GROUP MEDICAL INSURANCE POLICY

ID: YASH-HRO-001-P008

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Record of Revisions

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17	14.0	05-May-2 025	NA	 Change in Payment process Cosmetic changes 	Global Policy Desk	Corporate HR Team	Shilpi Gupta

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1.0 PURPOSE

In YASH, we believe that our responsibility towards the employee goes much beyond providing Health Insurance and helping you tide over any health crisis monetarily. Our aim is to provide you hassle free health benefit with all the information at one desk which enables you to effortlessly get through a health crisis.

2.0 SCOPE

All YASH employees except contractors & Associate Trainees (AT grade) are eligible for the Group Medical Insurance benefit and get automatically enrolled under this policy after joining YASH Technologies Pvt. Ltd.

Associate Trainees (AT grade) will get covered from their date of confirmation or as they get promoted to Trainee (T grade) unless otherwise specified in their offer letter.

3.0 OWNERSHIP/IMPLEMENTATION

The ownership & implementation of this policy lies with Human Resources (HR) Team. It will be effective from **September 01, 2024** & will continue to be in force unless superseded by a revised policy. The HR

Team reserves the right to amend, abrogate & reinstate the entire policy or any part of it as & when it deems fit.

4.0 POLICY OVERVIEW

1. Effective Date: September 1, 2024.

2. End Date: August 31,2025

3. Policy Number: 4016/73681056/12/000

4. Service Provider: ICICI Lombard.

5. Third Party Administrator: In house TPA i.e. IL-Healthcare

6. Policy Type: Floater*

7. Sum Insured as per grade applicability (Refer table below)**.

Grade	Sum Insured (Lacs)
AT-E5	5,00,000
E6-E8	7,50,000
M+	10,00,000

8. Coverage: Family*** (Employee, Spouse & two dependent kids).

*Floater policy means sum insured as specified is available for any or all the members of the family for one or more claims during the period of the policy.

- ** Sum Insured of the associates shall change based on changes in associate's grade. However, please note that incorporation of the grade change in the policy, shall be considered after the changes are reflected over Infogram profile, in the following month's endorsement.
- ***Family shall comprise of the insured employee, his/her legally wedded spouse & first 2 living dependent children up to the age of 25 years only. Individuals (employee/spouse) aged up to 70 years are covered under the policy.
 - Employees can get the UHID at their Infogram Profile, under personal section for self and on IL Takecare App for family respectively within 45 days of policy renewal/date of joining/mid-term inclusion of dependent.
 - In case UHID details are not visible against a family member on IL Takecare App, it means employee's family member is not added and hence, employee will be unable to claim any expenses unless they update and get them added on Infogram. Please refer section 6.0 for terms related to inclusion of family members.
 - For easy access please download IL Take Care app, where employee can check the UHID, Policy Number & other details anytime.

Link to download the IL Take Care APP:

Android: https://play.google.com/store/apps/details?id=icici.lombard.ghi&hl=en iOS: https://apps.apple.com/in/app/iltakecare/id1462026635

6.0 INCLUSION OF FAMILY MEMBERS

- Existing Employees and their family members as on 31st July'24 on Infogram (HRIS Portal) are updated for inclusion in the policy.
- New joiner details effective 1st Aug '24 is sent to ICICI on monthly basis after the end of calendar month. However, coverage is effective as per date of joining/policy start date (as applicable). Employees need to mandatorily update their family details (only spouse and two kids) in dependent tab of Employee file at Infogram, to consider members for enrolment. Employees need to process for reimbursement instead of cashless services in case of need for first 45 days of new enrolment.
- Midterm inclusion of dependents will only be possible for some specific scenarios and when inclusion is done within one month of event occurrence. 'Midterm inclusion' means inclusion of lives after the inception of the policy:
 - 1. Spouse (on account of marriage during the policy term).
 - Children (childbirth during the policy term).
- In case employee and spouse both are working with YASH, will get individual cover and kids can be included with both.

