MDIndia Health Insurance TPA Private Limited

One of India's Leading TPAs

Most Preferred Partner in Efficient Health Claims Management

ISO 27001:2013 | ISO 20000-1:201
CRISIL Certified| HIPAA Certified

1. Employee Login · To Login please enter your Employee ID & Password in the given text box and click on Login. Post successful login user will be navigated to Dashboard Screen.
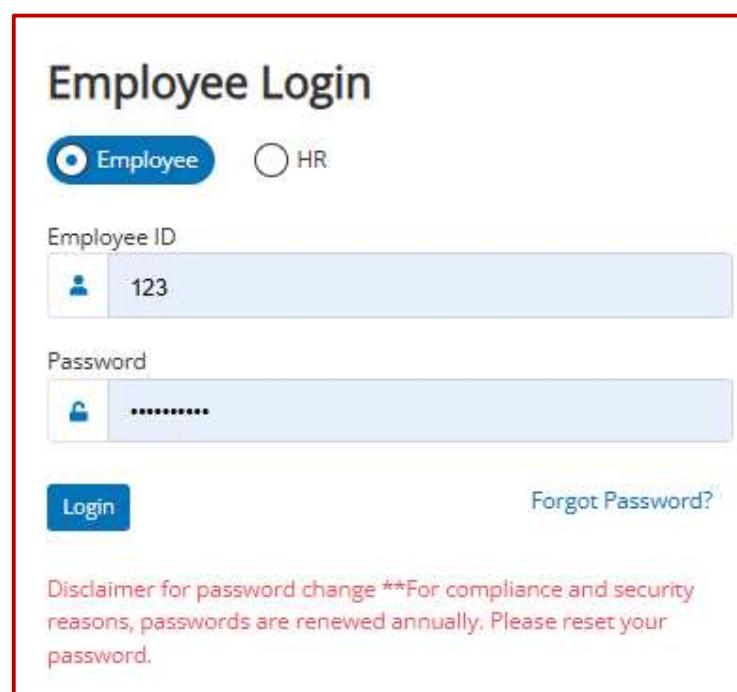
Employee Login

- ● Employee   ○ HR

Employee ID
👤 123

Password
🔒 ••••••••••

[Login]   Forgot Password?

Disclaimer for password change **For compliance and security reasons, passwords are renewed annually. Please reset your password.

Employee Dashboard:

The user will be directed to the Dashboard page after successful login. Dashboard page contains Menu options like

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾   BANK DETAILS   CLAIM ▾   HOSPITAL ▾   CONTACT US ▾   FORMS ▾   USER MANUAL   FEEDBACK   👤▾   LOGOUT

Welcome : Dummy Suresh [123]

Dummy Suresh
Emp No: 123   Edit

📅   ⊖   ℹ️
11-Jan-1955   71   Male
Date Of Birth   Age   Gender

Enrollment Details

Self Mobile No.   7249291146
Self Email ID   kajal.k@mdindia.com

Spouse Mobile No.   0
Spouse Email ID   Mu...........p.x@..........com

Base Sum Insured   ₹ 175000
Voluntary Top Up (Sum Insured)   ₹ 0

Please provide us KYC Doc

Annual Premium Inclusive GST

Top Up Sum Insured	Premium
1,00,000	₹ 14,769/-
2,00,000	₹ 16,408/-
3,00,000	₹ 17,444/-
4,00,000	₹ 18,741/-
5,00,000	₹ 20,640/-

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- After Login-in user will enter to 'Home page' and will be able to view user profile details. · User can edit & Validate their personal details by clicking on the 'Edit' icon shown in the below given image.

Click on 'Edit' option

Dummy Suresh
Emp No: 123

| 11-Jan-1955 | 71 | Male |
| Date Of Birth | Age | Gender |

Enrollment Details

Self Mobile No.
Self Email ID

Spouse Mobile No.   0
Spouse Email ID

Base Sum Insured   ₹ 175000
Voluntary Top Up (Sum Insured)   ₹ 0

Please provide us KYC Documen

By clicking on the 'Edit' Icon popup message will be displayed i.e "Validate the personal details".

Employee Details

NOTE: Dont use official email id as person

Self Mobile No. 10 digit mobile number.

