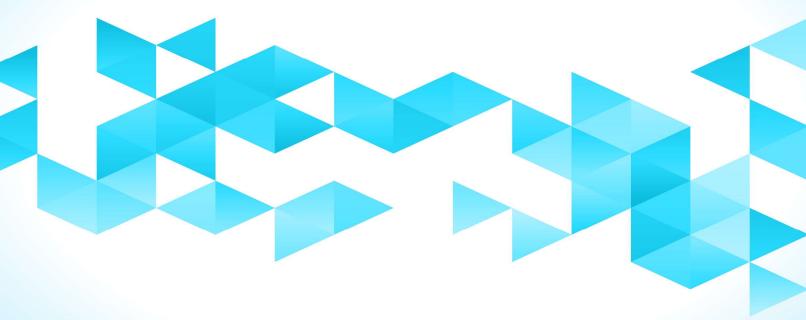


SOLUTIONS...DEFINED, DESIGNED, AND DELIVERED.



Broadcom Communications Private Limited 2020-21



#### Disclaimer:

This manual is intended to be general summary of the benefits offered by your company & should be regarded as guide only. While Marsh shall make every reasonable effort to ensure the accuracy and validity of the information provided here in this document. Marsh accepts no liability or responsibility for any errors or omissions in the content or for any loss or damages arising out of your reliance on information provided here. If there is a conflict in interpretation or benefit applicability, then the terms & conditions of the policy will prevail.

## **Prepared by**

Marsh India Insurance Brokers Private Limited RMZ Millenia 4<sup>th</sup> Floor, Tower –C Land Wing, Murphy Road, Ulsoor, Bangalore 560008

Copyright © 2015. All rights reserved. No part of this publication may be reproduced, stored in the retrieval system, or be transmitted in any form or by any means, electronic or mechanical, photocopying, recording or otherwise, without the prior written permission of MARSH.

## **Program Details**

Group Mediclaim Cover (GMC)
Base & Modular Plans\* (Voluntary)

Provides insurance coverage to employees and their enrolled dependents for expenses related to hospitalization due to illness, disease or injury

Opting for Modular plans enhances the sum insured for family & certain listed benefits.

Additional premium towards these plan to be borne by the employee

**Group Personal Accident (GPA)** 

Provides cover to employees against the financial risk of injury sustained due to an accident caused by violent, visible and external means

**Group Term Life (GTL)** 

Provides life insurance protection to employees. The Policy provides for payment of a lump sum to the nominated beneficiary in the unfortunate event of the employee's death



# Medical Benefits

MARSH

3

# GMC - Employee Coverage Details (Base Plan)

Policy Parameter		
➤ Insurer	United India Insurance Company (UIIC)	_
> TPA	FHPL	
➤ Policy Start Date	1 <sup>st</sup> April 2020	
➤ Policy End Date	31 <sup>st</sup> March 2021	1
➤ Coverage Type	Family Floater	
➤ Dependent Coverage	Dependent Coverage [1 + 5] (Employee+ Spouse+ 2 Dependent Children+ 2 Parents/Parents In Laws)	
> Sum Insured	INR 5 Lakhs for ESC with a capping of INR 4 Lakhs for parents/in laws	

Benefits / Extensions	Coverage
> Standard Hospitalization	• Yes
> TPA services	• Yes
> Pre existing diseases	• Yes
➤ Waiver on 1 <sup>st</sup> year exclusion	• Yes
➤ Waiver on 1 <sup>st</sup> 30 days exclusion	• Yes
> Maternity benefits	• Yes
> Pre & Post Natal Expenses	• Yes
➤ Day Care procedures	• Yes

Benefits / Extensions	Coverage	
➤ Baby cover day 1	• Yes	
➤ Dental & Vision • Restricted to accident cases onl		
➤ Co-pay	Yes, 20% on parents/in laws claims	
> Domiciliary Hospitalization	• No	
➤ Pre-Post Hospitalization Exp.	Yes, 30 & 60 days respectively	
➤ Ailment Capping	Cataract – INR 30,000 per eye	
> Emergency Ambulance	Yes, INR 1,000 per instance	
> Corporate Buffer	• Yes	

