

**Claim documents should be submitted within 30 days from the date of discharge from hospital**

Reimbursement claims can be submitted to us through registered post / courier or can be handed over at any of our [Branches \(https://www.mediassistindia.com/Contactus.html\)](https://www.mediassistindia.com/Contactus.html).

The documents that you need to submit for a hospitalization reimbursement claim are:

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

The documents that you need to submit for a [post-hospitalization or a pre-hospitalization \(https://www.mediassistindia.com/PrePostHosp.html\)](https://www.mediassistindia.com/PrePostHosp.html) claim are:

1. Copy of the discharge summary of the corresponding hospitalization
2. All relevant doctors' prescriptions for investigations and medication
3. All bills for investigations done with the respective reports
4. All bills for medicines supported by relevant prescriptions

At Medi Assist, we receive the reimbursement claim and process it. The medical team at Medi Assist will determine whether the condition requiring admission and the treatment are covered by your health insurance policy. They will also check with all the other terms and conditions of your insurance policy. All [non-medical expenses \(https://www.mediassistindia.com/NonMedicalExpenses.html\)](https://www.mediassistindia.com/NonMedicalExpenses.html) will not be payable.

Based on the processing of the claim, a denial or approval is executed. In case of approval, a cheque is made out for the approved amount and sent to you at the address mentioned in your health insurance policy. In case you have been insured through your Employer, the cheque will be dispatched based on instructions received from your Employer

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. In case you have been insured through your Employer, the denial letter will be dispatched based on instructions received from your Employer.