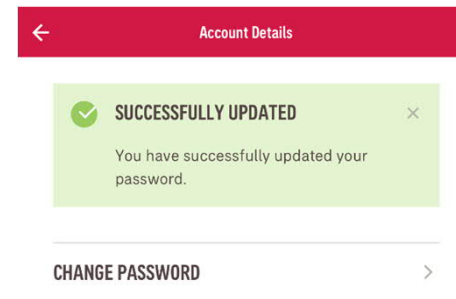
- An OTP will be sent to your registered mobile no.
- Enter the OTP and “Submit” to complete the change of password.



One Time Pin

[Request a new OTP \(53 secs\)](#)

- A display message “Successfully updated” will show once your new password is changed.

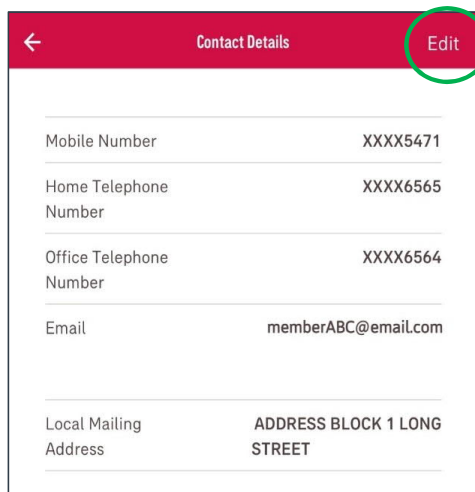


## V.3.2 Update Mobile Number

To update your Mobile Number / Email Address, go to “My Profile” > select “Contact Details” > “Edit”, located on the top right hand corner of the screen.

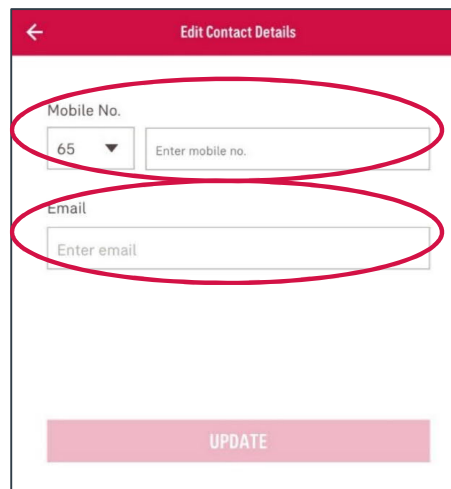
Please contact your AIA representative if you would like this module “Updating of Bank Account Details’ to be available.

Note that ‘Updating of Contact Details’ is currently unavailable for clients with AIA Corporate Vitality.



Contact Details

Mobile Number	XXXX5471
Home Telephone Number	XXXX6565
Office Telephone Number	XXXX6564
Email	memberABC@email.com
Local Mailing Address	ADDRESS BLOCK 1 LONG STREET



Edit Contact Details

Mobile No.  
65 Enter mobile no.

Email  
Enter email

UPDATE

Key in your mobile number preceded by country code

Enter your email address.



# Update Mobile Number

An OTP will be sent to your updated mobile number.  
Enter the OTP to proceed.

One Time Pin

Enter One Time Pin

Request a new OTP (57 secs)

Password

Enter password

SUBMIT

Enter your password for authentication

Mobile Number XXXX0001

Home Telephone Number XXXX6565

Office Telephone Number XXXX6564

Email memberABC@email.com

Local Mailing Address ADDRESS BLOCK 1 LONG STREET

Once password is authenticated, the Contact Details will appear again with the updated mobile number.





## V.3.3 Update Bank Account Details

To update your Bank Account Details, go to “My Profile” > select “Bank Account Details” > “Edit”, located on the top right hand corner of the screen.

Bank Account Details

Bank Name	ABCD Bank
Bank Account No.	XXXXXXXX6789
Bank Branch Code	123

Edit Bank Account Details

Bank Name  
ABCD Bank

Bank Account No.  
Bank Account No.


Bank Branch Code  
Select One

Select your Bank Name

Input your Bank Account Number

Select Bank Branch Code

UPDATE

 For certain Bank Names selected, the Bank Branch Code will be automatically populated after you enter the Bank Account Number.



# Update Bank Account Details

An OTP will be sent to your updated mobile number.  
Enter the OTP to proceed.

One Time Pin

2FA SECURITY - ONE TIME PIN

An OTP has been sent to your mobile number ending in xxxxx1767

One Time Pin

Enter One Time Pin

Request a new OTP ( 57 secs)

Upon entering the OTP, your Bank Account Details will appear again with the updated Bank Account Details.

Bank Account Details Edit

**SUCCESSFULLY UPDATED**

You have successfully updated your bank details.

Bank Name	WXYZ Bank
Bank Account No.	XXXXXXXXX1012
Bank Branch Code	030

Please contact your AIA representative if you would like this module “Updating of Bank Account Details” to be available for your client.

Note that ‘Updating of Contact Details’ is currently unavailable for clients with AIA Corporate Vitality.



# V.3.4 Update Marketing Consent

To update your Marketing Consent, go to “My Profile” > select “Marketing Consent”.

Select your preferred mode of communication to receive our marketing notifications

The screenshot shows the 'Marketing Consent' update form. At the top, there is a red header with a back arrow and the text 'Marketing Consent'. Below this, the form is titled 'MARKETING CONSENT'. The first section is 'I would like AIA to contact me via:', with three radio button options: 'Voice call', 'Text message (e.g. SMS/WhatsApp)', and 'Email and social media'. The 'Email and social media' option is selected and circled in red. Below this is the 'Mobile No.' section, which includes a dropdown menu for the country code (currently set to '65') and a text input field for the mobile number. The next section is 'Postal mail', with a radio button option that is not selected. Below this is the 'Postal Code' section, which includes a search icon and a text input field. The 'Address' section includes a large text input field with a '1900' character limit indicator. Below the address field is the 'Unit No.' section, which includes a text input field. At the bottom of the form, there is a red box containing a checked checkbox and the text 'I confirm I have read, understood and agreed to the terms & conditions.' This box is circled in red, and a red hand icon points to it. At the very bottom of the form is a red 'UPDATE' button.

Select country code and input your phone number.

Input your email address

Input and select your Postal Code, edit your Address, and input your Unit Number.

Select the confirmation and acknowledgement of the Terms & Conditions

**Note:** This box must be selected to proceed with the update



# Update Marketing Consent

After updating your Marketing Consent details, you will be informed of a successful submission of your update.

Success



**SUBMITTED**

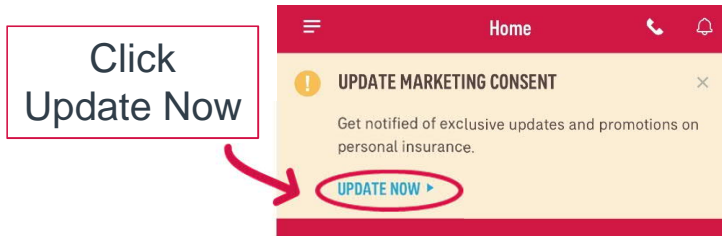
Your request has been successfully submitted and will be updated within 3 working days. A confirmation of this request will be sent to you via email.



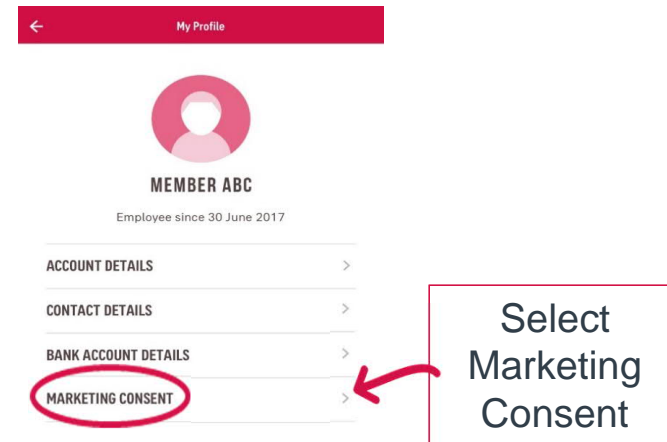
# VI. Marketing Consent

To access Marketing Consent: Go to homepage or “My Profile”.

