



**Blue Cross 藍十字**

An **AIA** Company 友邦保險成員公司

# Super Care User Guide (Member)

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# Super Care User Guide - Member

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# Super Care User Guide - Member

## 1 About Super Care

Super Care website is a self-service electronic platform exclusively designed for Blue Cross' group and individual medical insurance plan members.

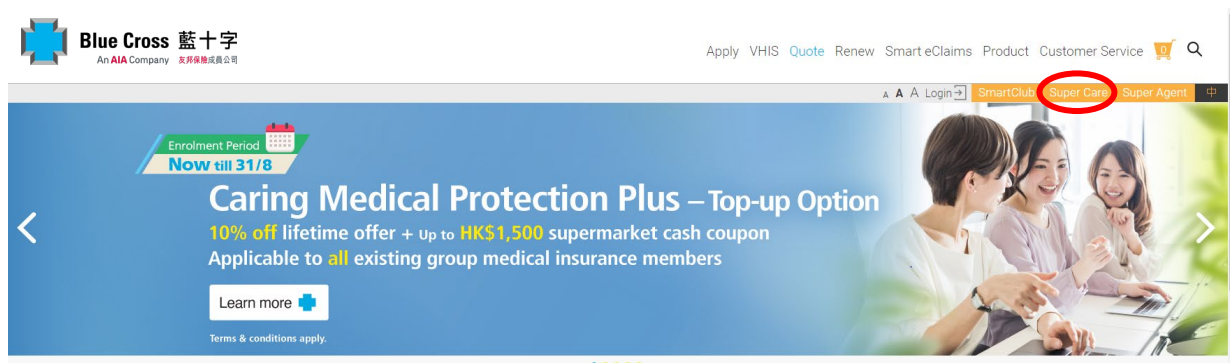
## 2 Getting Started

You can access Super Care website in the following ways:

- (I) Type address of Super Care <https://supercare.bluecross.com.hk> in the browser; or
- (II) Scan this QR code; or



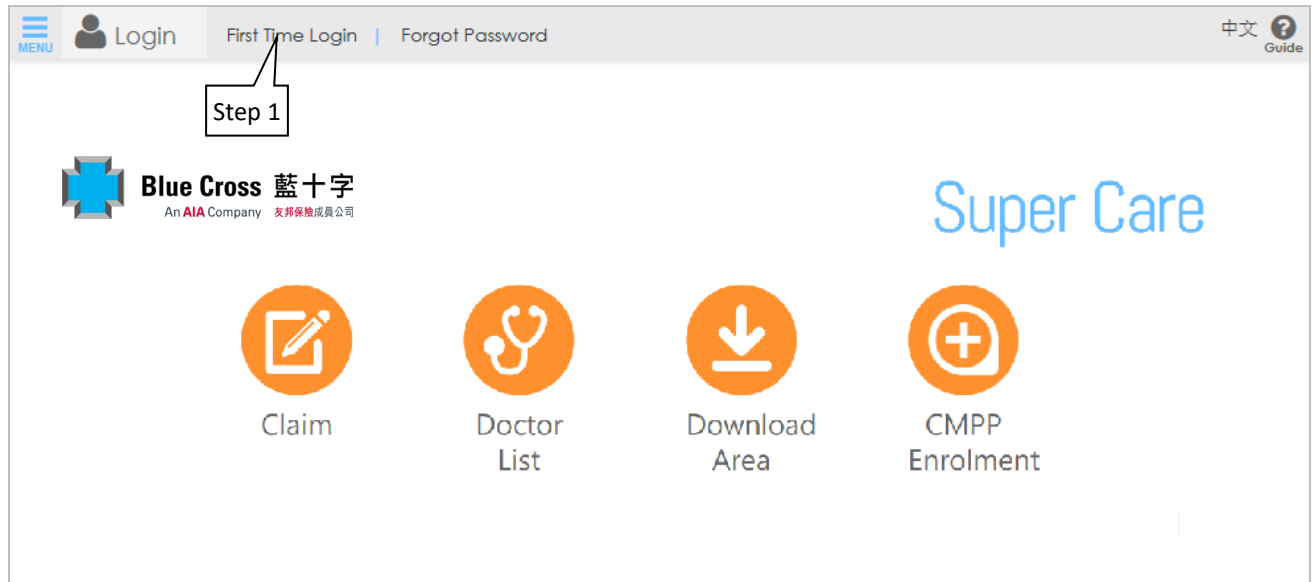
- (III) Enter from Blue Cross Corporate website [www.bluecross.com.hk](http://www.bluecross.com.hk), click 'Login' at top right-hand corner, select "Super Care".



## Super Care User Guide - Member

### First Time Login :

Step 1: Click the “First Time Login” function.



Step 2: Input your Policy No., Member Name, Date of Birth.

The screenshot shows the 'First Time Login' form. It includes a welcome message: 'Welcome to Super Care. Please input the following information for verification.' The form has three input fields: 'Policy No.' (with example 'e.g. A123456XX'), 'Member Name' (with example 'e.g. CHAN TAI MAN'), and 'Date of Birth' (with dropdowns for day, month, and year, and format '(DD/MM/YYYY)'). A callout box labeled 'Step 2' points to the input fields. Below the fields is an 'OK' button, with a callout box labeled 'Step 3' pointing to it. The footer contains links: 'About Blue Cross', 'Contact Us', 'Disclaimer', 'Collection of Premium Levy by the Insurance Authority', 'Privacy Policy Statement', and 'Personal Information Collection Statement'. It also includes the copyright notice: '© Copyright. Blue Cross (Asia-Pacific) Insurance Limited 2022. All rights reserved.'

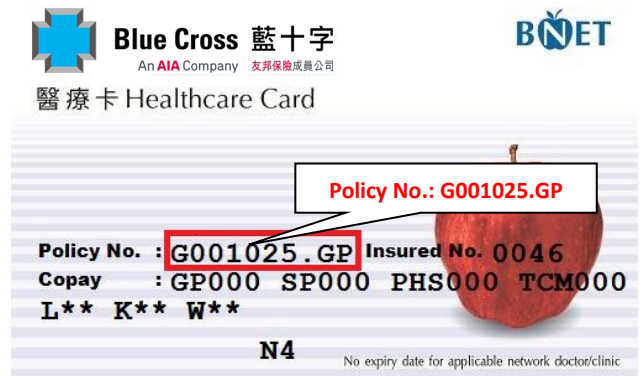
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You can find the policy no. in the following ways:

### Medical Card



### Medical Card



### Policy Schedule (for group medical policy)

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Blue Cross (Asia-Pacific) Insurance Limited  
藍十字(亞太)保險有限公司  
客戶服務熱線: 3608 2988  
mail 電郵: cs@bluecross.com.hk

**Policy No.: H008888.GP**

**Certificate of Insurance**

Policy Number : H008888.GP (I)  
Policyholder : BLUE CROSS (ASIA-PACIFIC) INSURANCE LTD.  
Staff No. :  
Insured Number : 0088  
Insured Name : CHAN TAI MAN  
Effective Date : APR 01 2015

**Schedule of Benefits – Hospital and Surgical Benefits**

In respect of any claim by an Insured which shall be acknowledged to be covered by the Terms and Conditions of this Policy, the Company will pay the Eligible Expenses incurred in respect of a Confinement up to the hereunder scheduled limits per Disability.