# GMC – Additional Benefits (Base Plan)

Benefits / Extensions	Coverage	<del>-</del>
➤ Oral Chemotherapy	Covered with an overall policy limit of INR 5 Lakhs	
> Ayurvedic & Unani treatment • Covered under registered/recognized government Ayurvedic hospitals/Medical colleges		

# **GMC – Dependents Coverage**

Maximum no. of Members insured in a family	Self + 5 Dependents (Employee + Spouse + 2 Dependent Children + 2 Parents or Parents In Laws)
Employee	Yes
Spouse	Yes
Children	Yes (for the first two living children) – 3rd baby covered up to a maximum of 25 cases
Parents	Yes
Parents-in-Law	Yes
Siblings	No
Others	No
Mid Term enrollment of existing Dependents	Disallowed
Mid Term enrollment of New Joiners (New employees + their Dependents)	Allowed, provided intimation to HR within 30 days from the date of event and enrollment link shall be forwarded wherein dependents needs to be enrolled and confirmed
Mid term enrollment of new dependents (Spouse/Children)	Allowed, only in case of marriage or birth of new born baby provided details are updated on Benefit Me portal within 30 days of the event. In case of such events, coverage starts from the day of the event  In case of any issues while adding dependents, please write to <a href="mailto:support.broadcom@marsh.com">support.broadcom@marsh.com</a>

## **GMC – Standard Coverage**

- · Room and boarding
- · Doctors fees
- Intensive Care Unit
- Nursing expenses
- Surgical fees, operating theatre, anesthesia and oxygen and their administration
- Physical therapy
- Drugs and medicines consumed on the premises
- Hospital miscellaneous services (such as laboratory, x-ray, diagnostic tests)
- Ambulance charges The Policy will cover Ambulance charges in connection with admitted claim incurred to shift the insured person from Residence/accident site to Hospital in emergency cases and from one Hospital/Nursing Home to another Hospital/Nursing Home/Diagnostic centre for better care/diagnosis, INR 1,000.
- A) The expenses are payable provided they are incurred in India and within the policy period. Expenses will be reimbursed to the covered member depending on the level of cover that he/she is entitled to.
- **B)** Expenses on Hospitalisation for minimum period of 24 hours are admissible. However this time limit will not apply for specific treatments i.e. Dialysis, Chemotherapy, Radiotherapy, Eye & Dental Surgery (due to accident), Lithotripsy (kidney stone removal), Tonsillectomy, D & C taken in the Hospital/Nursing home and the insured is discharged on the same day of the treatment will be considered to be taken under Hospitalisation Benefit.

# **GMC – Pre & Post Hospitalization**

Pre-hospitalization Expenses	
Definition	If the Insured member is diagnosed with an Illness which results in his / her Hospitalization and for which the Insurer accepts a claim, the Insurer will also reimburse the Insured Member's Prehospitalisation Expenses for up to 30 days prior to his / her Hospitalization.
Covered	Yes
Duration	30 Days

Post-hospitalization Expenses	
Definition	If the Insurer accepts a claim under Hospitalization and immediately following the Insured Member's discharge, further medical treatment directly related to the same condition for which the Insured Member was Hospitalized is required, the Insurer will reimburse the Insured member's Posthospitalisation Expenses for up to 60 day period.
Covered	Yes
Duration	60 Days

## **GMC – Maternity Benefits** (Base Plan)

Benefit Details	<u> </u>
For Normal Delivery	INR 55,000 within the Floater Sum Insured
For C – Section / Cesarean Delivery	INR 70,000 within the Floater Sum Insured
Waiting Period of 9 months	Waived off
Restriction on number of children	Maximum of 2 living children
Pre-Post Natal Expenses	Covered within maternity limit – only upon admission of mother in hospital for more than 24 hrs

- These benefits are admissible in case of hospitalization in India.
- Covers first two living children only. Those who already have two or more living children will not be eligible for this benefit.
- Expenses incurred in connection with voluntary medical termination of pregnancy during the first 12 weeks from the date of conception are not covered.

