MediBuddy

युनाइटेड इंडिया
UNITED INDIA

MediBuddy

Medi Assist

Presentation of Services

For Students of Indian Institute Of Technology-Bhubaneswar

Mediclaim Policy: **Purpose, Policy Period & Insurer**

- **Purpose**: To detail the benefits and claim procedures the company provides to employees with regards to Health and Insurance. The Mediclaim Policy covers expenses incurred due to a disease, illness or accident.

Insurer: ***United India Insurance Co. Ltd.***

- **Policy Period**: **14 Aug 2025 - 13 Aug 2026**
- **Policy Number- 2601002825P109996345**
- **Service Provider(TPA): Medi Assist Insurance TPA Pvt Ltd**

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Personal Accident

Rs.3,00,000/- for the family of the students in event of accidental death or permanent total disability

Rs. 4.00 lakh plus the cost of study (including total fee and mess charges for the balance period, approximately Rs. 1,00,000 per semester) in the event of the accidental death of the paying parent/guardian.

Mediclaim Insurance Policy

- The Mediclaim Policy Covers expenses incurred due to a disease, illness or accident.
- The Mediclaim Policy stipulates that a claim is admissible when the insured (beneficiary) is admitted in a hospital for a minimum of 24 hours for the treatment of a positive illness & also treatment should justify hospitalization.
- 24 hours hospitalization is a must. However this time limit is not applied to specific treatments/Day care procedures.

Definition of Hospital

- An institution established in India for indoor care & treatment of sickness which complies with minimum requirements
- Registered with local authorities
- Under supervision of registered & qualified medical practitioner
- Minimum of 15 inpatient beds(In Smaller cities/ towns the same is reduced to 10 beds)
- Fully equipped operation theatre
- Fully qualified nursing staff 24/7
- Fully qualified doctors 24/7

Main Clauses/Features of the Policy

- Sum Insured -.--200000,
- Cover type basis Individual SumInsured Basis Family Definition Self

1. Basic Sum Insured per insured member is Rs. 2,00,000/- (Rupees Two lakhs only).
2. Room, Boarding and Nursing expenses (per day limit) is 1% of Sum Insured i.e., Rs. 2,000.00 or Actual Expenses Incurred, whichever is less.
3. ICU/ICCU/HDU (per day limit) is Actual Expenses Incurred.
4. Out Patient treatment cover in respect of every insured member shall be sub-limited to Rs. 5,000/- and within the basic Sum Insured limit.
5. All OPD Claims will be routed through Institute Medical Unit.
6. Dental OPD consultation (excluding cosmetic and non-medical items) - is allowed as a sub-limit in OPD limit of Rs. 5000/- per student.
7. Proportionate deduction clause is not applicable.
8. Pre-Existing Disease waiting Period, Initial Waiting period for Hospitalization and Specific Illness Waiting period are WAIVED OFF.

9. Pre Hospitalisation expenses (upto 30 days) and Post Hospitalisation expenses (upto 60 days) payable in respect of each hospitalisation shall be the actual expenses incurred subject to a maximum of 10% of the Sum Insured.
10. Diagnostic cost of the COVID-19 screening will be payable only if test is positive and followed by Hospitalisation, and payment will be as per policy conditions.
11. Corporate Buffer: Rs. 10 lacs. This benefit shall be available to those insured persons that have already exhausted their basic Sum Insured limit of Rs. 2 lacs. The insured, IIT BBSR, shall decide which students to be benefitted from the corporate buffer allocation. The benefit is restricted to Rs. 10 lacs in aggregate during the period of insurance with no limit on per life.
12. For claims arising out of persons aged more than 60 years, expenses on major illnesses charged as a total package will be settled with a co-pay on 80:20 basis. The co-pay of 20% will be applicable on the admissible claim amount.
13. Vaccinations including inoculation and immunizations are not payable except in case of post-bite treatment.
14. Any claim in connection to asthma, bronchitis shall not be payable when incurred under Domiciliary hospitalization.
15. Instrument used in Treatment of Sleep Apnea Syndrome (C.P.A.P.) and Continuous Peritoneal Ambulatory dialysis (C.P.A.D.) and Oxygen Concentrator for Bronchial Asthmatic condition used during treatment are covered under the scope of this policy.
16. Expenses due to injuries sustained from active participation in adventurous sports shall be covered provided such participation is not as a professional in those adventurous sports.

