Documents Checklist for Claim Submission

S.No.	File Upload Number	Description
1	File 1	Discharge summary given at time of release from hospital mentioning date and
1	riie 1	time of admission, date & time of discharge, complaints at time of admission,
		final diagnosis, investigations done, treatment given and condition of patient at
		the time of discharge.
2	File 2	The final consolidated bill & detailed break up bill carrying charges like room
_	File 2	rent, consultation charges, surgeon fee, pharmacy, diagnostic tests charges etc
		2. Original receipts of all payments made to the hospital. Receipts should be
		numbered.
		3. Prescription for medicines and pharmacy bills
3	File 3	Investigation & lab reports : All investigation reports for tests done during
·	THES	hospitalization
4	File 4	Other documents: In case of Road traffic accident, please submit MLC/FIR
5	File 5	Cancelled cheque should have name of account holder printed, IFSC code and
٦	File 3	Account number. Cheque should be of either proposer or patient.
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6	File 6	If Amount is= > I Lakh, KYC documents (Recent photograph, Aadhaar card or
_	Others	License or Passport)
7	Others	Original A-Scan report along with IOL Sticker and Tax paid invoice in case of cataract claim
8	Others	Angiography report & scanned original Implant Invoice along with payment
°	Others	receipts & Implant Labels / Stickers for Stents/Mesh/IOL in case of Coronary
		artery disease
9	Others	Road Traffic Accident: Copy of the First Information Report (FIR) from Police
·	Others	Department, copy of the Medico-Legal Certificate (MLC), first consultation
		paper, treating doctor certificate confirming whether patient was under the
		influence of alcohol / any drug at the time of incidence or not, detailed
		narration of incidence.
10	Others	Confirmatory blood test report & platelets report in case of Dengue/Malaria
10	Guiers	bottom active process report in case of Bengue, Maiana
11	Others	Typhidot / Widal report in case of Typhoid fever
**	Others	Typhidoty widarreport in case or Typhold Tever
12	Others	Histopathology report in case of Cancer
13	Others	Ultrasound report & certificate confirming obstetric history (Gravida, Para,
		Living children, Abortions) from treating doctor.(Maternity Claim)
14	Others	Ultrasound report & First consultation paper in case of Kidney stones/Gall
		stones