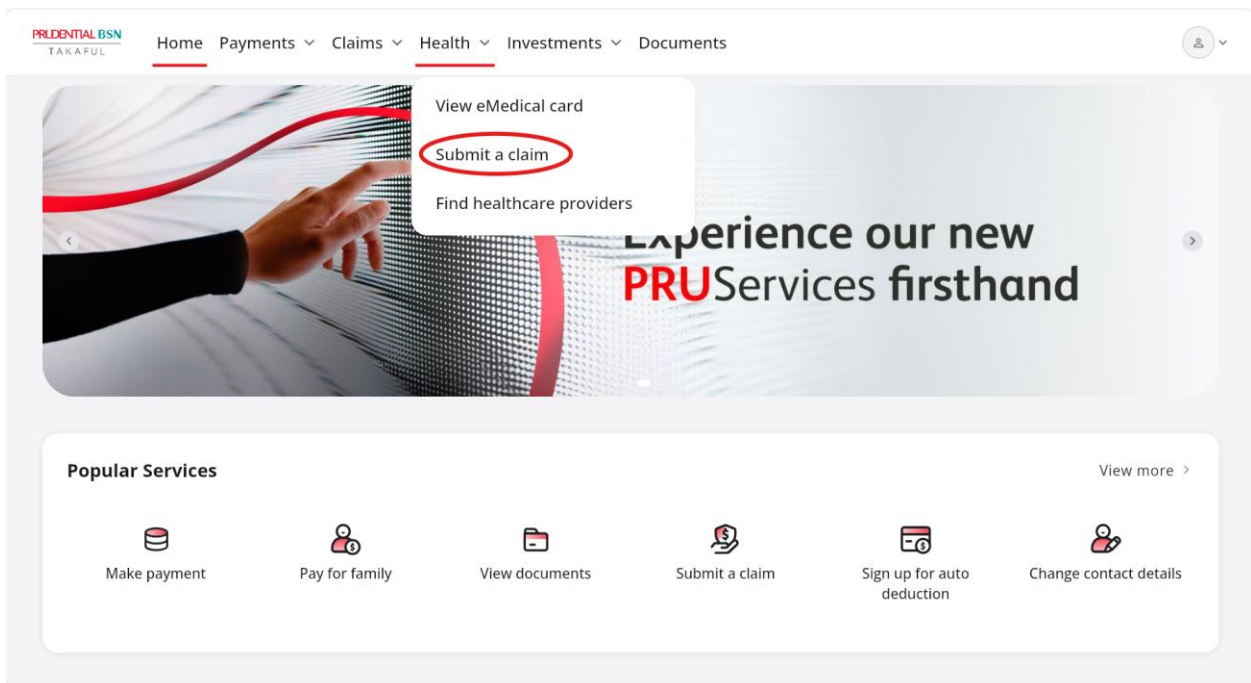
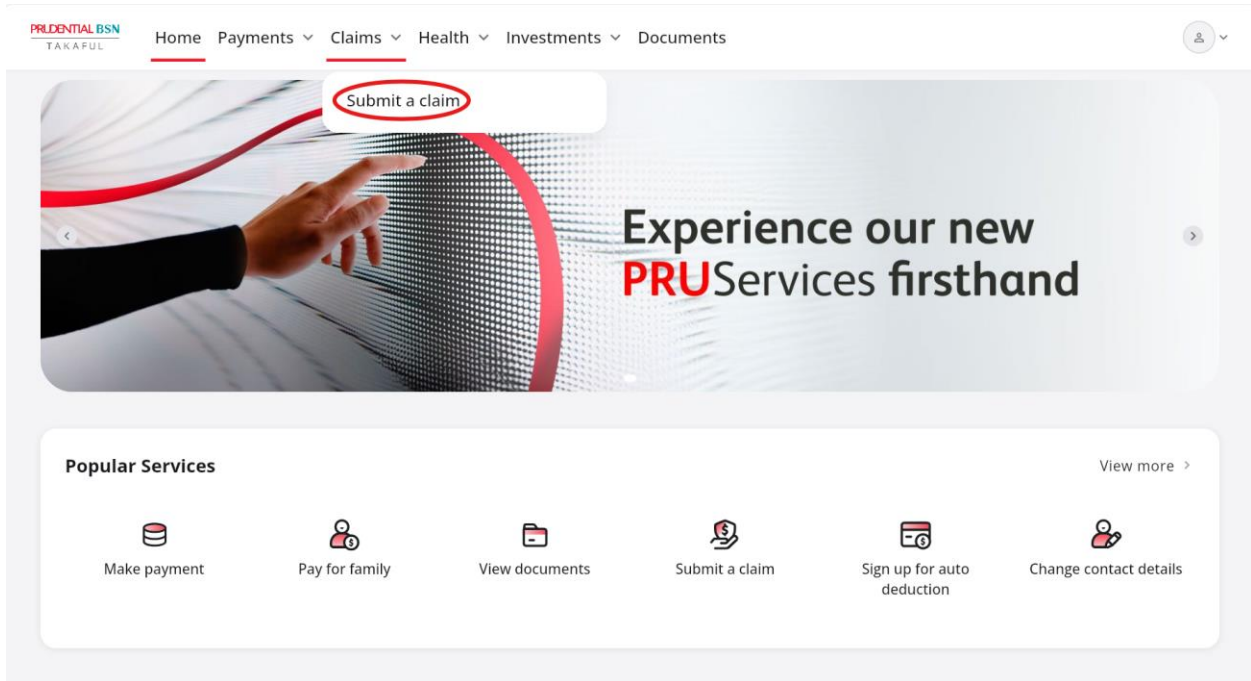


