



Medi Assist Healthcare Services Limited

Name of corporate



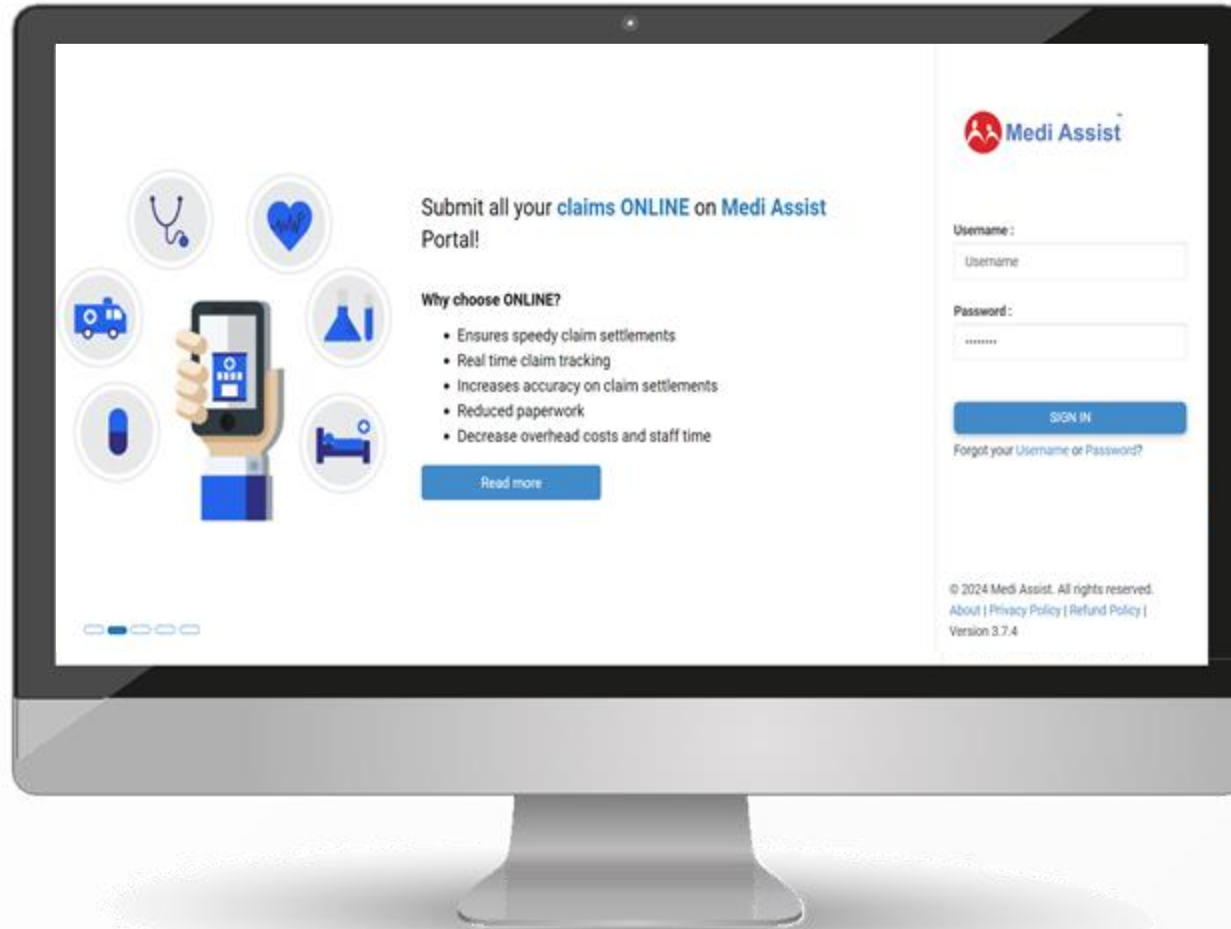
- Policy
 - Enrolment
 - Download E-card
 - Policy Details
- Hospitalisation
 - Search Network Hospital
 - Intimate eCashless
 - Intimate Reimbursement
- Claims
 - History
 - Submit Claim
 - Submit Domiciliary Claim
- Profile

How to Login Portal

Medi Assist Portal Login Page

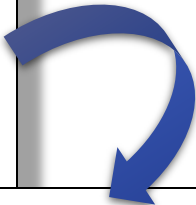
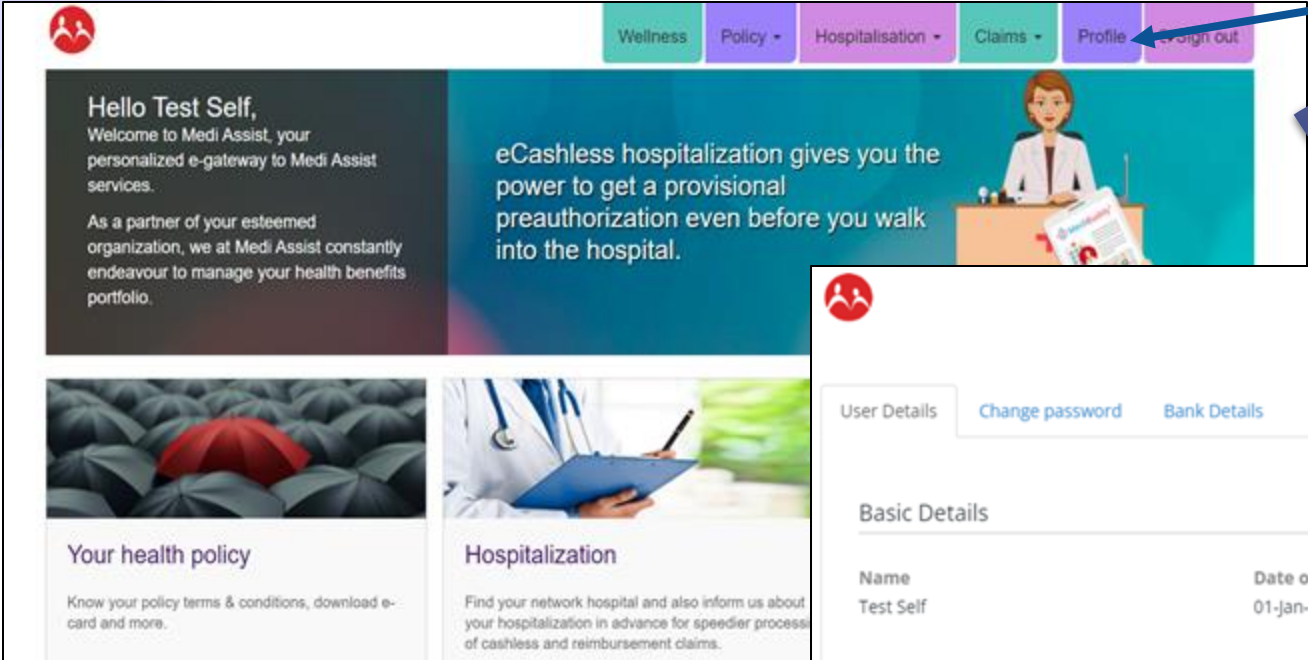
URL -
<https://portal.mediassist.in/Home.aspx>

Login Medi Assist Portal,
with your **corporate User
Name & Password**
received from Corporate

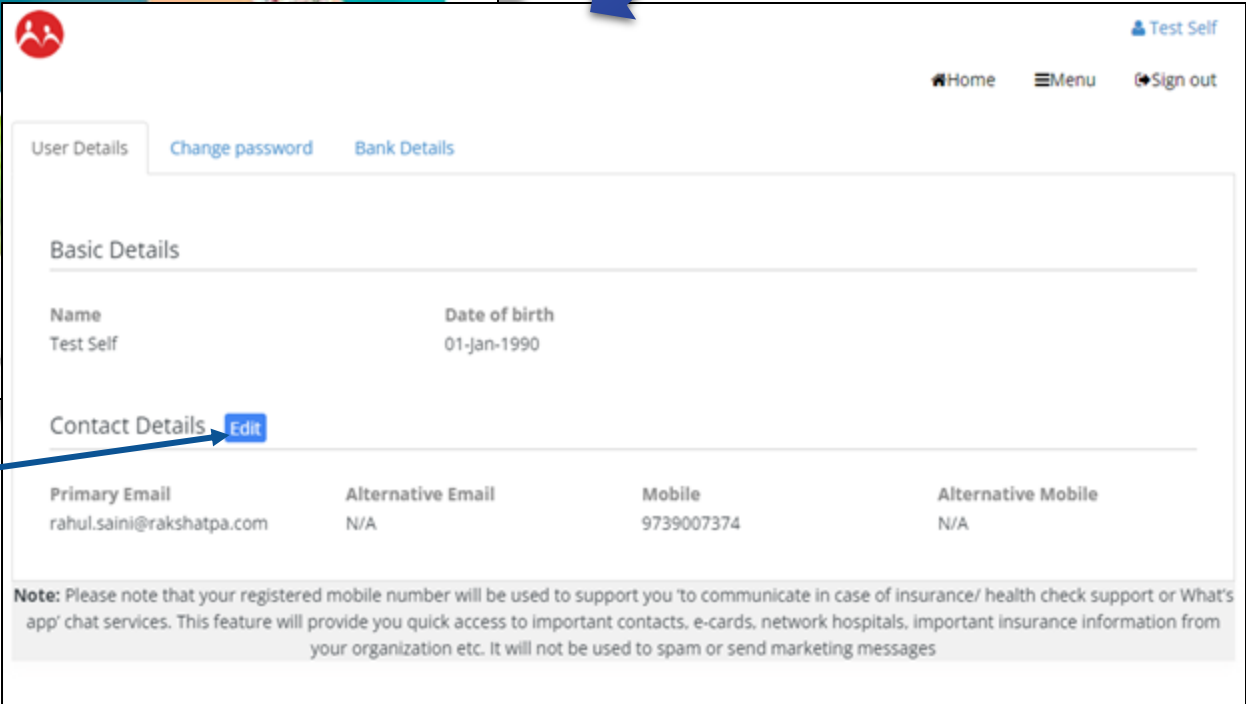


How to update profile

Click on
Profile



Click here to update
email id & contact
details



Contact Details			
Primary Email	Alternative Email	Mobile	Alternative Mobile
rahul.saini@rakshatpa.com	N/A	9739007374	N/A

Note: Please note that your registered mobile number will be used to support you 'to communicate in case of insurance/ health check support or What's app' chat services. This feature will provide you quick access to important contacts, e-cards, network hospitals, important insurance information from your organization etc. It will not be used to spam or send marketing messages

How to download E-card



Wellness

Policy

Hospitalisation

Claims

Profile

Sign out

Download E-Card

Policy Detail

Hello Test Self,
Welcome to Medi Assist, your personalized e-gateway to Medi Assist services.

As a partner of your esteemed organization, we at Medi Assist constantly endeavour to manage your health benefits portfolio.

eCashless hospitalization gives you the power to get a provisional preauthorization even before you walk into the hospital.

Your health policy

Know your policy terms & conditions. Download e-card and more.

Download eCard

View policy

Hospitalisation

Find your nearest hospital for cashless treatment.

Network

Intimate

Insurer logo

Corporate Logo

Beneficiary name: test5_6686

Member ID: 5123546021

Employee code: test5_6686

Date of birth: 01-Jan-1979

Relation: Self

Primary Insured: test5_6686

Valid upto: 31-Dec-2024

Policy holder: Kymdriyl Solution Private Limited

Generated On: 22-03-2024 14:49:35

This card is only for identification and is not an authorization to proceed with the treatment or a guarantee for payment.

In the case of photoless identity cards issued to beneficiaries, acceptable proof of identity such as Aadhar Card/Passport/Driver License/ Ration Card / Voters ID Card / PAN Card should be presented at hospitals.

This non-transferable identification card is valid at selected Network Hospitals & will enable Card Holder to avail cashless hospitalization only on the basis of preauthorization by Medi Assist.

In case of any delay in cashless approval beyond 3 hours, please reach out to MediAssist Emergency Preauth contact number - 08066507725

For latest updated HDPC Ergo, please login to <https://portal.mediassist.in> or MediBuddy mobile app.