Alternate / Spouse Mobile No. 10 digit mobile number.
0

Personal Email ID

Official Email ID

SAVE   CLOSE

Information

Employee Details Saved Successfully !!!

OK

Please click on "Enrollment Details." Once you click on the Enrollment Details tab, you will be redirected to the enrollment page, where you need to complete the enrollment process by selecting the desired Top-Up option

Dummy Suresh
Emp No: 123   Edit

11-Jan-1955   71   Male
Date Of Birth   Age   Gender

Enrollment Details

Click on 'Enrollment Details' option

Self Mobile No.   7249291146
Self Email ID   kajal.k@mdindia.com

Spouse Mobile No.   0
Spouse Email ID   Mumbaicorp4@mdindia.com

Base Sum Insured   ₹ 175000
Voluntary Top Up (Sum Insured)   ₹ 0

Please provide us KYC Documen

Once you enter the Enrollment page, you can add the dependent(s) and select the desired Top-Up option. After confirming all the details, please select the radio button and then click on the "Confirm Details" tab.

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾   BANK DETAILS   CLAIM ▾   HOSPITAL ▾   CONTACT US ▾   FORMS ▾   USER MANUAL   FEEDBACK

Welcome : Dummy Suresh [123]

Your Dependent/Family Member Details

Name	Date of Birth	Age	Relationship	Gender
Enter Name	DD-MMM-YYYY	Age	-- Select --	-- Select --

You can add the Dependent

ADD   CANCEL

Sr. No.	Name	DOB	Coverage Date	Age	Relationship	Gender	Action
1	Dummy Suresh	11-Jan-1955	01-Feb-2026	71	Self	Male	

Top-up (Self)
Locked In - No, Remark - -

You can select the top Up for Self and Spouse

Select TOP UP	Annual Premium with GST
Not Opted	₹ 0/-

Note:

1. New Retiree premium will be charged on prorata basis.
2. Annual Medical Subscription for Base Policy is INR 500 per life, which need to be paid to TML along with Top-up premium for continued coverage
3. Family Definition: Self + Spouse.
4. Please note that the premium charged is on pro-rated basis from the date of joining till 1 February 2027. From next policy year, the annual premium as per the applicable rates for that year shall be charged along with the lock-in for 3 years

*Disclaimer: The Payment Gateway has been implemented to facilitate seamless payment of the Annual Medical Subscription and Top-up Premium. Kindly refer to the User Manual on the portal for detailed instructions.

☐ I Confirm that all the details of Dependents as submitted above are Verified and are Correct.

Click on 'Confirm Tab'

Confirm Details

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After clicking on the "Confirm Details" tab, an informative page will be displayed showing the selected Top-Up, Base Sum Insured coverage, premium, and Annual Medical Subscription (if applicable). Once you click on the "Make Payment" button, you will be redirected to the payment gateway.

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY · BANK DETAILS · CLAIM · HOSPITAL · CONTACT US · FORMS · USER MANUAL · FEEDBACK · LOGOUT

Welcome : Dummy Suresh [123]

Your Dependent/Family Member Details

Sr. No	Name	DOB	Relationship	Gender	Action
1	Dummy Suresh	11-Jan-1955	Self	Male	

Information

Description	Premium (INR)
IPD Sum Insured (Self)	1,75,000
IPD Sum Insured (Spouse)	0
Top Up Sum Insured (Self)	0
Top Up Sum Insured (Spouse)	0
Top Up Policy Premium (Self)	0
Top Up Policy Premium (Spouse)	0
Annual Medical Subscription (Self)	500
Annual Medical Subscription (Spouse)	0
Total Payable Premium	**500**

Please make sure that all information entered here is correct.

MAKE PAYMENT   CANCEL

Top-up (Self)
Locked In - No, Remark - -

Select TOP UP
Not Opted

Note:
1. New Retirees premium will be charged on prorata basis.
2. Annual Medical Subscription for Base Policy is INR 500 per life, which need to be paid to TML along with Top-up premium for continued coverage.
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☑ I Confirm that all the details of Dependents as submitted above are Verified and are Correct.

Confirm Details

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Once you enter the Payment Gateway page, payment can be made through the following three methods: 1) Debit Card 2)Net Banking 3) G Pay.

