FAQs for Group Medical Insurance Policy - India

Enrollment related

1. **Will my dependents covered this policy year continue to be covered in the new policy year?**

   No. Dependents do not carry over from one policy year to the next. You must take action to enroll your eligible dependents on the enrollment portal during the enrolment period. If a dependent is not actively enrolled they will not be covered during the policy year 2024 - 2025.

2. **Will dependents covered last year appear in this year's enrollment portal?**

   Yes, dependents nominated for the current policy (2023-24) year will appear on the enrollment page. You will need to update/ validate their details and check the box if you want to enroll them for coverage during the policy year 2024 - 2025.

3. **How can I correct or update the dependent information displayed on the Medi Assist portal?**

   The Enrollment window for the 2024-25 policy year will be open from October 23, 2024 to November 11, 2024. During this period, you'll have the option to edit, modify, add, or delete the dependents you wish to nominate and cover them under the policy.
   Note: Once you confirm your selection during the Enrollment window, you will not be able to make further changes during the policy period.

4. **How can I get assistance to correct inaccuracies in my dependents' details on the Medi Assist portal?**

   The enrollment portal will be open from October 23, 2024 to November 11, 2024. During this period, you'll have the option to edit, modify, add, or delete the dependents you wish to cover/correct any inaccuracies.
   Note: Once you confirm your selection during the Enrollment window, you will not be able to make further changes during the policy period.

5. **My enrollment screen is frozen during the enrollment period. How can I request it to be re-enabled?**

   If your enrollment screen has frozen, you can send an email to cts@mediassist.in explaining the reason for your request to re-enable it. Depending on the nature of the request, the access may be re-enabled. However, if premium has already been paid, the window will not be re-enabled.

6. **I have joined after Nov 1, 2024, but haven't received my enrollment email. What should I do?**

   If you have joined Cognizant after Nov 1, 2024, you would receive a separate email guiding you through the enrollment process. However, if you had joined before that date and haven't received the enrollment email, please reach out to cts@mediassist.in for assistance.

7. **How can an associate opt for AMC/Top-up cover?**

   The enrollment portal will be open from October 23, 2024, to November 11, 2024. During this period, you'll have the option to opt in for AMC or Top-up cover.

8. **What steps should associates take if they are unable to log in to the portal due to technical issues?**

   If you're experiencing technical difficulties logging in, please clear your cache memory and re-login. In case the problem persists, please send an email to cts@mediassist.in with a screenshot of the error you're encountering. The Medi Assist support team will review the issue and get back to you promptly.

9. **What if I log in during the enrollment window period and make changes only to the Cognizant Base Policy?**

   The coverage of self and dependents shall be considered as per the changes made during the Enrollment window period. If the associate had an AMC/Top-up cover earlier but did not renew, then the cover will be discontinued.

10. **What should I do if I am unable to pay the second installment premium due to technical issues?**

    If you face any technical issues while trying to pay the second installment premium on or before the due date, please send an email to ctspayments@mediassist.in with a screenshot of the error you encountered. The Medi Assist support team will assess the situation and respond to you promptly.

11. **If an associate is unable to download the E-card, what steps should they follow to resolve the issue?**

    We are currently in the pre-enrollment phase for the policy period 2024-2025, which begins on Nov 1, 2024. Temporary E-cards for this policy period will be available for download starting from Nov 1, 2024. Permanent E-cards will be available for download after January 1, 2025.

12. **Can I enhance the sublimit or ailment capping by paying an additional premium?**

    No, the sublimit or ailment capping will remain unchanged as per the policy guidelines and cannot be enhanced.

13. **Is it possible to pay an additional premium to increase the room rent limit in my policy?**

    No, the room rent will remain unchanged as per the policy guidelines and cannot be increased.

14. **I overlooked enrolling my dependents during the open enrollment window. Can I still add them?**

    Unfortunately, if you did not complete the enrollment between October 23, 2024, to November 11, 2024, you won't be able to add them later. It's advisable to ensure you complete your enrollment before the end of the designated Enrollment window.

15. **If I receive a mid-year promotion, will the Sum Insured (SI) of my base policy increase accordingly?**

    No, the grade you hold at the start of the policy will remain consistent throughout the policy period. Therefore, even if you receive a mid-year promotion, there will be no changes to your sum insured.