### Baby Day One Cover -

All new born babies are eligible to be covered form date of birth subject to declaration to FHPL TPA or updating same on Benefit Me portal with in 30 days from the date of the event.

In an unfortunate event of baby requiring inpatient hospital care, the policy extends the coverage to the event.

The baby gets covered within the available family floater sum insured for the policy year.

# GMC - Coverage Levels (Base Plan)

Eligible Members	Sum Insured
Employee, Spouse, Children and Parents & Parents In Laws	INR 5 lakhs for ESC with a capping of INR 4 lakhs for parents/in laws
Co payment	Amount
Co payment	Co-pay of 20% on all parents & parents in laws claims
Room Rent Eligibility	Coverage
Room rent Eligibility*  **Room rent including Nursing, resident doctor and related charges	For normal hospitalization: INR 6,000 per day or single standard A/C room which ever is less For ICU hospitalization: INR 15,000 per day
Corporate Buffer	Coverage and Process
INR 50 Lakhs for whole group	In case if an employee exhausts the base policy & the Top up/modular sum insured, Broadcom can support employee/ family with additional cover from corporate buffer (CB) amount. CB can be utilized for below list of critical illness only, please note the below is:  Cancer of specified severity  First heart attack of specified severity  Open chest CABG  Open heart replacement or repair of heart valves  Coma of specified severity  Kidney failure  Stroke resulting in permanent symptoms  Major organ/bone marrow transplant  Permanent paralysis of limbs  Multiple sclerosis with persisting symptoms  Employee should reach out to internal HR team with case synopsis (line of treatment, doctor's prescriptions & cost estimates/incurred). HR will consult the Insurance company and will provide the necessary approval as appropriate.  *For more information on the critical illness list, please refer to the document uploaded in the Benefits me portal Login to Benefit Me portal -> Click on Menu -> Click on Download Centre -> Select the 2020 policy

MARSH \*New

<sup>\*\*</sup>Opting for a room of a higher category than the eligible category will result in higher cost for all hospitalization services, which must be borne by the claimant

# **GMC – Voluntary Top Up Insurance : Modular Plans**

Plan name Base Plan	Voluntary Top Up Options			
Plan name	Dase Flaii	Silver Plan	Gold Plan	Platinum Plan
Total Sum Insured	INR 500,000	Base Policy + INR 300,000	Base Policy + INR 500,000	Base Policy + INR 700,000
Parental Sum Insured restriction	INR 400,000	Base Policy Limit + INR 300,000	Base Policy Limit + INR 500,000	Base Policy Limit + INR 700,000
			Additional coverage	
Room Rent/ICU (per day)	Normal : INR 6,000 or single standard AC room whichever is lesser ICU : INR 15,000	Normal : upto INR 7,000 or single standard AC room whichever is lesser ICU : INR 15,000	les	e standard AC room whichever is sser on actuals
Maternity (Normal/C-section)	Normal : INR 55,000 C-Section : INR 70,000	Normal : INR 60,000 C-Section : INR 70,000	Normal : INR 70,000 C-Section : INR 80,000	Normal : INR 80,000 C-Section : INR 100,000
Well baby expenses	Not Covered	Not Covered	Upto 5% of Maternity limit within Maternity SI	
Well mother expenses	Not Covered	Not Covered	Room rent charges u	p to INR 5000 per day
Infertility Expenses (IPD & OPD)	Not Covered	Not Covered	INR 50,000	INR 75,000
ARMD	Not Covered	Not Covered	INR 40,000	INR 60,000
TOTAL Annual Premium to be paid by Employee (Incl. GST)	Nil	INR 9,794	INR 17,582	INR 29,028

#### Please note:

- All employees are automatically enrolled under Base Plan. Family details need to be updated on Benefit Me portal during enrollment period
- Above are annual premium values inclusive of GST @18%
- Premium towards above plans will be deducted in April from employee's payroll
  All other terms and conditions of above plans remains same as per Group Medical Base Policy
- For new joiners after 1st April 2020, cover starts from their date of joining and pro-rata premium will be charged
- · Modular Plan selected (if opted) and family details cannot be changed in between policy period.

