



Business Name **Organization Name**



Employee Benefits Manual 2021-22

Client

Boeing India

Document No

Boeing/Marsh/2021-22/EBM

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Medical Benefits

Enhancements 2021-22

Enhancement	Current Policy	Changes
➤ Normal Maternity Limit	Capped at INR 50,000	INR 75,000
➤ LGBT Cover	Not Covered	Same Sex partners are covered in the policy
➤ Death Cases	Not Covered	<ul style="list-style-type: none"> In case of Death of any member, all the expenses (including non-payable items) will be paid in settled amount In case of Death of employee, dependents will continued to be covered in the policy till expiry
➤ Surrogacy Cover	Not Covered	Surrogacy Cover applicable up to Maternity sum insured. Only available to those who takes help of a surrogate mother for childbirth Subjected to infertility having been medically established in either of the partners 1 st March 2022
➤ Child Coverage	Dependent child only up to age 25	Child coverage with no age limits in case of any disability

Medical Benefit – Coverage Details For Employee Policy

Policy Parameter	
➤ Insurer	ICICI Lombard General Insurance Co Pvt Ltd
➤ TPA	I HealthCare (In House TPA)
➤ Policy Start Date	1 st April 2021
➤ Policy End Date	31 st March 2022
➤ Coverage Type	Family Floater
➤ Dependent Coverage	1 + 7 – Employee, Spouse, 4 dependent Children (upto 25 years) + 2 Dependent Parents (either set, cross combination not allowed upto 85 years)
➤ Sum Insured	INR 5.00 lac per family & parent sum insured restricted up to INR 3.00 lac

Benefits / Extensions	Coverage
➤ Standard Hospitalization	• Yes
➤ TPA services	• Yes
➤ Pre existing diseases	• Yes
➤ Waiver on 1 st year exclusion	• Yes
➤ Autism, mental illness, speech and behavioral therapy and related ailments	• Yes, covered with a cap of INR 30,000 per family on OPD & IPD basis
➤ Maternity benefits	• Yes – INR 75,000 for Normal & INR 75,000 for C – Sec
➤ Baby cover day 1	• Yes

Benefits / Extensions	Coverage
➤ Domiciliary Hospitalization	• No
➤ Pre-Post Hospitalization Exp.	• Yes – 30 & 60 days resp.
➤ Room Rent Capping	• Normal – INR 6500 & ICU INR 10000

Medical Benefit – Standard Coverage

Covers expenses related to

- Room and boarding - Normal – INR 6500 & ICU - INR 10000 (*in case a room is opted of a higher limit- incremental charges will be applicable on the entire bill*)
- Doctors/Medical Practitioner fees
- Intensive Care Unit
- Nursing expenses
- Surgical fees, operating theatre, anesthesia and oxygen and their administration
- Drugs and medicines consumed on the premises
- Hospital miscellaneous services (such as laboratory, x-ray, diagnostic tests)
- Costs of prosthetic devices if implanted during a surgical procedure
- Radiotherapy and chemotherapy
- Liability for Nasal Sinus Surgeries upto INR 35,000; Hospitalisation arising out of Psychiatric ailments upto INR 30,000; 50% Co-Pay for cyberknife treatment/Stem Cell Transplantation. Cochlear Implant treatment shall be restricted to 50% of the SI.

Headings	As per Bill	As per Policy (room eligibility @ INR 6500 per day)	Deductions
Room rent (8,000 for 3 days)	24000	19500	4500
Doctor's fee	15000	12187.5	2812.5
Nursing Charges	20000	16250	3750
pharmacy bill	10000	10000	0
Cotton swabs	1200	0	1200
Registration charges	1000	0	1000
Durty Doctor charges	1000	0	1000
Total	72,200	57,938	13,263

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 surgery, 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.



