



Paramount Health
Your link to good health

Paramount Health Services & Insurance TPA Pvt. Ltd.

25 YEARS OF EXEMPLARY SERVICE !!!

NUTANIX

OPD Claim Submission User Guide



NUTANIX – LOGIN PAGE

Aliv is beneficial for:

- Managing anemia
- Maintains blood glucose levels
- Regulating menstrual cycle
- Helps in fighting inflammation

Recipe:

- 2 cup Aliv
- 2 big coconut
- 2 and half cup (apples) - this can vary depending on the amount of sweetener needed
- 2 teaspoon of ghee
- Nutmeg (optional) powder

Steps:

- Soak Aliv for one hour in coconut water
- Mix grated coconut and Apples in soaked Aliv.
- After 30 mins, cook the mixture in a pan with two spoons of ghee.
- Continue heating till mixture gets cooked properly.
- Allow to cool, add nutmeg powder and roll the balls.

Follow us on:

Paramount Health logo

Login

- User Name is your Employee Number
- Password is your Date of birth (dd/mm/yyyy) for first time users only.

Employee Id

Password

LOGIN

[Reset Password ?](#)

What are my PHS Portal Login Credentials?

1. Go to the [PHS Portal](#)
URL - <https://www.paramounttpa.com/nutanix/>
2. **User Name** – Employee ID
2. **Password** – Please use the password you had created at the time of enrollment.
3. For first time users, the default password is **Employee's DOB in DD/MM/YYYY format with Slash**. You will see a screen to change your password by entering the default password and setting your new password. Once this step is complete, you will be directed back to the login page. Here, you should enter your username (Employee ID) and the newly set password to access the portal.
4. In case you have forgotten your password, you can click on the **Reset Password** link to create a new password.



DASHBOARD

Click on the Claim submission tab on the Dashboard



The dashboard interface consists of several navigation tabs and a 'Useful Links' section. The tabs are arranged in two rows:

- Row 1: Sum Insured & E-card (person icon), Claim Submission (shield icon, highlighted with an orange border), Track Claim Details (calendar icon), Hospital Network (chain link icon).
- Row 2: Policy Benefits & FAQ (document icon), Why Cashless? (video camera icon), Contact Us (phone icon).

Below the tabs is a 'Useful Links' section with a dark header and a list of links, each with a right-pointing arrow:





- User guide to upload IPD Claims →
- User guide to upload OPD Claims →
- Claim Form Part A →
- Claim Form Part B →
- Sample Claim Form Part A & Part B →
- Document Checklist for IPD Claims →
- Document Checklist for OPD Claims →
- Document Checklist for OPD Claims →
- Reimbursement Claim Procedure →
- Cashless Claim Procedure →















OPD CLAIM SUBMISSION

Claim Submission
Pre Post Hospitalization
Deficiency Claim

IPD Main

Name	Relation	Action
Test Employee	Employee	 Upload IPD Claim
Test Wife	Wife	 Upload IPD Claim
Test Daughter	Daughter	 Upload IPD Claim
Test Mother	Mother	 Upload IPD Claim

OPD Main

Name	Relation	Action
Test Employee	Employee	 Upload Dental Claim
		 Upload Vision Claim
		 Upload Vaccination Claim
Test Wife	Wife	 Upload Prescribed Pharmacy Claim
		 Upload Prescribed Diagnostics Claim
		 Upload Other Multiple Claims
Test Daughter	Daughter	 Upload Dental Claim
		 Upload Vision Claim
		 Upload Vaccination Claim
Test Mother	Mother	 Upload Prescribed Pharmacy Claim
		 Upload Prescribed Diagnostics Claim
		 Upload Other Multiple Claims

Click on the appropriate tab to begin the OPD claim submission



Upload OPD Claim

Step 1: Patient Details



Claim Submission

Patient Details

All fields marked * are mandatory.

- * Upload pdf/jpg format documents only.
- * The file size should not exceed more than 12 Mb.