Level Code	Maximum Benefits per Disability
Entitled Level of Accommodation	HS 1R
Currency	Semi-Private
Reimbursement %	HK\$
	100%

### Policy Schedule (for individual medical policy)

**SUPER MAN MEDICAL INSURANCE PLAN**  
超卓男性醫療保險計劃

CHAN TAI MAN  
FLAT 8, 8/F.,  
LUCKY BUILDING,  
8 GOOD LUCK STREET,  
KOWLOON

**POLICY SCHEDULE**  
保單資料頁

**Policy No.: CX98888.IF**

Policy Number : CX98888.IF  
保單號碼

## Super Care User Guide - Member

Step 3: Click the “OK” button.

Step 4: Input New Login ID, New Password, Confirm New Password, Email Address, tick “✓” in the box to confirm your understanding of the Personal Information Collection Statement and click the “OK” button.

**First Time Login**

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Super Care

\* Mandatory field

Welcome to Super Care. Please create your Login ID and Password.

**New Login ID\***

(Login ID can consist of 0-9, A-Z, a-z, at least 6 and max. 100 characters, must start with alphabet)

**New Password\***

(Password can consist of 0-9, A-Z, a-z, and have a min 6 characters and max. 20 characters)

**Confirm New Password\***

**Policy No.:** H

**Member's Email Address**

For receiving medical claim and policy service related electronic notifications.  
(If update of email address is required in the future, please go to "My Profile – Update Personal Information" after login.)

☐ I confirm having read and understood the Blue Cross (Asia-Pacific) Insurance Limited [Personal Information Collection Statement](#) in this website.\*

**Step 4**

## Super Care User Guide - Member

### Existing User:

Please login with your Login ID and Password directly.

Step 1: Click the “Login” function

The screenshot shows the Super Care login interface. At the top left is a 'MENU' icon. The main header contains a 'Login' button (Step 1), a 'Forgot Password' link, and a language selector '中文' with a 'Guide' icon. The login form on the left includes a 'Login ID :' field with a 'Please input Login ID' prompt (Step 2), a 'Password :' field with a 'Please input Password' prompt (Step 3), and two buttons: 'Member Login' (Step 4) and 'Company Login'. The background features the 'Super Care' logo and four service icons: 'Claim' (pencil icon), 'Doctor List' (stethoscope icon), 'Download Area' (download arrow icon), and 'CMPP Enrolment' (plus icon).

Step 2: Input your Login ID

Step 3: Input your Password

Step 4: Click “Member Login” to start

## 3 Features Highlight

### 3.1 Home Page

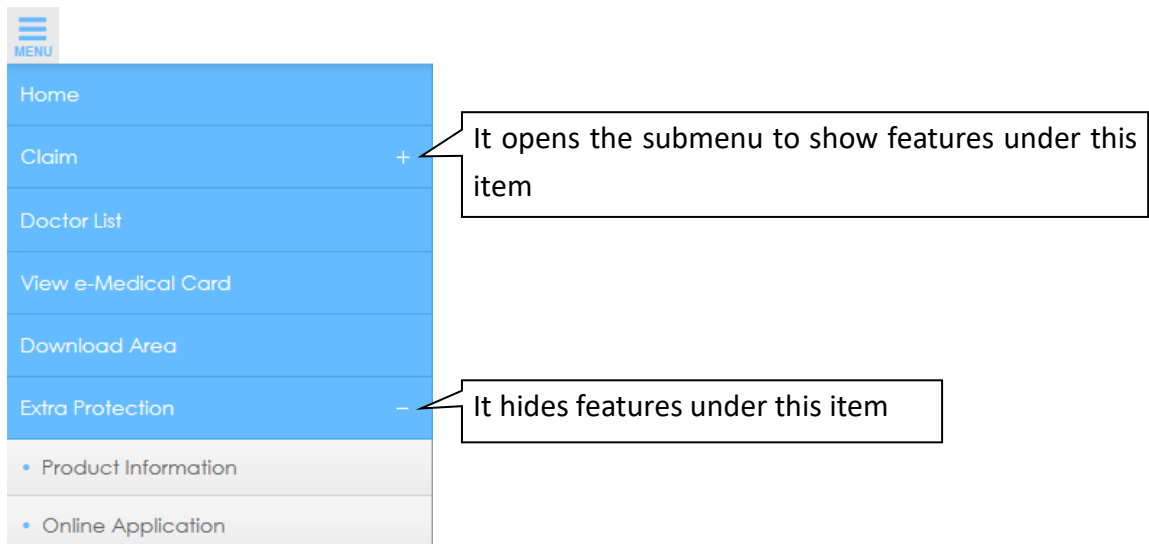
After successful login, you can see your name in the original “Login” position.



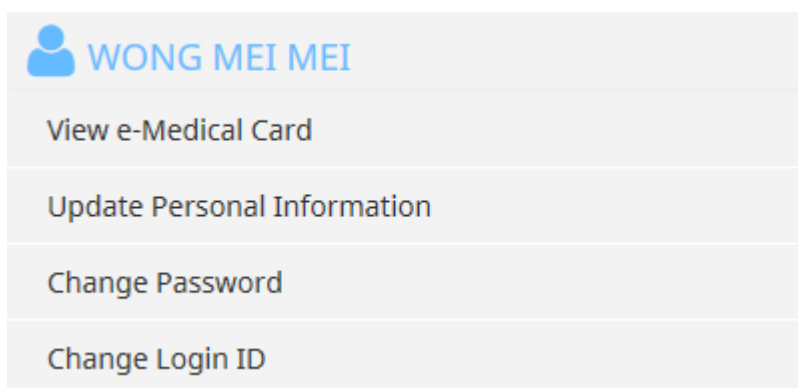


## Super Care User Guide - Member

1. **MENU** - It lists all features available to manage your account and navigates you to selected pages.



2. **Name** – All features of your account will be shown once click your name.




3. **Logout** - Always logout and close the website after use to protect your information.
4. **Language** - Switches the language of the website by clicking the icon.
5. **Guide** – A user guide in PDF format is available for reference in using the website.
6. **Claim, Doctor List, Download Area, Extra Protection** – Shortcut to review claims record, search for network doctor, download necessary information and check for extra protection options.
7. **Caring Medical Protection Plus, Preventive Care, Health Tips** - Information about additional medical insurance coverage, health checkup plans and tips for your health.


