## **Guidelines for availing Cashless/ Reimbursement Facility**

## <u>Cashless Process - To avail Cashless Hospitalization Treatment at Network Hospitals</u>

**Step 1:** The list of Network Hospitals offering cashless facility for treatment by Safeway TPA can be accessed using the link <u>Network Hospitals</u>.

**Step 2:** Beneficiary will have to produce the Health Card issued by Safeway TPA along with any other valid KYC document such as Passport, Voter's Identity Card, Driving License, Aadhaar Card, PAN Card etc. at the Hospital Insurance Desk.

**Step 3:** Hospital will send Pre-authorization Request with the treatment details, past history and clinical notes along with estimate of hospitalization expense to the TPA.

**Step 4**: The TPA will verify all the documents before processing the claim for cashless facility as per the terms and conditions of the Policy.

**Step 5:** TPA will provide the initial approval to the Hospital if otherwise found eligible.

**Step 6**: For settlement of claims upon discharge, the TPA will provide sanction to the Hospital through an e-mail communication after the Hospital shares all the relevant discharge details to the TPA; post which the patient can get the Discharge from Hospital.

## Reimbursement Process – For Hospitalisation claims in Non Network Hospitals

**Step 1**: For Hospitalisation claims in connection with treatments in Non- Network Hospitals, intimate the TPA within 48 hours from the time of admission.

Intimation about the hospitalisation can be done through the e-mail ID intimation@safewaytpa.in

At the time of intimation, the employee should provide details such as Safeway TPA Health Card No/PF No., Patient Name, Date of Hospitalization, Ailment, tentative Date of Discharge, Name of Hospital with Address, Approximate Hospitalization expenses.

**Step 2**: Download the Claim Form, Part A.

**Step 3**: Submit the duly filled and signed Claim Form along with relevant documents to TPA in the following Address

Safeway Insurance TPA,

3<sup>rd</sup> Floor, Govardhan Building,
Chittoor Road,
Ernakulam -682035,
Ph. No. 0484-4869980

Claims pertaining to Domiciliary expenses (in eligible cases) will have to be submitted to the TPA within 30 days of incurring the expenses by filling Part A Form along with Original GST Bills, Doctor Certificate & Proper Validated Prescription.

- **Step 4**: TPA will inform the Primary Insured within 7 days of receipt of Claim through email/SMS.
- **Step 5:** TPA will assess the eligibility of the claim based on the documents submitted in line with the terms and conditions of the Medical Insurance Policy and will settle the claim. In case the claims do not adhere to the terms and conditions of the Medical Insurance Policy, the same may be rejected.
- **Step 6**: In case of any shortfall of documents in the claims submitted, queries will be raised by the TPA through SMS/E-mail.
- **Step 7**: Once the TPA receives all relevant documents, the TPA will settle the claim and the same will be sent to Insurance Company for further validation.
- **Step 8 :** Amount will be credited to the account of the Beneficiary normally within 8-10 working days after the TPA approves the claim.