



Simplifying healthcare; Multiplying Prosperity

MediBuddy Guide for Enrolment

Website : portal.medibuddy.in

Login



- Website
 - Enter URL in address bar of your browser : <u>https://portal.medibuddy.in</u>
 - Sign in with Username and Password as received via mail from intuit@mediassistindia.com
 - Please change your default password after you have logged in for the first time



Homepage

- Click on "View Your Coverage, View Policy & Top Up Options" to know more about policy coverage details
- Click on **Download E-cards** to generate E-cards.
- Click on **Enrolment** to start enrolling your dependents and yourself for Medical Coverage 2016-17



Your Health Policy

FY16-17 Insurance enrollment is live now! Click on Online enrolment to make the right selection for your family by August 12th, 2016.

Online enrolment		Download eCard
View policy	Тор	Up Options
View Your Co	verag	e



Preventive Healthcare

Book an appointment for annual health check-up for yourself and your dependents. Follow it up with Wellness Coaching by talking to an expert who would help you in setting, monitoring, motivating and achieving your health goals.

View Policy	Annual Health Check Up
Wellness Coa	aching View History
View Reports	



OPD / Doctor Consultation

Avail discounts across network hospitals for Consultations, Procedures, Investigations and more.

Access OPD Home Healthcare Services



Enrol Now – Step 1

- Employee Information
 - Click on "Online Enrolment" on home page. Employee information appears here
 - You can add / edit fields Marital Status, Marriage date & Mobile Number only (Mandatory Fields)
- Enrol Dependent Details
 - User can Edit / Remove / Add your dependents for Medical Coverage 2016-17 (Currently data has been freeze)
 - Depending on relation, click on Action, Enter Name, Date of Birth for respective dependent (Data has been freeze)

						👗 Testir	nt1
				# Home	■Menu	🕩 Sign o	out
TestInt1		Employee Code		Test01			
17-Jul-1985		Gender		Male			
02-Mar-2015		Email					
Single OMarried		Marriage Date	arriage Date				
Action		Name		DOB		Age	Gender
	TestInt1		17-Jul-1985			30	м
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Enrol Now – Step 2

- Employee Information
 - Check the **"Annual Premium"** prior to confirming your enrolment
 - Click on "Confirm" button to complete your enrolment.

Employee Information			
Employee Name	TestInt1	Employee Code	Test01
Date Of Birth	17-Jul-1985	Gender	Male
Date Of Hire	02-Mar-2015	Email	syed.sajid@mediassistindia.com
Marital Status	●Single ●Married	Marriage Date	

Enrolment Dependent Details							
Relation	Action		Name		DOB	Age	Gender
Employee		TestInt1		17-Jul-1985		30	м
Father	Add						м
Mother	Add						F
Top Up Premium Coverage for base poli	cy						
Sum Insured	-Select)	Premium (Inclusive	of service tax)	0		

The prem	The premium would be deducted in the upcoming payroll				
	Sum Insured (INR)	Annual Premium (INR)			
Basic Sum Insured	500000	0			
Top up policy	0	0			
Net Payable Premium	:	0			

Confirm

Medi Assist

Enrol Now – Step 3

• Find the below "Pop-Up Alert" once user clicks on confirm. Click "OK" to Confirm



Find below "Confirmation Message" once enrolment is successfully confirmed





Download E-Cards

• Click on Download E-Cards to generate E-Cards for your dependents Confirmed by you in Enrolment Now





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Beneficiary name: TestInt1		 In the case of photoless identity cards issued to beneficiaries, acceptable proof of
Reference Number 2610958 Employee code: Test01 Relation: Self Date of birth: 17-Jul-1985 Primary insured: TestInt1 Policy period: 01-08-2015 to 31-07-2016 Policy holder: INTUIT INDIA PRODUCT DEVELOPMENT CENTRE PVT LTD Generated On: 23-07-2016 11:31:44 Toll free phone number: 1-800-425-9449	Medi Assist Medi Assist	 identity such as Aadhar Card/Passport/Driver License/ Ration Card / Voters ID Card / PAN Card should be presented at hospitals. This non-transferable identification card is valid at selected Network Hospitals & will enable Card Holder to avail cashless hospitalization only on the basis of preauthorization by Medi Assist. For the latest updated Network hospital list, login to www.mediassistindia.com MEDI ASSIST INDIA TPA PVT. LTD. Tower D, 4th Floor, IBC Knowledge Park, 4/1, Bannerghatta Road, K.M.Layout, Bengaluru, Karnataka 560029.CIN: U85199KA1999PTC025676 Website: www.mediassistindia.com Email: intuit@mediassistindia.com

