

S No Date Day Holiday/ Festival Status Remarks

1 16-Jan-23 Monday Kanumu Optional Applicable for all locations

2 07-Mar-23 Tuesday Holi Optional Applicable for Hyderabad

3 08-Mar-23 Wednesday Holi Optional Applicable for Gurugram & Bengaluru

4 22-Mar-23 Wednesday Ugadi Optional Applicable for all locations

5 23-Mar-23 Thursday Shaheed Diwas Optional Applicable for all locations

6 30-Mar-23 Thursday Sri Rama navami Optional Applicable for all locations

7 03-Apr-23 Monday Mahaveera Jayanthi Optional Applicable for Bengaluru

8 04-Apr-23 Tuesday Mahaveera Jayanthi Optional Applicable for Hyderabad & Gurugram

9 07-Apr-23 Friday Good Friday Optional Applicable for all locations

Dr.BR.Ambedkar Jayanthi Optional Applicable for all locations

Jumatul Vida Optional Applicable for all locations

Tamil New Year Day Optional Applicable for all locations

11 18-Apr-23 Tuesday Shab - e - Qader Optional Applicable for all locations

12 05-May-23 Friday Buddha Purnima Optional Applicable for all locations

13 22-May-23 Monday Maharana Pratap Jayanti Optional Applicable for all locations

14 20-Jun-23 Tuesday Ratha Yatra Optional Applicable for all locations

15 29-Jun-23 Thursday Bakrid Optional Applicable for all locations

16 17-Jul-23 Monday Bonalu Optional Applicable for all locations

17 31-Jul-23 Monday Shaheed Udham Singh Martyrdom Day Optional Applicable for all locations

18 16-Aug-23 Wednesday Parsi New Year Day Optional Applicable for all locations

19 25-Aug-23 Friday Varamahalakshmi Vrata Optional Applicable for all locations

Onam Optional Applicable for all locations

Rug-Upakarma Optional Applicable for all locations

21 30-Aug-23 Wednesday Raksha Bandhan Optional Applicable for Gurugram & Bengaluru

22 31-Aug-23 Thursday Raksha Bandhan Optional Applicable for Hyderabad

23 06-Sep-23 Wednesday Sri Krishna Janmastami Optional Applicable for Gurugram & Bengaluru

24 07-Sep-23 Thursday Sri Krishna Janmastami Optional Applicable for Hyderabad

25 18-Sep-23 Monday Vinayaka Chaturthi Optional Applicable for all locations

26 28-Sep-23 Thursday Eid Miladun Nabi Optional Applicable for all locations

27 23-Oct-23 Monday Mahanavami Optional Applicable for all locations

28 24-Oct-23 Tuesday Vijaya Dasami Optional Applicable for all locations

29 13-Nov-23 Monday Vishwakarma Day Optional Applicable for all locations

30 14-Nov-23 Tuesday Balipadyami, Deepavali Optional Applicable for Bengaluru

Kartika Purnima Optional Applicable for all locations

Guru Nanak Jayanthi Optional Applicable for all locations

32 28-Nov-23 Tuesday Huttari Festival Optional Applicable for all locations

33 30-Nov-23 Thursday Kanakadasa Jayanthi Optional Applicable for all locations

34 25-Dec-23 Monday Christmas Optional Applicable for all locations

35 26-Jan-23 Thursday Republic Day Mandatory Applicable for all locations

36 01-May-23 Monday May Day Mandatory Applicable for all locations

37 02-Jun-23 Friday Telangana Formation Day Mandatory Applicable only for Hyderabad

38 15-Aug-23 Tuesday Independence Day Mandatory Applicable for all locations

39 02-Oct-23 Monday Gandhi Jayanthi Mandatory Applicable for all locations

40 01-Nov-23 Wednesday Kannada Rajyothsava Mandatory Applicable only for Bengaluru

41 01-Nov-23 Wednesday Haryana Day Mandatory Applicable only for Gurugram

42 01-Jan-23 Sunday New Year Day Weekend Holidays on Weekend

43 14-Jan-23 Saturday Bhogi Weekend Holidays on Weekend

44 15-Jan-23 Sunday Sankranti Weekend Holidays on Weekend

Birthday of Hazrath Ali Weekend Holidays on Weekend

Guru Ravidas Jayanthi Weekend Holidays on Weekend

46 18-Feb-23 Saturday Mahasivarathri Weekend Holidays on Weekend

47 19-Feb-23 Sunday Shab - e - Meraj Weekend Holidays on Weekend

48 22-Apr-23 Saturday Ramzan Weekend Holidays on Weekend

49 23-Apr-23 Sunday Basava Jayanthi Weekend Holidays on Weekend

50 04-Jun-23 Sunday Sant Kabir Jayanthi Weekend Holidays on Weekend

51 29-Jul-23 Saturday Moharam Weekend Holidays on Weekend

52 23-Sep-23 Saturday Haryana War Heroes Martyrdom Day Weekend Holidays on Weekend

53 14-Oct-23 Saturday Bathukamma, Mahalaya Weekend Holidays on Weekend

54 15-Oct-23 Sunday Maharaja Agrasen Jayanthi Weekend Holidays on Weekend

55 22-Oct-23 Sunday Duragastami Weekend Holidays on Weekend

56 11-Nov-23 Saturday Naraka Chaturdhi Weekend Holidays on

Weekend 57 12-Nov-23 Sunday Deepavali Weekend Holidays on Weekend 58 02-Jan-23 Monday New Years Day Optional US holiday - applicable for all location 59 16-Jan-23 Monday Martin Luther King Jr Day Optional US holiday - applicable for all location 60 26-May-23 Friday 61 29-May-23 Monday 62 19-Jun-23 Monday Juneteenth Optional US holiday - applicable for all location 63 04-Jul-23 Tuesday Independence Day Optional US holiday - applicable for all location 64 04-Sep-23 Monday Labour Day Optional US holiday - applicable for all location 65 23-Nov-23 Thursday Thanksgiving Optional US holiday - applicable for all location 66 24-Nov-23 Friday Day after Thanksgiving Optional US holiday - applicable for all location 67 25-Dec-23 Monday Christmas Day Optional US holiday - applicable for all location US holiday - applicable for all location 31 27-Nov-23 Monday Mandatory & Optional Holiday Calendar - 2023 20 29-Aug-23 Tuesday 14-Apr-23 Friday 10 45 05-Feb-23 Sunday Memorial Day Optional

Title: Transport Policy No.: LPVer1.3 Applicability: All Permanent Associates of Legato Healthcare Technologies LLP Original Effective Date: 01-May-2018 Approver(s): Anilesh Seth, Country Head and Designated Partner, Legato Last Review/Approval Date: 20 – November-2018 Process Owner: Manoj Ladi, Director Finance , Legato Current Version Effective Date: 01-February-2020 Purpose To provide transport facility for commuting to work and back home from designated pick-up and drop points Applicability This policy is applicable to all the associates working in Legato Health Technologies LLP. General Guidelines Legato Health Technologies LLP (Legato) shall provide transport facility to its associates for commuting to work and back home from designated pick-up and drop points. This service will be available Monday to Friday and other approved shifts during weekend, if any. Company will provide transport on Legato's declared holidays or any other holidays based on Business requirements. The associate understands that the transportation provided is a group transportation and no associate will be given exclusive vehicle for this purpose. Legato reserves the right to change, add or remove routes as per its discretion based on sustainability. The transportation provided to the associate is at the sole discretion of Legato and as per terms determined by Legato. In case of any exigencies, where the company vehicle is unable to pick-up, associate is required to reach office on their own. Associate to share the filled transport requisition from (Form A) to the transport team within 2 days of joining for making necessary arrangements. Any change in location during the course of employment, to be submitted to the transport team 48 hrs in advance using the transportation form (Form A). Transport services at Legato are meant only for transporting its associates & authorized personnel. The associate shall not make any personal use under the transportation policy. The routes shall be arranged in such a manner that no women associate will be the first pick-up and last drop in case the shift falls between 08:00 PM to 06:00 AM. Escorts will be provided in case a women associate is travelling between 08:00PM to 06:00AM & is the first pick-up or the last drop. Cost for the transport facilities provided during 12 :00 pm to 6:59 AM) will be borne by the company. In case any associate opts for the transport facility during General Shift (shifts starts between 7:00 AM to 11:59AM) a subsidized cost will be borne by the associates. Any queries or issues related to transport to be raised to as per below mentioned matrix changes made as follows Transport Escalation Matrix - Bangalore Location Level - 1 Level – 2 Level – 3 Transport Helpdesk Manager - Transport Sr. Manager – Facilities Bangalore MTP and RGA Srinivas JP Prabhu Kumar TransportBLR@anthem.com srinivas.jp@legatohealth.com prabhu.kumar@legatohealth.com 96060 07111 +91 91086 63535 Transport Escalation Matrix - Hyderabad Location Level - 1 Level – 2 Level – 3 Transport Helpdesk Asst. Manager - Transport Sr. Manager – Facilities Hyderabad - GAR Chakradhar Velam Prabhu Kumar dl@transportHYD@legatohealth.com chakradhar.velam@anthem.com prabhu.kumar@legatohealth.com

