

PepsiCo GBS Voluntary Parental Insurance Policy

HR Cascade: November 2020

1st Dec 2020 – 30th Nov 2021

Group Medical Insurance 2020 : For Parents

Policy Overview

Policy Parameters	PepsiCo 2020
➤ Insurer	HDFC Ergo General Insurance Co. Ltd
➤ TPA	In house TPA
➤ Policy Start Date	01/12/2020
➤ Policy End Date	30/11/2021
➤ Coverage Type	Floater/Non Floater
➤ Dependent Coverage	Parents & Parent in laws
➤ Sum Insured	INR 300,000 / 400,000/ 500,000/ 600,000
➤ Room Rent	Single Standard AC room up to INR 10,000 per day ICU as on actuals
➤ Pre and Post Hospitalization Expenses	Yes, 30 and 60 days respectively
➤ Co-pay	Yes, 15% on all claims
➤ Ambulance	Upto Rs.1000 per claim in case of emergency

Group Medical Insurance 2020

Policy Overview

Policy Parameters	PepsiCo 2020
➤ Pre Existing Diseases Waiver	Yes / Included
➤ Waiver on 1 st Year / 30 Day Exclusion	Yes / Included
➤ Day Care Procedures	Yes / Included for certain procedures
➤ Mid-Term Enrolment of Dependents	Not Allowed
➤ Mid-Term Enrolment for New Joinees	Yes / Allowed

Rater 2020-21

	Grade Wise	AGE 46 TO 50	AGE 51 TO 55	AGE 56 TO 60	AGE 61 TO 65	AGE 66 TO 70	AGE 71 TO 75	AGE 76 TO 80	AGE 81 TO 100
FLOATER	300,000	24,510	24,510	29,100	28,100	38,800	40,000	49,000	56,000
	400,000	25,802	25,802	30,705	30,705	42,987	43,162	52,636	60,532
	500,000	36,860	36,860	45,515	45,515	64,732	64,934	79,904	93,559
	600,000	47,181	47,181	55,630	55,630	79,702	80,106	99,122	116,316

	Grade Wise	AGE 46 TO 50	AGE 51 TO 55	AGE 56 TO 60	AGE 61 TO 65	AGE 66 TO 70	AGE 71 TO 75	AGE 76 TO 80	AGE 81 TO 100
NON-FLOATER	300,000	19,600	19,600	22,061	22,061	29,886	30,012	36,819	42,492
	400,000	20,642	20,642	23,222	23,222	32,511	32,644	39,809	45,781
	500,000	25,802	25,802	32,511	32,511	46,237	46,382	57,074	66,828
	600,000	33,174	33,174	39,736	39,736	56,930	57,219	70,801	83,083

Note:

- ☐ Premium will be deducted in 3 equal installments
- ☐ Premiums mentioned are without GST.
- ☐ GST will not be applicable since organization falls under SEZ zone
- ☐ BenefitMe portal will reflect GST as well separately, which will not be charged
- ☐ Premiums mentioned have been reduced by 3% as compared to last year

Guidelines for Enrolment



One Time Enrollment: Insurance must not be opted only when there is an anticipated medical need – this can even put at risk sustainability of the policy



Continuous Coverage: Employees who have opted for insurance one year, must continue to enroll the parents



If both parents/ In Laws are alive, both must be necessarily enrolled – **choosing only 1 parent is not allowed**



Sum Insured slab **cannot be lower or higher than 1 level** from the existing slab (e.g. if current slab is 4 lakhs, employee can go to 5 lakhs but not to 6 lakhs)



2 year lock-in period will be there for all employees

Please note that if you have already enrolled for parents medical insurance in 2019, **YOU MUST STILL VALIDATE THE DETAILS IN 'BENEFITME' PORTAL**. In case employee does not visit the portal, previous year enrollment will automatically get carried forward

Tax benefit

- Tax deduction will be available to employee (on amount actually paid by employee) directly through payroll under section 80D for dependent parents as per below table

