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सं.एफ.प्रशासनIII/बीमा/जी.एम.आई.एस.23-24/2023/Cir/E/430  
F.Admn.III/Ins/GMIS/23-24/2023/Cir/E/430

दिनांक/Dated:12.01.2023

## CIRCULAR

Sub : Group Mediclaim Insurance Scheme (GMIS) for Employees and their eligible dependents, Group Personal Accident (GPA) Policy only for Employees from 01.02.2023 to 31.01.2024 –Option for GMIS additional coverage – Reg.

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The Group Mediclaim Insurance (GMI) Policy and Personal Accident Policy (PAP) has been finalized for a period of one year **from 01.02.2023 to 31.01.2024**. M/s. IFFCO TOKIO General Insurance Company Limited will be the Insurance Company for the GMIS Policy for the year 2023-24. The details of coverage are as follows:-

### Group Mediclaim Insurance (GMI) Policy:

- 1) Basic Coverage:** - All the employees and their eligible dependents are covered **automatically** with a basic coverage of **Rs.3,00,000/-**. (Three Lakhs only) There is no need to apply through workflow for basic coverage.
- 2) Additional Medical Insurance Coverage:** - Additional medical insurance coverage per employee and their eligible dependents will be covered on payment of premium by the employee as per the table given below:-

Additional Coverage Sum Insured	Rs.2,00,000/-	Rs.4,00,000/-
Annual premium for Employees and their eligible dependents (incl. of GST)	Rs.28,496/-	Rs.41,653/-

As per the acceptance of LOCK-IN condition for additional coverage submitted by the Employee in the previous year GMI policy (2022-23), the Employees who have already opted for additional coverage (irrespective of any slab) will be automatically continued in the new GMI policy 2023-24 with the same additional coverage value.

The Employees who wish to change the additional coverage slab (2 Lakh to 4 Lakh or vice versa), may apply for additional coverage in 2023-24 policy year are requested to opt through workflow at HumanResource/Insurance/GMIS Additional Coverage on or before **24.01.2023**. Registration other than workflow will not be accepted. Options received after the due date (24.01.2023) will not be considered under any circumstances.

The Employees who do not wish to continue the additional coverage need to send their Opt-out request to Deputy Registrar (Admn.) / Assistant Registrar (Admn.III) through mail to [dradmin@iitm.ac.in](mailto:dradmin@iitm.ac.in) / [mediinsurance@iitm.ac.in](mailto:mediinsurance@iitm.ac.in) on or before 24.01.2023. Please note that the employees who are opting-out from the additional coverage will be in LOCK-OUT condition for two years. I.e. they are not allowed to apply for additional coverage for the Policy year 2024-2025 also.

### LOCK-In & LOCK-Out period – 2 Years for Additional Coverage:

The Employees taking additional coverage in the policy year (2023-24) will not be allowed to opt-out of it for next one more year i.e. the employees will be in LOCK-In period for two consecutive years. If any employee voluntarily opting out during this LOCK-In period, such employees will not be permitted to take additional coverage for two consecutive years (LOCK-Out period) from the opt-out year.

Based on the options, respective premium amount will be deducted in six equal installments from the salary of March 2023 (*payable in April 2023*) to August 2023.

The Head of the Departments / Centres / Sections may ensure wide circulation for their faculty / staff members who wish to opt / change for additional Medical insurance coverage.

The Visiting / Inspire/ Ramanujan Fellow Faculty members who wished to be covered under Medical insurance, may approach the Deputy Registrar (Admn.) / Assistant Registrar (Admn.III) for enrollment. It is also informed that the premium for Basic and opted Additional Coverage will be communicated through e-mail by the Assistant Registrar (Admn.III) to the enrolled Visiting / Inspired/ Ramanujan Fellow Faculty members in March 2023, for premium recovery from Salary / remuneration.

3) **Buffer Comprehensive Medical Cover:** - Buffer value of Rs. 75 lakh, subject to a maximum limit of

- Rs.5 lakh/ family for conditions listed in Annexure-I (A)
- Rs.20 lakh/ family for conditions listed in Annexure-I (B)

On first cum first served basis for Employees / Pensioners / Family Pensioners and their dependents. The request for buffer amount should be submitted to Deputy Registrar (Admn.) / Assistant Registrar (Admn.III) with relevant medical reports. The approval of Buffer amount is subject to the eligibility of treatment as per Annexure-I (A) and I (B), availability of Buffer coverage at the time of application/treatment, and approval of Medical Board / CMO of IITM as communicated to Deputy Registrar (Admn.) / Assistant Registrar (Admn.III).