## Super Care User Guide - Member

8. **About Blue Cross** - Learn more about us our products and services.
9. **Contact Us** - Online Enquiry Form is available for enquiries and comments to improve our services.
10. **Legal Notices** - Obtain the important notices of the company including Disclaimer, Privacy Policy Statement and Personal Information Collection Statement.
11. **Sitemap** – A list of all accessible pages of this website.

## 3.2 Claim

**3.2.1 Claims History** – you can check your personal and family members' claims history and number of outpatient visits per policy year. Claims in latest two policy years are available for your checking. Besides, members of Employee Medical Contract (EMC) policy can also check the remaining outpatient balance.


[Home](#) > [Claim](#) > **Claims History**


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**Super Care**

\* Mandatory field

Policy No.\*

Policy Period\*

01 Aug 2014 - 01 Aug 2015

Insured Person\*

Claim Type\*

☐ Inpatient ☒ Outpatient

Total number of record(s) : 11

Document	Incurred Date	Benefit	Claim Status	Claim (HK\$)	Paid (HK\$)	Charge Back (HK\$)	Claim Submission No.
--	11 Apr 2015	• General Practitioner's Consultation	Direct-Billing	N/A	N/A	0.00	--
<a href="#">View</a>	07 Apr 2015	• General Practitioner's Consultation	Paid	540.00	432.00	0.00	--
--	25 Feb 2015	• General Practitioner's Consultation	Direct-Billing	N/A	N/A	0.00	--
--	12 Feb 2015	• Other Outpatient Services	Direct-Billing	N/A	N/A	0.00	--
--	18 Dec 2014	• Specialist Consultation	Direct-Billing	N/A	N/A	0.00	--
--	24 Nov 2014	• General Practitioner's Consultation	Direct-Billing	N/A	N/A	0.00	--
--	20 Nov 2014	• Specialist Consultation	Direct-Billing	N/A	N/A	0.00	--
--	15 Nov 2014	• Specialist Consultation	Direct-Billing	N/A	N/A	0.00	--
--	01 Nov 2014	• General Practitioner's Consultation	Direct-Billing	N/A	N/A	0.00	--
--	18 Oct 2014	• General Practitioner's Consultation	Direct-Billing	N/A	N/A	0.00	--
--	27 Sep 2014	• General Practitioner's Consultation	Direct-Billing	N/A	N/A	0.00	--

Benefit Item(s)	No. of Used Visits
<b>General Practitioner's Consultation</b>	7
<b>Specialist Consultation</b>	3
<b>Grand Total Charge Back (HK\$) :</b>	0.00


**Important Notes**

- The above information includes the processed claims records as at previous working day including the claims application which is pending approval by Blue Cross (Asia-Pacific) Insurance Limited.
- The above information is for reference only. All the benefits are payable subject to the terms and conditions of the master policy. For more information about the benefits structure, please refer to your Certificate of Insurance.
- The above summary shows the number of used visits for General Practitioner's Consultation, Specialist Consultation, Physiotherapy and Chiropractic services and Chinese Medicine Practitioner Treatment (if applicable).

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Claims History

# Super Care User Guide - Member


[Home](#) > [Claim](#) > **Remaining Outpatient Benefits Enquiry**


Policy No.

**Please select insured person.**

CHAN TAI MAN

CHAN SIU MING

WONG MEI MEI



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Blue Cross (Asia-Pacific) Insurance Limited  
藍十字(亞太)保險有限公司  
Customer Service Hotline 客戶服務熱線: (852) 2888 7888  
Fax 傳真: (852) 2888 7888 E-mail 電郵: info@bluecross.com.hk

**Outpatient Benefits**

Login ID:   
Policy No.:  LCP  
Insured No.:   
Member Name:   
Information as at: 07 Aug 2015  
Level Code: OP2  
Period of Insurance: 01 Jul 2015 - 01 Jul 2016

Benefit Items	Claims Settlement Record		Remaining Balance	
	No. of Visit	Amount (HK\$)	No. of Visit	Amount (HK\$)
<b>Consultation in a doctor's clinic</b> • Inclusive of medicines and injections • 1 visit per day • Max. HK\$ 250.00 per visit	0	0.00	N/A	N/A
<b>Consultation at home</b> • Inclusive of medicines and injections • 1 visit per day • Max. HK\$ 250.00 per visit	0	0.00	N/A	N/A
<b>Chinese Medicine Practitioner Treatment</b> • 1 visit per day • Max. HK\$ 250.00 per visit	10	2,500.00	N/A	N/A
<b>Specialist Consultation</b> • Max. HK\$ 11,000.00 per year	0	4,750.00	N/A	5,250.00
<b>Vaccination</b> • Max. HK\$ 330.00 per visit	0	0.00	N/A	N/A
<b>Pap Smear</b> • Max. HK\$ 300.00 per visit	0	0.00	N/A	N/A
<b>Sub-total of above benefit items</b>	10	7,250.00	32	N/A
<b>Overall Max. 50 visits per year for the above benefit items</b>				
<b>Diagnostic X-rays &amp; Laboratory Tests</b> • Max. HK\$ 10,000.00 per year	1	450.00	N/A	9,550.00
<b>Prescribed Long Term or Expensive Medicines and Drugs</b> • Max. HK\$ 4,000.00 per year	0	0.00	N/A	4,000.00

**Important Notes**  
1. The above information includes settled claims records as at previous working day but it does not include any claims application which is pending approval by Blue Cross (Asia-Pacific) Insurance Limited.  
2. The above information is for reference only, all the benefits are payable subject to the terms and conditions of the master policy. For more information about the benefits structure, please refer to your Certificate of Insurance.


**Head Office & Customer Service Centre 總辦事處及客戶服務中心**  
23/F, BUA Tower, Midstream City 5, 418 Kwun Tong Road, Kwun Tong, Kowloon, Hong Kong 香港九龍彌敦道418號中環大廈五樓  
Tel 電話: (852) 2888 7888 Fax 傳真: (852) 2888 7888 www.bluecross.com.hk

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Remaining Outpatient Benefits Enquiry

## Super Care User Guide - Member

**3.2.2 Inpatient, Outpatient & Dental Claims Submission (for selected medical policies ONLY)** - You may submit your inpatient, outpatient or dental claims electronically through Super Care instead of submitting the written claim form with original medical receipts. Your claims can be submitted simply by uploading the scanned copies or photos of medical receipts after login. If the amount of each inpatient/surgery receipt exceeds HK\$50,000, please mail us the original receipt to process your claim. Besides, you can also keep track of your claims submission history online. Blue Cross shall reserve the right to obtain the original medical receipts from members for verification.



Home > Claim >  
Outpatient




Select a Policy and Insured Person

Each claim submission is for one insured only.

Policy No.  
Insured Person

Download Blue Cross HK



Submit claim in 3 simple steps

Policy No.

Insured Person

Claims Receipt Information

1. Super Care website accepts outpatient claims submission for receipt amount of **HK\$50,000** or below. Otherwise, original documents should be provided.

