



# Employee Benefits Manual

Client	HDFC ERGO General Insurance Company Limited
Document No	Marsh/2021-22

# Program Details

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## Group Medical

Provides insurance coverage to employees for expenses related to hospitalization due to illness, disease or injury



# Medical Benefits

# Medical Benefit

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# Medical Benefit – Coverage Details

Policy Parameter	
➤ Insurer	ICICI Lombard General Insurance Company Limited
➤ TPA	Medi Assist
➤ Policy Start Date	20/10/2021
➤ Policy End Date	19/10/2022
➤ Coverage Type	Family Floater
➤ Dependent Coverage	Employee + Spouse + 2 Dependent Children (Up to 25 years of age) + 2 Dependent Parents/ Parents-in-law
	<p><b>Employees will be given a one time option to choose coverage for either set of dependent parents OR in-laws.</b></p> <p><b>*Employee having one parent and 2 in-laws alive OR 2 parents and 1 in-law alive will not be allowed for cross combination and will be required to cover either parent/parents OR in-law/in-laws.</b></p> <p><b>*Employee having only one parent and one in-law alive will have an option to cover both in this scenario*</b></p>
➤ Sum Insured (Graded)	INR 4 Lacs, 6 Lacs, 7.5 Lacs and 10 Lacs as per grades

**\*Please note the below declaration will be required from the employee in case you have enrolled one Parent and one Parent-In-Law-**

**I hereby confirm that amongst my dependent Parents/In-laws, I have only one surviving Parent and one surviving Parent-In-law whom I am enrolling in Group Medical Policy Program of HDFC ERGO for the year 2021-22. I agree to share any document that may be required in view of this declaration.**

# Medical Benefit – Coverage Details

Benefits / Extensions	Coverage
➤ Standard Hospitalization	• Yes
➤ Room Rent restriction	<p><b>Normal Hospitalization:</b> Room Rent restricted to 1% of Sum Insured</p> <p><b>ICU:</b> Room rent restricted to 2% of Sum Insured</p> <p>No proportionate deductions applicable. Proportionate deductions applicable only on differential room rent (if any)</p>
➤ TPA services	• Yes
➤ Pre existing diseases	• Yes – Covered
➤ Waiver on 1 <sup>st</sup> year exclusion	• Yes – Covered
➤ Ailment wise cappings	• No capping
➤ Maternity benefits	<p>• Yes – Covered.</p> <p>• Normal Delivery: INR 75,000, C-section Delivery: INR 1,00,000, Any complication arising during prenatal that leads to hospitalization will be treated as standalone claim payable up to full sum insured and Maternity sublimit will not be applicable</p>
➤ IVF & Infertility cover	<p>• IVF treatment Covered on both OPD and IPD basis up to Maternity Limit</p> <p>• Infertility treatment covered on Day Care and IPD basis up to Maternity Limit. Infertility treatment on OPD basis not covered.</p>

# Medical Benefit – Coverage Details

Benefits / Extensions	Coverage
➤ Pre & Post Natal Expenses	• Covered within overall maternity limit
➤ Waiver on 1 <sup>st</sup> 30 days excl.	• Yes – Covered
➤ 9 months waiting period for Maternity cover	• Waived off
➤ Baby cover day 1	• Yes
➤ Day Care	• Yes
➤ Dental and Vision	• Restricted (Covered only in case of accident)
➤ Pre-Post Hospitalization Exp.	• Yes (30 days and 60 days respectively)
➤ Ambulance Charges	• Yes – As per actuals; Air ambulance covered as per actuals (In India only)
➤ Co Payment	<p>10% Co-pay on ESC (Employee, Spouse, Child) Claims</p> <p>On Parental Claims- For 4 Lac SI 20% Copayment in each &amp; every claim subject to max of INR 40,000 per claim On Parental Claims For 6 Lacs , 7.5 Lacs &amp; 10 Lacs SI- 20% Co-pay all Claims.</p> <p>No Co-pay for employees and dependents, who have completed more than 5 years of service in the organization as on the date of hospitalization.</p> <p>On Maternity Co Pay is not applicable, On Claims settled through corporate buffer Co-pay is not applicable, No deduction of Co-pay on base sum insured in case of death of patient during hospitalization</p>

