Staff Group Mediclaim Policy issued to



Policy No: 0210002822P100606655

Period: 01-04-2022 to 31-03-2023

Eligibility Criteria

Group Mediclaim is meant for

- a) New India Employee's, Retiree's
- b) Spouse,
- c) Dependent / independent Children,
- d) Dependent & independent Parents and Parent in-laws
- e) Grand children.
- Cover is not available for resigned and dismissed employees.

Eligibility Criteria

- ➤In case of deceased employee, spouse will be the primary insured. Coverage of other surviving eligible family members will continue
- ➤In case of death of both employee and spouse, cover will not be available for others
- ➤ Dependency criteria
- a) Male child up to 25 years or till the time he starts earning.
- b) Female child up to the age of marriage or the time she starts earning

Premium Subsidy

- Subsidy @75% in premium is available up to <u>Eligible S.I.</u> only.
- i. For serving employee, his spouse and two dependent children.
- ii. For Retired, employee & spouse
- iii. For deceased employee, subsidy will be available only to spouse.
- In case of FTS/PTS 100% premium is borne by Company up to eligible S.I. for Self, Spouse and two dependent children.

Eligible Sum Insured

Basic Pay	Eligible S.I
Less than Rs 43,300/-	Rs 5,00,000/-
Between Rs 43,300/- to Rs 55,335/-	Rs 6,00,000/-
Above Rs 55,335/-	Rs 10,00,000/-

Optional Sum Insured



Employee can opt Sum insured from above options

Optional Sum Insured...

- Increase in Optional Sum Insured to next slab is allowed on promotion, marriage, child birth and once in a block of 3 years.
- ➤ Next renewal date in the block of 3 years is 1.4.2023.
- ➤ Option to decrease the Optional Sum Insured is available w.e.f. the next renewal date following the date of decrease in family size due to death/exit of a family member

Enrollment

- Newly recruited employees may submit their enrolment form immediately on joining or within 60 days thereof. Cover will commence only after submission of enrolment form.
- Newly wed spouse of employee may be covered by submitting request 30 days prior to date of marriage or within 30 days after date of marriage.
- Parent/Parent-in-law may be covered at the time of employee joining the Company or immediately after marriage, as the case may be
- New born baby may be covered within 90 days of birth. Free coverage available up to first 90 days, if mother is covered under the policy and she is eligible for maternity benefit cover.

Premium Tables

- There are four premium tables,
- a) Primary Insured,
- b) Spouse,
- c) Children and
- d) Parents / Parent in-Laws

Inclusion / deletion & change of Opted S.I. FY 2022-2023

Increase of S.I. to the immediately next higher slab allowed in the following cases only

- ➤ Inclusion of newly-wed spouse of Primary Insured/ their dependent / independent children who got married during the policy period 2021-2022, subject to compliance of guidelines
- ➤Inclusion of Newly born baby during the policy period 2021-2022
- ➤ Promotion of the Serving Employees who got promoted and joined in the promoted cadre during the policy period 2021-2022
- Decrease in S.I. to the immediately lower slab may be allowed from 01-04-2022 in case of deletion/exit of member, due to death or being ineligible. However, opted S.I. in such cases should not be lower than the eligible S.I. of the employee

Coverage Limits

Hospitalisation Benefits	Limits
Room, Boarding and Nursing Expenses Per day (including nursing care, RMO charges, IV fluids / blood transfusion / injection administration charges)	1% of S.I. up to Rs 10 Lakhs + 0.5% for beyond Rs 10 Lakhs (Hospitals located at Mumbai, Navi Mumbai, Kolkata, New Delhi, Chennai, Ahmedabad, Bengaluru, Hyderabad, Pune, Faridabad, Ghaziabad, Noida and Gurgaon) Subject to Maximum of Rs 15,000/- 0.75% of S.I. up to Rs 10 Lakhs + 0.5% for beyond Rs 10 Lakhs (Hospitals located in other cities) Subject to Maximum of Rs 12,500/-
ICU – per day	Double of room rent entitlement
All related charges shall be as per entitled category vis-à-vis room rent except Pharmacy/Medicines and Implants (Proportionate Clause)	