2. Format of the receipt files must be GIF or JPG or PDF or PNG or TIF.

3. Each receipt file must **NOT** be greater than 5 MB.

4. Friendly Reminder: If you would like to submit your receipt through mobile devices, please use either built-in camera apps or download image editing apps to resize the image to less than 5MB.

5. Please upload the receipt images **within 90 days** from treatment date unless otherwise specified in the handbook/policy.

6. Each receipt must show the below information:

- Full name of patient
- Date of treatment
- Diagnosis
- Breakdown of charges
- Name and signature of doctor
- Name of surgery (if applicable)

7. Blue Cross accepts certified true copies of receipts with settlement advice from other insurance companies for claim processing.

8. Please submit this claim with Blue Cross Claims Adjustment Report to other insurance companies for claim processing for any balance after Blue Cross has completed the assessment.

9. Please preserve the original receipts for 90 days after submission for the purpose of verification upon Blue Cross's request.

10. If you or the insured person will submit claim request to other insurance companies with this/these receipt(s), you may submit claims to other insurance companies first and submit the claims by EasyClaim Service together with settlement advice issued by other insurance companies. Or submit this claim with Blue Cross Claims Adjustment Report to other insurance companies for claim processing for any balance after Blue Cross has completed the assessment.

Upload Receipt(s)

Receipt 1

Add

Date of Treatment 10 / 1 / 2019

Diagnoses Common Cold / Cough / U.R.T.I.

Currency HKD

Nature of Claim

1. General Practitioner's Consultation

Charges

Add

Upload

Declaration and Authorisation

1. I/We have obtained all necessary authorisation from my/our dependents (if applicable) in order to provide their information to Blue Cross (Asia-Pacific) Insurance Limited ("The Company") or its authorised representative if my/our dependents are parties to the claim request(s). I/We also understand that the information requested in this form shall be used by the Company to process such request(s).

2. I/We hereby authorise any hospital, physician, medical practitioner, medically related service provider, insurance company, person, party and/or authority that holds any records or possesses any information of the insured person or me/us to disclose to the Company or its authorised representative, any or all information with respect to the insured person's or my/our loss, disability, claim history, medical history, police statement made and the like for the purpose of assessing the insured person's or my/our claim request(s). A photocopy of this authorisation shall have the same effect as the original.

☐ I/We have already read and understood the above "Declaration and Authorisation" and agree to be bound by the same.


Next


Outpatient Claims Submission

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MS001/04.06

# Super Care User Guide - Member


[Home](#) > [Claim](#) > **Inpatient/Surgery**




Select a Policy and Insured Person

Policy No.

Insured Person

Download



Submit claims in 3 simple steps

Claim Submission

Please submit claim within 90 days from the date of treatment/ discharge unless otherwise specified in the handbook/policy. Please get ready the below documents:

- Claim Form
  - Hospitalisation & Surgical Claim Form (to be completed by the attending physician)
- Official receipt (includes deposit)
  - Hospital bills with breakdown of charges
    - Doctor slips with doctor's signature and official stamp
    - Clinical Surgery receipt must show the full name of patient, date of treatment, diagnosis and name of surgery (if applicable)
    - Histopathology, endoscopic, diagnostic / laboratory tests reports or operating theatre summary
- Documents for Confinement in Public Hospital
  - Clinical receipt and Discharge summary issued by Public Hospital
- Referral Letter for Specialist if any
- Referral Letter for Registered Private Nurse if any
- Already claim from other insurance policy
  - Claim settlement report issued by insurance company (if applicable)
- Pre/post consultation receipt (if any)
- Format of the receipt file must be GIF or JPG or PDF or PNG or TIF.
- Receipt file must NOT be greater than 5 MB.
- Receipt file name must NOT over 120 characters.

The Company reserves the right to request for necessary claim information from the Insured depending on the nature of the claim(s). For details of the requirement, please refer to the terms and conditions of the relevant insurance policy.

Input Claim Information and Upload Receipt/Document

Does the Insured person have other medical policies with Blue Cross? ☐ Yes ☐ No

Does the Insured person have medical policies with other insurance companies / relevant cover? ☐ Yes ☐ No

Nature of Claim ☐ Hospitalisation ☐ Day Case / Clinical Surgery

Medical Facility

Date of Admission / Treatment (Separate claim submission for different admission / treatment) </>/</>

Receipt Currency

Receipt Amount (including pre/post consultation fee if any)

Limited to 20 files/Images. If more than 20 files/Images, please submit by post.

Do you have any additional information? ☐ Yes ☐ No

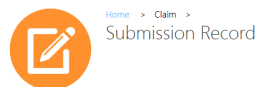
Declaration

1. I/We have obtained all necessary authorisation from my/our dependents (if applicable) in order to provide their information to Blue Cross (Asia-Pacific) Insurance Limited ( "The Company" ) or its authorised representative if my/our dependents are parties to the claim request(s). I/We also understand that the information requested in this form shall be used by the Company to process such request(s).

2. I/We hereby authorise any hospital, physician, medical practitioner, medically related service provider, insurance company, person, party and/or authority that holds any records or possesses any information of the insured person or me/us to disclose to the Company or its authorised representative, any or all information with respect to the insured person's or my/our loss, disability, claim history, medical history, police statement made and the like for the purpose of assessing the insured person's or my/our claim request(s). A photocopy of this authorisation shall have the same effect as the original.

3. I/We hereby declare that all of the above information and particulars given herein are accurate, true and complete and are given to the best of my/our knowledge and belief. I/We do not withhold any material information and understand that failure to provide true and accurate information or the Company of all material information may render the Company unable to accept or process a claim request and all rights to recover under the Policy shall be forfeited. I/We understand that submission of this application does not constitute admission of liability or guarantee payment in relation to the claim by the Company.

## Inpatient Claims Submission



Only provide submission record in the past 12 months.

\* Mandatory field

Submission Date

01 / 03 / 2022

To

15 / 08 / 2022

Policy No.

Insured Person

Claim Submission No.

Submission Type

☒ Inpatient/Surgery
☒ Outpatient
☒ Supplementary Document

Total number of record(s) : 1


Claim Submission No.	Reference No.	Submission Type	Submission Date	Input Information	Uploaded Documents
0220422000178		Outpatient	22 Apr 2022		

## Submission Record

## Super Care User Guide - Member


### 3.2.3 Certificate of Insurance (for selected policies ONLY)

You can check your personal and dependents' covered items and benefits limits.