91008 34447 +91008 38885 Self-Schedule in Transport Technology Application Transport users shall schedule the transport request in Transport Technology Application App as per the following time lines. Team Leads in BO teams should schedule the transport details for their team members in Transport Technology Application app as per timelines mentioned below. For all shifts starting from Monday 5.30 PM to Friday 9.30 PM Request Login: 12 hours prior to login time Request Logout: 3 hours prior to logout time For shift starting Saturday 6.00 AM to Monday 5.00 PM All the login and logout to be scheduled before 10 AM on Friday, if Friday is a Holiday the same shall be scheduled on the previous working day. Address Change / Contact Change: The drop point/location (Address) will be as per the associate's HR records In case of any change in address, associate is required to submit the details on HR tool along with valid proof, followed by an email to the transport team to update their records. Depending on the routing efficiency, the transportation services may be facilitated from the new address after 48hrs from the time of the request. Official Travel Local transportation needed by the associates and guest for official travel purpose shall be arranged on case to case basis. Requests for such purpose shall be made by the associate/ manager at least 24 hours before the date and time of travel. Any Adhoc requests should be intimated to the Transportation Team in advance with the proper approvals from the Reporting Manager / Sr. Manager and cost will be attributed to the respective cost location for budgetary purposes. Company transportation will be provided during Company holidays based on business requirement. Associates or the team leads as the case may be shall schedule the same in Transport Technology Application before 10.00AM on the previous working day Associates who intend to proceed on a vacation/travel abroad/ project etc., Shall de-schedule the same in Transport Technology Application app. If the associates do not wish to avail the transport for any reason on permanent basis shall inform the same to Transport in writing with copy to their reporting manager and HRBP. Transport team will not entertain any request which will come through e-mails/e-request or verbally. All the changes, shall be made in the Transport Technology Application app only as per the timelines. Transport Route Planning - Parameters for determining the Routes: Minimum Travel time & optimal utilization of seats is the most important factor for the route planning. Transport team will route associates ensuring that no route has a deviation of more than 5 KMS from the first Pick up point to office or the Last drop point from office Estimated travel time for travel to (or) from office to the designated points is as follows Distance in Kilo Meter (KM) Estimated Travel Time (in Minutes) Up to 20 KM 120 Min 20 to 30 KM 150 Min 30 to 40 KM 180 Min Transport will be given for the location falling within the radius 40 KM within the city limits from the Office location. Check for the updated list of locations covered under transportation from the respective Transportation Supervisor. The types of vehicles to be used on different routes will be determined by the Transport department on the basis of cost, convenience and optimum utilization. Hence the decision of which vehicle needs to be deployed shall be that of the Transport Supervisor and the associate agrees that they shall not determine or interfere in such decision making. Periodic changes in the routes will be made to increase the routing efficiency considering the factors not restricted to new joiners/ Changes in the shift timings/ associate absence/ vacation/ escort requirement/vehicle capacity re-sizing etc. Transport for Specially abled / expecting female & Medical reason associates Door to door pickup & drop will be provided to associates with above criteria, provided the same has been approved with timeline / duration of need by respective Manager & HR Code of Conduct for Associates Smoking and consumption of alcohol is strictly prohibited within the company provided vehicles. If any associate is found ignoring/violating this instruction, the same will be reported immediately to the concerned manager and HR department for further action. The transportation routes will not be changed subject to personal requirements of any individual. Barring

emergencies, no associate will force the driver to stop the vehicle enroute anywhere other than the designated points. Under no circumstances should an associate distract the driver or encourage driving over and above the recommended speed limits. No associate is allowed to drive the transport vehicle under any circumstances. The associate agrees that he/she shall at all times wear the safety belt during the travel. The associate agrees that he/she shall not talk rudely or confront the drivers and report to the Transport helpdesk in case of any problems/issues. The associate agrees to having received all important telephone numbers for emergency situations (provided to associate as a part of transportation induction) and shall reach out to the designated contacts. The associate shall immediately report all untoward incidents to transport team upon occurrence. Any issues/concerns regarding transport shall be brought to the notice of the transport helpdesk/ transport supervisor immediately. The associate agrees to wear his/her Company ID cards while boarding the transport vehicle. The associate agrees not to change the designated routes on his/ her own account, even if there is space in the Vehicle. Associates will not be dropped unless their name appears in the drop sheet; this is required for adhering to the policy and tracking billing. The associates should punch the ID in the driver Transport Technology Application device as soon as they get in to the cab. They are also required to Punch out after reaching the destination. The associates are not required to punch in the ID on reaching office during log in as the app will automatically close the trip. Female associates are required to confirm their safe arrival at home via IVR call which they receive after reaching home. All vehicles need to reach office 15 minutes prior to scheduled login time (i.e. 8.00 AM login, cab arrival time will be 7.45 AM). At the time of drop off, the Vehicles shall commence 15 minutes after the designated shift closure time (i.e. 9.00 PM logout, cab departure time would be 9.15 PM). The associates agree that they shall not interfere in timings of the vehicle. The associate agrees to check the credential of the vehicle in the Transport Technology Application app and only then board vehicle upon confirming identity of authorized driver. Female associates in the night shift need not board the Transportation Vehicle in case of first pick-up or last drop and there is no authorized male escort in the vehicle. Such female associates need to immediately inform the Transportation Supervisor. Further, Female associates need not board Vehicles if there is a change in the driver and shall obtain confirmation from the Transport Supervisor prior to boarding the vehicle. Minimum occupancy of 75% of Vehicle capacity will be maintained during drops. In the event of planned associates not turning up, the Transport supervisor will assist and take a decision to club the routes if required. This change may result in the associate travelling additional hours which the associate understands and agrees to co-operate. Adhoc transportation request during office hours shall be made only after following the approval mechanism and giving at least 4hrs prior notice to the Transportation department. In case of ad-hoc or last minute request received from a female associate, male associate are requested to drop the female employee first even if the route deviation is more than 5 KM radius. In case associates decide not to avail transportation on any particular day, (log in or log out or for the entire day) associates are advised to cancel the schedule in the Transport Technology Application app to avoid being marked as No Show. Associates will be charged of INR 400/- per day after 4 no-shows in a month, in case cancellation not done on time on transport application (Transport Technology Application) by the associate. At no point should associates share their contact details with the driver, nor obtain the driver's contact details. Security guards, drivers and other contractual personnel will be hired from licensed agencies, with background verifications done. Required checks and controls will be put in place in the cab to monitor unwarranted activities of the drivers. Drivers will be monitored for drunken driving before they leave the office premises. Any female associate leaving office premises at / post 8:00 PM is required to avail company transport. Failure to take company transport between 8:00 PM to 6:00 AM is a non-

compliance and will be treated as misconduct and will be lead to disciplinary action. Disclaimer: \*Any exception not covered under this policy should go through the HR Head/Director Administration for further approval. FAQ & Guidelines

1. How is the Transport Operations designed?
  - a) App Enabled – with Associate and Cab driver
  - b) Live Tracking – to know the position of the allotted cab
  - c) Login/Logout monitoring through App
  - d) SOS-Emergency Alert
  - e) Fellow passenger boarded notification
  - f) Proximity notification
  - g) No show – App notification
  - h) Trip feedback notification
  - i) Associate & Driver call masking / Call recording
  - k) Safe reach confirmation through App & IVR
2. Will there be changes in type of vehicles based on the number of planned occupants? Yes, based on the number of associates in that particular route, the optimal type of vehicle will be deployed
3. What is the time limit for cancellation in order to avoid 'No Show'?
  - a) 4 hrs. prior to the Login and 2 hrs. prior to the Logout
  - b) If cancellation is done beyond the above time limit, will be considered as 'No show'
4. How far is the pickup point from my home? Since it is point to point pick & drop from 06:00 AM to 08:00 PM, depending on the approach of the pickup location you may select the designated nodal points in the Transport Technology Application app convenient to you
5. Will there be standard travel time or can it get changed whenever new associates get added to the existing route? It depends on the routing of the newly added associates. However, a deviation of 30 mins travel distance are allowed to avoid additional cost towards inducting additional cab due to the single occupant in that route or around the route (about 5 kms radius). We continuously monitor routes, occupancy, travel times and cost to optimize across all the routes
6. Will the associates be provided office transport if the associates request for cab beyond scheduled shift hours? Any such request will be considered as Adhoc and actioned accordingly provided with respective Managers approval & based on availability of Vehicles towards designated location.
7. Is the transport provided for female associates to login / logout office during Odd hours (20:00 hrs to 06:00 hrs) due to business critical needs? Yes, Transport will be provided to all associates as per scheduled timings, however in case of female associate is a 1st pickup / last drop during odd hours an Escort Guard will be deployed in the vehicle.
8. Are associates allowed to bring their kids, friends, pets & family members in cab? Female Employees are allowed to accompany their Kids (below 5 years age) who are in Daycare center within office premises. Friends, pets & Family members are not allowed to use the facility
9. What is the cab waiting time at associate's pickup point? User needs to be present at the Pick-up Point 5 minutes before the scheduled pickup time & no cab will wait for associate for more than 2 minutes after the pickup time communicated to associates, post which vehicle will depart from respective location marking associate as No-Show.
10. What is the buffer time for boarding and departure?
  - For login - Vehicles will report 15 minutes prior to login time (9:00 PM Login, vehicles should report to premises by 08:45 PM)
  - For logout - Vehicles will start departure after 15 minutes buffer from scheduled timing (17:00 hrs logout, 1st vehicle will depart from premises by 17:15 hrs) irrespective if the scheduled associates turn up or not
11. Whom should I contact if I have a query/ feedback?
  - a) Transport Admin team / Transport helpdesk number: Bangalore dl-legatotransport@legatohealth.com - 080 61520141
  - b) Transport Admin Team / Transport helpdesk Number: Hyderabad dl-transportHYD@legatohealth.com 040 - 68170 141
12. How will associates get notified if their respective vehicle gets changed or pickup/drop time or points changed?
  - a) Relevant information will be shared via SMS & through Transport Technology Application App prior to the pickup /drop time
  - b) Associates shall check for the details in the Transport Technology Application app in case SMS is not received due to any network issues.
13. Will Transport team allocate some other cab if the associates miss their first cab? No, - Office Transport will leave the point after waiting for 2 minutes and the associates not boarding in time will need to make their own arrangements to reach office and such expenses will not be reimbursed.
14. What is to be

done if the vehicle does not turn up on time for the pickup/ drop? a) Associates to call the Transport Helpdesk for immediate assistance. b) At times, due to transport service failure or unexpected challenges, transport team would advise associates to make their own transport arrangements. In such cases associates expenditure would be reimbursed as per the respective location limits against the submitted bills by respective service provider. Associates have to claim the expenses through Chrome River in case the cab is not provided by the transport department

