

Manulife Employer Hotline Call Menu

Manulife Employer Hotline
2108 1234

- Press **1**
Cantonese
- Press **2**
English
- Press **3**
Mandarin

Press **1**
MPF/ ORSO

Enter the Manulife Customer Number (Press # to bypass)

Press **2**
Group Life & Health

Press **1**
Contact Information, Cheque Payment Details or MPF Intermediary Information

Press **2**
Obtain Forms

Press **3**
Information on Procedures

Press **4**
Contribution Express

Press **5**
Employment Support Scheme

Press **0**
Contact Customer Service Officer

Press **1**
Contact Information

Press **2**
Obtain Forms

Press **0**
Contact Customer Service Officer

Press **1**
MPF Contact Information
Press # to request the following:
1 Sub-Scheme Label
2 MPF Contribution Payment GPO Box Address Label
3 MPF Administration Office Address Label
(Enter 7-digit MPF sub-scheme no. for each item request)
0 Contact Customer Service Officer

Press **2**
ORSO Contact Information

Press **3**
Customer Service Centre Address

Press **4**
MPF Intermediary Information
(Enter 7-digit MPF sub-scheme no./ 6-digit ORSO policy no.)

Form Request
1 Employee Enrolment Kit
(Enter 7-digit MPF sub-scheme no.)
2 Sub-scheme Label/ Address Label
 1. Sub-scheme Label
 2. MPF Contribution Payment GPO Box Address Label
 3. MPF Administration Office Address Label
(Enter 7-digit MPF sub-scheme no.)
3 Change of Employer Particulars Form
 1. Change of Employer Particulars Form
 2. Employer's Authorized Specimen Signature Form
4 Employee Termination Forms
 1. Notice of Employee Termination
 2. Notice of Termination for Multiple Employee
5 Remittance Statements
 1. Remittance Statement for New Employee
 2. Remittance Statement
 3. Remittance Statement for Surcharge
0 Contact Customer Service Officer

1 MPF Contribution Procedure
 1. Contribution Date
 2. New Employee Enrolment
 3. Contribution Reporting & Payment Method
 4. Definition of Relevant Income
 5. Minimum & Maximum Level of Relevant Income
 6. Surcharge Calculation
2 Employee Termination Procedure
(Press 1 for Form Request or Press 0 to contact Customer Service Officer)

Press **1**
Provident Funds

Press **2**
Feedback or Suggestions
1 Compliment
2 Complaint

Press **1**
Group Life & Health

Press **2**
Feedback or Suggestions
1 Compliment
2 Complaint

Form Request (By Fax, Press 1; By Email, Press 2; By Mail, Press 3)
1 Group Medical Claim Form
2 Hospitalization & Surgical Claim Form
3 Employer Particulars Change Form
4 Certificate Change Form
5 Employee Enrolment Form
 1. Employee Enrolment Form
 2. Employee Enrolment Sheet
0 Contact Customer Service Officer
6 Mailing Address Label (by mail only)
(Enter 8-digit group policy no.)
0 Contact Customer Service Officer