Home > Claim >


# Certificate of Insurance



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## Super Care

Policy No.	Insured Person	Document
E      P	CHAN TAI MAN	 <span style="font-size: 2em; vertical-align: middle;">➔</span>



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An AIA Company 友邦保險有限公司

Blue Cross (Asia Pacific) Insurance Limited  
藍十字(亞太)保險有限公司

Customer Service Centre 客戶服務熱線 (800 298 298)  
傳真 (800 298) 友邦傳真 (02) 6666 6666

**Certificate of Insurance**

---

**POLICY NO.** 1 E      P (01)

**POLICYHOLDER** 1 C      D

**STAFF NO.** 1 0002

**INSURED NO.** 1 0002

**INSURED NAME** 1 0002

**EFFECTIVE DATE\*** 1 MAY 11, 15

**INITIANT** RE3

**MAX LIMIT OF THE ELIGIBLE EXPENSES UP TO THE SCHEDULED LIMITS PER DISABILITY**

**ENTITLED LEVEL OF ACCOMMODATION** MAXIMUM BENEFIT PER DISABILITY

**MAX**

- ROOM AND BOARD  
LIMIT PER DAY  
MAXIMUM NUMBER OF DAYS PER DISABILITY 900
- MICROCLIMATE HOSPITAL CHARGES 12,000
- INTERVIEW & FEES (EXCEPT FOR AMBULANCE CASE PROCEDURE)  
PERFORMING IN AN OUTPATIENT FACILITY) 4,000
- CONJUGAL ACCOMMODATION, UP TO  
MAXIMUM OPERATION, UP TO 32,000  
INTERMEDIATE OPERATION, UP TO 16,000  
MINOR OPERATION, UP TO 8,000
- AMNESTIES/TESTS OF FEES  
CONJUGAL OPERATION, UP TO 16,000  
MAXIMUM OPERATION, UP TO 8,000  
INTERMEDIATE OPERATION, UP TO 4,000  
MINOR OPERATION, UP TO 1,800
- OPERATING THEATRE CHARGES  
CONJUGAL OPERATION, UP TO 19,000  
MAXIMUM OPERATION, UP TO 9,000  
INTERMEDIATE OPERATION, UP TO 4,000  
MINOR OPERATION, UP TO 1,800
- PERMANENT & HOSPITAL VISITS  
LIMIT PER DAY 900  
MAXIMUM NUMBER OF DAYS PER DISABILITY 90
- REHABILITATION FEES 3,000
- CHARGES FOR INTENSIVE CARE  
LIMIT PER DAY 3,000
- MAXIMUM NUMBER OF DAYS PER DISABILITY  
TOP-UP OVERSEAS ACCIDENTAL MEDICAL EXPENSE BENEFITS INCREASE BY 30% OF THE ADULT BASIC HOSPITAL AND SURGICAL BENEFITS
- ADULT HOSPITAL CARE (ROOM BOARD AND NURSES)  
(FOR GENERAL NAMED OF ELIGIBLE PUBLIC HOSPITAL ONLY)  
FIXED ALLOWANCE PER DAY 400
- MAXIMUM NUMBER OF DAYS PER DISABILITY  
OUTPATIENT OVERSEAS CARE ALLOWANCE 90

A CARE ALLOWANCE WILL BE PAID IF CASE WHERE THE INSURED RECEIVING ANY OF THE FOLLOWING LIST CASE PROCESSES:

- AMNESTIES/TESTS (INCLUDING EPIDEMIOLOGICAL INVESTIGATIONS)
- COLONOSCOPY
- ARTHEROSCOPY
- COLONOSCOPY, UP TO
- ARTHEROSCOPY
- COLONOSCOPY, UP TO
- BRONCHOSCOPY
- PER MINOR PROCEDURE 900

**FOR FULL DETAIL OF BENEFITS STRUCTURE, PLEASE REFER TO MASTER POLICY.**

\* UPON NEXT RENEWAL, THIS CERTIFICATE OF INSURANCE WILL NOT BE ISSUED IF THERE IS NO CHANGE IN THE BENEFITS. FOR ANY ENQUIRY, PLEASE CONTACT OUR CUSTOMER SERVICE HOTLINE AT 3608 2988.

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**Blue Cross 友邦保險**  
 200, 201A, Tower, International City, 400 Kerry Road, Kowloon, Hong Kong 香港中環德輔道中友邦保險大廈14-15樓

## Certificate of Insurance

3.3 Doctor List

You can search the network doctors by location, specialty or name.



Home >  
Doctor List



\* Mandatory field

Please select medical network list Western Medical Practitioner

Location\*

☒ Hong Kong☐ Kowloon☐ New Territories☐ Outlying Islands☐ Macau

District

Southern 南區

Type of Doctor\*

☒ General Practitioners  
☒ Specialists -- ALL -- / -- 所有 --

Name of Doctor

Chan

Search

Total number of record(s) : 1

Location 地點	Name / Specialty 名稱 / 科別	Address / Telephone / Fax 地址 / 電話 / 傳真	Consultation Hours 診症時間
Aberdeen 香港仔	Chan, Au 醫生  General Practice 普通科	Shek, eet, 1 Aberdeen 香港仔 Telephone/電話 2 8 Fax/傳真 2 0	Mon, Tue, Thu & Fri 8:30am - 1:30pm 3:30pm - 8:00pm Sat, Sun & PH 8:30am - 1:30pm Wed Closed  星期一、二、四及五 上午 8:30 - 下午 1:30 下午 3:30 - 下午 8:00 星期六、日及公眾假期 上午 8:30 - 下午 1:30 星期三 休息

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Doctor List



### 3.4 View e-Medical Card

You can view your medical card and opt to save the card image for future use if applied credit facilities. The e-Medical Card can be used in network doctors/clinics only, not applicable to dental, inpatient and outpatient services in hospital.



[Home](#) > [My Account](#) >


**Blue Cross 藍十字**  
An AIA Company 友邦保險成員公司  
**Super Care**



**View e-Medical Card**

Policy No.

Please select insured person.




**Blue Cross 藍十字**  
An AIA Company 友邦保險成員公司  
**醫療卡 Healthcare Card**







**Important Notes:**


1. Outpatient service: You may download the e-Medical Card to your smartphone and present it to the network doctor/clinic for consultation.
2. Hospital outpatient/inpatient services (if applicable): The valid thru date is only applicable to hospital outpatient/inpatient services and will be refreshed daily according to insurance status.
3. Blue Cross shall not be held responsible for any failure of the healthcare service providers to provide healthcare services upon the presentation of the e-Medical Card.
4. For enquiry about the e-Medical Card, please call our Customer Service Hotline during office hours on 2839 6333.
5. Blue Cross reserves the right to cease or suspend this e-Medical Card service for all or any particular customers or insured members without prior notice.
6. For terms of use of e-Medical Card, "Terms and Conditions for Using Credit Facilities Services" (<http://bluecross.com.hk/document/tnc/creditfacilitieservice>) shall apply and prevail.

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View e-Medical Card

3.5 Download Area

You can download necessary forms.



[Home](#) >  
**Download Area**



\* Mandatory field

Claim Form

Policy No.\*

C

Insured Person\*

N

Claim Form\*

☒ Inpatient ☐ Outpatient ☐ Dental

Please select the appropriate claim form according to the benefits of your policy.