## How to submit a claim via [PRUServices](#)

**Step 1:** On the PRUServices homepage, navigate to "Claims" or "Health" or "Popular Services" tab and select "Submit a Claim"



PRUDENTIAL BSN TAKAFUL

Home Payments Claims Health Investments Documents

Experience our new **PRU** Services firsthand

Popular Services View more >

- Make payment
- Pay for family
- View documents
- Submit a claim**
- Sign up for auto deduction
- Change contact details

**Step 2: Select "Person Covered" for this claim and click "Continue"**

Submit A Claim Close X

Person covered Claim type Claim details Upload documents Payout details & summary

**Ensure timely payout**  
To avoid delays, update your bank account details via 'Change Payout Account' before submitting your claims. Updates will take effect after 24 hours.

**Person covered**  
Select one person covered for this claim.

ABCDEF BINTI HUSSEIN

**Continue**

**Step 3:** Select the "**Claim Type**" and "**Certificate**" you wish to claim (if you have multiple medical cards). Then, click "**Continue**".

**Note:** Customer can only select one claim type per submission.

### Submit A Claim

Close

- Person covered
- Claim type**
- Claim details
- Upload documents
- Payout details & summary

#### Claim type

Select the claim type you want to submit.

Hospitalisation/Day Care  
Expenses for hospital admission or day care procedures.

Outpatient Treatment  
Expenses for treatments at registered clinics or hospital outpatient departments without hospital admission.

[Scroll up to previous questions](#)

#### Certificate selection

Select a certificate to proceed.

**Take note**  
We'll process your claims based on your best available benefit. If it differs from your initial selection, we'll contact you.

<b>PruBSN AsasLink</b> 87695107	
<b>HealthProtector</b>	
Daily room and board	MYR 200.00/day
Smart Saver	MYR 300.00

[Benefit details](#)

[Back](#) [Continue](#)

**Step 4: Document Checklist** – This pop-up outlines the documents you need to submit, depending on the claim type. Click **"Got it"** to proceed to the next step.

**For Hospitalisation/Day Care:**

The screenshot shows a 'Submit A Claim' pop-up window with a close button in the top right corner. The window has a progress bar at the top with five steps: 'Person covered', 'Claim type', 'Claim details', 'Upload documents', and 'Payout details & summary'. The 'Claim type' step is currently selected. The main content area is titled 'What you will need to submit' and contains a 'Document checklist' section. Below the title, there is a paragraph of instructions: 'Get your receipts and supporting documents ready for upload. Please keep all original receipts and invoices, as Prudential may request for physical copies.' The checklist consists of four items, each with a numbered circle, a title, a description, and a status button with an expand/collapse arrow:

- 1 Medical bills & receipts** (Required) - Original receipts (including deposit receipt) and original final bills/tax invoices with an itemised breakdown of details. (Recommended for overseas treatment: Obtain the English-translated medical bills from the admitting hospital)\*
- 2 Doctor's statement** (Required) - Medical report or Physician statement. (Recommended for overseas treatment: Obtain the English-translated Medical report/Physician statement from the admitting hospital and passport indicating evidence of travel)
- 3 Lab test/Imaging report** (If available) - Histopathology, X-ray, MRI, CT scan, ultrasound, blood test, visual acuity, audiogram report and all other lab test report. (If applicable)
- 4 Claim settlement letter** (If available) - Claim settlement letter from other insurers for 3rd party claim. (If applicable)

At the bottom of the pop-up, there are two buttons: a white 'Cancel' button and a red 'Got it' button.

