



Medi Assist

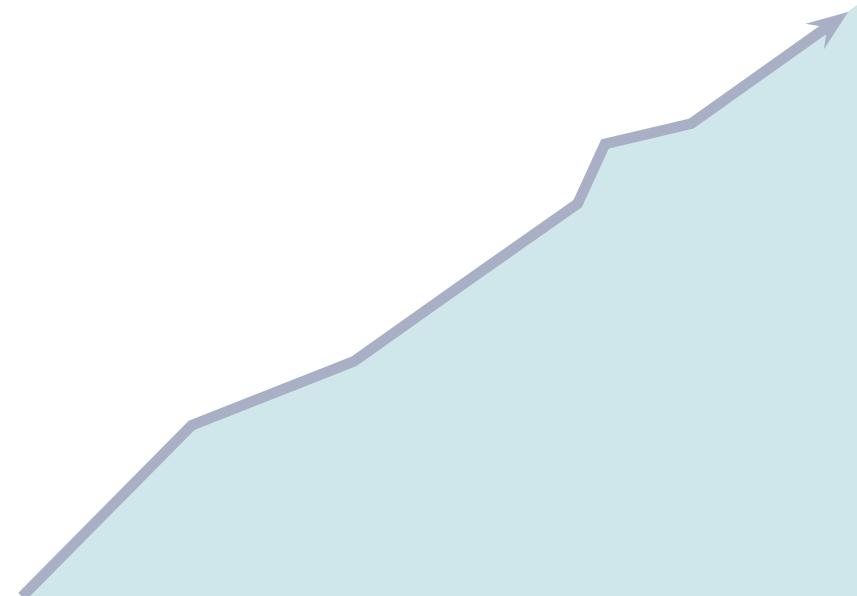
Health Insurance Ready Reckoner



INTRODUCTION


Insurance, claims, reimbursements, hospitalization—none of us really look forward to these. And usually, you'd prefer to not have the need to know anything about them. As much as we would love you to never need this information, we've seen from our experience that just spending a few minutes to go through some important terminologies, and keeping some important forms handy, helps reduce the stress related to hospitalization when the need arises.

This ready reckoner is our attempt to give you all the basic information that you must know and understand about hospitalization, health insurance and claims management. Please save this ready reckoner for future use. And, hopefully, you will not really need any of these much, except for staying healthy.




MEDI ASSIST AND YOU

TPA? Who?



Hospitalization is like a double whammy. First it's the suffering caused by the illness. And then there is the pain caused by my insurance company.



Oh, that was in the past. Hasn't Medi Assist been appointed as the TPA by your organization?

Rest assured. You're in good hands. All you need to worry about is your recovery. Medi Assist will handle everything else for you.

Medi Assist has been appointed as the Third Party Administrator (TPA) for health insurance benefits management by your organization. As a privileged member of the Medi Assist family, you are now eligible for hassle-free health insurance claims administration.

What this really means for you is that should you or any of your family members covered under your insurance policy, we handle all the paperwork related to your claim; wherever possible, we give you the benefit of cashless hospitalization; and we ensure that your claim is settled at the earliest.

Remember that TPAs are not the same as insurers. Medi Assist administers your claims as per the terms and conditions laid down by our insurance policy.

TPAs DO NOT:

Decide who is covered and what ailments / procedures are covered under your policy. Your insurance plan dictates these.

Control your policy terms and conditions. Your insurance policy is developed by your insurer.

Decide admissible / non-admissible expenses. Your insurance policy dictates that.

Approve / disapprove claim without reason. TPAs process claims strictly based on your policy terms and conditions.