## Homepage

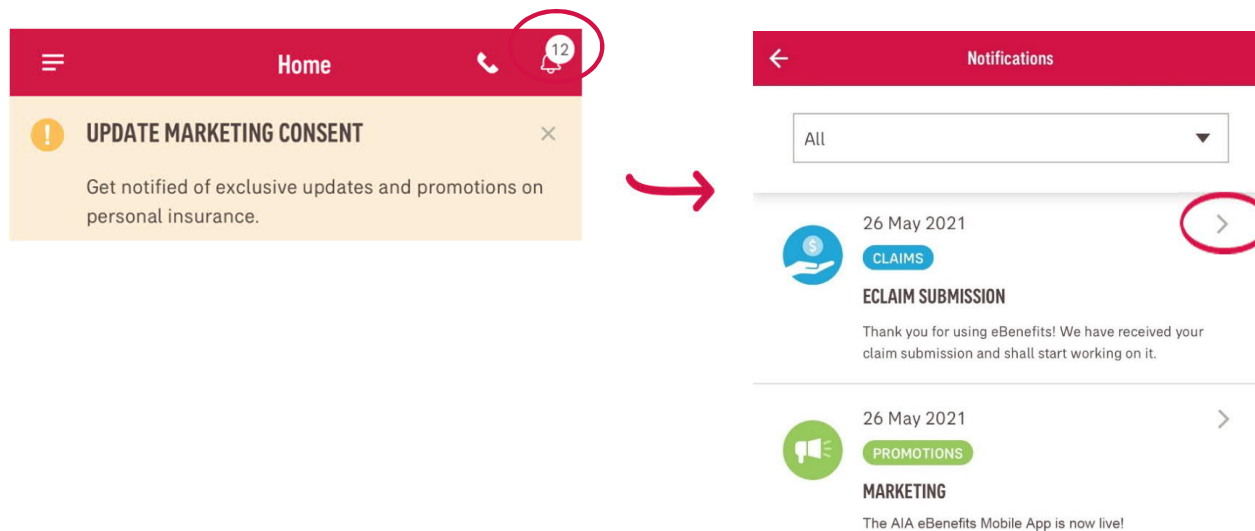


## My Profile



## VII. Notifications

To access Notifications, go to your homepage and press the bell icon located at the top right-hand corner.



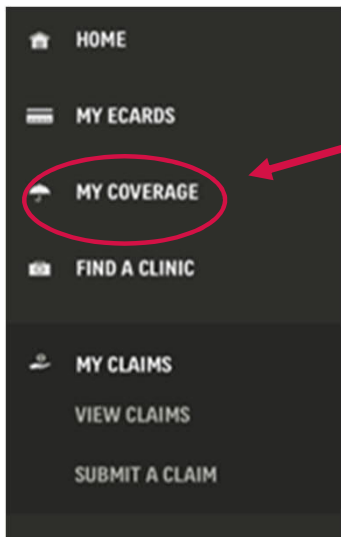
Upon pressing the icon, you will be able to view notifications for your account regarding matters such as eClaims, Marketing Promotions and System Maintenances.

To view more details, press the arrow in the same row as the notification.

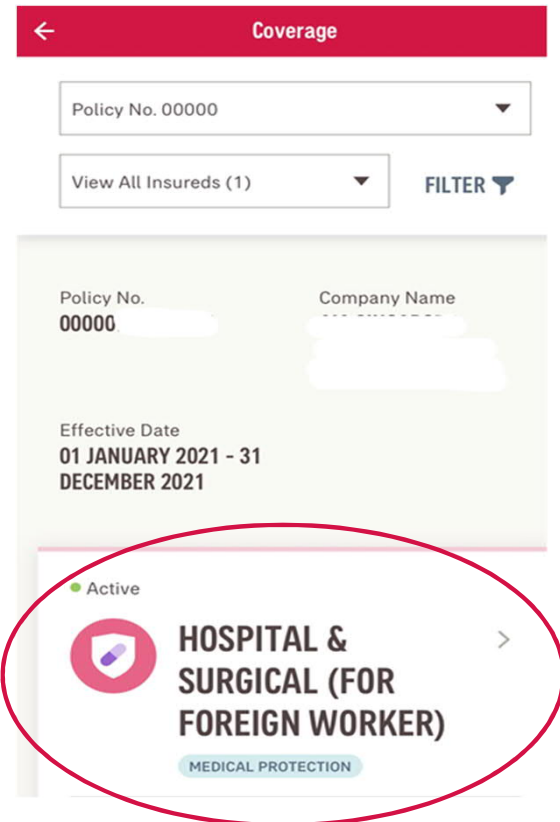
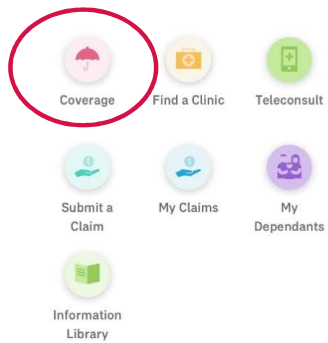
# VIII. Coverage

You may view your Policy Coverage from the sidebar menu or from the homepage.

Sidebar Menu



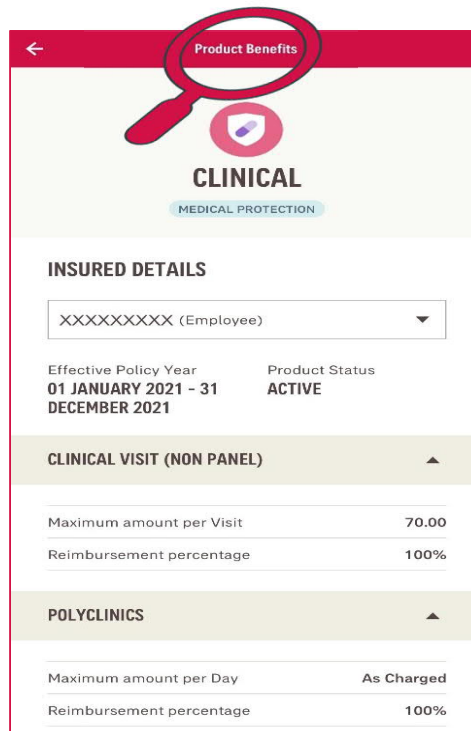
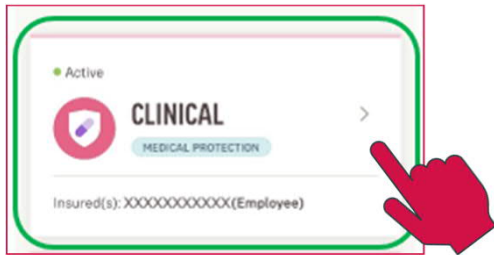
Homepage



# Coverage

➤ Press the product tab to view the **Product Benefits** details page

## Product Tab



## Product Benefits

This page may not be applicable for certain policies. A product summary will be available instead.

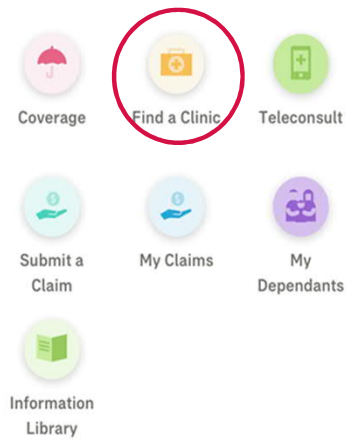




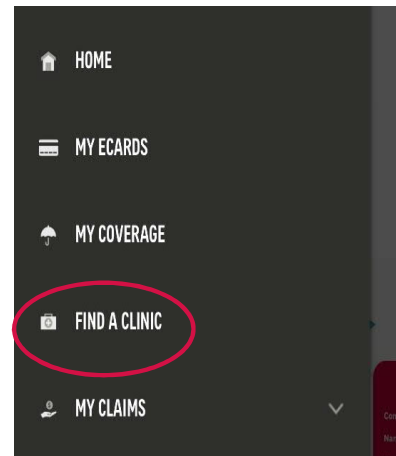
# IX. Find a Clinic

To “Find a Clinic” go to the homepage or the sidebar menu.

## Homepage

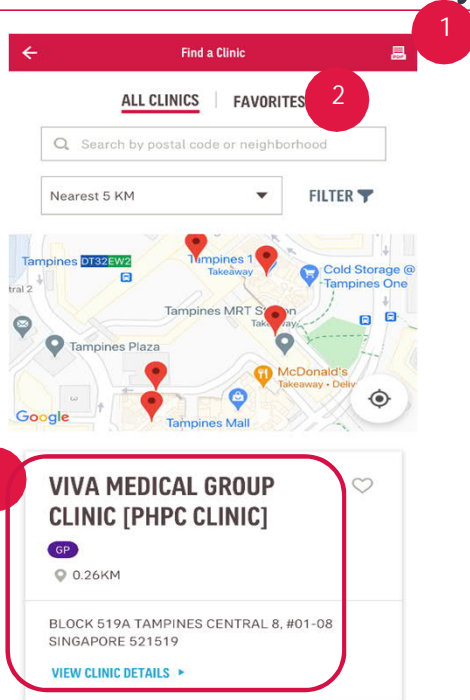


## Sidebar Menu



# Find a Clinic

- After clicking “Find a Clinic”, you will be directed to a page displaying a map and a list of nearby clinics based on your location.



