

PROCESS FLOW FOR INDIGO AIRLINES – INBOUND TRAVEL

CASHLESS ASSISTANCE IN EMERGENCY/ ACCIDENTAL HOSPITALIZATION CASES

NOTIFICATION TO TPA

1. Please call and notify on the 24 hours telephone number. Do notify before seeking any medical consultation (unless it is an accident/emergency)
2. On admission it is to be confirmed that the admission is NOT due to any pre-existing conditions or any exclusion listed in the policy. On ascertainment, Insurance Company shall settle the payments directly with the hospital up to the limits shown in the certificate.
3. The documents listed below have to be sent immediately by email on bagi.travel@bhartiassistance.co.in
 - a) Policy
 - b) Passport, air ticket, and immigration stamp copy

Claims Department - Bharti AXA General Insurance

C/O Bharti Assist Global Private Limited, Unit No. 219-221, 2nd Floor, Splendor Forum, Plot No. 3, District Centre Jasola, New Delhi- 110025, India, E: bagi.travel@bhartiassistance.co.in P: +91 11 4222-1400 (24 X 7)

ASSISTANCE FOR EVACUATION

1. Notification to Bharti Assist Global Private Limited

In case of need of Evacuation of Clients from place of temporary residence in India to home country or nearest hospital for further treatment, the Client's representative should call and notify on the 24 hours telephone number immediately. It is important to notify before seeking any medical consultation (unless it is an accident/emergency). Kindly see the limits in your certificate, evacuation due to a pre-existing condition or exclusion in the certificate is not covered.

- a. Policy
- b. Passport, air ticket, and immigration stamp copy

Claims Department - Bharti AXA General Insurance

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ASSISTANCE FOR REPATRIATION

1. Notification to Bharti Assist Global

In case of death of the Client during the policy period due to any covered accidental injury or illness requiring Repatriation of Client's mortal remains from India to home country, the Client's representative should call and notify on the 24 hours telephone number immediately. Please see limits under your certificate.

2. The representative will have to submit the below listed information for initiating the process.

- a) Policy.
- b) Passport, air ticket, and immigration stamp copy.
- c) Autopsy Report with cause of death.
- d) Medical reports of treatment. (if death occurred during treatment)

Claims Department - Bharti AXA General Insurance

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OUT PATIENT MEDICAL AND NON-MEDICAL CLAIMS

For outpatient treatments and claims under Medical and other non-medical sections, the Clients will have to self-pay and file the claim directly with the Claims Department while they are staying in India or upon return to home country by sending the claim documents at the address given below.

Karvat Cover More Assist Pvt. Ltd.

5th Floor, Mistry Bhawan, 122, Dinshaw Vaccha Road, Churchgate, Mumbai 400020. P: +91 22-67166300

CHECK LIST FOR DOMESTIC TRAVEL CLAIMS

MEDICAL EMERGENCY AND ACCIDENTAL DENTAL TREATMENT

1. Claim form duly filled and signed.
2. Policy Certificate Copy
3. Medical reports and discharge summary issued by the hospital or prescriptions and medical records from the medical practitioner furnishing the name of the Clients, period of treatment and details of treatment rendered i.e. line of treatment and final diagnosis.
4. Original hospital bills with proper description of services rendered and payment receipts towards expenses incurred
5. Attending Surgeon's/Medical Practitioner's Prescription advising hospitalization
6. Name, Address and Phone number of the local medical officer/family physician in India.
7. Copy of Air tickets and boarding passes for the sector travelled

EMERGENCY MEDICAL EVACUATION

1. Medical reports (Presenting complain, Diagnosis, Treatment given, Discharge condition etc.) and transportation details issued by the evacuation agency, prescriptions and medical report by the attending Medical Practitioner furnishing the name of the Clients Person and details of treatment rendered along with the statement confirming the necessity of evacuation;
2. Documentary proof for all expenses incurred towards the Medical Evacuation.
3. Claim Form duly filled in and signed
4. Copy of policy Certificate
5. Original Air Ticket / Boarding passes