# For Outpatient Treatment:

## Submit A Claim

Close

---

Person covered   **Claim type**   Claim details   Upload documents   Payout details & summary

### What you will need to submit

#### Document checklist

Get your receipts and supporting documents ready for upload. Please keep all original receipts and invoices, as Prudential may request for physical copies.

- 1** Medical bills & receipts Required ^  
Original receipts (including deposit receipt) and original final bills/tax invoices with an itemised breakdown of details. (Recommended for overseas treatment: Obtain the English-translated medical bills from the admitting hospital)\*
- 2** Doctor's memo If available ^  
Accident date, circumstances of the accident, injuries and treatment details certified or endorsed by the treating doctor on the receipt(s). (Applicable for accidental event)
- 3** Doctor's memo If available ^  
Outpatient or follow up visit date, extent of diagnosis and treatment details certified or endorsed by the treating doctor on the receipt(s). (Applicable for outpatient event)
- 4** Nursing care documents If available ^
  - Recommendation letter from the treating doctor for home nursing care.
  - Nursing qualifications certificates of the nurses.
  - Breakdown of charges detailing the time and period of the home nursing care services rendered per day. (Applicable for nursing care benefit)

Cancel Got it

**Step 5: Enter the invoice/bill details and upload the medical bills & receipts, up to maximum of 3 invoices/ bills per claim type.**

**Note:** You may view the total amount at the bottom.

Submit A Claim Close

Person covered | Claim type | **Claim details** | Upload documents | Payout details & summary

**Take note**  
Please ensure the uploaded files are in JPG, JPEG, PNG, TIFF or PDF format with each file not exceeding 15MB in size. For better quality images, we recommend submitting files in PDF format.

**Outpatient Treatment**

Person covered  
ABCDEF BINTI HUSSEIN

**Enter invoice/bill details (1/3)**

**Invoice/bill 1**

Invoice/bill date: 01 Apr 2026  
Hospital/clinic name: GLENEAGLES HOSPITAL KUALA LUMPUR

Invoice/bill amount: MYR 1,500.00

**Medical bills & receipts** Upload file

Original receipts (including deposit receipt) and original final bills/tax invoices with an itemised breakdown of details. (Recommended for overseas treatment; Obtain the English-translated medical bills from the admitting hospital)\*

Medical Bill .pdf (30 KB)

+ Add invoice/bill

**Total amount: MYR 1,500.00**

Back Continue

**Step 6:** Upload the required documents based on the claim type as suggested. Then, click **"Continue."**

### Submit A Claim Close

Person covered | Claim type | Claim details | **Upload documents** | Payout details & summary

**Take note**  
Please ensure the uploaded files are in JPG, JPEG, PNG, TIFF or PDF format with each file not exceeding 15MB in size. For better quality images, we recommend submitting files in PDF format.

**Doctor's memo**  
Accident date, circumstances of the accident, injuries and treatment details certified or endorsed by the treating doctor on the receipt(s). (Applicable for accidental event)  
**If available** Upload file

**Doctor's memo**  
Outpatient or follow up visit date, extent of diagnosis and treatment details certified or endorsed by the treating doctor on the receipt(s). (Applicable for outpatient event)  
**If available** Upload file

**Nursing care documents**  
a) Recommendation letter from the treating doctor for home nursing care.  
b) Nursing qualifications certificates of the nurses.  
c) Breakdown of charges detailing the time and period of the home nursing care services rendered per day. (Applicable for nursing care benefit)  
**If available** Upload file

Back Continue

**Step 7: Payout Details & Summary** – You will be able to view and update your payout account details, followed by a summary of your claim submission (including the person covered, claim type, invoice/bill information, and uploaded documents).

### Submit A Claim Close

Person covered   Claim type   Claim details   Upload documents   **Payout details & summary**

**Take Note**  
Please review all details and confirm the declaration to submit your claim.

#### Payout account Update

<b>Payout method</b> Bank transfer	<b>Bank name</b> MALAYAN BANKING BERHAD	<b>Account holder's name</b> ABCDEF BINTI HUSSEIN
<b>Account number</b> *****2909		

Payout will be made to the bank account above. Please verify the information is correct or update the payout account details via 'Change Payout Account' (updates will take effect after 24hours).