Download

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Download Area

### 3.6 Extra Protection (for group medical insurance members only)

Caring Medical Protection Plus provides you an option to top up when you are the in-force member in group medical policy or offer you a choice to convert to individual plan without underwriting when you are leaving from group medical policy. You can submit application online when it is available for you.

[Home](#) > [Extra Protection](#) >  
**Caring Medical Protection Plus**






### Exclusive for Blue Cross group medical insurance members


Guaranteed acceptance of pre-existing conditions without underwriting

▼ Introduction

With the use of advanced technology today, medical costs are rising continuously and have become unpredictable. If you are hospitalised for a serious illness, do you know if you are fully covered by your company's medical plan? According to the latest data\* published by the Census and Statistics Department, approximately 27.5% of all admissions into private hospitals incurred a hospital bill of HK\$30,000 or more. If your company's medical plan is not sufficient to cover all medical expenses, you will end up paying a large shortfall out of pocket unexpectedly.

#### Extra Protection - Product Information

[Home](#) > [Extra Protection](#) >  
**Caring Medical Protection Plus Online Application**



\* Mandatory field  
Please fill in English

Product [Terms & Conditions](#)

Step 1 - Quote Step 2 - Apply Step 3 - Confirm

Please select Policy and Option

Group Medical Policy Selection \*  P

☐ **Top-up Option** - Exclusive to existing Blue Cross Group Medical members.


☐ **Conversion Option** - Exclusive for Blue Cross Group Medical members pursuing resignation/retirement.

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#### Extra Protection - Online Application


3.7 My Account

You can complete your account information by providing / updating the personal information under My Account. Not only it enables you to receive medical claim and policy service related e-notification without delay, but also it helps you reset your Password and Login ID when you forgot them. Moreover, My Account allows you to personalise your Password and Login ID, making them unique and easy to remember.




[Home](#) > [My Account](#) >  

### Update Personal Information



\* Mandatory field

Policy No. 


Member's Email Address  
(For receiving medical claim and policy service related electronic notifications)

☐ I confirm having read and understood the Blue Cross (Asia-Pacific) Insurance Limited [Personal Information Collection Statement](#) in this website.

OK


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Update Personal Information



[Home](#) > [My Account](#) >  

### Change Password



\* Mandatory field

Old Password\*

New Password\*

Confirm New Password\*


(Password can consist of 0-9, A-Z, a-z, and have a min. of 6 characters and max. 20 characters)

Confirm


Cancel

Change Password

## Super Care User Guide - Member

 [Home](#) > [My Account](#) > 

### Change Login ID




\* Mandatory

Current Login ID	<input type="text"/>
New Login ID*	<input type="text"/> <input type="button" value="Check"/>
	(Login ID can consist of 0-9, A-Z, a-z, have a min. 6 and max. 100 characters, and must begin with alphabet)
Confirm New Login ID*	<input type="text"/>


Change Login ID

### 3.8 Useful Information

You can obtain useful information such as Claims Procedures, Frequently Asked Questions, Health Tips & Information and Useful Links to other websites.

 [Home](#) > [Useful Information](#) > 

### Claims Procedures



#### Outpatient Benefits

All receipt(s) together with the "Outpatient Claim Form" must be submitted. The receipt(s) must bear the following information:

1. Name of Patient
2. Diagnosis
3. Date of Consultation/Treatment
4. Itemised charges for consultation or medicine, doctor's certification for laboratory test/X-ray and results
5. A referral letter for Specialist consultation (if any)

#### Inpatient Benefits

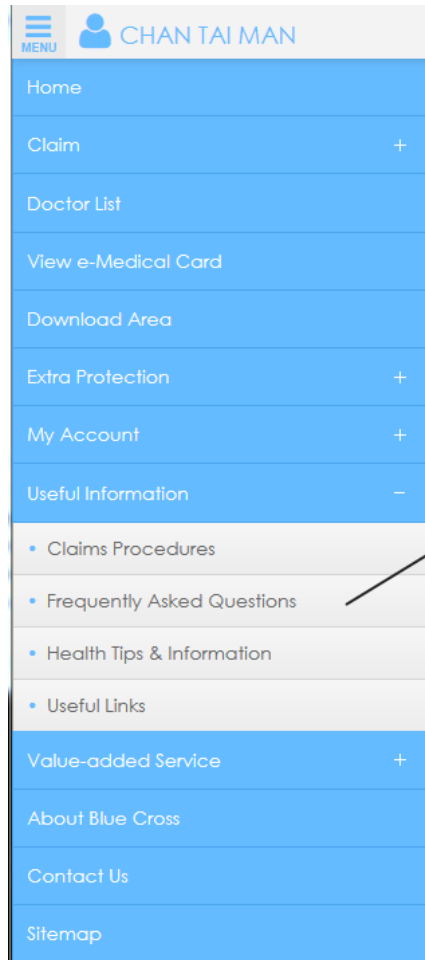
All receipt(s) together with the "Hospitalisation & Surgical Claim Form" must be submitted. The receipt(s) must bear the following information:


1. Name of Patient
2. Date of admission and discharge
3. Diagnosis of disability requiring hospitalisation and name of Surgical Procedures performed (if any)
4. Itemised Hospital charges

To obtain Claim Forms, please [click here](#).

Claims Procedures

# Super Care User Guide - Member





**Blue Cross 藍十字**  
 An AIA Company 友邦保險成員公司

Blue Cross (Asia-Pacific) Insurance Limited  
 藍十字(亞太)保險有限公司  
 Customer Service Hotline 客戶服務熱線: 3028 2888  
 Fax 傳真: 3028 2889 E-mail 電郵: cs@bluecross.com.hk

### Frequently Asked Questions / 常見問題

**Q: How can I sign up for Super Care e-service?**  
**A:** You can select the "First Time Login" function on Member Login page to sign up. First, you will be requested to input your policy no., member's name and date of birth for verification. Once login, you can create your own login ID and password.

**Q: 我如何登記使用 Super Care 網上服務?**  
**A:** 您可在會員登入頁面選擇「首次登入」功能進行登記。首先，系統會要求您輸入保單號碼、會員名稱及出生日期以作實料。登入後，您便可自行設定登入名稱及密碼。

**Q: What can I do if I forget my login name or password of Super Care e-service account?**  
**A:** If you have forgotten your Password or Login ID, please select the "Forgot password / Login ID" function to reset. You will be requested to input required information for verification. An email will be sent to your registered email address, please follow the instruction to reset your Password and Login ID.

