

EMPLOYEE BENEFIT MANUAL

CONSERO SOLUTIONS INDIA PVT LTD



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Prepared by

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Program Details

Group Medclaim
(GMC)

Provides insurance coverage to employees and their Dependents 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

Group Term Life

Provides Insurance coverage against the risk of death.



Medical Benefits



Medical Benefit – Policy Details

Policy Parameter	
➤ Insurer	THE NEW INDIA ASSURANCE CO LTD
➤ TPA	Medsave Healthcare (TPA) Ltd
➤ Policy Number	32220034210400000036
➤ Policy Start Date	27 th June 2021
➤ Policy End Date	26 rd June 2022
➤ Dependent Coverage	1+5 (Employee + Spouse + 2 dependent children + 2 Parents/Parents in Law)
➤ Sum Insured	3 lacs per family

Benefits / Extensions	Coverage
➤ Age Limit	▪ 0-80 Years
➤ TPA Service	▪ Yes
➤ Pre existing diseases	▪ Yes
➤ Waiver of 30 days waiting period and Waiver of time / year exclusion	▪ Yes
➤ Day Care	▪ Yes
➤ Waiver of 9 months waiting period for maternity	▪ Waived off
➤ Maternity benefits	▪ Yes INR 50,000 for Normal and INR 60,000 C section
➤ Baby cover day 1	▪ Yes

Benefits / Extensions	Coverage
➤ Room Rent Capping	• RESTRICTED TO RS 3000 FOR NORMAL AND RS 6000 FOR ICU(PROPORTIONATE CHARGES APPLY)
➤ Internal Congenital diseases	▪ Covered
➤ Ambulance services	▪ Actual subject to a maximum of Rs. 2,000/- per case wise
➤ Co-Pay	▪ 10% co pay on all claims and not on capped ailments



Benefits / Extensions	Coverage
➤ Ayush treatment	▪ covered Upto 25% of the subject to Max of Rs.25,000 Per policy period
➤ Ailment Capping	▪ Cataract Rs.25000, Hysterectomy , Rs.35,000, Appendicitis Rs.35,000, joint replacement 150,000, Hernia Rs.35,000
➤ Co Pay	▪ 10% Copay on all Claims, not applicable on capped ailments



NEW INCLUSIONS FOR 2021-2022

➤ Home Isolation Charges

- 1. Two RTPCR tests per infected person.
- 2. Medical consultation capped at INR 2,500/-
- 3. All doctor prescribed medicines.
- Not Exceeding 15 days
- Upto 10,000



Medical Benefit – Dependant Coverage

Maximum no of Members insured in a family	1 + 5
Employee	Yes
Spouse	Yes
Children	Yes (for the first 2 living Children)
Parents/Parents-in-Law	Yes
Siblings	No
Others	No
Mid Term enrollment of existing Dependents	Disallowed
Mid Term enrollment of New Joinee's (New employees + their Dependents)	Allowed (within 30 days of Joining)
Mid term enrollment of new dependents (Spouse/Children)	Allowed (Due to Marriage and birth). Within 30 days of marriage or birth



Medical Benefit – Policy Period

Existing Employees + Dependents	
Commencement Date	27 th June 2021
Termination Date	26th June 2022
New Joinees + Dependents	
Commencement Date	Date of joining, subject to declaration to Insurer within 30 days from date of join.
Termination Date	26th June 2022 or last working day at Consero whichever is earlier
New Dependents (due to Marriage / Birth)	
Commencement Date for New dependents due to marriage	Date of marriage subject to declaration to Insurer within 30 days from date of marriage.
Commencement Date for New dependents due to birth	Date of Birth subject to declaration to Insurer within 30 days from date of birth.
Termination Date	26th June 2022 or last working day at Consero whichever is earlier



Medical Benefit – Standard Coverage

Covers expenses related to

- Room and boarding
- Doctors fees
- Intensive Care Unit
- Nursing expenses
- 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. Expenses will be reimbursed to the covered member depending on the level of cover that he/she is entitled to.

B) Expenses on Hospitalisation for minimum period of 24 hours are admissible. However this time limit will not apply for specific treatments i.e. Dialysis, Chemotherapy, Radiotherapy,, Lithotripsy (kidney stone removal), Tonsillectomy, D & C taken in the Hospital/Nursing home and the insured is discharged on the same day of the treatment will be considered to be taken under Hospitalisation Benefit.



