

IMPORTANT FAQs TAKEN OUT FROM THE HITPA WEBSITE WITH SOME ADDITIONS

CONTACT PERSON AT HITPA BANGALORE: MR. ROHIT KUMAR
MOB NO. 8448399486

MEMBER ID CARD RELATED

How to download e card

Go to website www.hitpa.co.in

Download E Card IBA card

Select UCO

Select policy number

Mention employee/PF number

Download E Card

How to correct mistake in ID card?

You may please send your ID card back to us, mentioning the mistakes example: name, age, gender, and photo etc. along with the rectification required. The corrected card will be dispatched to you within 7 days without any additional cost. You can also report the mistakes in the card to our call center and they will guide you.

CLAIM RELATED

What is the process of availing cashless/preauthorization facility in the hospital?

Preauthorization is facilitated by TPA at network Hospitals. Patient should contact an Empanelled Hospital for treatment. Hospital would then send the duly filled preauthorization request to HI TPA prior to planned hospitalizations. For emergency cases preauthorization process can be initiated within 24 hours of hospitalization.

HI TPA would then process the pre-authorization based on policy terms and convey its decision on admissibility to the Hospital. If the cashless is extended, patient is required to pay only for the Non Payable Expenses.

If the Preauthorization is denied, patient pays the hospital bill, collects original receipts and other documents at the time of discharge from the Hospital and files for reimbursement claim later on.

[What is the time frame for claim intimation to the TPA or insurance company?](#)

Claimant is required to intimate about a planned hospitalization in advance by 72 hours calling at the Toll Free number or logging on to the web portal www.hitpa.co.in. For Emergency Hospitalizations intimation should be sent within 24 hours of hospitalization.

[Provide me the list of documents I need to send for processing my claim as, the treatment has been done in Non-network hospital?](#)

Following documents are required for processing your claims on reimbursement basis:

- 1.Claim form duly filled & signed by the insured.
- 2.Copy of your Member ID card.
- 3.Copy of your policies.(If you mention pol number it is sufficient)
- 4.Discharge summary / Discharge card (Original, Photocopy for pre/post hospitalization claim)
- 5.Hospital bills (Original). For all consolidated amounts, the detailed breakup of the billed amount is required from the hospital.
- 6.For medicines purchased from outside, the original bills should be accompanied by a prescription from the doctor.
- 7.All investigation reports
- 8.In case of hospitalization due to accident, medico legal certificate (MLC) from hospital.
- 9.All previous treatment papers related to Ailment.
- 10.Cancelled Cheque (with pre- printed name) / Copy of passbook of the proposer for electronic fund transfer Or completely filled NEFT form stating Branch MICR Code, Branch IFSC Code, Account type, Complete Account Number duly signed by insured

We regret that our services have not been to your satisfaction. You may write/email to us giving details of your grievance. We assure you that our grievance department will address the issue within 72 hours.

Customer can also lodge a grievance at IRDA Integrated Grievance Management System or insurance company's website/call centre.

Policy holders can approach Ombudsman or Consumer Courts for unresolved disputes which are not addressed through grievance resolution channels.