7.0 BASIC TERMS & CONDITIONS

- Room Rent is restricted to 1% of the sum insured and 2% of the sum insured in case of ICU/ICCU. In the event of the insured getting admitted in a category higher than cap mentioned above per day, then the insured will bear the difference of all the medical expenses as in the final hospital bill in the same proportion. Claim will be admissible subject to max capping of room rent or actual amount whichever is less. Room rent is inclusive of nursing charges and associated cost.
- Ambulance Service: Ambulance charges are limited to Rs. 1000/- per ailment & hospitalization.
- Newborn will be covered from date of birth if details are added under dependent section on Infogram. For first month, in case there is any need for claim, employee needs to proceed for reimbursement instead of Cashless. Diseases or any other alignment which is from birth will not be covered into the policy. Also, congenital diseases are not covered.
- Cataract is covered with no sub-limit. However, only mono-focal/bi-focal/tri-focal lenses are covered. Toric lenses and Laser treatment are not covered.
- Dental Treatment is not covered.
- Health Check-up is not reimbursable as per policy terms and condition.
- Kindly take note of the hospital list before applying for reimbursement or any planned/unplanned hospitalisation. Any treatment taken in delisted hospitals shall be out of the scope of this policy.

To check the list of hospitals, please refer this link: https://www.icicilombard.com/docs/default-source/default-document-library/delisted-hospital-list.pdf.

Maternity Benefit:

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- In case of normal delivery, the maximum benefit allowed is limited to Rs. 1,00,000/ and in case of caesarean as well it would be limited to Rs. 1,00,000/ only.
 - Claim in respect of delivery for only first two children and for operations associated there with, will only be considered in respect of any one insured person covered under the policy or in any renewal thereof.
- Those insured persons who are already having two or more living children would not be eligible for this benefit.
- Pre and post-natal care are beyond the scope of the coverage in case of maternity.
 - Voluntary termination of pregnancy during the first 12 weeks from the date of conception will be out of the scope of the policy.

Only first two deliveries of first two living child will be covered into the policy.

- Pre-Existing disease: Pre-Existing diseases are covered in the scope of the policy for all
 employees from the date of commencement and there shall not be any waiting period involve in
 the same.
 - 50% co-payment is applicable in case of Cyber knife treatment & Stem cell transplantation treatment. Cochlear Implant treatment shall be restricted to 50 % of sum Insured.
- Septoplasty treated other than in Nasal Treatment will not be covered as it comes under cosmetic surgery and not covered in policy terms. In case of FESS (Functional Endoscopic surgery of Sinus), the maximum liability would be up to Rs 1,50,000/-
- Policy also covers hospitalization arising out of Psychiatric ailments within a limit of Rs. 30,000/-.
- COVID-19:

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- For COVID-19 cases to be covered, the insured must have tested positive for COVID-19 by RT PCR test conducted by National institute of virology, Pune or Any other Laboratory Authorized by ICMR or any other Government designated laboratory in India, appointed for testing of COVID-19.
 - As per normal policy terms Covid-19 is also covered upon 24 hrs. of hospitalization. However, home quarantine is also covered as per the conditions mentioned in FAQ document available at YOU Portal>Shared Services>Human Resource>Library>Document & Template> Covid'19 FAQ.

In case of Home Quarantine, it is mandatory to intimate ICICI Lombard as per the process mentioned below

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- 1. Via IL Take Care App:
- 2.

Login to IL Take Care App>> Select "Health Assistance" from Picklist >> Provide Name/UHID >> Select 'Home Healthcare' from dropdown under Assistance >> Mention Email ID >> Attach the COVID-19 test report >> Provide Medical History >> Submit.

ORVia Email:

For Any Query or Submission of Query DocumentsPlease address to ihealthcare@icicilombard.com, maherKumar.k@ext.icicilombard.com,
pritesh.kothari@icicilombard.com marking cc with gmi.india@yash.com.
 Use any online available tool to compress document under required size. Maximum file size of the documents can be 7 MB.Employee can seek the assistance from Health Assistance app for assessment or in case assessment is already provided by medical

Centre inform the same to ICICI Lombard Team in the Brief while providing the Intimation.

COVID-19 Dedicated Helpline 040-66274205.

8.0 IL TAKE CARE APP

This app is specially designed for corporate customers. This app is one stop solution for all Health & Wellness Related requirements which also lets you experience a new approach towards managing your insurance policies online.

Features of IL Take Care App:

- 1. Download health card of self and dependents.
- 2. To access network hospital list.
- 3. Easy Claim intimation.
- 4. Claim status tracking.
- 5. Customer support.
- 6. Health Assistance Services.
 - Hello Doctor Free Tele-consultation (24*7) by an MBBS Doctor
 - Know Your Health Chat-bot based Health Risk Assessment
 - Health Record 1 GB Health Vault Space
 - o Trends & Setting Health Tracker (Step, Sleep, Sit & Stand count)
 - Blogs Weekly customized Blogs & Notifications
 - Health Assistance Services Second opinion, Facilitating hospitalization & Post Hospitalization care
- 7. Free Unlimited Virtual Consultation.