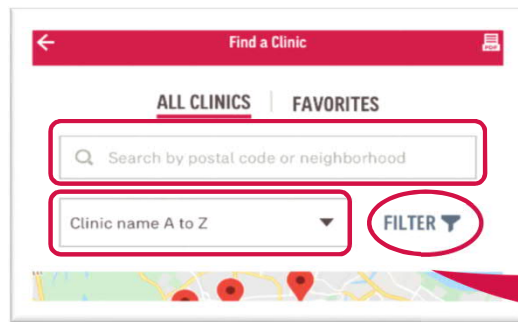
- 1 PDF icon -To view or download a panel listing, press the PDF icon at the top right- hand corner
- 2 Favorites- To view your Favorite List of clinics
- 3 To view more details about the clinic, tap on the selected clinic.

*Important Note:*  
This feature requires *location services* to be *switched on*.

# Find a Clinic

## IX.1 Area Search or Filter Option

- To change your search results, you can either enter postal code or road name, or use the filter option.



When you press FILTER, you will be directed to this page. You can change the filter settings which will refine your search results.

Filter

CLINIC NAME

Search by clinic name

CLINIC TYPE

Pediatrician

General Practitioner

Specialist

Traditional Chinese Medicine

OPENING HOURS

Open Now

24 Hours

Weekends

Public Holidays

SUBMIT

RESET

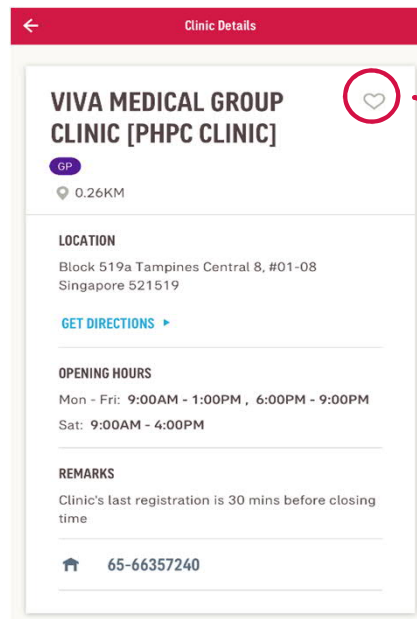
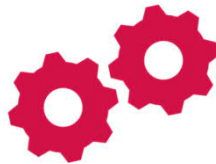


# Find a Clinic

## IX.2 Favorites

- To add a clinic to your “Favorites” list, tap on the heart icon at the top right-hand corner.

*Important Note: This feature requires location services to be switched on.*



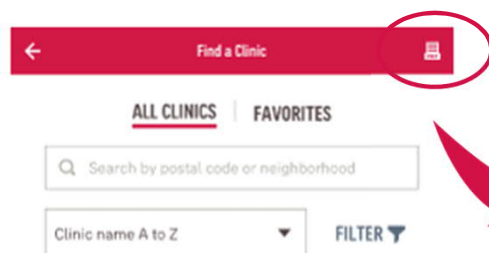
In Favorites, you will be able to view your preferred clinic at a glance.



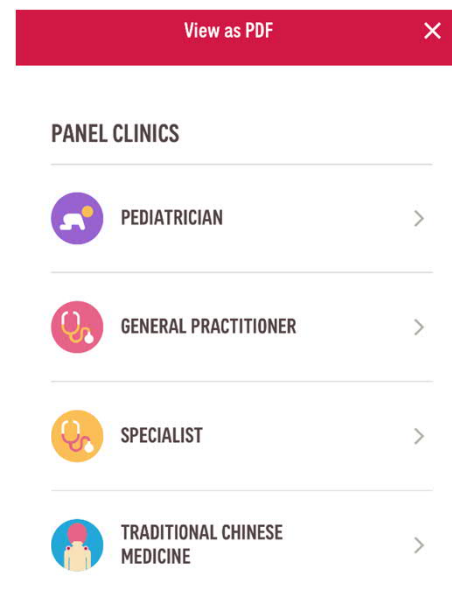
# Find a Clinic

## IX.3 Download Panel Listing

- A list of panel clinics is available for your download.

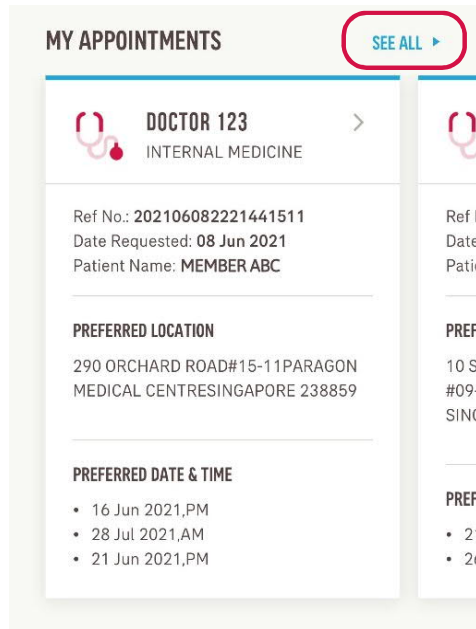


- After you tap on the PDF icon, you will be directed to the list of panel clinic listings. You may view and download/save it to your phone.
- To view a listing, select the listing you wish to look at and it will display as a PDF.



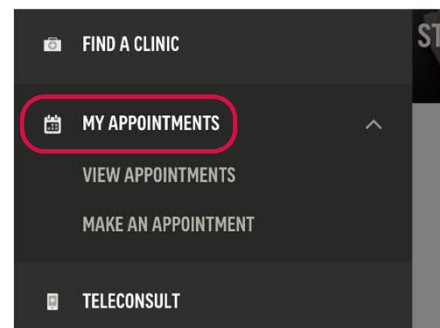
# X. My Appointments

To access “My Appointments”, go to either the homepage, OR sidebar menu.



Homepage

Press “See All”  
to view your  
appointments



Click on “My  
Appointments”

Sidebar Menu

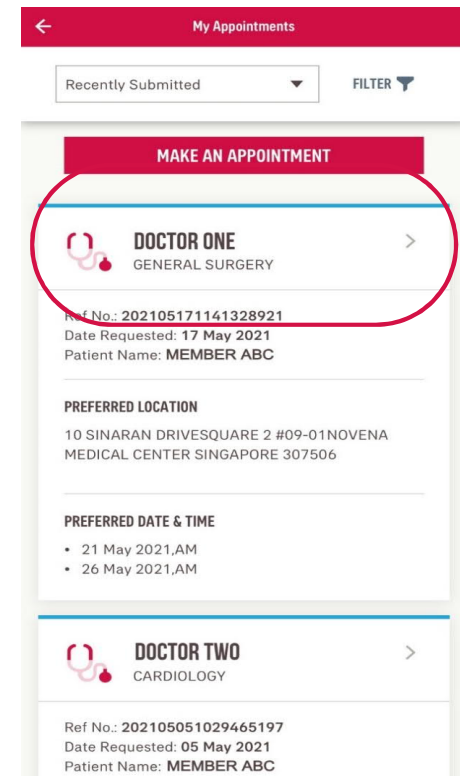
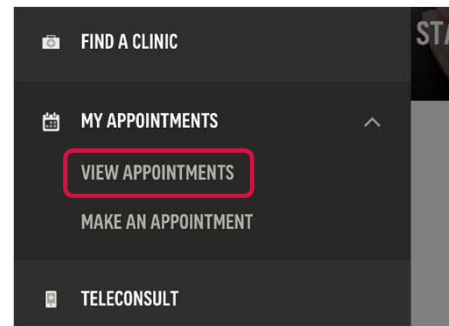
*Note: This feature is only available to policies with panel specialist coverage.*



# My Appointments

You will be directed to a page displaying a list of your booked appointments.

Search for a specific appointment



# My Appointments

Press Filter to view appointment.

My Appointments

Recently Submitted

**FILTER**

**MAKE AN APPOINTMENT**

**DOCTOR ONE**  
GENERAL SURGERY

Ref No.: 202105171141328921  
Date Requested: 17 May 2021  
Patient Name: MEMBER ABC

**PREFERRED LOCATION**  
10 SINARAN DRIVESQUARE 2 #09-01NOVENA  
MEDICAL CENTER SINGAPORE 307506

**PREFERRED DATE & TIME**

- 21 May 2021,AM
- 26 May 2021,AM

Filter

**APPOINTMENT DETAILS**

Ref No.  
Enter ref no.

Insured / Patient Name  
Select One

Doctor Name  
Search by doctor name

Specialty  
Search by specialty

**PERIOD**

Requested in  
Select One

**SUBMIT**

**RESET**

When you press “Filter”, you will be directed to this page. You will be able to change the filter settings, which will help refine your search results.

