



# EMPLOYEE BENEFITS MANUAL 2022-23



**Disclaimer:** This manual is intended to be general summary of the benefits provided by <Client Name> & should be regarded as guide only. While HR shall make every reasonable effort to ensure the accuracy and validity of the information provided here in this document. HR accepts no liability or responsibility for any errors or omissions in the content or for any loss or damages arising out of your reliance on information provided here. If there is a conflict in interpretation or benefit applicability, then the terms & conditions of the policy will prevail.



## Medical Benefits

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## Coverage Details For Employee Policy

Policy Parameter	
Insurer	Acko General Insurance
TPA	Medi Assist Insurance TPA
Policy Start Date	3 <sup>rd</sup> May 2022
Policy End Date	2 <sup>nd</sup> May 2023
Coverage Type	Group Mediclaim Insurance
Sum Insured	Grade-qise; INR 5L, 6L, 7L, 8L and 10L

Maximum no of Members insured in a family	1 + 3
Employee	Yes
Spouse	Yes
Children (up to 2 children covered; 3 <sup>rd</sup> child covered in case of 2 <sup>nd</sup> delivery being twins)	Yes
Parents	No
Parents-in-Law	No

Siblings	No
Others	No
Mid Term enrollment of existing Dependents	Disallowed
Mid Term enrollment of new joiners (New employees +their Dependents)	Allowed
Mid term enrollment of new dependents (Spouse/Children)	Allowed

*\*No Individual should be covered as dependent of more than one employee.*

## Coverage Details For Employee Policy

Benefits / Extensions	Coverage
Standard Hospitalization	Yes
TPA services	Yes
Pre existing diseases	Yes
Waiver on 1 <sup>st</sup> year exclusion	Yes
Waiver on 1 <sup>st</sup> 30 days excl.	Yes
Maternity benefits	Normal 50k and C-Section 65k
Baby cover day 1	Yes
Waiting period for maternity	No waiting period for availing maternity benefits; covered from day-1

Benefits / Extensions	Coverage
Domiciliary Hospitalization	Not Covered
Pre-Post Hospitalization Exp.	30 days and 60 days
Pre and Post Natal	INR 5000 within the maternity limit
Room Rent Capping	1% of SI for Normal and 2% of SI for ICU
Co-pay	20% co-pay applicable on tier-1 hospitals; 15% on all other hospitals; in any case, maximum co-pay restricted to INR 25,000
Ambulance Services	INR 1000 per event
Pre-Post Hospitalization Exp.	30 days and 60 days

## Policy Period

Existing Employees + Dependents	
Commencement Date	3 <sup>rd</sup> May 2022
Termination Date	2 <sup>nd</sup> May 2023

New Joiners + Dependents	
Commencement Date	Date of Joining
Termination Date	22 <sup>nd</sup> May 2023

New Dependents (due to Marriage / Birth)	
Commencement Date	Date of such event
Termination Date	2 <sup>nd</sup> May 2023

## Coverage Details For Employee Policy

Benefits / Extensions	Coverage
Internal Congenital Ailments	Covered
External Congenital Ailments	Covered in case of life-threatening situations for children
Surgical Capping	70% of SI for joint replacements surgery for Band a and Band b; 50% capping for Band C and above
Other ailment capping	Capping for Cataract: INR 25000 for Band A; INR 30,000 for all other bands Gastrointestinal Ailments: capped at INR 30,000
MTMAT covers	Covered with 50% co-payment
Dental Treatment	Covered for accidental cases only

MTMAT COVERS
Uterine Artery Embolization & High Intensity Focused Ultrasound (HIFU)
Balloon Sinuplasty
Intra vitreal Injections
Robotic Surgeries (Including Robotic Assisted Surgeries)
Bronchial Thermoplasty
Vaporization of the Prostate (Green laser treatment for holmium laser treatment)
Deep Brain Stimulation
Oral Chemotherapy
Immunotherapy-Monoclonal Antibody to be given as injection
Stem Cell Therapy: Hematopoietic Stem Cells for bone marrow transplant for hematological conditions to be covered only