16. **What steps should associates take if they are unable to submit claim under last year policy?**

    To submit a claim under last year's policy:
    - Go to the claim submission page.

- Choose the option "2023-24".
- Select the dependent for whom the claim is being made.
- Enter the date of admission.
- Follow the on-screen instructions to complete the claim submission process.
- After submitting, you can track the status of your claim under the "My Claim" section.
  If you encounter any technical issues during the process, please send an email to cts@mediassist.in with a screenshot of the error. The Medi Assist support team will review the issue and get back to you promptly.

17. I am travelling from India to onsite on an assignment, will my dependents in India remain covered in the policy?

The coverage for your dependents enrolled in the Base policy will cease on your last working day on India payroll. You will have an option to cover these dependents under the Base policy by paying premium. You will receive an email within a week from your date of payroll change to onsite. Alternatively, you can raise a GSD for any queries.

Your dependents' cover under AMC and Top-up cover, if opted earlier during the enrollment window, will continue till the end of the policy period or your last working day with Cognizant, whichever is earlier.

18. I am an India hire travelling from onsite back to India, will my dependents in India remain covered in the policy?

Your dependents registered/enrolled during the Enrollment window under the Base policy will be covered from the date of payroll transfer to India. You cannot modify your dependents in the Base policy/ AMC or modify Top-up covers upon your payroll transfer to India.

Your dependents' cover under AMC and Top-up cover, if opted during the enrollment window, will continue till the end of the policy period or your last working day with Cognizant whichever is earlier.

19. I am an India hire at onsite, how will I enroll my dependents in India?

You have the option to pay the premium and voluntarily elect coverage for your eligible dependents who remain in India while you are onsite during the Enrollment window. To confirm coverage, submit information for these dependents, click the check box under coverage tab, and pay the applicable premium through the payment gateway in the Medi Assist portal.

20. I am an India hire at onsite. How do I ensure coverage for my dependents when I travel back to India on payroll transfer?

As no enrolment/dependent changes are permitted outside the Enrolment window, if you have eligible dependents currently residing with you at onsite outside of India, you must register them during the annual Enrolment window.

While there will be no premium payable, registering them is the only way to ensure they will be eligible for coverage under the policy in the event you transfer back to India payroll during the policy year. To register these dependents, submit their information and uncheck the checkbox under the coverage tab in the Mediassist portal during the annual Enrollment window.

Other FAQs

21. What is the policy period of India Medical Insurance Policy?

The Policy is for the period between November 1, 2024, to October 31, 2025.

22. Who can be covered as "dependents" under the Base Policy?

The definition of dependents for Cognizant Base Policy is any of the following three (3) members:

- Parents (as per regulatory guidelines)
- Spouse (Minimum age of 21 years for male & female)
- Dependent children (maximum of three (3) living children up to 25 years of age)

Note:

- o Foster parents are not eligible for coverage.
- o Adopted children can be enrolled into the policy within 45 days once the legal adoption certificate is received.

23. Who can be covered as "dependents" under the Additional Member Cover (AMC)?

The definition of dependents for AMC is any of the following two (2) members:

- Parents (as per regulatory guidelines).
- Parents-in-law (as per regulatory guidelines).
- Dependent children (up to 25 years of age).
- Unmarried sister – No age limit.
- Disabled dependent sibling – No age limit.

Note:

- o Foster parents not eligible for coverage
- o Maximum of three (3) children can be added in the base policy and AMC policy.
- o Associate to submit valid proof and documents at the time of claim. Absence of documents will lead to the claim being repudiated and coverage will be terminated.
- o Adopted children can be enrolled into the policy within 45 days once the legal adoption certificate is received.

24. What is co-pay? How does it work?

Co-pay is the portion of the claim, which associates need to bear, while the insurance company pays the remaining balance.

- A Co-pay of 10% shall be applicable on the admissible claim amount for the hospitalization (including Pre and Post Hospitalization) of the Associate, spouse and children
- A Co-pay of 15% shall be applicable on the admissible claim amount for the hospitalization (including Pre and Post Hospitalization) of the Associates' dependent parents, parents-in-law and siblings
- No Co-pay for hospitalization resulting in death of the Associate.
- No Co-pay for hospitalization due to critical illness for the Associate (only).

