

Greetings from the management . We are delighted to inform you that we have teamed up with Allianz EFU Health Insurance Limited this year to jointly design and develop a customized health insurance solution for you. Now you and your families can turn to Allianz EFU for your medical insurance needs. Allianz EFU endeavors to provide most appropriate health insurance solutions across Pakistan, whenever and wherever you need it. For all of our valuable insured member's convenience, given below are some of the details about the Health Insurance Policy, which is valid till 28 February, 2021.

WHO IS COVERED?

You, your spouse (till age 65yrs), your children (sons up to 25 years and unmarried dependent daughters) are covered under this policy.

YOUR BENEFIT LIMITS:

Pre-Existing Medical Conditions:

- All Pre-existing conditions are covered under this policy.

Out Patient Expenses Covered From Hospitalization Policy:

Following are few outpatient expenses for which you are entitled to insurance coverage from this policy.

1. Specialized Investigations:

MRI, CT scan, PET Scan, Thallium Scan, EEG, EMG, ETT, Echocardiography/Stress Echo, Mammography, OCT, FFA, Bone Scan, Renal Scan, Thyroid Scan, All Type of Biopsies).

2. Day Care Surgical Procedures:

All day care surgical procedures except those mentioned in the list of exclusions.

3. Day Care Medical Procedures:

Kidney Dialysis, Lithotripsy, Chemotherapy & Radiotherapy etc.

4. Pre & Post hospitalizations including cost of medicines, investigations and consultation for ALL non-pregnancy hospitalizations for 30 days before the due date of admission; and for another 30 days after being discharged from the hospital¹.

5. Accidental Emergency:

Cost of **treatment** for an accidental emergency, given in the emergency room. This coverage is limited to First Aid treatment only (during first 48 hours). Dental treatment, following an accidental injury, is limited to pain and bleeding control during the first 48 hours.

6. Medicines, consultations and investigations related to Hepatitis B & C shall be covered from Hospital Care and Major Medical Care benefits.

7. Birth Defects are covered for all insured members under the policy

Maternity Care benefit:

All pregnancy related expenses, or expenses incurred on complications as a result of pregnancy, under hospitalization, is covered from maternity care benefit only. The coverage under maternity care benefit shall not be entitled for those spouses/ married female employees who have already availed two maternities (Live Birth) during their service with Innovative and I2C.

- **Pre-Post natal** (before delivery) OPD expenses are covered up to available annual maternity limit; these are payable subject to availability of maternity limit.

WHAT TO DO?

In times of emergency

- In case of any emergency you must visit any nearby hospital and get your emergency condition settled. If you are admitted from the emergency department for further treatment at a **network hospital** you don't need to pay for treatment charges. The hospital will charge you for any personal items consumed.
- ☐ In case you have sought facilities of a **non-network hospital**, you can seek further assistance from our 24 hours regional medical help lines. In case of continuation of treatment at a non-network hospital, you will have to pay for services and then file for reimbursement.

In times of Non-emergency (planned treatments)

- Once the attending physician at a network hospital has advised admission after a few days, you can avail the facility of getting advance credit confirmation by submitting a copy of your health card and the admission advice / prescription with the admission office of that hospital. Alternatively you may send an email (with the aforementioned scanned documents) to the medical department of Allianz EFU.
- It is advisable to inform us of your intended date of hospitalization, for planned cases, in advance to allow us to send your confirmation in advance.

In case of any assistance for medical emergencies or assistance

In getting admissions or locating a network hospital near you, please call Allianz EFU respective regional medical emergency help lines:

¹ Pre hospitalization OPD expense includes the cost of medicines, consultation fee and investigations and should be related to the same disease for which hospitalization has occurred. Consultation with multiple specialists in pre-hospitalization period is entertained. Post hospitalization OPD expense is limited to cost of consultations, investigations and medicines prescribed by the specialist in whose care the patient was hospitalized ONLY and for disease for which the patient got hospitalized.

