



## Group Health Medical Insurance Policy

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# Know your Mediclaim Policy

<b>Insurer</b>	The Aditya Birla Health Insurance Company Limited
<b>Third Party Administrator (TPA)</b>	VIDAL Health TPA Pvt Ltd
<b>Sum Insured (SI)</b>	Annual limit of expenses for hospitalization including self and dependents
<b>Family Definition</b>	<p>UNIVERSE OF DEPENDANTS:</p> <ul style="list-style-type: none"> <li>➤ Spouse</li> <li>➤ Children/ Adopted children</li> <li>➤ 2 Parents / In laws</li> <li>➤ Brother: below 21 years of age &amp; unemployed</li> <li>➤ Sister: unmarried/unemployed/widow/divorcee</li> </ul>
<b>Hospital Admission</b>	Min. 24 hours; Time limit does not apply for day care.
<b>Day Care Treatment</b>	Treatment that require not more than 24 hours of hospitalization
<b>Planned Hospitalization</b>	University TPA intimation: 72 hours prior to hospitalization or else will lead to additional co-pay of 5%
<b>Emergency Hospitalization</b>	University TPA intimation: at the earliest possible post admission
<b>Pre - Hospitalization period</b>	30 days from the date of Admissions
<b>Post - Hospitalization period</b>	60 days from the date of discharge

# Know your Medclaim Policy

<b>Pre-existing diseases</b>	Covered from day one in the policy.
<b>Co-Pay</b>	Parents / in laws co-pay at 20%; Others co-pay at 10%; Capped Ailments : NO co-pay
<b>Capped Ailments</b>	A fixed amount set aside for treating a particular ailment
<b>Room Rent</b>	For employees having SI Limits of Rs. 0.50 lacs, Rs. 1.25 lacs, Rs. 2.50 lacs & Rs. 3.00 lacs: 1% of Sum Insured or Rs. 3500/- whichever is higher  For others Sum Insured higher than 3 lacs: 1.5% of SI Limits  ICU rent cap – As per the actuals
<b>Ambulance charges</b>	Covered, in case of emergency up to Rs. 2000/-, Will be paid from Hospital to Home also depending on condition of the patient
<b>Air Ambulance</b>	Covered

## Know your Mediclaim Policy

<b>Preventive Health Check-Up</b>	<p>Employees above the age of 40 are eligible to claim expenses of self; Master / Executive / Comprehensive Health check up to a maximum limit of INR 3,500.</p> <p>Employees below the age of 40 are eligible to claim expenses of self; Master/Executive/Comprehensive Health check up to a maximum limit of INR 2,000.</p>
<b>Dental treatment</b>	<p>Employees less than 40 years – INR 5K. Only for employee, spouse &amp; children.</p> <p>Employees more than 40 years – INR 10 K. Only for employee, spouse &amp; children.</p>
<b>Cervical Cancer Vaccination</b>	<p>100% reimbursement to be borne by the insurer on maximum 3 sitting of proactive vaccination as a preventive measure against Cervical Cancer only for the employee</p>
<b>Congenital diseases</b>	<p>Internal - Covered</p> <p>External - Covered only if for non-cosmetic reasons</p>
<b>Artificial Life / Limbs Support</b>	<p>Covered if arising out of accident, At actuals within family SI Limit</p>
<b>Pre / Post Natal Expenses</b>	<p>Covered within maternity limit</p>
<b>Maternity related complications</b>	<p>Covered, under FAMILY sub-limit only</p>
<b>Homeopathic / Ayurvedic</b>	<p>Covered - Only treatment in government hospitals/NABH/ QCI accredited hospitals</p>

# Know your Mediclaim Policy

<b>Genetic Disorder</b>	Covered
<b>Bariatric Surgery</b>	Covered for employees only, limited to 2 lakh rupees  BMI > = 40 or  BMI > = 35 with co-morbid conditions like Hypertension, diabetes, respiratory disorder or non-alcoholic fatty liver
<b>Lasik Surgery</b>	Covered for employees only, limited to 30k rupees only on the refractive error is +/- 7
<b>Psychiatric treatment</b>	Covered for employees only
<b>Animal Bite ( Anti-Done/Vaccination )</b>	Covered for employees only
<b>Mobility / Disability Extension</b>	Covered up to 25,000/ per employee with a policy capping of 25 lakhs.
<b>Loss of Pay</b>	Covered for employees only  Per week Rs. 25,000/- or weekly gross salary, whichever is lower. Maximum benefit: 52 weeks;  Trigger: Non-attendance of work due to critical illness (to be defined) wherein all leaves are exhausted, and employee goes on LWP