15. What if associates doesn't get notified about their vehicle details in the Transportation Automation Tool due to some network issue? Associates to call the Transport Helpdesk for immediate assistance

16. Will I get bus pass/ Train pass if I do not opt for company transport? We encourage associate to use office transport and no Bus or Train bus pass will be facilitated. However, associate on their own may get the BMTC bus pass, which will not be reimbursed.

17. What is the Transport boundary for opting Company Transport? Transport will be provided to all associates residing not more than 40 Kms 1 way from Office location

18. What is the cutoff timings for Monthly roster submission? Associates / POC needs to schedule their shift details through Mobile App on or before 10.00 AM, Friday for the following week

19. What is the cutoff timings for Adhoc requests? a) Pickup – 12 hours prior to Login time b) Drop – 3 hours prior to Logout time. However, Adhoc requests will be actioned subject to respective Manager's approval & Cab / Seat availability.

20. What is the Transport Usage charges? Uniform rate of Rs 1600/- per month will be charged to all associates availing company provided transport services, except during the below scenarios, the rate can be changed by the management with prior information to the associates

a) Rostered for night shifts - shifts starting anytime between 12:00 PM to 6:59 AM

b) Partial deduction of Rs 800/- will be deducted if transport facility is availed for less than 10 days in a month.

c) For contract associates, 1600 will be deducted irrespective of shift timings.

21. What if personal belongings is Lost in cab: a) Associates are responsible for their Personal belongings, in case of any personal belongings left behind in cabs, the drivers have been instructed to hand over the same to

22. Vehicle met with accident, or involved in some road rage issues, what should be responsibility of the associates

a. The associates are requested, not to panic and press the panic button in the Transport Technology Application app

b. Employees are requested not to get down from the cab if it is a minor accident

c. In case the accident is caused due to negligence of Legato driver: a. do not argue with the driver nor the other party b. Advise driver to stay with the cab and do not leave d. Call the transport or security control room for immediate assistance e. Please specify the exact location and the severity of the accident (so the transport/security team can arrange ambulance service well before) f. Alternate vehicle will be arranged by transport team, g. Reach out to nearby police station in case of extreme cases.

23. If the transport schedule alert not received what shall be done by employees Please call 24/7 transport helpdesk mobile no for feasible options

Always check network and refresh app for trip details

24. What if driver deviates from Regular route. a. Immediately trigger the Panic button, Transport / Security team will take necessary action immediately. b. Do not instruct driver to deviate from regular route for personal reasons

25 What of the associates lost any belongings in the transport vehicle? The associates can check with Transport Helpdesk / Security. If lost item is found, the same will be returned by security after due verification. However, safety of personal belongings of associates rests with them and Transport Department is not responsible for any such losses.

VERSION HISTORY

History Review and/or Approval Date	Effective	Description of changes
Initial Draft	01-May-2018	01-May-2018 New Draft
Revision	23-Sep-2018	23-Sep-2018 Added FAQ's
Revision	20-Nov-2019	20-Nov-2019 Updated Point 20 in FAQ's
Revision	30-Dec-2019	01-Feb-2020 Added point related to non-compliance & no shows.

Title: Grievance Redressal Policy No.: LPVer1.7 Applicability: All Permanent Associates of Legato Healthcare Technologies LLP Original Effective Date: 02 -August-18 Approver(s): Subhashini Sriram - Head HR, Legato Last Review/Approval Date: 11-December-19 Process Owner: Kameshwari Danturti - Sr Manager - HR, Legato Current Version Effective Date: 5-May-2021 Version History Purpose The purpose of this policy is to:

- Describe the scope and definition of grievances
- Outline the process of reporting grievances
- Share general guidelines to follow with an aim to provide a robust grievance redressal system and provide a harmonious and productive environment.

Scope This policy is applicable to all fulltime associates of Legato Health Technologies LLP. Policy The policy aims to fulfil the following objectives:

1. To enable all the associates to share or express their concerns
2. To set up a process on resolution of grievances in an impartial and fair manner.
3. To address concerns within a reasonable time frame.

Change History Review or Approved Date Effective Date Description of Changes

Review or Approved Date	Effective Date	Description of Changes
02-Aug-18	02-Aug-18	Added a paragraph on Malicious or false complaint
23-Apr-19	01-May-19	Revised List of Committee Members
21-Jun-19	21-June-19	Revised List of Committee Members
15-Jul-19	15-July-19	Revised List of Committee Members
30-Jul-19	01-August-19	Added a clause of composition of Apex Committee
21-Nov-19	21-Nov-19	Revised List of Committee Members
11-Dec-19	11-Dec-19	Revised List of Committee Members
5-May-21	5-May-21	Deletion of Apex and addition of AR office and process flow diagram

Definitions We are aware that there may be times when our associates see a need to file a complaint against unjust treatment, harassment, etc. which impacts their regular work in the workplace. This grievance policy is created to clearly outline the process for these instances to ensure that all our associates are heard with complete confidentiality, and their concerns addressed. The process is known as Grievance Redressal. Examples for Grievances Below is a sample list of such grievances that can be considered as appropriate under this policy, but are not limited to:

- A belief that companies policies, practices, rules, regulations, or procedures have been applied inconsistently
- Treatment considered unfair, such as coercion, reprisal, harassment (including sexual harassment), or intimidations;
- Alleged discrimination because of unconscious bias, discrimination on the grounds of age, color, ethnicity, disability (including persons infected with HIV or persons with AIDS), marital status, nationality, region, race, religion, gender, sexual orientation, pregnancy, medical condition, national origin, race, gender identity etc. and
- Improper or unfair administration of associate benefits or conditions of employment such as scheduling, vacations, fringe benefits, promotions, retirement, holidays, performance review, salary, or seniority.

Associate Relations Office: Associate Relations Office (AR Office) is an independent function within HR which reviews workplace concerns raised by associates in an unbiased manner and provides counsel/advice to all stakeholders appropriately. The AR office operates on the principles of trust and fairness where associates can raise concerns with confidence and be assured that these will be treated and resolved with utmost confidentiality and fairness. If you have a concern or question, you should follow the process below:

- First discuss it with those in your management chain.
- If you are not comfortable with that approach for any reason, or if you believe that no action is taken, you may submit a service request through Engage tool on Pulse page
- Your request comes directly to the AR office and will be completely confidential.
- Incidents relating to POSH (alleged discrimination or discriminatory harassment based on race, color, religion, sex, gender, age, national origin, sexual orientation, disability, or any other protected characteristic) should immediately be reported through the Engage tool choosing POSH as the option while submitting the grievance. Such complaints may be raised through the grievance redressal process, however they will be addressed by the POSH team. You may raise concerns, in good faith, to AR without fear of retaliation. All the concerns raised with AR team will be kept completely confidential. Legato strictly prohibits any acts of retaliation against associates who raise good

faith concerns, or who participate in investigations of concerns. However, associates who knowingly make false or malicious reports against another associate will be subject to corrective action up to and including termination of employment (as consistent with applicable law). If conduct in violation of this policy resumes, or if the associate feels that he or she has been retaliated against for raising a concern, the associate should immediately notify AR. General Guidelines Associate Relations (AR) as a part of the Human Resources department and can help resolve issues related to these and other incidents:

- Perceived conflicts with managers or associates including unfair treatment and /or favoritism
- Improper administration of a policy or an associate benefit
- Problems arising from the application of policies, practices or rules, department work rules or from any condition of employment
- Unsafe or unhealthy working conditions
- Corrective action /PIP concerns
- Incidents of alleged discrimination or discriminatory harassment based on race, color, religion, sex, gender, age, national origin, sexual orientation, disability, or any other protected characteristic.

All such incidents should immediately be reported through the tool choosing POSH as option. While such complaints may be raised through the grievance redressal process, POSH team will handle such cases. AR will maintain confidentiality to the extent permissible by law.