# Medical Benefit – Coverage Details

Benefits / Extensions	Coverage
➤ Psychiatric related treatment	<ul style="list-style-type: none"> <li>Policy limit of INR 5,00,000 with a per incidence limit of INR 50,000. The cover offered only for hospitalization treatments and not extended as OPD/ Consultation. The cover is granted to employees and dependents</li> </ul>
➤ Genetic disease/Stem cell therapy/Cyber knife/cochlear implant	<ul style="list-style-type: none"> <li>Covered up to the Sum assured limit</li> </ul>
➤ Oral Chemotherapy	<ul style="list-style-type: none"> <li>Covered within overall Sum Insured</li> </ul>
➤ Angiography	<ul style="list-style-type: none"> <li>To be Covered up to INR 30,000/- even if it does not lead to hospitalization</li> </ul>
➤ RMO Charges	<ul style="list-style-type: none"> <li>RMO Charges: RMO, DMO, Intensivist &amp; related charges payable, Nursing charges payable</li> </ul>
➤ AMRD	<ul style="list-style-type: none"> <li>Intravitreal injection Avastin/ Lucentis for AMRD covered</li> </ul>
➤ Organ donor expenses	<ul style="list-style-type: none"> <li>Organ Donor surgery/treatment/hospitalization expenses payable</li> </ul>
➤ Investigations and Evaluations in case of life threatening situations without an active line of treatment	<ul style="list-style-type: none"> <li>Covered</li> </ul>
➤ External Prosthesis	<ul style="list-style-type: none"> <li>Covered</li> </ul>



# Medical Benefit – Coverage Details

Benefits / Extensions	Coverage
➤ Robotic and advanced technology treatment	Covered
➤ Inclusion of Crohn's disease	Covered
➤ Special condition	Plasma therapy and other therapies (duly recognized by the competent authorities) for Covid 19 and any other Pandemic hospitalizations to be covered Home Care solutions to be covered on indemnity basis up to INR 15,000 per incident within the sum insured limit (Covid and Non-Covid both)

# Medical Benefit – Dependent Coverage

Maximum no of members insured in a family	<p>1+5=6</p> <p>Employee + Spouse + 2 dependent children (Up to 25 years of age) + 2 dependent parents / in-laws</p> <p>Employees will be given a one time option to choose coverage for either set of dependent parents OR in-laws</p> <p>*Employee having one parent and 2 in-laws alive OR 2 parents and 1 in-law alive will not be allowed for cross combination and will be required to cover either parent/parents OR in-law/in-laws</p> <p>*Employee having only one parent and one in-law alive will have an option to cover both in this scenario.</p>
Employee	Yes
Spouse	Yes
Children	Yes
Parents/ In-Laws	Yes
Siblings	No
Others	No
Mid Term enrollment of New Joinees (New employees +their Dependents)	<p>Allowed – Commencement cover from date of joining</p> <p>(Subject to condition - Intimation to reach insurer within 30 days from date of event)</p>
Mid term enrollment of new dependents (Spouse/Children)	<p>Allowed - Commencement cover from date of joining</p> <p>only for newly married spouse &amp; New born baby</p> <p>(Subject to condition - Intimation to reach insurer within 30 days from date of event)</p>

**No Individual should be covered as dependent of more than one employee**

# Medical Benefit – Policy Period

<b>Existing Employees + Dependents</b>	
Commencement Date	20/10/2021
Termination Date	19/10/2022 or date of leaving , whichever is earlier
<b>New Joinees + Dependents</b>	
Commencement Date	Date of Joining
Termination Date	19/10/2022 or date of leaving , whichever is earlier
<b>New Dependents (due to Marriage / Birth)</b>	
Commencement Date	Date of such event (Intimation to be given to HR within 30 days from Date of Marriage / Date of Birth)
Termination Date	19/10/2022 or date of leaving , whichever is earlier

# Medical Benefit – Coverage Levels

Sum Insured	Family Floater
Employee + Dependents	INR 4 Lacs, INR 6 Lacs, INR 7.5 Lacs & INR 10 Lacs
Restrictions on sum insured	Not Applicable
Employee	Not Applicable
Dependents	Not Applicable

# Medical Benefit – Standard Coverage

## Covers expenses related to

- 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)
- Dressing, ordinary splints and plaster casts
- Costs of prosthetic devices if implanted during a surgical procedure
- Radiotherapy and chemotherapy