CHOOSE A PAYMENT OPTION

TATA MOTORS LTD

Order ID
6D1AEFA6EB79202601311520145964

Merchant
TATA MOTORS LTD

Order Amount
₹ 1.00

	Card	>
	Netbanking	>
	Wallet	>
	UPI	>

Powered by
CCAvenue®   HDFC BANK

Cancel

Policy Details

Policy Details

Please Select **Policy Details** option from the Dashboard to get policy information, Family details and Claim details.

User can print / E- mail /Download E Card of self and Dependents.

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾   BANK DETAILS   CLAIM ▾   HOSPITAL ▾   CONTACT US ▾   FORMS ▾   USER MANUAL   FEEDBACK   👤 ▾   LOGOUT

Welcome : Dummy Suresh [123]

Enrollment Status

Base Policy Details

Family ECard	Name	Relation	Gender	DOB	TPA Card No
ECard	DUMMY SURESH	Self	Male	11/01/1955	MDI5-0043007528
ECard	DUMMY YOGITA	Spouse	Female	11/01/1965	MDI5-0043007531

Sum Insured	Balanced Sum Insured	Utilized Amount
175000	175000	0

Purpose of the Page

This page is used by the employee to **enter and update bank account details** for reimbursement claim payments.

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾   BANK DETAILS   CLAIM ▾   HOSPITAL ▾   CONTACT US ▾   FORMS ▾   USER MANUAL   FEEDBACK   👤▾   LOGOUT

Welcome : Dummy Suresh [123]

Bank Details

Name of Account Holder	Name of Bank	Branch Name
Name of Account Holder	Name of Bank	Branch Name

Branch Address	Type of Account	Account Number
Branch Address	-- Select --	Account Number

IFSC Code	MICR Code
IFSC Code	MICR Code

○ Upload Cancel Cheque   ○ Bank Statement

Choose File	No file chosen

Max file size allowed : 5 MB
Only .pdf/ .jpg/ .jpeg/ .png files are allowed.
In case of Reimbursement Claims; the Claim Payment will be effected into the aforesaid Bank Account details as provided by the Tata Motors EG/VRS Employee.

SAVE

Declaration

- I hereby declare that the information furnished in this ECS Form is true & correct to the best of my knowledge & belief. If I have made any false or untrue statement, suppression or concealment of any material fact, my right to claim reimbursement shall be forfeited.
- I agree that I shall not hold TPA/Insurance Company responsible for delay or non-receipt of the payment for any reason whatsoever after issue of the instructions for payment by Insurer/TPA based on the above.
- As per the revised RBI guidelines, Canceled cheque should have pre-printed name of account holder.

![MD India logo]

Claim – Upload Claim

This page allows the employee to view**, search, and track Mediclaim requests** such as IPD/OPD claims submitted through the portal.

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾   BANK DETAILS   CLAIM ▾   HOSPITAL ▾   CONTACT US ▾   FORMS ▾   USER MANUAL   FEEDBACK   👤 ▾   LOGOUT

UPLOAD CLAIM
CLAIM INTIMATION
CURRENT CLAIM DETAILS

Welcome : Dummy Suresh

Search Claim

| From Date | dd/mm/yyyy | To Date | dd/mm/yyyy | Claim Number | Claim Number | Inward No | Inward Number | Search | Clear |

New IPD   New

Click on New IPD option

Action	Inward Number	Patient Name	Hospitalization Type	CCN	MDID No	Document Status	Lodge Amount	Admission Date	Discharge Date	Entry Date
Action	INW/INSD/0016706439	Dummy Suresh	IPD		MDI5-0000000451	Scan Document Discrepancy	500	15/01/2026	16/01/2026	20/01/2026 4:02:58 PM

https://mdindiaonline.com/TATANONEG/InwardDetails.aspx?I=ce

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The Upload Claim Documents page is a pivotal component of the Mediclaim Portal, enabling policyholders to submit essential documents related to their insurance claims. This page accommodates two key scenarios: the upload of documents for a fresh non-reimbursement claim and the submission of responses for additional document requests made during claim processing.

