

Claim Process



Call us at
1800 266 3202

1 Before you get admitted to any of our network or non-network hospitals or avail home care service, we request you to reach out to us 3 days in advance. In case of emergency hospitalization, you can contact us within 24 hours from the admission to the hospital.

Cashless

2 To avail the cashless facility, you may get admitted to any of our network hospitals. You will need to present your health card along with any government issued valid photo ID proof to the hospital.

3 The hospital will send us your cashless hospitalization request, which we will approve in line with your policy plan.

4 At the time of discharge, the hospital will send us the final bill and the discharge summary. After we approve the final bill, you will be discharged from the hospital. You will need to pay any inadmissible expenses, copayment or deductions directly to the hospital in line with your policy plan.

TAT for Initial Cashless Approval is 1 hour or less*
TAT for Cashless Approval at the time of discharge is 3 hours or less*

Home Care Cashless

2 To avail the Home Care service, you can contact our authorized Home care provider
1800 102 4224

3 The Home care provider shall evaluate your eligibility and will submit us your cashless request for home care, if home care is assessed to be advisable for your health condition. We will approve the request in line with your plan.

4 We will receive the final bill and the discharge summary from the Home care provider. We will assess and settle the claim as appropriate. You will only need to pay any inadmissible expenses, copayment or deductions directly to the home care provider in line with your policy plan.

Reimbursement

2 If you are already admitted to the hospital and the treatment has begun or wish to take services from a non-network hospital, you may submit a claim after you are discharged from the hospital.

3 At the time of discharge, you will need to pay directly to the hospital. Please ensure to collect all relevant documents such as original hospital bill, payment receipts, pharmacy bills, investigation reports and discharge summary from the hospital.

4 You can submit all these documents along with the dully filled claim form at

Family Health Plan Insurance TPA Limited
Srinilaya Cyber Spazio Suite 101, 102, Ground Floor, Road No. 2, Banjara Hills, Hyderabad, Telangana - 500034

For Non-Investigated Claims, the reimbursement TAT is 30 days or less*
For Investigated Claims, the reimbursement TAT is 45 days or less*

* TAT will be calculated from receipt of last necessary documents from hospital in case of cashless and receipt of last necessary documents from insured for reimbursement claim.

 **MAGMA HDI**
General Insurance Company Ltd.

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Details of TPA are available on our website www.magma-hdi.co.in.
In case of any change in TPA details, same will be updated on our website.