Illustration of Co-pay calculation on a claim admissible amount

Claimant	Applicable co-pay	Illustrative claim amount	Co-pay calculation	Co-pay
Associate	10% of the admissible claim amount	INR 90,000	INR (10% x (90,000))	INR 9,000
Parents	15% of the admissible claim amount	INR 90,000	INR (15% x (90,000))	INR 13,500

25. Is the India Medical Insurance Policy applicable only to Cognizant associates present in India?

Cognizant Base Policy in India covers the following population:
- Associates hired in India and currently in India payroll and their enrolled dependents.
- Enrolled India based dependents of India hired Associates on global assignment with a payroll transfer to Americas (NA, Canada, LATAM), Asia Pacific Japan (APJ) or Europe Middle East Africa (EMEA) identified as G2 plan in the enrollment portal.
- Enrolled India based dependents of India hired Associates who were on a global assignment with a payroll transfer to Americas (NA, Canada, LATAM), Asia Pacific Japan (APJ) or Europe Middle East Africa (EMEA) but subsequently localized identified as G3 plan in the enrollment portal.

26. What is the Base Policy coverage limits?

The Cognizant Base Policy coverage limits are:

Levels	Coverage (Floater Sum Assured)
Levels up to Associate	INR 250,000
Senior Associate and Managers	INR 300,000
Senior Managers & above	INR 500,000

27. What are the expenses covered under hospitalization?

Expenses covered under hospitalization include:
- Surgeon, Anesthetist, Medical Practitioner Consultants, Specialists Fees, Anesthesia, blood, oxygen, operation theatre charges, surgical appliances, medicines and drugs, diagnostic materials and x-ray, dialysis, chemotherapy, radiotherapy, cost of pacemaker, artificial limbs and cost of organs and similar expenses.
- Ambulance services per hospitalization is 1 % of sum insured or INR 2,000 whichever is lesser.

28. How are Midterm additions handled in the India Medical Insurance Policy?

Midterm additions to the policy are permissible within 45 days of a life-changing event such as:
- Addition of the associate's newly wedded spouse – only under Base cover
- Associate's newborn child – In Base cover/AMC

Note: To enroll, Associates should first raise a GSD or write to Medi Assist @ ctsenrollment@mediassist.in. Once the portal is activated for enrollment, Associates can visit the Medi Assist app, and update spouse or child details if there is a vacant slot available in the Base Policy or AMC policy. If there is no vacant slot available in Base and AMC, for the addition of a newborn child, the associate can replace an existing Base cover dependent with a new dependent. It is not possible to add a new dependent in place of one who has already filed a claim under the policy during the policy period. Any claim pertaining to the new member prior to enrollment and premium payment will not be admissible.

29. How do I access the network hospital list to avail cashless?

Log on to Medi Assist app. Click on "Network Search" to check for nearest network hospital.

30. How does planned hospitalization work in a network hospital?

Associates can log on to Medi Assist app >> click the e-cashless tile >> fill the form and apply for the planned hospitalization. Download the e-card, enter details of the impending hospitalization and send the intimation at least 48 hours before the admission date. Once the whole process is complete, the associate will receive a secured passcode confirming the provisional pre-authorization. On the day of admission, the associate will have to present their secured passcode, e-card and photo ID at the hospital. Submit additional information as required to process interim claims and final bill before discharge. Associates can track the status real time in Medi Assist portal.

31. How does emergency hospitalization work in a network hospital?

- In the Medi Assist app, an associate can search for the network hospital by clicking the network hospital tile which is a GPS map-based search to locate the nearest network hospital.
- Associates must contact the TPA/Insurance desk of the hospital and complete the preauthorization process by submitting the preauthorization form to the insurance desk at hospital, along with the E-card and Employee ID.
- Hospital will send the forms to Medi Assist for approval. During the hospitalization, Medi Assist may request the hospital for any additional information if required.
- Real time pre-authorization status can be tracked through the Medi Assist app or by sending an SMS with the claim number to +91 96631 49992 / 7337700014.
- It must be noted that only charges for active treatment, medications, diagnostic procedures and fees for the services of medical staff will be covered under this plan.
- Charges for non-medical expenses such as food and beverages, telephone calls etc., proportionate deductions as per room rent and co-pay will have to be borne by the associate.

