

Insurance Coverage Document

Master Policy Number: **FGH00472022 / 330-01815684-14005**

YOUR INDIVIDUAL CERTIFICATE NUMBER IS: **1674903**
 COMPANY NAME: **Tata Consultancy Services**
 UNIT: **Main office - HQ**
 COMPANY PIN: **1001**
 PLAN TYPE: **Short Term Plan**
 TPA REFERENCE: **Region 26**
 COUNTRY: **Canada**
 AREA OF COVERAGE: **Worldwide**

START DATE OF COVERAGE: **01 Oct 2022**
 END DATE OF COVERAGE: **05 Oct 2022**
 DURATION OF COVERAGE: **5 Days**
 DATED: **23 Sep 2022**

INSURED(S) DETAILS:

	NAME	ADD-ON PLANS	EMPLOYEE ID	MAYFAIR ID
(1)	Binay Kumar	PA & Travel Plan	365295	1001169391
(2)	Anupama Gautam	PA & Travel Plan	365295	1001358694

TCS - SHORT TERM MMT PLAN COVERAGE

The below medical benefits are insured through Foyer Global Health (Policy Number: FGH00472022)

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) 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.
- (2) Prescription drugs/ medicines: All Prescription Drugs are covered, excludes OTC (Over the Counter – available without a physician's prescription.). Reimbursement only.
- (3) Pre-existing and Chronic Illness: Max cover limit: **USD 125** per trip.
- (4) 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 your plan.

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

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 www.mayfairwecare.com and entering your insured's login.

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