DO'S AND DON'TS

Do's

- Verify that you have chosen a TPA Network Hospital so that you can avail of cashless facility.
- Carry your Medi Assist ID card at the time of admission.
- Carry an additional photo ID of the patient. (Aadhar card, PAN card, Passport, Driving Licence, Voter id, etc.)
- Fill up the pre-authorization form jointly with your treating doctor. Enter the form in full to ensure speedy processing of the request.
- Sign the pre-authorization form noting the estimate of treatment cost.
- Before discharge:
 - Collect the original cash paid receipt
 - Sign the final bill and discharge summary
 - Pay all non-medical and other disallowed expenses to the hospital directly.

Don'ts

- Do not disclose your policy sum insured limits to the hospital.
- Do not occupy higher category rooms as this will increase your overall cost of treatment. This, in turn, will impact the sum insured that would be available for future claims.
- Do not share your ID cards with strangers.
- Do not get admitted for evaluation purposes only.

Please note that denial of pre-authorization request is not to be construed as denial of treatment or denial of coverage. You can go ahead with the treatment, settle the amount to the hospital as per bills and submit the claim for possible reimbursement after discharge.

HOSPITALIZATION, EXPENSES AND CLAIMS

Things you MUST know

Did you know that you can completely eliminate out of pocket expenses by getting preauthorization for cashless hospitalization?



And did you know that while some expenses may be covered under your policy, some others may not?



It never hurts to know the basics of hospitalization, expenses and claims. It just takes a few minutes.

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.

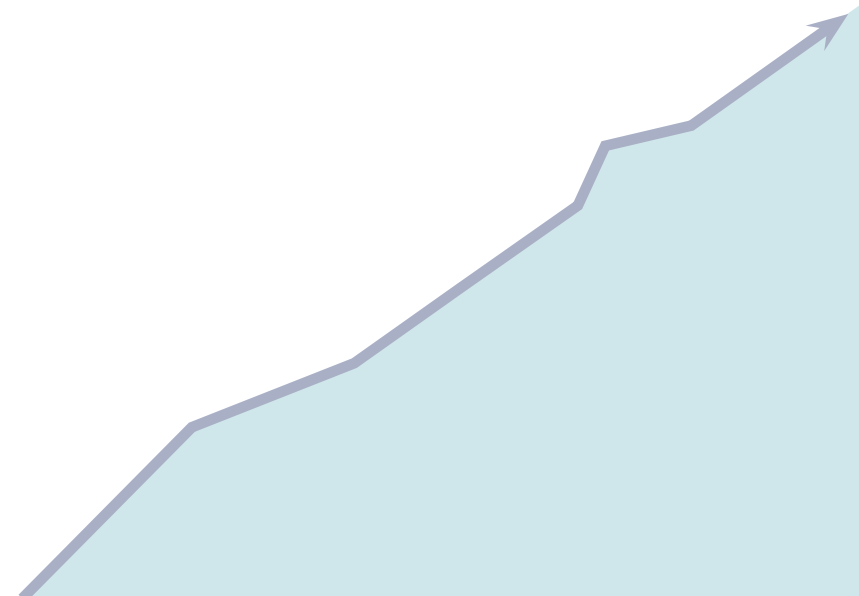
Emergency Hospitalization: This happens typically in case of emergencies, such as a road traffic accident. One cannot plan for such hospitalization.

Hospitalization Expenses

Expenses associated with hospitalization can be classified as follows:

- **Pre-hospitalization expenses:** When you're unwell, you will most likely consult a physician first, who gets relevant investigations done before advising hospitalization. Such medical expenses incurred before hospitalization are called pre-hospitalization expenses.
- **Hospitalization expenses:** All expenses incurred as part of your hospital stay as an in-patient can be termed as hospitalization expenses.
- **Post-hospitalization expenses:** Some part of your treatment may extend beyond your hospitalization. It may involve follow-up visits to the doctor, prescription medication, further investigations, etc. Such medical expenses are called post-hospitalization expenses.
- **Domiciliary hospitalization expenses:** This typically includes expenses related to domiciliary hospitalization - at-home medical treatment for more than three days for cases which in the normal course would require hospitalization. The exact circumstances / terms / exclusions related to domiciliary hospitalization would be spelt out in your policy document.