Day Care
procedure

Maternity Benefits

Benefit Details	
For Normal Delivery	• INR 75,000
For C – Section / Cesarean Delivery	• INR 75,000
Restriction on no of children	• Maximum of 2 Children
9 Months waiting period	• Waived off
Pre Post Natal Expenses	• Covered within the Maternity limit upto 5,000 on OPD & IPD basis

- These benefits are admissible in case of hospitalisation in India.
- Covers first two 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.



Medical Benefit – 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 (please refer to the website for the updated list)

For Updated List visit to :

https://www.icicilombard.com/Content/ilomen/Hospital_list/search.asp

Please check the website for updated list of hospitals as the list keeps changing every 15 days or contact the relationship manager to confirm if the hospital is a network hospital

SMS Alerts : Please mention your mobile number on the claim/Pre Authorization Forms for real time updates on claim status.

Contact Details -

Mr Kiran Kumar

Mobile: +917019592554

Email: k.kiran@ext.icicilombard.com

Mr Nakul N

Mobile: +917045081209

Email: Nakul.n@icicilombard.com

Emergency Hospitalization



Planned Hospitalization



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.

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 hospitalisation 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.

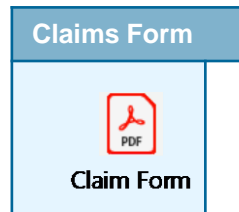
Submission of hospitalisation claim

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

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/Certificate/card (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
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



Due to Covid 19, we are accepting soft copies shared through the mobile app- IL Takecare App

- View and download E- health cards for self and family
- Hospital Network : Helps in locating the nearest network hospital
- Claims Management : pre-planned hospitalization can be initiated and status of all claims till date could be viewed & tracked

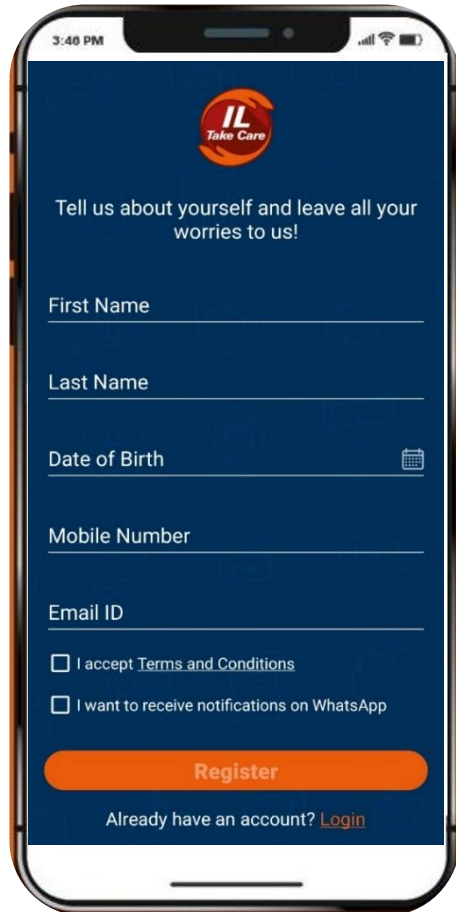


Along with these do send a cancelled cheque copy with your name pre printed on the same if it's the first claim for this period.

Please courier them to the below address:

ICICI Lombard Healthcare- Claims Team
 ICICI Bank Tower, Plot No. 12
 Financial District, Nanakram Guda,
 Gachibowli, Hyderabad,
 Andhra Pradesh,
 Pin Code: 500032, India

Registration Process



3:46 PM

IL
Take Care

Tell us about yourself and leave all your worries to us!

