

SAIFEE HOSPITAL - TPA CELL

Saifee Hospital has tie ups with the following TPA's. All patients having Individual and corporate policies of the following insurance companies will be accepted:

Sr. No.	TPA Company
1	Family Health Plan Insurance TPA Ltd. (Corporate) ***
2	Health India Insurance TPA Services Pvt. Ltd. (Corporate) ***
3	MD India Healthcare Services TPA Pvt. Ltd. (Corporate) ***
4	Medi Assist (Corporate) ***
5	Volo Health Insurance TPA Pvt. Ltd. (Corporate) ***
6	Heritage Health TPA Pvt. Ltd. (Corporate) ***
7	Health Insurance TPA (Corporate) ***
8	Paramount Health Services & Insurance TPA Pvt. Ltd. (Corporate) ***
9	ICICI Prudential
10	Generali Central Insurance Company
11	Liberty General Insurance
12	Tata AIG General Insurance Company Ltd.
13	HDFC ERGO upto <u>FIRST CLASS</u>
14	SBI GENERAL INSURANCE upto <u>FIRST CLASS</u>
15	Go Digit General Insurance Ltd. Upto <u>FIRST CLASS</u>
16	Ericision TPA (Corporate) ***
17	Galaxy Health Insurance
18	Manipal Cigna Health Insurance
19	Magma General Insurance Limited

*** --- ONLY AFTER SEEING THE INSURANCE POLICY/CARD

GUIDELINES FOR INSURANCE PATIENTS

At Saifee Hospital dedicated and efficient team of TPA cell will assist and guide you to avail hassle free cashless services.

Following are the guidelines for your kind information.

TYPE OF ADMISSION:

- **Planned Admission:** For cashless hospitalization, apply for authorization at least 3 days prior to the date of admission. This gives time to process queries raised by TPA.
- **Emergency Admission:** Admission without prior approval from Third Party Administrator (TPA) against policy card-ID.

1. At the time of admission you have to pay deposit as normal cash patient.

2. Apply for cashless authorization within 24hrs after admission.
3. Only after due authorization patient will be converted in cashless category.

7 SIMPLE STEPS FOR CASHLESS AUTHORISATION

Step 1: Collect pre authorization form from the **TPA Counter** by showing your TPA ID card.

Step 2 : The pre authorization form has three parts.

Part A: Has to be filled by the patient /relatives.

Part B: Has to be filled by the treating doctor.

Part C: Has to be filled by the TPA Cell.

Step 3 : After the treating doctor has filled the form submit it at the TPA cell, along with the enlisted documents. The TPA at the counter fills in the cost estimate and forward it for scrutinization.

LIST OF DOCUMENTS TO BE SUBMITTED (XEROX)

1. Insurance ID card and photo identification
2. Policy copy/Renewal copy
3. First consultation letter (OPD Letter)
4. Previous Discharge Summary (if any)
5. Investigation reports (if any)

Other than the documents above mentioned, please submit the following documents if applicable:

FOR SURGERIES:

1. All relevant investigation reports
2. Documents of any previous surgery

IF MEDICO-LEGAL CASE

1. MLC Report
2. Narration of incident
3. FIR

Step 4: After approval from the MMS the form is faxed to the concerned TPA.

Step 5: After 4-5hrs inquire with the TPA cell about the status of the authorization.

Step 6: If any query is raised submit the relevant documents at the TPA cell as soon as.

Step 7: It will take at least 5-6 hrs for the TPA to send final approval.

OUTSTANDING (EXCESS) BILL AMOUNT:

If the bill amount exceeds the authorized limit, the billing department will send a reminder for further enhancement to the TPA. In case, the TPA denies the enhancement of the amount, the patient needs to start making interim

payments and settle the bill.

DISCHARGE:

Before discharge the patient's bill and discharge summary will be submitted to the TPA cell so that it can be sent to the TPA for enhancement. Always sign final bill (original copy). You will get photocopy of discharge summary, bill and reports as original needs to be submitted for the claim.

DENIAL:

In case of denial the patient has to bear the expenses and later can go for reimbursement.

KEY POINTS TO NOTE

1. A certain defined procedure has to be followed for obtaining approval from the TPA processing a TPA card does not entitle the patient to get cashless benefits.
2. Every TPA patient having an authorization /approval, at the time of admission would pay a deposit of Rs.30,000/-. However the deposit amount retained by the hospital at the time of discharge would be based on the final bill of the patient and would be as follows:

Sr.	FINAL BILL AMOUNT	DEPOSIT WITH HOSPITAL
1)	Less than 50,000/-	5,000/-
2)	50,000 - 99,999/-	10,000/-
3)	1,00,000 - 1,99,999	20,000/-
4)	2,00,000-2,99,000	30,000/-
5)	3,00,000 and above	30,000/- or More
10 % of the bill amount		

3. If the patient opts for higher class than the approved class by the TPA the difference will be collected from the patient at the time of discharge.
4. It is **mandatory to sign the indemnity form** (for balance payment) given at the TPA desk, while submitting the pre authorization form.
5. The patient must give a proper and true medical history and details to the doctor while filling the pre authorization form. If the **claim is denied due to inconsistent information** in pre authorization and history or treatment papers, the **patient has to settle the hospital bill**.
6. From the refundable deposit the hospital will deduct all service charge not covered by the TPA company.
7. The right to approve or deny the claim remains with your TPA Company. Any disputes about claim will need to be addressed to your TPA Company/ insurance agent. The hospital is not liable for any denials.
8. However you are requested to note that this is a value added service, and **the final responsibility to obtain the authorization for cashless service**, will rest with the customer. The role of the hospital will be purely to assist the customer in the authorization process.

Kindly cooperate & assist us to provide you the hassle free cashless service.

For any further query please contact

TPA Desk Timings: 09.00 am. - 5.00 pm.

TPA Desk - Ms. Sonal & Ms. Meenakshi (Contact No-022 - 67570407)

Email Id- saifeetpa@outlook.com

Billing Department: 022-67570217/240