## Covers Expenses Related To:

- Room and boarding- Normal – 1% of SI for Normal and 2% of SI for ICU
- 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
- Infertility coverages for female insureds up to the maternity limit. This would include surgeries/ IVF and IUI
- Surrogacy benefit covered up till maternity limit
- Coverage for adopted child in the family definition

### Please Note:

- 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.
- Expenses on Hospitalization 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 Hospitalization Benefit.

## Pre & Post Hospitalization Expenses

Pre - Hospitalization Expenses	
Definition	If the Insured member is diagnosed with an Illness which results in his / her Hospitalization and for which the Insurer accepts a claim, the Insurer will also reimburse the Insured Member's Pre-hospitalization Expenses for up to 30 days prior to his / her Hospitalization.
Covered	Yes
Duration	30 Days

Post - Hospitalization Expenses	
Definition	If the Insurer accepts a claim under Hospitalization and immediately following the Insured Member's discharge, further medical treatment directly related to the same condition for which the Insured Member was Hospitalized is required, the Insurer will reimburse the Insured member's Post-hospitalization Expenses for up to 60 day period.
Covered	Yes
Duration	60 Days

*\*Any One Illness: A claim is considered as a single illness if it has a continuous period of illness or results in a relapse within 45 days of the earlier treatments*



## Maternity Benefits

Benefit Details	
Benefit Amount	INR 50,000 For Normal & INR 65,000 for C-section
Restriction on no of children	Maximum of 2 children (3 <sup>rd</sup> child covered in case of 2 <sup>nd</sup> delivery being twins)
9 Months waiting period	Waived off
Pre and Post Natal	INR 5,000 within maternity limit

- These benefits are admissible in case of hospitalization 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.