**Q: 如果我忘記了「Super Care」網上服務的登入名稱或密碼可以怎麼辦?**  
**A:** 如您忘記了密碼或登入名稱，請選擇「忘記密碼/登入名稱」功能進行重設。回答所需資料核實後，我們會將您的登入名稱及密碼寄到您已登記的電郵。請按照指示重設您的密碼和登入名稱。

**Q: What service can I use in Super Care?**  
**A:** You can experience a series of simple and efficient online services including:

- Download e-Healthcare Card for outpatient network (only applicable for those policies which applied outpatient card service)
- Search for network doctors, locations and telephone numbers
- Check policy coverage, claims records, etc.
- Apply for Pre-hospitalization Claim Assessment service to estimate the eligible claim amounts
- Download useful information like claim form, claims procedures and china network hospital list
- Provide email address to receive electronic notifications specific to policy service and medical claim application without delay or lose through the mail



**Q: 「Super Care」有甚麼網上服務?**  
**A:** 您可體驗一系列簡單快捷的網上服務包括：

- 下載門診醫生網絡電子醫療卡只適用於保單已申請門診卡服務
- 搜尋網絡醫生、診所地點、電話及診症時間
- 查閱保險範圍、索償記錄、門診福利記錄等



Head Office & Customer Service Centre 總辦事處及客戶服務中心  
 2/F, 8/F, Tower, Millennium City 1, 138 Huen Tung Road, Kowloon, Hong Kong 香港九龍彌敦道138號千禧龍城1座2/F及8/F樓層  
 Tel 電話: 3028 2888 Fax 傳真: 3028 2889 www.bluecross.com.hk

## Frequently Asked Questions

## Super Care User Guide - Member

<div> <a href="#">Home</a> &gt; <a href="#">Useful Information</a> &gt; <h3>Health Tips &amp; Information</h3></div> <div> <b>Blue Cross</b> 藍十字 An AIA Company 友邦保險成員公司 <b>Super Care</b></div>	
Health Tips	Published Date
Acute Infectious Conjunctivitis	18 Feb 2015
Atopic Eczema	18 Feb 2015
Colorectal Cancer	18 Feb 2015
Dengue Fever	18 Feb 2015
Diet. Cancer	18 Feb 2015
Ebola Virus Disease	18 Feb 2015
Good Handwashing Guideline	18 Feb 2015
Influenza	18 Feb 2015
Look after the Heart of the Man	18 Feb 2015
Menopause	18 Feb 2015


### Health Tips & Information

<div> <a href="#">Home</a> &gt; <a href="#">Useful Information</a> &gt; <h3>Useful Links</h3></div> <div> <b>Blue Cross</b> 藍十字 An AIA Company 友邦保險成員公司 <b>Super Care</b></div>	
Useful Links	
Chinese Medicine Council of Hong Kong	
Healthcare Reform 2nd Stage Public Consultation	
Influenza	
Prevent Avian Influenza	
Quality Healthcare Diagnostic & Imaging Centre	


### Useful Links


3.9 Sitemap

All available features are listed in the sitemap.




Home >  
Sitemap






Claim


- Claims History
- "EasyClaim Service" Outpatient Claims Submission
- Remaining Outpatient Benefits Enquiry




Doctor List



View e-Medical Card




Download Area




Extra Protection

- Product Information
- Online Application




My Account

- View e-Medical Card
- Update Personal Information
- Change Password
- Change Login ID




Useful Information

- Claims Procedures
- Frequently Asked Questions
- Health Tips & Information
- Useful Links




Value-added Service


- "Blue Cross Medical Network" iPhone App Service
- Pre-hospitalisation Claim Assessment
- Preventive Care Service
- Smart MedClaim