17. In case of an admissible claim under the policy, expenses incurred on the following procedures (wherever medically indicated) either as in-patient or as part of day care treatment in a hospital, shall be covered upto full SI.

i.Uterine Artery Embolization & High Intensity Focussed Ultrasound (HIFU)

ii.Balloon Sinuplasty

iii.Deep Brain Stimulation

iv.Oral Chemotherapy

v.Immunotherapy-Monoclonal Antibody to be given as injection

vi.Intra vitreal Injections

vii.Robotic Surgeries (Including Robotic Assisted Surgeries)

viii.Stereotactic Radio Surgeries

ix.Bronchial Thermoplasty

x.Vaporisation of the Prostate (Green laser treatment for holmium laser treatment)

xi.Intra Operative Neuro Monitoring (IONM)

xii.Stem Cell Therapy: Hematopoietic Stem Cells for bone marrow transplant for haematological conditions to be covered only

Day Care Treatments

Hospitalisation means admission in any Hospital/Nursing Home in India upon the written advice of a Medical Practitioner for a minimum period of 24 consecutive hours. The time limit of 24 hours will not be applicable for following surgeries /procedures.

Haemo Dialysis	Dental surgery following an accident
Parentral Chemotherapy	Hysterectomy
Radiotherapy	Surgery of Appendix
Eye Surgery	Coronary Angiography
Lithotripsy (kidney stone removal)	Surgery of Gall bladder, Pancreas and bile duct
Tonsillectomy	Surgery of Hernia
D&C	Surgery of Hydrocele
Surgery of Prostrate	Surgery of Urinary System
Gastrointestinal Surgery	Treatment of fractures / dislocation excluding hair line fracture, Contracture releases and minor reconstructive procedures of limbs which otherwise require hospitalisation.
Genital Surgery	Arthroscopic Knee surgery
Surgery of Nose	Laparoscopic therapeutic surgeries
Surgery of throat	

What is not covered under the policy

- Telephone Charges
- Food Charges – other than prescribed diet, attendant's
- food charges.
- Spectacles & Goggle
- Anne French, Crutches
- Visco Belts, LS belt abdominal, knee brace.
- Reg. & Admission Charges, Discharge procedure charges.
- File & Certificate Charges
- Attendant Pass & Attendant Bed Charges
- Aaya/ Special Attendant charges
- Any treatment received outside India is as well not covered
- Baby charges (Unless Specified/Indicated), Vaccination Charges
- Utilities-Olive Oil, Soap, Stationery, Eye Pads, Collagen water,
- Blades, Disp. Razor, Sanitary pads etc.
- Discharges if not specified
- Documentation charges
- Electricity charges
- Laundry Charges
- Lasik Surgery
- Aids
- Congenital Diseases (External)
- Convalescence / General Debility.
- Extra Bed/ Bed retaining charges
- Warming Blankets
- Crepe Bandage
- Establishment charges
- Toilet/tissue paper
- Eau de cologne
- Mineral water
- Hearing aids
- Arm sling
- Gown
- CD, Cassettes
- Conveyance charges
- Glucometer, nebulizer, BIPAP machine, Oxygen Chambers
- Gluco-sticks/ABG (unless report indicated)
- Stockings
- Any Kind of Cosmetic Surgeries.
- Vitamins and Tonics Not consistent with the treatment.
- Orthodontics Treatment
- Voluntary termination of pregnancy is not payable.
- Sterility/Venereal Disease/Circumcision
- Intentional Self Injury / Suicide Attempt.
- Special Nursing, Attendant Pass, Aaya Charges
- Service charges

Note: "This is only a illustrative list, not an exhaustive list"

Mediclaim Policy: Claim Intimation/ Claim Documents Submission

- Intimation can be given via MediBuddy App / MediBuddy portal or through mail / call to Medi Assist TPA SPOC within 7 days. from date of admission for Re-imbursement: Quoting your Medi Assist ID (MA ID), details of illness and the hospital.
  You can also reach Medi Assist at toll free customer care number **1800 425 9449** for assistance.

- Claim must be filed within 15 days from the date of discharge. However, the Company may at its absolute discretion consider waiver of this Condition in extreme cases of hardship where it is proved to the satisfaction of the Company that under the circumstances in which the insured was placed, it was not possible for him or any other person to give such notice or file claim within the prescribed time-limit.

- **Address for Claim Documents Submission**

  Medi Assist Insurance TPA Pvt. Ltd.
  Plot No-700,3rd floor,
  Saheed Nagar.
  Near PNB Branch
  Bhubaneswar-751007.

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List of Empaneled Hospitals (Cashless Network)

Visit the following links for All India cashless Network Hospital details :

Step 1 : **www.mediassisttpa.in/network-hospital-search/**

Step 2 : **Select City name . E.g Bhubaneswar, New Delhi, Kolkata**

Step 3 : **Select radius e.g 5 to 25 Kms from your current location**

Step 4 : **Select Insurers as *"United India Insurance Co. Ltd."***

Mediclaim Policy: Cashless Hospitalization

- This service enables the customer to avail treatment at the Network Hospital without being required to pay for the treatment.(except co-pay and non medical expenses as per policy)
- All expenses incurred will be paid to the Hospital by deducting Non medical expenses.
- Please produce your **Medi Assist Card ID along with Photo ID of patient as well as employee** at the hospital on network where you wish to avail treatment.
- Kindly fill in the Medi Assist Card Number, Emp code, Policy No, Policy Holder Name , Name of the Patient, Age & Contact Number in the Cashless Request Form
- The treating doctor/ hospital will fill in the remaining part of the Request Form including diagnosis details / past ailment history / estimate expenses / no of days of stay & Fax/Mail it to Medi Assist for approval.
- Medi Assist gives approval/denial letter to hospital through portal/ mail.
- **Planned Admissions: Approval can be availed 7 days in advance.**

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Mediclaim Policy: Reimbursement Hospitalization

- Although Cashless Hospitalization facility is available at the Medi Assist network of hospitals, you may some times need to use hospitals that are not on the Medi Assist network.