First Name

Last Name

Date of Birth

Mobile Number

Email ID

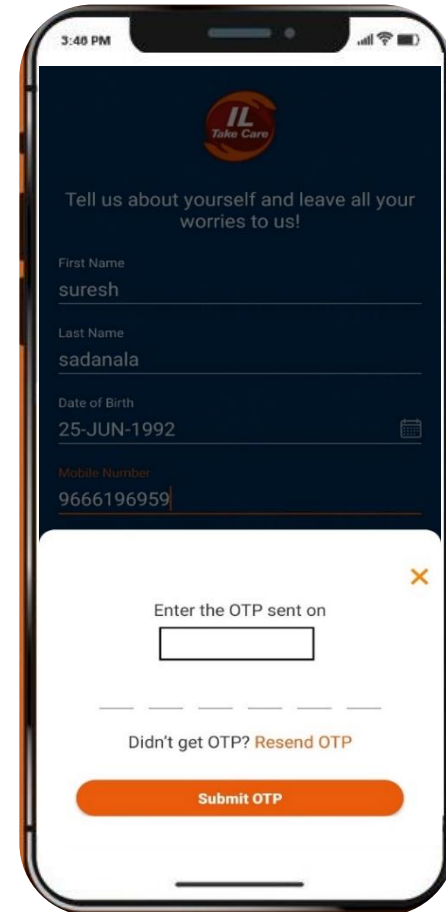
☐ I accept [Terms and Conditions](#)

☐ I want to receive notifications on WhatsApp

Register

Already have an account? [Login](#)

- In order to register on the app, kindly proceed by providing Name, Date of birth, Mobile number and your Email Address
- On accepting the terms and conditions, an OTP can be requested for.



3:46 PM

IL
Take Care

Tell us about yourself and leave all your worries to us!

First Name
suresh

Last Name
sadanala

Date of Birth
25-JUN-1992

Mobile Number
9666196959

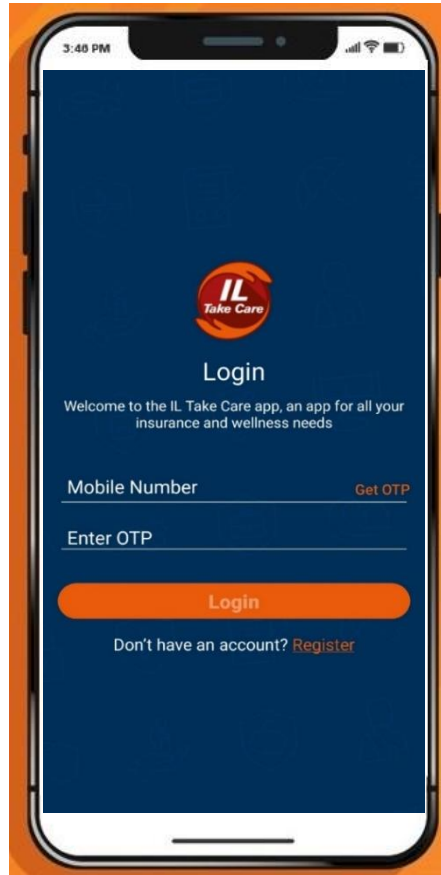
Enter the OTP sent on

Didn't get OTP? [Resend OTP](#)

Submit OTP

- OTP will be sent to the mobile number provided .
- Please enter the OTP in the space provided .
- Click on submit.

Sign-in Process



- Enter mobile number registered with the App.
- Click on “Get OTP”
- Enter the OTP received
- Click on “Login”

Add policy to download e-cards

- After login, click on add your policy.
- Click on Health Insurance product and enter the details asked for
- Company Name policy addition flow
 - Company Name eg, e.g. THALES DIS TECHNOLOGY, THALES INDIA, THALES DIS CPL, Guavus (cross- check from your salary slips if you are not sure)
 - TGI
 - Employee Name (keep this blank)
 - DOB



3:48 PM

< Add Policy

ICICI Lombard
Nibhaye Vaade

Add your insurance policy

Health Insurance Motor Insurance Travel Insurance

Policy purchased by

Company Me

Company Name

Employee ID

I know my Policy Number

Employee Name

Roshan

Date of Birth

31-AUG-1993

Add Health Policy

Can't add your policy? [Contact Us](#)