About Blue Cross



Contact Us



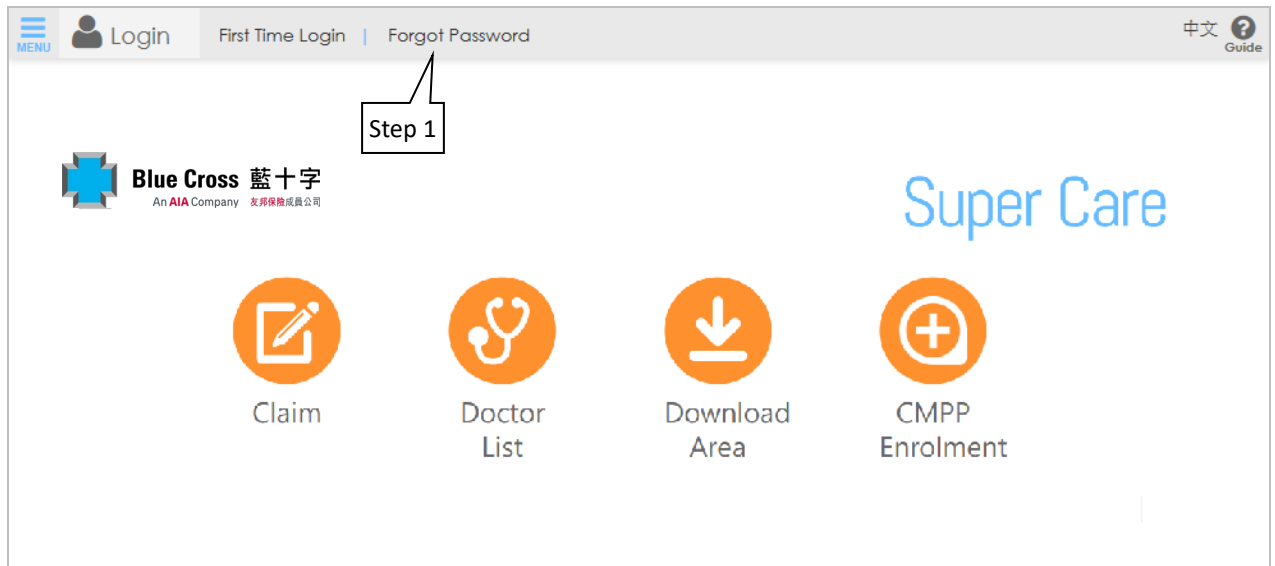
Sitemap

Sitemap



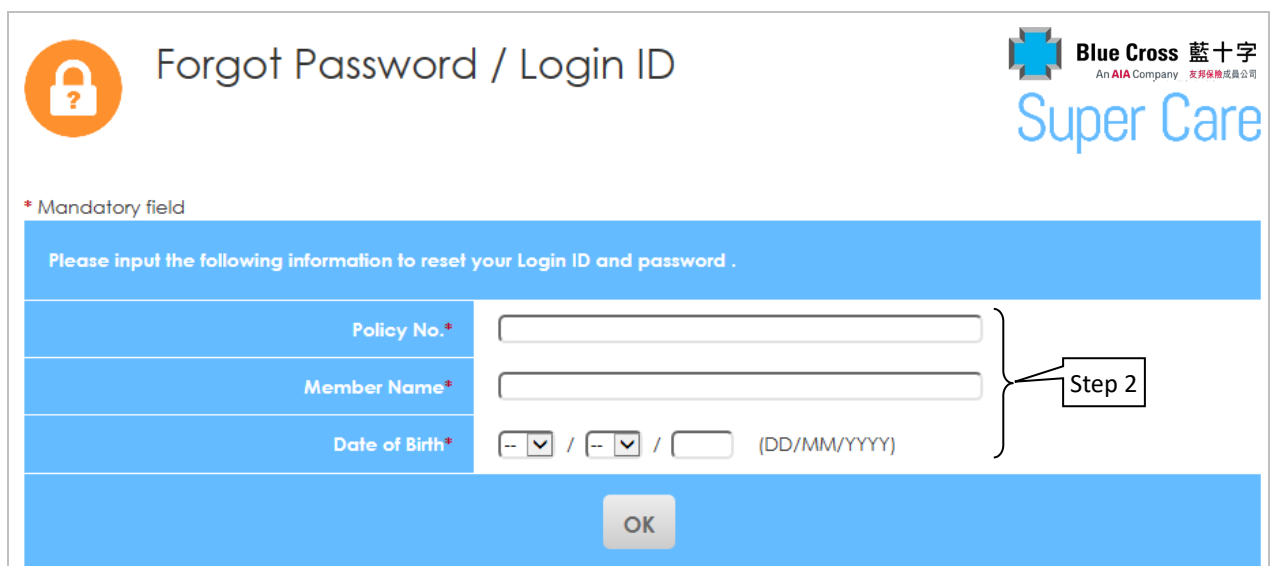
### 3.10 Forgot Password/Login ID

Step 1: Click the “Forgot Password” function.



The screenshot shows the Super Care login page. At the top, there is a navigation bar with 'MENU', 'Login', 'First Time Login', and 'Forgot Password'. The 'Forgot Password' link is highlighted with a callout box labeled 'Step 1'. Below the navigation bar, there is a Blue Cross logo and the text 'Super Care'. Four orange circular icons are displayed: 'Claim' (pencil icon), 'Doctor List' (stethoscope icon), 'Download Area' (download icon), and 'CMPP Enrolment' (plus icon).

Step 2: Input your Policy No., Member Name, Date of Birth and click the “OK” button.



The screenshot shows the 'Forgot Password / Login ID' form. At the top, there is a lock icon and the text 'Forgot Password / Login ID'. The Blue Cross logo and 'Super Care' text are in the top right corner. Below the header, there is a blue bar with the text 'Please input the following information to reset your Login ID and password .'. The form contains three input fields: 'Policy No.\*', 'Member Name\*', and 'Date of Birth\*'. The 'Date of Birth\*' field has a dropdown menu for the day, month, and year. A callout box labeled 'Step 2' points to the input fields. At the bottom, there is an 'OK' button.

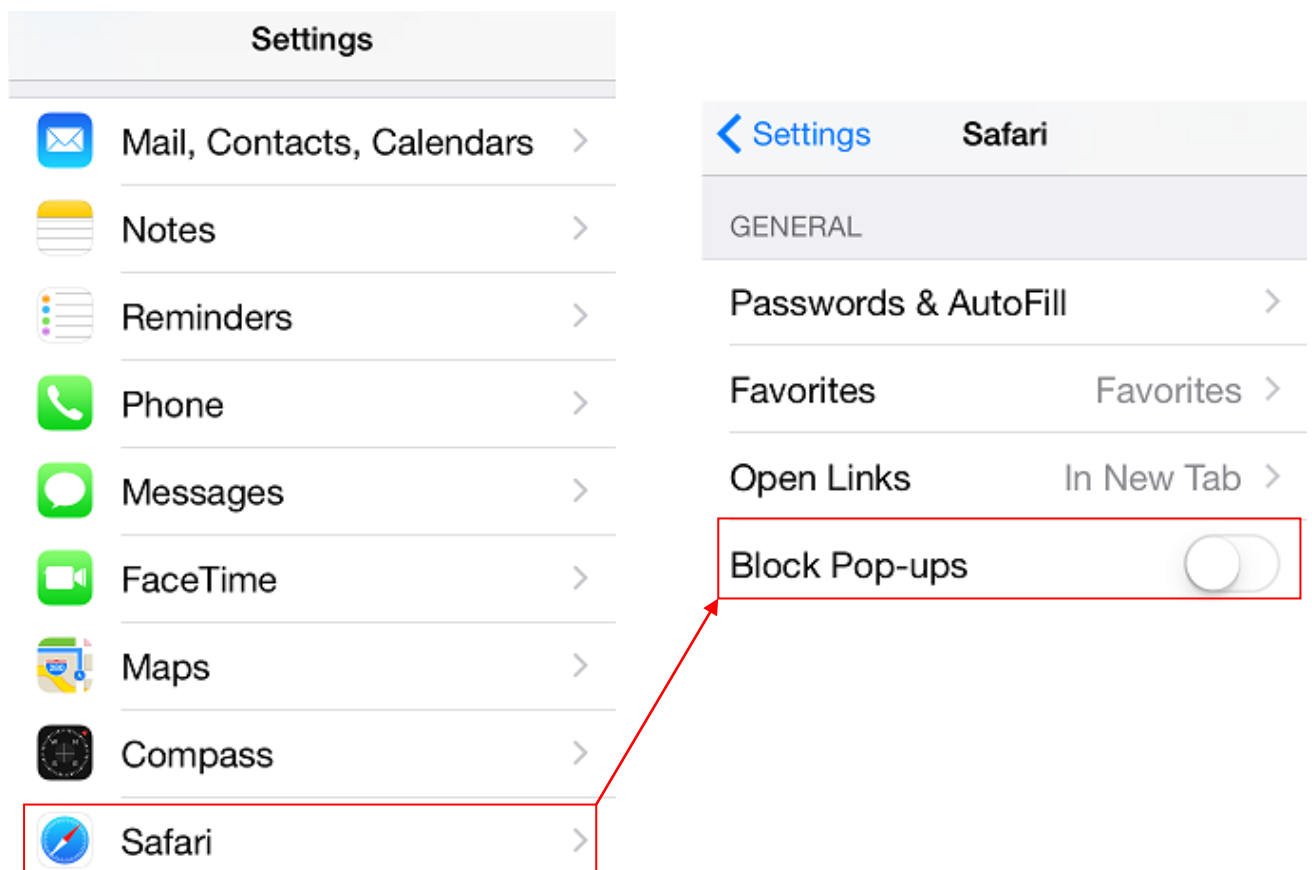
For account with email address provided, an email will be sent to your provided email address within 1 day. Please follow the instruction to reset your Password and Login ID.

For account without email address provided, we will send the Login ID and Password Notification to your/policyholder's address by post.

### 4 Tips to Use

If you cannot view PDF documents (e.g. Certificate of Insurance) of Super Care in your mobile devices, you may try to disable the pop-up blocker.

Below diagram shows where to adjust pop-up setting in iPhone/iPad:



### Need Help?

For assistance in using Super Care, please feel free to call us on 2839 6333.

Remark: All illustrations in this user guide are for reference only, please refer to Super Care <https://supercare.bluecross.com.hk> website for actual presentation and content.

----- End -----