9.0 BASIC STANDARD EXCLUSIONS

List of non-payable items or alignments that are out of scope of is as below but not limited to. For more details, please refer a separate detailed document available at YOU under **Human Resource > Library> Templates> GMI-Non-Payable items.**

- Expenses on fitting of Prosthesis.
- Administration, registration, service charges & miscellaneous charges.
- Lasik treatment.
- Warranted that treatment on trial/experimental basis.
 - Any device/instrument/machine that does not become part of the human anatomy/body but would contribute/replace the function of an organ, Holter Monitoring is not covered.
- Infertility and related ailments including "Male sterility".
- Congenital external diseases, self-intentional injuries, sexually transmitted diseases, HIV etc.
- Dental treatment or surgery of any kind unless requiring hospitalization arising out of an accident.
- Health Check-up is not covered.
- List of Non-Payables Covid'19 is specified in Covid'19 FAQ.
- Domiciliary Hospitalisation.
- Treatment taken under OPD shall not be covered.
- Septoplasty is not covered
- Any treatment taken in delisted hospitals shall be out of the scope of this policy. To check the list of hospitals, please refer this link: https://www.icicilombard.com/docs/default-source/default-document-library/delisted-hospital-list.p

10.0 IMPORTANT POINTS TO KEEP IN CONSIDERATION

- Minimum 24 hours of hospitalization is must to claim for cashless or reimbursement related to medical expenses. Few specific medical cases where due to innovation & latest technology, 24 hours' hospitalization is not required are excluded under this point.
- For updates related to claims Please contact on claim helpline number 040-68432603
- For availing cashless service or any queries, please inform YASH GMI India team. Only in case of an emergency when aforesaid are not approachable, employees may contact:

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df.

- Maher Kumar @ +91- 9250610548 or send an e-mail to him @ maherKumar.k@ext.icicilombard.com copying YASH GMI India DL @ gmi.india@yash.com.
- 2. Pritesh Kothari on 8655709351/9713045689 or send an e-mail to him @ pritesh.kothari@icicilombard.com copying YASH GMI India DL @ gmi.india@yash.com.
- 3. Saurabh Jain @ +91-9752095424 or send an e-mail to him @saurabh.jain@icicilombard.comcopying YASH GMI India DL @ gmi.india@yash.com.

11.0 PROCEDURE FOR CASHLESS

Please follow the step-by-step procedure as mentioned below for cashless services:

- Cashless facility is available only at the network hospitals of ICICI Lombard.
 Link:https://www.icicilombard.com/cashless-hospitals
- The insured or any person accompanying needs to show/mention, ICICI Health Card, YASH Employee ID card or just mention employee ID of YASH, UHID number and name of Service provider to the Insurance desk of the network hospital.
- Employees can contact ICICI customer care 24*7 @ 18002666 to know the UHID no. It is advisable to keep UHID no and ICICI Health Card always handy and provide copy to your family as well to avoid inconvenience at the time of need.
- Hospital shall provide the Pre Authorization Form or the same can be downloaded from YOU (YASH Corporate portal) or ICICI site in case of planned hospitalization.
- Duly filled & signed pre-authorization form needs to be submitted to the hospital.
- Once pre-authorization form is submitted, Hospital authorities shall take this ahead with ICICI to get the cashless claim approved. If the ailment is covered under the scope of the policy, then ICICI shall send the cashless sanctioned authorization letter to hospital and accordingly the claim will get settled.
- ICICI will send initial approval to hospital for only a proportion of claimed amount. After the treatment, once the hospital submits final bills and discharge summary along with all supporting documents required, ICICI team provides final approval with net sanctioned amount and accordingly the claim with be settled.
- In case of emergency, cashless can be sanctioned within 3-5 hours and in case of planned hospitalization the same shall get sanctioned within 5-7 hours subjected to no query.

12.0 PROCEDURE FOR REIMBURSEMENT

Please follow the step-by-step procedure as mentioned below for reimbursement services:

1. **Timeline:** Employee needs to submit the claim within **25 days** from the date of discharge of insured from the hospital. For Post hospitalization expenses (if applicable), all relevant

documents along with duly filled claim form should be submitted not later than **7 days** from the last date of the post hospitalization period **otherwise claim will not be admissible**.

