

Orthopedic Surgery Insurance Documents Checklist

A document preparation guide for patients planning orthopedic surgery through insurance, TPA, corporate, or government schemes.

Use this checklist before planned orthopedic surgery admission.

- Start insurance or scheme paperwork early, especially for planned knee or hip replacement.
- Keep original documents and clear photocopies/scans ready.
- Final approval depends on insurer, TPA, hospital policy, diagnosis, policy terms, and scheme eligibility.

Document	Usually needed	Notes
Identity proof	Aadhaar card, PAN card, passport, or other valid ID.	Name and age should match policy/scheme records.
Insurance details	Health card, policy copy, TPA card, employee ID if corporate.	Carry physical and digital copies.
Medical records	Prescription, diagnosis note, X-rays/MRI, blood reports, ECG, 2D echo if advised.	Shows medical need and fitness for surgery.
Surgery advice	Doctor note mentioning planned procedure and diagnosis.	Often required for cashless approval.
Previous treatment	Old prescriptions, physiotherapy, injection records, discharge summaries.	Supports treatment history and claim file.

Insurance and scheme categories

- Private health insurance: cashless or reimbursement depends on network hospital and TPA approval.
- Corporate insurance: may require employee ID, HR/TPA forms, and employer authorization.
- Government schemes: eligibility and document rules vary; carry all scheme cards and ID proof.
- Ayushman or other public schemes: check hospital empanelment and procedure eligibility before admission.

Before admission

Step	Action	Why it matters
Policy check	Confirm waiting period, room category, co-pay, exclusions, and implant limits.	Avoids surprise expenses.
Pre-authorization	Submit reports, diagnosis, estimate, and planned procedure.	Cashless approval can take time.
Estimate review	Ask what is included and what may be non-payable.	Helps family plan payment clearly.
Document copies	Keep one file with originals and one set of photocopies.	Hospital and TPA teams may need repeated verification.
Emergency contact	Keep phone numbers for family, insurer, TPA, and hospital desk.	Speeds up approval communication.

Common reasons for delay

- Name, age, or policy number mismatch.
- Missing X-ray/MRI or diagnosis note.
- Policy waiting period or procedure exclusion.
- Incomplete employer/TPA form.
- Late submission before planned admission.

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Disclaimer: This checklist is general guidance. Insurance approvals and scheme benefits are decided by the insurer, TPA, government scheme, and hospital policies.