MARSH





Associate Benefits Manual 2016 – 17

Client

Cybage Software Private Limited

Program Details



Group Medical For Employees

Provides insurance coverage to associates for expenses related to hospitalization due to illness, disease or injury.

Group Medical For Parents

Provides insurance coverage to associates for expenses related to hospitalization due to illness, disease or injury.

Group Personal Accident

Provides insurance coverage against the risk of death / injury during the policy period sustained due to an accident caused by violent, visible and external means.







Medical Benefits

Medical Benefit – Coverage Details



Policy Parameter			
> Insurer	United India Insurance Co. Ltd.		
➤ TPA	MD India Healthcare Services (TPA) Pvt. Ltd.		
➤ Policy Start Date	31-Oct-2016		
➤ Policy End Date	30-Oct-2017		
> Coverage Type	Family Floater		
➤ Dependent Coverage	Associate + Spouse + Children (max 2 children)		
➤ Basic Sum Insured	INR 200,000/-		

Benefits / Extensions	Coverage		
Standard Hospitalization (24 Hrs)	• Yes		
> TPA services	• Yes		
➤ Pre existing diseases	• Yes		
➤ Waiver on Waiting period	• Yes		
➤ Maternity benefits	• Yes		
➤ Baby cover from Birth	• Yes		
Emergency AmbulanceServices	• Yes up to INR 3,000/-		

Benefits / Extensions	Coverage		
➤ Day Care Treatment	• Yes		
Domiciliary Hospitalization	• No		
➤ Dental	Restricted to accidental cases		
➤ Vision	Restricted		
➤ Pre-Post Hospitalization Exp.	• Yes		
Room Rent Restriction (including nursing and RMO charges)	INR 2,250 Per Day for Normal Room		



Medical Benefit – Dependent Coverage



Maximum no of Members insured in a family	1+3	
Associate	Yes	
Spouse	Yes	
Children	Yes (for first 2 living Children) upto the age of 25 years	
Mid Term enrollment of existing Dependents	Disallowed *	
Mid Term enrollment of existing Dependents Mid Term enrollment of New Joiners (New Associates + their Dependents)	Disallowed * Allowed	

- No Individual should be covered as dependent of more than one associate.
- •Mid term enrolment of existing dependents is not allowed except in case of marriage or child birth.
- * The information of the same has to be given within 30 days from the occurrence of the event. The associate would have to drop a mail at amruta.nagpure@marsh.com & cybage@mdindia.com with cc to insurance@cybage.com.

Please do not wait for Marriage Certificate/ Birth certificate. Insurance company does not require it.



Medical Benefit – Policy Period



Existing Associates + Dependents			
Commencement Date	31-Oct-2016		
Termination Date	30-Oct-2017 or date of leaving the organization; whichever comes earlier		
New Joiners + Dependents			
Commencement Date	Date of Joining		
Termination Date	30-Oct-2017 or date of leaving the organization; whichever comes earlier		
New Dependents (due to Marriage / Birth)			
Commencement Date	Date of such event		
Termination Date	30-Oct-2017 or date of leaving the organization; whichever comes earlier		

Medical Benefit – Limits / Restrictions



Sum Insured	Limits		
Basic Sum Insured	INR 200,000/- per Family		
Restrictions on Room Rent	Yes Applicable		
Dependents	Normal Room up to INR 2,250/- per day		
Со-Рау	Yes Applicable		
Claim (Employee/ Spouse / Children)	10% Co-payment on all claims upto basic SI except maternity. This is applicable on the admissible claim amount.		

Medical Benefit – Standard Coverage



Covers expenses related to

- Room and boarding (including nursing and Resident Medical Officer charges)
- Doctors fees
- Intensive Care Unit
- Surgical fees, operating theatre, anesthesia and oxygen and their administration
- Physical therapy
- Drugs and medicines consumed on the premises
- Hospital miscellaneous services (such as laboratory, x-ray, diagnostic tests)
- Dressing, ordinary splints and plaster casts
- Costs of prosthetic devices if implanted during a surgical procedure
- Radiotherapy and chemotherapy
- A) The expenses are payable provided they are incurred in India and within the policy period.
- B) Expenses on Hospitalization for minimum period of 24 hours are admissible. However this time limit will not apply for specific treatments under Day Care i.e. Dialysis, Chemotherapy, Radiotherapy, Cataract, Lithotripsy (kidney stone removal), Tonsillectomy, D & C taken in the Hospital and the insured is discharged on the same day of the treatment will be considered to be taken under Hospitalization Benefit.
- C) Treatment given by Certified MBBS / MD Doctors would be admissible as per the norms of the policy.
- D) The Expenses will be paid depending on the level of room rent eligibility that the associate is entitled to.