- Information concerning an associate grievance will be confidential. AR team will investigate the complaint and may discuss it only with those individuals on a “need to know” basis or those who are required to supply necessary background information or advice.
- Associates will not be penalized for proper use of the grievance redressal process. However, if an associate raises complaint in bad faith or solely for the purpose of delay, or harassment, or repeatedly raises disputes devoid of merit or in connection with minor disagreements, it will be considered an improper use of the AR office services.
- Initiation of a complaint under the grievance resolution policy by an associate does not limit the right of the company to proceed with any disciplinary action that is not in retaliation to the use of the grievance redressal policy.
- In addition, associates and managers are prohibited from retaliating against an associate who properly uses the grievance resolution procedure.
- The company may, at its own discretion, refuse to proceed with any grievances if it determines improper under this policy.

• Disputes with respect to the terms of employment stated in the employment letter shall be addressed by the grievance resolution procedure. If any such grievances are raised, the conditions of employment as per the employment agreement take precedence over the grievance resolution procedure. Grievance Resolution Procedure A healthy & robust grievance redressal process helps to create mutual respect between the organization & its associates. It facilitates and maintains a positive employee morale through quick resolution of the grievances. As an organization we strive to correct and address grievances in an open and transparent manner.

- An appropriate dispute is defined as where an associate has expressed dissatisfaction concerning any interpretation or application of a work-related policy by management, supervisors, or other associate.
- Associates are encouraged to first approach their manager to discuss and try to resolve any issues they might be experiencing. This often addresses a concern in a simple, open and time- efficient manner.
- Manager shall respond to the associate within 5 working days
- If there is no response from the manager or the associate is dissatisfied with the response by the manager, associate should report the same to the (Associate Relations) AR office through the Engage tool on Pulse portal to address their grievances.
- The AR office will ask all involved parties as needed to share the details of their supporting statements where appropriate. All witness shared will be interviewed and all the interviewed statements would be recorded, signed and dated if the meeting is conducted in person. Alternately the meetings may be recorded or documented over emails during virtual/remote working.
- Post enquiry, the AR team will review the findings and decide on the final recommended action basis the findings.
- The AR team will meet the respondent and walk



him/her through the nature of allegations, the details of findings and inform them of the final decision. • AR team will also meet/talk to other parties (including HR) involved where there is an action recommendation. All such involved parties should update AR office on the closure of actions. Improper use of Grievance Redressal forum through malicious or false complaint You may raise concerns, in good faith, to the Associate Relations (AR) office without fear of retaliation. All the concerns raised with AR team will be kept completely confidential. Legato strictly prohibits any acts of retaliation against associates who raise good faith concerns, or who participate in investigations of concerns. However, associates who knowingly make false or malicious reports against another associate will be subject to corrective action up to and including termination. If during investigation, the AR office determines the following, it is deemed to be inappropriate conduct/misconduct in terms of Company policy. • The allegation was malicious • The complainant has made the complaint knowing it to be false • The complainant has produced any forged or misleading document • Any witness has given false evidence or produced any forged document Action against malicious or false complainants The AR office will recommend that action be taken against the complainant in accordance with the prescribed policies. It is clarified that a mere inability to substantiate a complaint or provide adequate proof will not attract action against a complainant under this provision. Action against false witnesses Where the AR office arrives at a conclusion during the inquiry any witness has given false evidence or produced any forged document, it may recommend necessary action against such witness Appeal In case an associate is not satisfied with the outcome of the AR office, he or she can appeal to the HR Head – Legato India. The HR Head will take the necessary steps to review and investigate the grievance and will then issue a final written decision. Redressal flow chart: FAQ for all associates

1. What does AR mean? AR (Associate Relations) is one of the functions in HR, the team focuses on encouraging healthy relationships, transparent and meaningful conversations and want all associates and managers to feel valued and supported
2. Why should I use engage tool to share my grievance when I can connect with HR over mail? With Legato growing in such a fast pace environment, it is important to streamline our processes to ensure better redressal of grievances. Connecting within teams using a standardized tool and a specialized office for all associate relations requirements ensures faster and more transparent redressal.
3. What is the benefit of using the tool? Service Now has a well-defined workflow with SLA (service level agreements) for each catalog and task. You will get regular updates on your case, thereby facilitating a transparent communication. The tool also provides various reporting functionality.
4. Where can I get the link to access the AR tool? The link to AR tool is '<https://anthem.service-now.com/esc>' Alternatively, you can visit the Pulse page under HR and add app 'IND- Legato AR'
5. What are the different service catalogs available in the tool for my support? • Coaching for me • Help resolving a conflict • Help me with a workplace concern
6. Can I get the status on the case submitted by me? You can view the case submitted under the section "My Cases". You can also check the status of the cases and the AR member assigned to your case.
7. Can I cancel the request once submitted? Yes, if you want to cancel the request once submitted, by clicking on the section "My Cases".
8. How can I request help from AR, if I have an urgent issue? All cases are actioned at the earliest, however If you have an urgent issue, please include the word URGENT in the short description.
9. What are the various types of grievances for which I can approach the AR team? Below are a few categories of grievances for which you can approach the AR team. However, we would recommend you talk to your manager on the grievance first before approaching AR team. • Not satisfied with current job role/ process/ technology • Need guidance on managing a difficult situation/ team member/ manager • Personal situation impacting work • Work related challenges • Guidance on career aspirations/ learning options • Assistance in Organization policy

- Dealing with Inter team conflicts
- Guidance of soft skill coaching aspects
- Conflict with team member working in the same team/project
- Conflict with Reporting Supervisor / Manager /Skip manager
- Conflict with stakeholder/ trainer/ buddy /colleague and if there is any need of coaching assistance such as counseling, guidance etc.
- Harassment/ discrimination/ biasness/ favoritism/ violence/ abuse
- Issues with benefits provided by the company (Insurance, Joining Bonus, EAP etc)
- Instance of retaliation
- Impact due to Organization Communication/ Restructure (Redeployment, business process revamp)

\*Complaint on observed misbehavior of an associate (FTE) with vendor staff

- Organization policies or process

10. What are SLAs for closing my grievance? Every service catalog has an SLA by which every case has to be closed below are the details

- Coaching for me - 15 business days
- Help resolving a conflict- 15 business days
- Help me with a workplace concern - 15 business days

11. Can I raise an employment concern on behalf of someone else? Yes, you can if you witness any wrongdoing/misconduct/inappropriate behavior which impacts any other FTE (full time employee) or vendor staff, please raise a concern in the tool

12. How is confidentiality maintained on my grievance, when reported? Any request raised is kept confidential and discussed with other associates or stakeholders on a need-to-know basis as part of the enquiry process.

13. Am I eligible to raise a grievance while serving notice period? Yes, you can raise a grievance with AR as long as you are employed with us.

14. Can I raise service ticket for the same issue again if it persists in future? Yes, you can raise the service ticket on engage tool for the same issue.

15. Whom should I reach out to if I am not happy with resolution provided by AR team? In case, you are not happy with the resolution, you can reach out to the Head HR – India.

16. Can I raise multiple issues at the same time or separately? Yes, you can raise multiple issues at the same time, if the nature of grievances are separate.

17. Can a contract employee raise a concern against an FTE? Yes, a contract employee can raise a concern against a FTE. However, since they do not have access to Engage tool, we would recommend they raise it with their employer who will work with us for resolution.

18. As a FTE, can I raise a concern against a contract employee when I have a grievance? Yes, an FTE can raise a concern against a contract employee.

19. How can a contract employee raise a concern against another contract employee? Both of them should reach out to their parent organizations to get their concern addressed.

20. Can my issue / concern be resolved without raising service ticket on engage tool? It is advisable to raise a service ticket on engage tool as it will help you in tracking the status of the issue.

21. Do I need to inform my manager before reaching out to AR office? No, it is not required to inform your manager before reaching out to AR office.

22. Will my identity be confidential for the concern / issue I raise with AR? Yes, we will resolve your issue with confidentiality and your identity will not be disclosed until there arises a situation on a need-to-know basis.

23. Will my manager come to know if I raise a concern / issue against them? No one except the complainant and AR team members will be aware of the ticket you raised with AR office. You can stay assured on the confidentiality to that extent.

24. Will my performance ratings or my experience at legato be impacted if raise a concern / issue with AR? No, it won't affect your employment or career growth in any form.

25. Do we have help line number for AR office? We don't have any help line number. But once the ticket is raised, we make sure to establish an initial contact within 48hrs.

26. Can I withdraw my concern / issue during investigation? Yes, you can withdraw. However, we would advise you not to, as the primary goal of AR office primary is to make sure you get appropriate redressal to your concern.

27. Can I raise more than 2 concerns / issues at the same time? Yes you can. Please select the appropriate category for the issues in the AR tool by raising two separate tickets if the categories are different.

28. Can my concern be addressed / resolved regardless of the TAT what AR follows? One member from the AR team (AR consultant) will be dedicated to your issue, when raised and you can expect a timely

resolution. We are sensitive to your concern and will help with a resolution at the shortest possible time.

29. Can I see an update on engage tool for the issues I have raised? At regular intervals, AR consultant working on your concern will update the tool with progress and this will be visible to you as it gets updated.

30. Can I talk to AR team member before I raise a concern on tool to understand if my concern / issues fall under scope of AR? You can speak to any member from AR team to discuss and understand the issue you have. If it does not come under the scope of AR, you will be routed to the right person/ department.