Pre & Post Hospitalization Expenses

Pre-hospitalisation Expenses	
Definition	<ul style="list-style-type: none"> ▪ 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-hospitalization Expenses for up to 30 days prior to his / her Hospitalization.
Duration	<ul style="list-style-type: none"> ▪ 30 Days



← 30 Days



60 Days →



Post-hospitalisation Expenses	
Definition	<ul style="list-style-type: none"> ▪ 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.
Duration	<ul style="list-style-type: none"> ▪ 60 Days



Maternity Benefits

Benefit Details	
Benefit Amount	▪ Normal delivery –INR 50,000 and C-section – up to INR 60,000
Restriction on no of children	▪ Maximum of 2 children
9 Months waiting period	▪ Waived off



- These benefits are admissible in case of hospitalisation 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.



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
- HIV and AIDS
- 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
- Naturopathy and homeopathy excluded
- Any non-medical expenses like registration fees, admission fees, charges for medical records, cafeteria charges, telephone charges, etc
- Cost of spectacles, contact lenses, hearing aids and any medical equipment/devices
- Any cosmetic or plastic surgery except for correction of injury
- Hospitalization for diagnostic tests only
- Vitamins and tonics unless used for treatment of injury or disease
- Infertility/fertility treatment
- Voluntary termination of pregnancy during first 12 weeks (MTP)
- Others: Example- Service Tax, Luxury Tax, barber or attendant charges etc.

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Next



Medical Benefit – Cashless Process

Cashless means the TPA may authorize upon a Policyholder's request for direct settlement of eligible services and it's according charges between a 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 as these services are covered under the Policy.

Planned Hospitalization

Emergency Hospitalization

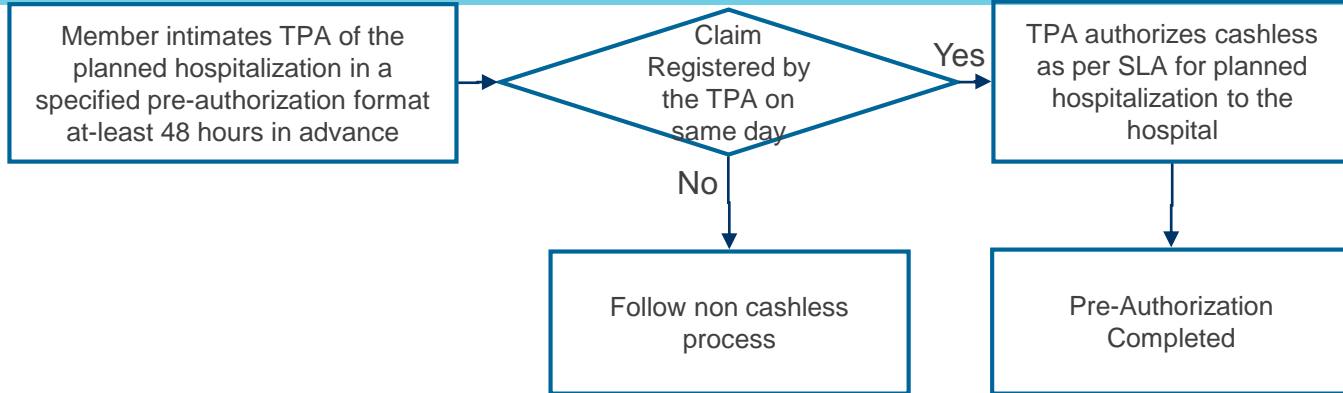
Note : Patients seeking treatment under cashless hospitalization are eligible to make claims under pre and post hospitalization expenses. For all such expenses the bills and other required documents needs to submitted separately as part of the claims reimbursement.



