

Medical Insurance Policy Handbook

Group Medclaim Policy (GMC): It is Group health insurance Policy which covers Employee and his/her family members (As per Mandate Form). It is also called family floater policy and sum insured can be availed by all covered members.

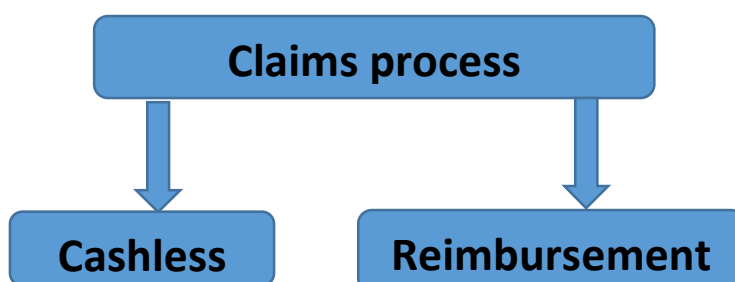
Benefits of GMC policy: GMC Policy provides following benefits to the Employee & Dependent.

1. **Cashless hospitalization at network hospitals**
2. **Pre-and post-hospitalization charge**
3. **Coverage for Pre-illness**
4. **Coverage for dependents**
5. **Coverage for ambulance charges**
6. **Coverage of Maternity:** (It is applicable for first two Live child only)

Benefit for the Employees:

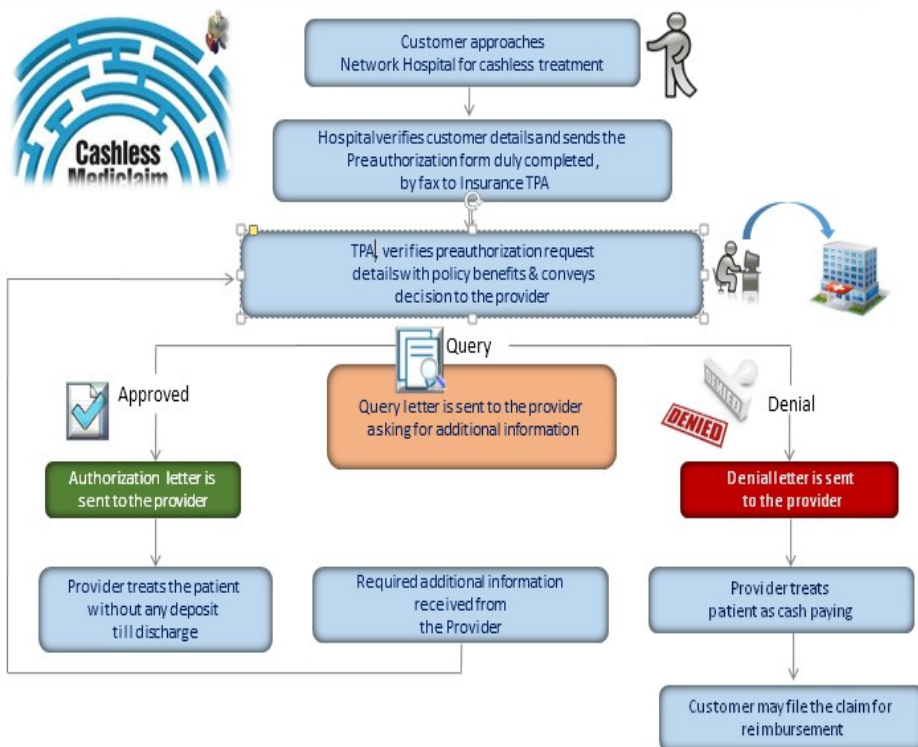
1. **Default Insurance Cost:** All members of the group get the 'auto cover' simply by being part of that group. It ensures basic Medical insurance coverage to people who serve are without any Health insurance.
2. **Institutional Support during a Claim:** As irrespective of the health state, insurance is offered to all members of the group, it is of great value to people who are looking for a health insurance but cannot get it at an affordable rate because of their current health state.
3. **No Medical Check-Up Is Required:** When it comes to a group health insurance, you don't need to undergo a medical check-up and submit medical reports to get enrolled under a group health plan.
4. **Maternity Coverage from Day 1:** From the Day 1, maternity expenses are covered by the group health cover in almost all companies. It means, if you join a company and become the part of a group health insurance, you will get maternity benefits on an immediate basis.
5. **No Waiting Period:** There is no concept of waiting period in group health covers and thus, even illnesses like heart issues, diabetes, etc.; are covered from Day 1.
6. **Useful for Employee's Wellbeing:** Group health insurance policies play a crucial role in securing the health of employees and their families.