31. Can I reach out to AR for any 1\*1 discussion for my personal wellbeing? We will advise you to reach out to EAP and use their services as appropriate.

32. Will I get opportunity to justify myself and will I be heard out if someone raises a false complaint on me? Yes, AR team believes in giving fair hearing to both the parties. If the complaint is malicious in any form, disciplinary actions will be taken against the complainant which may lead up to termination of employment ((as consistent with applicable law).

33. Can I reach out to AR directly if I am not comfortable speaking to my HRBP & manager? Yes you can reach out for any particular issue you have for which you are not comfortable talking to your manager or HRBP.

34. Can we raise POSH related concern in AR tool? Yes, you can choose POSH as a category and the case will be routed to POSH team. All sexual harassment cases can also be raised to POSH committee over email.

40. What action will AR team take if one of the witness / investigation committee part of investigation don't maintain confidentiality? After due enquiry, appropriate disciplinary action will be recommended.

41. What will happen if the potential accused comes to know that the complainant has raised the issue against him/ her? AR team members do not discuss on any concerns or grievances raised to ARO. However, we also expect the same level of confidentiality to be maintained by the complainant in not discussing with anyone else.

Aon | Proprietary & Confidential 1 Legato Health Technologies LLP Benefit Manual 2022-23 Prepared By Aon India Insurance Brokers Pvt. Ltd. Registered Office - Unit 102, 1 st Floor, The Estate, #121, Dickenson Road, Bengaluru - 560042 Composite Insurance Broker | IRDAI License No.624 License Validity - 16/10/2020 to 15/10/2023 2 Make the best use of your Benefits Getting Enrolled • Plan Enrollment Procedure & Process for getting your E-Card Making A Claim • Hospitalization Procedure, Claims Check List and Key FAQs Your Plan Details • Plan Information, Benefit Details & General Exclusions 3 Know Your Benefits Group Medical Benefits Confidential Document The information contained here is only a summary of the employee benefit insurance policy documents which are kept by your employer. If there is a conflict in interpretation, then the terms & conditions of the applicable policy document will prevail. The Group Medical policy covers expenses by the insured persons (employee & family members covered) on account of hospitalization due to sickness or accident. The policy covers expenses incurred on room rent, medicines, surgery etc. Expenses for hospitalization are payable only if a 24-hour hospitalization has been taken. Under a scheme such as this the typical expense heads covered are the following: room/board expenses as provided by the hospital or nursing home ; nursing expenses ; surgeon, anesthetist , medical practitioner, consultant , specialist fees ; anesthesia, blood, oxygen, operation theater charges, surgical appliance, medicines and drugs.; dialysis, chemotherapy, radiotherapy, and similar expenses. 4 Plan Name Group Medical Plan Policy Holder Legato Health Technologies LLP Period of the Cover Annual Inception Date 25-January-2022 Expiry Date 24-January-2023 Insurer Aditya Birla Health Insurance Co. Ltd. TPA Paramount Health Services & Insurance TPA Pvt. Ltd ( New ) Floater Sum Insured Limits INR 300,000 per Family (Up to Manager) INR 500,000 per Family (

Sr Manager) INR 800,000 per family (Director and above) Additional Enhanced Sum Insured Policy :Floater Sum Insured INR 300,000 per Family( Policy terms remain same as per base policy) Members Covered • Employee • Spouse • Dependent children (first 2 living dependent children up to 25 yrs of age ) • Dependent Parents/Parents-in-law up to 90 years of age. • Employees have option to cover additional parents by paying additional premium INR 4,350 + GST Per parent. Geographical Limits Covered for expenses incurred in India only Mid-Term Enrollment Allowed, only for new joiners, & New dependents - New marriage employee's Spouse & Newborn child within 30 days Age-Limit 01 days to 90 years Your GMC Plan Details 5 Particular Description Special Condition, if any Total Members Covered per Family Employee, spouse, dependent children, Dependent Parents/parents-in-law Additional parents/parents-in-law can be covered by paying an additional premium of INR 4,350 + Tax per parent Employee Yes - Spouse Yes - Child Yes 2 dependent children only Parent Yes - Parent-in-Laws Yes - Sibling No - Other No - Family Definition Is Mid Term Enrollment Allowed? Particular Description Special Condition, if any Mid-Term Enrollment of Existing employees' Dependents(as on plan start date) Not Allowed - Mid-Term Enrollment of New Joinees (New Employees +Their Dependents) Allowed \* - Mid-Term Enrollment of New Dependents (Spouse/Children) Allowed \* Newly married employees' spouses & newborn children within the policy year subject to 30 days intimation from DOJ / DOB / Date of marriage. No Individual should be covered as dependent of more than one employee Your Plan Details 6 IMPORTANT:- Intimation and Submission Timeframes: Intimation of claim:- TPA must receive Cashless request within 24 hours days from date of Admission. Submission of claim :- TPA must receive the claim documents for all reimbursements within 30 days of discharge from hospital. The above details are only snapshots of the benefits provided under your group medical plan. Please refer Policy document for complete information on Coverage & exclusions. Policy Benefits Standard Hospitalization Covered Pre-existing Diseases Covered First 30-days Waiting Period Waived off First Year Waiting Period Waived off Pre & Post Hospitalization Expenses Covered, 60 days Pre and 90 Days post Ambulance Services INR 2,000 per person per event only in emergency Restriction on Room-Rent • For Employees up to Manager Level : Normal: INR 8,000 per day and Intensive Care Unit (ICU): On Actuals. • Senior Management (above I13 grade, Sr Manager and Above : Single A/c Private per day and Intensive Care Unit (ICU): On Actuals. Deductible & Co pay Nil Co-Pay Domiciliary hospitalization Not covered Diagnostics Expenses Standalone diagnostic not covered Policy Benefits Ayurvedic claims (AYUSH) Covered upto 25% of the SI, subjected to inpatient treatment being undertaken in a Govt registered hospitals or NABH accredited Hospitals only. Day Care Procedures Covered Internal congenital Covered External Congenital Covered, in case of life-threatening situation Dental & Vision Covered only in case of accident (hospitalization) Oral Chemotherapy Covered Home Quarantine for Covid Covered up to 20% of Sum Insured only if tested positive for COVID 19. (Medicine / Investigation / Doctor / Nurse -Consultation / PPE kit). Cochlear implant Covered, cochlear implant with 50% FSI Cataract Covered, INR 30,000 per eye PTCA, Stents & Joint Replacement Covered, cost of implant as per prices decided by National Pharmaceuticals Pricing Authority Cyber knife/Robotic surgery/ Stem cell therapy Covered with 50% co-payment Lasik Surgery to correct eyesight if refractive error of eye is beyond +/-7.5D Your Plan Details 7 Maternity Benefits The maternity benefit is provided under your group medical plan Maximum Benefit INR 75,000 for both Normal and C-Section within Sum Insured Limit Limit Maximum up to 02 instances 9-months waiting period Waived off Pre-Post Natal expenses Covered up to INR 5,000 with in maternity limit only on (OPD & In-patient) New born baby covered from day 1 Covered from day 1 Well Baby expenses Well baby charges covered up to 3,000 within Maternity Limit IMPORTANT : For maternity reimbursements and employees on subsequent maternity leave , please do not wait till you have returned back to office to

submit a claim as it will cross the claim submission within 30 days to avoid denial of claim. Please also immediately inform your hr about the new baby coverage as your dependent as A subsequent complication may be A possibility and intimation is mandatory prior to coverage. ▪ Maternity benefits are admissible only if the expenses are incurred in Hospital / Nursing Home as in-patients in India. ▪ Those Insured Persons 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. Infertility Treatment and sterilization are excluded from the policy. Your Plan Details 8 Other Benefit Features Policy Benefit Definition Covered/Not Covered Room Rent • Normal INR 8,000 per day for Level up-to Managers and Single A/c Private per day for levels Sr Managers & above • Intensive Care Unit (ICU): On Actuals • Insured employees are requested to use prudence and proper negotiation with Hospital/ Nursing home in availing the eligible room category. • Please remember, higher the room category higher is the cost of treatment. This may result in faster exhaustion of your total available eligibility • Employee opting for a higher room category will have to bear the proportionate increase in cost on all categories / heads Covered Your Plan Details 9 Plan Name Group Medical Plan Policy Holder Legato Health Technologies LLP Period of the Cover Annual Inception Date 25th of January 2022 Expiry Date 24th of January 2023 Insurer Aditya Birla Health Insurance Co. Ltd. TPA Paramount Health Services & Insurance TPA Pvt. Ltd Sum Insured Limits INR 100,000, INR 200,000, INR 300,000, INR 400,000, INR 500,000, INR 700,000; INR 800,000 INR 10,00,000 Members Covered As per the base cover Geographical Limits Covered for expenses incurred in India only Mid-Term Enrollment Allowed, only for new joiners Age-Limit 90 Years Benefits Same as the base cover Your Plan Details - Voluntary Employee Top-up policy 10 Premium Rates – Voluntary Employee Top up policy Independent Voluntary Top up policy premium chart Top up Sum Insured Net Premium (Incl Tax) INR 100,000 INR 7,493 INR 200,000 INR 8,555 INR 300,000 INR 9,263 INR 400,000 INR 10,030 INR 500,000 INR 10,974 INR 700,000 INR 12,626 INR 800,000 INR 15,930 INR 10,00,000 INR 18,526 Additional Multiply work fit for the employee only who are opting for Top-up as per below • Active age score through online HRA • 24\*7 access to wellness experts- Doctor on call, counsellor on call, ask a dietician, ask a specialist • Wellness tips • Active day leader board • Access to 6 fitness sessions every month- Yoga, Zumba, Cardio, Strength etc. • Cashback and discount from various lifestyle partners Deduction of premium towards “Top Up” Coverage: The amount towards the premium will be deducted from your next month’s salary. 11 If any Insured Person suffers an Illness or Accident during the Policy Period that requires Insured Person’s hospitalization as an inpatient, then the insurer will reimburse reasonable and customary expenses towards the below mentioned hospitalization under your group medical plan. ▪ Inpatient Treatment ▪ Room rent and boarding expenses ▪ Doctors fees ( who needs to be a medical practitioner) ▪ Intensive Care Unit ▪ Nursing expenses, Anesthesia, blood, oxygen, operation theatre charges, surgical appliances, ▪ Medicines, drugs and consumables (Dressing, ordinary splints and plaster casts) ▪ Diagnostic procedures (such as laboratory, x-ray, diagnostic tests) ▪ Costs of prosthetic devices if implanted internally during a surgical procedure ▪ Organ transplantation including the treatment costs of the donor but excluding the costs of the organ The expenses shall be reimbursed provided they are incurred in India and are 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 that are of a diagnostic nature only or are incurred from a preventive perspective with no active line of treatment and do not warrant a hospitalization admission are not covered under the plan. Your Plan Details What Is Covered? 12 Group Medical – Pre & Post Hospitalization Expenses Please note that although you are covered for post hospitalization claims for 60 days after discharge, you are expected to file a