2.



Process:

For submission of claim via "IL Take Care App", employee need to fill/attach the claim form which needs to be filled up as per Step A & C. Claim form should include a detailed statement of pre-hospitalization/hospitalization expenses (as applicable) in writing along with all the relevant documents.

To compress the document, please use the link below:

Documents Compress Link- https://online2pdf.com/reduce-pdf-file-size

- 1. **Submit Claim @ IL Take Care App**: As a pre-requisite to submit claim at IL Take Care App, employee should be ready with online claim form & relevant documents.
- 2.
- 1. Filling Online Claim Form:
- 2.
- Claim form link: https://ilhc.icicilombard.com/Customer/IPDNonRetailClaimForm?type=1
- 2. Mention the Date of Admission & UHID of the Insured
- 3. Enter the Captcha & Click on Proceed.
- 4. Scroll Down and Click on the IPD Link and Click on OK:
- Fill the complete Claim Form and Click on "Save as PDF" (Or Press "Ctrl" + "P" and select destination as "Save as PDF
- 6. No Signatures are required in the claim form.

3.

Link to Download the App:

- 4. Android: https://play.google.com/store/apps/details?id=icici.lombard.ghi&hl=en
- 5. iOS: https://apps.apple.com/in/app/iltakecare/id1462026635

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Login & Register at "IL Take Care App". IL Take Care User Guide is available at YOU portal under HR Library.

7.A reference Number will be generated as soon as employee submits the claim8.

Note:

 In case UHID number is not available for new joiner or any mid-term family member inclusion as per section 6.0 of this policy, cashless option will not be available. Employee would only be able to submit claim for reimbursement once UHID is generated. 2.

Claim form can be downloaded from HR Library at YOU portal.

3. Submit Claim @ Infogram for reimbursement of medi-claim;

Submit scan copies of your claim documents which is submitted with ICICI at Infogram (HR portal) in benefit module along with reference number given by ICICI. This is mandatory to complete the claim process.

4.

Path: YOU portal>>My apps>> Infogram >> Home >> My employee File >> Benefits >> Go To Benefits >> Reimbursements >> Group Medical Insurance (GMI) >> Start a claim

Submission of Hardcopy of Claim Documents:

5.

- 1. Post submission on Infogram, only if instructed by GMI/ICICI Team, employee should submit the originals along with claim form mentioning the Tracking ID (generated on Infogram) on the envelop in the drop box available at reception of every YASH Location. Employee must take dispatch details from the facility Team to track the delivery status of the documents to ICICI. It is advised to all the associates to keep a copy of all documents for future references.
- 2.

OR Employee can also send the hardcopy of the documents directly to ICICI at below address. However, courier charges will not be reimbursable. In case employee is sending the hardcopies directly to ICICI, an intimation to GMI team should be done at gmi.india@yash.com.

ICICI Lombard GIC, ICICI Lombard Health Care, ICICI Bank Tower, Plot No 12, Financial District, Nanakram Guda, Gachibowli, Hyderabad – 500032, Telangana IRDA Registration No. 115

3. **OR**

ICICI LOMBARD GIC LTD.

1st,4th,5th & 6th, FLOOR,VARUN TOWERS-II
OPP. HYDERABAD PUBLIC SCHOOL,
BEGUMPET, HYDERABAD-500016

TELANGANA**For Claim Status**: Employee can check the status of claim via IL Take Care APP or through the below link https://www.icicilombard.com/health-insurance/health-claim/claim-details or also may check through the mobile app — IL Take care app.

4.

Claim should be settled within 30 days from date of registration of claim by vendor (in case of no query on claim). YASH GMI Team and Account Payable (AP.India) Team POC will approve the request on Infogram once claim is finally settled/closed by the vendor and payment will reflect in employee's A/C within 7 working days of approval date, directly through EFT by vendor.

13.0 DOCUMENT REQUIRED

To process the medi-claim documents required are as follows. Kindly attach the documents as applicable as per the nature of disease/illness/injury/accident etc. while submitting claim on IL Take care App along with Infogram, and also while sending the hardcopy of the claim as per aforesaid process.

Employee should keep one set of documents (scan copy) with them for future reference if any. Original documents submitted to ICICI are not returned.