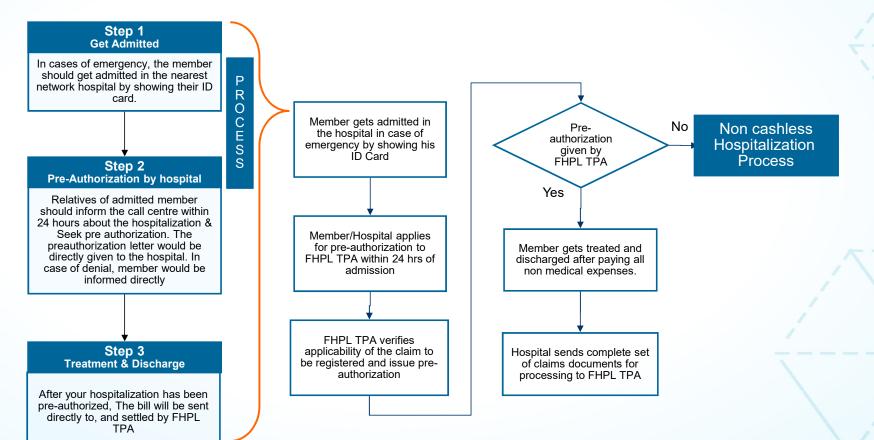
## **GMC – Cashless Process**

Cashless means the Administrator may authorize upon a Policyholder's request for direct settlement of eligible services and it's according charges between a Network Hospital and the Administrator. In such case the Administrator will directly settle all eligible amounts with the Network Hospital and the Insured Person may not have to pay any deposits at the commencement of the treatment or bills after the end of treatment to the extent as these services are covered under the Policy.

Hospitals in the network eligible for cashless process (please refer to the steps below for viewing the updated list)		
	Visit <u>www.fhpl.net</u> Click on " <b>Hospital Networks</b> "	
Network Hospital list	Select insurance company as "United India Insurance Co. Ltd."	
	Enter State, city and then click on "Show info"	
	Or visit Benefitme portal via Broadcom OKTA	

**Note :** Patients seeking treatment under cashless hospitalization are eligible to make claims under pre and post hospitalization expenses. For all such expenses the bills and other required documents needs to submitted separately as part of the claims reimbursement.

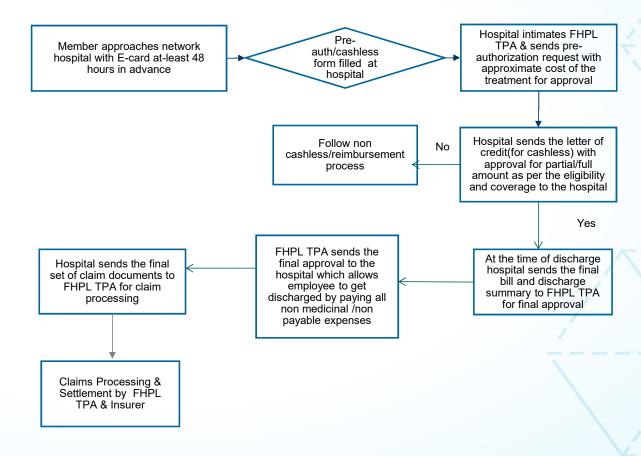
# **GMC – Emergency Hospitalization & Process**



# **GMC – Planned Hospitalization**

#### **Pre-Authorization**

All non-emergency hospitalization instances must be pre-authorized with FHPL TPA, as per the procedure detailed below. This is done to ensure that the best healthcare possible, is obtained, and the patient/employee is not inconvenienced when taking admission into a Network Hospital.



## **GMC – Non-Cashless**

### **Admission procedure**

- In case you choose a non-network hospital you will have to liaise directly with the hospital for admission.
- However you are advised to follow the pre authorization procedure to ensure eligibility for reimbursement of hospitalization expenses from the insurer.