Medi Assist Insurance TPA Pvt. Ltd.

Tower D, 4th Floor, IBC Knowledge Park, 4/1, Bannerghatta Road, K.M.Layout, Bengaluru, Karnataka 560029 CIN: U85199KA1999PT0205678

Website: www.mediassisttpa.in Email: kymdriyl@mediassist.in

Toll free phone number: 04071325116/9620059487

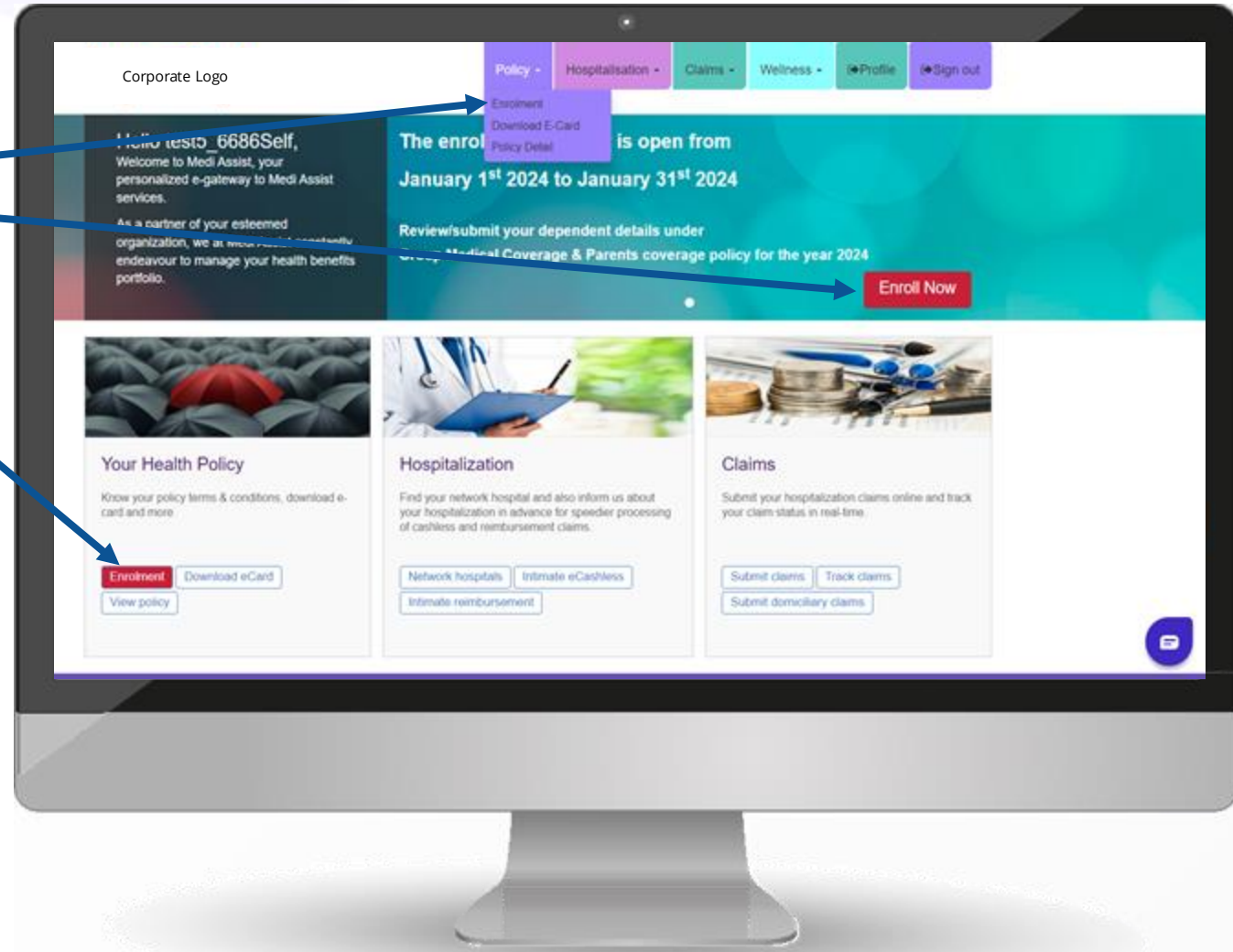
Click here to download E-card

Download E-Cards – Allows you to download Yours & your family members Cards.

© 2024 Medi Assist

Click here to
Enrol
beneficiaries

Enrolment can be done
only when the window is
open.



- Fill the details
 - Name
 - Relation
 - Date of birth
 - Age
- **Note - Members can add beneficiary as per the policy design.**

For Top - up cover

- Select the sum insured from the drop down
- Read the note carefully
- Click of agree tab then submit.

Test6914

Employee ID	Test6914	Date of Hire	31 Mar 2024	Gender	Male
Email	david.clement@mediassist.in	Marital Status	Married	Marriage Date	07 Mar 2024

Beneficiary Details (Floater Sum Insured (INR): 500000) [Add](#)

Name	Relation	Birth Date	Age	Action
Test6914	Self	01 Jan 1980	44	No Action Allowed
dsfsdf	Spouse	01 Mar 2006	18	Edit Delete
deadada	Son	06 Mar 2024	0	Edit Delete
fadda	Daughter	05 Mar 2024	0	Edit Delete
Richard	Father	04 Mar 1980	44	Edit Delete

Note : Either set of parents / IL are covered, cross combinations are NOT allowed.

Voluntary Top-up Cover (Premium is inclusive of 18% GST)

Sum Insured	400000	Premium	15141
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Note : Above Top-up benefit will be rolled out ONLY if there is a minimum of 160 employees opting the cover.

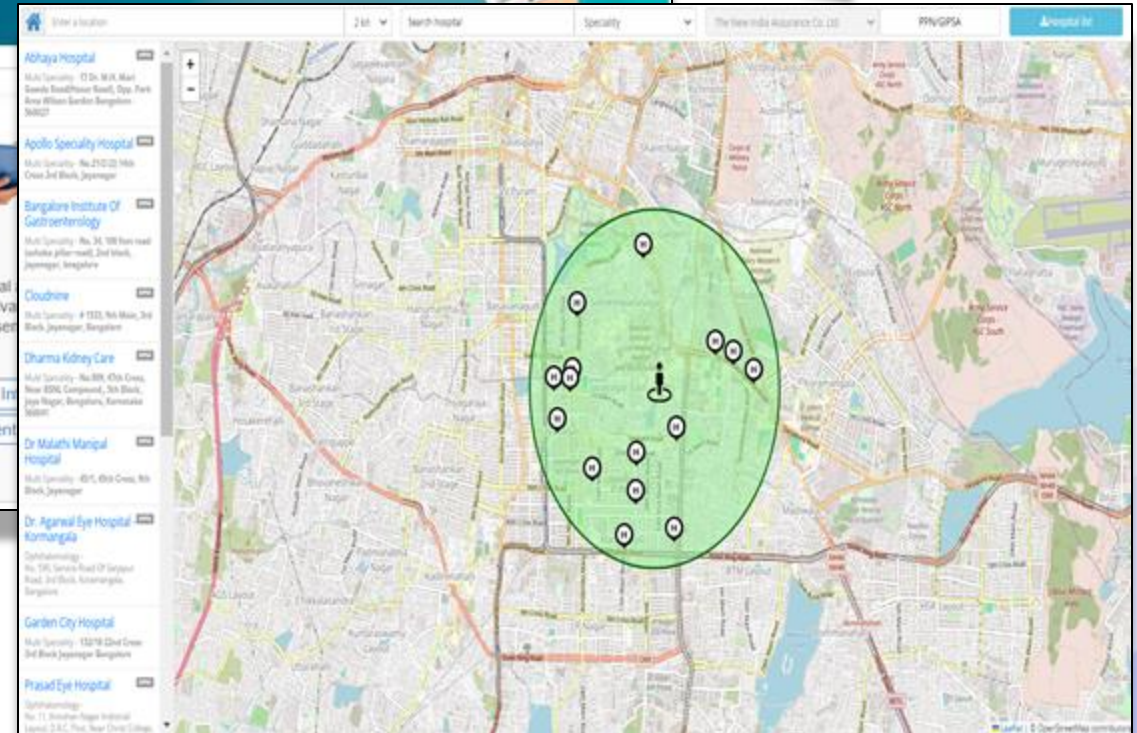
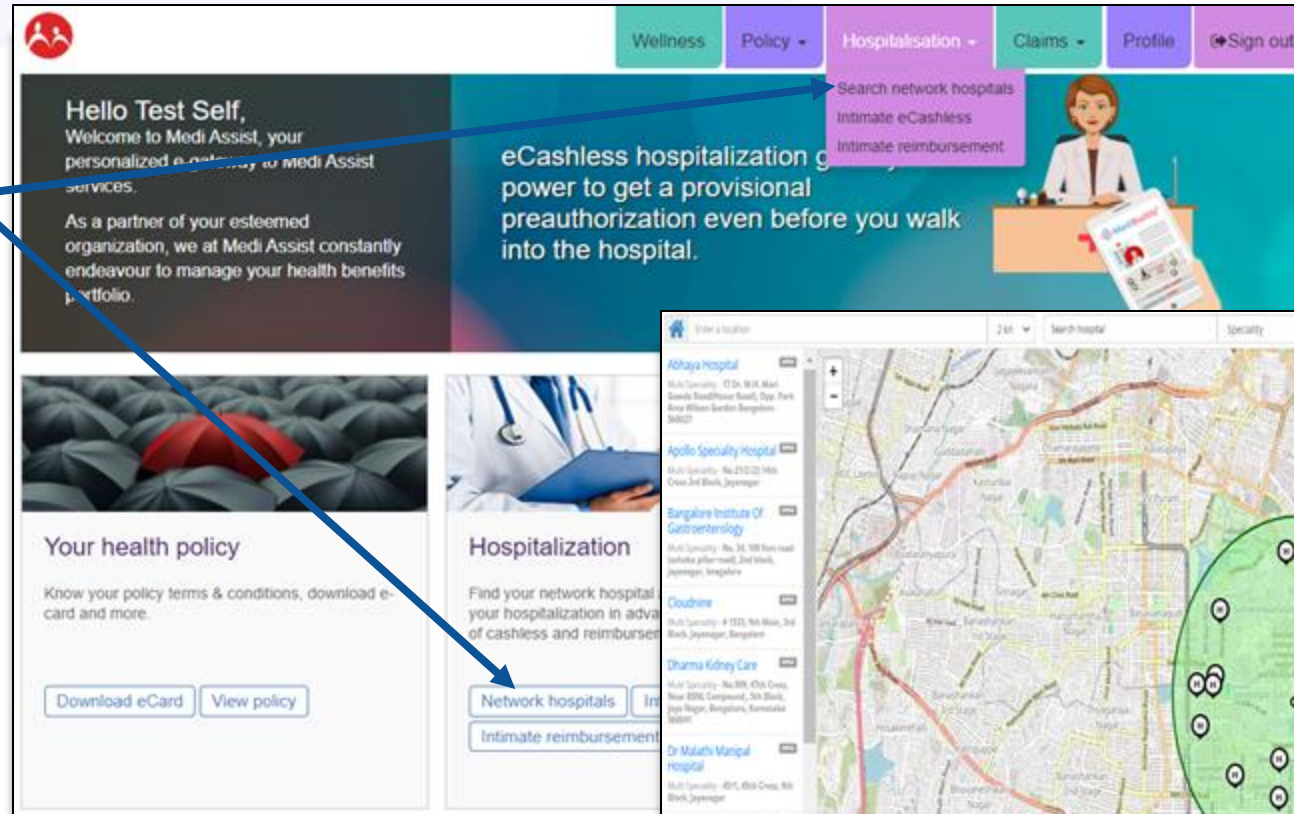
☐ I agree and declare the information provided above is correct.

[Submit](#)

How to search for Network Hospital

Click here to
Network
Hospital

'Network Hospitals' tab
search allows to search
Network Hospital around
you & also allow you
search network hospital
of desired location for
cashless facility.



eCashless hospitalization is provided by the insurance company where the policyholder can get admitted and undergo necessary treatment without paying the hospital directly and the eligible medical expenditure which is incurred is settled with the hospital by the insurance company directly.

