Claim Procedure Note

Cashless Claim Procedure

- Cashless facility is only applicable if the Insured Person goes to a network hospital.

- **Insured Person should carry their mediclaim cards or mediclaim ids along with a photo id proof to the Network hospital.**

    1. Photo Identity card issued by employer, or
    2. Pan Card or
    3. Driving License or
    4. Passport or
    5. Voter ID Card

- Once in the hospital, go to the Help desk/TPA Desk/Reception, and inform that you are covered under Group Mediclaim Insurance Policy serviced by MD India, the TPA and get the pre authorization form filled by the doctor/hospital.

- Get the filled form faxed to the TPA

    – If everything is ok, within 2-4 hours the TPA will sanction the amount

    – If TPA requires more clarification, it will re-fax the letter of requirement/clarification. The query needs to be answered satisfactorily via fax. If the query is resolved then TPA will sanction the cashless

    – The cashless may be rejected if TPA is of the view that ailment/ hospitalization is not covered under the policy.

- If the final bill is more than initial sanctioned amount then at the time of discharge follow the above process again. Additional limit will be granted if things are in order.

- There are few hospitals which may ask for certain deposit amount at the time of admission which will be refunded to you once the hospital gets it payment from the TPA

Important Points to Note –

Denial of "Cashless Service" is not denial of treatment. You can continue with the treatment, pay for the services to the hospital, and later send the claim to TPA for processing and reimbursement.

Cashless request is to be sent on the day of admission or next day only. Cashless cannot be initiated on the day of discharge.

Faxing of pre- authorization form may be followed by a phone call to TPA call centre within 30 minutes to ensure that fax has been received by them.

Please ensure that the form is completely filled, signed and stamped before sending it to TPA. Incomplete form will only delay in authorization. The form is to be filled by treating doctor/consultant.
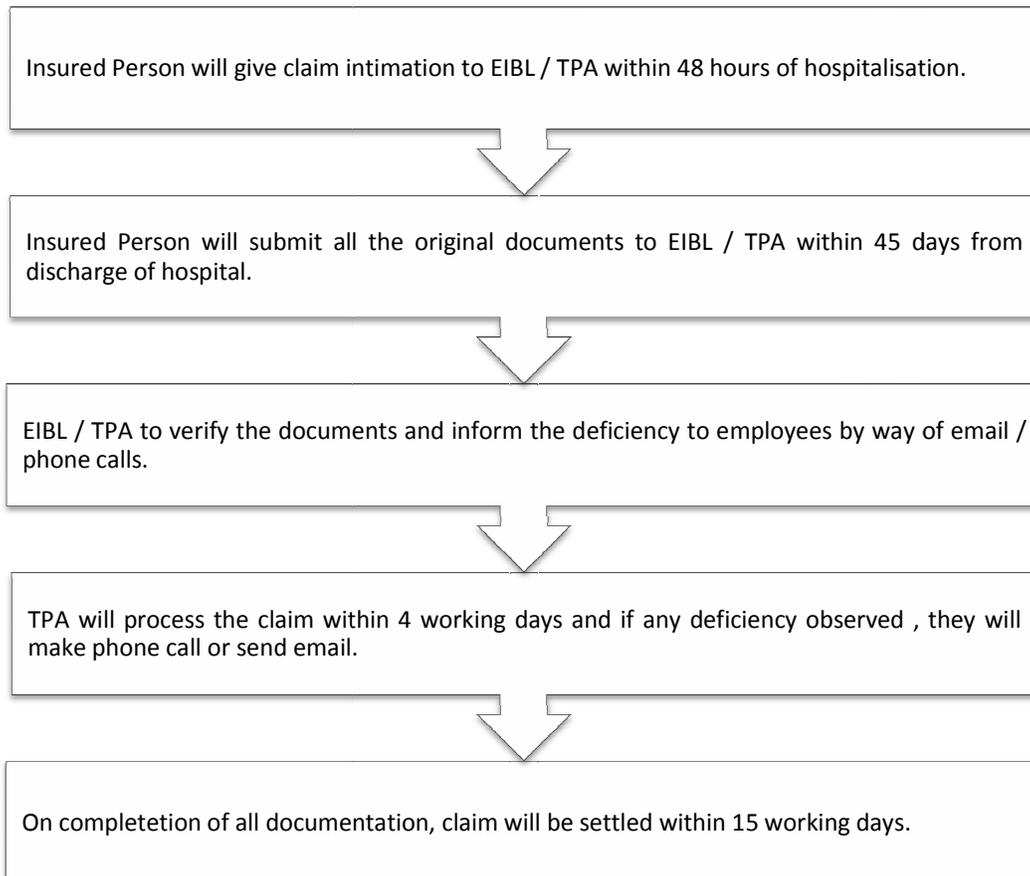
TPA may revert with some more clarification on nature of ailment, past ailment, proposed treatment, expense, etc. Kindly ensure that the queries are replied immediately and faxed to TPA.

Cashless will be granted and the Authorization Letter (AL) will be faxed to the hospital.

If the process is taking too long and not to your satisfaction then you may get in touch with representatives at Edelweiss Insurance Brokers Ltd. (EIBL) or at TPA. However kindly note that you are the best person to get the Pre- authorization form filled from the doctor/hospital authorities. EIBL will only be able to assist after the form has been faxed to TPA.

The TPA Desk generally functions only till 5.30-6.00 in the evening. If hospitalization is in late evening then the cashless request needs to be sent next morning (this will not hinder the treatment and it can be initiated).

Reimbursement Claim Procedure

Insured Person will give claim intimation to EIBL / TPA within 48 hours of hospitalisation.

Insured Person will submit all the original documents to EIBL / TPA within 45 days from discharge of hospital.

EIBL / TPA to verify the documents and inform the deficiency to employees by way of email / phone calls.

TPA will process the claim within 4 working days and if any deficiency observed , they will make phone call or send email.

On completetion of all documentation, claim will be settled within 15 working days.

For settlement of claims, generally following documents would be requested for:

- Duly completed claim form
- Bills, receipt and discharge certificate/card from the hospital
- Cash memos from the hospital
- Bills from chemist(s) supported by proper prescription
- Receipt and pathological test report from a Pathologist supported by the note from attending medical practioner/surgeon prescribing such pathological tests
- Nature of operation performed and surgeons bill and receipt

For the Post Hospitalization Claims, the same process as required for the reimbursements claims would be followed. As per the policy conditions, the insured person can claim the Post Hospitalization expenses upto 60 days.

When an Insured Person has availed a cashless facility at any hospital, the claim for expenses incurred up to 30 days prior to the hospitalization and 60 days post hospitalization can be made after the expiry of 60 days from the date of discharge.

The same procedure of that of Reimbursement claims to be followed for Post Hospitalization Claims.