Planned Hospitalization

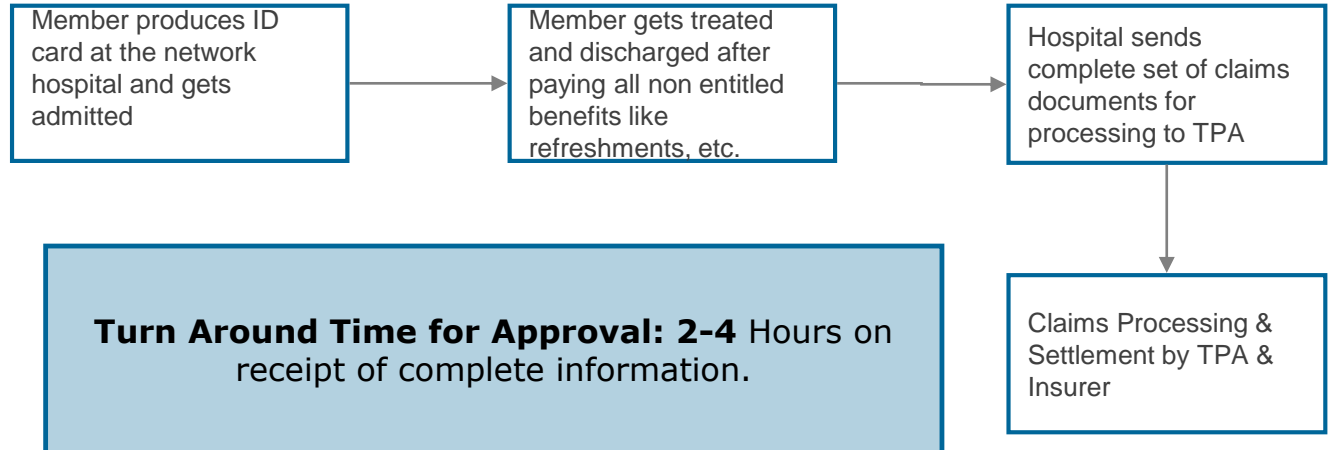
Step 1 Pre-Authorization

All non-emergency hospitalisation 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/employee is not inconvenienced when taking admission into a Network Hospital.

