

BALMER LAWRIE & CO. LTD.

SBU: Travel & Vacations
Scope Complex, Core 8,
4th Floor, 7 Lodhi Road,
New Delhi - 110003

Contact Person Name: Prakriti Ojha
Phone: 011-46412246
Email: ojha.p@balmerlawrie.com

Tender No. T&V/FTC-Medicaid/19-20
Enquiry Date: 08 August, 2019
Tender Due Date: 16 August, 2019 at 14:00 hours
Tender Opening Date (Technical Bid): 16 August, 2019 at 15:00 hours
Tender Opening Date (Financial Bid): 16 August, 2019 at 16:30 hours

To,
The Insurance Companies,

Dear Sir / Madam,

BALMER LAWRIE & CO. LTD. has decided to cover the employees with their dependants of SBU: Travel & Vacations for 364 members under Group Medicaid Insurance.

The Sum Insured is graded and Family Floater. Kindly refer the following details for submission of quotations:

1. Technical Bid/Scope of Work Quote Slip as Annexure 1
2. Financial Bid Quote Slip as Annexure 2
3. Members data as Annexure 3
4. Claim Summary for 2018-19 (Period duration - 26 February 2018 till date) as Annexure 4
5. Three policy documents for 2018-19
 - a. 26 Feb 2018 - 25 Feb 2019 - as Annexure 5a
 - b. 26 Feb 2019 - 25 May 2019 - as Annexure 5b
 - c. 26 May 2019 - 25 August 2019 - as Annexure 5c

Terms & Conditions:

1. Eligibility to quote - Insurance Company should have completed two (2) years in Health Insurance Business after being registered with IRDA.
2. Gross Written Premium of the Insurance Company for Health Insurance for the year 2018-2019 should be at least Rs. 100 Crores (Proof to be attached by the insurance company)
3. The insurance company should enclose the following documents along with their offer:-
 - a. Documentary evidence of IRDA License
 - b. Proof for gross written premium (Health Insurance) for the year 2018-19
 - c. This tender document with authorised signature & company stamp as acceptance of the same.
 - d. Insurance Company should provide certificate for gross written Health Insurance premium for last 2 years.
4. The last day for submission of Technical & Financial Bid is 16th August, 2019 at 10:30 hrs.
5. The Technical Bid & Annexure A (bidder details) should be kept in one sealed envelope and the Financial Bid should be kept in another sealed envelope. Both these envelopes should be kept together in third sealed cover mentioning Tender No. T&V/FTC-Medicaid/19-20 with subject Group Medicaid Insurance - SBU: Travel & Vacations.

6. The Technical Bid & Financial Bid should have details of the insurer with authorised signature and stamp of the company. The documentary proofs should be kept with Technical Bid.
7. The tender should be deposited in the Tender Box kept at Balmer Lawrie & Co. Ltd., 4th Floor, Scope Complex, Core-8, 7, Lodhi Road, Delhi - 110003
8. Offers received after due date and time will not be entertained.
9. The Insurance Company should necessarily provide all the mandatory coverages mentioned in the Technical Bid. Those who qualify the Technical Bid will only be able to enter into the Financial Bid opening.
10. Technical Bid will be opened on 16th August, 2019 at 12:00 hrs.
11. Financial Bid will be opened on 16th August, 2019 at 14:30 hrs.
12. Clarification, if any, shall be sought not later than 3 days (before 13th August, 2019 at 05:30 pm) before the last date of submission of offer.
13. The bids of any tenderer maybe rejected if a conflict of interest between bidder and the Company is detected at any stage.
14. The premium quoted shall be firm and final, held valid during the entire course of the policy period. No provisional rate of premium should be offered. Conditional offers, if any, can be rejected by us. Offers with deviations in terms and conditions as mentioned in our tender documents can be rejected.
15. Total of the premium shall be quoted in both words and figures. Any correction / overwriting / scoring / cancellation shall be counter signed. If there is any difference in words and figures, the words will supersede figures. In case of illegibility, the interpretation of Balmer Lawrie shall be final. All entries shall be in English language only.
16. Incomplete offers are liable to be rejected.
17. Notwithstanding anything stated above, Balmer Lawrie reserves the right to assess the Insurer's capacity and capability to perform the Insurance business, should the circumstances warrant. Such an assessment will be in the overall interest of Balmer Lawrie.
18. Submitting the offer does not guarantee Balmer Lawrie accepting your offer. Balmer Lawrie reserves the right to accept or reject any offer or offers or part thereof at its sole discretion, without assigning any reason.
19. Balmer Lawrie takes no responsibility for delays, loss or non-receipt of the offers sent by the Insurers.
20. The submission of offer shall have no cause of action or claim against Balmer Lawrie for rejection of offer. The insurer whose offer is not accepted shall not be entitled to claim any costs, charges, and expenses incidental to or incurred by them in connection with the submission of their offer.
21. L1 status will be evaluated based on total premium quote, required as per Technical Bid. Premium rater should also be shared at the time of award of contract.
22. The contract may be extended for a further period of three (3) years on same terms and conditions including same premium rater as per applicable no. of lives at the time of renewal and as per business requirements on mutual agreement.
23. Please also note that this tender/NIT is published in the website www.balmerlawrie.com where

from you can also download and apply.