**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 Hospitalization 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 Hospitalization Benefit.*

# Pre & Post Hospitalization Expenses

## Pre-hospitalisation Expenses

Definition	<ul style="list-style-type: none"><li>• 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 Pre-hospitalisation Expenses for up to 30 days prior to his / her Hospitalization.</li></ul>
Covered	<ul style="list-style-type: none"><li>• Yes</li></ul>
Duration	<ul style="list-style-type: none"><li>• 30 Days</li></ul>

## Post-hospitalisation Expenses

Definition	<ul style="list-style-type: none"><li>• 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 Post-hospitalisation Expenses for up to 60 day period.</li></ul>
Covered	<ul style="list-style-type: none"><li>• Yes</li></ul>
Duration	<ul style="list-style-type: none"><li>• 60 Days</li></ul>

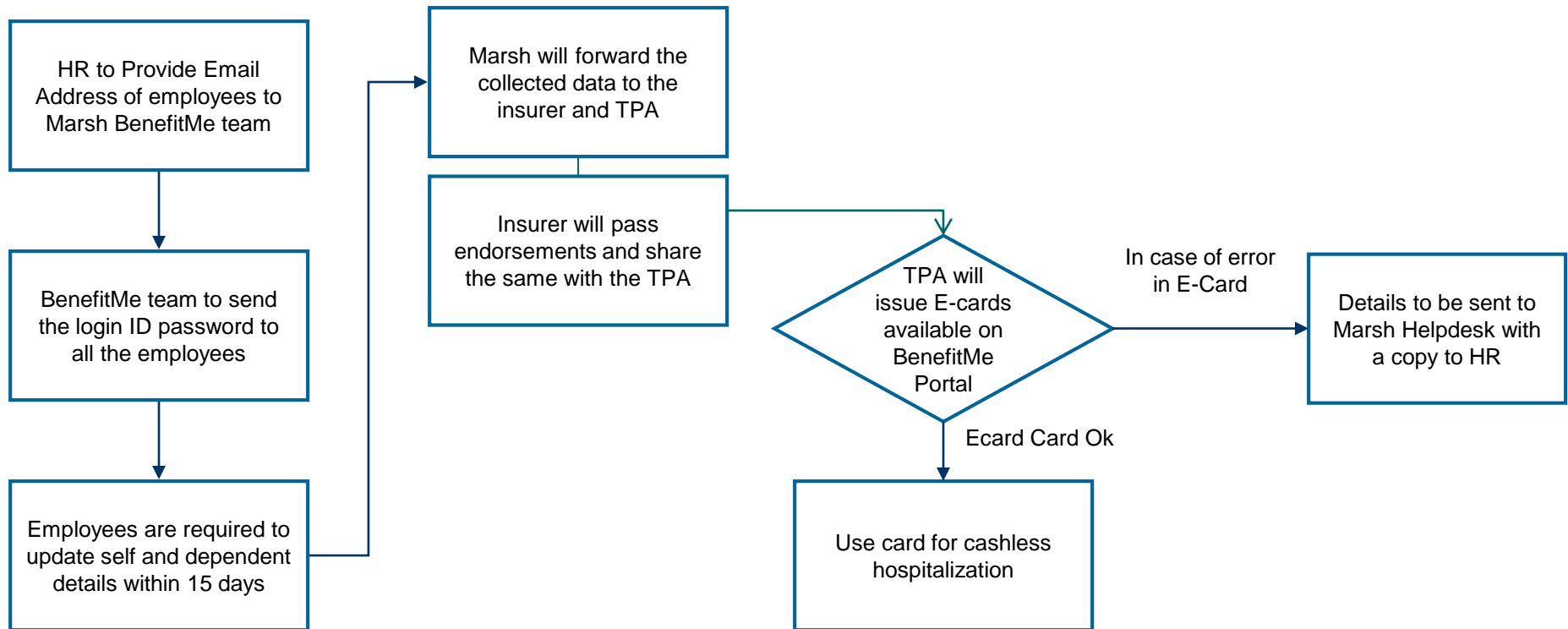
# Maternity Benefits

Benefit Details	
Benefit Amount	• INR 75K for Normal delivery and INR 1 Lac for C-Section
9 Months waiting period	• Waived off
Pre-Post Natal Expenses	• Covered (Within overall Maternity limit)
IVF & Infertility cover	• IVF treatment Covered on both OPD and IPD basis up to Maternity Limit • Infertility treatment covered on Day Care and IPD basis up to Maternity Limit. Infertility treatment on OPD basis not covered.