## 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.

**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.

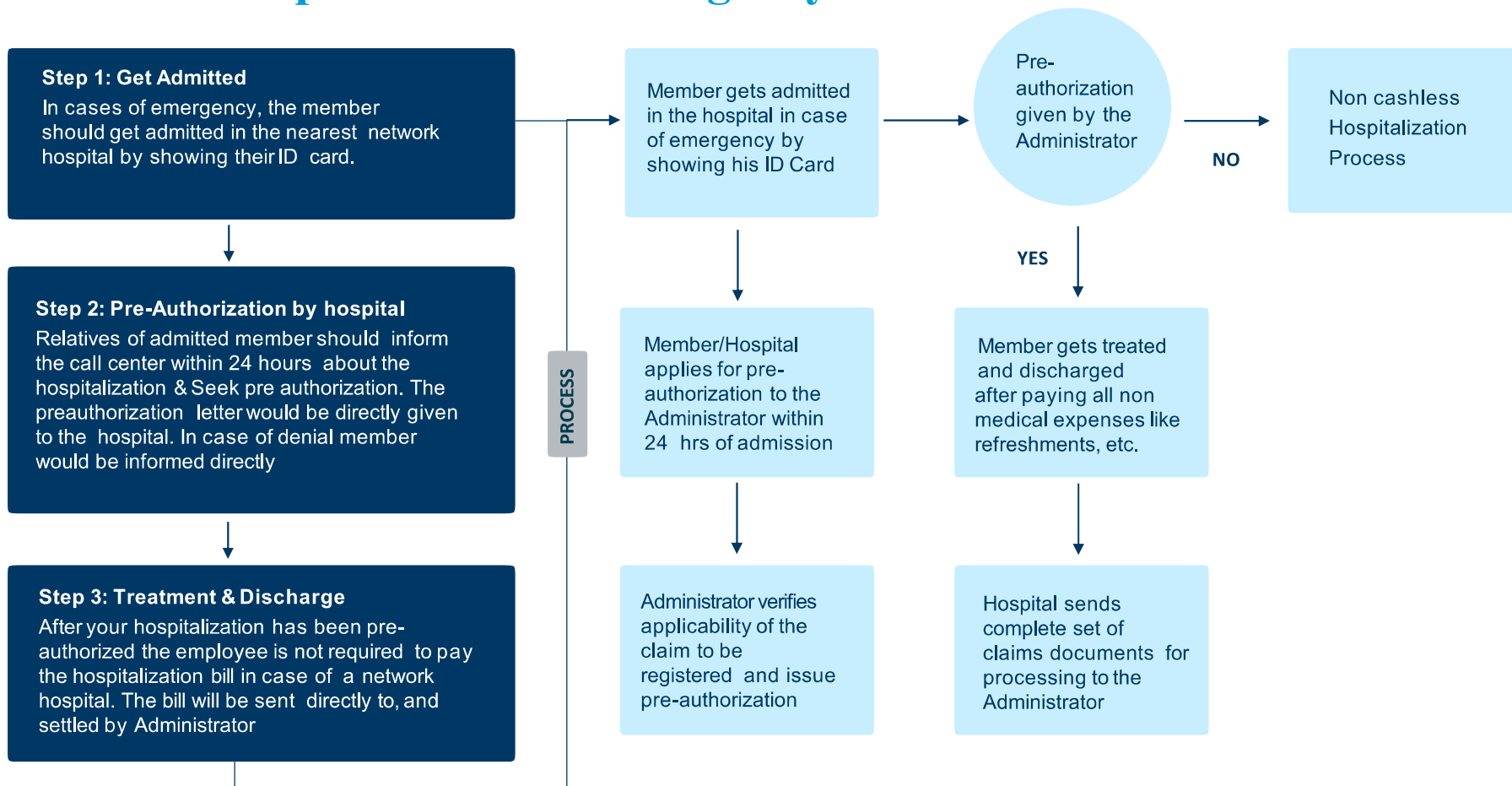


**Hospitals in the network  
(please refer to the website  