Maternity Benefit

Maternity Expenses shall be for hospitalisation of a female employee / spouse of a male employee

Normal Delivery - Rs 50,000/- in "A" Class cities & Rs 40,000/- in other cities

Caesarean Delivery – Rs 1,00,000/- in A Class cities & Rs 65,000/- in other cities

Maternity Benefit shall also be extended to an independent child or a family member of the dependent / independent child provided such child/family member has been covered in the policy at least for the last three years as on the date of hospitalisation under maternity cover

Maternity Special Conditions

Those who are already having two or more living children will not be eligible for this benefit

Maternity Benefit & Pre-natal, Post natal are admissible only if the expenses are incurred in hospital as in-patient

Waiting period of 9 months waived off

Pre-hospitalisation & Post Hospitalisation are not available

Newborn Baby Cover

A Newborn Baby born is covered for any Illness or Injury Eligible new born baby of the employee stands covered from day 1 as a separate unit

Monthly premium for new born baby shall be collected from the month in which the baby completes 90 days of age.

Road Ambulance Charges

If the insured person is shifted from residence to Hospital, one hospital to another hospital

Ambulance charges are payable only if the hospitalisation expenses are admissible

Ambulance charges are admissible only if such expenses are paid to registered ambulance provides

Limit is up to maximum of Rs 5,000/- for any one Illness

Health Check-up Facility

This benefit is available to the insured / family members after 4 Claim free years, till the expiry of 5th year of policy or any claim paid/reported under the policy, whichever shall first occur in the 5th year

If the benefit is not claimed in 5th year of policy, then in future at the time of insured claiming this benefit, last 4 claim free years preceding to the year in which benefit is claimed shall be taken in to consideration

The total amount payable is maximum up to 5,000/- either availed by one /more insured family members

Pre-existing disease or ailment - Covered

Time bound exclusions / waiting period ailments - Covered

Pre-hospitalisation Limit: 30 days

Post hospitalisation Limit: 60 days

Salient Features

Medical
Expenses for
Organ
Transplant

Donor Hospitalisation expenses are covered (excluding Cost of Organ, Pre& Post hospitalisation expenses)

Expenses incurred on Donor and recipient shall not exceed the available Sum insured

Domiciliary Hospitalisation Benefit:

Treatment for a period exceeding three days for an illness/disease which in the normal course require treatment at hospital but is actually taken while confined at home

The condition of the patient is such that he/she is not in a condition to be removed to a hospital, and/or

The patient takes treatment at home on account of non-availability of room in a hospital

Domiciliary Hospitalisation

Surgeon, Medical Practitioner, Consultant's, Specialist's Fees, Blood, Oxygen, Surgical appliances, Medicines & drugs, Diagnostic material and Nursing Expenses

20% of S.I. subject to maximum of Rs 50,000/-

Oral Chemotherapy Peritoneal Dialysis 50% of S.I. subject to maximum of Rs 5,00,000/(The above limits shall be on floater basis during the policy period

Treatment of Dog bite (or bite of any other rabid animal like monkey, cat, etc.,)

Reimbursement of reasonable expenses / medical costs actually incurred for immunization based on the merits of each case.

If treatment does not require hospitalisation, then such expenses can be considered under domiciliary hospitalisation section

Covered if the refractive error is +/- 5 diopters

Eye sight power Correction

In case, Keratotomy is performed for therapeutic reasons like recurrent corneal erosions, nebular opacities and non-healing ulcers

Mental Illness Cover

Treatment of mental illness, stress or psychological disorders and neurodegenerative disorders are covered

Any Psychological counselling, Cognitive, family, group, behaviour, palliative therapy, psychotherapy not covered

Coverage for Modern Treatments / Procedures

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	Treatment / Procedure	Limit per Policy period
	Uterine Artery Embolization & HIFU	Up to 20% of S.I. subject to maximum of INR 2 Lakhs
	Balloon Sinupalsty	Up to 10% of S.I. subject to maximum of INR 1 Lakh
	Deep Brain Stimulation	Up to 50% of S.I. subject to maximum of INR 10 Lakhs