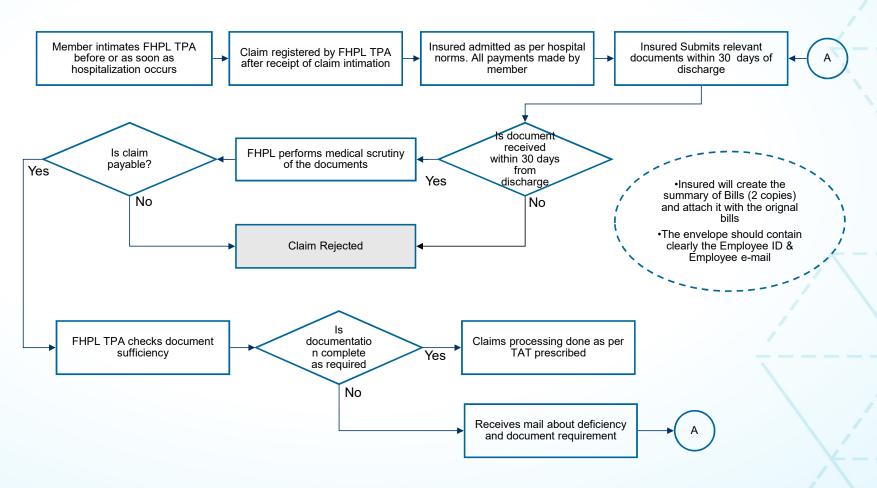
#### Discharge procedure

• In case of non network hospital, you will be required to clear the bills and submit the claim to FHPL TPA for reimbursement from the insurer. Please ensure that you collect all necessary documents such as – discharge summary, investigation reports etc. for submitting your claim.

### Submission of hospitalization claim

• You must submit the final claim with all relevant documents within **30 days** from the date of discharge from the hospital at FHPL Helpdesk.

## **GMC – Non-Cashless Claims Process**



## **GMC – Claim Document Checklist**

Completed Claim form with Signature

Hospital bills in original (with bill no; signed and stamped by the hospital) with all charges itemized and the original receipts

Discharge Report (original)

Attending doctors' bills and receipts and certificate regarding diagnosis (if separate from hospital bill)

Original reports or attested copies of Bills and Receipts for Medicines, Investigations along with Doctors prescription in Original and Laboratory, Stickers in case of Implants E.g.: Lens (Cataract), Stents (Heart Surgery) etc.

Follow-up advice or letter for line of treatment after discharge from hospital, from Doctor.

Provide Break up details including Pharmacy items, Materials, Investigations even though it is there in the main bill

In case the hospital is not registered, please get a letter on the Hospital letterhead mentioning the number of beds and availability of doctors and nurses round the clock.

In non- network hospital, you may have to get the hospital and doctor's registration number in Hospital letterhead and get the same signed and stamped by the hospital, if required

All remittance would be done through RTGS/ NEFT only . Please attach cancelled cheque leaf along with claim documents

# **GMC** – Benefit Definitions

Benefits	Definition
Pre existing diseases	Any Pre-Existing ailments such as diabetes, hypertension, etc or related ailments for which care, treatment or advice was recommended by or received from a Doctor or which was first manifested prior to the commencement date of the Insured Person's first Health Insurance policy with the Insurer
First 30 day waiting period	Any Illness diagnosed or diagnosable within 30 days of the effective date of the Policy Period if this is the first Health Policy taken by the Policyholder with the Insurer. If the Policyholder renews the Health Policy with the Insurer and increases the Limit of Indemnity, then this exclusion shall apply in relation to the amount by which the Limit of Indemnity has been increased
First Year Waiting period	During the first year of the operation of the policy the expenses on treatment of diseases such as Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia or Fibromyoma, Hernia, Hydrocele, Congenital Internal Diseases, Fistula in anus, Piles, Sinusitis and related disorders are not payable. If these diseases are pre- existing at the time of proposal they will not be covered even during subsequent period or renewal too
Baby Cover Day 1	This policy is extended to cover the new born child of an employee covered under the Policy. Not withstanding this extension, the Insured shall be required to cover the newly born children.
Ambulance	Actuals or INR 1,000 whichever is lower, covered for Emergency ambulance and other road transportation by a licensed ambulance service to the nearest Hospital where Emergency Health Services can be rendered. Coverage is only provided in the event of an Emergency.
Day Care	Day Care Procedure means the course of medical treatment or a surgical procedure listed in the Schedule which is undertaken under general or local anesthesia in a Hospital by a Doctor in not less than 2 hours and not more than 24 hours. Generally 8 aliments (i.e. Dialysis, Chemotherapy, Radiotherapy, Cataract surgery, Lithotripsy (kidney stone removal), Tonsillectomy, D & C)