REPATRIATION OF MORTAL REMAINS

1. Copy of the death certificate, (Also providing details of the place, date, time, and the circumstances and cause of death)
2. Copy of the postmortem certificate, if conducted;
3. Documentary proof for expenses incurred towards disposal of the mortal remains including the name of the airlines, burial details, expenses incurred, other incidental cost with bifurcation of expenses
4. In case of transportation of the body of the deceased to the Place of Residence, the receipt for expenses incurred towards preparation and packing of the mortal remains of the deceased and also for the transportation of the mortal remains of the deceased
5. Quotation or estimate of repatriation cost
6. Claim Form dully filled and signed by nominee.
7. Copy of policy Certificate
8. Original Air Ticket/Boarding passes
9. Invoices (Itemized) and money receipts in original for the amount claimed

PERSONAL ACCIDENT - ACCIDENTAL DEATH

1. Police report in original if the accident shall have taken in the public place or premises
2. Death Certificate clearly stating the reason of death
3. Post Mortem Report (In case of death)
4. Detailed Sequence of events
5. Medical records giving the details of accident, nature of injury(in case of hospital visit)
6. Certificate of disability from civil surgeon in India or any other equivalent recognized doctor authorized by state government.
7. Medical report from the attending doctor
8. Letter from the Airline confirming the same.
9. Valid ticket or certificate from the Common Carrier establishing the Clients' bonafide travel in the affected Common Carrier at the time of the Accident.
10. Claim Form duly filled in and signed
11. Copy of policy Certificate
12. Depending upon the peculiarity of the case, additional documents/information's will be asked for

Please find below the reimbursement covers available for travel undertaken within India after landing in India and immigration clearance.

TOTAL LOSS OF CHECKED IN BAGGAGE AND PERSONAL EFFECTS

1. Duly filled and completed claim form
2. Policy copy
3. Air tickets along with boarding passes
4. Copy of baggage tag's
5. Property Irregularity Report issued by the common carrier mentioning the number of baggage's checked-in.
6. Original Certificate from airline authorities stating that baggage has been lost along with compensation details
7. Adequate proof of ownership of items contained within checked-in baggage

TRIP CANCELLATION AND INTERRUPTION AND TRAVEL INCONVENIENCE

1. Duly signed claim form
2. Policy Copy
3. Proof of death or hospitalization of Client's person or of spouse, parents & children.(if applicable)
4. Medical reports and doctors statement if trip is cancelled or interrupted due to medical reasons. (if applicable)
5. Termination letter from the company if trip is cancelled due to employments.(if applicable)
6. Letter from the airlines clearly mentioning the reason of cancellation and interruption of flight(if applicable)
7. Proof of material loss or damage to the property (e.g. police report, media coverage) (if applicable)
8. Copy of complete schedule itinerary for all the sectors
9. Copy of new itinerary in case trip got reschedule along with boarding passes.
10. Copies of reimbursement statements issued by an airline carrier, airport facility, car rental agency, travel agent, hotel/ motel or other similar establishment or any other insurance company providing reimbursement to you for the loss
11. All original bills and receipts for expenses which got forfeited, nonrefundable in nature. All original bills and receipts for additional reasonable and necessary transportation expenses and accommodation charges due to interruption of schedule flight

MISSED CONNECTION

1. Duly signed claim form
2. Policy Copy
3. Copy of complete schedule itinerary for all the sectors
4. Copy of new itinerary in case trip got reschedule along with boarding passes
5. Copies of reimbursement statements issued by an airline carrier, airport facility, car rental agency, travel agent, hotel/ motel or other similar establishment or any other insurance company providing reimbursement to you for the loss
6. All original bills and receipts for expenses which got forfeited, nonrefundable in nature
7. All original bills and receipts for additional reasonable and necessary transportation expenses and accommodation charges due to interruption of schedule flight

LOSS OF DEPOSIT OR CANCELLATION (Hotel & Airline)

1. Claim Form – completed and signed by the Client.
2. Copy of policy Certificate
3. Copies of boarding pass, ticket, baggage tags.
4. Original letter from the concern authority mentioning the amount paid to them or contracted to be paid due to the booking. Also confirming the cancellation and refund details If any
5. Original Air ticket/itinerary, where you were originally supposed to travel
6. Medical record (If the cancellation was due to any medical reason)
7. Money receipt in advance for the amount paid or contracted to be paid due to the booking.
8. Depending upon the peculiarity of the case, additional documents/information's will be asked for