- These benefits are admissible in case of hospitalization in India.
- Policy covers two children only.
- Expenses incurred in connection with voluntary medical termination of pregnancy during the first 12 weeks from the date of conception are not covered.

# Medical Benefit – Enrollment

- Existing employees are covered under the policy from 20/10/2021 as per data submitted to HR.
- In case of change of status due to marriage or birth of child , enrolment must be done within 30 days of such event.





# Medical Benefit – Cashless Process

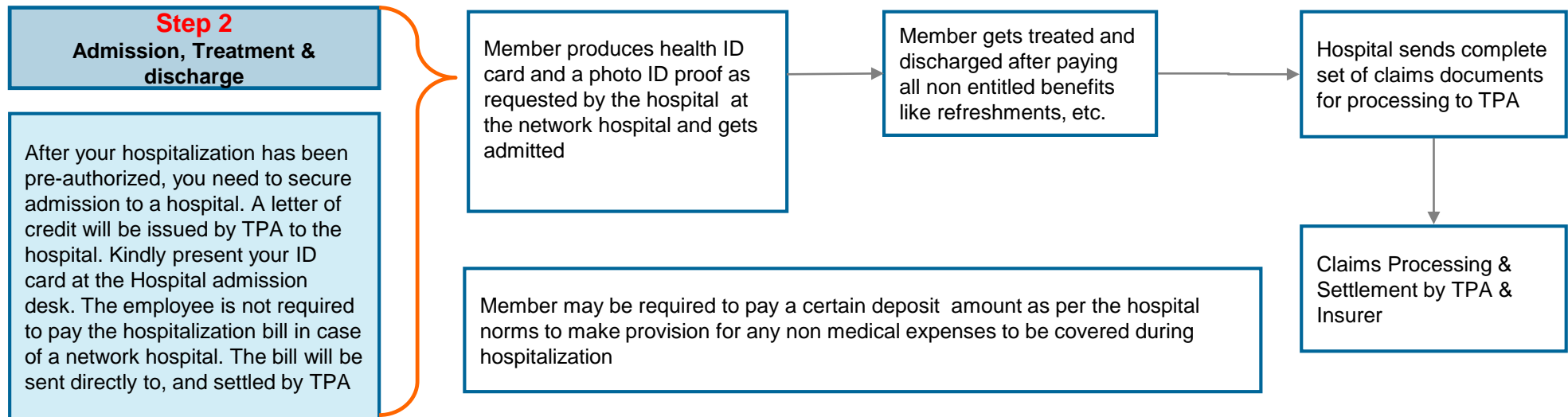
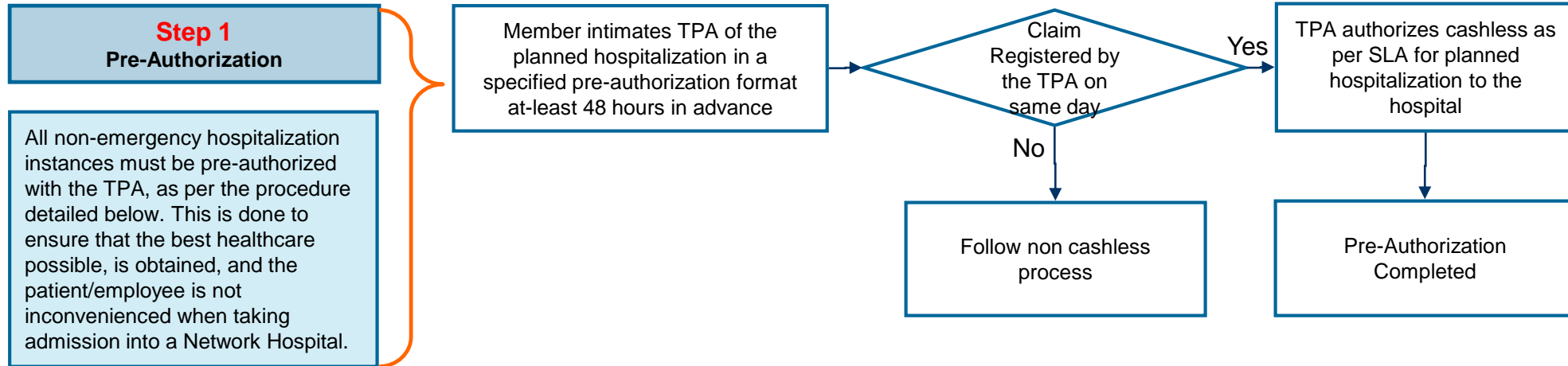
Cashless means the Administrator may authorize upon a Policyholder's request for direct settlement of eligible services and its according charges between a Network Hospital and the Administrator. In such case the administrator will directly settle all eligible amounts with the Network Hospital and the 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 (please refer to the website for the updated list)