Apart from hospitalization expenses, your health insurance policy may also cover pre- and post-hospitalization expenses, and offer a cap for domiciliary expenses.



Claims

Depending on the situation and your policy coverage, you can make two types of health insurance claims:

- **Cashless:** 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.
- **Reimbursement:** A reimbursement claim is one where you pay all the expenses related to the hospitalization of the insured and claim a reimbursement of your expenses after discharge. Reimbursement claims may be filed in the following circumstances:
 - Hospitalization at a non-network hospital
 - Post-hospitalization and pre-hospitalization expenses
 - Denial of pre-authorization for cashless facility at a network hospital.

Please visit our website, www.mediassistindia.com, for the updated list of network hospitals.

Planned Hospitalization

If you or any of your family members are undergoing an elective procedure in the near future, you can plan your hospitalization with Medi Assist. Planned hospitalization gives you the following advantages:



eCashless for Planned Hospitalization

Medi Assist gives you the power to plan your hospitalization with eCashless. For the first time in the health benefits industry, you can now request for a provisional preauthorization for your cashless hospitalization with your smartphone without having to visit the hospital.



Claim Processing and Settlement

**Health Insurance Claim:
Make the Most of it.**

Have a planned surgery?
Don't pay anything for it.
We'll make it cashless.



Emergency hospitalization?
Flash your Medi Assist
card for cashless admission
into the hospital.

What more, you can submit
and track the status of
your claim online with
Medi Assist IWP!



Technology at your Disposal

Cashless or reimbursement; planned or emergency hospitalization; treatment at a network hospital or non-network hospital - as a holder of a Medi Assist card, you are eligible for hassle-free claims settlement. What more, we leverage technology at every step to help you raise requests easily, track claims in real-time, obtain approvals faster and receive reimbursements quicker:

- **MediBuddy Online Portal:** The MediBuddy online portal allows you to add / modify beneficiaries to your policy, generate your e-card, raise reimbursement requests online, and also scan and upload your medical records to maintain your electronic health repository.
- **MediBuddy Mobile App:** The MediBuddy mobile app allows you to send claims intimation, view policy details, browse network hospitals in the vicinity and importantly, track the status of your claims in real-time using your smartphone. All the functionality of the app is also available on our mobile-friendly portal, www.medibuddy.in.
- **MediBuddy+ Hospital Portal:** This portal allows hospitals to raise and track cashless claims online. By eliminating disparate channels of communication and by moving all interactions onto an online portal, we help you obtain pre-authorization approvals faster.

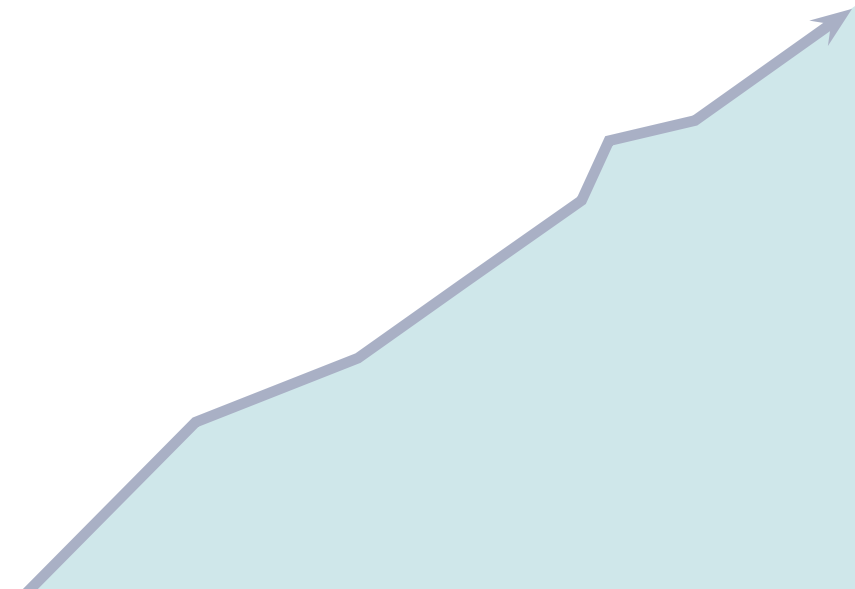
eCashless Process

eCashless is the most hassle-free way to undergo a planned cashless hospitalization:

1. Click the eCashless tile on your MediBuddy mobile app or your MediBuddy online portal and send us your request at least 48 hours prior to hospitalization.
2. Enter basic details about your treatment - prescribed treatment, your preferred network hospital, doctor's name, expected date of admission, etc., and submit your request.
3. Medi Assist sends your request to your chosen network hospital. The hospital provides an early estimate for the treatment and forwards your request to Medi Assist.
4. Medi Assist releases a provisional preauthorization to the hospital. Simultaneously, you receive a secure passcode for your request.
5. On the date of admission, you walk into the hospital and show your secure passcode at the insurance desk. You must also present your Medi Assist e-card and any valid Government ID proof.

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.

6. The hospital "unlocks" your provisional approval with your passcode and instantly hands over the preauthorization. You sign the preauthorization form and get green channelled into your room.
7. Track your claim in real-time:
 - Click the Claims tile on MediBuddy (or)
 - Log into www.medibuddy.in and click the Claims tab (or)
 - Visit track.medibuddy.in to search claims by Claim ID, MA ID or Employee ID (or)
 - SMS "Claims (Claim Number)" to +91 96631 49992



Cashless Hospitalization Process

Cashless hospitalization can be availed only at a Medi Assist network hospital upon approval of your preauthorization application. In the event of hospitalization at a network hospital:

1. Present your Medi Assist e-card during admission along with any other valid Government ID 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.

2. Ensure that the hospital sends your pre-authorization form to Medi Assist:

- MediBuddy+ hospital portal: Log the request online (or)
- Email: cashless@mediassistindia.com

3. Track your claim in real-time:

- Click the Claims tile on MediBuddy (or)
- Log into www.medibuddy.in and click the Claims tab (or)
- Visit track.medibuddy.in to search claims by Claim ID, MA ID or Employee ID (or)
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4. Medi Assist sends the approval to the hospital. Further enhancement approvals may be issued on request, subject to terms and conditions of the policy.

5. In case the request cannot be approved or if the expenses are not covered by your policy, you will have to settle the hospital bill in full and subsequently raise a reimbursement claim after discharge.

Note: Denial of a preauthorization request must not be construed as denial of treatment or denial of coverage.

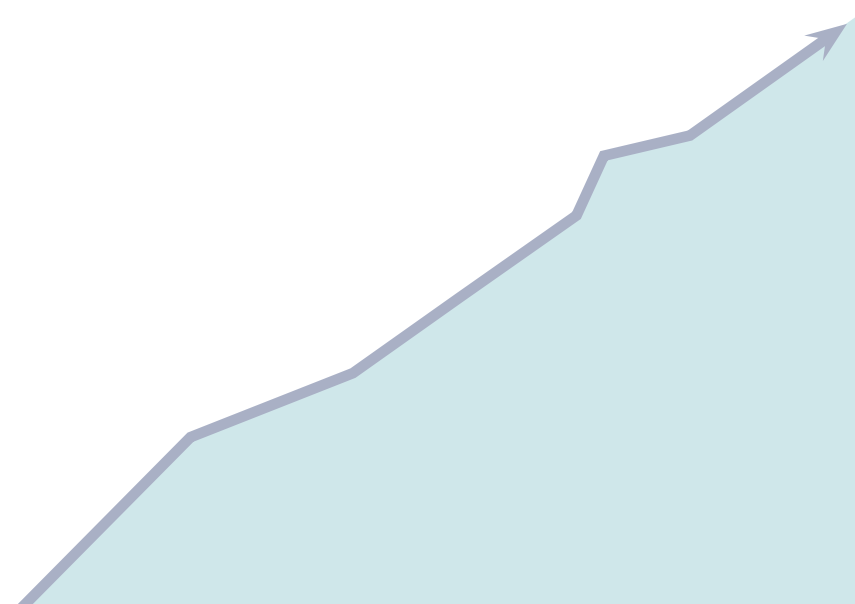
6. After discharge, the hospital will send all the documents related to your claim to Medi Assist for settlement.