## **GMC – General Exclusions**

- · Circumcision unless necessary for treatment of disease
- Congenital external diseases or defects/anomalies
- Treatments/ procedures attributing Fertility, sterilization. HIV and AIDS, Venereal diseases
- · Hospitalization for convalescence, general debility, intentional self-injury, use of intoxicating drugs/ alcohol, obesity
- Naturopathy, chiropractic medicine, herbalism, traditional Chinese medicine, meditation, yoga, biofeedback, hypnosis, homeopathy, acupuncture, and nutritional-based therapies.
- · Any non-medical expenses like registration fees, admission fees, charges for medical records, cafeteria charges, telephone charges, hospital surcharges etc
- · Cost of spectacles, contact lenses, hearing aids, cost of appliances, spectacles, contact lenses, hearing aids
- · Any cosmetic or plastic surgery except for correction of injury
- · Hospitalization for diagnostic tests only
- · Vitamins and tonics unless used for treatment of injury or disease
- · Voluntary termination of pregnancy during first 12 weeks (MTP), Sterilization
- · Claims submitted without prescriptions/diagnosis/ original bills
- Costs incurred as a part of membership/subscription to a clinic or health center, Health foods, Dietary supplements
- · Injury or disease directly or indirectly caused by or arising from or attributable to War or War-like situations, nuclear weapons
- Others: Example- Service Tax, Luxury Tax, barber or attendant charges etc.
- Treatment such as Rotational Field Quantum Magnetic Resonance (RFQMR), Enhanced External Counter Pulsation (EECP).

#### **OPD Claim**

- · Claims (of high value) submitted without prescriptions/diagnosis
- Vitamins and tonics unless used for treatment of injury or diseases or Health foods
- Costs incurred as a part of membership/subscription to a clinic or health center
- Cost of appliances, spectacles, contact lenses, hearing aids; Non-medical expenses like Hospital surcharge, telephone bills, cafeteria bills

Above list is not exhaustive

## **GMC – Non Medical Expenses**

## **Administrative Expenses**

- Admission charges
- Registration charges
- Medical Records/Medico-legal charges
- · Attendant stay charges
- Relative stay charges
- Additional stay
- · Gate pass / Attendant pass
- · Overhead charges
- Establishment charges
- Taxes
- Surcharge
- Incidental charge
- Waste disposal charges

#### **Documentation Expenses**

- Documentation charges
- · Medical records charges
- · Discharge summary
- · Birth certificate
- Death certificate
- Medical certificate

#### **CONSUMABLES**

- Antiseptic/disinfectant solutions Soap
- · Powder (talc)
- Oil /Cream
- Cream
- · Sanitary pads / Diapers
- · Cassette / CD / Film charges
- · Oxygen cylinder
- · Health Foods

#### **Services**

- · Private nurse charges
- · Telephone charges
- · Fax charges
- Food / beverages
- Diet
- Electricity charges
- Water charges
- T.V. / internet charges
- Newspaper / magazines
- A/c charges
- Stationery charges
- Linen / laundry charges
- Mortuary / coffin charges

