

CLAIM DOCUMENTS CHECK LIST

- 1. Duly filled & signed Claim form by the employee. (Claim form attached)
- 2. Original Discharge card / Discharge summary with exact date & time of admission/discharge.
- 3. Original Hospital bills with the seal & signature of the Hospital.
- 4. Detailed Hospital bill break-up for the expenses.
- 5. All original prescriptions & consultation papers of the Doctor.
- 6. All original Medical bills with the name of the Patient duly endorsed by the treating Doctor.
- 7. All original cash paid receipts supporting the bills in the name of patient.
- 8. All original Medical reports certified by the Doctor (Pathology, X-Ray, CT-Scan, ECG, MRI, etc.)
- 9. Summary of all Expenses.
- Medico Legal Certificate (MLC) / FIR copy in case of accident cases.
- 11. Medico Legal Certificate (MLC) & FIR both are mandatory in case of road traffic accident.
- 12. All Indoor Case Papers (ICP).
- 13. Copy of Hospital Registration certificate in case of private non-empanelled hospitals.
- 14. Photocopy of cashless card.
- 15. Claim documents to be submitted within 30 days from Date of Discharge
- 16. Claim Intimation to be done within 7 days from the date of hospitalization.
- 17. Document submission and Intimation beyond the time period mentioned will invite additional 10% co-pay.
- 18. Hospital Declaration form filled by hospital wth seal and signature is Mandatory. (form attached)

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- IRDA License No.: 005

(Formerly Known as MDIndia Healthcare Services (TPA) Pvt. Ltd.) ISO 9001 : 2000 & 27001 : 2005

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