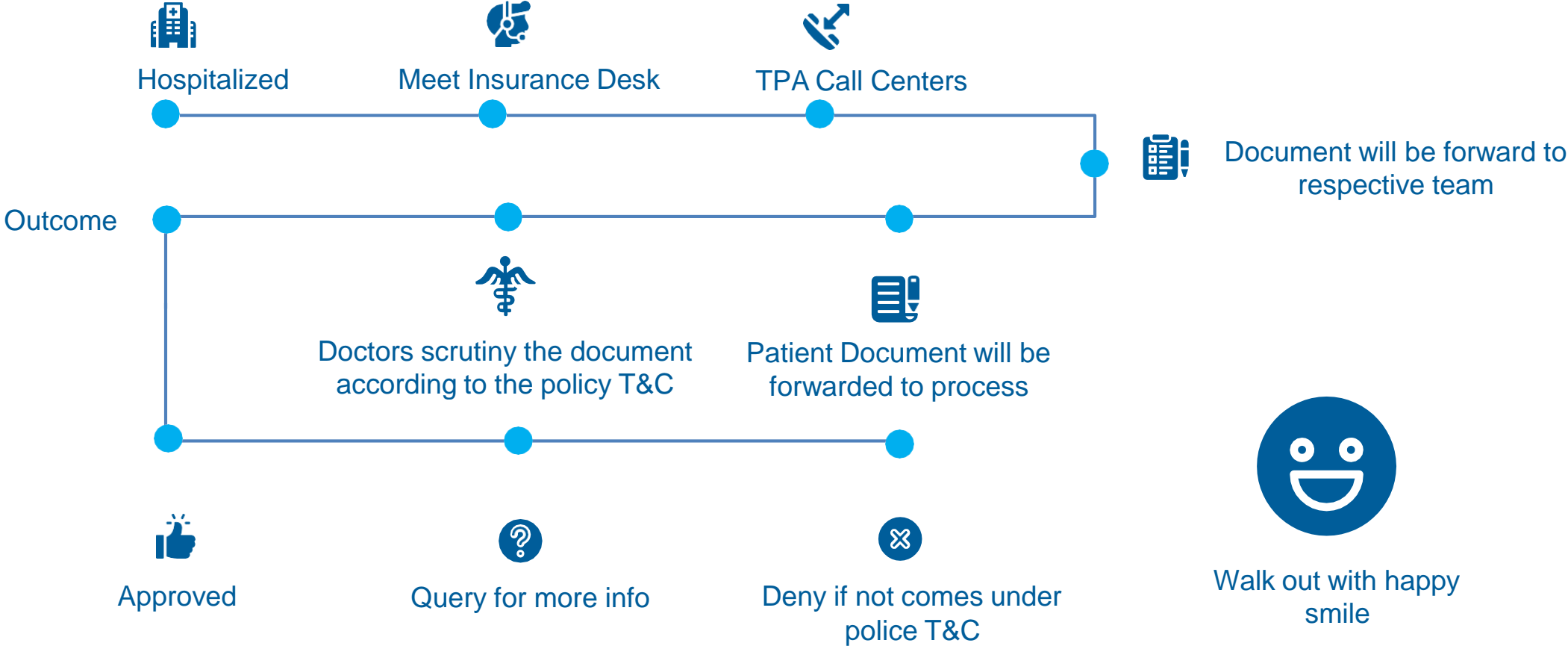


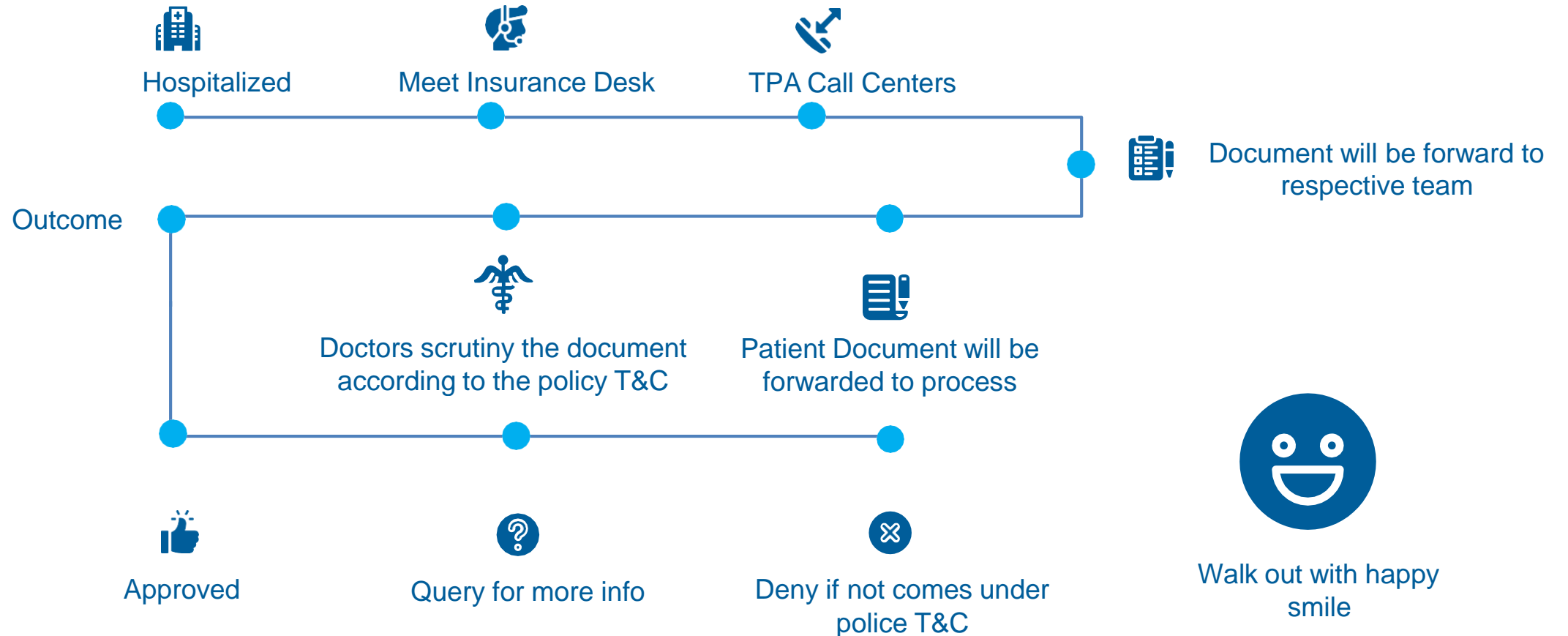
# CLAIM PROCESS FLOW

## CASHLESS HOSPITALIZATION PROCESS- PLANNED

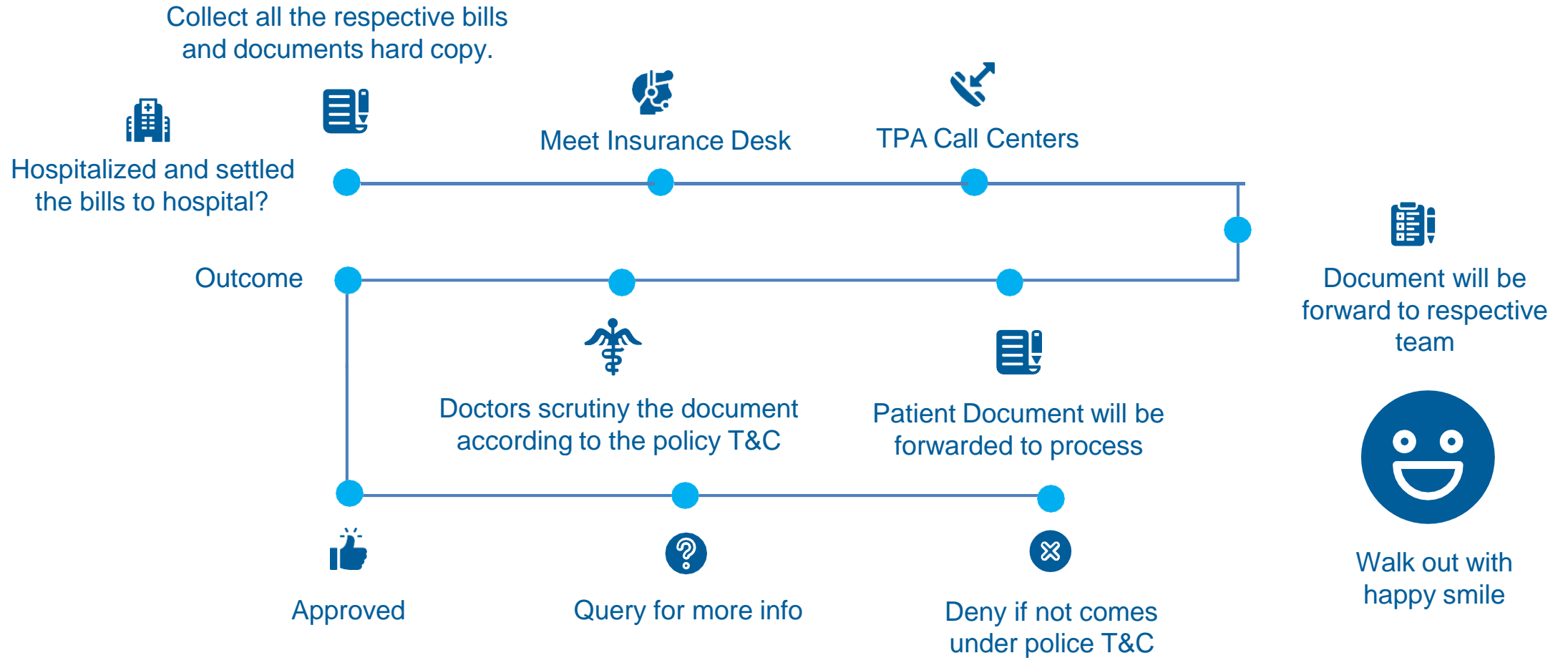


# CASHLESS HOSPITALIZATION PROCESS- EMERGENCY

- Pre-authorization form to be sent within 6 hours from the time of admission



# REIMBURSEMENT HOSPITALIZATION PROCESS



## DOCUMENT CHECK LIST

|  |
|--|
| Signed claim form  |
| Main hospital bills in original (with bill number, signed and stamped by the hospital) with all charges itemized and the original receipts                                   |
| Discharge card (original) and ICP / IPD Paper( Photocopy).   |
| Attending doctors' bills, receipts and certificate regarding diagnosis<br>(if separate from hospital bill)   |
| Original reports and attested copies of bills and receipts for medicines, investigations along with doctors prescription in original and laboratory.                         |
| KYC documents of the insured and patients.   |
| Break up with details of 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 hospitalization, please get the hospital and doctor's registration number on hospital letterhead and get the same signed and stamped by the hospital.        |
| If payment needs to be credited into the employee's account then we would require a chancel cheque bearing with employee's name. .   |

