



DATED: 15 Jun 2023

Insurance Coverage Document

Master Policy Number: FGH00472023

Your Individual Certificate Number Is: 1835560 START DATE OF COVERAGE: 17 Jun 2023 COMPANY NAME: Tata Consultancy Services END DATE OF COVERAGE: 21 Jun 2023 **DURATION OF COVERAGE: 5 Days**

UNIT: Main office - HQ COMPANY PIN: 1001

Plan Type: Short Term Plan TPA REFERENCE: Region 26

COUNTRY: Canada

AREA OF COVERAGE: Worldwide

INSURED(S) DETAILS:

	NAME	ADD-ON PLANS	EMPLOYEE ID	MAYFAIR ID
(1)	Arnab Mondal	PA & Travel Plan	1439379	1001382570
(2)	Renu Kundu	PA & Travel Plan	1439379	1001382571

TCS - SHORT TERM MMT PLAN COVERAGE

The below medical benefits are insured through Foyer Global Health (Policy Number: FGH00472023)

This is to confirm that Foyer Global Health will cover eligible expenses incurred related to Covid-19 as per the policy benefits, terms and conditions and will treat Covid-19 as any other comparable disease, i.e. seasonal flu. Coverage is for 'medically necessary treatment only' whether symptomatic or asymptomatic for Covid.

Maximum Annual Benefit: An insured has a per claim maximum limit of USD 250,000

SECT A (MEDICAL EXPENSES & HOSPITALISATION):

Deductible for Sect A: **USD 10** per claim, unless otherwise stated.

- (1) Trip: 90 days extendable to 180 days
- (2) Dental Care: For all Dental care except for any preventative treatment (such as cleaning, scaling, polishing) and any orthodontic works. Max cover limit (per annum): USD 500. Deductible: USD 50 per claim. Reimbursement only.
- (3) Prescription drugs/ medicines: All Prescription Drugs are covered, excludes OTC (Over the Counter available without a physician's prescription.). Reimbursement only.
- (4) Pre-existing and Chronic Illness: Max cover limit: USD 125 per trip.
- (5) COVID19 TEST if symptomatic Fully covered at Dr's office.

SECT B (MATERNITY EXPENSES): Maximum: USD 2,000. Deductible USD 100

SECT C (EMERGENCY REPATRIATION & RELATED MEDICAL EXPENSES):

Up to **USD 250,000**. Less any amount paid under Sect A medical expenses.

- (1) Additional up to USD 1,000-to cover expenses for close business associates, relatives or friends to remain with Insured.
- (2) On-going treatment in home country for up to 12 months from the date of incident/loss or when the Section C max limit is reached, whichever is the earlier.
- (3) The decision to approve or require Repatriation is made by the Underwriter or their authorised representatives, so long as the Insured is certified fit to fly.
- (4) Repatriation of mortal remains is covered under this section to a maximum of USD 50,000

Foyer will treat COVID-19 as we would any other comparable disease; i.e., seasonal flu subject to:

- Your plan covers outpatient diagnostic testing included on your plan,
- they are symptomatic,
- they are referred by a medical practitioner, and
- the testing is received in an appropriate medical facility
- Any subsequent treatment (Inpatient & Outpatient) will be covered as it would any other eligible medical condition, in accordance with

The Below non-medical benefits are insured through HDI (Policy Number: 330-01815684-14005/23)

SECT D (PERSONAL ACCIDENT): Benefits are administrated by Mayfair We Care, who can be contacted by email: info@mayfairwecare.com (1) Death (under 16yrs old benefit **USD 1,000**) - **USD 25,000**

- (2) Loss of one or more eyes/or limbs USD 10,000
- (3) Permanent total disablement USD 25,000

SECT E (Loss of Personal Effects):

- (1) Loss of Personal Effects Only as a result of Mugging: Maximum limit: **USD 1,000**. Max Cash limit of **USD 250**. Initial Deductible: **USD 50** each claim.
- (2) Loss of Passport: Up to USD 250 per passport lost. Deductible: Nil

Travel Related Covers: (These covers will be on reimbursement basis and will be administered by Mayfair We Care)

- (1) Personal Liability: Max claim limit: USD 200,000. Deductible: USD 200.
- (2) Loss of International Driving License: Max claim limit: USD 100 per International Driving License lost. Deductible: Nil
- (3) Loss of Baggage (checked in): Max Claim limit: USD 1,000. Deductible: Nil
- (4) Delay of Baggage: Max claim limit: **USD 200.** Deductible: First 10hrs (There is no cover for the first 10hrs)
- (5) Trip Delay: Max claim limit: **USD 250**. **USD 10** for every 10hrs (There is no cover for the first 12hrs)
- (6) Trip Interruption: Max claim limit: USD 1,000. Deductible: Nil
- (7) Emergency Hotel Accommodation: Max claim limit: USD 2,000. Deductible: Nil
- (8) Hijacking: Max claim limit: USD 250. USD 25 per 24hrs. Deductible: Nil
- "The validity of the policy is subject to the current coverage dates listed in the Mayfair website"

Mayfair Assist Contact Details:

Contact number for UK: +44 (0) 20 8126 4023

For list of other country specific contact numbers, please click on the below link: https://www.mayfairwecare.com/contact

	MAYFAIR ASSIST E-MAIL
For any changes or corrections in your policy details	medicalinsurance@mayfairwecare.com
For 24 hours emergency medical assistance and cashless services:	mayfairassist@mayfairwecare.com
For pay and claim or general policy queries:	mayfair.claims@mayfairwecare.com
Escalations and feedback:	info@mayfairwecare.com

	MAYFAIR ASSIST TIMINGS
For 24 hours emergency medical assistance and cashless services	24 / 7 / 365
For pay and claim or general policy queries	On all working days from 8 AM to 8 PM IST

Important Points to Note:

- 1) If you receive a copy of an invoice from a Service Provider requesting payment, please forward it to mayfair.claims@mayfairwecare.com immediately
- 2) Please be advised the above is only a brief summary. For further info (i.e. What is and isn't covered, exclusions, helpful hints/advice, etc) you will need to get a copy of your company membership guide either from your HRD/TRAVEL DEPT or by going online to https://www.mayfairwecare.com and entering your insured's login.
- 3) Insurance validity for periods outside of the current contract dates, are subject to renewal of the group contract.

Please refer to the latest version of this document available at your insured's login at https://www.mayfairwecare.com