# **GMC – Contact Details & Escalation Matrix**

TPA	First Level			Escalation Contact
	HYDERABAD			
	Raheja Mindspace, Building 9	Raheja Mindspace, Building 10	CA Tech, Nanakramguda	
	Wednesday, 10 AM – 12:30 PM	Thursday, 1:30 PM – 4 PM	Monday, 2 PM – 6 PM	
	Name – Mr. Satish Maarna	Name – Mr. Satish Maarna	Mr. Goutham	
	satishmaarna@fhpl.net	satishmaarna@fhpl.net	Gautam.Aurad@fhpl.net	
	Contact Number – 9246580325	Contact Number – 9246580325	Contact number – 9246249911	
	BANGALORE			
	Broadcom, Electronic City		CA Tech, Ecospace	
FHPL	Tuesday & Thursday, 10 AM – 4 PM 2 <sup>nd</sup> & 4 <sup>th</sup> Wedne		2 <sup>nd</sup> & 4 <sup>th</sup> Wednesday, 3 – 4 PM	Mr. Aji Thomas ajithomas@fhpl.net
	Name – Mr. Pradeep		Name – Mr. Pradeep	ајшотазатр.пос
	pradeep.chandrappa@fhpl.net		pradeep.chandrappa@fhpl.net	
	Contact Number – 9243479823		Contact Number – 9243479823	
	PUNE			
	Cluster B, Wing 2, EON Free Zone			
	Tuesday & Thursday, 10 AM – 4 PM			
	Name – Mr. Sajid			
	Contact Number – 7798240003			

For any further queries, please write to <a href="mailto:support.broadcom@marsh.com">support.broadcom@marsh.com</a> queries For any claim related query please add <a href="mailto:Broadcom@fhpl.net">Broadcom@fhpl.net</a> also in the mail



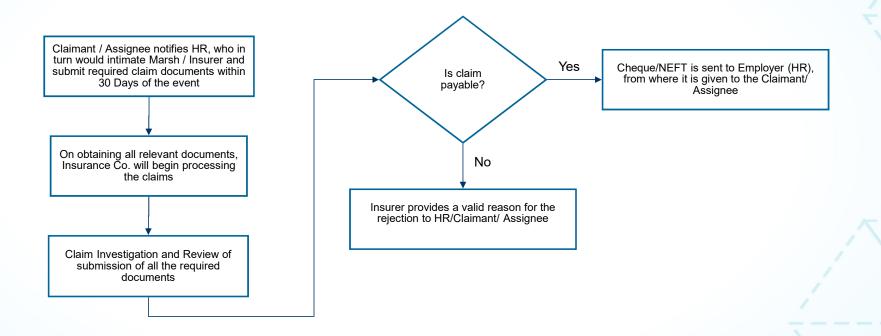
# Personal Accident Benefits

## **GPA – Benefit details**

This insurance provides compensation/payment up to a financial limit as assigned by the company, to the insured person or his legal personal representative, if the insured person suffers death or disablement due to an accident. The cover is worldwide but payment of claim can only be made in India and in Indian Rupees.

Policy Parameter			
Insurer	United India Insurance Company		
Policy Start Date	■ 1 <sup>st</sup> April 2020		
Policy End Date	■ 31 <sup>st</sup> March 2021		
Members Covered	■ Employees		
Sum Insured	■ 3 X Annual Base Salary		
Coverage Details			
Accidental Death	Yes (100% of Capital Sum Insured)  — — —		
Permanent Total Disability	Yes (100% of Capital Sum Insured)		
Permanent Partial Disability	• Yes		
Loss of one hand / one foot / loss of one eye sight	■ Yes (50% of SI)		
Temporary Total Disability	Actual Weekly salary or INR 5,000 whichever is lower for 104 weeks		
Medical Extension	■ 10% of Sum Insured or 40% of the admissible claim or actual whichever is lower		
Geographical Limits	■ World wide		
Terrorism	■ Covered		

## **GPA – Claim Process**



## **GPA – Claim Document Checklist**

### **Benefit Claims**

- 1.Completed Claim form
- 2.Doctor's Report
- 3. Disability Certificate from the Doctor, if any
- 4.Investigation/ Lab reports (x-ray etc.)
- 5.Original Admission/discharge card, if hospitalized
- 6.Employers Leave Certificate & Details of salary