Points to Remember

- For planned hospitalizations always do pre-authorization at minimum seven (7) days prior to hospitalization.
- Always mention associate's mobile number, company name and associate ID on the pre-authorization form.
- Please ensure that the form reaches Medi Assist from the network hospital.
- Always check the bill thoroughly before leaving the hospital and sign the bill even if it is a cashless transaction. Check if the hospital has billed for the room, days etc. correctly and as per tariff.
- Always ask for a copy of the bill.
- Report anything that is unreasonable to Medi Assist before you walk out of the hospital.

32. How to avail reimbursement for a non-network hospitalization?

- Associates should click the "Intimate Reimbursement" tile/feature on the Medi Assist app, to give prior intimation about associates impending claim before discharge from the hospital.
- Associates should visit Medi Assist app, click on "Submit Claims", fill the form and take a print-out of the form.
- Attach the printed and signed form with other documents and send it to the Chennai office for a handover.
- Associates can also, scan and upload hospitalization bills under "Submit claims" tile on Medi Assist portal.
- All hardcopies of bills in original must be submitted to the Medi Assist team at Cognizant MEPZ office, Chennai for processing at the following address:

  > Cognizant Technology Solutions India Pvt Limited
  > Payroll & Benefits shared services (PF & EPS Team)
  > MEPZ-Special Economic Zone,
  > Plot No A-17, D-2, C-10 & C-1, A-15 to 17, B-20 & A-33
  > National Highway 45, Tambaram, GST road, Chennai 600045

- Alternately, the original documents can also to be couriered to Medi Assist Chennai office at the following address:
  > Medi Assist (TPA)
  > RWD Atlantis Building, 2nd Floor,
  > Door No: 24, Nelson Manickam Road,
  > Aminjikkarai, Chennai 600029

- Medi Assist team will process the associate's hospitalization claim as per the policy. If all the documents have been submitted, the claim is checked thoroughly, after which it is sent to the Insurance company for reimbursement.
- Typical processing time is 30 days from the date of submission to Medi Assist helpdesk at MEPZ Chennai Cognizant office.
- Real-time claim status can be tracked through Medi Assist app /Or by sending an SMS with the claim number to +91 96631 49992 / 7337700014.

33. Who to reach out for in case of questions?

Associate can call Medi Assist helpdesk at
- 1800 258 5895 (toll free) or +91 7337700014 (toll) from India.
- (International call prefix) 91 80 67617555 (toll) from outside of India.

Click the 'Write to us' link on the Medi Assist app or to the following email addresses:

For enrolment related questions	ctsenrollment@mediassist.in
For premium payment related questions	cognizantpayment@mediassist.in
For claims and policy related questions	Cts@mediassist.in

34. What are the key benefits under AMC policy?

The dependents covered (as per policy) under AMC will have the following advantages over a retail insurance plan:
- Pre-existing disease(s) are covered.
- No first-year exclusions.
- External Congenital disease for child is covered.

35. Is there any capping in the room rent under the policy?

Yes, there is. But ICU room rent will be paid on actuals across Base, AMC and Top-up policies. Please refer to the tables below:

Room rent cap for Base and Top-up policy			
Level	Sum Insured	Eligible room rent (per day inclusive of nursing charges)	Eligible ICU room rent (per day)
Up to Associate	INR 250,000	INR 4,000	On Actuals
Sr Associate & Managers	INR 300,000	INR 4,000	On Actuals
Sr Managers & above	INR 500,000	INR 6,000	On Actuals

Room rent cap for AMC and Top-up policy		
Sum Insured	Eligible room rent (per day inclusive of nursing charges)	Eligible ICU room rent (per day)
INR 100,000	INR 2,500	On Actuals
INR 200,000	INR 2,500	On Actuals
INR 300,000	INR 3,000	On Actuals

Associates opting for a higher category of room shall have to bear the difference as well as the proportionate expenses. This shall apply to both cashless and reimbursement claims. Maximum deduction under proportionate charges is limited to 20% of claim admissible amount for all claims under Base, AMC and Top-up policies.

