

Employee Benefits Manual

... Helping our clients
manage employee expectations 24 x 7, 365 days a year

M/s. National Payments Corporation of India

Contents

Insurance Benefits Manual
For the Year 2021-22

Proceed

Main Menu

A. Program Details

B. Contacts

C. FAQs and Links



Covid Benefit Details

Policy Parameters

| | |
|-----------------|---|
| Insurer / TPA | The New India Assurance Co. Ltd /Paramount Health Services |
| Policy Period | 21/05/2021--01/03/2022 |
| Family Coverage | Individual Sum Insured 😊+😊+😊😊 +😊😊 Employee + Spouse+ 2 Dependent Children(up to 25 years) +2 Dependent Parents (up to 65 Years) |
| Sum Insured | 3 lakh Individual |



Applicable Members



| | |
|----------|----------------------|
| Employee | Yes up to 65 years |
| Spouse | Yes up to 65 years |
| Children | Yes (up to 25 years) |
| Parents | Yes (up to 65 years) |

COVID TEST MUST BE POSITIVE

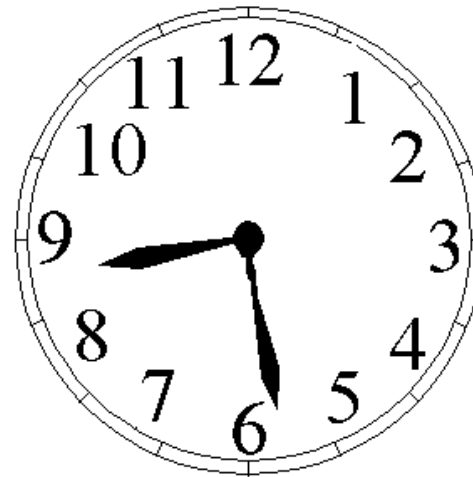


- This is Covid Policy.
- Covid-19 Test must be positive to claim under this policy.

Standard Hospitalization: 24 hours

Reimbursement of 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
- Organ transplantation charges



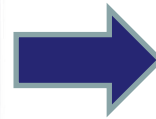
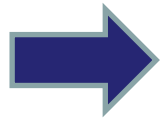
A) The expenses shall be reimbursed provided they are **incurred in India** and within the policy period. Expenses will be reimbursed to the covered member depending on the level of cover that he/she is entitled to.

Pre- and Post-Hospitalization Expenses Period

Reimbursement of expenses related to



15 days



30 days



Room Rent



Room Rent and Boarding

No Room Rent Restriction

The amounts payable under room rent shall be at the rate applicable to the entitled room category. In case insured opts for a room with rent higher than the entitled category, then all the charges payable under OT, surgeon, anaesthetist, etc shall be limited to the charges applicable to the entitled category. The difference in the entire charges has to be paid by the employee.

Co-Morbidity Exclusion- Not Applicable



Co-Morbidity

Insured Member(s) is/are not suffering from fever or suffering /suffered from diabetes, hypertension, disease related to heart/lungs/kidney/liver, cancer, stroke or any condition that needs ongoing medication or the insured members(s) is/are due for any medical treatment, at the time of buying this policy.

Initial Waiting Period -15 days



Initial Waiting -15 days

Any Illness diagnosed or diagnosable within 15 days of the effective date of the Policy Period if this is the first Health Policy taken by the Policyholder with the Insurer. If the Policyholder renews the Health Policy with the Insurer and increases the Limit of Indemnity, then this exclusion should apply in relation to the amount by which the Limit of Indemnity has been increased. But in this policy said exclusion is not applicable.