Through Cashless you can pre-plan your hospitalization and also get the estimated cost of hospitalization at the comfort of your own home. No more waiting in long queues till the date of admission or worrying about the expected copay and expenses from your own pocket.

Hospitalization is better and hassle-free when planned through **Cashless** hospitalization.



Why eCashless?

An emergency cashless hospitalization is one in which the insured individual does not need to make upfront payments at network hospitals under unplanned circumstances.

One can arrange for eCashless mode by planning for hospitalization at least 72 hours in advance.



Benefits of eCashless hospitalization



Access to a reliable
healthcare ecosystem



Reduces direct financial burden
on the beneficiary



Fluctuations in medical
costs do not affect you



Covers all pre and post
hospitalization expenses



Provides cover for emergency
ambulance expenses, domiciliary
treatment, organ transplant, etc.



Easier to handle emergency
hospitalization when you travel

Intimate eCashless

How to avail Cashless Hospitalization at Network Hospital



Don't let the payment process bother you in times of Emergency.
Opt for Cashless Hospitalization and let your insurance handle the rest!

Avail cashless hospitalization in 4 easy steps:

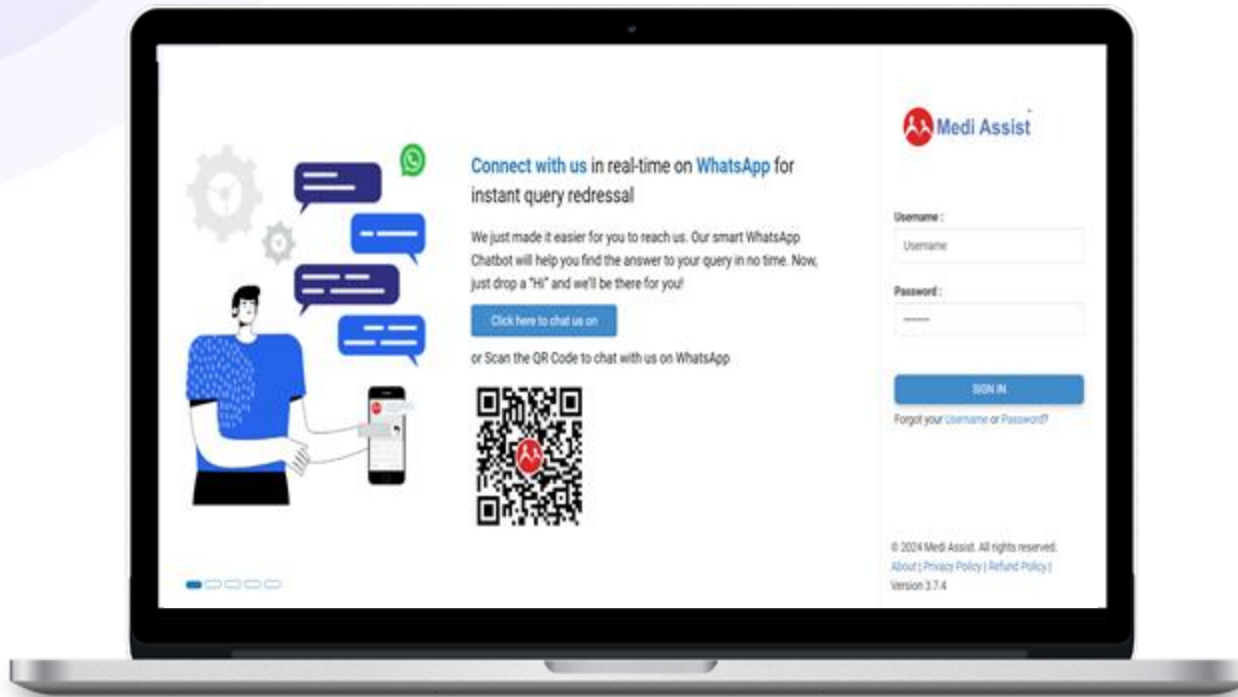
1. Fill a pre-authorization form at Network Hospital Insurance Desk and submit your E-card and patient ID proof.
2. Medi Assist (TPA) will process the pre-authorization, based on the policy terms and conditions.
3. Once approved, the TPA sends the Authorization letter with an approved amount for the treatment.
4. At the time of discharge, pay only for the non-payable expenses as the hospital settles the bills directly with TPA.



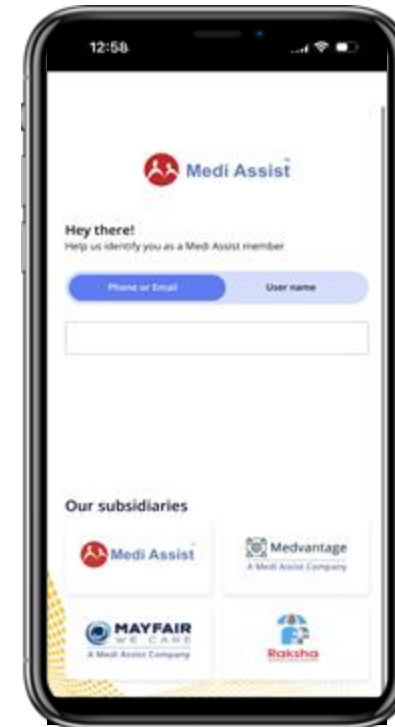
How to avail eCashless

eCashless hospitalization can be availed on the Medi Assist portal & MAven app

Through portal.mediassist.in



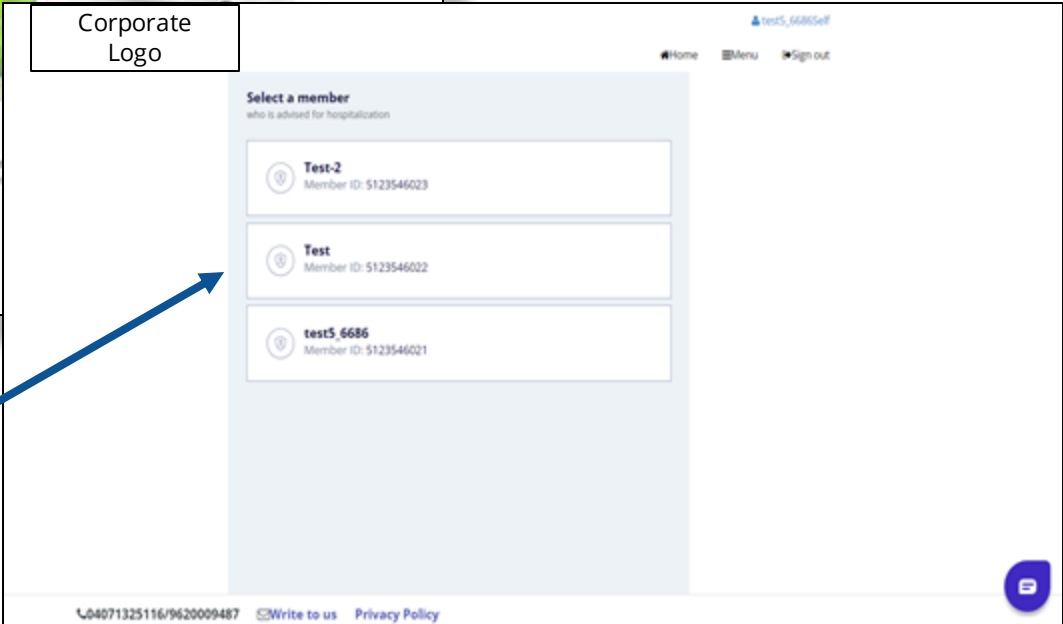
Through [Maven App](#)



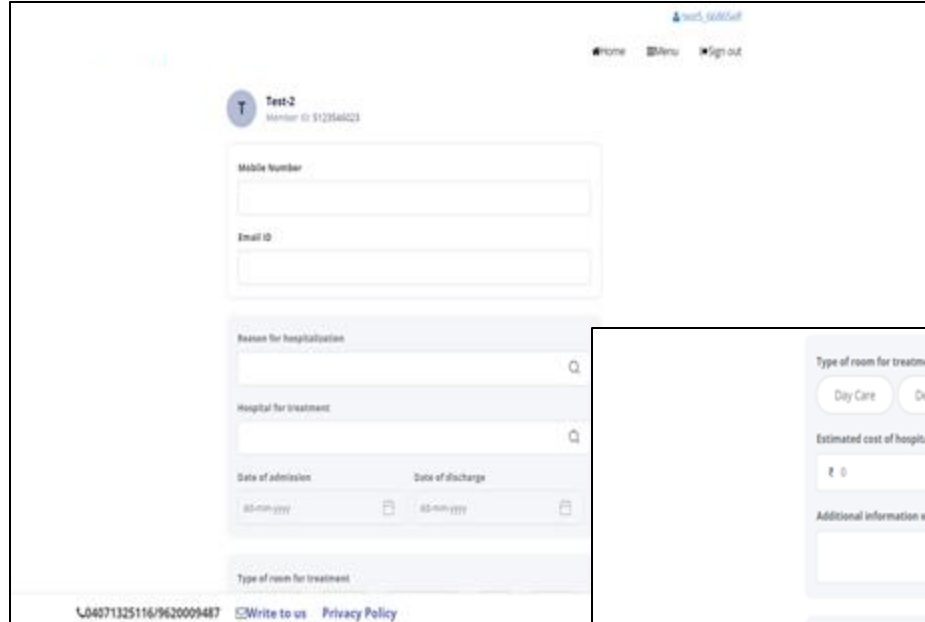
Click here to Intimate eCashless



Select the member to intimate eCashless



- **Fill the member details**
 - Mobile no.
 - Email id
 - Reason for hospitalization
 - Hospital for treatment
 - Date of admission
 - Date of discharge
- Select the room type
- Estimated cost of hospitalization
- Any additional information
- Upload the dr. prescription
- Click on tab intimate insurer



Test-2
Member ID: S12046023

Mobile Number

Email ID

Reason for hospitalization

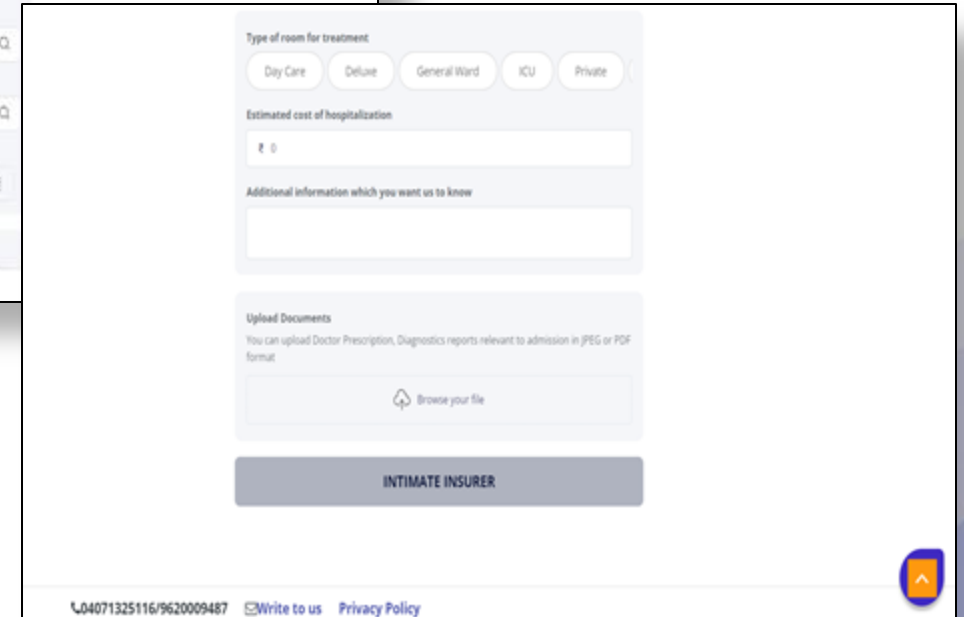
Hospital for treatment

Date of admission: 05-Nov-2022

Date of discharge: 05-Nov-2022

Type of room for treatment

04071325116/9620009487 Write to us Privacy Policy



Type of room for treatment: Day Care, Deluxe, General Ward, ICU, Private

Estimated cost of hospitalization: ₹ 0

Additional information which you want us to know

Upload Documents
You can upload Doctor Prescription, Diagnostics reports relevant to admission in JPEG or PDF format

Browse your file

INTIMATE INSURER

04071325116/9620009487 Write to us Privacy Policy

Documents required at the time of hospitalization:

- **Medi Assist Ecard**
- **Valid Government ID**



Documents required post discharge:

- After discharge, the hospital will send all the documents related to your claim to Medi Assist for settlement.
- At the time of discharge, check and sign the original bills and the discharge summary. Do carry home a copy of the signed bill, discharge summary and all your investigation reports for future reference

Intimate Reimbursement

What are Reimbursement Claims?