The following example illustrates the arithmetic of proportionate deductions:

Proportionate percentage calculation – example	
AMC sum insured	INR 100,000
Availed room charges	INR. 5,000 per day
Eligible room charges	INR 2,500 per day
Proportionate percentage	[(5000) - (2500) / 5000] x 100 = 50%
Final applicable proportionate charges	Max deduction 20% of claim admissible amount

Note: However, in the above case, even though actual proportionate charges are 50%, the deduction will be limited to 20% of the claim admissible amount excluding the pharmacy bill. Proportionate deductions are applied on charges towards the surgeon, assistant surgeon, Operation Theater, anesthetist, investigations and any other charges that may vary as per room category except pharmacy.

36. Is Co-pay applicable under AMC?

A Co-pay of 10% shall be applicable on the admissible claim amount for the hospitalization (including Pre and Post Hospitalization) for Associates' children.
A Co-pay of 15% shall be applicable on the admissible claim amount for the hospitalization (including Pre and Post Hospitalization) of the Associates' dependent parents, parents-in-law and siblings

37. Can I make changes in the dependents under AMC during Midterm?

Associates can add a newborn baby within 45 days from the date of birth subject to availability of vacant slots. No other changes can be done to the AMC in the Midterm. Any claim pertaining to the new member prior to enrollment/endorsement/premium payment will not be admissible.

38. What is the premium amount for AMC?

Sum Insured INR	AMC Policy premium – Age band (in years) and premium per member (in INR)							
	W.E.F. 01 November 2024							
	0-35	36-45	46-55	56-65	66-70	71-75	76-80	Above 80
100,000	4,557	5,221	7,887	16,543	18,541	21,209	22,539	24,802
200,000	7,133	7,941	11,987	27,366	30,605	34,649	37,081	40,802
300,000	9,181	10,031	15,982	34,685	38,932	44,880	47,431	52,188

GST of 18% has been assumed in the above and will be subject to change if there is a change in applicable GST guidelines in the future.
Illustration: If an associate has chosen the sum insured of INR 1,00,000 for a dependent child who is in the age band of 0-35 along with the mother who is in the age group of 46-55, then the premium applicable will be (INR 4557+INR 7887) =INR 12,444

39. Can I increase or decrease the sum insured under AMC/Top-up cover Midterm?

No changes can be made to the AMC or Top-up cover midterm including increasing / decreasing the sum insured.

40. How is the premium paid to obtain the AMC/Top-up cover?

Associate would be paying the premium directly to the insurer via a payment gateway through Medi Assist app at the time of enrollment.

41. What happens to AMC/Top-up cover if the associate resigns in Midterm of the policy period?

The policy will be discontinued on the last working day of the associate and there will be no refund of premium for the AMC or Top-up cover.

42. What is the duration of the AMC/Top-up policy?

AMC/Top-up policies operate concurrently with the Base Policy and will expire on October 31, 2025.

43. What is the Top-up policy and its benefits?

The Top-up policy allows associates to increase the sum insured under the Cognizant Base Policy as well as AMC. The Top-up sum insured limit enhancement will kick in once the Basic Sum Insured under either the Cognizant plan or the AMC plan is exhausted. Top-up for AMC would be applicable only where the sum insured opted under AMC is INR 300,000

44. Is Co-pay applicable under Top-up Cover?

- A Co-pay of 10% shall be applicable on the admissible claim amount for the hospitalization (including Pre and Post Hospitalization) of the Associate, spouse and children
- A Co-pay of 15% shall be applicable on the admissible claim amount for the hospitalization (including Pre and Post Hospitalization) of the Associates' dependent parents, parents-in-law and siblings
- No Co-pay for hospitalization resulting in death of the Associate.
- No Co-pay for hospitalization due to critical illness for Associate only.

45. What is the premium amount for Top-up policy?

Top-up Sum Insured (INR)	Applicable to base policy (INR)	Applicable to base Policy + AMC Policy (INR)
100,000	5,533	7,744
200,000	6,916	9,681
300,000	9,681	12,449
400,000	11,917	15,045
500,000	18,356	22,847
600,000	23,953	28,745
700,000	28,745	32,336
800,000	32,851	36,954
900,000	39,594	44,543
1,000,000	43,997	49,493
1,500,000	75,015	84,385
2,000,000	100,022	112,513

GST of 18% has been assumed in the above and will be subject to change if there is a change in applicable service tax guidelines in the future.

46. Is there a tax exemption for the premium paid towards AMC/Top-up Cover?

Tax exemption is applicable as per the Income Tax Act of India. The details of the same will be updated in MyPay app on One Cognizant for associates who are on India payroll.