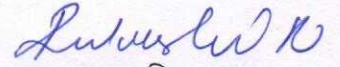
The Terms & Conditions of the Group Medclaim Insurance Scheme are given in the Annexure-I. IIT Madras has appointed M/s. Medi Assist Insurance TPA Pvt. Ltd. as Third Party Administrator (TPA) for administering the Group Medclaim Insurance Policy for 2023 – 2024 and the appointed TPA will issue E-card as early as possible. The E-card will be uploaded to the FSPORTAL and the respective employee may use their login credentials to download the E-card. The information for downloading the E-card will be communicated through announce e-mail.

Medi Assist (TPA) has a customer service portal <https://portal.mediassist.in> and MediBuddy mobile app, employees can get E-card and also submit and track reimbursements etc., through the portal and the app.

Address	Contact Persons
<p><b>Insurance Company</b></p> <p>M/s. IFFCO TOKIO General Insurance Co.Ltd., No.128, 3<sup>rd</sup> Floor, IFFCO Bhavan, Habibullah Road, T Nagar, Chennai - 600 017 Phone No.: 044-49012819</p>	<p><b>Senior Manager:</b> <b>Mr. M.R. Shrinath - 9003104894</b> <a href="mailto:mrshrinath@iffcotokio.co.in">mrshrinath@iffcotokio.co.in</a></p> <p><b>Assistant Manager:</b> <b>Mr. Muhammed Ashfaque - 8590036900</b> <a href="mailto:muhammed.ashfaque@iffcotokio.co.in">muhammed.ashfaque@iffcotokio.co.in</a></p>
<p><b>Third-Party Administrator</b></p> <p>M/s.Medi Assist Insurance TPA Private Limited 2nd Floor, RWD Atlantis Building 24, Nelson Manickam Road, Metha Nagar, Aminjikkarai, Chennai – 600 030</p> <p>E-mail ID: <a href="mailto:iitmadras@mediassist.in">iitmadras@mediassist.in</a></p>	<p><b>For Cashless Assistance:</b></p> <p><b>1 ) Toll Free Number --1800 425 9449</b> E-mail ID: <a href="mailto:iitmadras@mediassist.in">iitmadras@mediassist.in</a></p> <p><b>2 ) Mr. Prathap M – 890-496-8976</b> E-mail ID: <a href="mailto:prathap.m@mediassist.in">prathap.m@mediassist.in</a></p> <p><b>3) Mr. Nanda Kumar - 886-779-8696</b> E-mail ID: <a href="mailto:nanda.kumar@mediassist.in">nanda.kumar@mediassist.in</a></p> <p><b>Branch Head:</b> E-mail ID: <a href="mailto:kamalanathan.p@mediassist.in">kamalanathan.p@mediassist.in</a></p>

Group Personal Accident (GPA) Policy:

The Employees of this Institute who are already covered under Medical Insurance will also be covered with a Personal Accident Policy for a maximum Sum Insured value of Rs.5 Lakhs for a period of one year **from 01.02.2023 to 31.01.2024. This policy is meant only for serving employees of this Institute. The premium for Personal Accident Policy will be borne by IIT Madras.** The conditions pertains to Personal Accident Policy is given in Annexure – II.



सह. कुलसचिव (प्रशा. III)  
Asst. Registrar (Admn. III)

To : All Employees through email announcement.

Copy to: The Director / Deans / Registrar / All Heads of Depts. / Centres / Sections – For kind Information please.

**Conditions for Group Medclaim Insurance Scheme – 2023-24****Group Medclaim Cover**

- Base cover of Rs.3,00,000/- Floater amongst Employee/ Pensioners / Family Pensioners and their dependents.
- In addition to mandatory base cover as above, Employee/Pensioner/Family Pensioner can opt for additional cover of 2 lakhs / 4 lakhs by paying additional premium.

Total (overall) sum insured per family will be base cover 3 lakhs + any additional coverage opted by Employee/Pensioner/Family Pensioner

**Buffer Comprehensive Medical Cover**

**Rs.75,00,000/-** Floater amongst Employee / Pensioners / Family Pensioners and their dependents with a ceiling of

- Rs.5 lakh/ family for conditions listed in Annexure-I (A)
  - Rs.20 lakh/ family for conditions listed in Annexure-I (B)
- On first cum first served basis for Employee/ Pensioners / Family Pensioners and their dependents.

**Claim procedure for buffer (comprehensive medical cover) utilization:**

- The treatment which comes under critical illness which are covered for buffer utilization (as listed below) will be recommended by CMO and communicated through the Deputy Registrar (Admn.) / Assistant Registrar (Admn.III) for processing.