Claim Process under GMC Policy: Below is the detail process of Claim under GMC policy

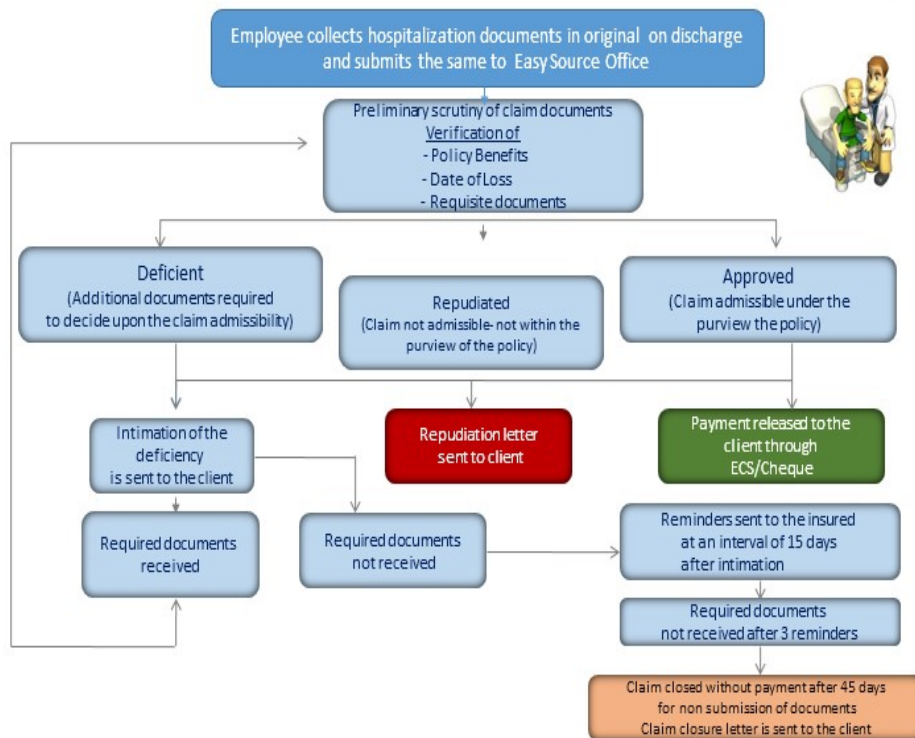


To register your claim on the phone, please dial **Toll Free Number: 1800-209-5858**

Cashless Claim Process



Reimbursement Claim Process



Documents Required for Reimbursement: Following Documents required to avail Reimbursement:

1. Claim form duly filled and signed by the insured
2. Original discharge summary
3. Original hospital bill with detailed cost break-up
4. Original paid receipts
5. All Lab and test reports
6. Fully filled NEFT details form
7. Copy of Invoice/Stickers/barcode in case of implants
8. First consultation letter from doctor

Network Hospital: It is Panel hospital where Employee can take Cashless benefit such list are available on insurance company website.