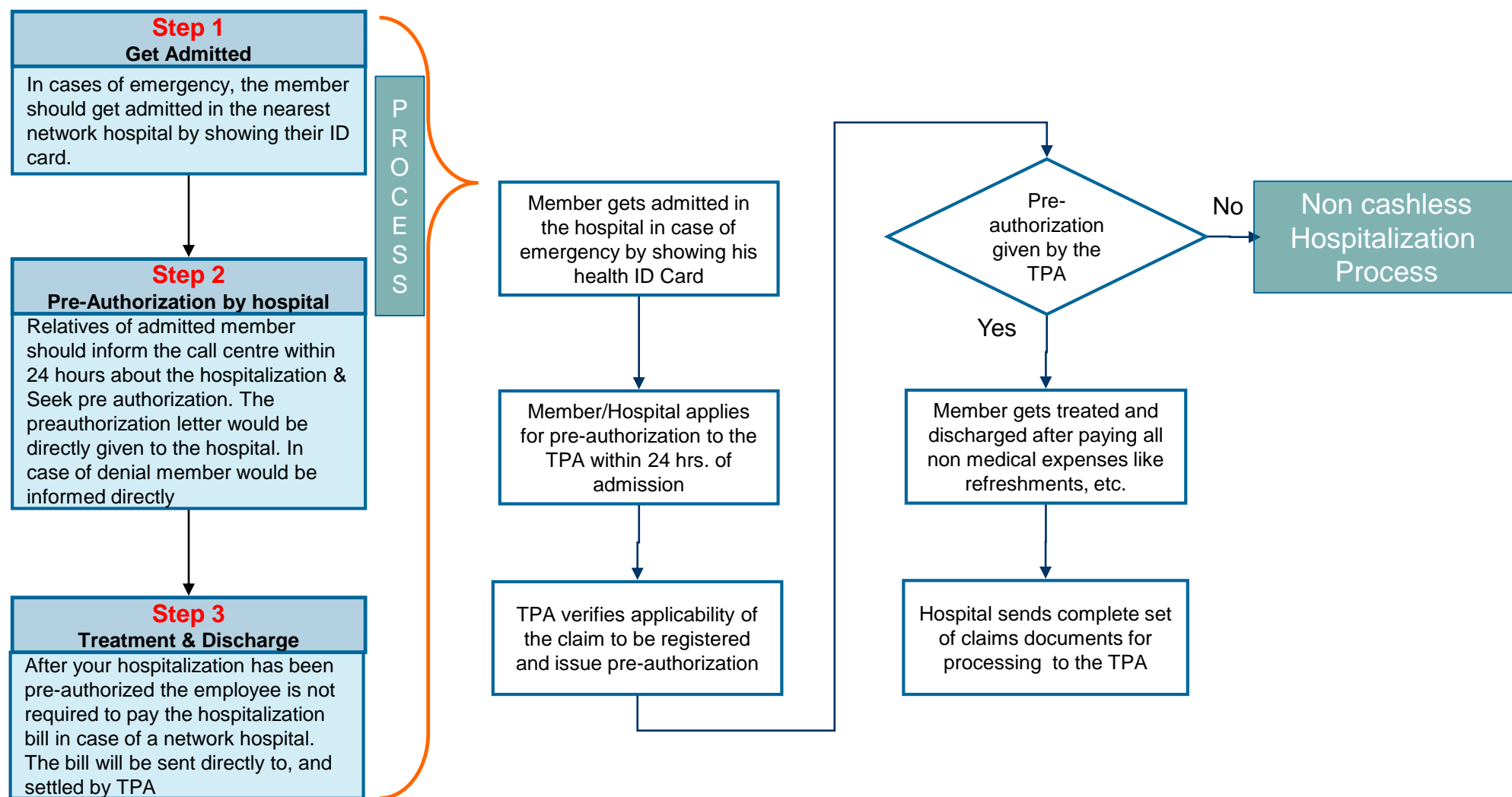
**For a list of hospitals in the TPA network eligible for cashless process, please login to [www.benefitme.co.in](http://www.benefitme.co.in) or contact 9513360004**

