

FAQ'S on Medical Insurance Scheme

1) Who is a United India TPA? And How will I know my United India TPA?

Third Party Administrator is An IRDA licensed TPA who is engaged by the Insurance Company in Servicing the Health Insurance Policy. For Our Bank **M/s Vidal Health Care TPA Pvt Ltd formerly named as TTK Health Care is the TPA.** TPA will send you a complete kit consisting of various guidelines for availing cashless and submission of claims.

2) What services would a United India TPA be offering?

As the authorized United India TPA servicing the policy following services are offered:

- a) A personalized Identity Card will be issued to each member and dependents to avail of Cashless facilities in all the network hospitals of United India TPA.
- b) Cashless service facility at network hospitals up to the authorized limit as per policy terms & conditions.
- c) Claims processing of reimbursement claims.
- d) 24 X 7 Call Center service through toll free number.
- e) Website giving online facility for generation of E-card, claim intimation, filing, upload and tracking of claims and Payment Status.
- f) Help Desks at various locations across the country.
- g) Grievance Portal to solve all enquiries and grievances within 24 hours.

3) What is a Health Identity Card?

A Health Identity card will be given to you by United India TPA. It will consist of the name of your bank, Your Employee ID, a Unique Identification Number, the Policy period and the United India TPA contact details. The Health card will help in availing cashless facilities in the United India TPA network hospitals. The Health kit will be delivered to designated regional offices of each bank.

4) What is my recourse, if ID card is not given to me? Will I be able to avail cashless facilities without the same?

Please check with your HR, if you are an enrolled member with the policy. If not kindly make provisions to enroll yourself. Once the HR sends the Information to the Insurance Company the United India TPA will send you the ID card Kit. If you are an

enrolled member please call up the United India TPA call centre and they shall assist you with the same. Cashless cannot be availed without the health ID card.

5) What is the procedure of Applying for a New Health ID card in case of loss?

Along with the ID card a welcome letter will be given to you with your login ID and password. This will help you to go on the United India TPA website and download an E-card which will work similar to the Health ID card.

6) What Is Cashless Facility and how do I avail Cashless?

Cashless Facility is a benefit extended by the Insurance Company through a United India TPA wherein the insured has the option to get admitted to a Network hospital without the burden of payment of the Hospital Bill. The entire bill is settled directly by the insurance company subject to terms and conditions of the policy. **Cashless can be availed by;**

- a) Approaching the Bank Claim Processing Hub
- b) Directly Approaching the Network Hospital

7) What is the Procedure to be followed if we approach the Bank Claim Processing Hub?

The Insured can approach the Bank Processing Hub in order to avail cashless services. The Process is as under:

- a) Employee approaches the bank processing Hub with the details of his hospitalization(The name of the hospital , the admission date , the ailment and the estimated cost
- b) The bank officer guides him to the United India TPA Help Desk.
- c) The Help Desk enters the information and prepares a letter of Authorization
- d) The Help Desk gives a copy of the Authorization letter to the employee and simultaneously sends a copy to the hospital.
- e) The employee can get admitted to the hospital by showing the Authorization letter to the hospital.

8) What is the Procedure to be followed for Cashless directly with the Network Hospital?

Cashless can be availed at the United India TPA network hospital. The procedure mentioned below needs to be followed while availing Cashless at hospitals.

- a) Choose network Hospital from updated United India TPA network list of hospital on the website.
- b) Show United India TPA ID card and collect Pre-Authorization form from the hospital.
Fill up personal details and the rest to be filled up by the hospital treating doctor along with contact number.
- c) Hospital will send the fax/e-mail to United India TPA.

- d) The United India TPA shall process the claim as per policy terms and conditions and send an approval letter to the hospital.
- e) Get admitted, take treatment and get discharged without payment of bill except for non payable items.
Please ensure claim form is filled and duly signed and final bill is signed, before discharge.
- f) Payment will be made to the Hospital/Nursing Home directly by United India TPA.

9) Will I Get Cashless facility in a non-network hospital?

No. Cashless facility will only be available in a network hospital. However in cases of emergency we may consider providing an advance to the patient.

10) What are the documents required to avail Cashless facility?

Cashless facility is available only in network hospitals. The following documents will be required before issuing cashless Authorization Letter.

- a) Duly filled, signed & stamped Pre Authorization Form from the hospital.
- b) Investigation reports & previous consultation papers (if any).
- c) Photo ID proof.
- d) Health ID number/policy number/employee number (Please mention on the AL form and provide a copy of Health ID card).