## Important Links

**1. Download e-card:**

<https://employee.integratedbenefitsportal.com/login.aspx?groupcode=SNINSTI>

**2. Declare Dependents (only newlywed spouse OR newborn baby):**

<https://employee.integratedbenefitsportal.com/login.aspx?groupcode=SNINSTI>

**3. Download network hospital list:**

<https://vidalhealthtpa.com/employeeportal/networkhospital>

**4. Reimbursement Claim Form**

<https://snulinks.snu.edu.in/snuPolicies/HumanResources/MedicalInsurance/>

**5. Electronics Clearing Services (ECS) Form**

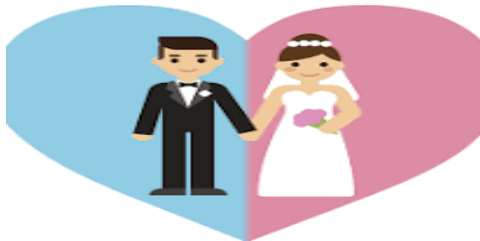
<https://snulinks.snu.edu.in/snuPolicies/HumanResources/MedicalInsurance/>

**6. VIDAL Address for sending reimbursement documents in original hard copies and in email:**

Attention To: Mr Vikas Singh ([vikas.singh@vidhalhealthtpa.com](mailto:vikas.singh@vidhalhealthtpa.com))

Vidal Health Insurance TPA Pvt Ltd, Plot No. 515, Udyog Vihar, Phase 5, Gurugram, Haryana : 122016

# Enrolment Process



- Declare your dependents as per family definition of the insurance policy.
- Next enrolment of the dependents:
  - Existing Members: October 2026
  - New Joinees: At the time of joining
- New Joinees: must complete the enrolment process within the timelines specified in welcome mailer sent by Insurance partner - IIRM Support <[ibpsupport@indiainsure.com](mailto:ibpsupport@indiainsure.com)>
- Download medical e-card: post 10 days of dependents declaration from IIRM Support portal
- Newborn baby enrolment: update under dependent in IIRM Support portal within 60 days of DOB.
- 1<sup>st</sup> claim of a new born at the time of the birth is auto admissible however if not declared under dependent list within 60 days, no further claim will be admissible.
- Newly wedded spouse enrolment: update under dependents in IIRM Support portal within 45 days of marriage.



## Voluntary TOP-UP Plan

- Sum insured (SI) limit: enhanced up to 5 times of base SI limit at an additional premium

Ex. – Base Sum Insured – 5 Lakhs/annum

Voluntary Top up –  $5 \times 5 = 25$  Lakhs/ annum on additional premium cost

Total Sum Insured – Base SI + Top up = 30 Lakhs/annum

- Added advantage: 5% reduction on co-pay on self and dependent's claims.
- Club with: personal insurance post resignation for the respective policy period only.
- Tax benefit: on top up premium under section 80D

**Where will you swipe?**



**Choose wisely**

# Voluntary OPD Plan

- OPD plan helps to meet out regular OPD expenses for parental and non-parental category.
  - Medicines/doctor bills,
  - Spectacles,
  - Hearing aid
  - Dental (in addition to the coverage available in the insurance policy)
  - Standalone Covid 19 test
- Post Resignation: continue until the end of the policy period.
- Tax benefit: on OPD premium under section 80D

**Where will you swipe?**



**Choose wisely**

## Policy Lock-In period of 3 years

- Enrolment period: October 2023 to September 2026
- Next enrolment of the dependents: Effective October 2026
- Only Natural additions:
  - Newborn / Adopted baby within 60 days from the birth
  - Newly wedded spouse within 45 days of marriage can be added
- Midterm deletion of dependents is allowed only in case of demise/divorce
- Top Up and OPD plans bought in 2023-2024, 2024-2025 policy period are mandatory to continue the plan until September 2026 on additional premium chargeable basis