**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.

# Planned Hospitalization



# Emergency Hospitalization & Process



# 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 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.

## **REIMBURSEMENT CLAIM FORM TO BE SENT TO THE FOLLOWING ADDRESS:**

Ganesh Tanaji/Poonam Rupesh,

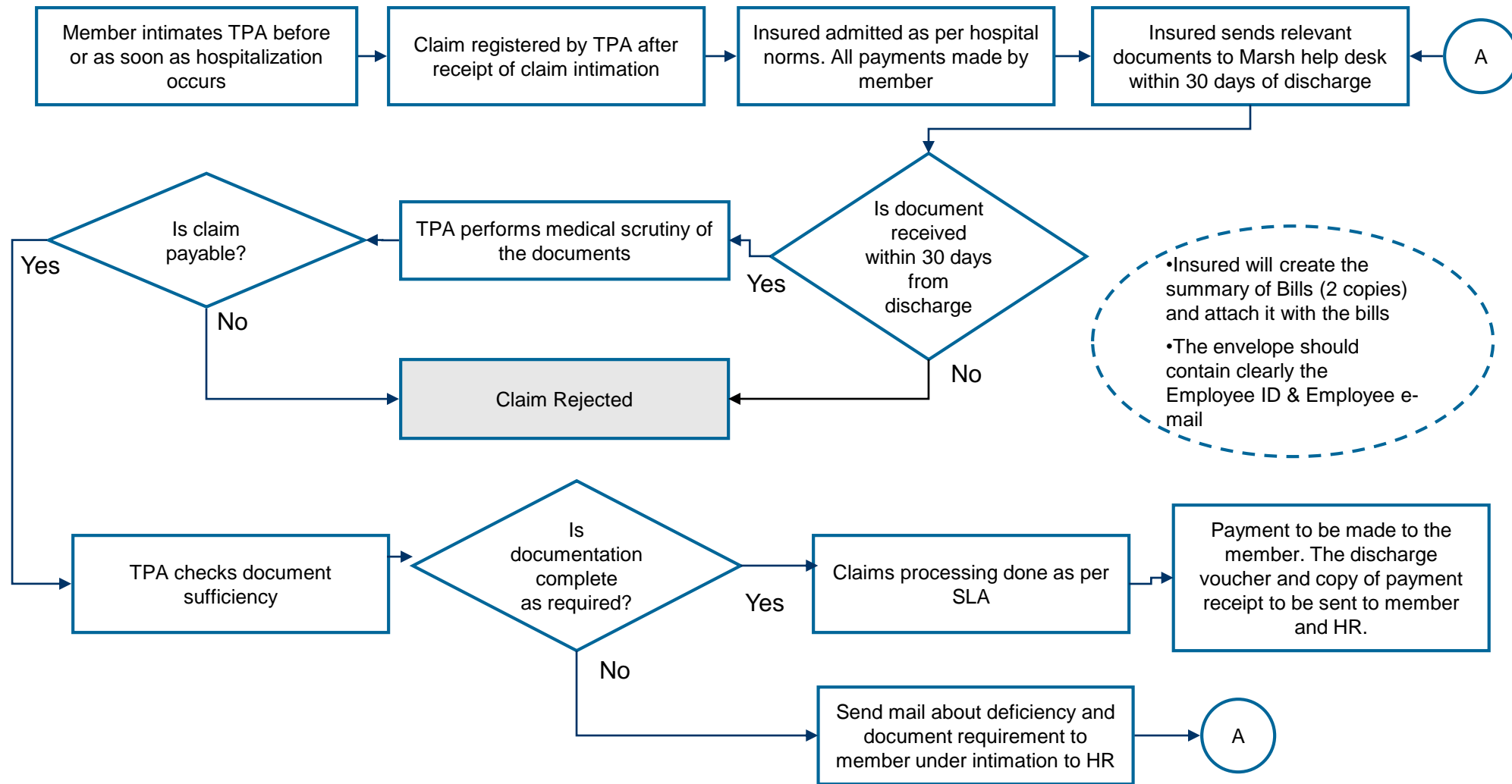
Address: 4th floor, AARPEE Chambers, Off Andheri-Kurla Road Industail Estate Marol, Andheri East, , Marol Cooperative Next To Times Square, Shagbaug, Gamdevi, Marol, Mumbai, Maharashtra 400059