24. The quotations can be submitted either directly or through our empanelled Insurance Brokers. For information and ease, the list of empanelled brokers for West and North is given below:-

- a. Location : Mumbai
Contact Person : Mr. Neelesh Gupta
Contact No. : +91-9769701759
Brokers : M/s. Aditya Birla Insurance Brokers Ltd.
- b. Location : Delhi
Contact Person : Mr. Deepesh Goorha
Contact No. : +91-9810146812
Brokers : M/s. SPA Insurance Broking Services Ltd.

Quotations can be submitted through empanelled brokers of Balmer Lawrie from any region of the Country.

25. In case of a Bidder being our empanelled Insurer Broker, Bidder should have been duly authorised by the Insurance Company for submission of Bid on their behalf. (Please attach copy of authorisation from Insurance Company on the letterhead of the Insurance Company).
26. If applying through our empanelled Broker, the bid envelope should be superscribed with the broker's name along with the Insurance Company's name.
27. In case, multiple parties submit same price bid which is L1, then negotiations will be held with all such parties and decision will be taken on the basis of the additional beneficial facilities being provided by the Insurance Company.
28. As per the present policy of the Company, we do not propose to have any negotiations on the offers except with the L1 party. It would therefore be in your interest to submit the most competitive rates.
29. VALIDITY OF OFFER: Offers/bids should be valid for 60 days from last date of tender enquiry.
30. Procedure of Arbitration:
Any dispute or difference arising out of this contract shall be referred for adjudication at Kolkata to a sole arbitrator to be appointed by the Chairman & Managing Director of Balmer Lawrie & Co. Ltd. The fees of the arbitrator, if any, shall be shared equally by both the parties.

The bidders are required to read all terms and condition, sign and submit this tender document as acceptance of the same while quoting the price.

31. Vendor's Undertaking:

We have studied the tender document carefully and have quoted our rates in accordance with the terms and conditions as laid down in the tender document. We also undertake to provide all the mandatory coverages as mentioned in the technical bid. We also confirm to have accepted all terms and conditions mentioned herein.

[Authorized Signatory]

With seal & stamp

Insurer Name:

Date:

Place:

Annexure - A

(If Insurance Company is applying directly, this Annexure-A should have the details of the Insurance Company. If the Insurance Company is applying through the broker, this Annexure-A should have the details of the broker).

Details of Bidder:-

S. No.	Details	Response
1.	Name of the Bidder	
2.	Address of the Company	
3.	Registered/Head Office of the Company	
4.	Whether Partnership Firm/Limited Company	
5.	Name of Directors/Partners/Proprietor	
6.	Date of Incorporation	
7.	Address of the Delhi Branch Office with Telephone No. and Name of the Contact Person/Branch Manager Address of the Mumbai Branch Office with Telephone No. and Name of the Contact Person/Branch Manager	
8.	At least name of three (3) parties to whom you have done similar type of work - Attach Xerox Copy of Order	
9.	Whether, you have been involved with this type of Insurance job for any office of Balmer Lawrie & Co. Ltd. If so, please provide details	
10.	Certificate from the Bankers as proof of address	
11.	PAN No.	
12.	GSTIN	
13.	Contact Person and Phone No.	

Signatures of the Tenderer with Official Stamp/Seal

TECHNICAL BID / SCOPE OF WORK (to be filled by the Insurance Company)

QUALIFICATION

Name of the Insurance Company	
IRDA License No.	
No. of years in the Health Insurance Business	
Gross Written Premium (Health Insurance) for the year 2018-2019 (in Rs. Crores)	
Branch / Divisional Office Address in Delhi	
INSURED	BALMER LAWRIE & CO. LTD.
TYPE OF POLICY	GROUP MEDICLAIM INSURANCE
POLICY PERIOD	From: 26/08/2019 To 25/08/2020