Profile



• Click on Profile bottom of the page to view / Edit Profile





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OPD / Doctor Consultation

Avail discounts across network hospitals for Consultations, Procedures, Investigations and more. • Click on User Details to View / Edit Personal email ID or Mobile Number



User Profile

User Details	Change password Bank Details		
Employee full nam	le	Date of birth	1979-11-23
Corporate Name		Official email ID *	
Personal email ID	N/A	Mobile number *	N/A
Edit			

• Click on Change Password to save a new password for Login Username

User Profile

User Details	Change password	Bank Details
Old password *	Old Passwor	rd
New password *	New Passwo	ord
Retype password	I★ Retype Pass	word
Change Password		

• To Save you Bank Details Click on Bank Details

User Profile



ccount holder name *	Enter account holder name	Account number *	Enter account number	
SC code *	Enter IFSC code	Bank name *	Enter bank name	
ranch *	Enter branch name	Bank address *	Enter bank address	

• Once you save Bank details, click on Upload Cheque Leaf to upload scan image of cancelled cheque of your account



<u>ease note</u> that bank d	etails is not a mar	ndatory field, however v	we advise you to fi	l up the bank details s	so that the claim amount can be directly settled t	ю уоиг ассо
count holder name *	Enter account ł	nolder name		Account number *	 Enter account number 	
SC code *	Enter IFSC cod	e		Bank name *	Enter bank name	
anch *	Enter branch name			Bank address *	Enter bank address	
Submit Cancel aved Bank Deta Bank Name Branc	ails h Name IFSC C	ode Location	A/C No	A/C Holder Name	Action	
HDFC Bank					Upload Cheque Leaf	Remove

View Employee Policy

• Click on View "View Your Coverage" Tab on homepage to know employee Policy highlights details





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Search Network Hospitals

• Click on Search Network Hospitals to know hospitals near you





Hospitalization

Find your network hospital and also inform us about your hospitalization in advance for speedier processing of cashless and reimbursement claims.

Network hospitals Intimate eCashless

Intimate reimbursement

* The eCashless facility can be availed only if the request is raised 48 hours prior to the hospitalisation.



Claims

Submit your hospitalization claims online and track your claim status in real-time.

Submit claims Track claims



Pharmacy at your Doorsteps

Order medicines online conveniently and get them delivered at your doorstep. Please make sure you upload the prescription for ordering the medicines.

Order Medicines My orders

• When system prompts you to "Select you Insurer"

	Select your insurer	
	Select your insurer	
Select the insurance company		*



• Network Hospitals are reflected near you according to your current location



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Your Claims

• Click on "Your Claims" to know the status of your claim





Hospitalization

Find your network hospital and also inform us about your hospitalization in advance for speedier processing of cashless and reimbursement claims.

Network hospitals	Intimate eCashless
Intimate reimburser	nent

* The eCashless facility can be availed only if the request is raised 48 hours prior to the hospitalisation.



Claims

Submit your hospitalization claims online and track your claim status in real-time.





Pharmacy at your Doorsteps

Order medicines online conveniently and get them delivered at your doorstep. Please make sure you upload the prescription for ordering the medicines.

Order Medicines	My orders
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eCashless



- Click on eCashless in Menu tab to experience innovative claim submission
 - E-Cashless helps you to plan and raise Cashless Request for a planned admission without going to the hospital
 - Just fill in the details and you are ready to submit your claim

et eCashless Hospitalization	
Hospitalization For*	Mobile number (where you want to receive status updates)*
Choose the beneficiary being hospitalized 🔹	Mobile Number
Search Hospital (Enter minimum 3 characters)*	Room type*
Enter hospital name	Choose the room type 🔹
Expected date of admission*	Expected date of discharge
Date of Hospitalisation	Date of Discharge
Treatment for *	Proposed treatment *
E.g., Cataract	E.g., Lasik
Full name of your treating doctor*	Out Patient Number
Your's Doctor Name	Your OP Number



Happy to partner

	INTUIT Dedicated Email ID	Toll Free Number
For general queries	intuit@mediassistindia.com	1800 419 6744

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