



A Guide to Cashless Hospitalization and Claims Reimbursement



During unprecedented and unfortunate times, you need to be prepared for everything that might come your way. Keep the following information handy in your time of need.

Cashless Hospitalization Procedure

- To Know your network hospital, Click on **Mediassist** Website <https://mediassisttpa.in/network-hospital-search/> & Select Insurer as **ICICI Lombard General Insurance Company Limited**
- Always keep the Ecard & Govt ID proof of the patient who is getting admitted handy.
- For planned hospitalization, approach the hospital minimum 48 hours prior to admission, present the E-card and complete the pre-authorization formalities.
- Approach the hospital insurance desk and request for a cashless form.
- Fill the form & submit it at the hospital insurance desk.
- For any delays/issues, please reach your Insurance Dedicated POC

Claims Reimbursement Procedure

- Claim intimation should be done within 72 hours. (Refer Policy Benefit Manual for Intimation process)
- Documents required:
 - ✓ Original discharge summary & in-patient report., Original final bill with itemized break-up & Original cash paid receipts.
 - ✓ Original investigation reports. , 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 Doctor's prescription in Original and Laboratory
 - ✓ Follow-up advice or letter for line of treatment after discharge from hospital, from Doctor.
 - ✓ 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 case of accidents, please note FIR or MLC (medico legal certificate) is mandatory
 - ✓ In case of a cataract / Implant surgery – IOL/ Implant sticker & In Maternity claim Gravida Report is mandatory for processing the claim
 - ✓ Cancelled personalized cheque of employee & E-Card, Govt photo ID of patient, and copy of the Employee ID card.
- All your original reports should have the seal & sign of the hospital where the patient was admitted.
- Ensure that the invoice/bill has a Bill number.
- Medical reports and bills must have patient name and date of birth as per Government ID proof.
- Retain photocopies of all your reports with you for your records.
- Note: The above is an indicative list and additional documents can be requested for to process a claim.
- Member submits the claims documents within **30 Days from Discharge** (Document must reach TPA Office on/before 30 Days)

CLAIMS

DO’s

- Enroll your dependents immediately on receiving the enrolment mail.
- Preserve your E-Card to access anytime and ensure all details match as per government ID Proof.
- Pick a hospital room as per your requirement to save yourself from out-of-pocket expenses and protect balance Sum Insured for Future
- Insist the hospital to provide a complete set of documents along with Original seal & signature at time of discharge.
- Preserve all the original receipts softcopy/photocopy that you paid by cash/card.
- Stay aware of the restrictions and limits on various expenses relating to hospitalization as per your policy terms and conditions.
- Reach out to your TPA and check on the package rates in case of any ambiguity.
- Stay aware of the policy terms and conditions. You can refer to these in the Benefits manual on the Global Benefit Solution login Page.



DON'Ts

- Do not share your sum insured details with the hospital.
- Do not occupy hospital rooms above your eligibility as it will trigger proportionate deductions.
- Avoid a hospital which is not registered with MediAssist TPA or has less than 15 beds capacity.
- Do not leave any bill/receipts uncollected from the hospital.



DEDICATED POINT OF CONTACT FOR CLAIMS		
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