

Domiciliary Claim Guidelines

Important guidelines for processing of HIS Claims

- Raise separate Claim requests for each illness.
- Staple the Claim Form along with supporting documents (in case of multiple claims, staple them separately).
- Write your employee ID and Domiciliary Claim on the envelope.
- Retain the scanned/photo copies of all the documents to produce whenever requested.
- Original documents along with the duly filled Claim Form needs to be submitted through internal/external courier or handover to the TPA helpdesk team.
- Submit the Claim documents within 24 hours from the date you selected to submit the documents on your claim form; else the request will be rejected.

Domiciliary Claim

Domiciliary treatment covers all illnesses (subject to policy conditions) that do not require hospitalisation including treatments taken either from a physician or at the OPD in a hospital.

All Domiciliary claims should be raised within 90 days from the Date of Expense. 90 days' timeline is not applicable for the expenses incurred during the last quarter of the financial year.

Following are the mandatory documents required for processing the Domiciliary Claims:

- Duly filled and signed Claim Form as generated through the portal.
- Doctor's prescription with the nature and duration of illness. **No payment details should be mentioned in this document. Note:** Prescriptions without a validity date will be considered valid only for that particular financial year i.e. 01 April to 31 March.
- Original pre-numbered bills from the doctor's official receipt book, with pre-printed doctor's information and receipt number. **Blank document with the doctor's signature and stamp will not be considered as a receipt proof. Note:** Doctor's prescriptions/ letter head bills will not be accepted by the insurance company.
- Original medical bills or receipt along with prescriptions for the medicines purchased from the pharmacy stores. **Note:** The bills or receipts produced should be within the policy period.
- Original investigations/ labs/ test reports (wherever applicable) from hospitals or from other lab or diagnostic centres during and before or after the hospitalisation.

Following are the mandatory documents required for dental illness coverage under Domiciliary Claim:

In addition to the above documents, following documents are mandatory for raising claim request for dental expenses:

- The bills or receipts for expenses incurred for extraction, fillings, medicines, consultants' fees, and X-rays. (Apart from the mentioned treatments, no other treatments are payable under Domiciliary dental coverage) **Note:** It is mandatory to submit the X-ray film (if any) and day-to-day case summary (day-wise treatment undergone during the entire cycle of the treatment) in case of Root Canal or other dental treatment where multiple visits or sittings are being carried out.

Kindly ensure to send the claim form & supporting documents only at the address mentioned by you in the claim form, for more details refer the Contact Matrix available on the portal - Home page.

There are certain exclusions in HIS where NO benefits are payable. The list of exclusions enumerated in the policy document is only indicative and not exhaustive.

These Guidelines should be read in conjunction with the policy document and for more details on the policy; you may refer the policy document and FAQs on Health Insurance Scheme, available at:

Ultimatix -> Global HR -> My HR on KNOWMAX -> India > Health Safety & Wellness > Health & Insurance