

Placement Slip – P_GMC_21086

Policy Details

| Field | Value |
|-----------------------|--|
| Type of Policy | GROUP HEALTH POLICY - EMPLOYER/EMPLOYEE |
| Insured Name | BHUBANESHWARI COAL MINING LTD and/or affiliated and/or interrelated and/or subsidiary companies and/or corporations as they now are or may hereafter be created and/or constituted and/or for whom the Insured receive instructions to insure and/or for whom the Insured have or assume a responsibility to arrange insurance contractually, as their respective rights and interest may appear hereinafter known as the Insured. |
| Communication Address | PLOT NO 1554, FLAT NO 2, 1ST FLOOR, SHARMACHHAK , TALCHER, ORISSA TALCHER-759100 |
| Proposal Type | Renewal |
| Current Policy Number | Expiring Policy No. 12120034240400000004 |
| Current TPA | MEDI ASSIST INDIA TPA PVT. LTD. |

Proposed Insurer Details

| Name of Insurer | City of Issuing Office | Divisional Office Number |
|------------------------------------|---------------------------|--------------------------|
| THE NEW INDIA ASSURANCE CO. LTD | 121200 - NEW INDIA CENTER | 121200 |

Policy Period

| Field | Value |
|---------------------------|---|
| Policy Range Month (upto) | 1 Year |
| Renewal Policy Period | From 00 Hrs. of 01/04/2024 12:00:00 AM till 11:59 pm of 31/03/2025 12:00:00 AM |

Insured Business

| Industry | Value |
|--------------------|-------|
| Insured's Business | Coal |

Sum Insured & Member Count

| PARTICULARS | FINAL COUNT |
|---------------------|-------------|
| Count of Employees | 198 |
| Count of Dependents | 516 |
| Total Count | 714 |

General Information

| Field | Value |
|------------------------|---|
| Name of TPA 1 | MEDI ASSIST INDIA TPA PVT. LTD. |
| Family Definition | E+S+2C (Self + Spouse + 2 Dependent Children, no age limit) |
| Sum Insured per Family | 1,00,000 |

Coverage Details

| Coverages | Expired Terms (OPT-1) |
|---|---|
| Pre-existing disease coverage | Covered for all |
| Waiver of 30 days waiting period | Covered for all |
| Waiver of 1st, 2nd, 3rd & 4th year waiting period | Covered for all |
| Pre & Post Hospitalization days & its limits | Covered for all – Pre & Post Hospitalization coverage for 30 & 60 days respectively |
| Domiciliary Hospitalization Cover | Not covered |
| Internal Congenital disease/defects | Covered |
| External Congenital disease/defects | Not covered |
| Dental treatment due to illness/injury/accident (hospitalization) | Covered |
| Baby day one cover | Covered |
| Ambulance charges | Covered – Up to 1,500 per claim |
| Day care treatment / Procedures | Covered – 1% of SI or actual (whichever is less), max 2,500 for emergency transfer |
| Corporate Buffer | Not available |
| Terrorism/Epidemic/Pandemic Cover from day 1 | Covered |
| AYUSH treatment | Covered |
| Organ transplant donor expenses within Family SI | Not covered |
| Family Size | 1+3 |
| Sum Insured | 1,00,000 |

Maternity Benefits

| Maternity Benefits | Expired Terms (OPT-1) |
|---------------------------|---|
| Waiver of 9 month waiting | Waived for all |
| Pre & Post Natal Expense | Covered within maternity limit (30/30 days) |

| | |
|---|-----------------------------------|
| Well Baby Charges | Covered within maternity limit |
| Treatment for infertility etc. | Not covered |
| Normal Delivery (IPD/Day care) | Up to 25,000 (normal & caesarean) |
| IVF treatment under maternity | NA |
| Pre & Post Natal Expense (30 & 60 days) | NA |
| Voluntary termination (1st 12 weeks) | NA |

Add On Coverages

| Add On Coverages | Expired Terms (OPT-1) |
|--|-----------------------|
| Chemotherapy (IPD/Day) | Not covered |
| Air Ambulance | Not covered |
| Dental Treatment (non-accidental OPD) | Not covered |
| OPD Benefit | Not covered |
| Critical Illness Benefit | Not covered |
| Increase in Family SI | Not covered |
| Lasik +/- 7.0 | NA |
| Death during hospitalisation (No deduction) | NA |
| Death of employee – dependents covered | NA |
| Cosmetic surgery (burns or life-threatening) | NA |
| Died < 24 hrs | NA |
| Assistant surgeon charges | NA |
| GST and other hospital charges | NA |
| Ailments in Corporate Buffer | NA |

Cost Containment

| Cost Containment | Expired Terms (OPT-1) |
|----------------------|---|
| Room Rent Cappings | Applicable – 1% SI (normal), 2% (ICU), no proportionate deduction |
| Proportionate Clause | Not applicable |
| Claim Co-payment | Not applicable |
| Internal cappings | NA |
| PPN Charges/Rates | NA |

Other Clauses

| Other Clauses | Expired Terms (OPT-1) |
|--|-----------------------------------|
| Cashless facility | Yes |
| Addition & Deletion (Employees/Dependents) | Yes – On pro-rata basis |
| Claim Intimation Clause | Within 30 days of hospitalization |

| | |
|-------------------------------------|--|
| Claim Document Submission | Within 60 days of discharge (waiver possible on request) |
| Cancellation clause | Yes – To be deleted |
| AIDS treatment | NA |
| Group to Retail Continuity | NA |
| War & allied perils | NA |
| Circumcision | NA |
| Spectacles/hearing aids | NA |
| Convalescence etc. | NA |
| Self-injury/alcohol/drugs | NA |
| Charges primarily for investigation | NA |
| Nuclear weapons | NA |
| Naturopathy | NA |
| Other T&Cs; | Cataract covered fully (lens capped), AYUSH covered, Modern treatments as per IRDAI circular |

Claim Experience

| Year | Premium Paid | Paid Amount | Outstanding | Nature of Claim | No. of Claims |
|---------|--------------|-------------|-------------|-----------------|---------------|
| 2024–25 | 873,428 | 4,87,535 | 40,906 | RI and cashless | 23 |
| 2023–24 | 792,287 | 789,874 | 43,115 | RI and cashless | 22 |
| 2022–23 | 0.00 | 0.00 | 0.00 | 0 | 0 |

Premium Details

| GST Component | Rate | Amount |
|-----------------------|------|-------------|
| SGST | 9% | 1,06,506.9 |
| CGST | 9% | 1,06,506.9 |
| IGST | 0% | 0 |
| UTGST | 0% | 0 |
| Total GST | 18% | 2,13,013.8 |
| Total Premium Payable | — | 13,96,423.8 |

Payment Details

| Field | Value |
|---------------|----------------|
| Mode | NEFT |
| Reference No. | 503271384929 |
| Date | 28/03/2025 |
| Amount | 13,96,424 |
| Bank | HDFC BANK LTD. |

Approvals

| Field | Value |
|-------------|-------------------|
| Prepared By | PARESH WAGHDHARE |
| Reviewed By | PRITAM NAGWEKAR |
| Place | MUMBAI - MAFATLAL |
| Date | 02/04/2025 |