**Illness covered for buffer utilization- A**

- Major Surgeries include cardiac surgeries, Neuro Surgeries, Brain tumor, pace maker implantation, cancer and cancer surgeries, hip, knee, joint replacement surgeries, organ transplant.
- Any debilitating illness that may lead to cancer (or) a permanent disability.
- Diseases of the Head & Neck, limbs, Thorax and abdomen where surgeries are indicated for near normal function of life.
- Renal failure.
- Stroke.
- Multiple Sclerosis.
- Major transplants other than those listed in buffer utilization – B
- Major accident claims involving RTA / burns / Lab Accidents where expenditure may incur more than the Sum Insured.
- Complication arising out of surgery performed during the policy period.
- CVA and complications.
- Complications from recent Covid Infection warranting longer periods of hospitalization.
- Any Life threatening medical conditions necessitating lifesaving critical care interventions (Not more than 5 claims during the policy period – subject to the approval of Medical Board/CMO of IITM).

**Illness covered for buffer utilization- B**

- All Cancers excludes the following:
  - (a) Carcinoma in situ including of the cervix
  - (b) Ductal Carcinoma in situ of the breast
  - (c) Papillary Carcinoma of the bladder and Stage 1 Prostate Cancer
  - (d) All skin cancers except malignant melanoma
  - (e) Stage I Hodgkin's disease
  - (f) Tumors manifesting as complications of Acquired Immune Deficiency Syndrome.
  - (g) Stage one malignancy

- Fulminant Viral Hepatitis
- Major Organ Transplant, such as for:
  - (a) Kidney
  - (b) Lung(s)
  - (c) Liver
  - (d) Heart
  - (e) Bone marrow
- AIDS
- Terminal Illness

## **SUBLIMITS**

### **Maternity:**

#### **I. Normal Delivery claims:**

- Rs.50,000/- (For those with basic coverage i.e., sum insured = base coverage)
- Rs.75,000/- (For those with 2 lakhs / 4 lakhs optional add on coverage)

#### **II. Caesarean Delivery claims:**

- Rs.75,000/- (For those with basic coverage i.e., sum insured = base coverage)
- Rs.1,25,000/- (For those with 2 lakhs / 4 lakhs optional add on coverage)

### **Cataract claims:**

- Rs.35,000/- (For those with basic coverage i.e., sum insured = base coverage)
- Rs.45,000/- (For those with 2 lakhs / 4 lakhs optional add on coverage)

### **Knee Replacement claims:**

- Rs.3 Lakhs per knee (For those with basic coverage i.e., sum insured = base coverage)
- Rs.3.5 Lakhs per knee (For those with 2 lakhs / 4 lakhs optional add on coverage)
- In case of bilateral knee/hip surgery done during the same hospitalization, reimbursement to be made up to twice if both knees done in single hospitalization.

### **Siddha / Ayurveda / Homeopathic / Unani Claims:**

- Siddha/Ayurveda/Homeopathic/Unani hospitalization expenses are admissible up to Rs.25,000/- only when the treatment is taken as in patient in a Government approved Hospital / Medical College.

### **Room Rent:**

- Room, Boarding and Nursing expenses as provided by the Hospital / Nursing Home not exceeding 1.5% of overall sum insured or the actual expenses whichever is less.

### **ICU/IMCU:**

- Intensive Care unit expenses not exceeding 3.0% of overall sum insured or the actual expenses whichever is less.

**Note:** RMO/DMO service charges are covered additional to the room rent / ICU charges but not exceeding the limit of Rs.500 per day irrespective of sum insured.

**Ambulance charges** covered up to Rs.2000/-

## **Conditions**

- Type of Cover – Family Floater Policy.
- Family Definition – Self + Spouse + eligible dependents
- Pre-existing disease covered.
- Waiting period for the first 30 days waived off.
- 1,2,3,4 years waiting period waived off.
- Maternity covered with 9 months waiting period waiver.
- Baby day-one cover benefit within the floater SI.

- Pre-post-natal coverage within the maternity limit.
- Day care treatment covered up to the Basic Coverage of SI.
- Pre-Post hospitalization coverage of 30/60 days respectively.
- Entitled room category clause waived off/ No proportionate clause applicable.
- All congenital (internal and external) and Psychiatric disorder treatments are payable.
- Dental treatment or surgery due to accidents are payable.
- Corporate buffer will not be applicable for maternity claims and cases of complication of maternity ailments.
- Claim intimation is not mandatory.
- 10% Co-payment will be applicable for each and every claim treated in non-Preferred Provider Network (PPN) hospitals. (This condition need not be insisted for treatments in cities where PPN hospitals are not available.)
- All other conditions and terms shall be as per Standard Group Medclaim policy.
- Domiciliary Hospitalization is not covered.