Submitting your claims is now easy and hassle free with Medi Assist online claims submission process. Our online claim submission process allows you to submit your claims through our Medi Assist portal and or MediBuddy mobile app to enable seamless submissions and faster processing of your claims.

Reimbursement claims mean you pay the hospital bills first and get them compensated from the insurance company at a later stage. You can opt for reimbursement claim option only if the hospital you or your family is getting treated in is not a network hospital.



What are the benefits of submitting claims online?

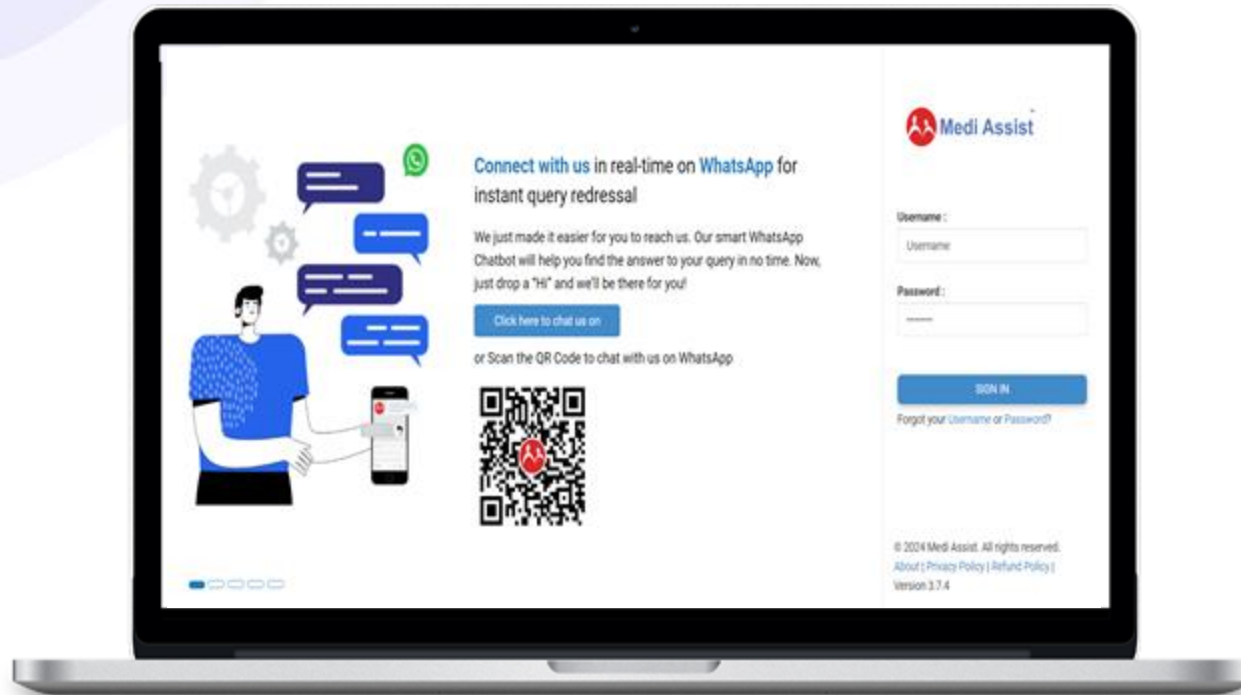
- Ensures speedy claim settlements
- Real time claim tracking
- Increase accuracy and cut down on claim rejections
- Reduced paperwork
- Decrease overhead costs and staff time
- Increased Security



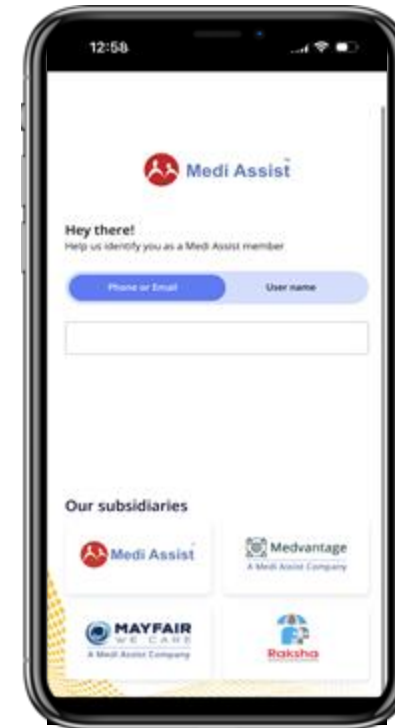
How to Intimate Reimbursement Online?

Reimbursement claims can be submitted on the Medi Assist portal & MAven app

Through portal.mediassist.in

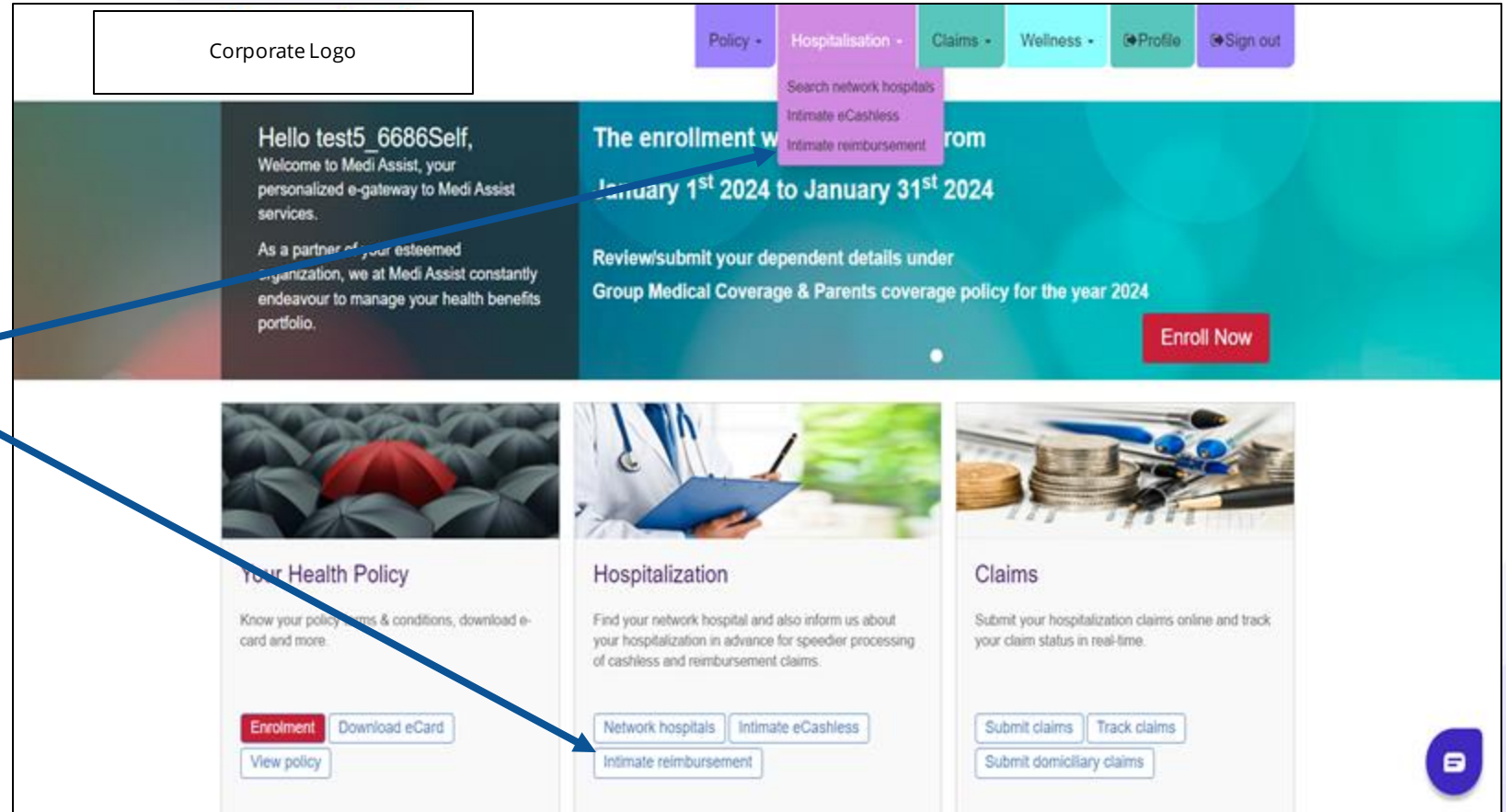


Through [Maven App](#)



How to Intimate Reimbursement

Click here to
intimate
reimbursement



The screenshot displays the Medi Assist user interface. At the top, a navigation bar includes a 'Corporate Logo' placeholder and a menu with 'Policy', 'Hospitalisation', 'Claims', 'Wellness', 'Profile', and 'Sign out'. The 'Hospitalisation' menu is open, showing options for 'Search network hospitals', 'Intimate eCashless', and 'Intimate reimbursement'. A blue arrow points from the 'Intimate reimbursement' option to the 'Intimate reimbursement' button in the 'Hospitalization' section of the dashboard. Another blue arrow points from the text 'Click here to intimate reimbursement' to the same button. The dashboard also features a welcome message for 'test5_6686Self', an enrollment banner for 2024, and three main sections: 'Your Health Policy', 'Hospitalization', and 'Claims', each with descriptive text and action buttons.

Corporate Logo

Policy • Hospitalisation • Claims • Wellness • Profile • Sign out

Search network hospitals
Intimate eCashless
Intimate reimbursement

Hello test5_6686Self,
Welcome to Medi Assist, your personalized e-gateway to Medi Assist services.
As a partner of your esteemed organization, we at Medi Assist constantly endeavour to manage your health benefits portfolio.

