# Claims Process – Cashless & Reimbursement



PROTECTING INVESTING FINANCING ADVISING

# **Cashless - Claim Documents**



## **Mandatory in all claims**

- ✓ Pre- authorization form
- ✓ KYC documents- KYC form /Aadhaar card + PAN card
- ✓ Final bill
- ✓ Discharge summary

# **Likely to be mandatory**

- ✓ Initial assessment sheet
- ✓ Positive investigation reports
- ✓ Declarations and MLC (in case of accidental cases)

### **Subjectively necessary**

- ✓ ICPs | OT notes
- ✓ Investigation reports
- ✓ Past relevant documents
- ✓ Declarations
- ✓ Running bill | Case summaries (mostly in case of interim)



### STEP 1- Find a cashless hospital



#### STEP 1:

# Locate a cashless network hospital of your choice

Cashless claims are available at our 5900+ network hospitals. Visit our network hospitals for a stress-free experience, be it for an emergency hospitalization or a planned one.



### Check hospital near you-

https://www.adityabirlacapital.com/healthinsurance/locate-care/hospital-listing



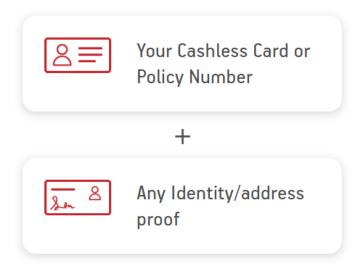
#### STEP 2- Verification



#### STEP 2:

## Verify patient identity

When you reach the hospital, show your Aditya Birla Health Insurance Policy Cashless Card or share your policy number. Also share a valid ID proof such as PAN card, Passport, Voter ID, etc.





### STEP 3- Submit request form



#### **STEP 3:**

# Fill the request form at the hospital or online

Visit the insurance desk at the chosen hospital and ask for a Pre-Authorization Request Form. Submit that to the hospital. It will then be sent to us, your insurer, for approval.



Download the form from here-

https://www.adityabirlacapital.com/healthinsurance/cashless-claims



### STEP 3- Submit request form

To speed this process up, you can also download the form right here and keep it duly filled and ready to submit to the hospital.

#### Download the Pre Authorization Form >

For planned hospitalization: Submit the form at least

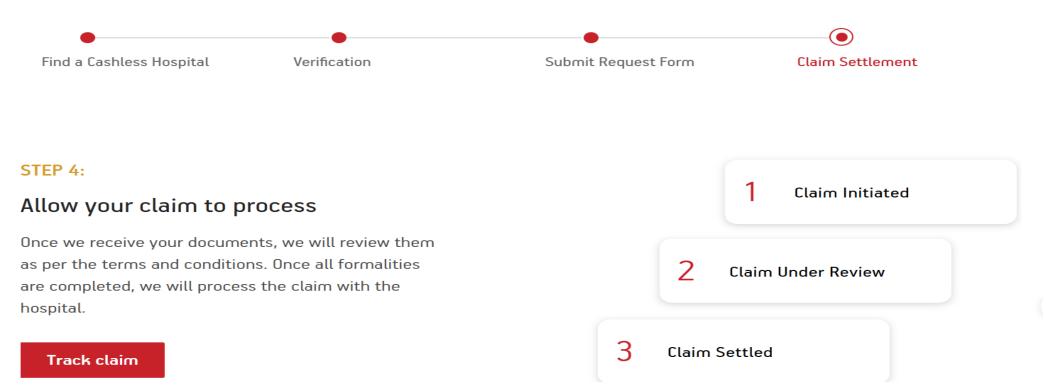
3 days before getting admitted

For emergency hospitalization: Submit the form within

48 hours of getting admitted



#### STEP 4- Claim settlement



Track your claim here-

https://www.adityabirlacapital.com/healthinsurance/login

# Member Reimbursement – Claim Documents



### **Mandatory in all claims**

- ✓ Claim form A and B
- ✓ KYC documents- KYC form / Aadhaar card + PAN card
- ✓ Final bill + Paid Receipt
- ✓ Discharge summary
- ✓ Investigations supporting diagnosis
- ✓ NEFT policy holder (Death claims Nominee)

### Likely to be mandatory

- ✓ Initial assessment sheet
- ✓ Positive investigation reports
- ✓ Declarations and MLC (in case of accidental cases)

### **Subjectively necessary**

- ✓ ICPs | OT notes
- ✓ Investigation reports
- ✓ Past relevant documents
- Declarations



# Member Reimbursement - Process Description

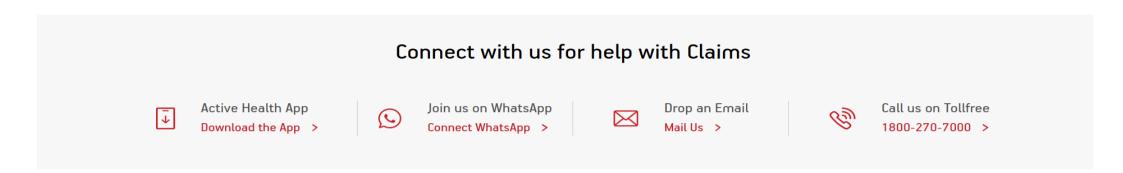


#### STEP 1- Intimate Us

- Inform us of hospitalization
- In case of emergency hospitalization, inform us within 48 hours of being admitted.
- For planned hospitalization inform us 3 days before you are admitted.
- Once admitted, make the payments, directly to the hospital, as per the hospital's standard process, unless a pre-authorization has been issued by us

Notify us by

Logging in with us- <a href="https://www.adityabirlacapital.com/healthinsurance/login">https://www.adityabirlacapital.com/healthinsurance/login</a>



# Member Reimbursement - Process Description



### STEP 2- Submit your documents

- Collect all the relevant documents mentioned in <a href="https://www.adityabirlacapital.com/healthinsurance/downloads">https://www.adityabirlacapital.com/healthinsurance/downloads</a>
- Submit the original documents from the hospital to us within 30 days of your discharge, at the address given below or at our nearby branch

Address

15<sup>th</sup> floor, G Corp Tech Park, Ghodbunder Road, next to Hypercity MALL, Sai Nagar, Anand Nagar, Thane west, Thane, Maharastra 400601

# Member Reimbursement - Process Description



#### STEP 3- Claim reimbursement

### Allow your claims to process

- Once we receive your documents, we will review them as per the terms and conditions.
- Once all formalities are completed, we will process the claim

# Pre and post hospitalization Claims – Guidelines



- Covered on reimbursement basis only.
- To be processed only if the main In-patient hospitalization claim has been approved/settled by us.
- Expenses related to same condition for which hospitalization was required will only be covered.
- Post hospitalization documents need to be submitted within 30 days from last document irrespective to post limit.
- Covered as per limits as specified in the COI/policy wordings.

# **WhatsApp Distributor BOT - 8097407637**



### Check your Claim status