Do note:

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

Note: In case of suppression of material facts or misrepresentation of facts by the hospital or the insured, the pre authorization issued for the cashless facility will stand cancelled. The insured will be liable to settle the hospital bill in full.



Reimbursement

Reimbursement claims may be filed in the following circumstances:

- Hospitalization at a non-network hospital
- Post- and pre-hospitalization expenses / domiciliary expenses that are not covered by your policy

In such cases, you can claim a reimbursement after discharge.

1. Intimate us about your impending claim:

- MediBuddy: Intimate Reimbursement tile (or)
- SMS: CLAIM INT to +91 96641 72929

2. Present your Medi Assist e-card at the hospital during admission along with any other legally accepted identity card.

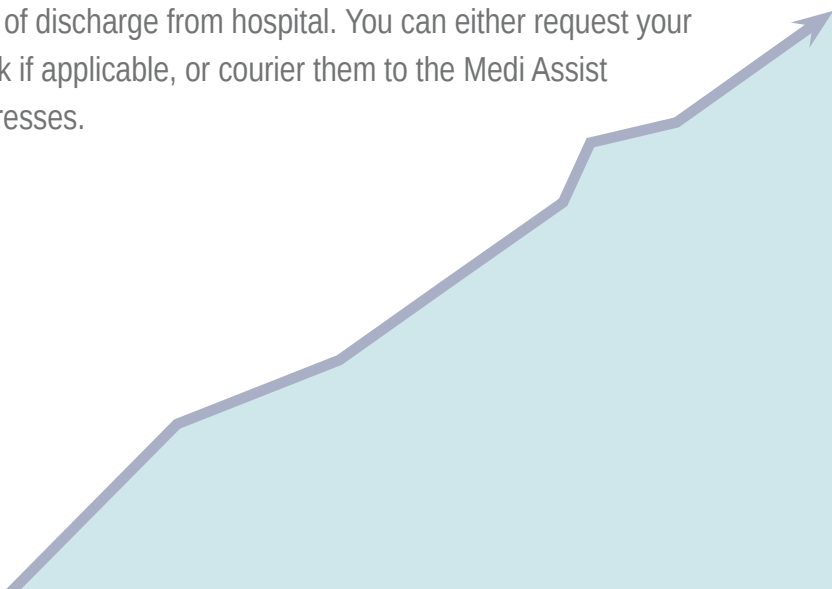
Note: You can log into your Medi Assist online portal and click Generate E-Card to instantly generate and print out an e-card for any beneficiary.

3. Submit your reimbursement claim online within 7 days from date of discharge:

- a. Log into your Medi Assist online portal and click the Submit Claims tile.
- b. Enter all the information in the displayed form and scan and upload all the necessary documents duly signed.

4. Send the original documents to Medi Assist India TPA Private Limited within 30 days from the date of discharge from hospital. You can either request your HR team to forward your documents on your behalf, or submit them at the Medi Assist Onsite Kiosk if applicable, or courier them to the Medi Assist branch servicing your account. Please visit our website, www.mediassistindia.com, for branch addresses.