#### Summary

<b>Person covered</b> ABCDEF BINTI HUSSEIN	<b>Claim type</b> Outpatient Treatment
---	---

**PruBSN AsasLink**  
87695107

**HealthProtector**

Daily room and board	MYR 200.00/day
Smart Saver	MYR 300.00

[Benefit details](#)

#### Invoice/bill information

**Invoice/bill 1** MYR 1,500.00

<b>Invoice/bill date</b> 01 Apr 2026	<b>Hospital/clinic name</b> GLENEAGLES HOSPITAL KUALA LUMPUR
---	---

Medical Bill .pdf  
30 KB

**Total amount** MYR 1,500.00

I declare that I have read, understood and fully agreed to the [Terms and Conditions](#), including the [Privacy Policy](#).

Back Submit

**Step 8: Update payout account** – After clicking the 'Update' button, you will be directed to the payout account page. Select 'Add account' to register a new payout account for your claim request.

The screenshot shows the 'Submit A Claim' interface with a modal titled 'Add Bank Details'. The modal has a close button (X) in the top right corner. Below the title, there is a section labeled 'Account details' with a '+ Add account' button highlighted by a red dashed box. Below this, there is a list of bank accounts. The first entry is 'MALAYAN BANKING BERHAD' with the account number '\*\*\*\*\* 2909 ABCDEF BINTI HUSSEIN' and a 'Select' button. At the bottom of the modal, there are 'Cancel' and 'Confirm' buttons. Below the modal, there is a checkbox with the text 'I declare that I have read, understood and fully agreed to the Terms and Conditions, including the Privacy Policy.' and 'Back' and 'Submit' buttons.

The screenshot shows the 'Submit A Claim' interface with a modal titled 'Account information'. The modal has a back arrow and a close button (X) in the top left and right corners. Below the title, there is a 'Note' section: 'The bank account must be a valid individual bank account with only one account holder. The bank will validate if your name and NRIC number match before we can transfer funds to you. If the information on this page differs from your bank's records, please contact your Takaful Consultant or our Customer Service Centre.' Below the note, there are four input fields: 'Account holder's name' (Abcdef Binti Hussein), 'Account holder's NRIC/Passport number' (841122512944), 'Bank Name' (AFFIN BANK BERHAD), and 'Account number' (123456789101). At the bottom of the modal, there is a checkbox with the text 'I have read and agreed to the Terms & Conditions, including the Privacy Policy.' which is checked. Below the modal, there are 'Cancel' and 'Confirm' buttons. Below the modal, there is a checkbox with the text 'I declare that I have read, understood and fully agreed to the Terms and Conditions, including the Privacy Policy.' and 'Back' and 'Submit' buttons.

**Step 9: Confirm and tick the Terms & Conditions declaration, then click "Submit."**

Person covered

Claim type

Claim details

Upload documents

**Payout details & summary**

**Take Note**  
Please review all details and confirm the declaration to submit your claim.

### Payout account

[Update](#)

<b>Payout method</b>	<b>Bank name</b>	<b>Account holder's name</b>
Bank transfer	MALAYAN BANKING BERHAD	ABCDEF BINTI HUSSEIN
<b>Account number</b>		
*****2909		

Payout will be made to the bank account above. Please verify the information is correct or update the payout account details via 'Change Payout Account' (updates will take effect after 24hours).

### Summary

<b>Person covered</b>	<b>Claim type</b>
ABCDEF BINTI HUSSEIN	Outpatient Treatment


**PruBSN AsasLink**  
87695107

#### HealthProtector

Daily room and board	MYR 200.00/day
Smart Saver	MYR 300.00

[Benefit details](#)

### Invoice/bill information

Invoice/bill 1 MYR 1,500.00 

<b>Invoice/bill date</b>	<b>Hospital/clinic name</b>
01 Apr 2026	GLENEAGLES HOSPITAL KUALA LUMPUR

 Medical Bill .pdf  
30 KB

**Total amount** MYR 1,500.00

I declare that I have read, understood and fully agreed to the [Terms and Conditions](#), including the [Privacy Policy](#).

[Back](#)

[Submit](#)

Once the claim is submitted, you will see a submission confirmation page stating:


## Request Submitted

Your claim request has been submitted for our review. You will receive the claim number via SMS. We will process the claim within 13 working days. You may close the tab.

### The details include:

- Person covered
- Claim type
- PRUServices reference ID
- Transaction type
- Submission date

Submit A Claim Close X



### Request Submitted

Your claim request has been submitted for our review. You will receive the claim number via SMS. We will process the claim within 13 working days.

Person covered	ABCDEFAD AMINORASHRIQ BIN AMINUDIN
Claim type	Outpatient Treatment
PRUServices ref. ID	L26T0042150
Transaction type	Submit a claim
Submission date	03 Mar 2026 08:32:28

[Back to home](#)