

Bharti AXA -Group Reimbursement Claim Processing on Scan Documents

A special process is designed to provide un-interrupted service to Group customers during the current unforeseen event of COVID 19 & Lockdown.

Reimbursement Claims process for:

1. Network Hospital
2. Non Network Hospital

A. Network Hospital Reimbursement Claims:

1. Insured intimate to TPA
2. TPA will share the portal or web link to insured to provide the claim information
3. TPA shall share the editable format of Claim form with the customer for the reimbursement of claim
4. The Editable PDF format Claim form Part A shall be sent from insured's registered mail id.
5. On submitting the claim form an Email/SMS with **OTP** is sent to the registered email address/mobile number provided by the customer.
6. Once the **OTP** is entered, Claim form is **verified** and a checklist of documents will be communicated to the customer for submission of claim
7. Scanned & Self attested (For BAGI) claim documents and claim form A shall be shared through registered mail Id of insured or can be uploaded on web portal.
8. TPA shall do the telephonic verification of claims with network hospital
9. TPA shall seek for Insured's verification from HR/SPOC /IMD.
10. An approval mail from HR/SPOC's/ IMD's official email id shall be considered as proof for Insured's identification
11. Once an approval mail is received, claim shall be processed with submission of scanned documents through registered mail Id or Official mail id of insured
12. Along with the scan documents, a self-declaration shall be taken from insured's registered mail id marking cc to HR:
 - a. Binding him/her to submit the hard copies of claims documents with TPAs once the basic services are resumed and everything gets back to normalcy.
 - b. Prohibits the insured to use the documents for any other insurance policy

c. Attested certification for Information & Hard Copies submission, if fraudulent claim, Bharti AXA will initiate recovery as per applicable laws

13. Payment shall be processed on the basis of submitted scanned documents and above mentioned details.

14. Post event, once insured submits the hard copies; TPAs shall attach all the mail communications in the claim file & close the claim after verifying all the documents.

B. Non-Network Hospital Reimbursement Claims:

1. Insured intimate to TPA

2. TPA will share the portal or web link to insured to provide the claim information

3. TPA shall share editable format of Claim form with customer for the reimbursement of claim

4. The Editable PDF format Claim form Part A shall be sent from insured's registered mail id

5. On submitting the claim form, an Email/SMS with **OTP** is sent to the registered email address/mobile number provided by the customer.

6. Once the **OTP** is entered, Claim form is **verified** and a checklist of documents will be communicated to the customer for submission of claim.

7. TPA shall do the telephonic verification of claims with Non-network hospital

8. Scanned & Self attested (For BAGI) claim documents and claim form shall be shared through registered mail Id of insured or can be uploaded on web portal

9. TPA shall seek for Insured's verification from HR/SPOC /IMD.

10. Along with the scan documents, a self-declaration shall be taken from insured's registered mail id marking cc to HR / SPOC/ IMD :

i. Binding him/her to submit the hard copies of claims documents with TPAs once the basic services are resumed and everything gets back to normalcy.

ii. Prohibits the insured to use the documents for any other insurance policy

iii. Attested certification for Information & Hard Copies submission, if fraudulent claim, Bharti AXA will initiate recovery as per applicable laws

11. Once verified, claim shall be processed with submission of scanned documents

12. TPA shall process the claim in system and Payment shall be processed on the basis of submitted scanned documents and above mentioned details.

13. Suspected cases to be put on hold for investigation:

- a. Once the basic services are resumed, an investigation will be carried out and claim payment will be put on hold till the investigation is complete.