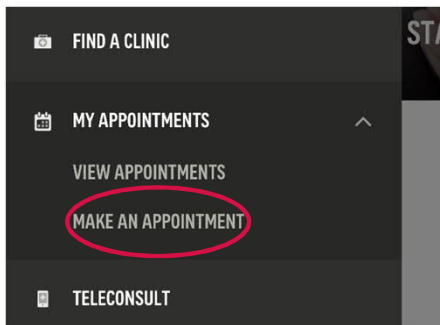




# My Appointments

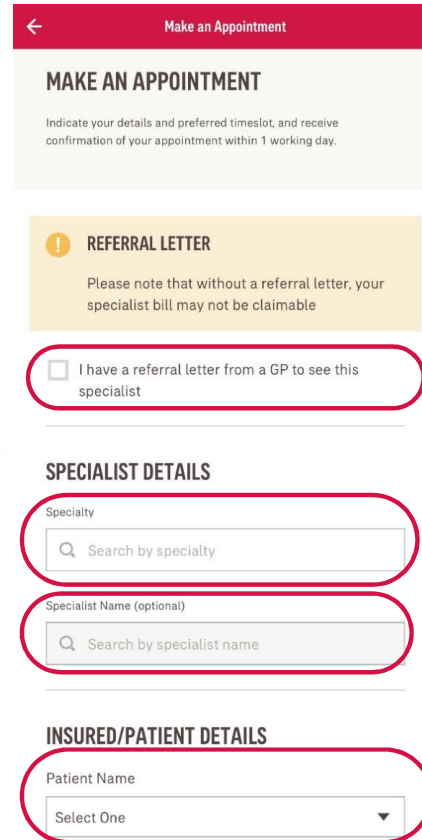
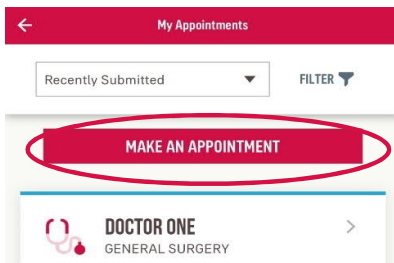
☐ Make an appointment. Go to:

## Sidebar Menu



OR

## My Appointments page



- ✓ Select the box stating you have a referral letter from a GP
- ✓ Search and select the specialist's name (*Optional*)
- ✓ Search and select the specialty
- ✓ Select the patient name



# My Appointments

**Patient Condition**  
Enter condition(s), symptoms(s), and any other information

**CONTACT DETAILS**  
The following contact details will only be used to notify you on this request and will not be updated to your policy records.

**Mobile No.**  
65 Enter mobile no.

**Email Address**  
Enter email address

**PREFERRED DATE & TIME**

**Preferred Date**  
DD MMM YYYY

**Preferred Time**  
AM PM

**Alternative Date**  
DD MMM YYYY

**Alternative Time**  
AM PM

**Next Alternative Date**  
DD MMM YYYY

**Next Alternative Time**  
AM PM

**SUBMIT**

- ✓ Input the patient condition
- ✓ Select the country code and input your mobile number
- ✓ Input your email address
- ✓ You may select and indicate alternative preferred dates and times, if needed.

Press Submit



You will be directed to this page displaying the successful submission of your request and its acknowledgement.

Success

**REQUESTED**

Your request (Ref No. 202106082221441511) has been successfully submitted. We will confirm the appointment booking via SMS and email within 1 working day.

Please contact Fullerton New Business at 63333636 for more details on this appointment.

**VIEW ALL APPOINTMENTS**

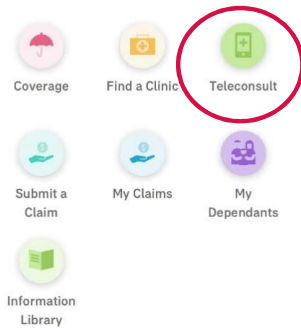
**BACK TO DASHBOARD**



# XI. WhiteCoat Teleconsult

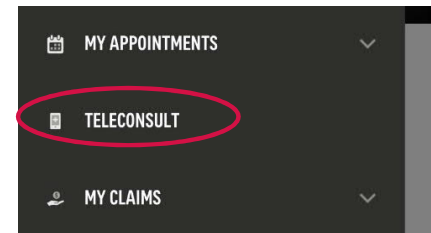
To access WhiteCoat Teleconsult, you can either go to homepage or the sidebar menu.

## Homepage



OR

## Sidebar Menu

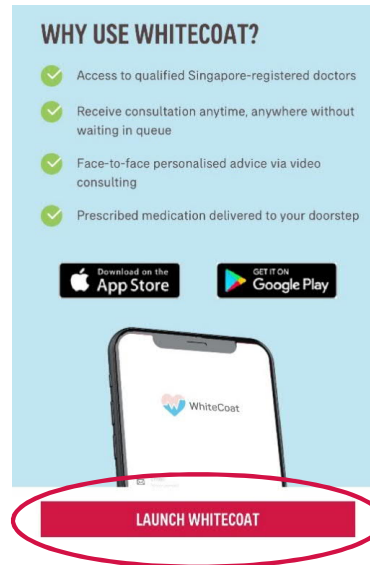


# Whitecoat Teleconsult

You will be directed to a page displaying information about teleconsultation.



Press to find out more about Teleconsultation



To access the WhiteCoat app, press “Launch WhiteCoat” to be directed to the app store where you may download it.

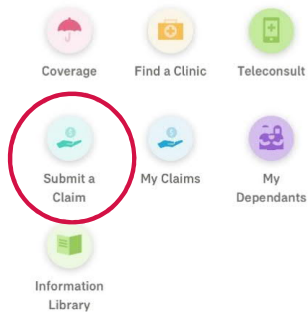
If you have already downloaded the WhiteCoat application, you will be directed straight to the WhiteCoat app after clicking on the ‘Launch WhiteCoat’ icon



## XII. Submit a Claim

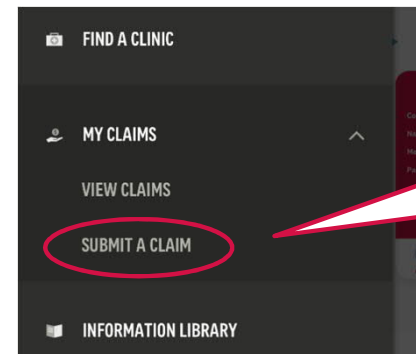
To access your claims, you can either go to homepage or the sidebar menu.

### Homepage



OR

### Sidebar Menu



Click on “View Claims” > “Submit A Claim”



# Submit a Claim > Claim / Benefit Type

Submit a Claim

1 2 3 4 5

## CLAIM TYPE

### INSURED / PATIENT DETAILS

Name  
XXX, XXX

Company  
XXX

### VISIT / ADMISSION DATE

Date of Visit / Admission  
21 Jan 2021

### CLAIM / BENEFIT TYPE

Claim Category  
Select One

### CLAIM / BENEFIT TYPE

Claim Category  
Outpatient

Claim Type  
General Practitioner Visit

Select One  
Outpatient  
Inpatient

Claim Type  
General Practitioner Visit

Select One  
General Practitioner Visit  
Whitecoat Telemedicine

### Benefit Type

- CLINICAL VISIT
- CLINICAL VISIT (NON PANEL)
- EMERGENCY OP VISIT
- OUTPATIENT TREATMENT (OVERSEAS)
- POLYCLINICS

NEXT

CANCEL

Click NEXT



# Submit a Claim > Claim Details

The screenshot shows the 'Submit a Claim' app interface. At the top, there is a red header with a back arrow and the text 'Submit a Claim'. Below the header is a progress indicator with five steps, where step 2 is active. The main section is titled 'CLAIM DETAILS' and contains three sub-sections: 'CLINIC / HOSPITALISATION DETAILS', 'DIAGNOSIS DETAILS', and 'DIAGNOSIS DETAILS'. The first 'DIAGNOSIS DETAILS' section has a search bar with 'Co' entered and a list of medical conditions. The second 'DIAGNOSIS DETAILS' section has a search bar with 'a' entered and a list of hospital names. Red arrows point from the search bars in the main form to their respective callout windows. A red circle highlights the 'Diagnosis Details' label in the main form.

**CLINIC / HOSPITALISATION DETAILS**

Name of Clinic / Hospital

Q a

- ADAM ROAD HOSPITAL
- ALEXANDRA HOSPITAL
- ANG MO KIO - THYE HUA KWAN HOSPITAL
- ANG MO KIO COMMUNITY HOSPITAL
- BRIGHT VISION HOSPITAL
- CHANGI GENERAL HOSPITAL
- ...CANCER HOSPITAL

**DIAGNOSIS DETAILS**

Q Co

- Begnin neoplasm of breast; Glandular tissue, Soft parts, Connective tissue
- Eye related/Cataract/Glaucoma /Vitreous degeneration/floater
- Flu/Cough /General Symptoms
- Other complications of pregnancy not elsewhere classified

**DIAGNOSIS DETAILS**

Q Search by diagnosis

Diagnosis Details

Please describe your diagnosis details



# Submit a Claim > Claim Details

**THIRD-PARTY CLAIMS**

Does your bill show any deduction from MediSave / CHAS?