Patient Name :	TEST EMPLOYEE	Date of Birth :	05/10/1989	Age :	33	Gender :	MALE
PHS ID :	3972237	TPA Claim No. :	0	TPA Claim Ext. :		Relation With Insured :	EMPLOYEE

* Date of Submission

Next

Select the Date of submission

Click here to Proceed further



Upload OPD Claim

Step 2: Self Declaration

To,
Paramount Health Services & Insurance Pvt Ltd.
_____ (Branch)

Self-declaration

I do hereby solemnly affirm and declare as under that:

1. I, **TEST EMPLOYEE**, hereby undertake that I am a Policyholder of **ADITYA BIRLA HEALTH INSURANCE COMPANY LIMITED** Insurance company, bearing Insurance Policy vide No. **POLICY AWAITED-NTNXT-OPD**.

2. I hereby declare that I shall not produce or claim the physical copy of the electronically submitted claim documents submitted to Paramount Health Services & Insurance TPA Pvt Ltd (attached herewith) at any other Insurer/ TPA for whatsoever reason except in the case where Sum insured available (incl. bonus) in the present Insurance policy is not sufficient to cover claim amount fully and I have other Insurance policies to cover balance claim amount from either same or different Insurer wherein the certified copy of same claim documents will be produced without any mala fide intent to claim the amount twice.

3. I further assure that I shall reimburse or indemnify the Insurance Company for the claim amount in case of a fraudulent, duplicate, forged, and manipulated claim submission or if this self-declaration is found untrue and dishonest.

Sincerely,

Name & Signature of the Claimant

Place -

Date -

Insurer Guidelines

ADITYA BIRLA HEALTH INSURANCE COMPANY LIMITED

- The Claim will be processed based on the complete set of scanned documents uploaded by the Insured through the portal. In case of any deficient document/requirement, we may raise the query & process further on receipt of these documents.
- Insured will not be claiming for the same hospitalization with any other Insurance Company/TPA or anywhere else for whatsoever reason except in the case where Sum Insured available (incl. bonus) in the present Insurance policy is not sufficient to cover the claim amount fully and I have other Insurance policies to cover balance claim amount from either same or different Insurer wherein the certified copy of same claim documents will be produced without any mala fide intent to claim the amount twice.
- Intimation of claim should be made to TPA through Email, Call, portal, or mobile app as per the defined timeline.

Previous

print

Agree & Next

Self Declaration of Aditya Birla Health Insurance Company Ltd

- Click on Agree & Next to go to the next step
- Click on Print in case you want to download the form



Upload OPD Claim

Step 4: Bank Details



Claim Submission

Bank Details

Incorporate the bank details as per enrolled bank details of the proposer.

Account No.	<input type="text" value="ABCD1234"/>	Re-enter Account No.	<input type="text" value="ABCD1234"/>	Name as per the Bank Account	<input type="text" value="SBI BANK"/>
IFSC Code	<input type="text" value="SBIN0011613"/>	Bank Name & Branch	<input type="text" value="SBI BANK"/>	PAN No.	<input type="text" value="AAAAA1234A"/>
Upload Cancelled Cheque/Bank statement(merged into one document)		<input type="button" value="Choose File"/>	No file chosen	Previously Uploaded Bank Details	

Previous

Edit

Save & Next

- Bank details need to be filled only once i.e. while filing the first claim, after which the Bank Details shall be Auto- Populated.
- In case you wish to change Account details for the subsequent claims, you can do so by clicking on the Edit option.
- You can either upload a cancelled Cheque or your bank statement which is merged into one document
- Click on “Save & Next” to go the final step



Upload OPD Claim



Step 5: Upload Documents

Upload Document

- Upload pdf/jpg format documents only. • The PDF file should not exceed more than 12 Mb. • KYC documents (Upload employee Pan card and any Govt Address proof of employee & patient).