The enrollment window is open from January 1st 2024 to January 31st 2024
Review/submit your dependent details under Group Medical Coverage & Parents coverage policy for the year 2024
Enroll Now

Your Health Policy
Know your policy terms & conditions, download e-card and more.
Enrolment Download eCard View policy

Hospitalization
Find your network hospital and also inform us about your hospitalization in advance for speedier processing of cashless and reimbursement claims.
Network hospitals Intimate eCashless Intimate reimbursement

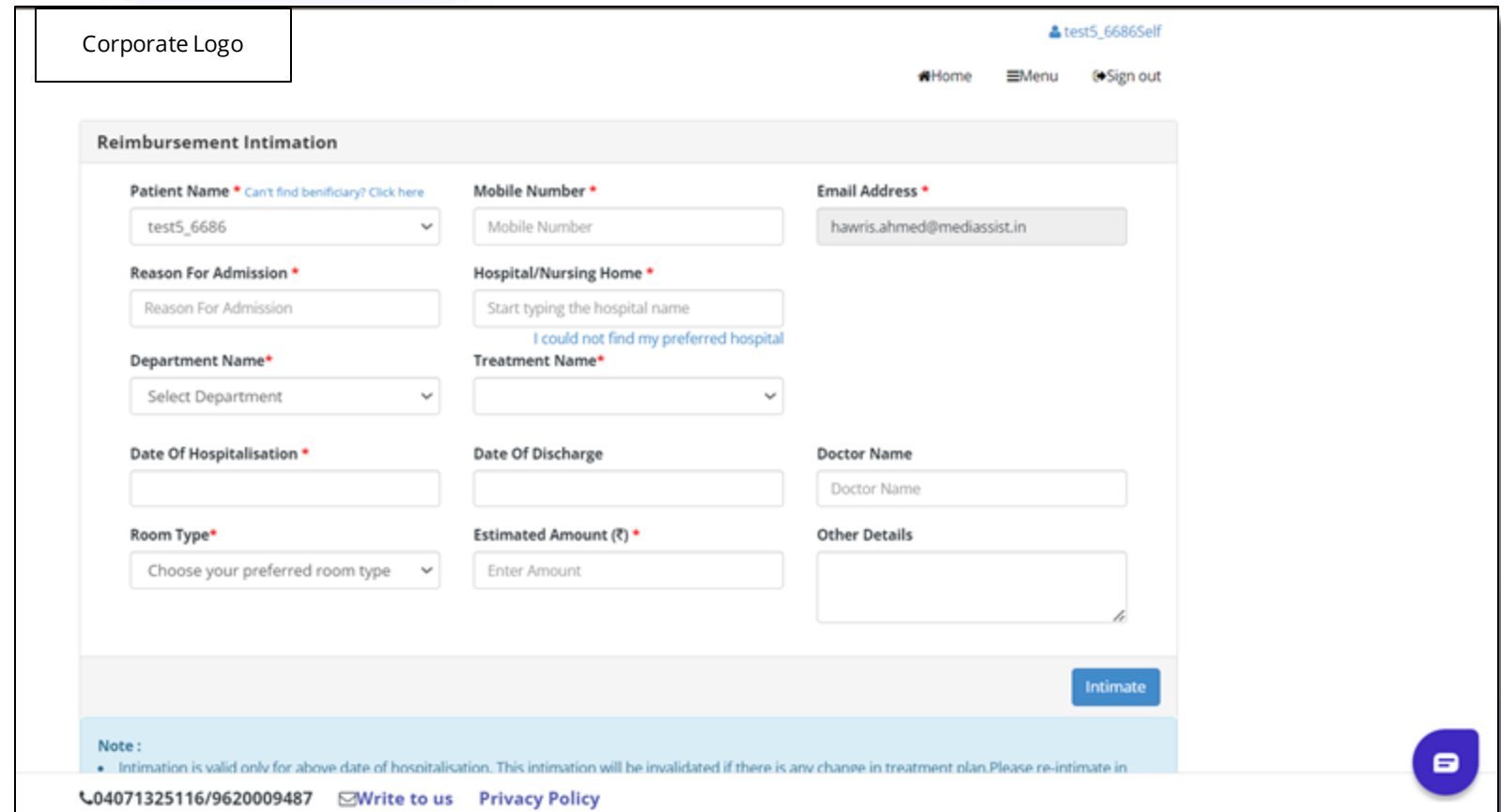
Claims
Submit your hospitalization claims online and track your claim status in real-time.
Submit claims Track claims Submit domiciliary claims

How to Intimate Reimbursement

Fill the following details

- Patient name
- Mobile no.
- Email address
- Reason for admission
- Hospital/Nursing home
- Department name
- Treatment name
- Date of Hospitalisation
- Date of discharge
- Doctor name
- Room type
- Estimated amount
- Other details

Click on Intimate Tab to initiate the reimbursement intimation



The screenshot shows the 'Reimbursement Intimation' form on the Medi Assist website. The form is titled 'Reimbursement Intimation' and is located under the 'Corporate Logo' header. The user is logged in as 'test5_6686Self'. The form contains the following fields:

- Patient Name ***: A dropdown menu with 'test5_6686' selected. A link 'Can't find beneficiary? Click here' is provided.
- Mobile Number ***: A text input field with the placeholder 'Mobile Number'.
- Email Address ***: A text input field with 'hawris.ahmed@mediassist.in' entered.
- Reason For Admission ***: A text input field with 'Reason For Admission' entered.
- Hospital/Nursing Home ***: A text input field with 'Start typing the hospital name' entered. A message 'I could not find my preferred hospital' is displayed below the field.
- Department Name ***: A dropdown menu with 'Select Department' selected.
- Treatment Name ***: A dropdown menu.
- Date Of Hospitalisation ***: A text input field.
- Date Of Discharge**: A text input field.
- Doctor Name**: A text input field with 'Doctor Name' entered.
- Room Type ***: A dropdown menu with 'Choose your preferred room type' selected.
- Estimated Amount (₹) ***: A text input field with 'Enter Amount' entered.
- Other Details**: A text input field.

A blue 'Intimate' button is located at the bottom right of the form. Below the form, a 'Note' section states: 'Intimation is valid only for above date of hospitalisation. This intimation will be invalidated if there is any change in treatment plan. Please re-intimate in'. The footer of the page includes the contact number '04071325116/9620009487', a 'Write to us' link, and a 'Privacy Policy' link.

Claims

Click here to Track your claims or to check history of the submitted claim

Corporate Logo

Policy

Hospitalisation

Claims

Wellness


Profile

Sign out

Hello test5_6686Self,
Welcome to Medi Assist, your personalized e-gateway to Medi Assist services
As a partner of your esteemed organization, we at Medi Assist constantly endeavour to manage your health benefits portfolio.

The enrollment window is open
January 1st 2024 to January 31st 2024
Review/submit your dependent details under Group Medical Coverage & Parents coverage policy for the year 2024

Enroll Now




Your Health Policy

Know your policy terms & conditions, download e-card and more.

Enrolment

Download eCard

View policy




Hospitalization

Find your network hospital and also inform us about your hospitalization in advance for speedier processing of cashless and reimbursement claims.

Network hospitals

Intimate eCashless

Intimate reimbursement



Claims

Submit your hospitalization claims online and track your claim status in real-time.

Submit claims

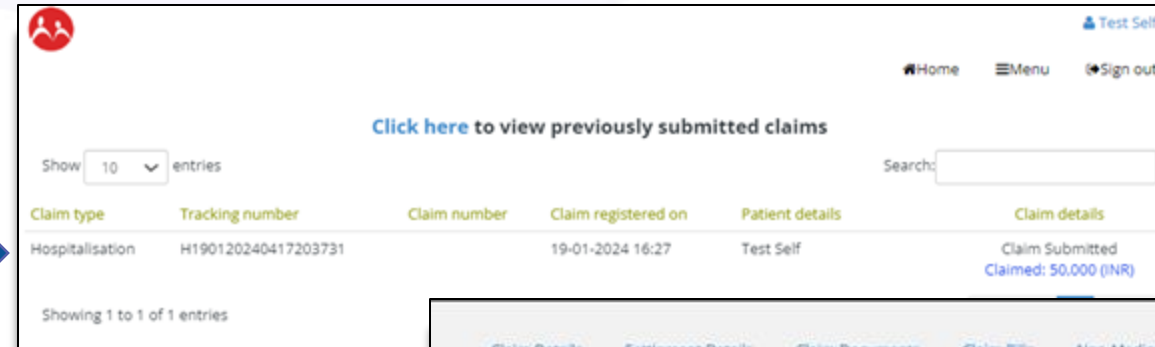
Track claims

Submit domiciliary claims

© 2024 Medi Assist

Claims - History & Tack claim

- Click here to see the history of the submitted claim



Test Self

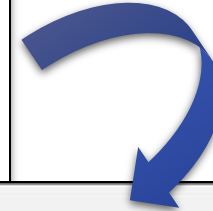
Home Menu Sign out

Click here to view previously submitted claims

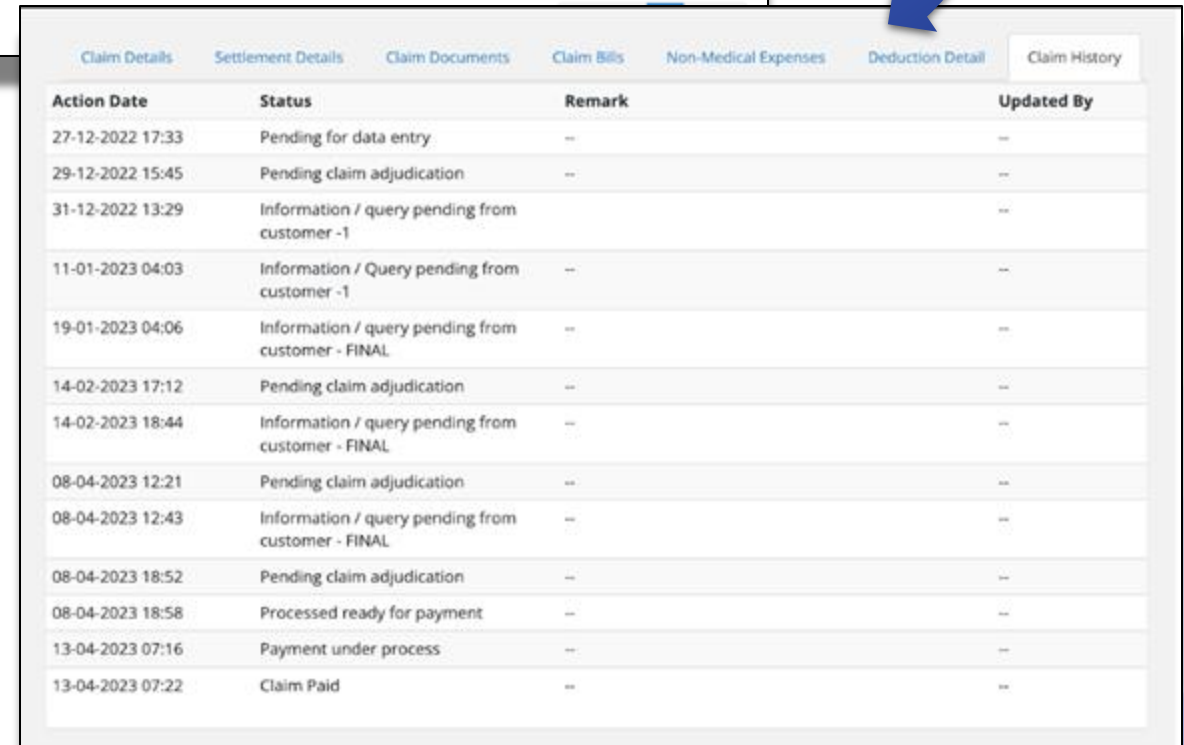
Show 10 entries Search:

Claim type	Tracking number	Claim number	Claim registered on	Patient details	Claim details
Hospitalisation	H190120240417203731		19-01-2024 16:27	Test Self	Claim Submitted Claimed: 50,000 (INR)

Showing 1 to 1 of 1 entries



- Members can see the list of all submitted claims
- Members can view the details of the submitted claims