5. Track your claim in real-time:

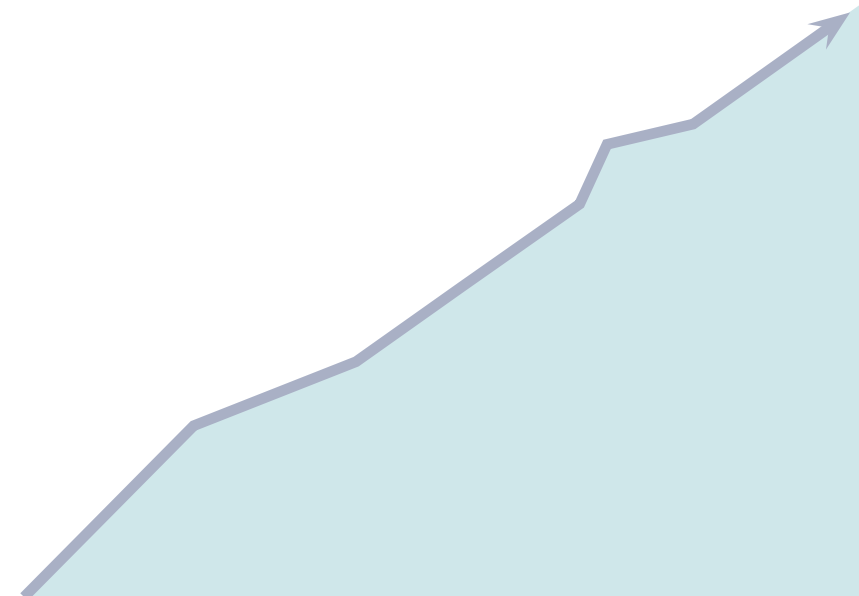
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 - SMS "Claims (Claim Number)" to +91 96631 49992
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6. The medical team at Medi Assist processes the claim:

- 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 / e-mail quoting the reason for denial of your claim.

The following are the documents that you would have to submit while claiming a reimbursement:

- Original hospital final bill
- Original numbered receipts for payments made to the hospital
- Complete breakup of the hospital bill
- Original discharge summary
- All original investigation reports along with prescriptions
- All original medicine bills with relevant prescriptions
- Original signed claim form
- Copy of the Medi Assist ID card or current policy copy and previous years' policy copies (if any)
- Covering letter stating your complete address, contact numbers and email address (if available).



Frequently Asked Questions

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.

Are my medical expenses incurred before and after hospitalization covered?

Your policy may allow reimbursement of relevant medical expenses incurred during, pre- & post-hospitalization for the particular condition for which hospitalisation was necessary. This is subject to the terms and limits prescribed in the policy. Please read your policy document in detail.

What is the maximum number of claims allowed during the policy period?

There is no upper limit on the number of claims that can be raised during the policy period. However, the total cumulative claim amount cannot exceed the sum insured in the policy.

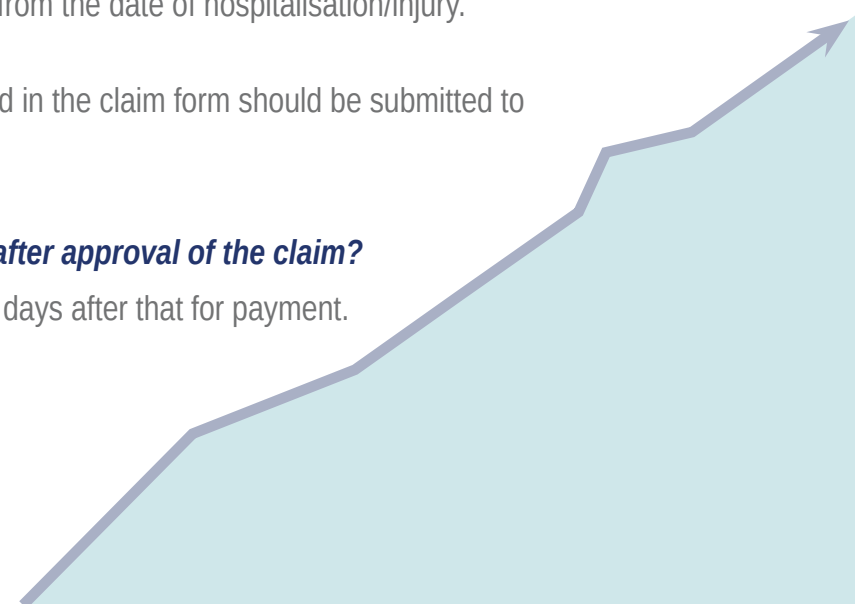
What is the deadline to submit a reimbursement claim?

