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Pick the best hospital in your cover network

By Chandralekha Mukerji, ET Bureau | 25 May, 2016, 10.15AM IST



If it is not an emergency, plan your hospitalisation carefully to get the maximum benefits out of your insurance cover.

One of the most common complaints in [health insurance](#) is that the insurer did not clear the entire [claim](#) amount. Even though the [hospital bill](#) may not have crossed the sum-insured limit, your policy did not cover all the expenses. In such a situation, the bill post hospitalisation could be a rude shock.

It happens because you didn't read the policy caveats or were not aware of sub-limits and co-pay clauses. "Customers often do not read the policy documents and hence fail to understand sub-limits on rents and other expenses, miss co-pays clauses and exclusions," says Amit Bhandari, head of claims and underwriting, health insurance, ICICI Lombard General Insurance. Therefore, the insurance payout estimation goes wrong and you pay out of your own pocket.

However, this can be avoided for planned hospitalisation. To boot, many insurers and even private players are offering their services to help the policyholder find the right hospital for common procedures and surgeries.

Platforms like ICICI Lombard's 'Health Advisor' and websites like CrediHealt.com help you compare hospitals in a locality or a city on the basis of the cost of treatment, quality of care, infrastructure, room and cost for specific procedures. They also give ratings on the basis of previous customer experience and even help obtain appointments at the hospital. This information, if utilised smartly, can help you get the maximum benefits out of your insurance cover and also give you a fair idea about how much your out-of-pocket expenses will be.

Stay within the network

Unless absolutely necessary, try to select a [network](#) hospital in your neighborhood. Choosing a hospital nearby is not just convenient -it also helps keep your additional expenditures in check. Remember, the insurance policy will not pay for transportation and there is a cap on ambulance charges too.

Insurers, however, say that people blindly choose a hospital suggested by a consulting doctor. "Policyholders shortlist hospitals on the basis of advice given by a doctor who have tie-ups with a particular hospital that may not be in their vicinity or a be part of a networked hospital, and therefore lose out on cashless benefits," says Anand Roy, joint executive director, head of sales and marketing -digital business, Star Health and Allied Insurance.

Taking the reimbursement route if you have lost out on cashless benefit is not just cumbersome -it is also expensive. "Network hospitals are verified and charge discounted rates to policyholder as they have an agreement with the insurers. Not only does it ensure quality treatment , it also saves policyholders sum insured," says Roy.

Feedback

Compare costs

You know that different hospitals charge different rates for the same procedures. However, it might mean that you are getting better quality of infrastructure and doctors in the more expensive hospital and therefore the cost is higher. And you do not want to compromise with quality. So, put a filter for the top hospitals in town for an ailment. You will still see a difference in cost of up to Rs 30,000 to Rs 40,000 for expensive surgeries such as angioplasty .

Don't stop at a generic cost estimate. The devil lies in the details and you need a break-up of the costs to decide which hospital suits you the best. This information is not readily available and you would have to approach your insurer. "For network hospitals, we can provide a break-up of cost estimates for room rent, doctor's fee, surgery cost, related-procedure cost, etc., upon request," says Antony Jacob, CEO, Apollo Munich Health Insurance. Check your policy sub-limits with rates quoted by the hospital to ensure you are not exceeding any. Some of these expenses can be controlled. For one, you may choose to downgrade to a sharing room from a suite to stay within limit. But costs for some surgeries are not flexible. So, you can choose a cheaper hospital.

Pre and post-hospitalisation expenses are areas where the costs covered by policies vary hugely. "Check the the number of days covered, list of payables and non-payables and documentation required to be submitted to avoid last minute hassle," says Bhandari. You may have to save the actual receipts and medical bills to make a claim. Here again, taking the help of an insurer can smoothen the process. "Insurers can help you with doctor recommendations for a second opinion, nursing care, domiciliary hospitalisation and physiotherapy post hospitalisation," says Bhandari.

Know the rules to cut costs

Most of the fringe benefits, insurers say, are lost because the policyholder is not aware of the rules. For instance, many do not understand the difference between day care procedures and hospitalisation. In case your surgery comes under the hospitalisation category, you need to be admitted for at least 24 hours to be eligible to make the claim. "In cases where 24 hours are not completed, insurers tend to reject claims," says Bhandari.

Another common mistake is not informing the hospital in advance. Although you might have chosen a network hospital where cashless facility is there, if you do not inform the hospital at least 48 hours prior to admission you may lose the benefit.

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