Yes

No

Are you claiming from another insurer / policy (including Integrated Shield Plan)?

Yes

No

**REQUIRED DOCUMENTS**

Please note that the following documents will be required to complete this submission.

- Bills / Receipts
- Third-party Settlement letter (if applicable)

**NEXT**

**CANCEL**

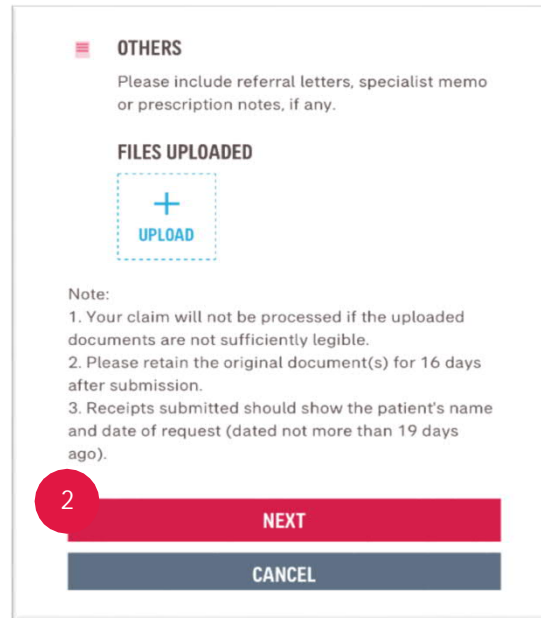
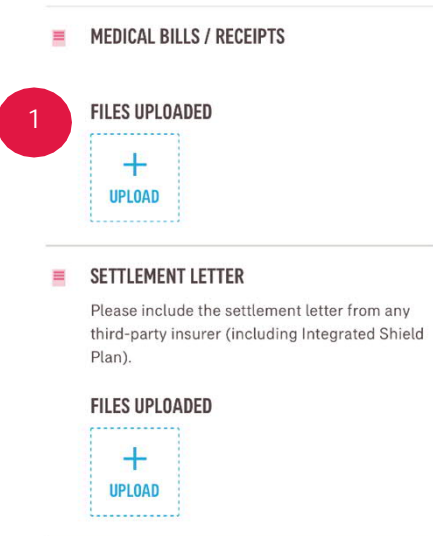
✓ Check your bill. Does your bill show any deduction from Medisave/CHAS?

✓ Are you claiming from another insurer/policy?





# Submit a Claim > Upload Documents



In the third step of the eClaim Submission, you will be able to upload the documents needed to submit your claim.

### Important Notes

*There is a limit of 10 files per section, 10MB per submission.*

*To upload pictures taken by your phone, the Camera and Photos permissions should be enabled.*

1 Upload the files according to their respective sections

2 Click "NEXT"



# Submit a Claim > Review

Submit a Claim

REVIEW

Please ensure the following details are accurate before submission.

**CLAIM TYPE**

**INSURED / PATIENT DETAILS** [EDIT](#)

Insured / Patient Name	XXX, XXX
Company Name	XXX
Policy No	0000073825

**VISIT / ADMISSION DATE** [EDIT](#)

Date of Visit / Admission	21 Jan 2021
---------------------------	-------------

**CLAIM / BENEFIT TYPE** [EDIT](#)

Claim Category	Outpatient
Claim Type	Traditional Chinese Medicine

CLAIM DETAILS

**CLINIC / HOSPITALISATION DETAILS** [EDIT](#)

Name of Clinic / Hospital	ALEXANDRA HOSPITAL
Total Amount on Bill	SGD25.00
GST	SGD1.64

**DIAGNOSIS DETAILS** [EDIT](#)

Diagnosis	46,XX true hermaphrodite
Diagnosis Details	XXX

**THIRD-PARTY CLAIMS** [EDIT](#)

Does your bill show any deduction from MediSave / CHAS?	Yes
Are you claiming from another insurer / policy (including Integrated Shield Plan)?	Yes

**UPLOAD DOCUMENTS**

**UPLOADS** [EDIT](#)

Medical Bills / Receipts	
Settlement Letter	

[NEXT](#)

[CANCEL](#)

Ensure that all details entered are accurate and correct.

Press the EDIT hyperlinks should you want to change some data.

Press NEXT once all the details have been verified.



# Submit a Claim > Declaration

Submit a Claim

DECLARATION

### IMPORTANT NOTES

Before submission, please take note of the following:

- \*The submitted request is subject to our claim assessment.
- \*It is your obligation to ensure that all details in the claim request are true to the best of your knowledge.
- \*DO NOT send the original medical receipts to AIA at the moment. Please retain these documents for at least 16 days from the expense incurred date. You may need to produce these for our claims assessment upon our request.
- \*Claims should be submitted within 19 days from occurrence date with the relevant bills and receipts, which must show the patient's name and date of request.
- \*Claims for purchase of drugs must include a copy of the attending physician's prescription.

\*Click the SUBMIT button below only if you are aware of all the statements above.

To proceed, check the agreement box located at the end of the Declaration page and press "Submit".

*Submission of the eClaim will not go through if this agreement box is not checked.*

## DECLARATION

1. I declare that the statement(s) and particulars contained and provided to AIA Singapore Private Limited ("AIA Singapore") are in all respects true and complete to the best of my knowledge and belief.
2. I hereby acknowledge, accept and agree that the availability and use of this portal by me is a privilege and service granted to the Policyholder, made available by AIA Singapore on the request of and as authorised by the Policyholder, and subject to such terms as the Policyholder and AIA Singapore may agree to from time to time. If I do not agree with the terms of use of this portal, I am entitled to withdraw from or discontinue the use of this portal and undertake to notify the Policyholder immediately of my decision to do so. I will then submit my claim(s), including all requests and communications with AIA Singapore, through the Policyholder and not by any other means.
6. I undertake and agree, for and on behalf of myself and my employer/principal/policyholder:
  - (i) To ensure that no duplicate claims are submitted to AIA Singapore, whether by myself or multiple persons, whether via this portal or other means, for the benefits under the Policy, and not to misuse or abuse this portal in any way.
  - (ii) That any payment by AIA Singapore for a duplicate claim filed is not an admission of liability and AIA Singapore reserves the right to and is entitled to claim for a return of any monies paid in respect of a duplicate claim and may pursue civil or criminal proceedings to recover the excess amounts paid including losses, damages, costs and expenses incurred by AIA Singapore in investigating such claims and seeking recovery of monies paid. I am aware that any fraud perpetrated in submitting a claim may result in criminal penalties in addition to the civil remedies that AIA Singapore will be seeking.

Employee Name: XXX, XXX  
Date and Time Submitted: 21 Jan 2021, 5:49pm

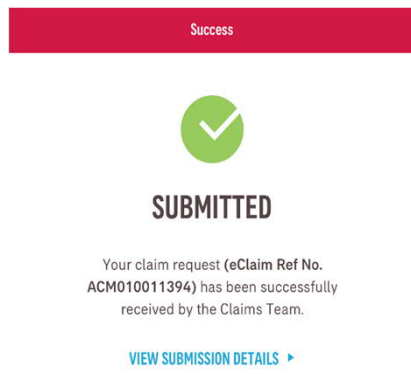
I agree and I want to proceed.

SUBMIT

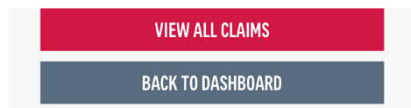
CANCEL



# Submit a Claim > Acknowledgement



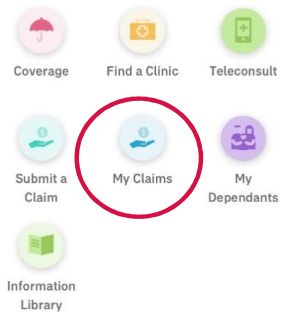
- ✓ You will receive a notice of successful submission with a reference number.
- ✓ View the details of the claim in PDF, in “View Submission Details” hyperlink.
- ✓ View all claims submitted previously, in “View All Claims”.
- ✓ To return to the app homepage, select “Back To Dashboard”.



# XIII. My Claims

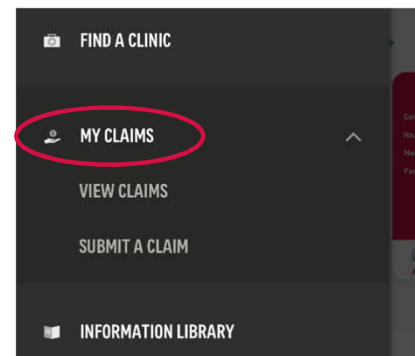
To access your claims, you can either go to homepage or the sidebar menu.

