

Health Insurance Claim Process

- Insured or his representative needs to intimate at least 48 hours' prior a planned hospitalization and in case of an emergency situation, within 24 hours of hospitalization
- Insured or his representative to call on toll free no. 1800 2666 or forward an SMS "HEALTHCLAIM" to 575758 to receive call back from ICICI Lombard Health Care
- Customer provides following information during claim intimation to ICICI Lombard Health Care and receives Claim Intimation Service Request Number as reference number. This reference number should be mentioned in the claim form during claims reimbursement:
 1. UHID Number
 2. Policy Number
 3. Patient Name
 4. Name of Caller
 5. Caller's Contact Number
 6. Relationship with the Proposer
 7. DOA
 8. Expected Length of stay
 9. Reason for Admission
 10. Name of the Doctor
 11. Hospital Name
 12. Hospital complete address with landmark
 13. Hospital City
 14. Hospital State

Note: All the above mentioned details are mandatory to raise claim intimation service request.

Documents Required* (In Originals)

Please take care to submit all the below documents while submitting your reimbursement claim:

- Duly filled Claim form (signed by the Insured and the Treating Doctor)
- Discharge summary (with details of complaints and the treatment availed) o Final Hospital Bill (detailed break-up) along with interim bills
- Payment Receipts
- Doctor's consultation papers

[Download](#) Hospitalization Claim Form

[Download](#) Hospitalization Claim Form if claim amount is greater than 1 Lac

[Download](#) OPD Claim Form

[Download](#) Cashless Form

For Further information – You may please follow the link <https://www.icicilombard.com/IL-Health-Care/claims.html>