Mandatory Coverages	Yes/No	Remarks (If Any)
No. of Employees Covered= 154		
No. of Dependents Covered= 212		
Family Definition (Self + Spouse + 2 dependent children upto max 80 yrs of age)		
Family Floater Sum Insured under the Policy (Rs. 3 Lakhs, Rs. 4 Lakhs, Rs. 5 Lakhs, Rs. 7 Lakhs & Rs. 10 Lakhs)		
Increase in family floater sum Insured during course of policy- Yes once in a year at the time of appraisal		
Terrorism & Epidemic Cover from day one of policy inception		
Pre & Post Hospitalization coverage for 30 & 60 days respectively		
No Domiciliary Treatment Cover		
Pre existing disease coverage		
Waiver of 30 days waiting period		
Waiver of 1st, 2nd, 3rd & 4th year waiting period		
Room Rent Cappings (Normal= 1% of the Sum Insured & ICU= 2% of the Sum Insured)		
No Capping on any Ailments		
Coverage for Internal Congenital disease/defects or anomalies		
No Coverage for External Congenital disease/defects or anomalies		
Coverage for Dental treatment following due to illness/injury/accident in case of hospitalization only		
No Dental Treatment/procedure other than accidental on OPD basis		
Maternity Cover for female employee / spouse of employee (Rs. 50,000 for both Normal & Caesarean)		
Waiver of 9 month waiting period for maternity		
No Coverage for Treatment relating to Infertility, sterility and complications		
Baby day one cover within Family floater Sum Insured		
Pre & Post Natal Expense - Rs. 5,000 within the maternity limit		
Ambulances charges - Rs. 1,500 per incidence		
Day care treatment / Procedures Covered		
No Coverage for Treatment/procedure related to AIDS		
No Corporate Buffer		
No Co-pay		
No PPN Charges/Rates		
Mid-term Addition of Dependents Allowed (on additional premium as per applicable premium rater)		
Mid-term Deletion Allowed		
No Coverage for payment of Service Charges, Surcharges, Registration Charges or any other charges levied by hospital		
Cashless facility from Third Party Administrator		
Addition & Deletion of Employee & their dependents will be done from Date of Joining & Date of Leaving respectively on pro-rata basis		
Claim Intimation Clause- 7 days from the date of hospitalization		
Claim Document Submission Clause- 30 days from the date of discharge from hospital		
Name of Third Party Administrator		
Any Other Additional Coverages		
Portability for Retired Employees - to be granted by the insurer subject to certificate of coverage from the employer.		
Any other facility/benefits		

For Insurer

Signature:

Contact Person Name:

Contact No/Mobile No:

Email Address:

FINANCIAL BID (to be filled by the Insurance Company)

Insured	BALMER LAWRIE & CO. LTD.
Type of Policy	GROUP MEDICLAIM INSURANCE
Policy Period	From: 26/08/2019 To 25/08/2020
Name of Insurer	
Net Premium	
GST @ 18.00%	
Total Premium Payable (in figures)	
Total Premium Payable (in words)	

For Insurer

Signature:

Contact Person Name:

Contact No/Mobile No:

Email Address:

Sr. No	Employee No.	Name	Gender	Date Of Birth	Age	Relation	Sum Insured
1	60000	HARIHAR YADAV	Male	31-Dec-1972	46	Self	300000
2	60000	KSHITIJ YADAV	Male	18-Jan-2009	10	Child1	300000
3	60000	VANDANA YADAV	Female	2-Feb-1979	40	Spouse	300000
4	60005	GAURAV KUMAR AGGARWAL	Male	24-May-1977	42	Self	400000
5	60005	MAYANK AGGARWAL	Male	9-Jul-2015	3	Child2	400000
6	60005	ISHAAN AGGARWAL	Male	9-Jul-2015	3	Child1	400000
7	60005	SWATI AGGARWAL	Female	18-Aug-1981	37	Spouse	400000
8	60010	CHEITNA KAPOOR	Female	23-Jul-1975	43	Self	400000
9	60010	HITESHITA KAPOOR	Female	29-Jul-2003	15	Child1	400000
10	60011	POONAM SLATHIA	Female	4-May-1976	43	Self	300000
11	60011	ADITI SLATHIA	Female	13-Aug-2008	10	Child1	300000
12	60011	SOHAN SINGH SLATHIA	Male	15-May-1972	47	Spouse	300000
13	60014	PUNEET SINGHAL	Male	28-Oct-1975	43	Self	400000
14	60014	SAANVI SINGHAL	Female	28-Feb-2006	13	Child1	400000
15	60014	SHEEFA SINGHAL	Female	25-Aug-1983	35	Spouse	400000
16	60015	KRISHAN KANT SHARMA	Male	14-Mar-1983	36	Self	300000
17	60015	VAIBHAV BHARDWAJ	Male	14-Feb-2007	12	Child2	300000
18	60015	PRIYANSHI SHARMA	Female	14-Sep-2004	14	Child1	300000
19	60015	SAVITA SHARMA	Female	20-Jun-1981	37	Spouse	300000
20	60018	MOHIT BHARDWAJ	Male	5-Nov-1982	36	Self	500000
21	60020	SANJAY KUMAR SHARMA	Male	19-Jul-1970	48	Self	300000
22	60020	CHARU SHARMA	Female	10-Oct-2004	14	Child2	300000
23	60020	NISHANT SHARMA	Male	15-Sep-1998	20	Child1	300000
24	60020	SUNITA SHARMA	Female	26-Sep-1979	39	Spouse	300000
25	60022	N UMA MAHESH	Male	21-Aug-1980	38	Self	400000
26	60022	N.DHRUVIKA	Female	29-May-2008	10	Child1	400000
27	60022	N.MAHESWARI	Female	24-Sep-1982	36	Spouse	400000
28	60024	BALJINDER KAUR	Female	22-Aug-1977	41	Self	500000
29	60024	UDAYVIR SINGH	Male	10-Aug-2014	4	Child2	500000
30	60024	GANEV KAUR	Female	17-Oct-2008	10	Child1	500000
31	60024	INDERBIR SINGH	Male	7-Dec-1975	43	Spouse	500000
32	60026	MOHAMMED SHARIK KHAN	Male	1-Jul-1968	50	Self	500000
33	60026	ANSHARA KHAN	Female	31-May-2013	5	Child2	500000
34	60026	AHZAM KHAN	Male	15-Aug-2003	15	Child1	500000
35	60026	TOOBA JAMAL	Female	20-May-1972	47	Spouse	500000
36	60028	AQUEEL AHMAD KHAN	Male	12-Dec-1973	45	Self	400000
37	60028	SHABANA KHAN	Female	15-Jun-1977	41	Spouse	400000
38	60028	ANIA KHAN	Female	11-Dec-2005	13	Child1	400000
39	60028	IQRA KHAN	Female	3-Dec-2008	10	Child2	400000
40	60031	TT MATHEWS	Male	6-Nov-1974	44	Self	300000
41	60031	THOMAS MATHEWS	Male	14-May-2008	11	Child2	300000
42	60031	SUSAN MARIAM MATHEWS	Female	31-Mar-2005	14	Child1	300000
43	60031	JYOTHI ANN GEORGE	Female	7-Mar-1981	38	Spouse	300000
44	60044	DEEPESH BISWAS	Male	14-Feb-1984	35	Self	400000
45	60044	JAIVIK BISWAS	Male	20-Apr-2017	2	Child1	400000
46	60044	SARASWATI BISWAS	Female	29-Aug-1993	25	Spouse	400000
47	60045	P NICKSON RAJ	Male	27-Feb-1984	35	Self	300000
48	60045	SARITA DEVI	Female	20-Oct-1985	33	Spouse	300000