## Homepage



OR

## Sidebar Menu



✓ “My Claims” allows you to view the details and status of all the claims previously submitted by you, for yourself or your dependents (if any).

# My Claims

To refine your search results, press “Filter”.

To view more details of a specific claim, press the claim you wish to view.

My Claims

View All Statuses

Recently Updated **FILTER**

**SUBMIT A CLAIM**

**XXXXXXXX** Updated 19 Jan 2021  
PROCESSING

eClaim Ref No.: 1001656  
Date Submitted: 19 Jan 2021  
Claim Type: General Practitioner Visit  
Incurred Amount: SGD55555.00

**XXXXXXXX** Updated 19 Jan 2021  
PROCESSING

eClaim Ref No.: 10011328  
Date Submitted: 19 Jan 2021  
Claim Type: General Practitioner Visit  
Incurred Amount: MYR101.00

**XXX, XXX** Updated 19 Jan 2021

**SUBMIT A CLAIM**

**XXXXXXXX** Updated 27 Mar 2019  
APPROVED

eClaim Ref No.: 103645  
Date Submitted: 01 Mar 2019  
Claim Type: Dental Services & Treatment  
Incurred Amount: SGD9.00



# My Claims

## XIII.1 Filter

When Filter is selected, you can edit the fields to search for a claim more specifically.

Filter ×

**CLAIM DETAILS**

eClaim Reference No.

Claim No.

Insured / Patient Name

Claim Type

**PERIOD**

Submitted in

**SUBMIT**

**RESET**



# My Claims

## XIII.2 Claim Tab

When you press a claim tab, all the details of the selected claim will be displayed.

XXXXXXXXX  
Updated 19 Jan 2021  
PROCESSING

eClaim Ref No: 1001656  
Date Submitted: 19 Jan 2021  
Claim Type: General Practitioner Visit  
Incurred Amount: SGD55555.00

XXXXXXXXX  
Updated 19 Jan 2021  
PROCESSING

eClaim Ref No.: 10011328  
Date Submitted: 19 Jan 2021  
Claim Type: General Practitioner Visit  
Incurred Amount: MYR101.00

XXX, XXX  
Updated 19 Jan 2021

← Claims Details

eClaim Reference No.  
**1001656**

Claim No.  
**4968440**

Policy No.  
**0000XXXX**

Insured / Patient Name  
**XXXXXXXXXXXX**

Visit Date  
**2021/01/09 - 2021/01/09**

Claim Type  
**GENERAL PRACTITIONER VISIT**

Name of Clinic / Hospital  
**JURONG COMMUNITY HOSPITAL**

Incurred Amount  
**SGD55555.00**

Reimbursed Amount  
**SGD0.00**

**PROGRESS**

27 Mar 2019  
**APPROVED**  
Your claim has been approved and reimbursed.  
[VIEW LETTER ▶](#)

27 Mar 2019  
**PROCESSING**  
Your claim submission has been received by the Claims team

27 Mar 2019  
**SUBMITTED**  
Your claim request (eClaim Ref No. 103645 OR Claim Ref No. 4953653) has been successfully submitted





# My Claims

## XIII.3 Resubmission of Claims Documents

When more claims information are requested, proceed to Documents Required to upload documents.

- ✓ Use the dropdown menu to select the "Documents Required".
- ✓ Select the claim record

My Claims

Documents Required

Recently Updated FILTER

**SUBMIT A CLAIM**

**MEMBER ABC**  
Updated 31 May 2021  
DOCUMENTS REQUIRED

eClaim Ref No.: 10012016  
Date Submitted: 30 May 2021  
Claim Type: General Practitioner  
Incurred Amount: SGD88.00

**MEMBER ABC**  
Updated 31 May 2021  
DOCUMENTS REQUIRED

eClaim Ref No.: 10012017  
Date Submitted: 30 May 2021  
Claim Type: Artificial Insemination  
Incurred Amount: SGD77.00



Claims Details

eClaim Reference No.  
**10012016**

Claim No.  
**4970662**

Policy No.  
**0000012345**

Insured / Patient Name  
**MEMBER ABC**

Visit Date  
**2021/05/30 - 2021/05/30**

Claim Type  
**GENERAL PRACTITIONER**

Name of Clinic / Hospital  
**1 MEDICAL TECK GHEE [PHPC CLINIC]**

Incurred Amount  
**SGD88.00**

Reimbursed Amount  
**SGD0.00**



# My Claims

## Resubmission of Claims Documents

- Upon selecting the claim record, the details of the claim will be displayed. In the **Progress timeline**, there will be a section labelled “Documents Required”.
- To start the resubmission process, press “Upload Now”.

### PROGRESS

#### OUTCOME

31 May 2021

#### DOCUMENTS REQUIRED

There are outstanding documents that need to be submitted in order to continue processing this claim.

##### Documents Required

PLEASE PROVIDE A COPY OF CPF STATEMENT (NOTED BILL HAS MEDISAVE/MEDISHIELD DEDUCTION)

##### Notes

split & accept

Note: Updating of claim status could be delayed by 2 to 3 months due to the time taken by the clinician/administrator to submit the claim to AIA and for AIA to validate the claim.

UPLOAD NOW



30 May 2021

#### PROCESSING

Your claim submission has been received by the Claims team

30 May 2021

#### SUBMITTED

Your claim request (eClaim Ref No. 10012016 OR Claim Ref No. 4970662) has been successfully submitted



# My Claims

## Resubmission of Claims Documents

1. Upload the documents required.

**Important Notes:**

*There is a limit of 10 files per section, 10MB per submission.*

*To upload pictures taken by your phone, the Camera and Photos permissions should be enabled.*

2. Upload the files according to their respective sections

3. Press NEXT.

Submit a Claim

1 2 3

### UPLOAD DOCUMENTS

Uploads must be in images (JPG / PNG) or PDF format and cannot exceed 10MB per submission.

**MEDICAL BILLS / RECEIPTS**

FILES UPLOADED

+  
UPLOAD

**SETTLEMENT LETTER**

Please include the settlement letter from any third-party insurer (including Integrated Shield Plan).

FILES UPLOADED

+  
UPLOAD

Note:

1. Your claim will not be processed if the uploaded documents are not sufficiently legible.
2. Please retain the original document(s) for 180 days after submission.
3. Receipts submitted should show the patient's name and date of request (dated not more than 90 days ago).

NEXT

CANCEL



# My Claims

## Resubmission of Claims Documents

The confirmation overview will be displayed before submission.

The details displayed are for the claim that you are resubmitting for. Ensure that the attachments uploaded are correct.

Press **NEXT** once all details have been verified.

Submit a Claim

1 2 3

### REVIEW

Please ensure the following details are accurate

#### CLAIM TYPE

#### INSURED / PATIENT DETAILS

Insured / Patient Name	MEMBER ABC
Company Name	COMPANY XYZ
Policy No	0000012345

#### VISIT / ADMISSION DATE

Date of Visit / Admission	30/05/2021
---------------------------	------------

#### CLAIM / BENEFIT TYPE

Claim Category	Outpatient
Claim Type	General Practitioner

#### CLAIM DETAILS

#### CLINIC / HOSPITALISATION DETAILS

Name of Clinic / Hospital	1 MEDICAL TECK GHEE [PHPC Clinic]
Total Amount on Bill	SGD 88.00
GST	SGD 5.76

#### DIAGNOSIS DETAILS

Diagnosis	Arthritis
Diagnosis Details	-

#### THIRD-PARTY CLAIMS

Does your bill show any deduction from MediSave / CHAS?	No
Are you claiming from another insurer / policy (including Integrated Shield Plan)?	No

#### UPLOAD DOCUMENTS

#### UPLOADS

Medical Bills / Receipts



NEXT

CANCEL



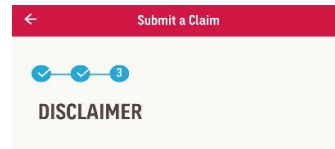
# My Claims

## Resubmission of Claims Documents

In the final step of this process, the Terms & Conditions and Declaration is displayed.

If you agree to the terms and wish to proceed, check the agreement box located at the end of the Declaration page and press SUBMIT.

Submission of the eClaim will not go through if this box is not checked.



### IMPORTANT NOTES

Before submission, please take note of the following:

\*The submitted request is subject to our claim assessment.

\*It is your obligation to ensure that all details in the claim request are true to the best of your knowledge.

\*DO NOT send the original medical receipts to AIA at the moment. Please retain these documents for at least 180 days from the expense incurred date. You may need to produce these for our claims assessment upon our request.

\*Claims should be submitted within 90 days from occurrence date with the relevant bills and receipts, which must show the patient's name and date of request.

\*Claims for purchase of drugs must include a copy of the attending physician's prescription.

\*Click the SUBMIT button below only if you are aware of all the statements above.

