



**SAFEWAY TPA SERVICE PVT.LTD.**  
**6/2, Industrial Area Kirti Nagar Near SBI Bank New Delhi-15,**  
**Tel : 011-41425671 ,25464823,25114822 Fax :011-41425672/912266466797**  
**Email-support@safewaymediclaim.com**

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***Denial of Cashless Access***

To \_\_\_\_\_ Date: \_\_\_\_\_  
\_\_\_\_\_ CID NO. \_\_\_\_\_

Subject: Hospitalization of \_\_\_\_\_ at \_\_\_\_\_

SMS ID No.: \_\_\_\_\_

Dear Sir/Madam,

We have been officially appointed as a TPA to administer your Mediclaim Policy of \_\_\_\_\_ company. We have received your request for cashless hospitalization of the above-mentioned patient .We have verified the Insured's coverage terms and condition, as per his / her Insurance plan. On primary scrutiny of the submitted documents, we are unable to issue authorization/credit letter to the said hospital for the reason/s.

- Your insurance policy /validity has expired/Data not available.
- Admission requested in a hospital that is not in our Network.
- Amount of sum Insured is exhausted /the balance amount of Sum Insured is too low for the Ailment stated.
- The Medical information furnished by you is insufficient for us to conclusively establish your eligibility for the cashless access.
- The "First year Exclusion" Clause is applicable to the said Ailment.
- The "First 30 days Exclusion" Clause is applicable to the said Ailment
- "Pre-existing condition" Clause is applicable for maternity coverage.
- The said ailment is a standard exclusion.
- Any other

Authorized Signatory \_\_\_\_\_ Stamp \_\_\_\_\_

**IMPORTANT:- Please note that the denial of authorization for cashless access does not imply denial of treatment and does not in any way prevent you from seeking necessary medical attention or hospitalization /claiming for reimbursement.**