Claim Upload

Note: Fields marked with asterisk (*) are mandatory

Employee Information

Employee Name	Policy No.	MDID No.	Employee Code.
	-- ⌄	MDI5-	:

Mobile No.	Email ID	Select Patient Name*	Patient MDID No.
		-- Select -- ⌄	

Patient Relation

Claim Details

Claim Type*	Hospitalization Type*	Treatment Type*	Illness*
New / Fresh Hospitalizatic ⌄	IPD Claim ⌄	-- Select -- ⌄	-- Select --

Other Illness*	Policy Start Date	Policy End Date	Policy Status
Enter Nature of Illness	30/03/2025	29/03/2026	ENFORCED

Date Of Admission*	Date Of Discharge*	Requested Amount	
dd/mm/yyyy	dd/mm/yyyy		

Details of Hospitalization

Hospital Name

Enter Name of Hospital where Adm

Address

Enter Hospital Address

State

Enter State

City

Enter City

Location

Enter Location

Pin Code

Enter Pin Code

Room Type

-- Select --

Hospitalization Due to

-- Select --

Date of Injury/Disease/Delivery

dd/mm/yyyy

Injury Cause

-- Select --

If Medico Legal

-- Select --

Reported to Police

-- Select --

MLC Report & Police FIR Attached

-- Select --

Medical Expenses*

-- Select --

Bill Number

Bill Amount

Bill Date

[Add] [Clear]

Bank Details of Policy Holder

Account Holder Name

Account Number

PAN

IFSC Code

Bank Name

Branch Name

Bank Address

Document Upload Check List*Upload Document [Only .tif/ .tiff/ .pdf/ .jpg/ .jpeg files]

To protect your privacy, please provide a Masked Aadhaar or an Aadhaar with the first eight digits blacked out. This helps protect your Aadhaar number. Alternatively, if you prefer not to submit your Aadhaar, you can provide a copy of a valid Government-issued photo ID, such as a Driving License or Voter ID.

◉ Upload Single File ○ Upload Multiple Files With Bifurcation

Note : You can able to upload single copy of document Or multiple documents copy, After complete upload click on submit button.

Upload Form*

[Choose File] No file chosen   [Upload]

[Save] [Cancel] [Back]

- **Policy Holder Information**

The Policy Holder Information section on the Upload Claim Documents page is dedicated to capturing essential details about the policyholder, ensuring that the claims processing team has accurate information for verification and claim assessment.

- **Claim Details**

The Claim Details section allows policyholders to specify the nature and details of the claim they are submitting. This is crucial for the claims processing team to understand the context of the claim.

- **Document Upload**

The Document Upload section is where policyholders upload the necessary supporting documents to substantiate their claim. These documents typically include invoices, medical reports, prescriptions, and any other relevant records.

Certain details, such as employee name, Policy No., MDID No., Employee code, mobile number, email ID, etc., are automatically filled in. The user only needs to provide the remaining details as shown in the below figure.

After that user has select Patient name.

- **Claimant Details-** User has select claim type as New/ Fresh Hospitalization. Then Hospitalization type by default selected IPD claim. Select treatment type from given dropdown list. Select Illness type, if illness type is not mention in dropdown list then user can select other option and enter illness type in given textbox field.
- User has to enter Date of Admission, Date of Discharge and Requested Amount.
- Users can easily upload single file or multiple files with the option to specify the type of each file. Single files can be up to 10MB in size, and each file in a multiple documents can upload also be up to 10MB.
- Once the documents are uploaded, simply click the **'SAVE'** button. A confirmation pop-up will appear, displaying the generated **'Inward Number'.**

Upload Claim

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POLICY ▾ BANK DETAILS CLAIM ▾ HOSPITAL ▾ CONTACT US ▾ FORMS ▾ USER MANUAL FEEDBACK   👤 ▾ LOGOUT

Welcome : Dummy Suresh [123]

Search Claim

| From Date | dd/mm/yyyy | To Date | dd/mm/yyyy | Claim Number | Claim Number | Inward No | Inward Number | Search | Clear |

New IPD

	Inward Number	Patient Name	Hospitalization Type	CCN	MDID No	Document Status	Lodge Amount	Admission Date	Discharge Date	Entry Date
Action	INW/INSD/0016706439	Dummy Suresh	IPD		MDI5-0000000451	Scan Document Discrepancy	500	15/01/2026	16/01/2026	20/01/2026 4:02:58 PM