Sr. No	Employee No.	Name	Gender	Date Of Birth	Age	Relation	Sum Insured
49	60067	THIYAGARAJAN S	Male	4-Jan-1968	51	Self	700000
50	60067	PRANAV SELVARAJ	Male	14-Apr-1999	20	Child1	700000
51	60067	CHINAN KRISHNAVENI	Female	19-Sep-1972	46	Spouse	700000
52	60008	DASHRATH KUMAR MISHRA	Male	10-Oct-1972	46	Self	500000
53	60008	ANSHU ADITYA	Male	20-Jan-2012	7	Child1	500000
54	60008	ARTI MISHRA	Female	12-Sep-1974	44	Spouse	500000
55	60069	VENKATRAMAN DORAIRAJAN	Male	14-Oct-1967	51	Self	700000
56	60069	JATHIN PRITHVI	Male	24-Feb-1998	21	Child1	700000
57	60069	JAYASHREE DORAIRAJAN	Female	18-Sep-1972	46	Spouse	700000
58	60073	LEERA LLOYD SEQUEIRA	Female	6-Aug-1966	52	Self	700000
59	60073	SHAKAN SEQUEIRA	Male	10-Jan-1996	23	Child2	700000
60	60073	SADHIKA SEQUEIRA	Female	7-Jul-1997	21	Child1	700000
61	60073	LLOYD SEQUEIRA	Male	17-Aug-1962	56	Spouse	700000
62	60074	RAMANAND BORADA VENKATA	Male	24-Dec-1974	44	Self	700000
63	60074	VENKAT MONISHRAM BORADA	Male	11-Jul-2005	13	Child2	700000
64	60074	NAYONIKA BORADA	Female	15-Jan-2012	7	Child1	700000
65	60074	MADHURI BORADA	Female	25-Aug-1976	42	Spouse	700000
66	60082	VIKAS TATU PEDNEKAR	Male	2-Mar-1971	48	Self	700000
67	60082	DURVESH V PEDNEKAR	Male	29-Mar-2006	13	Child1	700000
68	60082	VRUSHALI VIKAS PEDNEKAR	Female	2-Apr-1978	41	Spouse	700000
69	60090	MEENU CHOUDHARY	Female	4-Jul-1985	33	Self	500000
70	60090	NANDAN KUMAR JHA	Male	28-Jun-1986	32	Spouse	500000
71	60093	SANAT KUMAR HEGDE	Male	30-Sep-1982	36	Self	500000
72	60093	AMAYRA HEGDE	Female	26-Oct-2016	2	Child1	500000
73	60093	MEGHA HEGDE	Female	17-Oct-1987	31	Spouse	500000
74	60098	ROHIT KUMAR PANDEY	Male	18-Sep-1975	43	Self	400000
75	60098	PIYUSH KUMAR PANDEY	Male	24-Feb-2007	12	Child2	400000
76	60098	KHUSHI PANDEY	Female	19-Aug-2001	17	Child1	400000
77	60098	SONI PANDEY	Female	15-Jan-1981	38	Spouse	400000
78	60101	POOJA JAYA SHETTY	Female	24-Jun-1984	34	Self	500000
79	60105	M VASANTHI	Female	5-Nov-1984	34	Spouse	400000
80	60105	HEMASRI MURUGESAN	Female	28-Dec-2015	3	Child2	400000
81	60105	M. ROSHINY	Female	23-May-2013	6	Child1	400000
82	60105	MURUGESAN HARIDOSS	Male	6-Apr-1983	36	Self	400000
83	60107	RAMESH A CHAUHAN	Male	2-Sep-1958	60	Self	300000
84	60107	DHANESH R CHAUHAN	Male	1-Aug-1997	21	Child1	300000
85	60107	JYOTI R CHAUHAN	Female	23-Apr-1965	54	Spouse	300000
86	60109	NILAMBARI N SAWARDEKAR	Female	20-Jun-1986	32	Self	500000
87	60109	JIAANSH RAJESH LADI	Male	23-Sep-2015	3	Child1	500000
88	60109	RAJESH RAMESH LADI	Male	17-Oct-1988	30	Spouse	500000
89	60113	SHAFIQUE SHAIKH	Male	21-Jul-1973	45	Self	300000
90	60113	ARHAM SHAFIQUE SHAIKH	Male	24-Mar-2004	15	Child1	300000
91	60113	AAREFA SHAFIQUE SHAIKH	Female	2-Jun-1975	43	Spouse	300000
92	60114	RESHMA SUNIL KANCHAN	Female	13-Aug-1983	35	Self	400000
93	60114	SUNIL KANCHAN	Male	14-May-1980	39	Spouse	400000
94	60115	B KARTHEESH K BALASUBRAMANIAN	Male	21-Jun-1977	41	Self	400000
95	60115	MOKSHITHASREE .	Female	9-Nov-2012	6	Child2	400000