for the updated list)**

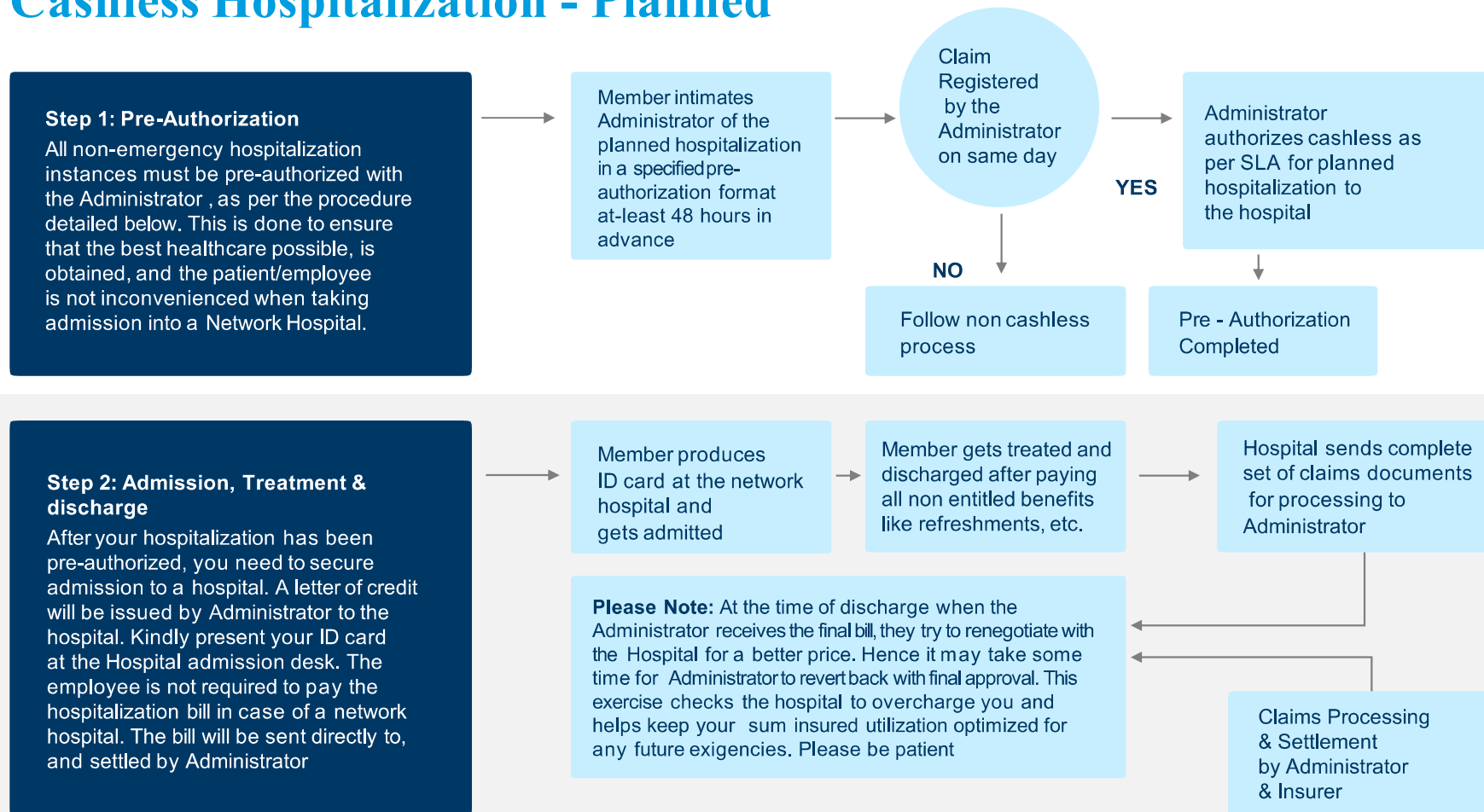
**For Updated List visit to TPA link  
as below:**

<List of Network Hospitals | Cashless  
Network Hospitals covered by Insurer  
(medibuddy.in)>

