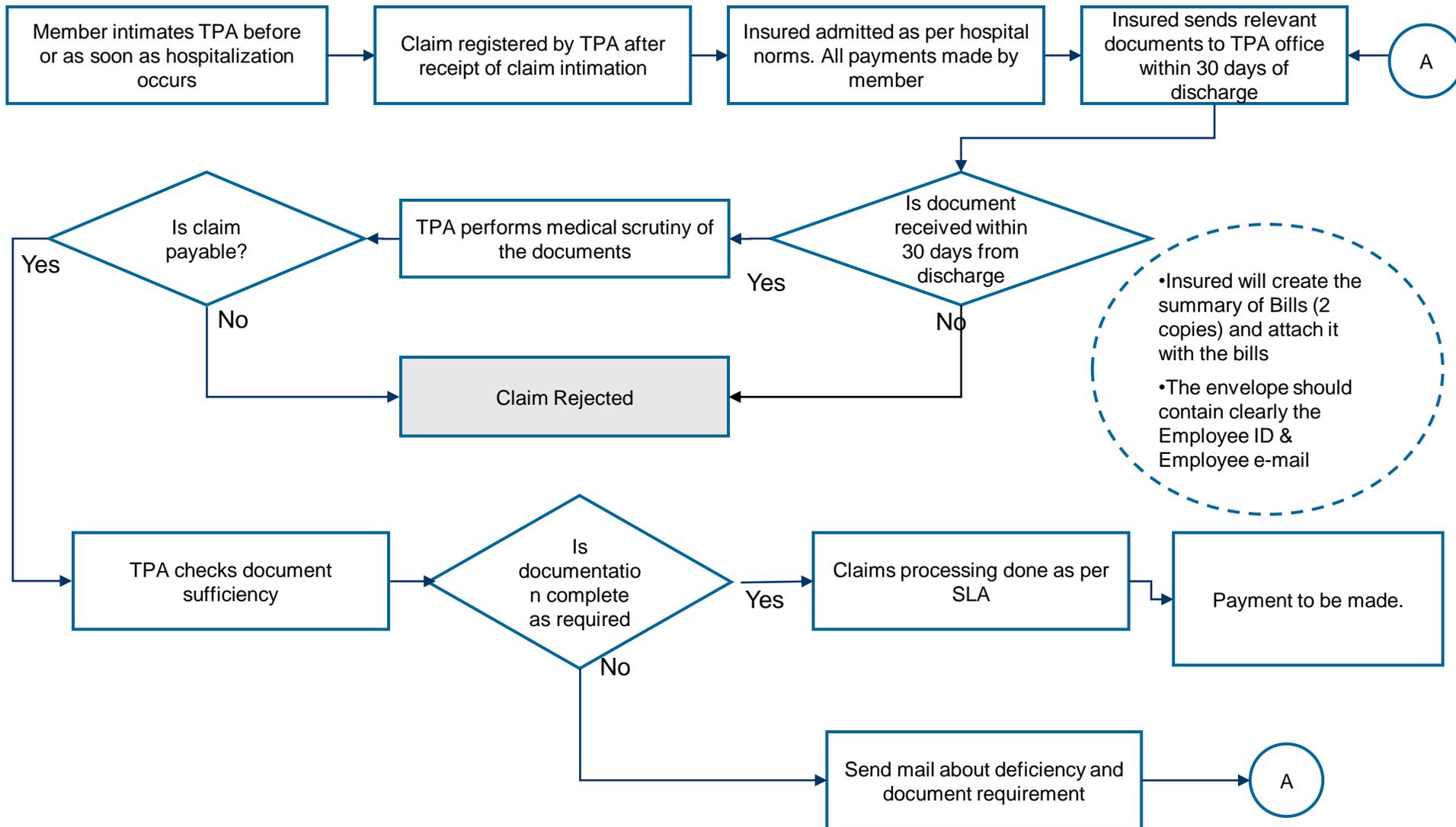


3. Non-Cashless Claims Process



Non-Cashless (Reimbursement)

Admission procedure

- In case you choose a non-network hospital you will have to liaise directly with the hospital for admission & **send intimation to TPA within 24 Hours from Date of Admission.**
- However you are advised to follow the pre authorization procedure to ensure eligibility for reimbursement of hospitalization expenses from the insurer.

Discharge procedure

- In case of non network hospital, you will be required to clear the bills and submit the claim to TPA for reimbursement from the insurer. Please ensure that you collect all necessary documents such as – discharge summary, investigation reports etc. for submitting your claim.

Submission of hospitalization claim

- You must submit the final claim with all relevant documents within 15 days from the date of discharge from the hospital.

Claims Document List

***Please retain photocopies of all documents submitted**

- ✓ Completed Claim form with Signature
- ✓ Hospital bills in original (with bill no; signed and stamped by the hospital) with all charges itemized and the original receipts
- ✓ Discharge Report (original)
- ✓ Attending doctors' bills and receipts and certificate regarding diagnosis (if separate from hospital bill)
- ✓ Original reports or attested copies of Bills and Receipts for Medicines, Investigations along with Doctors prescription in Original and Laboratory
- ✓ Follow-up advice or letter for line of treatment after discharge from hospital, from Doctor.
- ✓ Provide Break up details including Pharmacy items, Materials, Investigations even though it is there in the main bill
- ✓ In case the hospital is not registered, please get a letter on the Hospital letterhead mentioning the number of beds and availability of doctors and nurses round the clock.
- ✓ In non- network hospital, you may have to get the hospital and doctor's registration number in Hospital letterhead and get the same signed and stamped by the hospital, if required.
- ✓ Valid Government ID Proof of Employee and Patient
- ✓ Cancelled Cheque of Beneficiary with Printed Name

✓ **If you are required to buy medicine or investigation done outside the hospital, kindly obtain proper Cash Memo / Receipt for payment made by you in original.**

✓ **Certain charges such as (Telephone / Fax, Food & Beverages for relatives, Barber, etc.) are not covered in your insurance policy, if you have obtained such services from the hospital please pay for the same directly to the hospital.**

Claim Settlement

- When you submit your claim along with all relevant documents to TPA, the same will be scrutinized by a team of medical doctors and claim processors and if found in order – TPA will issue a reimbursement for the amount paid by you .
- In case of discrepancies or deficiencies in the documents, TPA will issue a letter listing the deficiencies and deficient documents need to be submitted within 15 days.
- If the claim file is complete in all respects TPA will normally settle the claim within 15 working days from the date of receipt of complete documents.
- Insurer/TPA will settle the claim, deducting the amount pertaining to deficient documents/Non Payable Items.
- When the deficient documents are submitted, TPA will reopen the file and pay for the same if admissible.

Claims Process

- Intimation is to be Given 24 Hours Prior to Admission in Case of Planned Admissions and Within 24 Hours in Case of Emergency Admissions.
- Pre Authorization Request in Case of Admission in Network Hospital and Intimation in Case of Non Network hospital is Mandatory.

Policy Conditions

- 4.1,4.2 & 4.3 deleted (Ticket No:6608324339)
- All other terms, conditions, limitations and exclusions are as per standard group Mediclaim policy.
- BHEL Hospital bills - Not covered.
- 30 days and 60 days
- Pre-existing diseases - Covered
- 2% of the SI i.e., Rs.2,500/- per day. ICU - 4% of the SI i.e., Rs.5,000/- per day.
- SI Rs.1,25,000/- per student