Sr. No	Employee No.	Name	Gender	Date Of Birth	Age	Relation	Sum Insured
96	60115	NITHIYASRI K	Female	8-Sep-2008	10	Child1	400000
97	60115	HEMALATHA K	Female	12-Apr-1980	39	Spouse	400000
98	60116	NEELAKANDAN M	Male	20-May-1982	37	Self	300000
99	60116	N. SHAKTI	Male	15-Nov-2017	1	Child2	300000
100	60116	N. HARINI .	Female	5-Sep-2010	8	Child1	300000
101	60116	N KRISHNAVENI .	Female	1-Jan-1988	31	Spouse	300000
102	60117	SANTOSH GANPAT BANE	Male	27-Jun-1978	40	Self	400000
103	60117	KAVYA SANTOSH BANE	Female	26-Dec-2015	3	Child2	400000
104	60117	MAYANK SANTOSH BANE	Male	2-Oct-2009	9	Child1	400000
105	60117	SAMEEDHA SANTOSH BANE	Female	29-Jun-1979	39	Spouse	400000
106	60126	PRANAY DIGAMBAR RAUT	Male	22-Feb-1981	38	Self	300000
107	60126	PRERANA PRANAY RAUT	Female	19-Mar-1987	32	Spouse	300000
108	60126	AARVI PRANAY RAUT	Female	29-Nov-2018	0	Child1	300000
109	60128	PRASAD NITIN MANJREKAR	Male	19-Feb-1990	29	Self	400000
110	60128	SHILPA PRASAD MANJREKAR	Female	20-Nov-1983	35	Spouse	400000
111	60135	MITALI BOGHANI	Female	3-Mar-1988	31	Self	500000
112	60154	HARMEET DHIMAN	Male	24-Aug-1984	34	Self	300000
113	60157	P.L.S. AMAL DAS	Male	5-Sep-1990	28	Self	300000
114	60157	DAYANA FELICIAH	Female	28-Nov-1984	34	Spouse	300000
115	60168	SUDEEP NIRANJAN MANDAL	Male	10-Oct-1985	33	Self	300000
116	60201	G D SULEKHA	Female	5-Mar-1981	38	Self	400000
117	60201	TUSHAR R	Male	20-Jan-2009	10	Child1	400000
118	60201	N RAGHU	Male	9-Jan-1979	40	Spouse	400000
119	60204	V PRAVEEN KUMAR	Male	11-Mar-1975	44	Self	300000
120	60204	PRATHAMESH VISHNUPURIKAR	Male	22-Aug-2013	5	Child1	300000
121	60204	ARCHANA KULKARNI	Female	10-Aug-1976	42	Spouse	300000
122	60206	S TULASI	Female	22-Nov-1986	32	Self	300000
123	60206	SHASTRICHAND G	Male	18-Feb-1985	34	Spouse	300000
124	60208	SHUBHAM	Male	13-Jul-2009	9	Child2	400000
125	60208	PRACHI	Female	5-Nov-2007	11	Child1	400000
126	60208	JYOTI LAL	Female	17-Sep-1980	38	Spouse	400000
127	60208	SUNDER LAL	Male	23-Feb-1979	40	Self	400000
128	60209	BHARAT KUMAR BHARDWAJ	Male	22-Sep-1985	33	Self	400000
129	60209	KASHVI BHARDWAJ	Female	12-Apr-2017	2	Child1	400000
130	60209	SONIA BHARDWAJ	Female	8-Oct-1986	32	Spouse	400000
131	60211	MUKESH KUMAR SHARMA	Male	27-Jun-1984	34	Self	300000
132	60213	PRASHANT DABAS	Male	7-Dec-1981	37	Self	300000
133	60213	ROSHITA DABAS	Female	17-Jan-2012	7	Child1	300000
134	60213	PREETI	Female	25-Oct-1986	32	Spouse	300000
135	60215	SUBHRO SHANKAR GHOSH	Male	2-May-1975	44	Self	300000
136	60221	ISHAR SINGH	Male	20-Nov-1977	41	Self	300000
137	60221	SUKHDEEP SINGH	Male	17-Dec-2004	14	Child1	300000
138	60221	DALJEET KAUR	Female	1-Mar-1983	36	Spouse	300000
139	60222	PURNESH KUMAR	Male	4-Dec-1984	34	Self	300000
140	60222	ADITI	Female	19-Jan-2014	5	Child1	300000
141	60222	JYOTI KAUSHIK	Female	1-Feb-1988	31	Spouse	300000
142	60226	AKASH KHANDELWAL	Male	14-Oct-1987	31	Self	300000
143	60226	PRIYA KHANDELWAL	Female	4-Jan-1995	24	Spouse	300000