Parents-Less than 60 yrs	Parents above 60 years
Upto INR 25,000	Upto INR 50,000

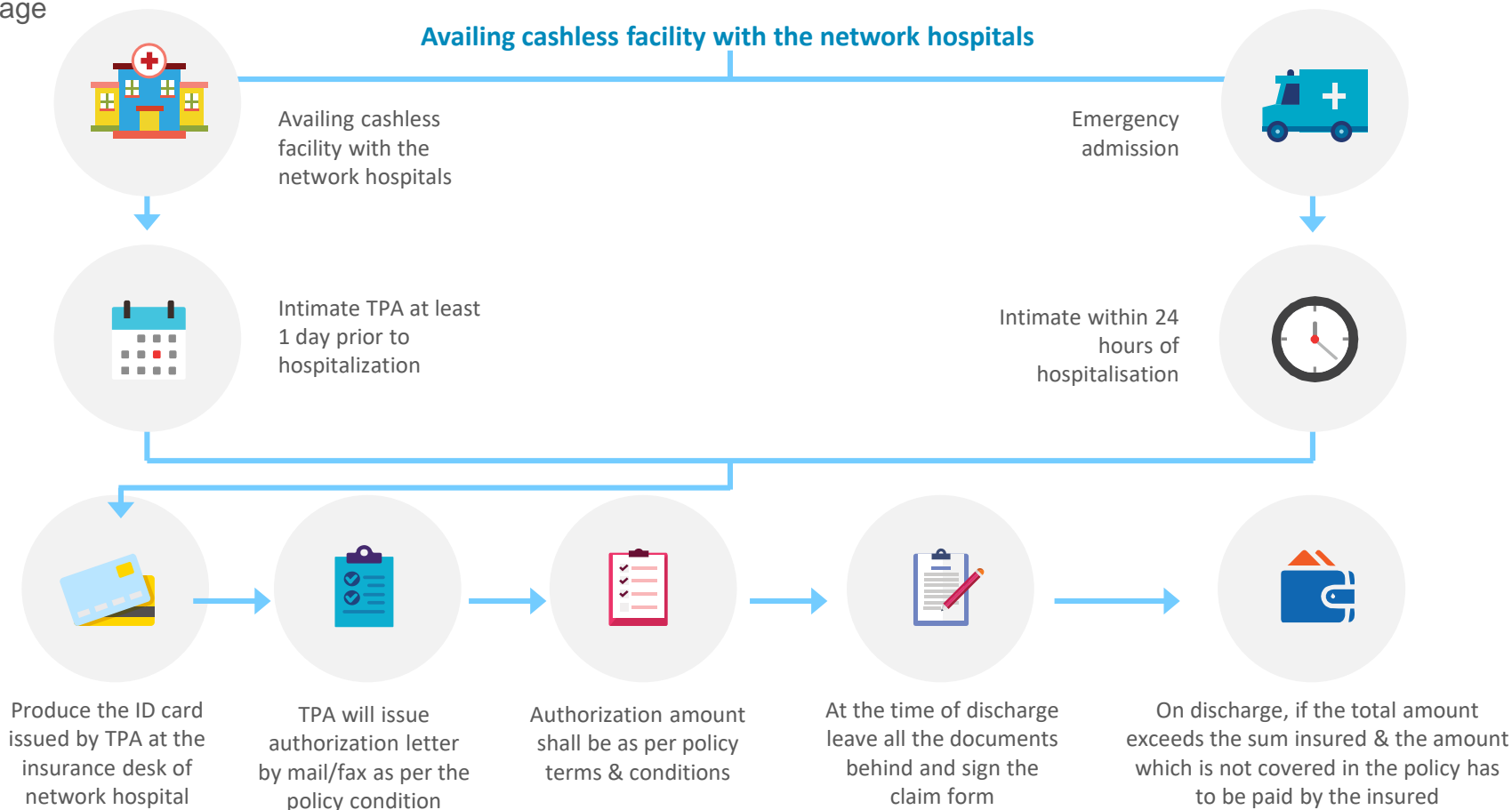
- Tax benefit is not applicable for parent-in laws as per Indian income tax rules
- There is no need to declare the premium paid under investment declaration, it will be taken care automatically by the payroll team