View Details
View Document
View History
Claim Form
Claim Cancel

Click on Action Button

	Inward Number
Action	INW/INSD/00167

- View Details
- View Document
- View History
- Claim Form
- Claim Cancel

- **Action Options Description**

- **View Details**
  - Displays complete claim information such as patient details, hospital details, claim amount, and current status.
- **View Document**
  - Allows the employee to view all documents uploaded for the claim (bills, reports, discharge summary, etc.).
- **View History**
  - Shows the claim processing history, including status updates, remarks, and actions taken by MDIndia/TPA.
- **Claim Form**
  - Enables the employee to view or download the submitted claim form for reference or records.
- **Claim Cancel**
  - Allows cancellation of the claim if it is still under permissible status.
  - Once cancelled, the claim cannot be processed further.

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾ BANK DETAILS CLAIM ▾ HOSPITAL ▾ CONTACT US ▾ FORMS ▾ USER MANUAL FEEDBACK   👤 ▾   LOGOUT

Welcome : Dummy Suresh [123]

Claim Intimation

Policy Number	MDID	Patient Name*
121401/00/26/00/00002984 ▾	MDI5-0043007528	Select ▾

Gender	Mobile Number*	Email ID*
Male ▾		

State*	District*	Hospital Name*
Select ▾	▾	▾

Hospital Address*		Treatment / Disease*

Approximate Claim Amount (In Rs)*	Admission Date*	Approximate Length of Stay(in Days)*
	dd/mm/yyyy	

Remarks

[   ]

Submit

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Purpose of the Page
This page is used to **inform MDIndia/TPA in advance about planned or emergency hospitalization**. Claim intimation helps in faster claim processing.

Network Hospital

Please Select **Network Hospital** option from the Dashboard. The user has three options for finding the nearest network hospital.

- **By using state, City and Location.**
- **By City name or Hospital name**
- **By entering Pin code of your residential area**

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾   BANK DETAILS   CLAIM ▾   HOSPITAL ▾   CONTACT US ▾   FORMS ▾   USER MANUAL   FEEDBACK   👤 ▾   LOGOUT

Welcome : Dummy Suresh [123]

NETWORK

PPN

Provider List For PPN Hospitals

Hospital Search

Search Option

State
SELECT ⌄

City
SELECT ⌄

Location
SELECT ⌄

Get Hospitals List   Reset

Search Option

Search Option
Select Search Option ⌄

Search Text
[   ]   Search

To find the nearest hospital, enter pincode of your residential area.

Pin Code
[   ]   Find

https://mdindiaonline.com/TATANONEG/ProviderList.aspx

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Contact Us.

MDIndia SPOCs contact details will be displayed clearly within the application, listing names, designations, phone numbers, and email addresses in a table format. This information will be accessible under the "**Contact Us**" section, ensuring users can easily reach the relevant contacts. Hyperlinks to email addresses will be provided for quick access. The details will be kept up-to-date to ensure accuracy.