#### **Exclusions**

- Lasik Surgery, Septoplasty, Infertility and related ailment including male sterility, treatment on trial / experimental basis, admin/ registration / Miscellaneous/Service charges, expenses on fitting of external prosthesis, Any device/instrument/machine contributing / replacing the function of an organ, Holter monitoring / Sleep study are outside the scope of the policy.
- Outpatient treatment is not payable.
- Any disease/complication caused due to alcohol intake.
- Any disease/injury caused by war/Nuclear weapons/Radiations/breach of criminal law.
- Circumcision, cosmetic or plastic surgery unless necessitated by an accident or as part of any disease/illness.
- All health check-ups, routine eye examinations, and cost of glasses and contact lenses.
- Naturopathy treatment.
- All other conditions and terms shall be as per Standard Group Medclaim policy

#### **Hospitalization Period:**

Expenses on hospitalization are admissible only if hospitalization is for a minimum period of 24 hrs. However, this time limit of 24 hours will not apply to following specific treatments taken in the Network Hospital/Nursing Home/Specialty Centres irrespective of the bed strength where the insured is discharged on the same day. Such treatment will be considered to have been taken under Hospitalization Benefit subject to submission of day care discharge summary.

- Haemo Dialysis,
- Parenteral Chemotherapy,
- Parenteral Immunotherapy,
- Radiotherapy,
- Lithotripsy (Kidney Stone removal),
- Surgery of Eye,
- Intra ocular Eye injection and its procedure
- Surgery of Nose,
- Surgery of Throat,
- Tonsillectomy,
- Bronchoscopic therapeutic procedures,
- Surgery of Hernia,
- Surgery of Hydrocele,
- Surgery of Prostrate,

- Gastrointestinal Surgery,
- Genital Surgery,
- Hysterectomy,
- D&C, MTP,
- Dental surgery / treatment following an accident is covered without hospitalization also (as Out- patient)
- Coronary Angioplasty,
- Coronary Angiography,
- Orthopaedic procedures including POP applications,
- Laproscopic and Endoscopic therapeutic procedures,
- Minor surgical procedures under General Anaesthesia,
- Laser Surgical Procedure under Local anesthesia
- EECF
- Excision Biopsy of Lymph Node
- Excision of benign tumors/cyst
- OR any other treatments agreed by TPA / Company which require less than 24 hrs. Hospitalization due to advancement in Medical Technology.

**Time limit for preferring claim**

Whenever treatment is taken for the Employee/ Pensioners / Family Pensioners and their dependents covered under the scheme in any of the non-network hospital of the TPA, and the employee pays the hospital bills, the Insurance claim should be submitted in the prescribed claim form along with all supporting documents, such as Discharge Summary, Final bill, paid receipts, prescription and Pharmacy bills, Lab / investigation reports in original, Insured bank details & cancelled cheque (or) copy of First page of Bank Passbook within 20 days from the date of discharge to the Insurance Cell of IIT Madras for onward transmission to the TPA within 30 days from the date of discharge.

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Conditions for Personal Accident Policy 2023-24**Permanent Total Disablement:**

For Death	100% of Sum insured
Loss of sight of both the eyes	100% of Sum insured
Loss of two entire hands or two entire feet	100% of Sum insured
Loss of one entire hands or one entire foot	100% of Sum insured
Complete loss of hearing of both eyes and complete loss of speech	100% of Sum insured
Complete loss of hearing of both eyes and complete loss of speech and loss of one limb or loss of sight of one eye	100% of Sum insured

**Permanent Partial Disablement:**

Body part	Liability Part	Percentage of Sum Insured (%)
Toe	Loss of Toes - All	20
	Great – both phalanges	5
	Great – one phalanx	2
	Other than great, if more than one toe lost each	1
Ear	Loss of Hearing – Both Ears	50
	Loss of hearing – One Ear	15
Finger	Loss of Four fingers and thumb of one hand	40
	Loss of Four Fingers	35
	Loss of thumb – both phalanges	25
	Loss of thumb – one phalanx	10
	Loss of Index Finger – three phalanges	10
	Loss of Index Finger – two phalanges	8
	Loss of Index Finger – one phalanx	4
	Loss of Middle Finger - three phalanges	6
	Loss of Middle Finger – two phalanges	4
	Loss of Middle Finger - one phalanx	2
	Loss of Ring Finger - three phalanges	5
	Loss of Ring Finger – two phalanges	4
	Loss of Ring Finger - one phalanx	2
	Loss of Little Finger - three phalanges	4
Loss of Little Finger – two phalanges	3	
Loss of Little Finger - one phalanx	2	
Loss of Metacarples – First or Second (additional)		3
	Loss of Metacarples – Third, Fourth or Fifth (additional)	2

Shoulder/Elbow	An arm at the shoulder joint	50
	An arm above the elbow joint	50
	An arm beneath the elbow joint	50
	A hand at the Wrist	50
	A thumb	10
Leg	A leg above mid-thigh`	50
	A leg up to mid-thigh	50
	A leg up to beneath the knee	50
	A leg up to mid-calf	40
	A foot at the ankle	40
Eye	Loss of sight of one eye	50
Others	Sense of Smell	10
	Sense of taste	5