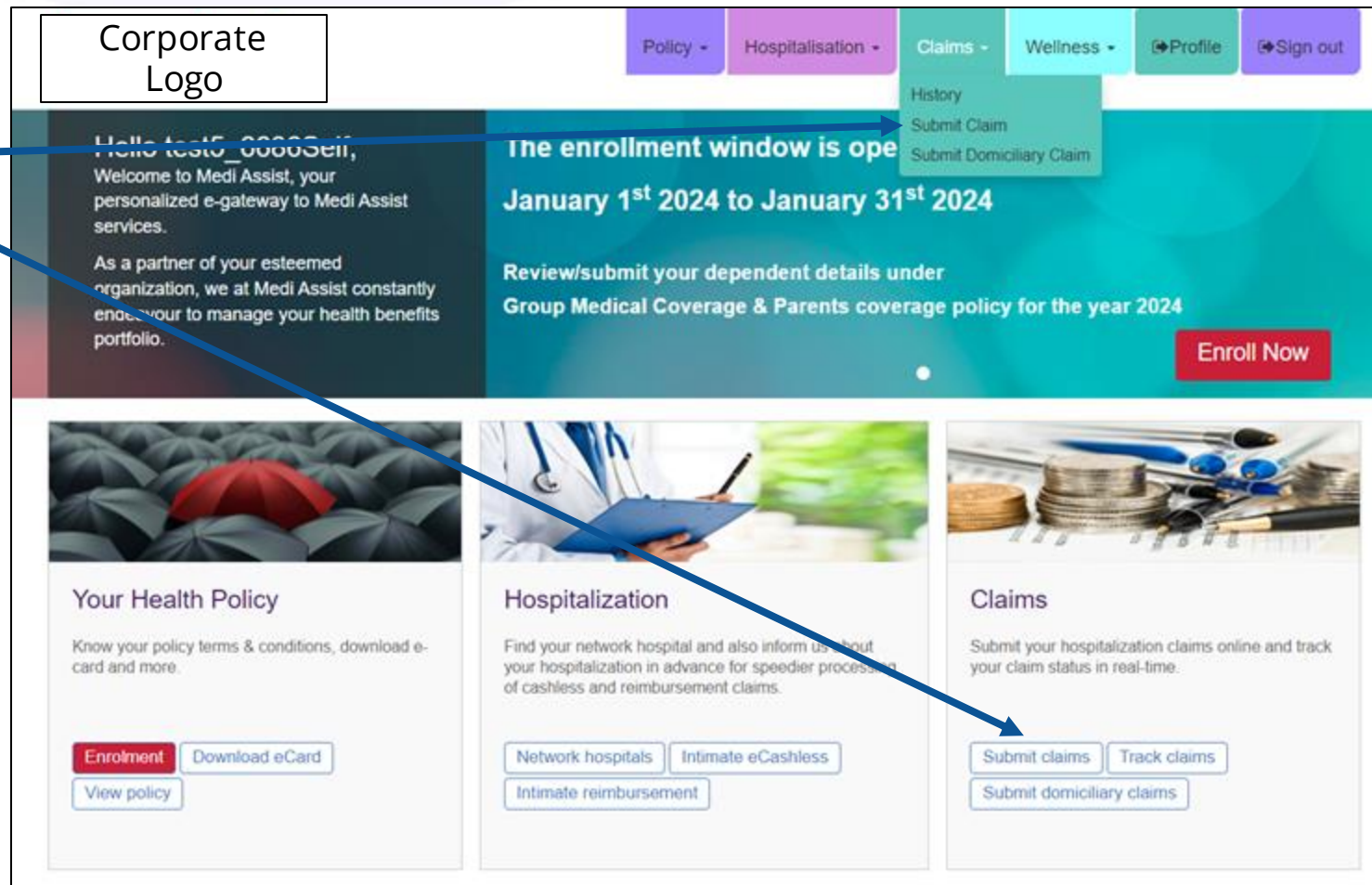
Action Date	Status	Remark	Updated By
27-12-2022 17:33	Pending for data entry	--	--
29-12-2022 15:45	Pending claim adjudication	--	--
31-12-2022 13:29	Information / query pending from customer -1	--	--
11-01-2023 04:03	Information / Query pending from customer -1	--	--
19-01-2023 04:06	Information / query pending from customer - FINAL	--	--
14-02-2023 17:12	Pending claim adjudication	--	--
14-02-2023 18:44	Information / query pending from customer - FINAL	--	--
08-04-2023 12:21	Pending claim adjudication	--	--
08-04-2023 12:43	Information / query pending from customer - FINAL	--	--
08-04-2023 18:52	Pending claim adjudication	--	--
08-04-2023 18:58	Processed ready for payment	--	--
13-04-2023 07:16	Payment under process	--	--
13-04-2023 07:22	Claim Paid	--	--

Note: If any of the documents submitted are invalid or missing, we will notify you immediately, and you can update them through the portal or app itself.

How to submit your claim.

Click here to submit claim

- Submit claim tab allows you to submit your hospitalization claims pertains to your core benefit plan.



The screenshot displays the Medi Assist web portal interface. At the top, there is a navigation bar with links for Policy, Hospitalisation, Claims, Wellness, Profile, and Sign out. The 'Claims' link is highlighted, and a dropdown menu is visible with options for History, Submit Claim, and Submit Domiciliary Claim. The main content area features a large banner for the enrollment window, which is open from January 1st 2024 to January 31st 2024. Below the banner, there are three main sections: Your Health Policy, Hospitalization, and Claims. The 'Claims' section includes a 'Submit claims' button, which is the target of the red arrow from the 'Click here to submit claim' text. The 'Hospitalization' section includes buttons for Network hospitals, Intimate eCashless, and Intimate reimbursement. The 'Your Health Policy' section includes buttons for Enrolment, Download eCard, and View policy.

Corporate Logo

Policy - Hospitalisation - **Claims -** Wellness - Profile - Sign out

Hello test5_0000Self,
Welcome to Medi Assist, your personalized e-gateway to Medi Assist services.

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The enrollment window is open
January 1st 2024 to January 31st 2024

Review/submit your dependent details under
Group Medical Coverage & Parents coverage policy for the year 2024

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Enrolment Download eCard
View policy

Hospitalization
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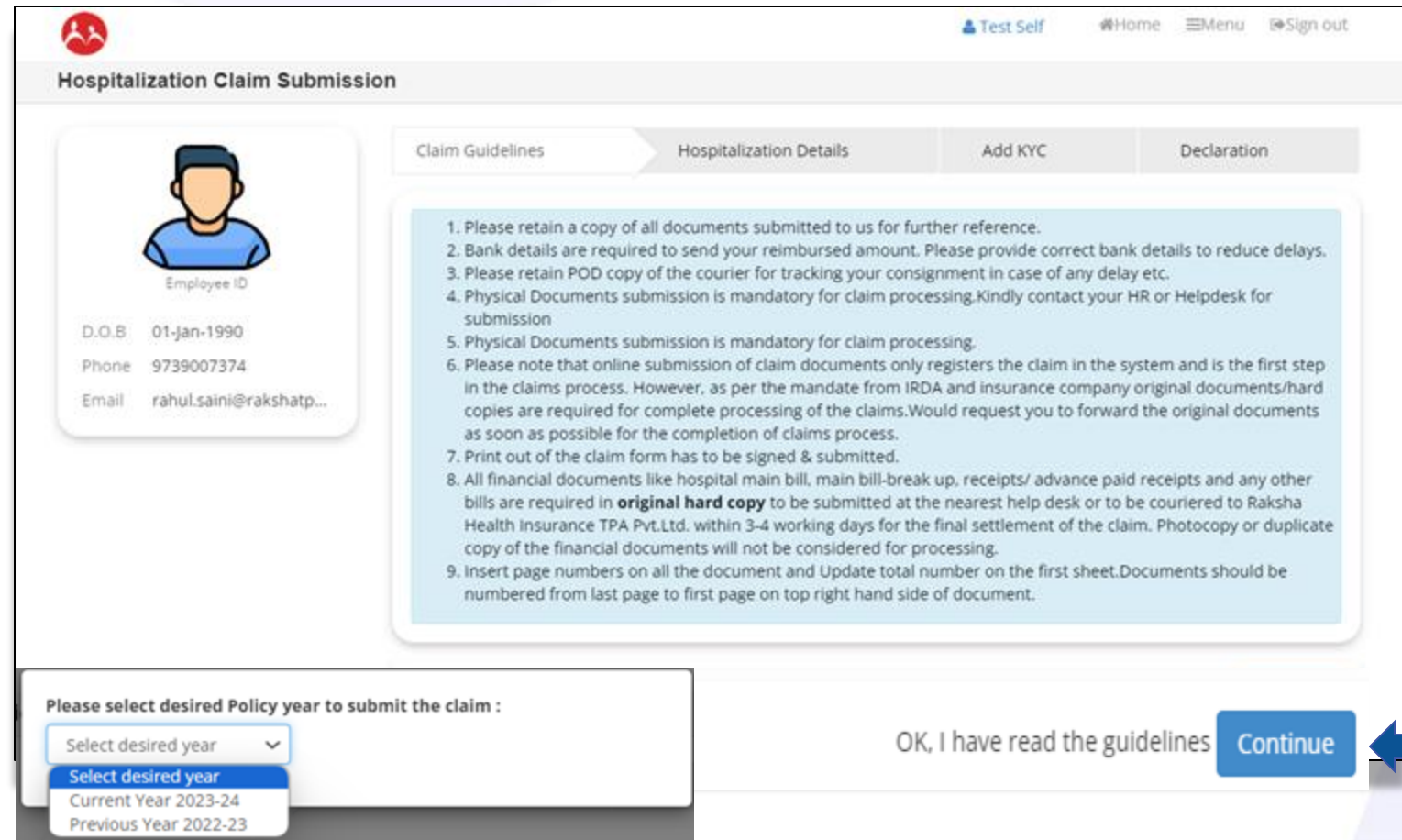
Network hospitals Intimate eCashless
Intimate reimbursement

Claims
Submit your hospitalization claims online and track your claim status in real-time.

Submit claims Track claims
Submit domiciliary claims

Claim Submission - Step 1

- Please read through the claim guidelines and click on continue.
- Select the desired policy year to submit the claim
- Hospitalization Claim Submission' tab allows you to submit hospitalization claims pertaining to your core benefit plan



The screenshot shows the 'Hospitalization Claim Submission' interface. At the top, there are navigation links: 'Test Self', 'Home', 'Menu', and 'Sign out'. The main title is 'Hospitalization Claim Submission'. Below this, there are four tabs: 'Claim Guidelines', 'Hospitalization Details', 'Add KYC', and 'Declaration'. The 'Claim Guidelines' tab is active, displaying a list of nine guidelines. To the left of the guidelines, there is a user profile section with a placeholder image and the following information: Employee ID, D.O.B (01-Jan-1990), Phone (9739007374), and Email (rahul.saini@rakshatp...). Below the guidelines, there is a dropdown menu labeled 'Please select desired Policy year to submit the claim :'. The dropdown is open, showing three options: 'Select desired year', 'Current Year 2023-24', and 'Previous Year 2022-23'. At the bottom right, there is a text input field with the placeholder 'OK, I have read the guidelines' and a blue 'Continue' button. A blue arrow points to the 'Continue' button.

Hospitalization Claim Submission

Test Self Home Menu Sign out

Claim Guidelines Hospitalization Details Add KYC Declaration

Employee ID

D.O.B 01-Jan-1990

Phone 9739007374

Email rahul.saini@rakshatp...

1. Please retain a copy of all documents submitted to us for further reference.
2. Bank details are required to send your reimbursed amount. Please provide correct bank details to reduce delays.
3. Please retain POD copy of the courier for tracking your consignment in case of any delay etc.
4. Physical Documents submission is mandatory for claim processing. Kindly contact your HR or Helpdesk for submission
5. Physical Documents submission is mandatory for claim processing.
6. Please note that online submission of claim documents only registers the claim in the system and is the first step in the claims process. However, as per the mandate from IRDA and insurance company original documents/hard copies are required for complete processing of the claims. Would request you to forward the original documents as soon as possible for the completion of claims process.
7. Print out of the claim form has to be signed & submitted.
8. All financial documents like hospital main bill, main bill-break up, receipts/ advance paid receipts and any other bills are required in **original hard copy** to be submitted at the nearest help desk or to be couriered to Raksha Health Insurance TPA Pvt.Ltd. within 3-4 working days for the final settlement of the claim. Photocopy or duplicate copy of the financial documents will not be considered for processing.
9. Insert page numbers on all the document and Update total number on the first sheet. Documents should be numbered from last page to first page on top right hand side of document.

Please select desired Policy year to submit the claim :

Select desired year

Select desired year

Current Year 2023-24

Previous Year 2022-23

OK, I have read the guidelines

Continue

Claim Submission - Step 2

- Select the beneficiary's name and verify your contact details

Hospitalization Claim Submission

Claim Guidelines | Hospitalization Details | Add KYC | Declaration

Select Beneficiary

Employee ID
D.O.B 01-Jan-1985
Phone 9663210014
Email prosenjit.sinha@med...

Always provide valid mobile number and email id

Bank details are required to send your reimbursed amount. Please provide correct bank details to reduce delays.

