

LIFE INSURANCE CORPORATION OF INDIA
CENTRAL OFFICE

Dept : Personnel/ER
Cir. No.: CO/PER/ER-A/153/2017

"Yogakshema",
Jeevan Bima Marg,
Mumbai – 400021.

05th April, 2017

ALL OFFICES OF THE CORPORATION

Re : RENEWAL OF GROUP MEDICLAIM FAMILY FLOATER POLICY FOR THE YEAR 2017-18

1. Cashless Facility:

Our Group Mediclaim Policy covering in-service employees, retired employees and their dependents has been renewed for the year 2017-18 with New India Assurance Co. Ltd. Cashless facility will be available through hospitals covered under TPAs network. In cases where cashless facility is not availed or when there is some balance reimbursable amount to be claimed, claim papers will be submitted to TPAs through our Divisional/Zonal/Central Office.

TPAs have been appointed Zone wise for servicing the above policy as under:

S.No.	Office/Zone	Name of TPA	Website address and Toll Free No. (Dedicated for LIC)
1	Northern Zone/Western Zone/Central Zone/Central Office	M/S MD India Healthcare Service (TPA) Pvt. Ltd.	www.mdindiaonline.com 18002335588
2	North Central Zone	M/S Raksha TPA Pvt. Ltd.	www.rakshatpa.com 18001039533
3	East Central Zone/Eastern Zone	M/S Heritage Health TPA Pvt. Ltd.	www.heritagehealthservice.com 18001024547
4	South Central Zone	M/S Medi Assist India TPA Pvt. Ltd.	www.mediassistindia.net-Click 18004191154
5	Southern Zone	M/S Vidal Health TPA Pvt. Ltd.	www.vidalhealthtpa.com Kerala- 1800-425-6268 Tamilnadu-1800-425-7595

List of hospitals covered under network of respective TPAs is available on their website and it will also be kept in our intranet website. Full details of TPAs are available in policy document for the policy year 2017-18.

2. Procedure for availing Cashless Facility:

a) Cashless hospitalization can be availed only at **TPA's network of hospitals** and is subject to pre-admission authorization. The TPA shall, upon getting the related medical information from the insured person/network provider, verify that the person is eligible to claim under the policy and after satisfying itself, will issue a pre-authorization letter/guarantee of payment letter to the Hospital/Nursing Home mentioning the sum guaranteed as payable and also the ailment for which the person is seeking to be admitted as a patient.

b) The employee/retired employee has to submit E-Card of patient issued by TPA and any Photo ID cards such as ID card issued by LIC, PAN, Driving License, Voter ID Card, Passport, Aadhar Card, School/College ID cards or any other photo ID card issued by Central Govt. or State Govt.

c) In case the TPA ID card is not available then cashless request will be processed by TPA on the basis of certificate issued by OS Department of LIC. The certificate must consist of the name of the Employee/Retired employee, beneficiary/claimant, SR No. of Employee/Retired employee and the Sum Insured.

d) TPA will remain unchanged in case of inter-zonal transfer of employee or change of his/her residence from one place to another place. Original TPA will provide the services based on PAN India's network hospital throughout the policy year.

3. Mediclaim Coverage:

The compulsory Family Floater Sum Insured and corresponding benefit category are as under:

BASIC PAY	CATEGORY	COMPULSORY FAMILY FLOATER SUM INSURED
Below Rs.42,195/-	III	Rs.300000/-
Between Rs.42,196/- and Rs.58,689/-	II	Rs.400000/-
Rs.58,690/- and above	I	Rs.600000/-

Employees have also availed benefit of optional increased Sum Insured (on floater basis) for **Rs.4 Lakh, 5 Lakh, 6 Lakh, 8 Lakh, 10 Lakh, 12 Lakh, 15 Lakh, 20 Lakh, 25 Lakh and 30 Lakh** (inclusive of the limits set out in Table above). However, new confirmed employees and repatriated employees/officers along with their all dependents who were not covered under LIC group mediclaim scheme during foreign posting may also opt for increased floater sum insured on their first entitlement for mediclaim coverage under Group Mediclaim Scheme.

Sharing of premium between in-service/retired employees and the Corporation shall be only for compulsory family floater mediclaim cover. While in case of in-service employee, sharing of premium will be for the employee, spouse and two dependent children, for retired employee sharing of premium will be for retired employee, spouse and dependent disabled children only. Entire premium for the additional Floater cover shall be borne in full by the concerned employee/retired employee.

4. Room rent limit:

Maximum allowable Room Rent/Boarding Expenses as provided by the hospital including Nursing charges are 1.5% of Total Sum Insured (Basic + Additional) per day subject to maximum amount of Rs. 7500/- (for Class A cities), Rs. 5000/- (for Class B cities) & Rs. 4000/- (for other cities) per day. Names of cities under each class are given herein below (please see next page).

Classification of Cities for Room Rent Charges

Class of City	Cities	Room Rent Limit per day
A	Ahmedabad, Gandhi Nagar, Bengaluru, Chennai, Hyderabad (including Secunderabad), Kolkata, Greater Mumbai, New Delhi, Faridabad, Ghaziabad,	Rs.7500/-

	Gurgaon, Noida, Pune and Surat	
B	Agra, Allahabad, Asansol, Bhopal, Coimbatore, Goa (Entire State), Indore, Jaipur, Jabalpur, Jamshedpur, Kanpur, Kannur, Kochi, Kozhikode, Lucknow, Ludhiana, Madurai, Mallapuram, Meerut, Nagpur, Nasik, Patna, Rajkot, Srinagar, Thrissur, Thiruvanthapuram, Vadodra, Varanasi, Visakhapatnam and Vijaywada	Rs.5000/-
C	Others	Rs.4000/-

In case of admission to a Hospital Room at rates exceeding the aforesaid limits, the reimbursement/payment of all other expenses incurred at the Hospital, with the exception of cost of medicines, drugs and implants, shall be reduced proportionately as per eligible room category in the Hospital.