### DECLARATION

1. I declare that the statement(s) and particulars contained and provided to AIA Singapore Private Limited ("AIA Singapore") are in all respects true and complete to the best of my knowledge and belief.
2. I hereby acknowledge, accept and agree that the availability and use of this portal by me is a privilege and service granted to the Policyholder, made available by AIA Singapore on the request of and as authorised by the Policyholder, and subject to such terms as the Policyholder and AIA Singapore may agree to from time to time. If I do not agree with the terms of use of this portal, I am entitled to withdraw from or discontinue the use of this portal and undertake to notify the Policyholder immediately of my decision to do so. I will then submit my claim(s), including all requests and communications with AIA Singapore, through the Policyholder and not by any other means.
3. By continuing with the use of this portal, I hereby authorise, agree and consent to the following on my behalf and on behalf of each and every insured person for whom I am making a claim or enquiry:
  - (i) That any payment by AIA Singapore for a duplicate claim filed is not an admission of liability and AIA Singapore reserves the right to and is entitled to claim for a return of any monies paid in respect of a duplicate claim and may pursue civil or criminal proceedings to recover the excess amounts paid including losses, damages, costs and expenses incurred by AIA Singapore in investigating such claims and seeking recovery of monies paid. I am aware that any fraud perpetrated in submitting a claim may result in criminal penalties in addition to the civil remedies that AIA Singapore will be seeking.

Employee Name: XXX, XXX  
Date and Time Submitted: 21 Jan 2021, 5:49pm

I agree and I want to proceed.

SUBMIT

CANCEL

**Note:** These screens are a shortened version of the actual T&Cs and Declaration, used for illustration purposes in this guide.



# My Claims

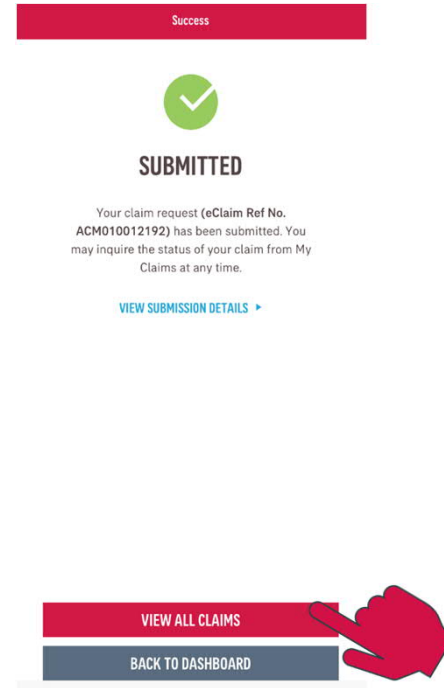
## Resubmission of Claims Documents

An acknowledgment reference number will be displayed with a notice of successful submission.

To view the details of the claim, press the “View Submission Details” hyperlink.

To view all claims submitted previously, press “View All Claims” button.

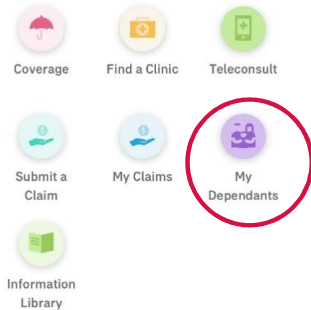
To return to the app homepage, press “Back To Dashboard” button



## XIV. My Dependants

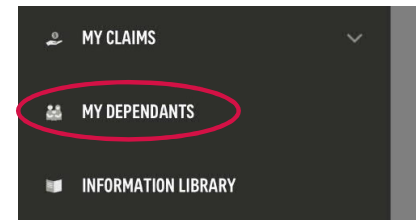
To access your dependant(s) details, you can either go to homepage or the sidebar menu.

### Homepage



OR

### Sidebar Menu



# My Dependants



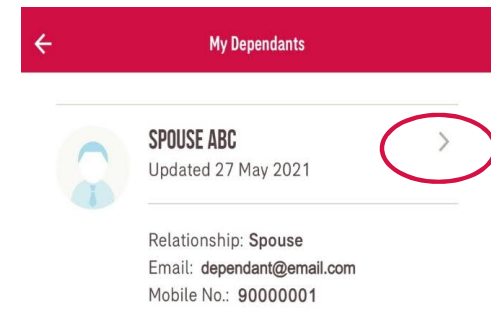
**NO DEPENDANTS FOUND**

To add a dependant, please email us at [sg\\_eb\\_customer@aia.com](mailto:sg_eb_customer@aia.com) with their **name**, **date of birth**, **identification no.** and attach a copy of their **ID card / passport**. Your request will be processed within 7 working days.

This page will be displayed if there is no registered dependent under your account.

To view and activate dependents registered under you (if there are any), their records will be displayed upon pressing “My Dependants”.

Select their record to view dependant details.





# My Dependants

If your dependant has their contact information stored in the system, it will be displayed here.

## Dependant Details

Name  
**SPOUSE ABC**

Relationship  
**SPOUSE**

Email  
**DEPENDANT@EMAIL.COM**

Mobile No.  
**90000001**

To activate your dependant, press "Activate eBenefit"

**ACTIVATE EBENEFIT**

For dependants where their contact information are not in the system, input their data accordingly.

## Activate eBenefits

### ACTIVATE EBENEFITS

Allow your dependant to create their own eBenefits account to submit and track their claims.

Your dependant will receive an email to activate their eBenefits account. Upon activation, they will receive an OTP via SMS to login.

Dependant's Email \*

Dependant's Mobile No.

Note: The above contact details will be updated to the dependant's profile.

**SEND EMAIL**

**CANCEL**



# My Dependants

← Dependant Details

✓ SUCCESSFULLY SUBMITTED ✕

Your dependant will receive an email at **dependant@email.com** to activate their eBenefits account.

Name  
**SPOUSE ABC**

Relationship  
**SPOUSE**

Email  
**DEPENDANT@EMAIL.COM**

Mobile No.  
**90000001**

**ACTIVATE EBENEFIT**

An email containing instructions for the dependant to login will be sent. They may login to eBenefits afterwards.



# My Dependants

Sample email

**From:** [sg.eb.customer@aia.com](mailto:sg.eb.customer@aia.com)  
**Date:** 27 June 2021 at 05:13:06 SGT  
**To:**  
**Subject:** Welcome to AIA eBenefits!

\*\*\*\*\* This is a system-generated message. Please do not reply to this email. \*\*\*\*\*

Dear Member,

Welcome to AIA eBenefits.

AIA eBenefits is now available for your login!

eBenefits is an online mobile responsive portal that allows you to get access to what you need of your group insurance on-the-go! You can view your Policy Benefits, submit medical claim electronically and track the claim status. You can also use eBenefits to find a clinic on AIA panel and retrieve electronic medical card at your finger tip if your policy provides outpatient panel benefits. It's hassle-free so [Click here to Login Now](#).

Your User ID will be the Email address which you have provided when you enrolled with us.

Your initial password will be the 1st 4 characters of your Identification Number followed by the day and month of your birth date (in DDMM format).

For example, Email Address is [abcd.eta@aia.com.sg](mailto:abcd.eta@aia.com.sg), Identification Number is S1234567A and Birth Date is 18 June 2000 and User ID will be [abcd.eta@aia.com.sg](mailto:abcd.eta@aia.com.sg) and password will be S1231806.

If you have any enquiry, please contact AIA's Customer Service Hotline at +65 6248 8328 or email us at [sg.eb.customer@aia.com](mailto:sg.eb.customer@aia.com).

Thank you.

Corporate Solutions

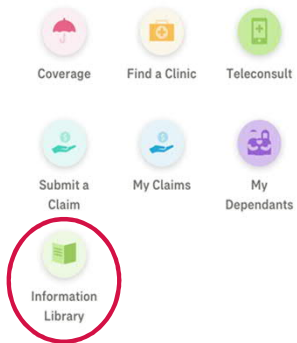
AIA Singapore Private Limited



# XV. Information Library

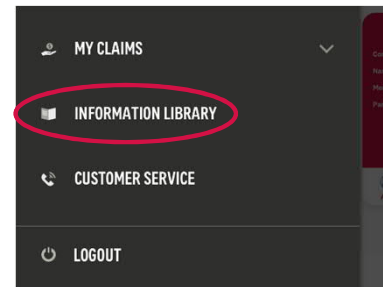
To access the Information Library, you can either go to homepage or the sidebar menu.