3:48 PM

< Add Policy

ICICI Lombard
Nibhaye Vaade

Add your insurance policy

Health Insurance Motor Insurance Travel Insurance

Policy purchased by

Company Me

Policy Number

I dont know my Policy Number

UHID Number

Date of Birth

31-AUG-1993

Add Health Policy

Can't add your policy? [Contact Us](#)

- The policy can also be added via policy number details
- If you have your policy details with you, click on “I know my policy number”
- Enter the below details for policy addition via policy number flow
 - Policy Number
 - UHID
 - DOB
 - Employee ID (Not applicable to retail policies)



Home Quarantine Cases

- Filled claim form- Part A&C
- Positive RTPCR/Rapid Antigen report
- Doctor consultation prescribing quarantine
- All test reports, consultation documents
- Bills and payment receipt
- Bills, prescription & consultation should be in the name of the patient only
- Cancelled Cheque copy with a pre-printed name same as what is filled in Part C of the claim form- employee's
- Aadhar card copy/Pan card copy of the claimant
- The document should be a single PDF file within 8 MB size limit
- Claim to be lodged individually for all members
- Once the claim is lodged, the TAT for settling or query is within 14-15 working days
- Please make sure the document is clear and images are readable
- Do not lodge multiple claims against the same member
- All the cases which have been rejected or queried, all documents to be uploaded by 15th July
- Claim to be lodged under the member reimbursement section only mentioning the below-
 - Date of admission- beginning of quarantine period
 - Date of discharge- end of quarantine period
 - Hospital name- can be kept as others
- Positive RTPCR/RAT test is mandatory for claiming in the HQ benefit
- All medicines consumed to be backed by a doctor prescription

Medical Benefit – General Exclusions

- 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
- Lasik Surgery, Septoplasty Expenses on fitting of Prosthesis; Any device/instrument/machine contributing/replacing the function of an organ; Holter Monitoring are outside the scope of the policy
- Hospitalisation 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- (***only in case of hospitalization to a government registered AYUSH hospital, will these expenses be paid***)
- 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
- Hospitalisation for diagnostic tests only
- Vitamins, health foods and tonics unless used for treatment of injury or disease
- Infertility treatment
- Voluntary termination of pregnancy during first 12 weeks (MTP)
- OPD Claims
- Claims (of high value) submitted without prescriptions/diagnosis
- Costs incurred as a part of membership/subscription to a clinic or health centre



Detailed Exclusion

Prudent Utilization of Benefit

- Health Insurance is a benefit for the employee and their dependents. One has to utilize the benefit with utmost caution and prudence.
- The ever increasing cost for the benefits require a proactive involvement from all of us.
- The following steps are recommended, ensuring the benefits is prudently utilized by the employee and dependents covered



Please ensure to crosscheck the final bill sent to the TPA for the following:

✓ You are Billed only for the services utilized for e.g. category of room, diagnostics undergone , medicines consumed

✓ Total of the bill



In case of any planned hospitalization, approach the hospital in advance(48 hrs) and request pre authorization-



this enables TPA to further negotiate the rates



To approach hospitals with caution – **most expensive is not necessarily the best.**



To cross check the tariff with the **Bench Mark Rates** provided- the benchmark rates would give an idea



the general spend for the treatment or procedure.



Try to negotiate



Ask **WHY & WHAT** is billed to you (as a consumer , we have the right to know)

