Case Details

Status At The Time Of Investigation

Claim Number - 20140000465

Claim Amount - 12345

Claim Status - Open

Claim Sub Status -

Current Status From GIST

Claim Status - Open

Claim Sub Status -

Closure Date -

Settled Amount - 0

Policy Details

Product Name - KotakGroupHealthCareNonEmployerEmployee

Policy Number - 1034944400

IMD NAME - BANC ASSURANCE A GST

IMD Code - 1171360000

IMD Flag - 🟢

Policy Type - Individual Basis

Policy Start Date - 04-06-2021

Policy End Date - 03-06-2022

Policy Category - Indemnity

Policy Sub Type -

Policy Holder Address - PADMA DEEP APARTMENT , , , 400028 - BHAWANI SHANKAR MUMBAI, MUMBAI, MAHARASHTRA, India

Member Details

Member Name	- CASSIUS MARCELLUS CLAY	Member ID	- 1000593951
Certificate Number	- 1034944400	Relation	- Self
Sum Insured	- 500000	Addition Effective Date	- 04-06-2021
Deletion Effective Date	-		
First Policy Incept Data	- 2021-06-04 00:00:00.0000000	Member Flag	- 🟢
Member Contact Number	- 7666543278	Member Email Id	- NILESH.BALA5@GMAIL.COM

Claim Details

Nature Of Loss	- Critical Illness Cover	Claim Type	- Select...
Diagnosis	- Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	Claim Reported In Days	- 0
Date Of Admission	- 08-06-2021	Date Of Discharge	-
Number Of Days Hospitalised	- 0		

Hospital Details

Hospital Code	- 60000001	Rohini Code	-
Name Of Hospital	- The Mission Hospital	Hospital Type	- Private
No Of Beds	-	Hospital Flag	- 🟢

Address Of   -   PLOT NO.219 (P),   Location Of   -   BURDWAN ARRAH
Hospital   Hospital

Claim Trigger Point

Trigger 1 Auto Remark

Trigger Remark

20140000465

Trigger Remark

20140000465

Trigger Remark

20140000465

Home Visit

Visit done

No

If No - Reason

Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer

If Yes - Visit Date

Appointment Taken

If No - Reason

If Yes - Name of insured with whom appointment was taken

Mobile no

Member Address

Name of Patient

Date of Birth of Patient

Gender

Statement Collected

If No - Reason

If Yes - Finding

Any discrepancies

If Yes - Finding		Any PED / Non-Disclosure findings	

Insured Habits

Past documents collected		If No - Reason	

If Yes – please specify	

KYC Documents collected		If No - Reason	

If Yes	○ Matching With Claim Document ○ Not Matching with Claim Document	If No - Reason	

Vicinity verification

Visit done	No	If No - Reason	Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer
If Yes – please specify		If Yes - Visit Date	

Visit to Family Physician

Name of Family Physician		Location	
Contact number		Distance from Insured Home	
Visit to Family Physician	No	if No - Reason	Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer
If Yes - Registration Number		Qualification	
Statement Collected		Any PED / Non-Disclosure findings	

In Cases of First Consultant / Referral doctor

Name of Family Physician	Location
Name Of Consultant	Name Of Consultant

Contact number	Distance from Insured Home
7653453453	4

Visit to Family Physician	if No - Reason
Yes	

If Yes - Registration Number	Qualification
Pre-Existing Disease identifie	Lorem Ipsum is simply dumn

Statement Collected	Any PED / Non-Disclosure findings
No	No

External 3rd Party Investigation Final Conclusion

Investigators Final Observation & suggetion

Lorem Ipsum is simply dummy text of the printing and typesetting industry. Lorem Ipsum has been the industry's standard dummy text ever since the 1500s, when an unknown printer took a galley of type and scrambled it to make a type specimen book. It has survived not only five centuries

Investigators Final Conclusion

Payable

Investigators Final Recommenndation

Investigation & Evaluation