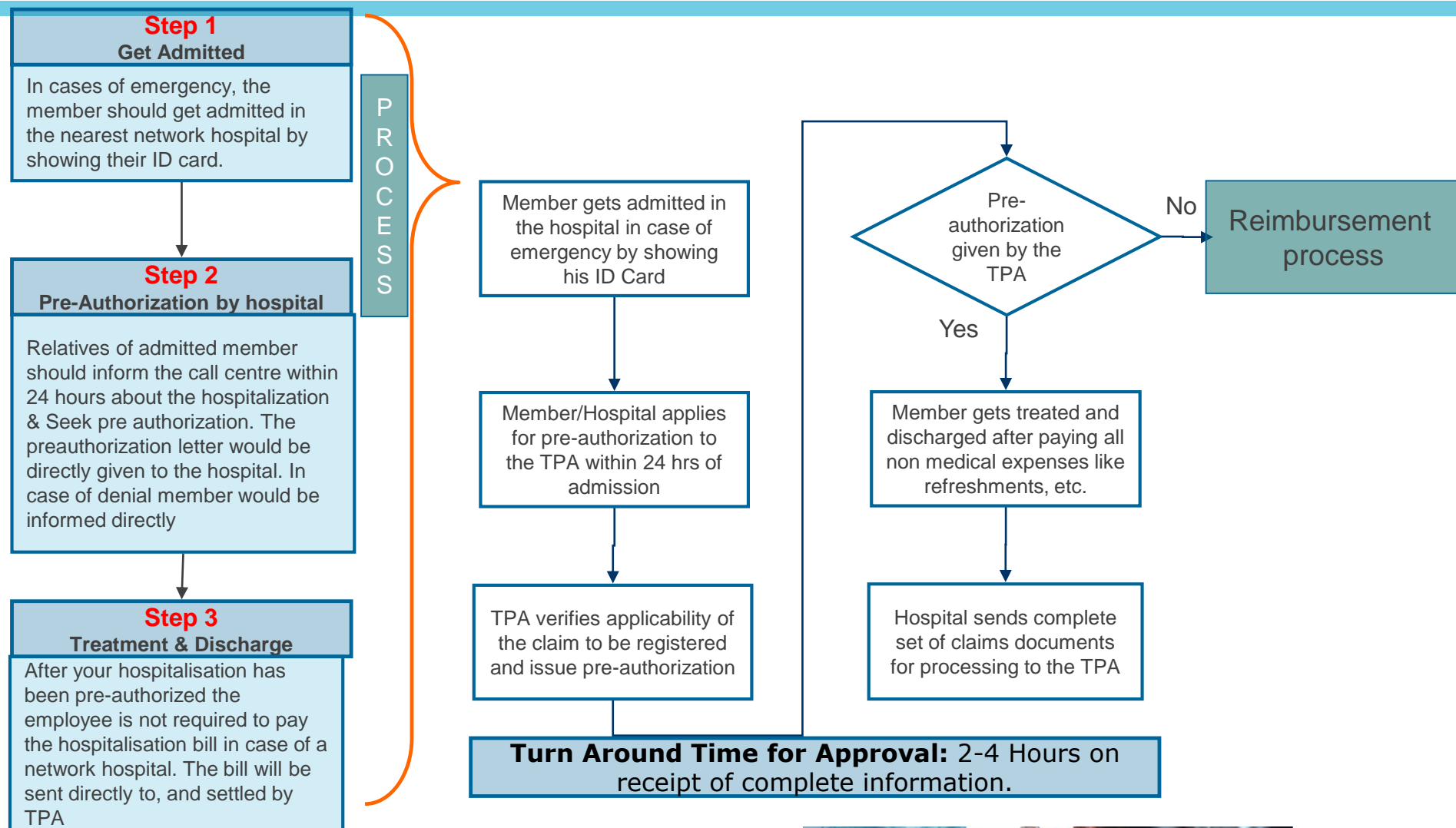


Step 2 Admission, Treatment & discharge

After your hospitalisation 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 employee is not required to pay the hospitalisation bill in case of a network hospital. The bill will be sent directly to, and settled by TPA



Emergency Hospitalization & Process



Reimbursement Claims

Admission procedure

- 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 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. in original for submitting your claim.

Intimation & Submission of hospitalization claim

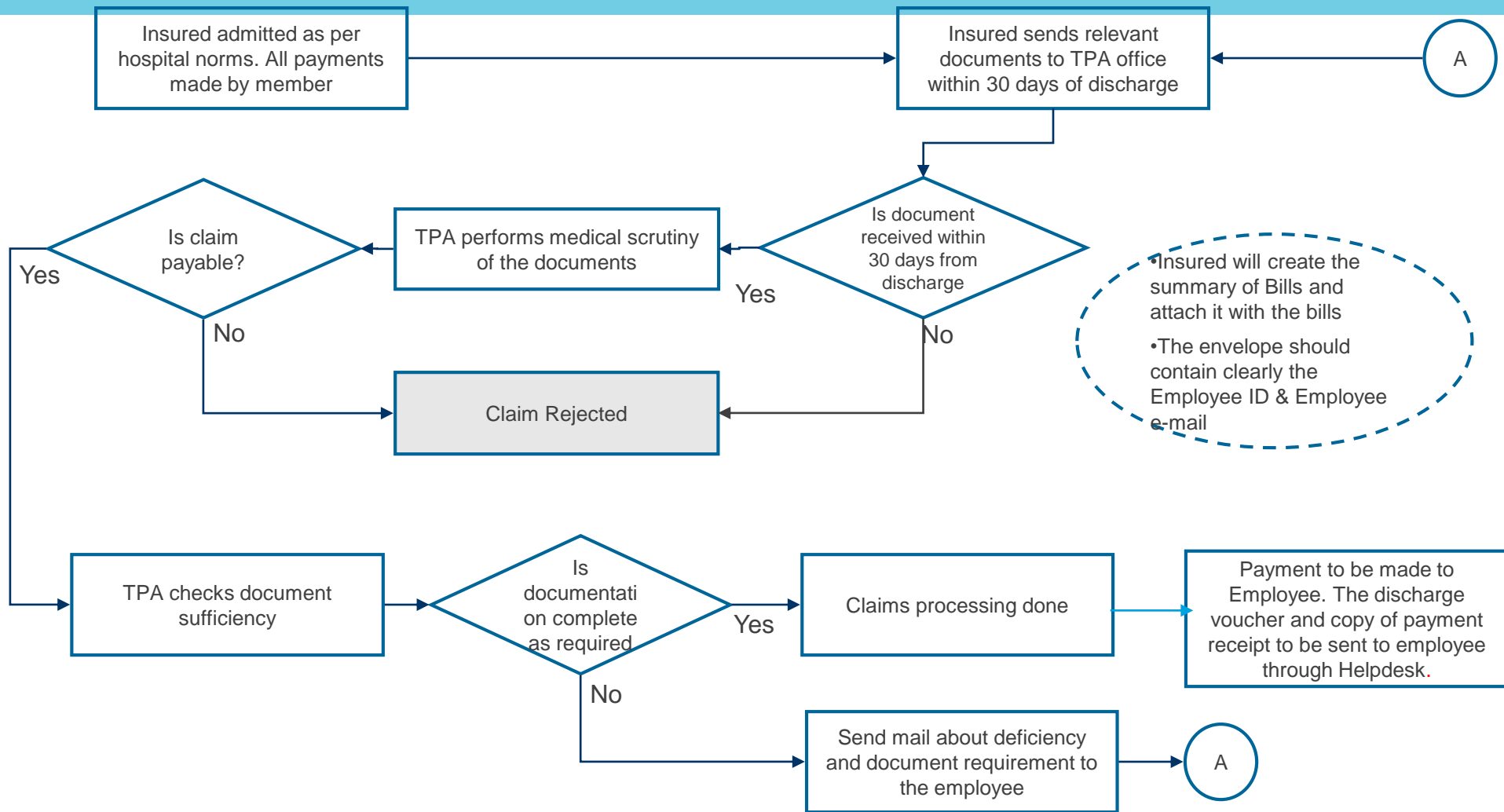
- **Claim intimation clause is applicable under the policy. For all reimbursement claims, employees need to intimate TPA within 15 days from the date of discharge either through the call center or through the website.**
- You must submit the final claim with all relevant documents within 30 days from the date of discharge from the hospital.