Claim intimation (with particulars relating to policy number, name of the insured person for whom the claim is made, nature of illness/injury and name and address of the attending medical practitioner/hospital/nursing home) should be submitted within 7 (seven) days from the date of hospitalisation/injury.

The final claim form along with the hospital receipt, bills, cash memos and the list of documents as listed in the claim form should be submitted to Medi Assist within 30 (thirty) days from the date of discharge from the hospital.

How long does it take to process the reimbursement claim and when will I receive the payment after approval of the claim?

After receiving all the required documents, it takes 15 working days to process the claim and 7 working days after that for payment.



What is co-pay?

Co-pay is a percentage applied on payable amount which the policy holder has to pay at the time of discharge. The rest of the amount is paid by the insurance company.

What happens to my sum insured after a claim is filed? And what happens if the cost exceeds my hospital insurance cover?

The sum insured is reduced by the amount of the claim paid for the rest of the policy year. You have to pay the balance amount if your claim exceeds the sum insured.

What are shortfall documents or information required (IR), and when and where do I send them?

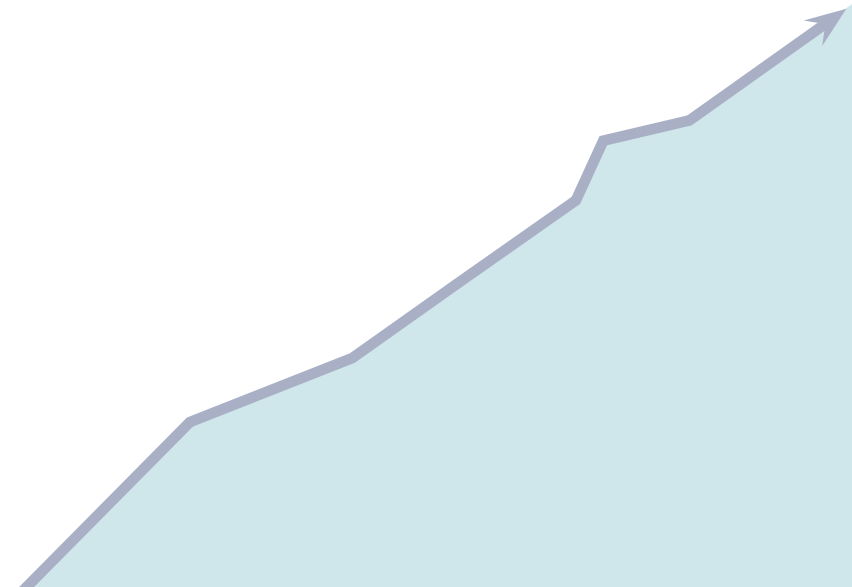
Shortfall documents are raised if the documents already sent are insufficient for further validation of the existing claim. They have to be sent within 10 working days of the receipt of the e-mail notifying you of insufficient documentation.

If you are an individual policy holder, you can submit the shortfall documents to the nearest Medi Assist branch. If you are a corporate employee, just hand them over to the respective helpdesk person.

Where can I get more help?

Should you have any questions, clarifications or concerns regarding your health insurance, you can get in touch with your corporate single point of contact mentioned in your welcome email from Medi Assist.

Here's to healthy living!



Toll Free : 1800 419 1156

Email: techm@mediassistindia.com

**Download the MediBuddy App
Your health buddy on-the-go !**

**Give us a missed call on
1800 3010 1696**

We'll SMS the download link to your smartphone

or scan this QR code

