

Date: 30 Apr 2021

Reimbursement claim request under your ManipalCigna_ProHealth Insurance Plus_Floater policy number PROHLT110002072_2020 Dear Mr/Ms Ashok Bhake,

We have carefully evaluated the documents submitted with reference to the Reimbursement claim under the aforesaid policy number, and wish to confirm that we would need additional information for further processing of the request.

What are the claim registration details?

1. Claim Number:	24301747
2. Patient Name:	Ashok Bhake
3. Insurer Claim No:	
4. Insurer Member Id:	1000066318

The additional documents that you need to submit are:

- Clarification for Discrepancy required As per final bill, charged for ICU and as per available documents patient was admitted in private room. Kindly provide a clarification from hospital/treating doctor regarding the same.
- Please provide hospital room rent tariff Require letter from hospital stating the charges for various room categories like single private room,general ward,deluxe room,suite,ICU with hospital room tariff

You will need to submit the additional documents at the earliest, preferably within 10 days of receipt of this letter.

The documents need to be submitted at the nearest ManipalCigna office.

In case of any clarifications, please call our helpline at 1800 419 1159 or write to us at Cigna@mediassistindia.com

Assuring you of our best services at all times.

Yours sincerely,

ManipalCigna Health Insurance Company Limited

***** This is a system generated certificate which requires no signature *****



For any assistance contact:







www.manipalcigna.com