Centre Medical Helpline (for assistance in Punjab)
North Medical Helpline (for assistance in Islamabad and up North)
South Medical Helpline (for assistance in Sindh & Baluchistan)

0300-8483818
0300-8508550
0300-8207000

In case you don't receive a response from help lines or you don't receive a favorable response, you may register your complaints at Customer Relations Helpline. Customer Relations Helpline can be contacted at **0300-8208555**.

POINTS TO PONDER – FOR CLAIMS REIMBURSEMENT:

- Claim form must be filled in by the employee and treating physician/hospital
- Charges for Medical Officers and Daily nursing are **NOT** covered
- Getting break up of expense documented in the invoice is **MANDATORY** for claims settlement
- All medical bills, receipts must be submitted in original
- Credit facility shall be provided for Circumcision and other daycare procedures; however, in case of non-availability of sufficient limit in the respective limit, excess amount shall be recovered from the employee later on
- Coverage for Hepatitis B & C starts after confirmed diagnosis of this disease
- Emergency room treatment for cases not requiring admission in a hospital, is limited only to accidental emergencies
- The insurance company pays for the bed occupancy charges for the patient only. The cost of any additional bed / room acquired by the patient / attendants is borne by them
- Admissions solely for conducting investigations are not entertained

DO'S OF THE POLICY	DON'TS OF THE POLICY
<ul style="list-style-type: none"> • Always contact your respective regional medical hotline of Allianz EFU, for assistance in locating a network hospital or for resolution of problems faced therein • Always present your Health card and CNIC (Photo ID card) in a network hospital, at the time of admission. Delay in presentation of Health card will not ensure provision of credit facility • Photocopy of health insurance card is acceptable at network hospitals, so do share photocopy of Health card with insured family members • Do avail discounts at quality OPD centers, across Pakistan, through presentation of your health card • Always get break up of expense incurred at a non-network hospital, without the presentation of which claim reimbursement shall be delayed • Submit your claim, for reimbursement, within one week of incurring the Expense 	<ul style="list-style-type: none"> • Never present your Health card at a non-network hospital, since health card is applicable only at network facilities • Insurance company pays for the bed charges of the patient. Never rent an additional room for attendants, since the same shall not be covered through insurance • Never misplace original bills / invoices • Never temper with bills / invoices • Never let any un-insured person use your Health card • Never insist a doctor for admission or use personal influence. The insurance company shall always report such matters to your HR • Never seek medical advice / consultation from medical emergency hotlines, since the same are meant to assist insured patients in locating a nearby network hospital or troubleshoot problems faced in network hospitals, in times of emergency / admission

EXCLUSIONS:

1. Any Hospital confinement or surgical operation that has not been recommended by a legally licensed Physician or Surgeon.
2. Outpatient expenditure.
3. Routine physical examinations and routine preventive measures and/or rest care including confinements, which are primarily for diagnostic purposes.
4. Oral chemotherapy.
5. Services or treatment in any spa, hydro clinic, sanatorium, nursing home or long-term care facility that is not a hospital.
6. Experimental treatment and treatment not approved by FDA-USA.
7. Any treatment related to fertility or infertility.
8. Admission undertaken solely for investigations / tests.
9. Supply or fitting of eye glasses, contact lenses or hearing aids. Correction of refractive errors of the eye and procedures such as Radial Keratotomy and Excimer Laser.
10. IQ Lens in cataract surgery.
11. In-hospital dental examinations, X-rays, extractions or fillings unless necessitated due to accidental injury occurring while the insured was covered under the scheme.
12. Cost of limbs or supporting equipment for revival or correction of the function of the body.
13. Cosmetic surgery, unless necessitated due to accidental injuries occurring while the insured is covered under this policy.
14. Injury or illness, due to war, invasion, civil war, revolution, insurrection or military uprising and the insured taking part in paramilitary forces. Treatment from natural hazards such as earthquake, landslide, etc.
15. Self-inflicted injuries, while sane or insane including attempt to commit suicide.
16. Ionizing radiations or contamination by radioactivity from any nuclear fuel / nuclear waste. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
17. Weight management services and treatment related to weight reduction programs, including treatment of obesity.
18. Treatment or investigation of infertility / sterilization, contraception and any complication relating thereto.
19. HIV infection, AIDS and any related conditions.