Claims Process

Claim Docs



Reimbursement Claims Process



Claims Document List

Claim Form Duly signed by the customer (attached) (Original)
Discharge Summary (Original)
Hospital Final bill with breakup (Original)
Hospital bill Paid Receipt (Original)
Investigation Reports with doctor's advice
Pharmacy bills with Dr. Prescriptions (Original)
Dr. Consultation Papers. (Original)
Indoor Case Papers & Admission note. (Copies)
MLC/FIR Copy (Only in case of Self fall or Road Accident) (Copies)
Non-Alcohol Certificate from Treating Doctor. (Only in case of Self fall or Road Accident) (Original)
X-Ray Films and Reports (Original)
Personalized Cancelled Cheque (Copies)
NEFT Form with Bank attest is required if Cheque is not personalized. (Original)
Photo ID Proof of the Patient. (Copies)

Turn Around Time for settlement: 15 working days on receipt of complete documents.

*Please retain photocopies of all documents submitted



Prudent Utilization of Benefit



- Health Insurance is a benefit for the employee and their dependents. One has to utilize the benefit with utmost caution and prudence.
- The ever increasing cost for the benefits require a proactive involvement from all of us.
- The following steps are recommended, ensuring the benefits is prudently utilized by the employee and dependents



Please ensure to crosscheck the final bill sent to the TPA for the following:

- ✓ You are Billed only for the services utilized for e.g. category of room, diagnostics undergone , medicines consumed



- ✓ Total of the bill

In case of any planned hospitalization, approach the hospital in advance(48 hrs) and request pre authorization- *this enables TPA to further negotiate the rates*



To approach hospitals with caution – ***most expensive is not necessarily the best.***



To cross check the tariff with the ***Bench Mark Rates*** provided- the benchmark rates would give an idea general spend for the treatment or procedure.



Try to negotiate , Ask **WHY & WHAT** is billed to you (as a consumer , we have the right to know)



GMC – Contact Details

Providers					
Insurer : Oriental Insurance Co Ltd <u>TPA: MEDSAVE</u>	Levels	Name	Designation	Contact Details	E-mail Id
	Single Point of Contact	MR. SIVASHANKAR	Service Manager	9606933559	Crmbangalore3@medsave.in
	Escalation 1	MR. KARAN GROVER	Account Manager	7899112484	Karan.grover@medsave.in
	<u>Hospital Network List</u> Note: The attached hospital list is dynamic & subject to change on daily basis. Please check for updated hospital detail through https://medsave.in/GeneralHospital.aspx before admission for cashless facility.				
<u>MARSH SPOC : Shivaraj Pujar Shivaraj.pujar@marsh.com</u>					
Marsh India- Escalation Point	<u>Level 1 : D V Indushree</u> DV.Indushree@marsh.com <u>Level 2 : Vidya Ramesh</u> vidya.ramesh@marsh.com				



Thank You



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