Employee need to visit website of insurance company on given link

<http://general.bajajallianz.com/BagicNxt/hm/hmSearchState.do>

Home page of Hospital list:

Health Network Hospital

(Hospitals having discounts and offers for Bajaj Allianz customers are shaded Sky Blue below)

Hospitals not Eligible for Cashless and Reimbursement

Hospital Of The Month

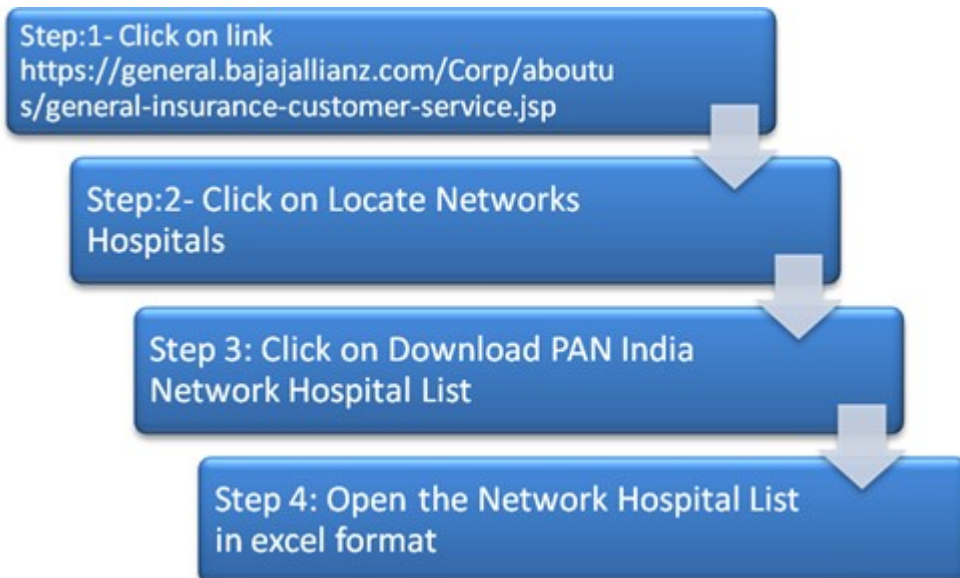
Search Network Hospital

State Name	--Select a State--	City Name	--Select a City--	Hospital Name	<input type="text"/>
Hospital Type	--Select--	Hospital Grade	--Select--		

Click on hospital name to check the discount details.

Sr No	Hospital Name	Hospital Address	City Name	Pin Code	State Name	Hospital Type	Contact Number	SMS	Email	Map	Rating
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Step by Step to download updated Hospital list:



FAQ on GMC Policy:

Q. What is E card?

A. E card is Soft copy of GMC card and equivalent to physical card to avail medical facility.

Q. What is Cashless?

A. Cashless means Insurance Company will pay your medical expense to Hospital directly as per their terms & Conditions.

Q. What is Reimbursement claim?

A. Reimbursement claim means Insurance Company will pay you when you will submit all required documents to insurance company.

Q. What is TPA?

A. TPA means Third Party Administration it take care all claims and document related query. There are two types of TPA one of Hospital TPA and second Insurance TPA. They both work together in every claim.

Q. Is photocopy document accepted?

A. No, If you will take claim then you will have to provide all original documents.

Q. What to do if found any discrepancy in Medical card?

A. Report Easy Source within 15 Days once you receive your medical card with Aadhaar Card.

Q. What is the process to add new born and newly married member?

A. Employee need to mail in Easy Source at helpdesk@easysourceindia.com within 3 weeks with Birth Certificate/Marriage certificate to enrol in the policy. After that it is not allowed.

Q. What is mid-term addition/deletion?

A. Once Employee & his family enrol in this policy from date of inception to End date of Policy, no other family member can be added or deleted before the end of policy.

Q. What is non Payable Item in GMC claim?

A. Non payable item are specified item which being used in treatment but not payable by the insurance company. Employee can ask TPA about non payable item name.

Q. What is the time limit for Reimbursement claim submission?

A. Every claim should be submitted to Easy Source Office within 15 days from the date of Discharge.

*******We wish you and your family to enjoy good health*******