- Duly completed claim form (all mandatory fields marked with asterisk (*) along with Bank details in Part-C for EFT)
- Copy of YASH ID card and patient's health card.
- Bills & Receipts
- Discharge summary/certificate/card from the hospital.
- Investigation reports
- Bills from chemists supported by proper prescription
- Test reports and payment receipts
- A copy of the Employee's PAN Card/Nominee' PAN Card
- Cancelled Cheque with printed name of the Associate/Nominee on it in alignment with above submission.
- Original IOL Sticker (In case of Cataract)
- Any other document, relevant to making of such claim.
- All the bills and report should be detailed/date wise/cost wise (breakup)
- For Covid'19 related claim, documents required are mentioned in Covid'19 specific FAQ as well.

14.0 FEW DEFINITIONS FOR REFERENCE

- 1. The term "**Pre-Hospitalization**" means relevant medical expenses (for which hospitalization is done) incurred during a period up to 30 days prior to hospitalization.
- The term "Post Hospitalization" means relevant medical expenses incurred during period up to 60 days after the date of discharge from Hospital/Nursing home.
- The term "Hospital/Nursing Home" wherever appearing/specifies in this policy means any institution in India, established for indoor care and treatment of sickness and injuries which:

- 1. Has been registered either as a hospital or Nursing Home with the local authorities and is under the supervision of a registered ad qualified Medical Practitioner; or
- 2. Should comply with minimum criteria as under:

3.

- 1. It should have at least 10 inpatient beds, in those towns having a population of less than 10, 00,000 and in all other places 15 inpatient beds.
- 2. Fully equipped operation theatre of its own, wherever surgical operation is carried out.
- 3. Fully qualified nursing staff under its employment round the clock; and
- 4. Fully qualified doctor(s) should be in charge round the clock.
- 4. By the nature of medical treatment is an institution which fulfils all such requirement as are necessary ordinarily or customarily for such medical treatment and shall be performed by a registered and qualified medical practitioner. For the purpose of this definition, the term "Hospitalization/Nursing Home" shall not include an establishment, which is a place of rest, a place for the aged, a place for drug addicts or place of alcoholics, a hotel or any other like place.
- 5. Lasik: Photorefractive keratectomy (PRK) and laser-assisted in-situ keratomileusis (LASIK) are two similar surgical techniques that use an excimer laser to correct near-sightedness (myopia) by reshaping the cornea. The cornea is the clear outer structure of the eye that lies in front of the coloured part of the eye (iris). PRK and LASIK are two forms of vision-correcting (refractive) surgery. The two techniques differ in how the surface layer of the cornea is treated.
- 6.
 The **Cyber-Knife** is a frameless robotic radio surgery system invented by John R. Adler, a Stanford University Professor of Neurosurgery and Radiation Oncology, and Peter and Russell Schonberg of Schonberg Research Corporation. The two main elements of the Cyber Knife are (1) the radiation produced from a small linear particle accelerator and (2) a robotic arm which allows the energy to be directed at any part of the body from any direction.
- Septoplasty is a surgical procedure to correct the shape of the septum of the nose. The goal of this procedure is to correct defects or deformities of the septum. The nasal septum is the separation between the two nostrils. In adults, the septum is composed partly of cartilage and partly of bone. Septal deviations are either congenital (present from birth) or develop as a result of an injury. Most people with deviated septa do not develop symptoms. It is typically only the most severely deformed septa that produce significant symptoms and require surgical intervention. However, many septoplasties are performed during rhinoplasty procedures, which are most often performed for cosmetic purposes

5.0 ACRONYM	5.0 ACRONYMS			
IOL	Intra-Ocular Lens			
ICU	Intensive Care Unit			
ICCU	Intensive Cardiac Care Unit			

CTC	Cost to Company
FESS	Functional Endoscopic surgery of Sinus

16.0 REPORT SUGGESTIONS & QUERIES

Thank you for your cooperation. We believe that an employee is the biggest asset for the company. Therefore, your suggestions are most welcome. This will help us in making the policies more employees friendly. For any suggestions related to policy/process please write to us at gmi.india@yash.com or corphr.india@yash.com.

For any queries related to claim submission/enrolment, please write to YASH GMI Team @ gmi.india@yash.com or raise a ticket through Infogram helpdesk following the below path: Create ticket on Infogram Helpdesk: YOU>> What's Up>> Infogram Helpdesk

Thanking You - Team HR