Sr. No.	Document Name	View	Delete	Upload	Delete
1	claim Form Name 11211158_CLAIMFORM.pdf	View	Delete		
2	KYC DOCUMENTS Name CLAIM_form_A.pdf	View	Delete	↓	✖
3	NEFT DOCUMENTS Name 11211154_NEFT.JPG	View	Delete		
4	PAID RECEIPT/BILLS Name 3887979.PDF 2907797.PDF	View	Delete	↓	✖
5	INVESTIGATION REPORT			↓	
6	Other			↓	

Navigation: Previous | Doc Checklist | Submit Claim

- The KYC bucket and the Paid Receipts/Bills bucket are mandatory
- Click on the “Upload” option against the relevant bucket to upload the required documents.
- The option to “View” the documents are also provided
- The “Delete” option provided after “view” can be used to delete the individual documents uploaded in a single bucket, whereas all the documents in a bucket can be deleted by using the Delete option provided on the extreme right.
- Kindly refer to the Document Checklist tab to ensure that all required documents are uploaded before submitting the claim.
- After submitting the required documents, click on “Submit Claim” to finish the process of OPD Claim Submission



Upload OPD Claim

Step 5: Upload Documents



Claim Submission

Once you click on “Submit Claim” to finish the process of OPD claim submission, the following message is displayed on the screen.

Message

Documents have been uploaded successfully and Inward no is: **6794766**

The status of the submitted claim will be available under the "Track your claim" tab >> "Claim Details".

[Close](#)



Deficiency Claim

Claim Submission | Pre Post Hospitalization | **Deficiency Claim**

IPD Details

Name	Relation	Intimation No./Date	Inward No./Date	Claim No.	Claim Date	Claim Type	Claim Sub-Type	Claim Status	Action
Test Daughter	Daughter	/	6544339/24-Aug-2023	6249056//0	24-Aug-2023	Reimbursement	Main	Outstanding	Upload Deficiency Documents

OPD Details



- Once the Claim documents are submitted and the claim is generated, the processing team scrutinizes the claim documents
- In case the submitted documents are insufficient or any additional documents are required, a deficiency is raised and the same is notified via email as well.
- The employee can then submit the deficiency documents by clicking on the Upload deficiency documents button



Track Claim Details

Click on the Track Claim Details tab on the Dashboard

The dashboard features a grid of navigation tabs. The 'Track Claim Details' tab is highlighted with an orange border and a blue arrow points from it to the instruction box above. The 'Useful Links' section is located in the bottom left corner.

	Sum Insured & E-card		Claim Submission		Track Claim Details		Hospital Network
	Policy Benefits & FAQ		Why Cashless?		Contact Us		

Useful Links

- User guide to upload IPD Claims →
- User guide to upload OPD Claims →
- Claim Form Part A →
- Claim Form Part B →
- Sample Claim Form Part A & Part B →
- Document Checklist for IPD Claims →
- Document Checklist for OPD Claims →
- Document Checklist for OPD Claims →
- Reimbursement Claim Procedure →
- Cashless Claim Procedure →



Track Claim Details

Track Claim Details

IPD Claim Details OPD Claim Details

Search :

Name	Gender	Date of Birth	Age	Relation	Inward No	Inward Date	Claim No	Claim Date	Claim Status ↕	Documents	Action
Test Employee	Male	05-Oct-1989	33	Employee	6786145	07-Nov-2023	6388569	07-Nov-2023	Rejected		
Test Wife	Female	08-Jul-1990	32	Wife	6555197	06-Nov-2023	6256322	28-Aug-2023	Outstanding		
Test Daughter	Female	24-Jun-2014	8	Daughter	6544339	24-Aug-2023	6249056	24-Aug-2023	Outstanding		

- Once the claim is generated, the provision to track the claim is given here for both IPD and OPD Claims. It can be done so by clicking on the icon below the Action header
- The status of the claim can be seen on the above table as well
- Claim sorting feature is available basis Claim number & Claim status



Any Questions?

In case of any questions please reach out to nutanix@paramounttpa.com

For more details about the insurance coverages, employee communication deck, session recording, please refer to [India: Medical Insurance & India -OPD Benefit](#) on the People Portal.