

Claim Process

What documents are needed for processing claims if the treatment has been done in a non-network hospital or in a network hospital where cash less facility was not granted / availed?

Following documents are required for processing the claims on reimbursement basis:

1. Claim Form properly filled and signed by the claimant
2. Discharge Certificate from the hospital
3. All documents pertaining to the illness starting from the date it was first detected
 - i. Bills, Receipts
 - ii. Cash Memos from hospital supported by proper prescription
 - iii. Receipt and diagnostic test report supported by a note from the attending medical practitioner/surgeon justifying such diagnostics. Surgeon's certificate stating the nature of the operation performed and surgeon's bill and receipt
 - iv. Attending doctor's / consultant's / specialist's / anesthetist's bill and receipt, and certificate regarding diagnosis
 - v. Certificate from the attending medical practitioner / surgeon that the patient is fully cured
4. Details of previous policies : if the details are not already with TPA except in the case of accidents

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