Medical Benefit – Contact Details

Provider List		
	Primary Contact	Escalation Point
Third Party Administrator I-Health Care Website: ihealthcare@icicilombard.com	Mr Kiran Kumar Mobile: +917019592554 Email: k.kiran@ext.icicilombard.com Mr Nakul N Mobile: +917045081209 Email: Nakul.n@icicilomard.com	Mr Balakrishna Email: balakrishna.nalwar@icicilombard.com
Insurer ICICI Lombard General Insurance Company Limited www.icicilombard.com	Mr Kiran Kumar Mobile: +917019592554 Email: k.kiran@ext.icicilombard.com Mr Nakul N Mobile: +917045081209 Email: Nakul.n@icicilomard.com	Mr Abdul Wase Email- abdul.wase@icicilombard.com
Marsh india Insurance Brokers Pvt Ltd - Delhi www.marsh.com	Ms Sanjula Sharma Mobile: +91 8377907992 Email: Sanjula.sharma@marsh.com	Mr Puneet Walia Email: Puneet.Walia@marsh.com
Marsh india Insurance Brokers Pvt Ltd - Chennai www.marsh.com	Mr Shahul Hameed Mobile: +91 9884854242 Email: Shahul.Hameed@marsh.com	Mr Shiyed Mohamed Meeran Mobile: +91 7824817711 Email: Shiyed.Meeran@marsh.com



GPA 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	ICICI Lombard General Insurance Co. Limited
Policy Start Date	• 1 st April 2021
Policy End Date	• 31 st March 2022
Sum Insured	• 3 times of Gross Salary

Coverage Details	
Accidental Death	• Yes (100% of Capital Sum Insured)
Loss of both eyes OR 2 limbs OR 1 limb and 1 eye	• Yes (100% of Capital Sum Insured)
Loss of one eye OR 1 limb	• Yes (50% of Capital Sum Insured)
Permanent Total Disablement from injuries other than those named above	• Yes (100% of Capital Sum Insured)
Permanent Partial Disability	• Yes as per the chart
Temporary Total Disability	• (Weekly Benefit- 1% of Sum Insured subject to a maximum of INR 5,000 per week for 100 weeks)
Medical Expenses	• 40% of claimed amount or 10% of SI, whichever is less
Geographical Limits	• World wide

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
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



GTL Benefits

GTL – Benefit Details

Policy Parameter	
Insurer	HDFC Life Insurance Company Ltd
Policy Start Date	1 st April 2021
Policy End Date	31 st March 2022
Sum Assured	• 3 times of Gross Salary
Coverage	For Employees only

Coverage Details	
<p><u>Death</u></p> <p>In the event of death of a member from any cause (natural/accidental), provided that this shall occur while the assurance in respect of such member shall be in force, an amount determined in accordance with the Policy Schedule shall be paid</p>	• Yes
<p><u>Free Cover Limit (FCL/NEL)</u></p> <p>Any Member whose sum assured is above the NEL has to provide evidence of insurability (which could include Health Questionnaire or Medicals)</p> <p>Based on the medical evidence submitted, insurance company reserves the right to</p> <ol style="list-style-type: none"> 1) Provide Full Proposed Coverage at Standard Group Rate or 2) Provide Full Proposed Coverage with additional Premium Loading or 3) Limit the Sum Assured up to the NEL 	Yes (FCL 4,00,00,000)



Voluntary Plan- Top Up Policy

Voluntary Option- Top Up Plan

Policy Parameter	
➤ Insurer	ICICI Lombard General Insurance Co Pvt Ltd
➤ TPA	I HealthCare (In House TPA)
➤ Coverage Type	Family Floater
➤ Dependent Coverage	Same as base policy
➤ Sum Insured	3 lacs, 4 lacs and 5 lacs

- Top Up policy is triggered once the base policy (5 lacs) is exhausted and if the employee has opted for this Top up provided date of admission is post 3rd May
- All family members in base are covered in Top
- Maternity expenses are not covered in Top
- Diseases/illnesses excluded in Base policy remains excluded in top up also
- Top up policy has different card details compared to base policy

Policy	BIPL	BIDPL	BIPL- Chennai (Previously CDG)
Base Policy	4016/X/198469072/01/000	4016/X/198480960/01/000	4016/X/200514024/01/000
Top Up Policy	4016/X/221407019/00/000	4016/X/221405524/00/000	4016/X/222214640/00/000


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