

# Alternative Clean Claim Template

**Claim No:** CLM/2024/444444

**Policy Holder Name:** Neha Patel

**Hospital Name:** Max Healthcare

**Disease:** Cancer

**Treatment:** Chemotherapy

**Claimed Amount:** ₹8000

**Date of Treatment:** 24-Jan-2024

**Patient Details:**

- Age: 38
- Gender: Female
- Contact: 9876543210

**Additional Notes:** Blood pressure control with prescribed antihypertensive medications and lifestyle counseling.