reimbursement claim with the TPA within 7 days of incurring the expense after compiling 60 days. The pre & post hospitalization expenses are covered under your group medical plan. Pre-hospitalization Expenses If the Insured Person is diagnosed with an Illness which results in his or her Hospitalization and for which the Insurer accepts a claim, the Insurer will reimburse the Insured Person's Pre-hospitalization Expenses for up to 30 days prior to his Hospitalization as long as the 30 day period commences and ends within the Policy Period. Duration Within 30 days before hospitalization Restrictions No restriction Post-hospitalization Expenses If the Insurer accepts a claim above and, immediately following the Insured Person's discharge, he requires further medical treatment directly related to the same condition for which the Insured Person was Hospitalized, the Insurer will reimburse the Insured Person's Post-hospitalization Expenses Duration Within 60 days post discharge Your Plan Details 13 Other Benefit Features Policy Benefit Definition Covered/Not Covered Pre-existing Diseases ▪ Any Pre-Existing Condition or related condition for which care, treatment or advice was recommended by or received from a Doctor or which was first manifested prior to the commencement date of the Insured Person's first Health Insurance policy with the Insurer ▪ Covered First 30-days waiting period ▪ Any Illness diagnosed or diagnosable within 30 days of the effective date of the Policy Period if this is the first Health Policy taken by the Policyholder with the Insurer. ▪ Covered First year Waiting Period ▪ During the first year of the operation of the policy the expenses on treatment of diseases such as Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia or Fibromyoma, Hernia, Hydroceie, Congenital Internal Diseases, Fistula in anus, Piles, Sinusitis and related disorders are not payable. If these diseases are pre-existing at the time of proposal they will not be covered even during subsequent period or renewal too ▪ Waived off Day Care ▪ Day Care Procedure means the course of medical treatment, or a surgical procedure listed in the Schedule which is undertaken under general or local anesthesia in a Hospital by a Doctor in not less than 2 hours and not more than 24 hours. ▪ Covered Diagnostic Expenses ▪ All diagnostic tests and lab tests as part of hospitalization and pre-post hospitalization including OPD. Diagnostic tests without treatment or not related to treatment are not covered ▪ Covered and Only incase of 24-hr hospitalization related to treatment Your Plan Details 14 General Exclusions ▪ Injury or disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not) or by nuclear weapons / materials. ▪ Circumcision (unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to any accident), vaccination, inoculation or change of life or cosmetic or of aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness. ▪ Surgery for correction of eyesight, cost of spectacles, contact lenses, hearing aids etc. ▪ Any dental treatment or surgery which is corrective, cosmetic or of aesthetic procedure, filling of cavity, root canal including wear and tear etc unless arising from disease or injury and which requires hospitalisation for treatment. ▪ Congenital external diseases or defects/anomalies ▪ Convalescence, general debility, "run down" condition or rest cure, congenital external diseases or defects or anomalies, sterility, any fertility, sub-fertility or assisted conception procedure, venereal diseases, intentional self-injury/suicide, all psychiatric and psychosomatic disorders and diseases / accident due to and or use, misuse or abuse of drugs / alcohol or use of intoxicating substances or such abuse or addiction etc. ▪ Any cosmetic or plastic surgery except for correction of injury ▪ Expenses incurred at Hospital or Nursing Home primarily for evaluation / diagnostic purposes which is not followed by active treatment for the ailment during the hospitalised period. ▪ Expenses on vitamins and tonics etc unless forming part of treatment for injury or disease as certified by the attending physician. ▪ Any Treatment arising from or traceable to pregnancy, miscarriage, abortion or complications of any of these including changes in chronic condition as a result

of pregnancy except where covered under the maternity section of benefits. Your Plan Details 15

- Doctor's home visit charges, Attendant / Nursing charges during pre and post hospitalisation period.
- Treatment which is continued before hospitalization and continued even after discharge for an ailment / disease / injury different from the one for which hospitalization was necessary.
- Naturopathy treatment, unproven procedure or treatment, experimental or alternative medicine and related treatment including acupressure, acupuncture, magnetic and such other therapies etc.
- Genetical disorders and stem cell implantation / surgery.
- External and or durable Medical / Non medical equipment of any kind used for diagnosis and or treatment including CPAP, CAPD, Infusion pump etc., Ambulatory devices i.e. walker , Crutches, Belts ,Collars ,Caps , splints, slings, braces ,Stockings etc of any kind, Diabetic foot wear, Glucometer / Thermometer and similar related items etc and also any medical equipment which is subsequently used at home etc..
- All non medical expenses including Personal comfort and convenience items or services such as telephone, television, Aya / barber or beauty services, diet charges, baby food, cosmetics, napkins , toiletry items etc, guest services and similar incidental expenses or services etc..
- Change of treatment from one pathy to other pathy unless being agreed / allowed and recommended by the consultant under whom the treatment is taken.
- Treatment of obesity or condition arising therefrom (including morbid obesity) and any other weight control programme, services or supplies etc..
- Any treatment required arising from Insured's participation in any hazardous activity including but not limited to scuba diving, motor racing, parachuting, hang gliding, rock or mountain climbing etc unless specifically agreed by the Insurance Company.
- Any treatment received in convalescent home, convalescent hospital, health hydro, nature care clinic or similar establishments.
- Any stay in the hospital for any domestic reason or where no active regular treatment is given by the specialist.
- Massages, Steam bathing, Shirodhara and alike treatment under Ayurvedic treatment.

General Exclusions Your Plan Details 16

- Any kind of Service charges, Surcharges, Admission fees / Registration charges etc levied by the hospital.
- Out patient Diagnostic, Medical or Surgical procedures or treatments, non-prescribed drugs and medical supplies, Hormone replacement therapy, Sex change or treatment which results from or is in any way related to sex change.
- Expenses incurred for investigation or treatment irrelevant to the diseases diagnosed during hospitalisation or primary reasons for admission.
- Private nursing charges, Referral fee to family doctors, Out station consultants / Surgeons fees etc.,
- Vitamins and tonics unless used for treatment of injury or disease
- Infertility treatment, Intentional self Injury, Outpatient treatment.
- Family planning Operations (Vasectomy or tubectomy) etc
- Genetical disorders / stem cell implantation / surgery
- All expenses arising out of any condition directly or indirectly caused by, or associated with Human T-cell Lymphotropic Virus Type III (HTLD - III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of similar kind commonly referred to as AIDS, HIV and its complications including sexually transmitted diseases.
- External and or durable Medical / Non medical equipment of any kind used for diagnosis and or treatment like Prosthetics etc.
- Lasik treatment or any other procedure for correction/enhancement of vision is not covered.
- Any device/instrument/machine that does not become part of the human anatomy/body but would contribute/replace the function of an organ is not covered.
- Warranted that treatments on trial/experimental basis are not covered under scope of the policy.

General Exclusions Your Plan Details 17

The Procedure : What Must You Remember ?