**Choose Wisely !**



Be safe from unpredictable medical expenses

# How do I get my insurance coverage

## Planned Hospitalization:

Before hospitalization: in a network hospital

- Inform Insurance TPA: 72 hours prior the admission with details of:
  - Doctor prescription (*no medical report is required at this step*)
  - Patient details
  - Hospital name
  - Date of admission
- Produce the following documents at hospital TPA desk:
  - Medical E-Card
  - Photo ID Proof
  - University I Card
- Get Preauthorization approval from TPA (before or on the date of admission)
- At the time of discharge, final bill to be sent to the University TPA for the approval and remaining non-medical and co-pay expenses to be borne by the member

## Emergency Hospitalization:

- Inform Insurance TPA: at the earliest possible post admission
- All other steps to be followed like planned hospitalization mentioned above

## How do I claim my insurance coverage

Cashless Mode	Reimbursement Mode
<ul style="list-style-type: none"> <li>• Available only if Insurer and TPA are empaneled with the hospital</li> <li>• Inform TPA 72 hours prior about the planned hospitalization.</li> <li>• Deposit medical ecard, Photo ID Proof and University ID card at the hospital TPA desk</li> <li>• Get Preauthorization approval done from University TPA prior hospitalization</li> <li>• At the time of discharge, final bill to be sent to the University TPA for the approval and remaining non-medical and co-pay expenses to be borne by the member</li> </ul>	<ul style="list-style-type: none"> <li>• Inform TPA 48 hours prior about the planned hospitalization</li> <li>• Fill the prescribed Reimbursement Claim Form and Electronic Clearing Service Form</li> <li>• Attach all original and stamped relevant documents (Discharge summary, Bills, reports, Cancelled Cheque of Primary Insured)</li> <li>• Keep scan copies of all reports and bills for future reference</li> <li>• All documents to be sent to the University TPA within 30 days from the date of discharge.</li> <li>• TAT for the reimbursement of the bills is 30 days from the date of submission and providing all required documents</li> <li>• In case a member needs the original reports back from the Insurer post reimbursement, only X – ray / Ultrasound films can be returned upon email request.</li> </ul>

KNOW YOUR  
POLICY

Do know about **limits on specific treatments** in the policy.

Do keep your **Health Insurance ID card for self & dependents** handy in case of medical emergency.

Do know the **Cashless and Reimbursement claims procedures**.

Do remember that for planned treatments, **cashless approval can be taken in advance** to avoid last minute stress.

Ensure you have **all the documents in original** from the hospital for raising a reimbursement claim.

**Do inform TPA within 48 hrs.** of the admission regarding hospitalization in a non-network hospital.

**Do inform TPA at least 72 Hrs.** in advance in case of any planned treatment

CLAIM  
PROCESS

**Don't opt for rooms or facilities higher than the admissible limits** as specified in the policy to avoid out-of-pocket expenses.

**Don't delay the submission of documents** within the stipulated time duration for reimbursement of claims.

**Don't forget to keep money in hand for payment of non medical expenses** during cashless hospitalization.

**Don't forget to keep a scan of all the documents** submitted for claims.

**Don't forget to obtain treatment bills** 30 days prior and 60 days after hospitalization for reimbursement claim.

**Don't delay the submission of claim documents** beyond stipulated timeline for reimbursement of the claim.

**Don't forget to obtain the treatment bills 30 days prior and 60 days after hospitalization** for reimbursement of the claim.

## Important Contact Numbers & Escalation Matrix

**Toll Free 24\*7 VIDAL helpline number - 08046267015**

Reach out as first point of contact for assistance:

<b>Vidal Health TPA</b>		
<b>Name</b>	<b>Email ID</b>	<b>Mobile No</b>
Vikas Singh	<a href="mailto:Vikas.singh@vidalhealthtpa.com">Vikas.singh@vidalhealthtpa.com</a>	+91 9953776774
Mukesh Kapoor	<a href="mailto:Mukesh.kapoor@vidhalhealth.com">Mukesh.kapoor@vidhalhealth.com</a>	+91 9319583256
<b>India Insure</b>		
<b>Name</b>	<b>Email ID</b>	<b>Mobile No</b>
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## We are always there

University HR		
Name	Email ID	Mobile No
Deepmala Singh	<a href="mailto:Deepmala.singh@snu.edu.in">Deepmala.singh@snu.edu.in</a>	+91 8860908667
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A detailed FAQ document on Health Medical Insurance Policy is accessible under same section in SNU links



**SHIV NADAR**

INSTITUTION OF EMINENCE DEEMED TO BE  
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DELHI NCR

**Thank You**