

**Sub: Letter of Consent for extending Cashless facilities for Bajaj Allianz General Insurance Co. Ltd. Policy holder**

Dear Service Provider,

Bajaj Allianz General Insurance, today, is one of the largest private insurers in the industry with offices in over 1100 towns and cities. We have always been known as a forward-looking customer-centric organization. As a strong background of more than 18,400 + network hospitals include our service providers network across the country, and it is empowering customers to take the best medical facilities near them.

Bajaj Allianz General Insurance Co. Ltd. (hereinafter referred to as "the company ") has agreed to enter into a business arrangement with \_\_\_\_\_<Hospital Name> for providing cashless to beneficiaries of Bajaj Allianz General Insurance Co. Ltd. Health Policy. This letter contemplates that both the company and Provider agrees to abide by the terms as mentioned below.

1. The Hospital undertakes to provide the service in a precise, reliable and professional manner to the satisfaction of Bajaj Allianz General Insurance Co. Ltd. and in accordance with additional instructions issued by Bajaj Allianz General Insurance Co. Ltd.
2. The Hospital shall allow Bajaj Allianz General Insurance Co. Ltd. to conduct audits of their systems policies, process as and when deemed necessary by Bajaj Allianz General Insurance Co. Ltd. Such audits shall be conducted by Bajaj Allianz General Insurance Co. Ltd.'s audit team or any independent third party appointed by Bajaj Allianz General Insurance Co. Ltd. with prior intimation to the Hospital for all cases those directly relate to the services under this agreement
3. The Hospital shall allow Bajaj Allianz General Insurance Co. Ltd. to conduct audits of the bills as and when necessary by deemed Bajaj Allianz General Insurance Co. Ltd.. Such audits shall be conducted by Bajaj Allianz General Insurance Co. Ltd. audit team without prior intimation to the Hospital.
4. Hospital will submit all the documents within 15 days from the date of the discharge of the patient/Insured Beneficiary and Bajaj Allianz General Insurance Co. Ltd. will make payment of eligible bills within 15 days from the date of receipt of such submission. However if required, Bajaj Allianz General Insurance Co. Ltd. can call for further document related to treatment to process the case, in which case the payment may be delayed beyond 15 days as contemplated herein (Depending on the query response received from the Hospital)
5. The Hospital also hereby indemnify and keep Bajaj Allianz General Insurance Co. Ltd. Indemnified for its breach of any representations and warranties, or for its not obtaining license or registration under local, state or National Laws, and also registered with such agency/authority as prescribed IRIDAI, from time to time, as may be applicable and also for the doctors who treat the Members in Hospital are not duly qualified holding required Degree/qualifications from the authority competent to issue such Degree/qualifications or for any inadequate or deficiency of services/Health Checkup services, or for breach of confidentiality or for acts, commissions and omissions of the Hospital, its employees,

Doctors, Nurses or other staff/persons who are involved in the process of providing the Cashless Medical Treatment or healthcare services to the Members/Beneficiaries or for acts, commissions and omissions of Hospital, its staff, employees, doctors, agents etc., or for breach of this Agreement, resulting in any claims, damages, actions, proceedings suits [including the advocate fees incurred by our company, if any etc.,] against Bajaj Allianz General Insurance Co. Ltd. For all these obligations and indemnities, the Hospital shall also be liable to the Members who suffer due to various aspects mentioned in this clause”.

6. All payments shall be made through direct electronic fund transfer subject to deduction of tax at source as applicable under the relevant laws.
7. Each party shall maintain confidentiality relating to all matters and issues dealt with by the parties in the course of the business contemplated by and relating to this agreement. The Hospital shall not disclose to any third party, and shall use its best efforts to ensure that its, officers, employees, keep secret all information disclosed, including without limitation, document marked confidential, medical reports, personal information relating to insured, and other unpublished information except as maybe authorized in writing by Bajaj Allianz General Insurance Co. Ltd., Bajaj Allianz General Insurance Co. Ltd. shall not disclose to any third party and shall use its best efforts to ensure that its directors, officers, employees, sub-contractors and affiliates keep secret all information relating to the hospital including without limitation to the hospital’s proprietary information, process flows, and other required details.
8. All the claim documents shall be dispatched at the following address of Insurance

Company Address :

**Health Administration Team,  
Bajaj Allianz General Insurance Company,  
2<sup>nd</sup> Floor, Bajaj Finserv Building,  
Behind WickField IT Part, Viman Nagar,  
Pune – 411014, Maharashtra**

This letter is being entered into to confirm the understanding of principal terms and our willingness to provide Cashless services in mutual good faith.

\_\_\_\_\_ <Provider name> to provide the documents as listed below along with this Letter of Consent for the payment

- **Valid registration certificate (Hospital)**
- **Duly filled cashless form with First Consultation Paper, Investigation Reports Supporting Diagnosis, ICP paper.**
- **Hospital rate Chart/SOC/Tariff**
- **Duly filled NEFT mandate form (Hospital)**
- **Pre-printed cancel cheque (Hospital)**
- **Pan card copy (Hospital)**
- **ROHINI registration certification (if available) (Hospital)**
- **CKYC documents (Aadhar & PAN) of Proposer & Patient.**

*Please Note- Attachment size should be below than 8 MB, you may share documents in part mail in case of size is more than permitted limit (8mb).*