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾   BANK DETAILS   CLAIM ▾   HOSPITAL ▾   CONTACT US ▾   FORMS ▾   USER MANUAL   FEEDBACK   👤 ▾   LOGOUT
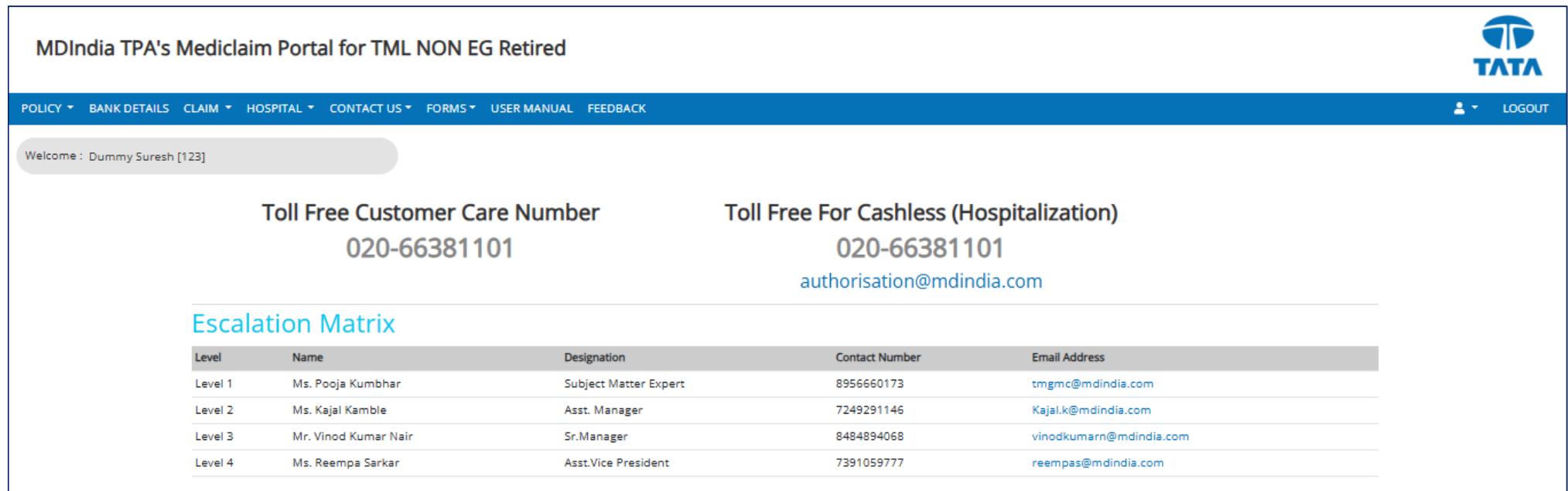
Welcome : Dummy Suresh [123]

Toll Free Customer Care Number	Toll Free For Cashless (Hospitalization)
020-66381101	020-66381101
	authorisation@mdindia.com

Escalation Matrix

Level	Name	Designation	Contact Number	Email Address
Level 1	Ms. Pooja Kumbhar	Subject Matter Expert	8956660173	tmgmc@mdindia.com
Level 2	Ms. Kajal Kamble	Asst. Manager	7249291146	Kajal.k@mdindia.com
Level 3	Mr. Vinod Kumar Nair	Sr.Manager	8484894068	vinodkumarn@mdindia.com
Level 4	Ms. Reempa Sarkar	Asst.Vice President	7391059777	reempas@mdindia.com

ML NON EG Retired

US ▾ FORMS ▾ USER MANUAL FEEDBACK

In-patient IRDA Claim Form

PreAuth Form

Declaration Form for Network Hospital

Medical Insurance Policy Document

One Page Flow Chart

- **Forms Available**

- Under the **Forms** menu, the following documents can be accessed and downloaded:

- **In-patient IRDA Claim Form**

  - Used for submitting hospitalization (IPD) reimbursement claims.

- **Pre-Authorization Form**

  - Required for requesting cashless treatment at network hospitals.

- **Declaration Form for Network Hospital**

  - Used during cashless hospitalization at network hospitals.

- **Medical Insurance Policy Document**

  - Contains policy terms, conditions, coverage details, and exclusions.

- **One Page Flow Chart**

  - Provides a quick overview of the Mediclaim process.

Please Select Feedback option from the Dashboard with valuable feedback towards the services which will help us serve you better.

MDIndia TPA's Mediclaim Portal for TML NON EG Retired

POLICY ▾   BANK DETAILS   CLAIM ▾   HOSPITAL ▾   CONTACT US ▾   FORMS ▾   USER MANUAL   FEEDBACK   👤 ▾   LOGOUT

Welcome : Dummy Suresh [123]

Feedback Form

CCN	Policy Number	MDID
Enter CCN		
Patient Name	Phone Number	Email ID

Please take few minutes to fill out this survey on the relevance and quality of service you have received.

Feedback

1. Would you recommend our services to your family and friends.

○ Yes   ○ May be   ○ No

2. Did you get proper assistance and help

○ Yes   ○ SomeWhat   ○ May be

3. How would you rate our Turnaround time for Claim settlement

○ Excellent   ○ Good   ○ Average   ○ Poor

4. Do you have any suggestions for improving the health insurance benefits or TPA services?

Save

- User can change password by clicking on Change password tab as seen in below image. User is required to enter old password, new password and confirm the new password. · Click on Save.

Thank You !

A Journey into Healthcare and Well-being