GUIDELINES FOR MD INDIA CLAIMS PROCEDURE:

( Compiled by Mr. CSR Anjaneyulu, Hyderabad)

*Time limit for Notification (Intimation) of documents – (Latest Changes)*

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| ***Notification of claim in case of Cashless facility*** | ***TPA must be informed:*** |
| *In the event of planned hospitalisation* | *At least 72 (seventy two) hours prior to the insured person’s admission*  *to network provider/PPN hospital* |
| *In the event of emergency hospitalisation* | *Within 24 (twenty four) hours of the insured person’s admission to net*  *work provider/PPN hospital* |

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| --- | --- | --- | --- |
| |  |  | | --- | --- | | ***Notification of claim in case of Reimbursement*** |  | | ***TPA must be informed:*** |
| *In the event of planned hospitalisation* | *At least 72 (seventy two) hours prior to the insured person’s admission*  *to hospital* |
| *In the event of emergency hospitalisation* | *Within 24 (twenty four) hours of the insured person’s admission to*  *hospital* |

*B. Time limit for submission of documents*

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| --- | --- |
| ***Type of claim*** | ***Time limit for submission of documents to company/TPA*** |
| *Where Cashless Facility has been authorised* | *Immediately after discharge. (To be done by the Hospital)* |
| *Reimbursement of hospitalisation and pre- hospitalisation expenses (limited to 30 days)* | *Within 15 (fifteen) days from the date of discharge from hospital* |
| *Reimbursement of post hospitalisation expenses (limited to 90 days)* | *Within 15 (fifteen) days from completion of post hospitalisation*  *treatment* |

*Note: Waiver of this Condition may be considered in extreme cases of hardship where it is proved to the satisfaction of the Company (Insurer) that the circumstances under which the insured was placed made him or any other person NOT possible to give such notice or file claim within the prescribed time-limit. (Earlier it was bank nodal officer to condone the delay upto 120 days and insurer beyond 120 days; now this has been changed to Insurance Company to condone any type of delay)*

**Notification of claim to MD India**: 1800 233 4505 or Online Claim intimation

Or E-mail: [authorisation@mdindia.com](mailto:authorisation@mdindia.com), [customercare@mdindia.com](mailto:customercare@mdindia.com)

(Patient’s name, MD ID No, Date of admission, Reported disease, Treating Doctor’s Name with Regn, No, Name of Hospital, Address, etc. are needed)

MD India will give you CCN No. for future reference. This has to be mentioned in each of our reference to them.

**Submission of Claim Papers**: to PAD Welfare section, Indian Overseas Bank, 763, Anna Salai, Chennai 600002 or any MD India Branch by Regd post.

On the top of Envelope mention MEDICAL BILLS OF Mr\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONTACT NOS FOR ENQUIRY STATUS OF BILLS**: 1800 233 5690

**MOBILE APP**: **HAWK** ( you can download E-cards, Claim intimation, Claim status, etc.), Net work hospitals, etc. (Down load from Play store)

**PAD WELFARE** : 044 28519674 mail: [padwelfare@iob.in](mailto:padwelfare@iob.in)

MD INDIA PEOPLE AT CENTRAL OFFICE :

**MD India, Teynampet Branch**: Mr Koshy George, Sr Manager

Operations (89398 53162 or 88486 20243)

Branch contact No 044 24364206, 205

Mail: [kgeorge@mdindia.com](mailto:kgeorge@mdindia.com)

**Procedure for submission of bills**:

All original bills to be submitted with Discharge summary, advance receipts, test reports, Medicine bills, Final Bill, etc., With Claim Form A ( alongwith pre- hospitalization bills and Post discharge 90 days bills).

Please ensure that the Hospital has the Regn No.

Conveyance to go to Hospital to and fro from residence to Hospital.

Along with bills, you have to submit ECS form, Cancelled Cheque with Printed name to the TPA for crediting bill amount.

Usually after submission of papers, you will get SMS alerts from MD India about receipt of documents within a week’s time.

**Claim status**: Please SMS “ Status < CCN number>” to 8691863863

Or by Whatsup: 83908 39000 to know the status.

For all enquiries, CCN Number is must.

**Base Policy:** Award staff: Rs.3,00,000 **, Super top-up** Rs. 4 lakhs

Supervisory: Rs.4,00,000, Super top-up Rs. 5 lakhs

I**n case of difficulty,**  contact: customercare@mdindia.com

Iob-chennai@mdindia.com

**Latest changes in the policy are:**

1  Revision in Room Rent Limit to Rs. 4,000/- against the earlier admissible limit of Rs. 5000/- per day. (Award staff Rs 3000 per day)

2   All bills / receipts for purchase of medicine upon which a claim is made shall bear printed valid GST No. of the issuer of such bills, receipts, etc.

Processing time if all documents submitted: 21 days

After sanction, you will get SMS alert about payment advice to UIIC.

If payment is not forth coming within one month, you can follow-up with :

**Mr. Ramesh Jadav, IBA cell, UIIC : 97691 38017**

**Mr. Ashish : 9920809677**

Mail: [corpcell.mumiba@gmail.com](mailto:corpcell.mumiba@gmail.com)

[grievance@uiic.co.in](mailto:grievance@uiic.co.in)

[customercare.ibacell@uiic.co.in](mailto:customercare.ibacell@uiic.co.in)

Unless, you receive Rejection letter from UIIC, you cannot file any case in Insurance Ombudsman.

**Grievance Escalation Matrix for Reimbursement**:

Level 1 VidyaTemgire Group Leader 02025100128 [grievance@mdindia.com](mailto:grievance@mdindia.com)

Level 2 VinodDeore/ AsstManager 09325612924[vdeore@mdindia.com](mailto:vdeore@mdindia.com)

Sandip Mane 07030949754 [sandipm@mdindia.com](mailto:sandipm@mdindia.com)

Level 3 AliasgarMurgha Manager amurgha@mdindia,com

**Grievance Escalation Matrix for Cashless:**

Level1 JahedShaikh Group Leader [contact@mdindia.com](mailto:contact@mdindia.com)

Level 2 PraveenKharade/ Asst Manager 7798984944

Deepak Mane 9320206713

Level 3 AliasgarMurgha Manager [amurgha@mdindia.com](mailto:amurgha@mdindia.com)

In short, for reimbursement of medical expenses, the insured member has to submit the Claim form (Form A and B) duly filling all the columns and send it alongwith the following **originals** :

1. Discharge summary from the Hospital
2. Prescription for medicines and its relevant bills
3. Prescription for Lab tests, Lab reports, X-rays and its relevant bills
4. Final Bill & Receipt from the Hospital
5. ECS form alongwith the cancelled cheque with the name printed in it; if the name is not printed, they have to enclose first page of the Savings Bank A/c passbook.

Before submitting they may verify the check-list given in the Claim form.

We are sure that if the members follow the above procedures promptly and submit their bills properly, claims would be settled smoothly.

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