

Group Smart Cash - Claims procedure

Claim Intimation

In the event of any claim, intimation may be given as early as possible

Contact point for intimation:

➤ Toll Free number: 18002120

➤ Email: care@zurichkotak.com

The following information should be provided while intimating the claim:

- Policy Number
- Name and contact number of the Insured/Insured Person
- Nature of sickness / accident,
- Details of the hospital
- Date of admission and discharge
- Any other relevant information.

Claims documents submission:

Claim documents to be submitted in soft copy as early possible not later than 30 days of hospitalization at the following email address - svc-in-zkgi.hdc@zurichkotak.com

Claim processing office:

Claims Department

ZurichKotak Mahindra General Insurance Company Ltd.
Unit No. 401, 4Th Floor, Silver Metropolis,
Jai Coach Compound, Off Western Express Highway,
Goregaon East, Mumbai – 400063.

Claim document checklist:

- Duly filled claim form(s)
- NEFT details of the proposer and financial institution who has given the loan.
- Photo ID proof of the patient.
- Copy of hospital discharge card & Hospital bill
- Copy of loan certificate
- KYC details of the proposer if the claim amount is above 1 lac.
for high length of stay, copy of treatment papers may be attached.

Disposal of claim:

- All admissible reimbursement claims will be paid through NEFT
- In case the claim is not tenable as per the terms and conditions of the policy, the same will be communicated to claimant in writing.

Parameter (For all type of claim)	TAT in days
For straight through cases where there is no requirement of further document after submission of first set of documents	T+5 where T is the date of submission of documents
For non-straight through cases where document requirement is there	T+5 where T is the date of submission of the final set of documents

Claim verification – wherever triggered

Within 15 days

Days referred above are working days and does not include Saturday / Sunday and public holidays

Escalation Matrix:

	Name	Email ID	Mobile number
Level 1	Vinayak Rawool	vinayak.rawool@zurichkotak.com	8976898393
Level 2	Ramchandra Salgaonkar	r.salgaonkar@zurichkotak.com	8828078478
Level 3	Dr Pravin Rupvate	pravin.rupvate@zurichkotak.com	8828001643
Level 4	Atmaram Parab	atmaram.parab@zurichkotak.com	8097045871