Pre & Post Hospitalization Expenses



Pre-hospitalisation 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-hospitalisation 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



Maternity Benefits



Benefit Details				
Benefit Amount	Normal delivery & C-Section - INR 40,000/-			
Restriction on no of children	Maximum of 2 dependent children (upto 25 years of age)			
9 Months waiting period	Waived off			
Pre-Post Natal	Not Covered			

- Maternity can be claimed under both Cashless and Reimbursement now.
- No Co-Pay is applicable for Maternity claims.
- 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.
- Post 12 weeks of pregnancy, the expenses incurred towards medical termination of pregnancy are covered in case it is medically required and advised by a doctor
- Baby covered from day 1 subject to specific declaration given within 30 days of birth to Amruta.Nagpure@Marsh.com & cybage@mdindia.com with CC to insurance@cybage.com

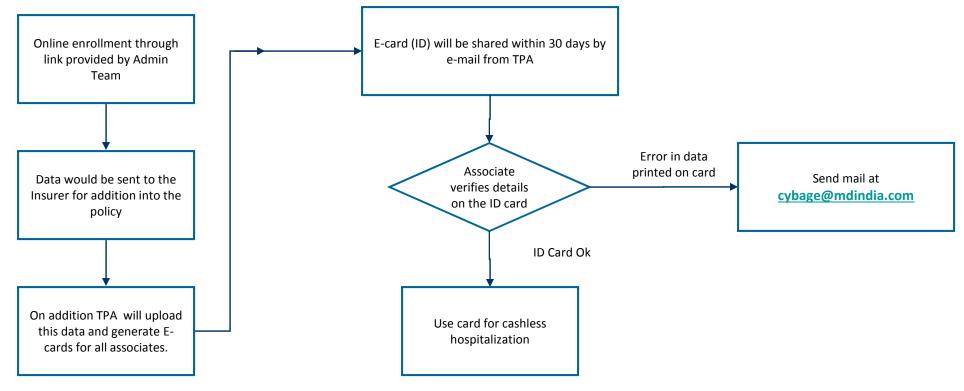


Medical Benefit - Enrollment



- Existing associates are covered under the policy from 31-Oct-2015, please make sure that you enroll your dependents at the inception. If you fail to enroll, the next enrolment can be done only at next year.
- All New joinees must enroll their dependents at the time of joining the company.
- In case of change of status due to marriage or birth of child, enrolment must be done within 30 days of such event.

Sample Workflow





Medical Benefit – 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 may not have to pay any deposits at the commencement of the treatment or bills at the end of treatment to the extent as these services are covered under the Policy.

List of hospitals in the MDIndia network eligible for cashless process

http://www.mdindiaonline.com/ProviderList.aspx

For More details contact Relationship Manager -

Name Mr. Preetam Thapa

Email ID <u>Cybage@mdindia.com</u>

Contact no. +91 9373942637

Planned Hospitalization

Emergency Hospitalization

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.



Cashless – Claim Process



Step 1 Pre-Authorization

All non-emergency hospitalization instances must be pre-authorized with the TPA, as per the procedure detailed below. This is done to ensure that the best healthcare possible, is obtained, and the patient/associate is not inconvenienced when taking admission into a Network Hospital.

Member intimates TPA of the planned Claim Registered TPA authorizes cashless as per Yes hospitalization in a specified pre-SLA for planned hospitalization by the TPA on authorization format at-least 48 hours to the hospital same day in advance No **Pre – Authorization Form** Follow non cashless process Pre-Authorization Completed GMC - Pre Auth Form

Step 2 Admission, Treatment & discharge

After your hospitalization has been pre-authorized, you need to secure admission to a hospital. A letter of credit will be issued by TPA to the hospital. Kindly present your ID card at the Hospital admission desk. The associate is not required to pay the hospitalization bill in case of a network hospital. The bill will be sent directly to, and settled by TPA

Member produces ID card at the network hospital and gets admitted Member gets treated and discharged after paying all non entitled benefits like refreshments, etc.

Hospital sends complete set of claims documents for processing to TPA

Claims Processing & Settlement by TPA & Insurer



Non-Cashless



Admission procedure

- In case you choose a non-network hospital you will have to liaise directly with the hospital for admission & send intimation to TPA within 48 Hrs.
- Write to cybage@mdindia.com
- •Or Call TPA 1800 233 1166 (Toll Free)
- •Intimation can be made by either by employee of by family/friends/peers/manager
- 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.