### **Death Claims**

- 1.Completed claim form
- 2.Attending Doctor's report
- 3.Death Certificate
- 4.Post Mortem/ Coroner's report
- 5.FIR (First Information Report)
- 6.Police Inquest report, wherever applicable

### Disablement Claims

- 1.Completed claim form
- 2.Doctor's Report
- 3. Disability Certificate from the Doctor
- 4.Investigation/ Lab reports (x-ray etc.)
- 5. Original Admission/ discharge card, if hospitalized.
- 6.Police Inquest report, wherever applicable

## **GPA – General Exclusions**

- 1. Service on duty with any armed force
- 2. Insanity
- 3. Venereal disease
- 4. AIDS
- 5. Influence of intoxicating drink or drugs / self / intentional injury
- 6. Aviation other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft any where in the world
- 7. Nuclear radiation or nuclear weapons material
- 8. Any consequence of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, mutiny, military, or usurped power, seizure, capture, arrest, restraint, detainment's of all kings, princes, and people of whatever nation, conditions and qualities so ever
- 9. Childbirth, pregnancy or other physical causes peculiar to the female sex
- 10. While committing any breach of law with criminal intent



# Term Life Benefits

MARSH

27

# **GTL** – Benefit Details

Policy Parameter ——		
Insurer	Aditya Birla Sun Life Insurance Company	
Policy Start Date	■ 1st April 2020	
Policy End Date	■ 31st March 2021	
Members Covered	■ Full time Employees only	
Sum Insured	■ 3 X Annual Base Salary	
Coverage Details		
Death cover	■ 100 % of Sum Insured	

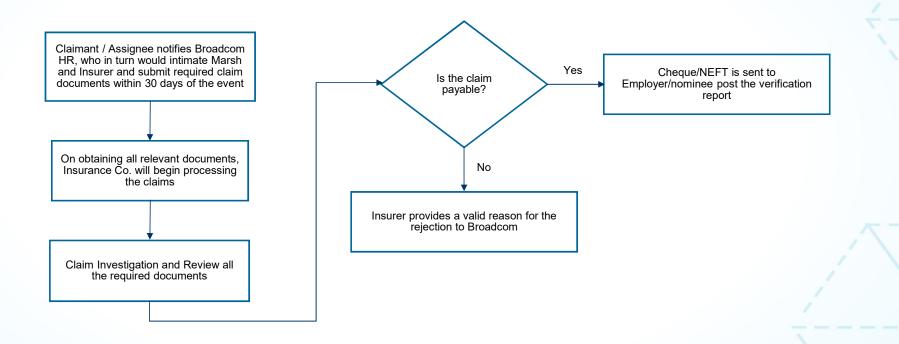
28

## GTL - Document Checklist & List of Critical illness covered

### **Document Checklist**

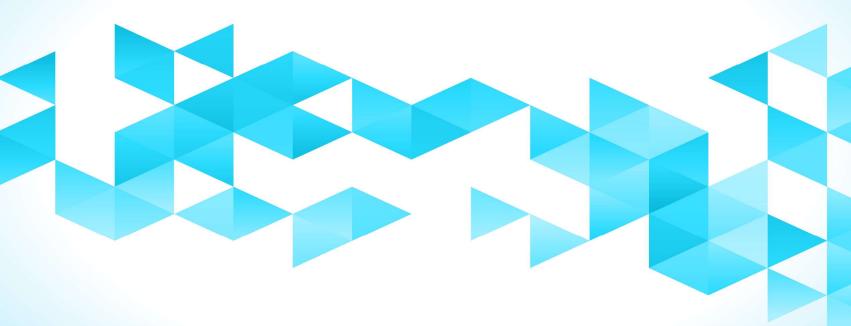
- Claim form (completely filled)
- Death Certificate (original or attested)
- Attendance record & salary slips (last 2 months)
- Identification of deceased (photo ID with DOB)
- Member enrolment form
- Beneficiary identification with relationship proof
- Post Mortem report (if performed)
- FIR report (in accident cases)

## **GTL - Claim Process**





SOLUTIONS...DEFINED, DESIGNED, AND DELIVERED.



Thank You