Home Care Treatment Expenses

Home Care Treatment means Treatment availed by the Insured Person at home for Covid on positive diagnosis of Covid in a Government authorized diagnostic Centre, which in normal course would require care and treatment at a hospital but is actually taken at home maximum **Payable upto maximum of 14 days (INR 15,000)**

- a) The Medical practitioner advises the Insured person to undergo treatment at home.
- b) There is a continuous active line of treatment with monitoring of the health status by a medical practitioner for each day through the duration of the home care treatment.
- c) Daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained.
- d) Insured shall be permitted to avail the services as prescribed by the medical practitioner. Cashless or reimbursement facility shall be offered under homecare expenses subject to claim settlement policy disclosed in the website.
- e) In case the insured intends to avail the services of non-network provider claim shall be subject to reimbursement, a prior approval from the Insurer needs to be taken before availing such services.

In this benefit, the following shall be covered if prescribed by the treating medical practitioner and is related to treatment of COVID,

- a. Diagnostic tests undergone at home or at diagnostics centre
- b. Medicines prescribed in writing
- c. Consultation charges of the medical practitioner
- d. Nursing charges related to medical staff
- e. Medical procedures limited to parenteral administration of medicines f. Cost of Pulse Oximeter, Oxygen cylinder and Nebulizer

Customized Benefit: Ambulance Services



Ambulance Services (Road)

Definition

Road Ambulance – to hospital, back home where medically necessitated

Sub-limit

Maximum of Rs.2000

General Exclusions

- All Non Medical Expenditure
- Hospitalisation expenses not in lieu of treatment for Coronavirus disease (COVID-19) will not be covered.
- Insured members already treated for or quarantined for Coronavirus disease (COVID-19) before the policy issuance will not be covered.
- Treatment taken outside India will not be covered.
- Hospitalisation expenses for patients only under investigation with inconclusive medical report will not be covered. Test report for Coronavirus disease (COVID-19) conducted from centres other than Govt/ICMR Authorized test Centre in India from National Institute of Virology, Pune will not be considered



Cashless Hospitalization

Cashless hospitalization means the Administrator may authorize upon a Policyholder's request for direct settlement of eligible services and it's according charges between a Network Hospital and the Administrator. In such case the Administrator will directly settle all eligible amounts with the Network Hospital and the Insured 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.

Call us on 07506930141
Jagdeesh

Hospital Link for cashless: www.paramounttpa.com



Documents Require for Cashless Claims & Reimbursements

- Consultation papers or hospital record at time of admission.
- COVID-19 Positive test report from ICMR authorized labs.
- All other test reports.
- Insured government ID details (Driving License, Employee Card, Voter ID or PAN).
- Employee ID card details. In case, employee's family member is hospitalized, employee's ID proof will be needed along with the patient's Govt ID.
- Covid E-card copy

Additional documents required for Reimbursements.

- Discharge summary
- Cancelled Cheque/ NEFT details.
- All Original bills (Final bill, break up, Pharmacy and test bills, etc)

- **Intimation**
- Insured calls Paramount/Prudent to register the reimbursement claim
- Paramount registers the claim and triggers a link for document upload.
- The intimation must be sent to Paramount 48hrs before the planned hospitalization and within 24hrs in case of emergency .

- **Documents Upload**
- Insured uploads all the relevant documents
- Claims team assesses the documents and approves/ denies the claim.

A dark blue square icon containing a white silhouette of a house with a chimney.

Claims Process

Claim Docs

Settlement

- Approval for the treatment is given by Paramount TPA in Cashless.
- Amount is settled with the Hospital/ Provider directly in cashless.
- Amount will be paid to Insured after submitting all require documents in Reimbursement.

Prudent Insurance Brokers Pvt Ltd - Contact Details

Address: 101, Tower B, Peninsula Business Park, Lower Parel, Mumbai-400 013

Telephone: + 91 22 3306 6000 Fax: + 91 22 3306 6088

| Mumbai | |
|--|--|
| For Cashless | For Reimbursement |
| Mr. Jagdeesh | Mr. Akshay Rane |
| +91 7506930141 | +91 8291988729 |
| cashless@prudentbrokers.com | mumbaiclaims@prudentbrokers.com |

THANK YOU