CLAIM PROCESS & CONTACT DETAILS

Medical Benefit – Cashless Process

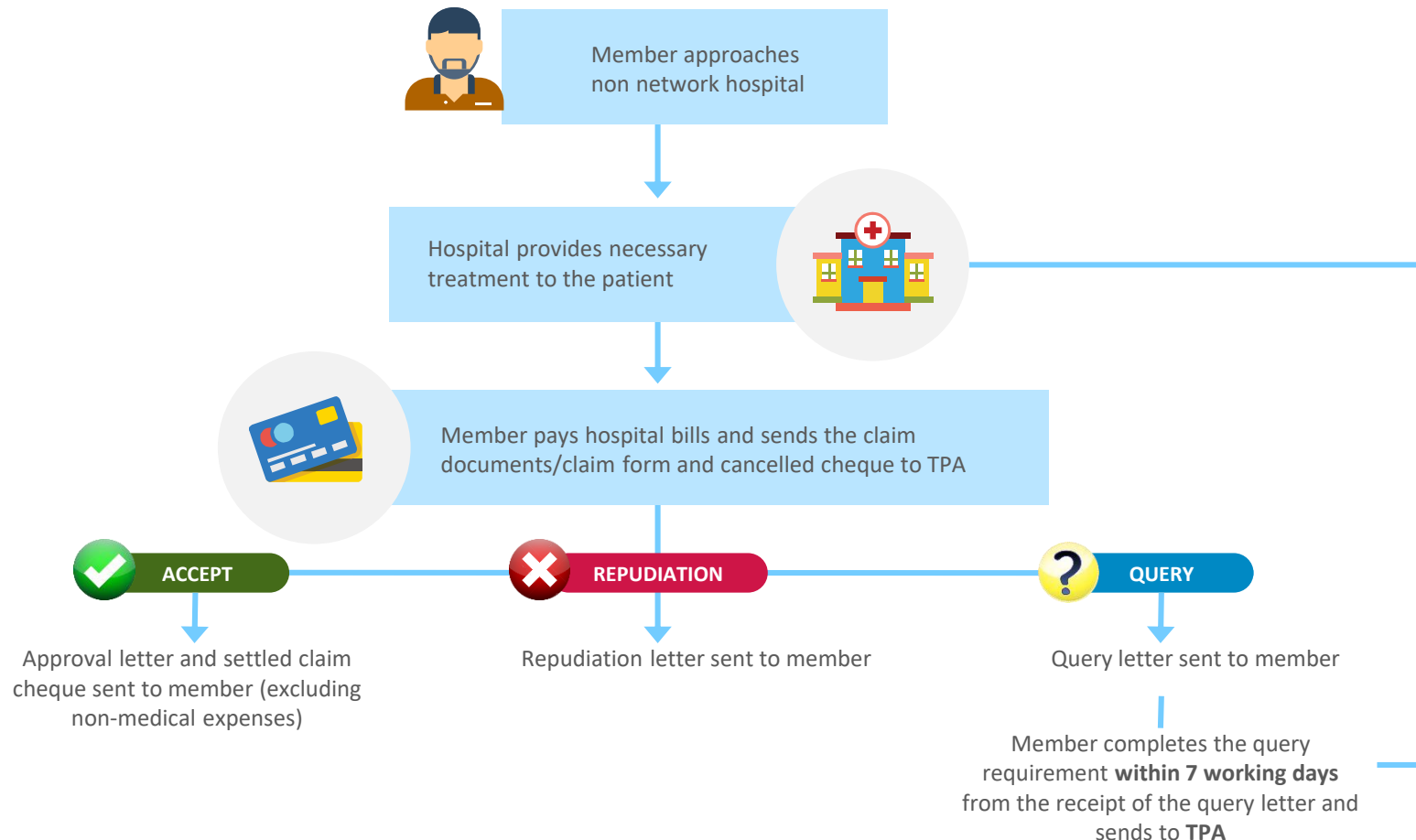
Cashless means the TPA may authorize direct settlement of the claim amount according to the charges between a Network Hospital and the TPA. In such case the TPA will directly settle all eligible amounts with the Network Hospital as per the eligible limit and coverage



Visit www.hdfcergo.com for checking the latest list of network hospitals

Medical Benefit – Reimbursement Process

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



DOCUMENTS REQUIRED

Documents for Hospitalization Claim

Completed Claim form with Signature-Mandatory

Hospital bills in original (with bill no; signed and stamped by the hospital) with all charges itemized and the original receipts-Mandatory

Discharge Report (original)-Mandatory

Original Payment Receipt-Mandatory

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, Stickers in case of Implants E.g.: Lens (Cataract), Stents (Heart Surgery) etc.

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.

Cancelled cheque / Masked bank statement (as applicable)

Group Medical Insurance 2020

Contact Details



General claim related queries

Toll Free Number - **022-62346234** | **0120-62346234**

Email ID - Health.claims@hdfcergo.com

SPOC	Name	Contact Number	Email ID
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THANK YOU



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