Contact Details All communications will be triggered to below given contact details

E-mail prosenjit.sinha@mediassist.in
Mobile Number 9663210014

- Verify the Bank details and tick the checkbox

Bank Details

HDFC BANK BTM LAYOUT

IFSC Code
HDFC0000885

Account Number
123456789

[View cheque leaf](#)

Account Holder Name
Prosenjit Sinha

Bank Details
NO 71, 1ST CROSS, BTM LAYOUT, 2ND STAGE,
NEXT TO KARANTH HOSPITAL BANGALORE

Note : Ensure that your bank account is valid and active for transactions.

☒ I declare that the above bank account is held in my name and the details are correct for the payment to be processed. I agree to take responsibility if payment is made to a wrong account or there is a delay in payment due to incorrect details provided by me.

- Select the date of admission and date of discharge
- Enter the Hospital Name
- Select the type of treatment from the dropdown under Treatment Name field
- Enter the amount you want to claim
- Click on continue

Claim Details

Hospital details

Date Of Admission*

07/07/2023

Date Of Discharge*

07/28/2023

Hospital

Apollo Clinic Chennai,Celebrity, T-95, Illrd Avenue, Annanagar, Chennai.,Tamil Nadu

Treatment Name*

Hypertension

Total Amount Claimed

15000

< Previous

Continue

- Under tab add KYC add ID proof (aadhar card, driving licence or any govt. ID)
- Complete your KYC and click on continue





Claim Guidelines

Hospitalization Details


Add KYC

Declaration

Your KYC documents are under review. We will get back to you in case we find something missing.

Name	Document Type	Document Number	File Name	Remove File
Test Prosenjit Sinha	ID PROOF	4736	 MB_KYC_IDProof_EMP ...	
Test Prosenjit Sinha	ADDRESS PROOF	4736	 MB_KYC_AddressProof...	

< Previous

 Continue

Claim Submission - Step 4



Tick the list of documents you require to upload

Claim Document Checklist

Other General Claims

- 1. Govt issued photo ID proof (PAN/Aadhaar/Passport/Voter ID/Driving License) of the patient and the employee* ☐
- 2. Detailed discharge summary with complete treatment, investigations, diagnosis, course in the hospital and discharge advice. ☐
- 3. Hospital main bill with complete breakup of the expenses incurred ☐
- 4. Pre-numbered cash paid receipts (amount receipt on the letterhead is not accepted) ☐
- 5. Lab investigation reports with mandatory prescription (with signature of the MD pathologist only) ** ☐
- 6. All medicine bills should be supported by valid prescription ☐
- 7. Proof of diagnosis: Investigations / X-RAY / CT / MRI, or any tests ☐
- 8. Accident case; MLC (Medico Legal certificate) at hospital or FIR ☐
- 9. Stickers and the invoice of implants / lens / stents used in surgeries ☐
- 10. Indoor Case Papers (ICP), hospital billing tariffs for non network hospitals ☐
- 11. Pre and post bill (only relevant to the admission claim) ☐
- 12. Any Other(Please Specify) ☐

Note:-

*PAN card and address proof of employee is mandatory for KYC process as per Insurer

** Mandated by the Supreme Court

Upload Documents

As per the Regulator it is mandatory to mark "Claimed for – The New India Assurance Co. Ltd under Interglobe Aviation Ltd policy" with your Signature & date on the face of the every original documents before uploading.


☐ I have marked every original document as "Claimed for – The New India Assurance Co. Ltd under Interglobe Aviation Ltd policy" with my signature & date.

Scan and upload the documents and tick the declaration checkbox to continue

(Upload all the scanned documents /bills/payment receipts/Prescriptions/Lab reports/Investigation reports related to the claim.)

Upload all the scanned documents /bills/payment receipts/Prescriptions/Lab reports/Investigation reports related to the claim.

Uploaded documents


Upload

- Maximum file size per file allowed: 20 MB
- Maximum files allowed per claim: 15 files
- Allowed file types:
.jpg, .jpeg, .tiff, .png, .gif, .bmp, .pdf, .doc(x)

Declaration

☒

I have attached the required soft copy of the document. Once the restrictions are lifted & situation gets under control. I will be in position to deliver the original documents to you. Request you to consider the same & process the claim on submitted documents. I also declare that these documents will not be used for claiming under any other policy and shall submit the same as and when it is called for or immediately after COVID 19 restriction are eased or lifted whichever is earlier. If any information & documents found to be misused by me in any manner the recovery of the claim amount, if any, will be borne by me.

Claim Submission - Step 4 continued..



- Go through the self declaration form & click on agree

Self declaration form

I Mr/Ms. **Test Self** declare that all the claim details/documents submitted in the scans/on portal for policy number: is as per original claim documents. The original documents shall be retained by me and shall be submitted to the insurance company/TPA as and when required, also I declare that I shall not be claiming the same benefit and amount from any other Insurance company/organization.

Close I agree

- Check the claim form thoroughly & click on submit to submit the claim form



Submit Cancel

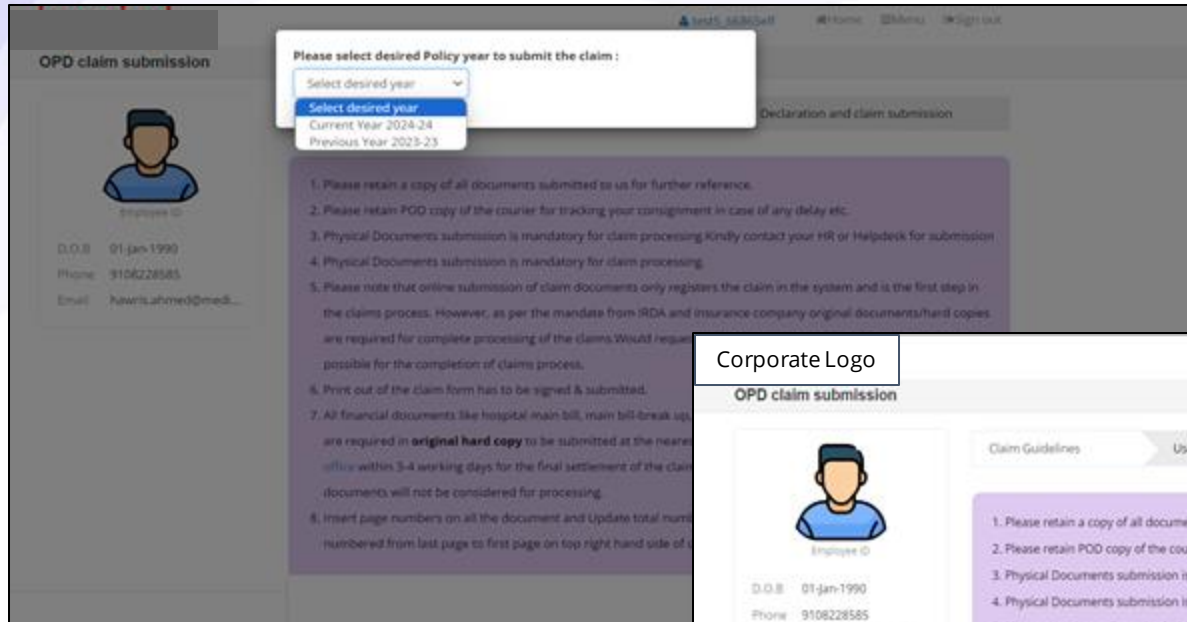
Claim Request Summary

PART A* to 'CLAIM FORM FOR HEALTH INSURANCE POLICIES OTHER THAN TRAVEL AND PERSONAL ACCIDENT - PART A TO BE FILLED BY THE INSURED'

DETAILS OF PRIMARY INSURED:

Policy No:	9300000342305000000001_COVID	Sl. No/ Certificate No:		
Company/ TPA ID No:		INTERGLOBE AVIATION LTD		
Name:	TEST SELF	EmpID:	TEST1	MAID: 4055047156
Address:				
City:	HYDERABAD	State:	ANDHRA PRADESH	
Pin Code:	500058	Phone No:	9739007374	
Email ID:	RAHUL.SAINI@RAKSHATPA.COM			

How to Submit Domiciliary Claim



OPD claim submission

Please select desired Policy year to submit the claim :

- Select desired year
- Select desired year**
- Current Year 2024-24
- Previous Year 2023-23

Employee ID

D.O.B: 01-Jan-1990

Phone: 9106228585

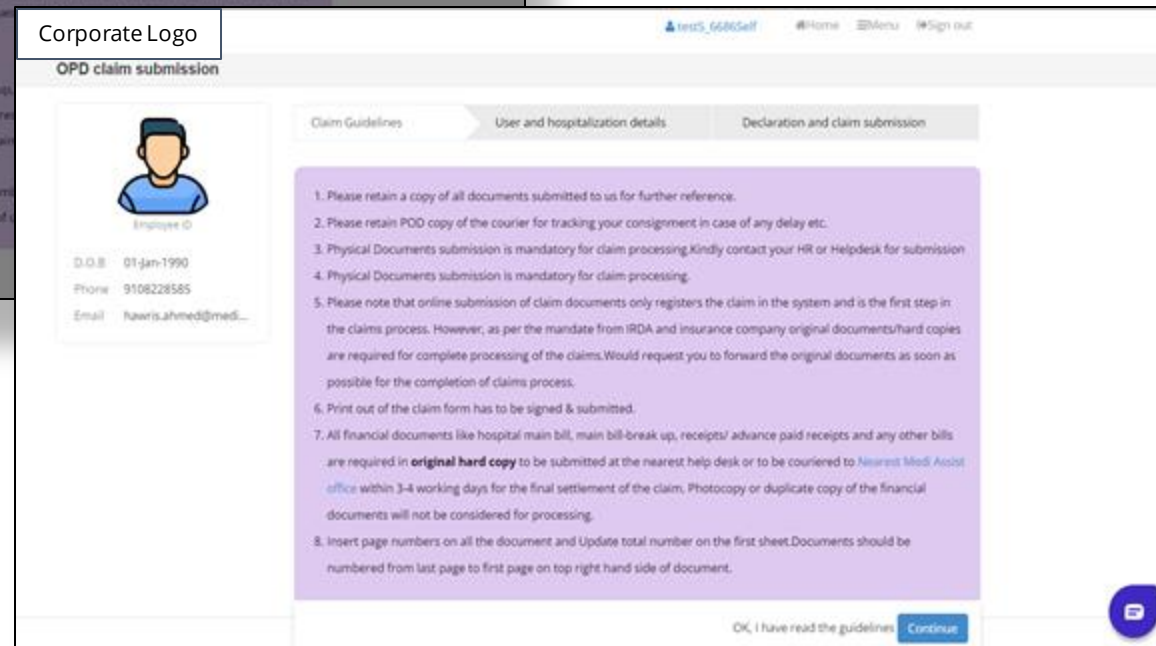
Email: hawis.ahmed@medi...

Declaration and claim submission

1. Please retain a copy of all documents submitted to us for further reference.
2. Please retain POD copy of the courier for tracking your consignment in case of any delay etc.
3. Physical Documents submission is mandatory for claim processing. Kindly contact your HR or Helpdesk for submission.
4. Physical Documents submission is mandatory for claim processing.
5. Please note that online submission of claim documents only registers the claim in the system and is the first step in the claims process. However, as per the mandate from IRDA and insurance company original documents/hard copies are required for complete processing of the claims. Would request you to forward the original documents as soon as possible for the completion of claims process.
6. Print out of the claim form has to be signed & submitted.
7. All financial documents like hospital main bill, main bill-break up, receipts/ advance paid receipts and any other bills are required in **original hard copy** to be submitted at the nearest office within 3-4 working days for the final settlement of the claim. Photocopy or duplicate copy of the financial documents will not be considered for processing.
8. Insert page numbers on all the document and Update total number on the first sheet. Documents should be numbered from last page to first page on top right hand side of document.

- To submit the domiciliary claim
- Select the year of policy

- Read the claim guidelines
- Click on the continue tab



Corporate Logo

OPD claim submission

test5_6686Self Home Menu Sign out

Claim Guidelines User and hospitalization details Declaration and claim submission

Employee ID

D.O.B: 01-Jan-1990

Phone: 9106228585

Email: hawis.ahmed@medi...

