



आंतर कार्यालयीन ज्ञापन
INTER-OFFICE MEMORANDUM

प्रेषक: From	प्रति To,
महाप्रबंधक The General Manager, प्रधान कार्यालय Head Office मानव संसाधन विभाग Human Resources Dept. औद्योगिक संबंध प्रभाग, Industrial Relations Division	The Zonal Manager All Zones <u>H.R. Department</u> The General Manager <u>National Banking Group</u> The Dy. General Manager, <u>LCB/Zonal Audit Offices</u> The Principal <u>Staff Training Colleges</u> <u>All HO Departments</u>
संदर्भ सं. Ref.No.:HO:HR:IR:SD:I-39	दिनांक Date : 27.04.2016

New Medical Insurance Scheme for existing Staff Members introduced in Joint Note / Bipartite Settlement dated 25.05.2015 in lieu of the Existing Hospitalization Scheme_ Procedure thereof.

We refer to our IOM No HO:HR:IR:SD:I:545 dated 22.03.2016, clarifying certain guidelines/instructions with regard to the process and procedures for settling the claims. In continuation with the same, we may furnish the following procedure

A. THE PROCEDURE FOR SETTLING THE CLAIMS:

- (i) All the medical bills of employees with regard to Hospitalisations and domiciliary expenses in respect of ailments covered under the Insurance Policy, will be submitted at the Zonal Office / Head Office alongwith the supporting/requisite documents as hitherto. The TPA representative will be the back up support and will ensure expeditious settlement of the claims. The list of authorized representative of TPA along with their contact details is annexed herewith (**Annexure A**) for ready reference.
- (ii) The Zonal Office has to designate one Zonal Nodal Officer and his name should be advised to the Head Office, Insurance Co. and TPA. The Nodal Officer will be the co-coordinating Officer for settlement of Hospitalisation and related domiciliary bills for expeditious settlement of the bills. Please importantly note that no such claim will be rejected unless the approval for rejection of the Nodal Officer is recorded.



- (iii) It is advisable that the employee should retain a photocopy of the claim papers for their record and future reference.
- (iv) The authorized representative of TPA shall be stationed at each of our Zonal Offices and also at other places so advised.
- (v) The representative of TPA will collect all the claims submitted by the employees from the respective Zonal Offices and settle the claims expeditiously maximum within three days. In case of rejection of claims, it would go through a Committee set up of the Bank, TPA and Insurance Co. unless rejected by the committee in the real time, the claim should not be rejected.
- (vi) The TPA would be sharing MIS with respective Zonal Nodal Officers and HO Nodal officers to give them clear perspective with regard to the status of each claim outstanding and settled so as to enable them to inform the respective Employee.

B. HOSPITALIZATION PROCESS:-

I. Admission in TPA Empaneled Hospitals :

- (i) The concerned Employee will approach to the Hospitals with the DHS ID card at TPA counter at the hospital.
- (ii) The employee is required to fill up the necessary forms and complete admission formalities.
- (iii) The TPA will issue Authorization Letter (AL) at the time of admission of the employee and his/ her family members. The Hospital will raise final bill amount at the time of discharge and employee will sign and check off if the bill amount is within the insurance coverage.
- (iv) In case the amount of hospital bill is higher than the Sum Insured / Balance Sum available, the concerned Zone/Office can issue clearance for release of BUFFER. It can also take a call later and In that case, the balance amount may be required to be paid by Employee at the time of Discharge.
- (v) It is pertinent to note that any inadmissible expenses which is not reimbursable either by the Insurance Co. or under the Bank's Scheme will have to be borne by the respective employee

II. Admission in the Banks' empanelled hospitals

The Bank will issue authorization letter only in those cases where the Hospital is empanelled with the Bank only and not empanelled with the TPA. Our practice of issuing letters to the tied up hospitals for cashless treatment to the employees and their dependent family members on walk in and walk out basis will continue.



III. Admission in Hospitals not empanelled by TPA or Bank

In case of admissions in the Hospitals which are neither empanelled by the Bank or by the TPA the procedure followed as hitherto will be followed. The bill will be settled by the employee and claim will be submitted to the Bank for settlement from Insurance Company/ buffer or under Bank's Scheme. In cases where the treatment cost is more than the available insurance cover, the Bank will continue to consider giving medical advance as per the Scheme in vogue vide our IOM No. P:A:TVV:2601 dated 15.09.2000.

C. Submission of claims settled by the Zones for the intervening period (01.02.2016 onwards) the amount of which have been reimbursed by the Zone to the Staff members :-

- (i) All such claims supported with original Bills, Cash memos, discharge summary etc. pertaining to the period from 01.02.2016 (i.e. after commencement of Insurance Policy) onwards which have been paid/settled by the Zones for the identified ailments covered under the Insurance Policy, will be handed over to the TPA for reimbursement to the Bank in **ONE LOT only before 07.05.2016 as per annexed format (Annexure B).**
- (ii) All such claims to be sent to the TPA with Claim Form duly signed by the Nodal Officer as the TPA will reimburse the same to the Bank.
- (iii) A copy of list of such claims submitted by the Zones, will be sent to the Head Office, Salary Division along with the Account No. wherein the reimbursement is sought.

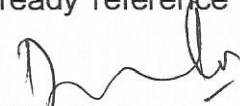
D. All such medical expenses incurred by the Officers for treatment of self and which are out of purview of Medical Insurance Scheme, will be processed and settled by the respective authority in line with the rules prevailing prior to introduction of Medical Insurance Scheme, i.e. @ 90% of the admissible expenses.

E. Hospitalisation expenses with regard to dependent family members of the Officers; and Award Staff including their dependent family members may be considered as Ex-gratia amount by the Bank to the extent of 70 % of the hospitalization expenses incurred over and above the amount so settled by the Insurance Co. as per the prevailing terms and conditions. However, for the sake of clarity it is once again advised that all medical facilities in vogue for Officers and their dependent family members prior to the implementation of New Medical Insurance Scheme will continue.

A soft copy of the Group Mediclaim Policy No. 5001002815P113575101 containing Policy Schedule and Provisions is enclosed for your ready reference and record.



Encl : As above.


(R.N. Kar)
General Manager (HR)