Sr. No	Employee No.	Name	Gender	Date Of Birth	Age	Relation	Sum Insured
144	60228	CHANCHAL SHARMA	Female	25-Jun-1977	41	Spouse	300000
145	60228	DEEYA SHARMA	Female	3-Nov-2006	12	Child2	300000
146	60228	ADITYA KUMAR	Male	21-Mar-2003	16	Child1	300000
147	60228	AMRISH KUMAR	Male	16-Jul-1973	45	Self	300000
148	60229	NEHA CHAUHAN	Male	4-Mar-1990	29	Self	400000
149	60238	M RAJESH	Male	24-Nov-1985	33	Self	400000
150	60238	LAVINA RAJESH	Female	3-Nov-2017	1	Child1	400000
151	60238	SATHIYA S	Female	31-May-1989	29	Spouse	400000
152	60242	HEMANTA KUMAR PATRA	Male	13-Jun-1986	32	Self	300000
153	60242	RASMITA RAY	Female	30-Apr-1992	27	Spouse	300000
154	60247	KRISHNA GHOSH	Female	11-Dec-1979	39	Self	300000
155	60247	PRABIR KUMAR GHOSH	Male	26-Aug-1965	53	Spouse	300000
156	60273	AMAR ASHOK KOLTHARKAR	Male	2-Dec-1978	40	Self	300000
157	60273	TEJAL AMAR KOLTHARKAR	Female	9-Mar-2007	12	Child1	300000
158	60273	AMITA AMAR KOLTHARKAR	Female	22-Mar-1986	33	Spouse	300000
159	60274	VIJAY POOJARY	Male	28-Mar-1974	45	Self	300000
160	60274	HARSHVARDHANA VIJAY POOJARY	Male	2-Mar-2015	4	Child2	300000
161	60274	KARTIK.V. POOJARY	Male	28-Jan-2010	9	Child1	300000
162	60274	RAKHI .V. POOJARY	Female	3-Sep-1978	40	Spouse	300000
163	60275	SUNIL SHRIPATI AMBULKAR	Male	1-Jun-1983	35	Self	300000
164	60275	GARGI SUNIL AMBULKAR	Female	14-Oct-2013	5	Child2	300000
165	60275	KASHISH	Female	8-Sep-2010	8	Child1	300000
166	60275	SUNITA AMBULKAR	Female	21-Nov-1986	32	Spouse	300000
167	60276	BHAGYASHRI SACHIN KUMBHAR	Female	3-Sep-1987	31	Spouse	300000
168	60276	ISHA SACHIN KUMBHAR	Female	17-Oct-2016	2	Child2	300000
169	60276	AYUSH SACHIN KUMBHAR	Male	21-Mar-2010	9	Child1	300000
170	60276	SACHIN KUMBHAR	Male	2-Mar-1982	37	Self	300000
171	60279	MANISH KUMAR	Male	24-Nov-1978	40	Self	400000
172	60279	LAKSHYA RAJ SINGH	Male	23-Jun-2014	4	Child2	400000
173	60279	YASHRAJ SINGH	Male	19-Dec-2008	10	Child1	400000
174	60279	PARUL	Female	2-Nov-1981	37	Spouse	400000
175	60283	YOGESH MATHUR	Male	27-Mar-1962	57	Self	500000
176	60283	SAKSHAM MATHUR	Male	15-Oct-2000	18	Child2	500000
177	60283	VISHESH MATHUR	Male	13-May-1998	21	Child1	500000
178	60283	POONAM MATHUR	Female	14-Feb-1972	47	Spouse	500000
179	60287	PRANJALI DERE	Female	13-Nov-1980	38	Self	300000
180	60287	SIDDHI PATIL	Female	24-Jun-2012	6	Child1	300000
181	60287	SUYOG PATIL	Male	23-Nov-1975	43	Spouse	300000
182	60301	S SATHISHKUMAR	Male	4-Apr-1991	28	Self	300000
183	60304	K PRABHAKAR	Male	15-May-1985	34	Self	400000
184	60304	KATA CHRISTINA SPOORTHI	Female	5-Dec-2014	4	Child2	400000
185	60304	KATA JOSE AARON	Male	10-May-2012	7	Child1	400000
186	60304	KATA SUNITHA	Female	12-Feb-1982	37	Spouse	400000
187	60306	YOGESH MITTAL	Male	12-Jan-1983	36	Self	300000
188	60306	TANMAY MITTAL	Male	21-Feb-2014	5	Child2	300000
189	60306	YASHIKA MITTAL	Female	15-Sep-2010	8	Child1	300000
190	60306	ANJALI MITTAL	Female	26-Mar-1986	33	Spouse	300000