Up to 20% of S.I. subject to maximum of INR 5 Lakhs

Up to 20% of S.I. subject to maximum of INR 5 Lakhs

Up to 10% of S.I. subject to maximum of INR 1 Lakh

Central Nervous System, Malignancies

other diseases

Up to 75% of S.I. subject to maximum of INR 10 Lakhs for

Up to 30% of S.I. subject to maximum of INR 5 Lakhs for

Up to 30% of S.I. subject to maximum of INR 5 Lakhs

Up to 20% of S.I. subject to maximum of INR 3 Lakhs

Up to 20% of S.I. subject to maximum of INR 2 Lakhs

Up to 15% of S.I. subject to maximum of INR 1 Lakh

Up to 50% of S.I. subject to maximum of INR 10 Lakhs

S. No

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Oral Chemotherapy

Intravitreal injections

Stereotactic Radio surgeries

Vaporisation of the Prostate

Intra Operative Neuro Monitoring

Stem Cell therapy – Bone marrow

Bronchial Thermoplasty

Robotic Surgeries

Immunotherapy – Inj. Monoclonal Antibody

Day Care Treatment

Undertaken treatment under General or Local Anaesthesia in Hospital/Day Care Centre for less than 24 hours due to technological advancement.

DEFINITIONS

Preferred Provider Network

Network hospital providers in specific cities which have agreed to Packaged pricing for Specified Planned Procedures

Any One Illness

Continuous period of Illness and includes relapse within 45 days from the date of last consultation with the Hospital where treatment was taken

Reasonable and Customary Expenses

Charges for Services or supplies, which are standard charges for the specific provider and consistent with the prevailing charges in the geographical area

For identical or similar services, taking in to account the nature of the Illness/Injury involved

HOSPITAL DEFINITION

Hospital – Registered with local authorities under Clinical Establishment (Registration and Regulation) Act, 2010 (or) has 10 beds in towns with population of < 10 Lakhs,
15 beds in other

places

qualified Nursing staff round the clock

qualified Medical Practitioner round the clock fully equipped OT where surgical procedure carried out

maintains daily records of patients and will make these accessible to Insurance Companies

If the Claim event falls within two Policy periods

The claim shall be paid taking into consideration the available S.I. of expiring policy only.

Renewed Policy S.I. <u>will not be</u> available for the Hospitalisation (including Pre& Post hospitalisation expenses)

Claim shall be settled on per event basis.

Claim Under Two Policy Periods If Two or more policies are taken from Us or Others

Policy holder has the right to prefer claim from other policy for the amounts disallowed, even if S.I. is not exhausted

MULTIPLE POLICIES

Amount claimed exceeds S.I. under a single policy, you shall have the right to choose Insurer from whom you want to claim balance amount

The insured person must disclose such other Insurance at the time of making a Claim

Investigation & Evaluation:

Rest Cure, Rehabilitation and Respite Care:

GENERAL EXCLUSIONS

Obesity/Weight Control

If the Surgical treatment fulfil all the below conditions, it is <u>not excluded</u>.

- i. Surgery to be conducted is upon the advice of the doctor
- ii. The surgery/Procedure conducted should be supported by Clinical protocols
- iii. The member has to be 18 years of age or older
- iv. BMI is >= 40 or >= 35 with following severe Comorbidities
- a) Obesity-related Cardiomyopathy
- b) Coronary Heart Disease
- c) Severe Sleep Apnea
- d) Uncontrolled Type2 Diabetes

Standard Exclusions

Change of Gender
Treatments

Expenses of Cosmetic / Plastic Surgery

Breach of law with Criminal intent

Excluded Providers
/Hospitals –
disclosed in Insurer
website

Alcoholism, drug or Substance abuse

Treatment in health Hydros, nature cure clinics, Spas

Dietary
Supplements unless
prescribed by
Doctors

Standard Exclusions

Refractive Error:
Correction of Eyesight
due to refractive error
less than 5 dioptres

Unproven Treatment

Sterility and Infertility
(Contraception, sterilization,
Assisted Reproduction
Services, Gestational
Surrogacy, Reversal of
Sterilization)

War and allied perils

Nuclear Risks

Treatment taken outside India

Thank you

J Kameshwara Rao Bangalore 8277469315