- In case you choose to or are required to avail of hospitalization facilities at a non-network hospital, your medical expenses can still be claimed through Medi Assist. This is called Reimbursement.

- Reimbursement claims may be filed in the following circumstances.
  1. Hospitalization at a non-network hospital
  2. Post-hospitalization and pre-hospitalization expenses
  3. Denial of preauthorization on application for cashless facility at a network hospital

- **Claim documents should be submitted within 15 days from the date of discharge from hospital**

- Reimbursement claims can be submitted to us through registered post / courier or can be handed over to the following address
  - **MediAssist Insurance TPA Pvt. Ltd – Plot no -700,Saheed Nagar ,Near PNB , Bhubaneswar.**

- At Medi Assist, we receive the reimbursement claim and process it. The medical team at Medi Assist will determine whether the condition requiring admission and the treatment are covered by your health insurance policy. They will also check with all the other terms and conditions of your insurance policy. All non-medical expenses will not be payable.

- Based on the processing of the claim, a denial or approval is executed. In case of approval, NEFT is done to the bank details provide by the claimant.
- In case your claim is denied, the denial letter is sent to you by courier / post / e-mail quoting the reason for denial of your claim. In case you have been insured through your Employer, the denial letter will be dispatched based on instructions received from your Employer(on your company email id).

Mediclaim Policy: Check list to submit claim for Reimbursement

Please submit the following documents in original for reimbursement claims:

The documents that you need to submit for a hospitalization reimbursement claim are:

1. Duly filled up stamped and signed reimbursement claim form Part A and B
   (Part B needs to be filled up and signed by the hospital)
2. Original hospital final bill
3. Original numbered receipts for payments made to the hospital including Advance payment receipts
4. Complete breakup of the hospital bill
5. Original discharge summary/discharge card
6. All original investigation reports & films / plates
7. All original medicine bills with relevant prescriptions
8. Original signed claim form
9. Copy of Indoor case papers if require
10. MLC / FIR in case of accidental treatment
11. Copy of the Medi Assist ID card
12. Intimation No – Please provide your claim intimation no on top of claim form
13. Covering letter stating your complete address, contact numbers and email address (if available).
14. Bank details or cancelled cheque with the name of policy holder only with account no,
    IFSC code of Bank branch

Imp Points to remember:

Please retain a copy of all documents submitted to us for further reference
Please retain POD copy of the courier for tracking your consignment in case of any delay etc.
Please arrange the enclosures as per checklist.

Mediclaim Policy: Pre & Post Hospitalization

What are Pre-Hospitalization & Post-Hospitalization Expenses?

- When one falls sick, one usually consult a family physician and gets relevant investigations done. On the advice of the physician, one gets hospitalized for further management of the disease if required. Such medical expenses incurred before hospitalization are called **Pre-Hospitalization expenses.**

- During hospitalization, a major part of the treatment is complete but some part of the treatment extends beyond the hospitalization. It may involve follow-up visits to the doctor, medicines to be taken or further investigations to be done. Such medical expenses are called **Post-Hospitalization expenses.**

- There is provision to claim these expenses through your health insurance policy.

- These expenses are payable for a policy-defined period (30 days prior to hospitalization). Both pre-hospitalization and post-hospitalization expenses 60 days after discharged from hospitalization) can be claimed only after the settlement of the main hospitalization claim.

- The claim submission process for pre-hospitalization expenses and post-hospitalization expenses is the same as **Reimbursement**.

Check list to submit claim for Pre & Post Hospitalization

1. Copy of hospital final bill
2. Copy of discharge summary/Card
3 All original bills/receipt which are you are claiming with supporting documents such as investigation reports & films / plates / consultation papers / prescriptions etc
4. Original signed claim form
5. Copy of the Medi Assist ID card
6. Bank details or cancelled cheque with a/c holder name / account no/ IFSC code and Bank name and branch

Contact details for Mediclaim Policy related queries and information

	1st Point of Contact(SPOC)		2rd Point of Contact(SPOC)
Please connect with SPOC for further clarifications e.g. unprocessed claims, document understanding, query resolution, escalations etc. Escalation matrix is also mentioned in the order for your support`	Ms .Kirti Dhara Das.		Mr. Tapan Kumar Rath
	kirtidhara.das@mediassist.in		tapan.rath@mediassist.in
	9606073595		9861142360

Wish you a healthy and happy future !

Thank you ☺