Contact number:-7411787684

Email:-Hdfcergo@mediassist.in

Kindly retain a photocopy set of all documents sent for your records

# Non-Cashless Claims Process



# Claims Document List

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.

**\*Please retain photocopies of all documents submitted**

# Benefit Extensions – Definitions

Benefits	Definition
<b>Pre existing diseases – Covered</b>	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
<b>First 30 day waiting period – Waived</b>	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
<b>Baby Cover Day 1 – Covered</b>	In consideration of additional premium, this policy is extended to cover the new born child of an employee covered under the Policy from the time of birth till 90 days. Notwithstanding this extension, the Insured shall be required to cover the newly born children after 90 days as additional member as mentioned elsewhere under this Policy.
<b>Ambulance – Covered</b>	The Insurer will pay 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.
<b>Day Care - Covered</b>	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 9 ailments (i.e. Cystoplasty, Dialysis, Chemotherapy, Radiotherapy, Eye surgery, Dental Surgery, Lithotripsy (kidney stone removal), Tonsillectomy, D & C)

# Medical Benefit – General Exclusions

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- Injury or disease directly or indirectly caused by or arising from or attributable to War or War-like situations
- Circumcision unless necessary for treatment of disease
- Congenital external diseases or defects/anomalies
- HIV and AIDS
- Hospitalization for convalescence, general debility, intentional self-injury, use of intoxicating drugs/ alcohol
- Venereal diseases
- Injury or disease caused directly or indirectly by nuclear weapons
- Naturopathy
- Any non-medical expenses like registration fees, admission fees, charges for medical records, cafeteria charges, telephone charges, etc.
- Cost of 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)



## TPA contact details –Medi Assist

### Escalation Matrix for any query on hospitalization, cashless request or claim process

Level	Name	Email	Contact Number
	Virtual Mobile No	<a href="mailto:hdfcergo@mediassist.in">hdfcergo@mediassist.in</a>	9513360004
<b>Level 1</b>	Ganesh Tanaji	<a href="mailto:hdfcergo@mediassist.in">hdfcergo@mediassist.in</a>	7411787684
<b>Level 2</b>	Poonam Rupesh	<a href="mailto:poonam.rupesh@mediassist.in">poonam.rupesh@mediassist.in</a>	8792719910
<b>Level 3</b>	Farha Shaikh	<a href="mailto:farha.shaikh@mediassist.in">farha.shaikh@mediassist.in</a>	8433933097

## Marsh Help desk contact details – Escalation Matrix for any query on hospitalization, cashless request or claim process

Level	Name	Email	Mobile
First point of contact	Istiyaq Ali	<a href="mailto:Hdfcergo.medicclaim@marsh.com">Hdfcergo.medicclaim@marsh.com</a>	+91-7506787452
Second point of contact	Naeem Shaikh	<a href="mailto:Naeem.Shaikh@marsh.com">Naeem.Shaikh@marsh.com</a>	+91- 9833806365
Third point of contact	Ankita Lavande	<a href="mailto:Ankita.Lavande@marsh.com">Ankita.Lavande@marsh.com</a>	+91- 7045246145

## HDFC ERGO (H.R Contact details) – Escalation Matrix

Level	Name	Email	Contact Number
First Point of Escalation	Bhavesh Bhoir	<a href="mailto:Bhavesh.Bhoir@hdfcergo.com">Bhavesh.Bhoir@hdfcergo.com</a>	+91 9819111533
Second Point of Escalation	Vijay Singh	<a href="mailto:S.Vijay@hdfcergo.com">S.Vijay@hdfcergo.com</a>	+91 8291399535