



GUARANTEE LETTER (*Group*)

Coverage Type: NEW VISIT REQUEST
GL No.: S0000899

Guarantee Details

Issued Date:	6/5/2022	Hospital Name:	COLUMBIA HOSPITAL SETAPAK
Visit ID/Reg #:	1234	MRN #:	1234
Member Name:	ABDUL HALIM BIN AHMAD	Gender:	Male
Patient Name:	ABDUL HALIM BIN AHMAD	Age:	42
Membership #:	790518146311	Special Status:	Privilege Card
Relationship:	Member	GL Status:	Pending Bill Submission
Policy/Certificate #:	30002526		
Company Name:	SINGLE POLICY SCENARIO		

Visit Conditions

Visit Date: 6/5/2022
Specialist: SAZZLI KASSIM
Specialization: CARDIOLOGY
Coverage Limit Amount (Visit): As Charged

Diagnosis (ICD-10)
177.89 - Degos Disease

Patient out of Pocket Expense

Co. Share (%): %
Notes:

Deductible:
Notes:

Guarantee Letter Coverage Notes:

This Guarantee Letter covers:

This Guarantee Letter does not cover:

Additional Note:

This Guarantee Letter is subject to the Guarantee Upon Discharge, and AIA Bhd./AIA General Bhd./AIA Public Takaful Bhd. reserves the right not to honour payment for any admission(s) / service(s) / investigation(s) / treatment(s) rendered which are not covered under the Policy/Certificate.



Authorised representative of AIA PUBLIC Takaful Bhd. and
AIA General Berhad (790895-D)

AIA Health Services Sdn. Bhd. (388561-T)
Menara AIA, 99 Jalan Ampang
50450 Kuala Lumpur
AIA.COM.MY

T : 603-20562666
F : 603-20562691

Guarantee Upon Visit Completion

Bill Summary #:

Hospital Invoice #:

Items	Amount	Remark
Presented bill		
Final Guarantee Amount:		

Billing Remarks

Claims Benefit Excess:

Non-Payable Item:

Credit Note (Do not collect from Patient):

Amount Under Clarification (Do not collect from Patient):

Authorized by,

Health Claims Management

This is a computer-generated letter. No signature is required.