- Employees have to provide all the details of dependents in the prescribed format provided in the joining docket for Mediclaim coverage. Dependents once declared cannot be changed during the policy period.
- Existing Employees are covered as on date of policy commencement (or date of joining for new employees joining after 25 Jan 2022) along with their eligible dependents as per data provided by HR to

Insurance Company. • No midterm inclusion of dependents would be allowed except in case of spouse due to marriage of a employee and birth of child. • Midterm enrollment of new dependents (Spouse / Children) is allowed for employees within 30 days from Date of Marriage/ Date of Birth. The details need to be updated by you on Family Health Plan (TPA) website. • Eligible Dependent covered under the policy for existing employees can be viewed on the TPA website. Getting Enrolled 18 The Process For E-Cards Visit TPA website <https://legato.paramounttpa.com> Login to TPA Website Address Enter your User name /Password and click on Log In Click on View Ecard Click on 'To get e-card of your family member' to get a PDF copy Produce this at the time of hospitalization In absence of e-cards, you can present your company ID card too Government recognized photo ID is compulsory along with e-card Getting Enrolled 19 Log on to <https://legato.paramounttpa.com> 20 2) Update New Password of your choice 1) Update Employee DOB as Old Password 3) Confirm New Password 21 Update & Verify Mobile & Dependent details 2) Click on "Save" button 1) Update o. 3) Edit Dependent 5) Delete Dependent 4) Click to Add Dependent 2) Click on "Save" button 1) Update or Verify Mobile Number 22 Add Dependent details Add Dependent Details & Submit 23 Add / Delete Additional Parents if Required Click to Add Additional Parents Click on don't Want to add additional parents to Delete the Existing Additional Parents 24 Add Additional Parents if Required Update Additional Parent Details 25 Option to Select / Delete Top Up Sum Insured Click "Yes" to OPT or "No" to Delete the Existing Top Up 26 Change / Delete Top Up Sum Insured Option Change / Delete Top Up Sum Insured 27 Screen to Select / Delete Top Up Sum Insured Select Top Up Sum insured or Select "Don't want Top Up as per your requirement 28 Update Nominee Details of GPA/GTL Policy Click to Add GPA Nominees Click to Add GTL Nominees If the GPA & GTL Nominee are Same then Click in the Drop Box 29 Screen to Add Nominee You can add maximum 5 nominees Total Disbursement is equivalent to 100% Add Nominees 30 Nominee Details Reflecting in the below screen 31 Click to Submit (Record will save on final Submission) 1) Click on the drop box 2) Click on Submit 32 Final Authentication before submission Verify the Mobile before submission If the details are Correct then Click on "Yes" otherwise "No" to back page Authenticate & Click on "Yes" to Save the records 33 On Final Submission you will get an acknowledgment mail on your registered Email ID 34 The Hospitalization Procedure You can avail either cashless facility or submit the claim for reimbursement. Definition of Cashless ▪ Cashless hospitalization means the TPA may authorize (upon an Insured person's request) for direct settlement of eligible services and the corresponding charges between a Standard Network / PPN Network Hospital and the TPA. In such case, the TPA 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 these services are covered under the Policy. Denial of cashless does not mean that the treatment is not covered by the policy. Definition of Reimbursement ▪ 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 and intimate the TPA about the claim to ensure eligibility for reimbursement of hospitalization expenses from the insurer. ▪ To know about cashless or reimbursement, please visit the desired section mentioned below: Making A Claim 35 Process for Cashless Cashless hospitalization means the Administrator may authorizes upon a Policyholder's request for direct settlement of eligible services and its 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. Making A Claim List of hospitals in the TPA's network eligible for cashless hospitalization Hospital Network List Email ID: [legato.phs@paramounttpa.com](mailto:legato.phs@paramounttpa.com) Click on Website -



<https://legato.paramounttpa.com/> (Select Hospital Network) For Intimation: 1800226655 / 18002093377 Select State and City to view the Network Hospital List. For Assistance : Dr Nidhi Ahankari : 8976940936 Ms. Veena Koppikar :8976940935 Contact Call Centre at 24 X 7 Customer Service Centre - 1800226655 36 Group Medical – Cashless Hospitalization Planned Hospitalization Approach hospital 48 hrs. prior to admission, produces TPA card and completes pre-authorization formalities Faxes Pre-Authorization letter to TPA for Approval If all the documents are in order, TPA will issue authorization letter to hospital within 3 hours If the case is Declined, Denial Letter will be issued to hospital (denial of cashless does not mean denial of treatment or claim) Incase additional information is required, TPA will inform the Hospital / Employee Emergency Hospitalization Admission in Hospital Pre-Authorization formalities to be completed within 24 hrs and sent to TPA for Approval If all the documents are in order, TPA will issue authorization letter to hospital within 3 hours If the case is Declined, Denial Letter will be issued (denial of cashless does not mean denial of treatment or claim) Incase additional information is required, TPA will inform the Hospital / Employee Cashless Form 37 Group Medical – Reimbursement Insured visits non network hospital for treatment Takes discharge, pays for treatment Collects all original documents, receipts and investigation reports from Hospital Submits all original Hospital documents along with filled claim form within 21 days from date of discharge to TPA TPA acknowledges receipt of claim documents via email and commences claim process Incase additional information is required, TPA will inform the employee via email with reminders, If documents are not submitted within 30 days, claim may be closed/ declined If claim is payable, payment will be made to employee via NEFT If claim is declined, denial mail will be sent. 38 Claims Document Check List & Attachments Note: Kindly retain photo copies of all the documents. KYC – Government issued Photo ID and Address proof. The above is an indicative list and additional documents can be requested for to process a claim. No. Document Required (All in ORIGINAL) 1 Signed Claim form (KYC form is mandatory for claims above INR 100,000) 2 Main Hospital bills in original (with bill no; signed and stamped by the hospital) with all charges itemized and the original receipts 3 Discharge Card/Summary (original) 4 Attending doctors' bills and receipts and certificate regarding diagnosis (if separate from hospital bill) 5 Original reports or attested copies of Bills and Receipts for Medicines, Investigations along with Doctors prescription in Original and Laboratory 6 Follow-up advice or letter for line of treatment after discharge from hospital, from Doctor. 7 Break up with details of Pharmacy items, Materials, Investigations even though it is there in the main bill 8 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. 9 In non- network hospitalization, please get the hospital and doctor's registration number in Hospital letterhead and get the same signed and stamped by the hospital. 10 In case of accidents, please note FIR or MLC (medico legal certificate) is mandatory. Making A Claim Claim Form 39 Group Medical – Important FAQs ▪ What are network hospitals? What should I do when I reach the hospital (NETWORK)? These are hospitals where TPA has a tie up for the cashless hospitalization. There are two kinds of network hospitals; PPN Network hospitals where cashless services can be obtained for emergency and planned treatments and Standard (Non PPN) network hospitals where cashless services can be obtained for planned hospitalisation. Once you have reached there, please show your ID card for identification. TPA will also send a letter of credit (on pre-authorization) to the hospital to make sure that they extend credit facility. Please complete the pre-authorization procedure listed earlier. If the pre-authorization is not done, you must collect all reports and discharge card when you get discharged. Please make sure that you sign the hospital bill before leaving the hospital. You can then submit the claim along with all the necessary supporting documents to TPA as a reimbursement . If however, you go to a non network hospital , it is still advisable to fill the

preauthorization form ( use the copy attached with the Benefits Manual). Please fill the claim form, attach the relevant documents and send it to TPA office for reimbursement. ▪ How can I claim my pre & post hospitalization expenses? The policy covers pre-hospitalization expenses made prior to 60 days of hospitalization and incurred towards the same illness/ disease due to which hospitalization happens. It also covers all medical expenses for up to 60 days post discharge as advised by the Medical Practitioner. All bills with summary have to be sent to TPA as a reimbursement. Making A Claim 40 Things To Remember ▪ Always aim to pre-authorize your benefits with the TPA This will help you in the following ways: • You will be informed in advance regarding your coverage for the treatment and whether it is covered under your medical plan or not . This will help you know in advance if your claim may get rejected at a later stage and you do not end up paying out of pocket. • It will help you ensure that the treatment cost is appropriate and not inflated. as the TPA will be able to cross check costs with the hospital in question. This will also help TPA in planning your hospitalization expenditure such that you do not run out of the cover that you are entitled to. • It will help TPA in registering the impending claim with the insurer ▪ Ensure your dependent list is always updated and claims submitted as per protocols Please ensure that all your dependents are covered and have a valid card at the outset itself as it will not be possible to add dependents at a later stage. Submit your reimbursement claims within timelines from the hospital. Please do not postpone this till later as it may mean that your claim gets rejected due to late submission . Please check that your documents are submitted completely at the first instance itself and originals are submitted wherever requested for . Do note that incomplete submissions will not be considered as exceptions by the insurers and will only delay the process further for you and a delay may lead to the claim getting closed. Please also retain a copy of all claim documents submitted to the insurer Making A Claim 41 ▪ Know that it is possible that benefits under your plan could be reduced v/s your eligible sum insured The following are some common reasons for rejection although these are NOT the only reasons why a claim could be reduced 1. Limits for the specific ailment exceed the reasonable cap on ailments listed in the manual, 2. Claim amount exceeds the permissible limit under the policy for you ( denied to the extent of the excess), 3. Some expense items are non payable for e.g. toiletries , food charges for visitors etc. ▪ Know that it is possible that your claim could also be completely rejected under the plan? The following are some common reasons for rejection although these are NOT the only reasons why a claim could be rejected 1. Treatment taken after leaving the organization. (If you have been transferred from one group business to another, please confirm with your HR that you have been included for coverage under your new entity) 2. Treatment that should have been taken on an outpatient basis (unnecessary inpatient admission and / or no active line of treatment.) or where hospitalization has been done primarily from a preventive perspective. Please remember that on occasion your personal doctor may recommend hospital admission for observation purposes however such admissions are not covered under your medical plan 3. Treatment taken is not covered as per policy conditions or excluded, under the policy. Please go through the list of standard exclusions listed earlier. (for e.g. : Ailment is a because of alcohol abuse is a standard exclusion, similarly cosmetic treatments or treatments for external conditions like squint correction etc are not covered) . Hospitalization taken in a hospital which is not covered as per policy conditions (Ex. less than 10 bed hospitals), Admission is before/after the policy period or details of the member are not updated on the insurer's list of covered members . Additionally in case original documents are not submitted as per the claim submission protocol, Making A Claim Things To Remember 42 Paramount Health Services & Insurance TPA Pvt. Ltd No. 4/2, 1st Floor, Shirdi Krupa Complex, Nagappa Street, Above Bank of India, Sheshadripuram, BANGALORE - 560 020 TPA Address (For Reimbursement Documents): Level Name Mobile Number Email ID 1st point of contact Toll