Sr. No	Employee No.	Name	Gender	Date Of Birth	Age	Relation	Sum Insured
191	60324	AJAY GAUR	Male	19-Oct-1984	34	Self	300000
192	60324	SHREYANNSH GAUR	Male	24-Aug-2016	2	Child1	300000
193	60324	RAKHI GAUR	Female	28-Aug-1989	29	Spouse	300000
194	60328	MAMTA MUKHERJEE	Female	2-Dec-1983	35	Self	500000
195	60328	ANUJ MUKHERJEE	Male	15-Apr-1979	40	Spouse	500000
196	60328	HARSHIKA MUKHERJEE	Female	28-Nov-2013	5	Child1	500000
197	60332	SONIA BHASIN	Female	16-Dec-1989	29	Self	300000
198	60332	SANDEEP ARORA	Male	22-Jun-1985	33	Spouse	300000
199	60332	KRIDAY ARORA	No Gender	3-Mar-2017	2	Child1	300000
200	60338	TRACY D SOUZA	Female	15-Sep-1985	33	Self	500000
201	60338	NIGEL D SOUZA	Male	20-Feb-1984	35	Spouse	500000
202	60338	LAURYN EMILY DSOUZA	Female	12-Apr-2018	1	Child1	500000
203	60339	SONAL SUDHIR SALASKAR	Female	8-Sep-1992	26	Self	300000
204	60340	DEEPAK ROJINDAR	Male	21-Mar-1981	38	Self	300000
205	60340	POOJA ROJINDAR	Female	28-Jun-1982	36	Spouse	300000
206	60340	HAANSAJ ROJINDAR	Male	2-Aug-2008	10	Child1	300000
207	60348	BHATIA PREETI	Female	18-Oct-1990	28	Self	300000
208	60351	AYESHA CARMEN FERNANDES	Female	28-Aug-1985	33	Self	300000
209	60363	MAYANK GAUTAM	Male	7-Oct-1988	30	Self	300000
210	60363	B/O PREMANGI GAUTAM	Male	26-Apr-2019	1	Child2	300000
211	60363	PREMANGI GAUTAM	Female	18-Jul-1989	29	Spouse	300000
212	60363	HRISHITA GAUTAM	Female	26-Feb-2017	2	Child1	300000
213	60364	JAY PRAKASH KUMAR	Male	5-Jan-1986	33	Self	300000
214	60364	MS. MANVI KUMARI	Female	5-Jul-1991	27	Spouse	300000
215	60376	GAUTHAM TAMILCHELVAN	Male	24-Sep-1988	30	Self	400000
216	60376	SARANYA SHANMUGAM	Female	26-Sep-1991	27	Spouse	400000
217	60378	CHANDAN JHA	Male	6-May-1983	36	Self	500000
218	60378	ACHINTYA JHA	Male	24-Jan-2017	2	Child1	500000
219	60378	ANNI JHA	Female	29-Jun-1992	26	Spouse	500000
220	60379	MS MATHURA	Female	6-May-2006	13	Child1	300000
221	60379	S MOHAN KUMAR	Male	29-Sep-1974	44	Spouse	300000
222	60379	MALA MOHAN	Female	17-Dec-1978	40	Self	300000
223	60382	SANGEETA CHOUDHURY	Female	27-Jan-1982	37	Self	300000
224	60383	ABHINAV ARORA	Male	30-Jul-2013	5	Child1	300000
225	60383	AKSHITA ARORA	Female	18-Jul-2017	1	Child2	300000
226	60383	SUMIT ARORA	Male	15-Sep-1980	38	Spouse	300000
227	60383	DEEPIKA ARORA	Female	10-Nov-1989	29	Self	300000
228	60385	RAJBEER KAUR	Female	27-Nov-1988	30	Self	300000
229	60385	BABY OF RAJBEER KAUR	Female	19-Jan-2018	1	Child1	300000
230	60385	MR RAJPREET SINGH	Male	26-Jun-1988	30	Spouse	300000
231	60387	SANDHYA MALIK	Female	24-Sep-1959	59	Self	1000000
232	60387	ANEESHA MALIK	Female	1-Jan-1993	26	Child1	1000000
233	60387	DEEPAK MALIK	Male	22-Nov-1960	58	Spouse	1000000
234	60388	BIDYUT BIKASH MOHAN	Male	1-Feb-1975	44	Self	300000
235	60388	HRISIKESH MOHAN	Male	5-Aug-2006	12	Child1	300000
236	60388	BONTI BOKALIAL MOHAN	Female	30-Jun-1980	38	Spouse	300000
237	60325	MEENAKSHI KAIN	Female	6-Aug-1985	33	Self	300000