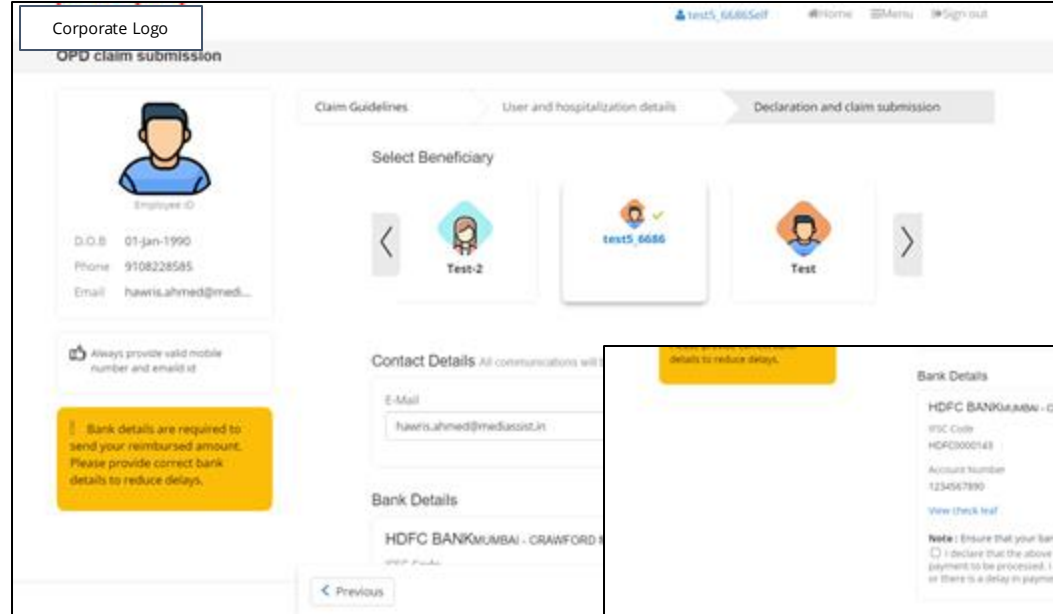
1. Please retain a copy of all documents submitted to us for further reference.
2. Please retain POD copy of the courier for tracking your consignment in case of any delay etc.
3. Physical Documents submission is mandatory for claim processing. Kindly contact your HR or Helpdesk for submission.
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6. Print out of the claim form has to be signed & submitted.
7. All financial documents like hospital main bill, main bill-break up, receipts/ advance paid receipts and any other bills are required in **original hard copy** to be submitted at the nearest help desk or to be couriered to [Nearest Medi Assist office](#) within 3-4 working days for the final settlement of the claim. Photocopy or duplicate copy of the financial documents will not be considered for processing.
8. Insert page numbers on all the document and Update total number on the first sheet. Documents should be numbered from last page to first page on top right hand side of document.

OK, I have read the guidelines Continue

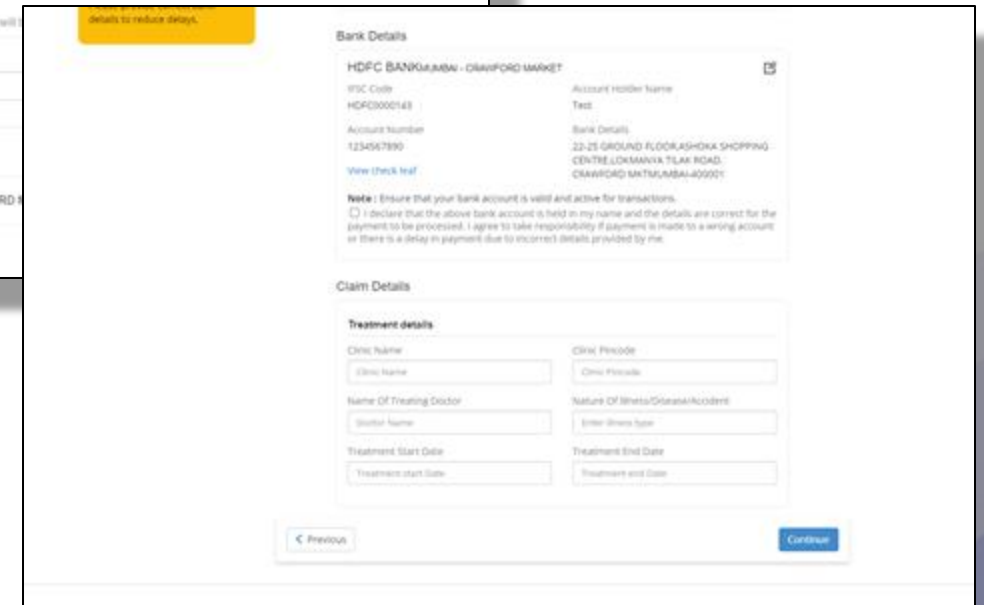
How to Submit Domiciliary Claim

Enter the details -

- Contact details
- Bank details
- Check the details & the note select the check box
- Claim details
- Treatment details
 - Clinic name
 - Clinic pincode
 - Name of doctor
 - Nature of illness/disease /accident
 - Treatment start date
 - Treatment end date



The screenshot shows the 'OPD claim submission' form at the 'Select Beneficiary' step. On the left, there is a 'Corporate Logo' field and a user profile card for 'test5_6686Self' with details: D.O.B: 01-Jan-1990, Phone: 9108228585, Email: hawis.ahmed@medi... Below this is a note: 'Always provide valid mobile number and email id'. In the center, there are three beneficiary selection cards: 'Test-2', 'test5_6686' (which is selected with a checkmark), and 'Test'. On the right, there are tabs for 'Claim Guidelines', 'User and hospitalization details', and 'Declaration and claim submission'. At the bottom, there are fields for 'Contact Details' (E-Mail: hawis.ahmed@mediassist.in) and 'Bank Details' (HDFC BANK MUMBAI - CRAWFORD MARKET).

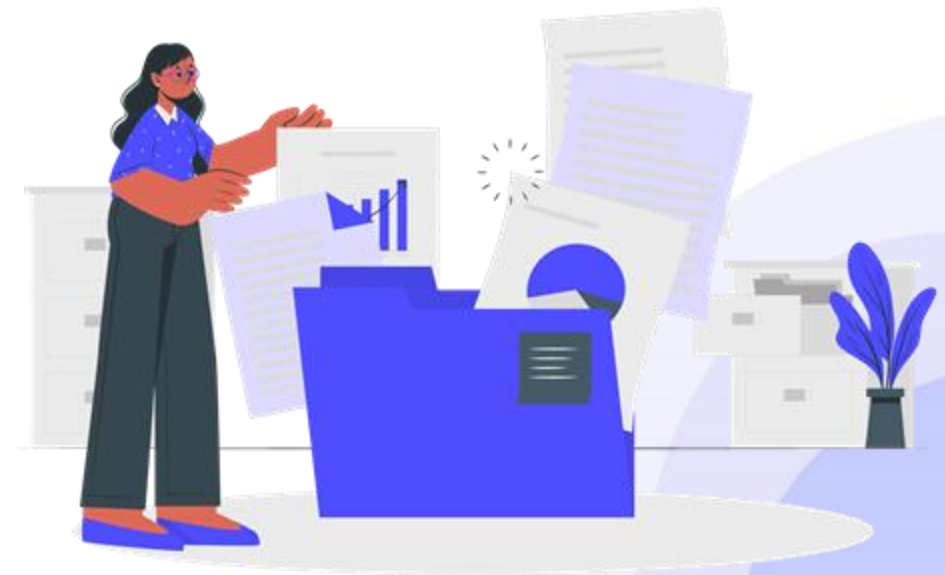


The screenshot shows the 'OPD claim submission' form at the 'Bank Details' and 'Claim Details' steps. The 'Bank Details' section includes fields for 'HDFC BANK MUMBAI - CRAWFORD MARKET', 'IFSC Code: HDFC0001483', 'Account Number: 1234567890', and 'Account holder name: Test'. There is a 'Note' section with a declaration checkbox. The 'Claim Details' section includes fields for 'Clinic Name', 'Clinic Pincode', 'Name Of Treating Doctor', 'Nature Of Illness/Disease/Accident', 'Treatment Start Date', and 'Treatment End Date'. Navigation buttons for '< Previous' and 'Continue' are at the bottom.

Documents required

Here is the document checklist that should be kept handy before submitting your claims online:

- Hospital final bill with item- and amount-wise breakup. [View Sample](#)
- Pre-numbered receipts for all payments made. [View Sample](#)
- Discharge summary and investigation reports. [View Sample](#)
- Medicine bills with prescriptions. [View Sample](#)
- Copy of Medi Assist ID/photo ID.
- Cancelled cheque leaf
- Implant sticker and purchase invoice (if applicable)
- Medico-legal certificate / FIR / diagnosis report (if applicable)
- Signed claim form specifying total number of documents
- All documents to be numbered from the last page to first page



Reimbursement claims may be filed in case of Hospitalization at a non-network hospital in some cases, you can claim a reimbursement following the steps mentioned below:

- Intimate us about your impending claim.
- Present your Medi Assist ecard at the hospital during admission along with any other legally accepted identity card.

Note: You can log into your Medi Assist online portal and click Generate E-Card to instantly generate and print out an e-card for any beneficiary.

- Submit your reimbursement claim online within 7 days from date of discharge.
- Send the original documents to Medi Assist within 30 days from the date of discharge from hospital.
- Track your claim in real-time.
- The medical team at Medi Assist processes the claim.





- In case of approval, the amount is reimbursed either via NEFT or cheque (sent to the address mentioned in your policy).
- In case your claim is denied, the denial letter is sent to you by courier / post / email quoting the reason for denial of your claim

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www.mediassist.in contact@mediassist.in

Bangalore: **080 2206 9449**

Address:

IBC Knowledge Park, Tower D, 4th Floor, Bannerghatta Main Rd, 4/1,
Bengaluru, Karnataka 560029

Annexure

1. What are the 2 types of hospitalization?

Hospitalization can be of two types:

- **Planned Hospitalization:** This happens when you have ample time to plan your admission to the hospital. For example, if your doctor advises a surgery for hernia anytime in the next few weeks, you have time to plan your hospitalization.
- **Emergency Hospitalization:** This happens typically in case of emergencies, such as a road traffic accident. One cannot plan for such hospitalization.

2. What is a cashless claim?

The essence of cashless hospitalization is that the insured need not make an upfront payment to the hospital at the time of admission. You may not have any out-of-pocket expenses towards hospitalization in this scenario. Cashless hospitalization can be availed only at a Medi Assist network hospital and upon approval of your pre-authorization application.



4. In case the preauthorization of ecashless is not approved, what should we do?

1. In case, for whatever reason, the preauthorization request cannot be approved, a letter denying pre authorization will be sent to the hospital. In this case, you will have to settle the hospital bill in full by yourself. You must note that denial of a preauthorization request must not be construed as denial of treatment or denial of coverage. You can go ahead with the treatment, settle the hospital bills and submit the claim for a possible reimbursement on the app or the web portal. After discharge, you must send/submit all the documents related to your claim to nearest branch of Medi Assist India TPA Private Limited.
2. The medical team at Medi Assist will verify your medical document and determine the admissibility of your claim based on your policy terms and condition. In case coverage is available, Medi Assist will issue a pre authorization for cashless hospitalization for a specified amount depending on the disease, treatment, how much you are insured for, etc.



3. Is there any time limit to submit the pre-authorization request?

In case of an emergency or unplanned admission, the hospital must send the pre-authorization request to Medi Assist within 24 hours from the time of admission. In case of a planned hospitalization, it is prudent to send the preauthorization request to Medi Assist at least 72 hours prior to the admission date. This will ensure a hassle-free admission procedure for you at the hospital.

5. Will I have out of pocket expenses?

The hospital will ask you to pay for all the non-medical expenses in your bill. You will also have to pay all your pre-hospitalization and post-hospitalization expenses. These can be claimed only after the settlement of the main hospitalization claim.