## Homepage



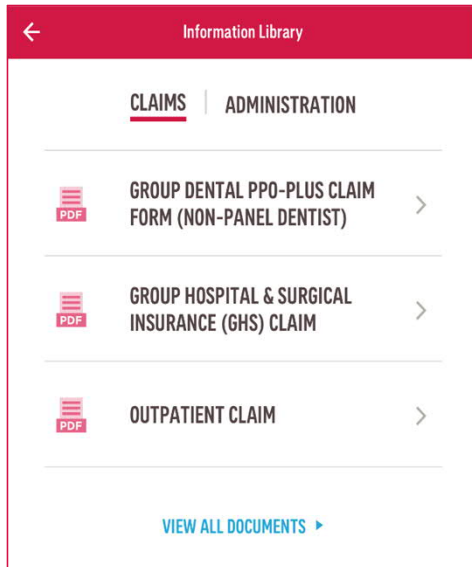
OR

## Sidebar Menu

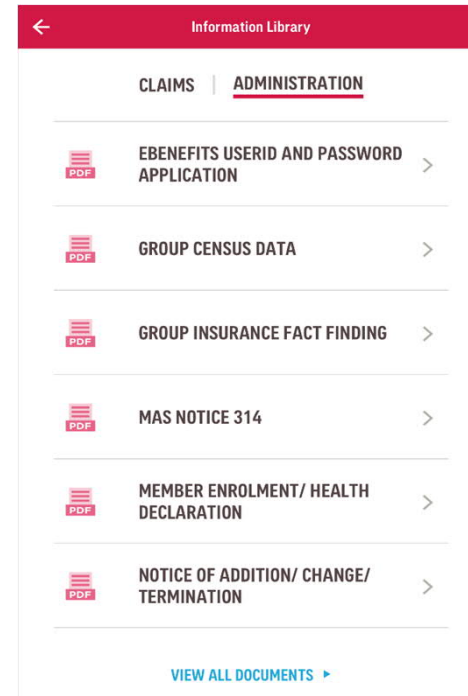


# Information Library

- In the Information Library, you will be directed to the pages displaying forms and documents under their respective categories.



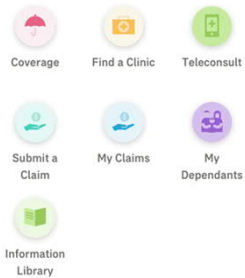
These forms may be downloaded and used for their rightful purposes.



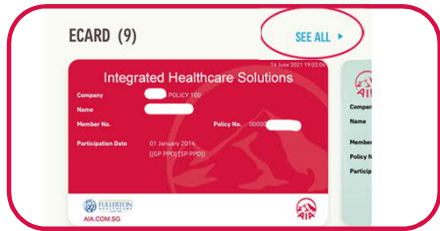
# XVI. eCard

To access the eCard, you can either go to homepage or the sidebar menu.

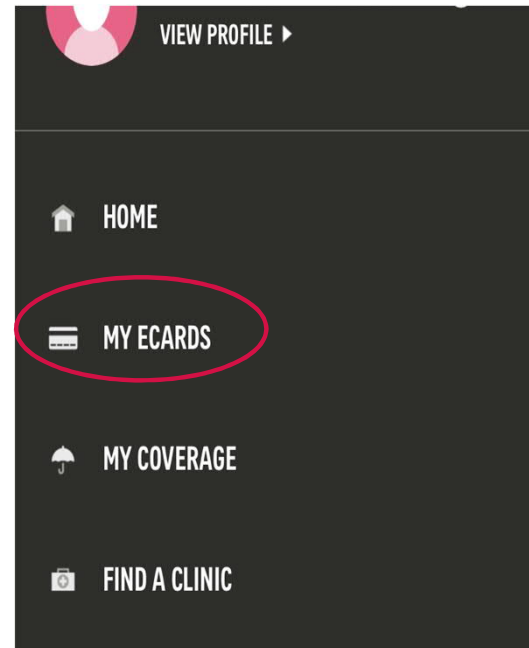
## Homepage



Swipe left or right to view the front and back of the cards briefly. Press the "See All" hyperlink to view all the cards.



## Sidebar Menu



# eCard

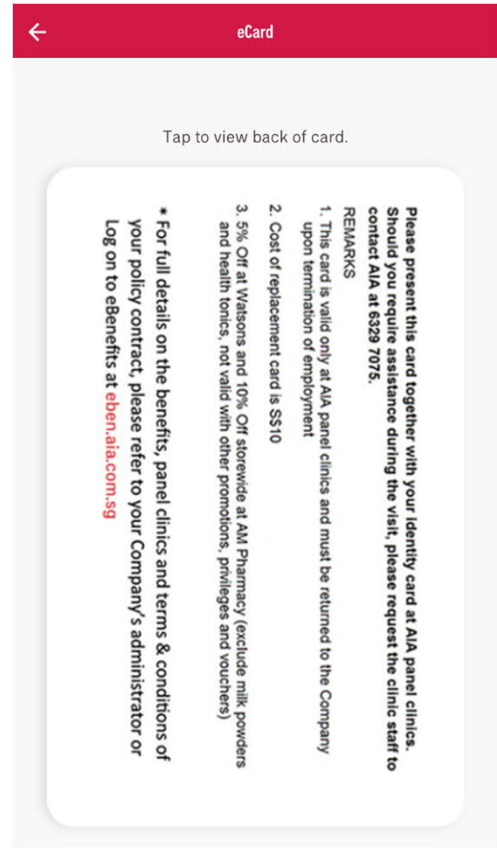
- In the eCard page, all applicable medical cards of the coverage you are insured for will be displayed.

- ❖ Select from the dropdown To view eCards under another insured member such as your dependants (if any).
- ❖ To have a magnified view of a specific eCard, tap the eCard you wish to look at.



# eCard

The eCard you selected will display as shown. Tap on it to view the back of the card.

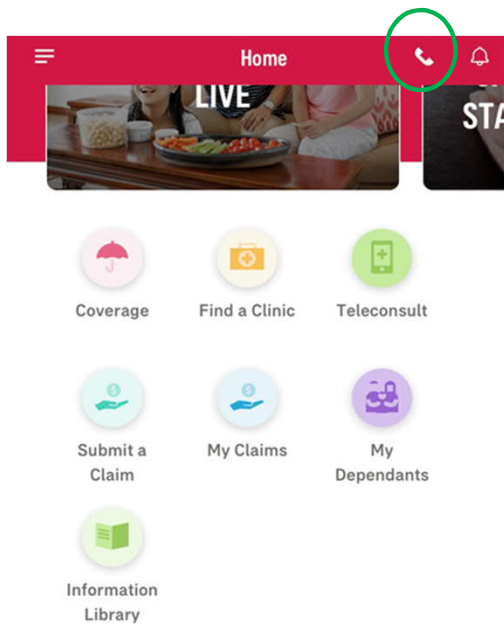




# XVII. Customer Service

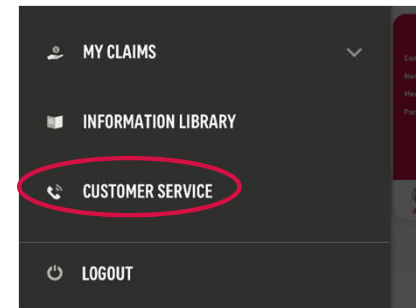
To access the Customer Service, you can either go to homepage or the sidebar menu.

## Homepage



OR

## Sidebar Menu

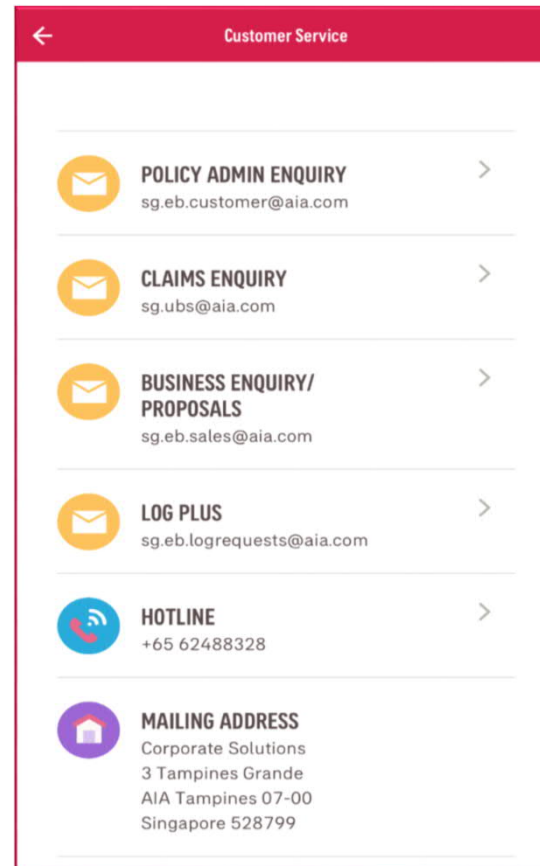


Press the phone icon



# Customer Service

Press Customer Service or the phone icon and you will be directed to a page displaying the relevant **hotlines** and **addresses**, should you need to contact Customer Service.





HEALTHIER, LONGER,  
BETTER LIVES