free number 1800226655 -- 1st point of contact Dedicated Legato Toll free number 18002093377 -- SPOC Dr Nidhi Ahankari 8976940936 Legato.phs@paramounttpa.com Escalation 1 Ms. Veena Koppikar 8976940935 veena.koppikar@paramounttpa.com Escalation 2 Ms. Ameeta Pawar 9322798264 ameeta.pawar@paramounttpa.com Escalation 3 Mr. Srihari K.P. 9343728900 srihari.kulkarni@paramounttpa.com Point of Contacts – Paramount Health Services (TPA) Point of Contacts - AON Level Name Mobile Number Email ID Escalation 4 Mr. Naveen Kumar N 9535652071 naveen.kumar.n2@aon.com Escalation 5 Mr. Om Prakash Kashyap 9243458500 om.kashyap@aon.com

43 Know Your Benefits Group Personal Accident Benefits (GPA) Confidential Document The information contained here is only a summary of the employee benefit insurance policy documents which are kept by your employer. If there is a conflict in interpretation, then the terms & conditions of the applicable policy document will prevail. The Group Personal Accident policy covers expenses by the insured persons (employee covered) on account of death or permanent / temporary, total or partial disability due to an accident. Accidental Permanent Disablement means disablement caused due to an accident which entirely prevents an insured person from attending to any business or occupation of any and every kind and which lasts 12 months and at the expiry of that period is beyond hope of improvement. Accidental Temporary Total Disablement means disablement caused due to an accident which temporarily and totally prevents the Insured Person from attending to the duties of his usual business or occupation and shall be payable during such disablement from the date on which the Insured person first became disabled. Accidental Permanent Partial Disablement is a doctor certified total and continuous loss or impairment of a body part or sensory organ caused due to an accident , to the extent specified in the chart provided by the insurer

44 Plan Name Group Personal Accident Policy Holder Legato Health Technologies LLP Policy period 25th January 2022 – 24th January 2023 Insurer Aditya Birla Health insurance Co. Sum Insured 5 times of CTC Members Covered Employee Age limit 18 – 65 years Geographical Limits Worldwide Schedule of benefits Accidental Death up to 100% of SI Dismemberment (100% SA) Permanent Total Disability (100% SA) Permanent Partial Disability TTD Benefit -1 % of Sum Insured or INR 25,000/- for Level up-to Managers and 1 % of Sum Insured INR 50,000 for level Sr Manager and above or actual weekly salary whichever is lower. Medical extension :covered up to INR 15,000 for accidental Injury on IPD or OPD Ambulance- INR 3,000 Terrorism is covered Your Plan Details

45 Partial Accident Disability Chart Event Percentage of Sum Insured Payable The sight of one eye or the actual loss by physical separation of one entire hand or one entire foot. 50% 50% Use of a hand or a foot without physical separation 50% Loss of speech 50% Loss of toes – all 20% Loss of toes great - both phalanges 5% Loss of toes great - one phalanx 2% Loss of toes other than great, if more than one toe lost: each 2% Loss of hearing - both ears 75% Loss of hearing - one ear 30% Loss of four fingers and thumb of one hand 50% Loss of four fingers of one hand 40% 46 Partial Accident Disability Chart Event Percentage of Sum Insured Payable Loss of thumb - both phalanges 25% Loss of thumb – one phalanx 10% Loss of index finger – three phalanges 15% Loss of index finger – two phalanges 10% Loss of index finger - one phalanx 5% Loss of middle finger or ring finger or little finger – three phalanges 10% Loss of middle finger or ring finger or little finger – two phalanges 7% Loss of middle finger or ring finger or little finger - one phalanx 3% Loss of thumb - both phalanges 25% Loss of thumb – one phalanx 10% Loss of index finger – three phalanges 15%

47 Key Exclusions ▪ Suicide, attempted suicide (whether sane or insane) or intentionally self-inflicted Injury or illness, or sexually transmitted conditions, mental or nervous disorder, anxiety, stress or depression, Acquired Immune Deficiency Syndrome (AIDS), Human Immune-deficiency Virus (HIV) infection; or ▪ Being under the influence of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Physician and taken as prescribed; or ▪

Participation in an actual or attempted felony, riot, crime, misdemeanor, (excluding traffic violations) or civil commotion; or ▪ Operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft; or Scheduled Aircraft.; or ▪ Self exposure to needless peril (except in an attempt to save human life); ▪ Loss due to child birth or pregnancy. Your Plan Details 48 Group Personal Accident – Claim Procedure Employee / Beneficiary notifies HR, who in turn would intimate Insurer and submit required claims documents within 14 days of the event On obtaining all relevant documents, Insurer begins processing the claims Claim Investigation and Review post submission of all the required documents Is claim approved? On approval, the cheque is sent to the HR, from where it is given to the Employee / Beneficiary On rejection of the claim, Insurer would provide a valid reason for the rejection to HR / Employee / Beneficiary Yes No Making A Claim 49 Document Check List Document Details 1 Completed Claim form 2 Doctor's Report 3 Disability Certificate from the Doctor, if any 4 Investigation/ Lab reports (x-ray etc.) 5 Original Admission / discharge card, if hospitalized 6 Employers Leave Certificate & Details of salary Weekly Benefit / Temporary Disability Claims Disablement Claims Document Details 1 Completed Claim form 2 Doctor's Report 3 Disability Certificate from the Doctor, if any 4 Investigation / Lab reports (x-ray etc.) 5 Original Admission / discharge card, if hospitalized 6 Police Inquest report, wherever applicable This is an indicative list of documents and there may be additional documents required by the insurer. It is mandatory to provide the details for nomination of beneficiary. Making A Claim Typical Documents Needed 50 Know Your Benefits Group Term Life Benefits (GTL) Confidential Document The information contained here is only a summary of the employee benefit insurance policy documents which are kept by your employer. If there is a conflict in interpretation, then the terms & conditions of the applicable policy document will prevail. Group Term Life Insurance Scheme is meant to provide life insurance protection to the employees. The Policy provides for payment of a lump sum to the nominated beneficiary in the unfortunate event of the employee's death due to any cause. Plans may be subject to a Free Cover Limit and requirement for medical tests or these may be waived off as per specific terms relating to your group 51 Your Plan Details Plan Name Group Term Life Policy Holder Legato Health Technologies LLP Policy period 07th February 2022 – 06th February 2023 Insurer Aditya Birla Sun Life Insurance Co. Sum Insured 5 times of CTC Members Covered Employee Age limit 18 – 65 years Schedule of benefits Accidental Death up to 100% of SI Free Cover Limit of INR 50,000,000 52 Claim Procedure & Claim Documents Type of Claim Requirement Death (all causes of death #) Critical Illness And Disability 1. Claim Forms Part I: Application Form for Death Claim (Claimant's Statement) # Part II: Physician's Statement, relevant Hospital records and report from the concerned medical specialist giving nature of disability and illness (for Critical Illness claims). 2. Death Certificate issued by a local government body like Municipal Corporation/Village Panchayat # 3. Medical Cause of Death Certificate issued by attending physician/hospital # 4. Attested True Copies of Indoor case Papers of the hospital(s) 5. Post-mortem Report (Autopsy Report) & Chemical Viscera Report – if performed # 6. The Beneficiary : - Photo ID with DOB with relationship to the insured - Proof of legal title to the claim proceeds (e.g., legal succession papers, assignment deed etc.) 7. Employer's Certificate 8. Leave Records for the past 3 years If Death due to Accident (submit in addition to the above) All Police Reports / First Information & Final Investigation Report Proof of Accident – Panchnama / Inquest Report Newspaper cutting / Photographs of the accident – if available The above is an indicative list of documents, and the insurer reserves the right to ask for additional proofs & documents in support of the claim. Policyholder shall inform the insurance company of any claim within 30 days of the claim event. Making A Claim Private and Confidential | 52 53 Legal Disclaimer About Aon: Aon plc (NYSE:AON) is a leading global professional services firm providing a broad range of risk, retirement and health solutions. Our 50,000

colleagues in 120 countries empower results for clients by using proprietary data and analytics to deliver insights that reduce volatility and improve performance. The information contained herein, and the statements expressed are of a general nature and are not intended to address the circumstances of any particular individual or entity. Although we endeavour to provide accurate and timely information and use sources, we consider reliable, there can be no guarantee that such information is accurate as of the date it is received or that it will continue to be accurate in the future. No one should act on such information without appropriate professional advice after a thorough examination of the particular situation. [www.aon.com](http://www.aon.com) Proprietary & Confidential Thank you