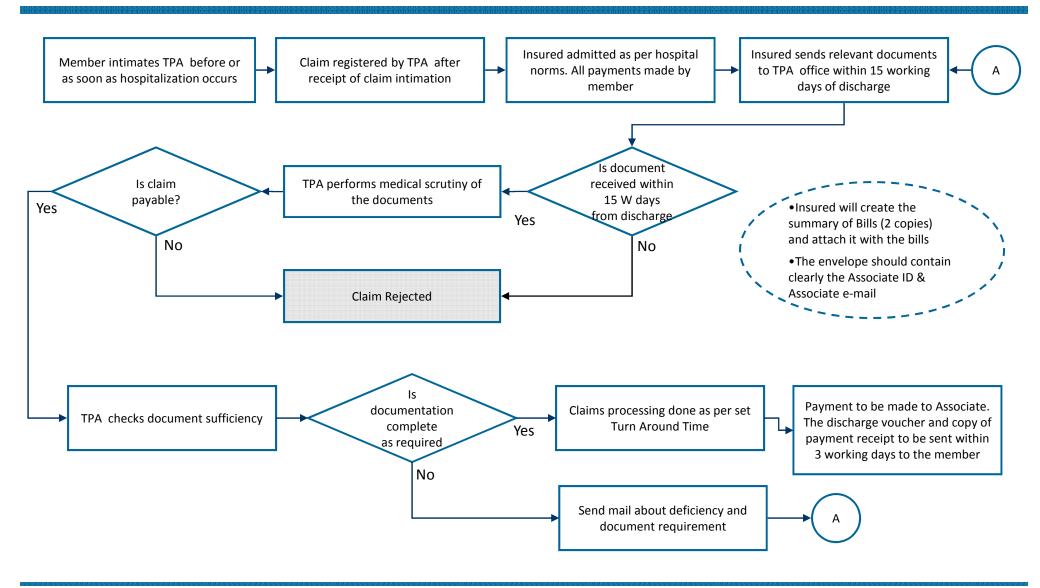
Submission of hospitalization claim

- You must submit the final claim with all relevant documents within **15 working days** from the date of discharge from the hospital.
- Please note that non-compliance of timelines mentioned above, will lead to rejection of claim.



Non-Cashless Claims Process





Claims Document List



Completed Claim form with Signature, Cancelled Cheque with Signature.

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

Discharge Report (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, 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.









^{*} Bank Account once updated cannot be changed.



^{*} Please retain photocopies of all documents submitted

^{*} Please note that the TAT for settlement of claim shall be considered from the date of submission of cancelled cheque and all documents.

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/ Genetic Disorders e.g. Zonular Cataract, Cystic Fibrosis, Sickle Cell Anaemia etc.
- HIV and AIDS related treatments
- 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
- All lines except Allopathic treatments
- •Any non-medical expenses like registration fees, admission fees, charges for medical records, cafeteria charges, telephone charges, etc
- Cost of spectacles, contact lenses, Multifocal and Toric lens used for Cataract surgeries, hearing aids
- Any kind of advanced treatment such as Robotic Surgery, FEMTO Laser,

PS: The terms mentioned in the presentation is general extract of wordings. In case of any discrepancy, the policy terms would prevail.



Medical Benefit – General Exclusions...contd



- Any cosmetic or plastic surgery except for correction of injury e.g. Lasik Surgery
- Hospitalization for diagnostic tests and observation purpose only
- Vitamins and tonics unless used for treatment of injury or disease
- Infertility treatment, Male Sterility, Family planning, etc related procedures.
- Pre-post hospitalization expenses for maternity claims.
- Voluntary termination of pregnancy during first 12 weeks (MTP)
- Treatment taken from BAMS, BHMS Doctors is excluded.
- Any expenses incurred with regards to room rent or any other associated charges in excess of entitled room rent.
- Dental treatment or surgery of any kind unless necessitated by accident and requiring hospitalization.
- Naturopathy Treatment, acupressure, acupuncture, magnetic therapies, experimental and unproven treatments/ therapies. Treatment including drug Experimental therapy, which is not based on established medical practice in India, is treatment experimental or unproven.

PS: The terms mentioned in the presentation is general extract of wordings. In case of any discrepancy, the policy terms would prevail.



GMC – Location wise Helpdesk Details



Location		Day	Location	Contact Person	Contact Details
Pune Cybage Tower	Every Monday	05:00 PM To 06:00 PM	Near Reception, Ground Floor Room No. 7190	Near Recention	cybage@mdindia.com
	Every Wednesday	05:00 PM To 06:00 PM		Mr. Vivek	
	Every Friday	05:00 PM To 06:00 PM			
Pune West Avenue	Tuesday	05:00 PM To 06:00 PM	Reception, Ground Floor		
	Thursday	09:00 PM To 10:00 PM			

For employees based out of locations Hyderabad and Gandhinagar, you need to submit the claim documents to the respective Admin POC's.



Medical Benefit – Contact Details



Providers

TPA:

MD India Healthcare Services (TPA) Pvt. Ltd.

Website:

www.mdindiaonline.com

1st Level Contact

Mr. Preetam Thapa

Cell No. +91 9373942637

Email ID - cybage@mdindia.com

Alternate Contact

Ms. Parvati Gurung

Cell No. +91 9372496807

Email ID – <u>cybage@mdindia.com</u>

Final level of Escalation

Mr. Sachin Rawat

Cell No. +91 93728 56578

Email ID - srawat@mdindia.com

Consultant:

Marsh India

Website:

www.marsh.co.in

1st Level Contact

Ms. Amruta Nagpure

Cell No. +91 91583 78680

Email ID – amruta.nagpure@marsh.com

1st Point of Escalation

Ms. Vidula Dharap

Cell No. +91 8411076644

Email ID - vidula.dharap@marsh.com

Final level of Escalation

Mr. Yatin Karapurkar - Branch Leader

Marsh India, Pune

Cell No. +91 99232 09040

Email ID – <u>yatin.karapurkar@marsh.com</u>

