

Migrant Domestic Worker Insurance Claim

Dear Valued Customer

Thank you for contacting us on a claim for your Migrant Domestic Worker (MDW). Please note that the following claim procedure applies to MDW Insurance purchased through bolttech Insurance Agency Pte Ltd only.

Our Insurance Partner will process the claim according to the Terms and Conditions of the Insurance Policy and in order to process your claim expeditiously, you may wish to provide the following documents as soon as possible:

Required Documents

1. Original Claim Form duly completed and signed by both Employer and MDW.
The Insured is the Employer and the Insured Person is the MDW.
(Please include the monthly Government Levy paid and your email address for future correspondence).
2. A copy of the Certificate of Insurance.
3. A copy of the Employment Contract between Employer and MDW which states the MDW's monthly salary.
4. A copy of the Work Permit (Front & Back).
5. A copy of the Cancellation of Work Permit (If MDW has returned to her home country).

Supporting Documents To Be Attached

1. Medical Expenses due to an accident/bodily injury (outpatient treatment only)
 - a. Original Outpatient Medical Treatment Tax Invoice(s)
(This includes licensed TCM treatment up to a sub-limit of \$100.00 per treatment)
 - b. Doctor's Memo stating the Nature of Accident and Extent of Injury/Emergency Discharge Summary.
2. Hospital & Surgical Expenses (Hospitalized/Day Surgery due to Accident/Illness)
 - a. Medical Report
 - i. Hospitalized in a Hospital/Clinic, please complete the Attending Physician Statement.
 - ii. Submit a copy of the Inpatient Discharge Summary/Discharge Summary.
 - b. Original Final Hospital Tax Invoice(s).
Please note that only the Final Tax Invoice is accepted and not the "interim bill" or statement of charges.
 - c. Original Pre-Hospitalization Treatment Tax Invoice(s) for the same diagnosis, if any.
Please note that invoice(s) for treatment(s) within 90 days prior to Hospitalization is/are accepted.
 - d. Original Post-Hospitalization Treatment Tax Invoice(s) for the same diagnosis, if any.
Please note that invoice(s) for follow-up treatment(s) within 90 days from the Discharge Date is/are accepted.

Please send the claims documents to us via Registered Post or Courier, our address is:

MDW Claims Department
152 Beach Road
#26-08 Gateway East
Singapore 189721

We can be contacted at 6535 6838 between 9.00am to 6.00pm on weekdays if you need further clarification or you can send us an email at agency-claims@bolttech.sg.

MDW Claims Department
bolttech Insurance Agency Pte Ltd