

ProClaims

NOVEMBER, 2010



A positive Claims Experience



SVP's Message

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ICICI PRUDENTIAL
LIFE INSURANCE

MESSAGE FROM THE DESK OF POONAM BHARDWAJ



Dear Readers,

As we bring you yet another issue of ProClaims, I would like to take this opportunity to thank you for being a part of the ICICI Prudential Life family and for your continued faith and support.

It has been our steadfast objective to understand the needs of our customers and work towards offering them innovative, need-based products. For information on our products and the new Future Calculator, you can visit our website www.iciciprulife.com

With every passing year, we have worked towards actively enhancing and simplifying our claims settlement procedures, making them more flexible and customer friendly. Our efforts are concentrated on making the claims process simple and hassle-free, while adhering to internal guidelines. Since inception, we have settled more than 33,000 death claims and 23,000 health claims.

Additionally, we have launched '[Online Claim Intimation](#)' on our website. This is a unique facility we are providing our customers, in line with our customer centric approach.

In this issue of Proclaims, we have in detail discussed the essential documents necessary for speedy claims processing.

I hope this newsletter is successful in achieving its goal of keeping you informed about the various factors related to claims. We would like to hear from you - so do share your valuable feedback with us.

Warm Regards,

Poonam Bhardwaj
Sr. Vice President & Head - Underwriting and Claims

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Claims Intimation now a **CLICK** away

We proudly launch the Life Insurance Industry's first Online Claim Service on our website, www.icicprulife.com

This unique facility has been initiated to simplify the claim intimation process. Customers can now conveniently view all their life and health policies and submit claim intimations on our website under the Claims section.

Key Features

- Claim Intimation for multiple life and health policies
- Customised display of claim requirements
- Acknowledgement mail to claimants
- Form download facility
- Call back facility for assistance

This value-added service is yet another initiative towards our commitment to providing a world class service experience to our customers.

Please note: Claim registration will be initialised post receipt of written intimation along with requisite documents



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IMPORTANCE OF DOCUMENTATION AT CLAIM STAGE

Insurance is a business of long-term investment and association. A crucial 'Moment of Truth' (MOT) for the insured/ beneficiary is the experience at the claims stage. This is the time when the insurer gets the opportunity to deliver the promise made to the policyholder while issuing the policy.

Documentation plays a pivotal role in claims processing. The availability of the required documents helps in faster processing at the end of the insurer thereby enabling the claimant to avail the benefits of a smooth and efficient process.

In this article we will be focusing on the importance of claim documentation in making the claims experience a good one for the claimant.

For making a claim in life and health insurance, medical record documentation is of utmost importance. This is required to record pertinent facts, findings, and observations about an individual's health history including the past and present illnesses, examinations, tests, treatments, and outcome. Such records enable the insurer to understand the genesis of the claim case and take appropriate decision.

It is imperative that a customer knows the basic documents which he needs to submit in case of a claim at the policy sourcing or issuing stage. However, the customer may choose to inquire about the documents required at the claim stage from the Company by approaching the Company's call center or the policy sourcing touch point.

Based on the initial documents submitted, the claims experts may choose to take a decision or call for further documents. For faster processing of claims, it is advised that a customer should provide all the documents asked for. If the required documents are not available with the customer, the insurance company may choose to procure the documents on its own.

Hence, considering the above, it can be concluded that proper documentation is the key to seamless claims processing where both the customer and the company will be in a win - win situation.



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CRITICAL DOCUMENTS FOR CLAIM PROCESSING

Death Claim

- Original Policy Certificate
- Claimant Statement Form
- Copy of Death Certificate*
- Family/ Treating doctor statement & Indoor case papers
- Claimant KYC documents (Photo ID Proof, Address Proof)

* FIR & Post Mortem Report required for accidental/ suicidal claims

Hospitalisation Claim

- Claimant Statement Form
- Discharge Card #
- Treating doctor statement and indoor case paper
- Diagnostic Reports
- Hospital/ Pharmacy bills & Payment Receipt and Records #

Original documents required for indemnity claims



Critical Illness Claim

- Claimant Statement Form
- Original Policy Certificate
- Treating doctors statement and indoor case paper
- Relevant medical documents pertaining to diagnosis

Please note:

- 1) Complete submission of document at the time of intimation leaves a great experience for the customer and enables the company to settle the claim at the earliest
- 2) Additional documents may be triggered on a case to case basis



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CASE STUDY

ProClaims

NOVEMBER, 2010

CASE STUDY 1

Life Assured: Salaried
Claimant: Wife
Policy: Term Policy
Sum Assured: Rs. 10 lacs

Policy issued in August 2008 to a 45 year old male Life

Assured. In the month of July 2010, the Life Assured was hospitalised with symptoms of high fever and chills. He was diagnosed to be suffering from dengue and subsequently expired at the hospital after 10 days due to multi-organ failure.

During claim intimation, the claimant referred to the Documents Reckoner updated on our website and submitted all the basic documents along with the complete set of medical records pertaining to the treatment availed by the Life Assured at the hospital. Employer certificate with all relevant leave records were also submitted by the Claimant.

It was therefore convenient for claims assessor to get complete case facts at one go as all requisite documents were submitted. The claim was settled within 5 days from receipt of the above documents.

CASE STUDY 2

Life Assured: Self Employed
Claimant: Father
Policy: ULIP (Unit Linked Insurance Plan)
Sum Assured: Rs. 2 lacs
Rider: ADBR (Accident Disability Benefit Rider) Rs. 2 lacs

Policy issues in May 2009 to a 25 year old male Life Assured. In the month of January 2010, the Life Assured met with an accident and expired due to severe injuries on way to the hospital. Claimant submitted documents which included a copy of the FIR (First Information Report) and PMR (Post Mortem Report). The Claimant did not submit the copy of the photo id proof along with copy of current address proof.

At claims, the assessor was able to decide on the case based on the FIR and PMR submitted but was unable to sanction the release of payment as the basic KYC requirement (copy of

photo ID proof and current address proof) were not received. These requirements were clearly mentioned on the claimant statement form.

After regular follow-up, the claimant submitted the requisite documents and the claim was decided within 3 days from date of submission.

Timely submissions of the documents help the claim assessor process and decide on the claim case within a short period.

Key Observation / Learning

- Before submission of claim documents refer to the claimant statement form or policy document to understand the exact requirements
- Alternatively contact ClaimCare call centre or log on to our website www.iciciprulife.com to know and understand the claim requirements

Submission of documents at one go gives great experience to the customer and enables the Company to settle the claim at the earliest.



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**ICICI Pru
ClaimCare**Call toll free 24 x 7
1800 103 6363**Customer Service Toll Free Number 1800 22 2020.**

Call Centre Timings: 9:00 a.m. to 9:00 p.m., Monday to Saturday (except National Holidays)

Pre-authorization Cashless Claim, please fax toll free on
1800 103 4778 or **022 42492828** (charges apply)For Claims related queries, please SMS:
ICLAIM <8-digit Policy No.> to **56767**For any claims queries/ clarifications, please e-mail us at:
lifelife@iciciprulife.com**ADDRESS: HEALTH CLAIMS CELL/ LIFE CLAIMS CELL**
ICICI Prudential Life Insurance Co. Limited
Vinod Silk Mills Compound
Chakravarti Ashok Road, Ashok Nagar
Kandivali (East), Mumbai 400101

IN ULIPs, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICY HOLDER. ©2010, ICICI Prudential Life Insurance Company Ltd., Registered Address: ICICI Prulife Towers, 1089, Appasaheb Marathe Marg, Prabhadevi, Mumbai - 400025. Reg No: 105. Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions please read the sales brochure carefully before concluding the sale. Unlike traditional products, Unit linked insurance products are subject to market risks, which affect the Net Asset Values and the customer shall be responsible for his/ her decision. The names of the Company, Product names or fund options do not indicate their quality or future guidance on returns. Funds do not offer guaranteed or assured returns. Investments are subject to market risks. Tax benefits are as per the Income Tax Act, 1961, and are subject to any amendments made thereto from time to time. Service tax & education cess will be charged extra as per applicable rates. Tax laws are subject to amendments from time to time. Comp/doc/Nov/2010/779

Accident Benefit Rider UIN (ADBR Unique Identification Number as specified by IRDA) - Traditional Product: 105B001V01; ULIP Product: 105A018V01



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