

## FREQUENTLY ASKED QUESTIONS – HEALTH

### Q.1 What do you mean by a health card?

A health card is provided with your insurance policy, which you can use at network hospitals to avail the benefit of cashless treatments.

### Q.2 What do I do if my card is lost?

In case of loss or theft of card, contact our toll-free helpline number **1800 210 3366 / 1800 210 6366** or e-mail us at [sbig.health@sbigeneral.in](mailto:sbig.health@sbigeneral.in)

### Q.3 What do you mean by Network/ Non-Network Hospitalization?

A Hospital, which has an agreement with us for providing Cashless treatment, is referred to as a 'Network Hospital'. Cashless facility is provided ONLY at the network hospitals. Non-network hospitals are those with whom we do not have any agreement and any policyholder seeking treatment in these hospitals will have to pay for the treatment and later claim as per reimbursement procedure.

### Q.4 What is the procedure for applying for cashless health insurance?

At SBI General Insurance, the process to apply for cashless treatment is simple. Listed below are the steps to avail the benefit of cashless health insurance:

1. Intimate the insurer at the earliest.
2. Visit the network hospital where the treatment is to be taken.
3. The third part administrator desk of the network hospital will connect with the insurance company for cashless treatment.

With us you do not have to worry, the hospital will verify the details and send the duly filled pre-authorization form. We verify all the details with the policy benefits. We intimate our decision within a day or so. Once the cashless claim is approved, a first response is sent to the healthcare provider within 60 minutes. The treatment expenses at the network hospital will be settled swiftly.

### Q.5 How long does it take to receive a response for pre-authorization approval and final approval in a cashless claim?

You can expect to receive a response for pre-authorization approval and final approval within 120 minutes for a cashless claim.

### Q.6 What is the current status of my cashless claim?

You will receive status updates at every process step/interval via email/SMS. The updates can also be checked on the mobile app. Alternatively, the toll-free number - **1800 210 3366 / 1800 210 6366**- can be dialled or e-mail us at [sbig.health@sbigeneral.in](mailto:sbig.health@sbigeneral.in) where an update on the claim status will be provided by our Executive.

### Q.7 Where can I see the status of my reimbursement claim?

To check your claim status: Mail us at [sbig.health@sbigeneral.in](mailto:sbig.health@sbigeneral.in) or Call us on **1800 210 3366 / 1800 210 6366**. You can also check claim status on our mobile app.

### Q.8 What is pre and post hospitalization?

**Pre-hospitalization** expenses are the medical costs you pay before going to the hospital for the same illness. **Post-hospitalization** expenses are the medical costs you pay after leaving the hospital for the same illness.

### Q.9 What are the reasons for the deduction in reimbursement claim?

Deductions in reimbursement claims can occur due to several reasons:

Non-medical expenses – As per IRDA regulations. Other deductions vary depending on the specific case.

### Q.10 Where can I find the query letter and settlement letter?

In the Reimbursement process, once we initiate a query, we ensure prompt communication by sending a query letter to the customer via email. Upon resolving the query, we send a settlement letter detailing the outcome to the customer through the same email channel. For additional assistance, please contact us

through our Toll-Free number at **1800 210 3366 / 1800 210 6366** or via email at **[sbig.health@sbigeneral](mailto:sbig.health@sbigeneral)**

**Q.11 Within what timeframe am I required to submit a reimbursement claim?**

Reimbursement claims should be submitted within 30 days after discharge from the hospital