47. What is the procedure to download and print the e-card?

\# Step 1: Login to One Cognizant (https://onecognizant.cognizant.com)
\# Step 2: Search Medi Assist app in the App store.
\# Step 3: Click on Medi Assist App from the search results. It opens in a new window.
\# Step 4: Click on the Policy tab to access e-card.
Associates may also download and save the e-cards.

Note: E-cards will be available after enrolment portal is closed and after GMC endorsement is complete.

48. Under what policy is workplace accident covered?

Workplace accident can be claimed under the India Medical Insurance policy if the said claim is admissible in nature.

49. What should be done if associates are covered under a dual insurance plan, one under this policy and another with any other medical insurance?

In case of a dual insurance plan, Medi Assist must be notified on the same and if the associate intends to claim the balance amount with another insurance policy, they must provide the settlement letter, along with the attested copy of the complete claim document to Medi Assist. In such scenarios, associate must intimate Medi Assist within 30 days of discharge about this claim.

50. Are original documents mandatory to claim hospitalization expenses under GMC policy?

The submission of original documents and discharge summary is mandatory to claim hospitalization expenses under this policy.

51. How can I avail the Loss of Pay (LOP) benefits for critical illness?

To avail the LOP benefit, the associate must exhaust their leave balance and update HCM notifying the duration to the HRSS team with HCM system screenshot. It will be payable only once the claims are submitted and admissible.
HRSSPoC-1-Alagutamilselvan.B@cognizant.com/Kausik.Karmakar@cognizant.com
HRSSPoC-2-Hemalatha.N@cognizant.com

52. Can an associate avail this policy during their notice period?

An associate is covered under the policy up to their last working day at Cognizant and thus can avail the benefits during the work tenure.

53. Is there coverage for psychiatric treatment under the policy?

Yes, coverage for psychiatric treatment is limited to inpatient treatment only for an associate.

54. Are the dependents of a deceased associate covered under the medical insurance policy?

Dependents enrolled and covered under the India medical insurance policy will have coverage till the end of the policy period up to 31st October 2025 in the event of death of the associate. A newborn child of the associate can be enrolled, and the coverage is limited to that policy period. Also, any claims for dependents covered shall be admissible only through cashless process. Reimbursement mode is not available under this category.

55. Is the premium paid annually?

Yes, premium is paid as a one-time annual payment during open enrollment only. There is no system of monthly premium deduction from payroll.

56. Who is eligible to pay premium in installments?

Associates in India payroll and up to Associate level whose base sum insured is INR 2,50,000 are eligible to pay premium in two equal installments. Associates at Senior Associate and above levels will have to pay the entire premium at once during open enrollment.

57. What is the timeline for paying premium in installments?

- Associates in India payroll up to Associate level whose base sum insured is INR 2,50,000 are eligible to pay premium in two equal installments. The first installment is to be paid in October/November 2024 during open enrollment. Second installment is to be paid on or before mid-December 2024. Exact details will be communicated during the enrollment period.
- In the event if associate avails cashless or reimbursement during this period, 100% of the premium must be paid before the date of hospitalization.

58. What is the process of paying premium in installments?

- Associates have to pay the first premium installment on or before 11th November 2024 during open enrollment, and second premium instalment on or before 15th December 2024
- Associates who are opting for premium payment in two installments (up to Associate level only) will get a notification in December 2024 to pay the second installment.
- In case of any emergency/planned surgery, associate must complete the balance premium payment to enable cashless service.
- In case an associate fails to pay the second installment, insurance coverage will be denied after 2 reminders.

59. Who can avail the Master Health Checkup (MHC)?

Associates on Cognizant India payroll can avail the benefit. This is a company-sponsored benefit provided to you and a discounted benefit for your dependents to help **early diagnosis** of potential health risks and pave the way for a healthier lifestyle. The tests are customized based on gender and age, offering the added convenience of home sampling.

60. What are the eligibility criteria to avail the MHC?

There are no minimum eligibility criteria (in terms of the number of years spent at Cognizant).

61. How many times can the associate avail this benefit?

Associate on India payroll can avail Cognizant-sponsored MHC once in a year, any time before October 31, 2025.

62. When can the associate avail this benefit?

The associate on India payroll can avail this benefit at any point in time before October 31, 2025.