11) Does cashless hospitalization mean getting treatment free of cost?

Cashless hospitalization does not mean that the treatment is free of cost. Any expenses that are not payable under the insurance policy will not be authorized during hospitalization and the same will have to be borne by the patient.

12) Does cashless hospitalization cover all medical expenses?

Charges for telephone, television, barber or beauty services, food charges (other than patient's diet provided by hospital), baby food, cosmetics, tissue paper, toiletry items and similar incidental expenses are not payable. All the other charges related to the treatment are covered as per the terms & conditions of the policy.

13) What is Claim Intimation? Do I have to Intimate to United India / United India TPA in case I do not avail cashless facility?

Claim Intimation is to be given (Telephonically/e-mail/fax/online intimation) prior to the Hospitalization or in case of emergencies immediately upon hospitalization but prior to discharge). If the Hospital you opt for is not on the Panel of United India TPA, you may get admitted to the hospital and submit the claim for reimbursement. In such a case, The hospital should satisfy the criteria of hospital as defined in the policy.

14) How to avail Reimbursement of claim? / Procedure of Reimbursement Claim?

The process is listed below:

- a) Get admitted to the hospital, take treatment and pay the bill after collecting all the original documents from the hospital.
- b) Insured can get admitted in any hospital (Network / Non Network).
- c) Claim documents to be submitted to Help Desk, Bank Claim Processing Office or nearest United India TPA office as per the convenience of the employee.
- d) The claim is processed on the basis of the terms and conditions laid down in the policy, and NEFT will be done directly to the employee.

15) Is there any scope of Repudiation of Claim?

If the ailment is not covered in the terms and conditions of the policy, the claim may be repudiated. (For details of the policy terms and condition, Kindly log onto the TPA website). Also in the event of fraud, abuse, misrepresentation and non disclosures. In case of Repudiation, the claim will be first put up before the committee and then repudiated.

16) What documents are needed for processing claims that have to be reimbursed?

Following documents are required for processing reimbursement claims:

- a) Claim Form duly filled and signed by the claimant.
- b) Final Bill & Discharge Card from the hospital in original.
- c) First consultation letter/initial investigations supporting the diagnosis prior to hospitalization.
- d) All relevant bills and receipts in original
- e) Medicine/chemist bills supported by prescriptions in original.
- f) Original receipt and diagnostic test reports to be supported by a letter from the consulting doctor prescribing such tests.

17) What is pre-post hospitalization & how much amount / limit / number of days are covered for the same?

Pre- Hospitalization: Pre – Hospitalization means relevant medical expenses incurred like consultations, diagnostic tests, 30 days prior to hospitalization and related to the hospitalization claim.

Post – Hospitalization: Post – Hospitalization means relevant medical expenses incurred up to 90 days from the date of discharge and related to the hospitalization claim.

18) What is the time limit for submission of documents in case of reimbursement claims?

All the documents need to be submitted within 30 days of discharge. For the post hospitalization - 120 days from date of discharge. The post hospitalization claim will be limited to the treatment for 90 days after discharge.

19) Whether CTC employees are covered in this Scheme? What is the Coverage Amount?

Yes. The Coverage is Rs 4 lacs for SO's and other Officers in Grade 1 to 7 and Coverage is Rs 3 lacs for JO's

20) Is Retired employee means only Pensioners for getting the coverage of Medical Insurance Scheme?

For the Medical Insurance Scheme, Retired employee means an employee who retires from the services of the Bank. Retirement includes Voluntary retirement and covers Pensioners and Non pensioners. Employees resigned from the service of the Bank are not covered in this scheme.

21) Whether All dependants of Retired employees will be covered under the Scheme?

No. For retired employees only retired employee and his/her spouse will be covered.

22) If an employee retires during the current period of the Policy, will he/she will continue to get the benefits of serving employees till the expiry of the Policy ?

Yes. Coverage will continue for the policy period.

23) Is there any upper age limit for retired employees?

No. There is no upper age limit.

24) If retired employees join into the scheme and subsequently opt out, can they rejoin again later to get coverage?

Yes. Without OPD Cover in the following manner

- 1) One more option shall be given to all retirees to join the group mediclaim policy without domiciliary (OPD) cover.

- 2) Existing retirees who are covered under With Domiciliary (OPD) policy may be allowed to switch over to Without Domiciliary cover. Option to switch over to with Domiciliary (OPD) policy is not available
- 3) Existing employees who retired during 2016-17 shall be given the option to join either With Domiciliary Policy or Without Domiciliary Policy.