## Cashless Hospitalization - Emergency



## Cashless Hospitalization - Planned



## Non-Cashless Process

### 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 hospitalization expenses from the insurer.

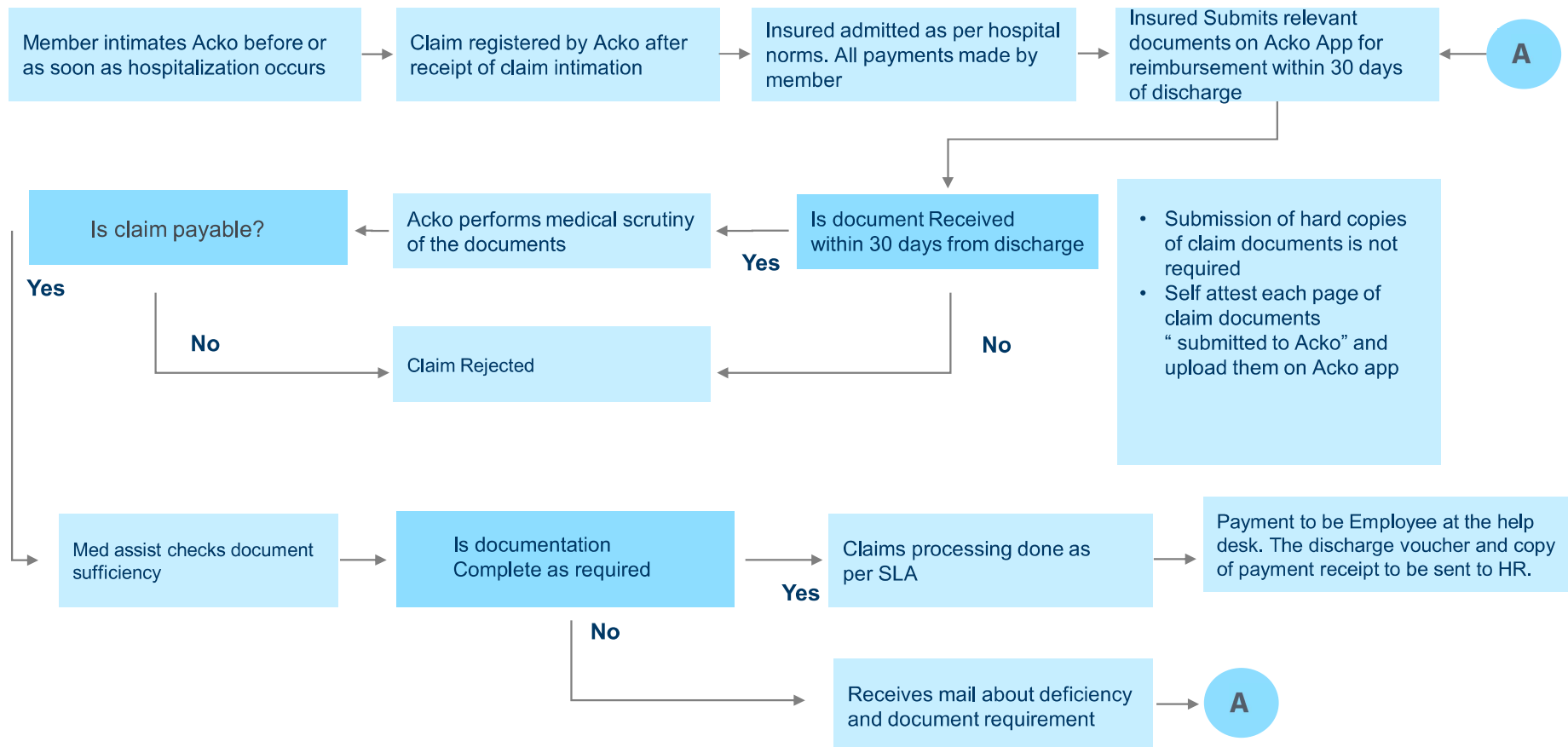
### Discharge Procedure

- 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 Hospitalization Claim

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

## Non-Cashless Process



## Claims Document List

- 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

## 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
- Hospitalization 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 and AYUSH
- 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
- Hospitalization for diagnostic tests only
- Vitamins and tonics unless used for treatment of injury or disease
- Voluntary termination of pregnancy during first 12 weeks (MTP)
- OPD Claims not payable under the base Group Mediclaim Policy
- Claims (of high value) submitted without prescriptions/diagnosis
- Health foods
- Costs incurred as a part of membership/subscription to a clinic or health centre
- Naturopathy
- Cost of appliances, spectacles, contact lenses, hearing aids
- Non-medical expenses like Hospital surcharge, telephone bills, cafeteria bills



## 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

### **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 (XX 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)

## Contact Details

### Insurer: Acko General Insurance

#### SPOC

Mr. Virender Kumar  
Virender.kumar@acko.com  
8368742074

#### Escalation-1

Mr. Sandeep Kumar  
Sandeep.kumar@acko.com  
9980566005

#### Escalation-2

Mr. Konda Gopi Reddy  
Kondagopi.reddy@acko.com  
7989372975

### Insurance Broker: Marsh India Insurance Brokers

#### Escalation - 1

Mr. Santhosh Kasi Reddy  
Santhosh.Kasi-  
Reddy@marsh.com  
8976708678

#### Escalation – 2

Ms. Anjali Agarwal  
Anjali.Agarwal@marsh.com  
9966200636

#### Final Escalation

Mr. Balajee Rao  
Balajee.rao@marsh.com