Disclaimer	
Mandatory Details at Placement	RFQ to be stamped and signed by client, if there is a major variation in data then we reserve rights to withdraw
Of The Policy	and revise the existing quote.
	* PAN number of organization. * Registration number of organization. * Complete and correct Member data (with
	employee ID numbers as per duty attendance muster). This quote is valid subject to all salaried employees covered and
	there is employee-employer relationship exist. We would be unable to accept the policy in case of Non-employee-
	employer groups.
Continuity Guideline / Portability	Group to retail portability benefit can be availed at the time of retirement or resignation from the services (Provided
	these events are falling within the policy period) Portability option is available under the existing retail health products,
	Std coverage's, terms, conditions, & guidelines of retail product would apply.
Claim Intimation and Submission	All reimbursement claims have to be intimated to Bajaj Allianz within 7 days of discharge and have to be submitted for
of Documents	reimbursement within 30 days of date of discharge of the patient.
Guideline for Addition	Midterm additions allowed only for natural additions subject to intimation received within 45 days. Any additions for new
Endorsements	employee, spouse / children would be allowed within 45 days of date of joining marriage / birth respectively. Backdation
	of 45 days from date of intimation shall not be allowed. Any endorsements will be from the date of addition and not from
	the inception of the policy.
Guideline for Deletion	In case of refund endorsements on account of deletion, pro-rata refund for entire family should be done subject to nil
Endorsements	claims, whereas refund should be nil if the premium is charged on per family basis. Deletion to be intimated immediately
	on finalization of last working day of employee. In case employee avails the claim after his LWD for which intimation is
	received after DOA, insurer would recover paid amount from available float balance. Pro-rata refund will be calculated as
	from DOL if intimation is within 7days else intimation date will be consider for calculation subject to nil claim.
Other Conditions	50% Co-Pay for cyber-knife treatment, Gamma Knife treatment and Stem Cell Transplantation, Robotic Surgery, Femto laser treatment for eye. It will be applicable for each eye each event. Any Doctors/ Surgeons fees charged/paid over and above the Hospital Standard Tariff/Package stand excluded from the scope of the policy. In case of Chamber cases or outside visiting consultant has conducted the surgery or is being consulted, Insurance company would be liable to pay up to the agreed tariff/package rates with the hospital. The over & above limit will have to be borne by the customer Cochlear Implant treatment shall be restricted to 50% of the SI. Weight management services and treatment related to weight program's including treatment of obesity will not be payable. Beneficiary name for issue of claim cheques will be assumed as name of the corporate unless otherwise specified. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining, marriage / birth respectively. Additional premium for each additional member. Per person premium would be provided by HO once the quote is finalized. No Individual(Employee / Dependent) can be covered more than once in a policy. The list of members submitted at the inception of the policy will be considered as final. As employer/group manager, by obtaining our Group Medical Policy [subject to standard terms and conditions of Group Policy to be issued by us] to cover your employees, you would, inter alia, will get additional advantage of online web integration [subject to accepting terms and conditions, disclaimers,] with our website thereby you can online access for the purpose of enabling you to service, provide claim help and support etc., to your employees covered under GMC. Claims servicing and processing will be done by In-house Health Administration Team, Bajaj Allianz General Insurance Company. Rest all as per attached Standard Group Health policy wording.
Undertaking	This is to hereby declare that the particulars of the prospect/risk mentioned in this quotation are as provided to Bajaj Allianz General Insurance Company Limited (Insurer) for the purpose of the requested risk coverage. Bajaj Allianz General Ins co Itd further confirms that the derivation of the premium in the Quotation is in accordance with the risk coverage required by the proposer/broker and as per information given in the attached quotation. In the event of any change in information pertaining to any aspect of the quotation at a later date, Bajaj Allianz General Ins co Itd reserves the right to revise the premium and recover the same from customer or invoke cancellation of the policy, as may be deemed fit, with short term premium recovered.

Per Person Premium Chart

nart								
0-25	26-35	36-45	46-55	56-65	66-70	71-75	76-80	Above 80
3152	3499	3884	4311	4785	5407	6110	6904	7802
	0-25	0-25 26-35	0-25 26-35 36-45	0-25 26-35 36-45 46-55	0-25 26-35 36-45 46-55 56-65	0-25 26-35 36-45 46-55 56-65 66-70	0-25 26-35 36-45 46-55 56-65 66-70 71-75	0-25 26-35 36-45 46-55 56-65 66-70 71-75 76-80

Member Demography

SI/Age	0-25	26-35	36-45	46-55	56-65	66-70	71-75	76-80	Above 80
50000									
100000									
150000									
200000									
250000									
300000	14	6							
350000									
400000									

450000					
500000					

Bajaj Allianz General Insurance Company Ltd.GE Plaza, Airport Road, Yerawada, Pune 411 006

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Auth. Signatory