In case of Intensive Care Unit (ICU) / Intensive Cardiac Care Unit (ICCU) expenses, there is **No Capping/Ceiling** on ICU/ICCU expenses. For other terms and conditions, please refer policy document for the year 2017-18.

5. Premium- Family Floater Mediclaim Cover

The annual premium chargeable per person for various age bands and total Family Floater Sum Insured for the policy year 2017-18 in Table A & B are as follows:

Table A

Premium Rates of In-service/retired employees and spouse or dependent of deceased employees/retired employees (as primary member)							
	0-35	36-45	46-55	56-65	66-70	71-75	76+
300000	3675	4070	5997	6922	8978	10039	13207
400000	4705	5237	7601	8871	11474	12794	16772
500000	5470	6156	9140	10713	13984	15279	19909
600000	6020	6834	10322	12135	15945	17165	22265
800000	6743	7654	11559	13592	17859	19224	24936
1000000	7416	8419	12716	14950	19645	21146	27429
1200000	8047	9135	13797	16222	21314	22945	29761
1500000	8691	9866	14901	17520	23019	24781	32141
2000000	9212	10458	15795	18571	24402	26267	34070
2500000	9673	10981	16584	19499	25623	27579	35773
3000000	9963	11310	17082	20085	26390	28407	36846

Table B

Premium Rates of Dependents							
	0-35	36-45	46-55	56-65	66-70	71-75	76+
300000	554	813	1500	2216	2873	3212	4488
400000	712	1047	1900	2841	3671	4094	5702

500000	823	1231	2285	3430	4474	4889	6767
600000	909	1369	2580	3881	5106	5209	7569
800000	1014	1529	2892	4350	5716	6151	8479
1000000	1123	1685	3180	4784	6287	6766	9326
1200000	1203	1829	3447	5190	6822	7342	10118
1500000	1305	1974	3726	5605	7367	7930	10928
2000000	1380	2091	3950	5942	7809	8406	11584
2500000	1447	2197	4146	6238	8200	8826	12163
3000000	1491	2263	4271	6425	8446	9091	12528

Illustrations for calculating premium

1. Total premium of a family which is covered for compulsory Family Floater sum insured of Rs.4 Lakh and subsidy in premium are given below in Table:

COMPULSORY FAMILY FLOATER COVER FOR Rs.4 LAKH				
Family Members	Age	Premium as per Table A & B	Subsidy in premium @75% (Col. 3 X 75%)	Net Premium payable by employee (Col. 3-Col. 4)
1	2	3	4	5
Employee	48	7601	5700.75	1900.25
Spouse	44	1047	785.25	261.75
Child 1	20	712	534.00	178.00
Child 2	17	712	534.00	178.00
Father	74	4094	0	4094.00
Mother	70	3671	0	3671.00
TOTAL		17837	7554	10283

2. A family is covered for compulsory/basic Family Floater sum insured of Rs.600000/- and opted for Total increased Family Floater sum insured of Rs.15 Lakh. Calculation of total premium and subsidy in premium are given below:

TOTAL FAMILY FLOATER COVER FOR Rs.15 LAKH							
Family Members	Age	Premium of total Floater cover as per Table A & B	Premium of compulsory Floater cover as per Table A & B	Subsidy in premium @75% (75% X Col.4)	Premium of compulsory Floater cover payable by Employee (Col.4-Col.5)	Premium of additional Floater cover (Col.3-Col.4)	Total premium payable by employee in policy year 2014-15 (Col.6+Col.7)
1	2	3	4	5	6	7	9
Employee	52	14901	10322	7741.5	2580.5	4579	7159.5
Spouse	49	3726	2580	1935	645	1146	1791
Child	24	1305	909	681.75	227.25	396	623.25
Father	78	10928	7569	0	7569	3359	10928
TOTAL		30860	21380	10358.25	11021.75	9480	20501.75

6. Medclaim Data and statements

The data of all beneficiaries as on 01/04/2017 is essential for finalization of the premium. All the Zonal Offices are required to provide the age band wise and sum insured wise number of members/beneficiaries in enclosed Excel format (Annexure –A) by 01/06/2017. Certified copy of Annexure A is also required to be submitted by Zones.

8. Claims Data

In addition to this, all Divisional offices are required to maintain records for claim payments in enclosed Excel format (Annexure –II). Data for claim paid and pending (soft copy) is to be sent to the respective Zonal Office. The Zonal Office will consolidate the data for all the offices under its jurisdiction and submit it to Central Office as follows:

Claim Data	Last Date for receipt at C.O.
Data for the period 01/04/2017 to 31/12/2017	08/01/2018
Data for the period 01/01/2018 to 28/02/2018	07/03/2018
Data for the period 01/03/2018 to 31/03/2018	07/04/2018

It is to be brought to the notice of all the members of scheme that the claim must be filed within 20 days of discharge from the hospital.

2018 01/04/2018
Executive Director (Personnel)

Encl: 1. Annexure – A
2. Annexure – II