

### Health Claims - Document Reckoner

#### Mandatory Requirements for Hospitalization Claims

Photocopy of Policy Certificate & Health Card	Duly Filled & Signed Claimant Statement Form	Attending Doctor's Certificate	Discharge Card / Discharge Summary	Admission Notes / Indoor Case Papers	Hospital / Pharmacy / Doctor Bills
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#### Medical Reports Required

Typhoid / Enteric Fever	Malaria	Fever of Unknown Origin	Dengue/Leptospirosis	Urinary Tract Infection	Gastroenteritis	Pneumonia	Asthma	Heart Attack	Jaundice	Others
Complete Blood Count	Complete Blood Count	Complete Blood Count	Complete Blood Count	Complete Blood Count	Complete Blood Count	Complete Blood Count	Complete Blood Count	ECG & 2 D Echo	Complete Blood Count	All relevant Investigation Reports
Ultra Sound Abdomen	Malarial Parasite	Urine Routine	Urine Routine	Stool Examination	Stool Examination	Chest X-ray	Chest X-ray	Cardiac Enzymes	Serum Hepatitis	
Typhoid Report (Widal)	Liver Function Test	Chest X-ray	Platelet Count	Urine Routine	Ultra Sound Abdomen	Pulmonary Function Test	Pulmonary Function Test		Liver Function Tests	
		Ultra Sound Abdomen	Liver Function Tests	Urine Culture & Sensitivity		Sputum Examination	Sputum Examination			
		Liver Function Test	Ig M / Ig G				Arterial Blood Gas			
		Blood Culture	Chest X-ray							

#### Surgical Reports Required

Appendectomy (Appendix Surgery)	Gall Bladder Removal	Uterus Removal	Kidney Stone Removal	Cataract Surgery	Hernia Surgery	Fistula / Fissure / Fistula Surgery	Fracture Repair	Nose Surgery	Angioplasty / By Pass	Others
Complete Blood Count	Ultra Sound Abdomen	Ultra Sound Pelvis	Complete Blood Count	Bar Coded Sticker	Surgery Notes	Complete Blood Count	Pre-Operative X Ray	X Ray PNS (Para Nasal Sinus)	Surgery Notes	All relevant Investigation Reports
Ultra Sound Abdomen & Pelvis	Histopathology	Histopathology	Urine Routine		Ultra Sound Abdomen & Pelvis	Surgery Notes	Post-Operative X Ray	Surgery Notes	ECG & 2 D Echo	
Histopathology			Ultra sound					Chest X-ray	Cardiac Enzymes	
			X Ray KUB / IVP						Stress Test	

Note: Additional Requirements may be triggered in special circumstances

All the Health Claims Documents received at Branches to be uploaded in Omnidocs and call to be logged in SPAARC under CT - Health and ST - Health Claims

Post upload on Omnidocs, hospitalization claim documents needs to be dispatched to Health Claims Cell on the same day

Please refer Knowledge Mine and Lumini for Claimant Statement Form, ECS mandate and formats for Treating Doctor's Certificate, Family Doctor's Certificate

Hospital Care (Photocopies of the documents can be accepted at the Branch)  
Medisure & Health Saver (Only Original Documents are to be accepted at the Branch)

TAT for Cashless Claim Approval - 3 Hours (To avail Cashless (under Hospitalization products) fax Pre Authorization form at:1800 - 103 - 4778); TAT for Re-imbursment Claims - 15 Calendar Days from the last received document

#### Claims Helpline

 <p>24*7 ClaimCare Cell (Toll Free): 1800 - 103 - 6363</p> <p>For all query resolutions on claims: Touch points to contact the above cell</p>	 <p>SMS ICLAIM &lt;XXXXXXXX&gt; to 56767 (8 digit policy no.)</p>	 <p>For any query /clarification Please write to us: <a href="mailto:healthclaims@iciciprulife.com">healthclaims@iciciprulife.com</a> (Only for Branches) Reply within 24 Hours</p>	 <p>For Reconsideration/ Grievances Call - <b>022-662474709</b> Mon to Friday 10 am to 6 pm (Only for Branches)</p>
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