Sr. No	Employee No.	Name	Gender	Date Of Birth	Age	Relation	Sum Insured
238	60391	ANJALI TYAGI	Female	25-Feb-1988	31	Self	300000
239	60391	SHASHWAT TYAGI	Male	1-May-2014	5	Child1	300000
240	60391	SANDEEP TYAGI	Male	25-Jun-1986	32	Spouse	300000
241	60392	SHIKHA GROVER	Female	16-Sep-1991	27	Self	400000
242	60392	B/O SHIKHA	Male	22-Feb-2018	1	Child1	400000
243	60392	MOHIT CHADDA	Male	11-Jul-1987	31	Spouse	400000
244	60394	SUDIPTA SETH	Female	28-Sep-1987	31	Self	300000
245	60398	CHE TAN GHANSHYAM BAYAS	Male	18-Jun-1990	28	Self	300000
246	60406	PRAMOD BALAKRISHNA NAIK-DESAI	Male	5-Sep-1986	32	Self	300000
247	60410	SNEHA CHANDRAKANT BAIKER	Female	5-Sep-1986	32	Self	300000
248	60411	SHAGUFTA SUMBUL	Female	31-Jul-1991	27	Self	300000
249	60412	POOJA T P	Female	3-Apr-1990	29	Self	400000
250	60412	RAKESH P	Male	27-Jun-1988	30	Spouse	400000
251	60413	SANGITA BARUAH	Female	30-Jan-1987	32	Self	500000
252	60415	SURENDER KUMAR	Male	12-May-1980	39	Self	300000
253	60415	ATHRAV SINGH	Male	7-Jan-2017	2	Child2	300000
254	60415	ARNAV SINGH	Male	19-Aug-2013	5	Child1	300000
255	60415	SWATI SINGH	Female	29-Jul-1988	30	Spouse	300000
256	60414	SHACHIN THAKUR	Male	12-Jul-1986	32	Spouse	300000
257	60414	RUSHANK SHARMA	Female	11-Dec-2018	0	Child1	300000
258	60414	RIDHI SHARMA	Female	23-Jun-1992	26	Self	300000
259	60422	RIMI BANIK	Female	11-Apr-1982	37	Self	300000
260	60422	AAHANA	Female	28-Aug-2013	5	Child1	300000
261	60422	SURAJIT	Male	5-Jan-1976	43	Spouse	300000
262	60425	MOHAMMED NADEEM KHAN	Male	13-Sep-1991	27	Self	300000
263	60431	MOHD. SARFRAJ KHAN	Male	16-Aug-1987	31	Self	300000
264	60443	DEEPAK KUMAR SINGH	Male	29-Jul-1989	29	Self	500000
265	60445	MD HARUN RASHID	Male	3-Mar-1988	31	Self	300000
266	60448	DEEPIKA TRIPATHI	Female	7-Feb-1989	30	Self	300000
267	60451	SOPHIA LANCY DMELLO	Female	24-Feb-1967	52	Self	500000
268	60452	DEBASIS BISWAL	Male	3-Mar-1988	31	Self	300000
269	60452	MADHUSMITA BEURA	Female	25-Mar-1995	24	Spouse	300000
270	60454	SRIKANTH MURALI	Male	2-Feb-1986	33	Self	300000
271	60495	VAIJAYANTI HARSHAD GHARPURE	Female	8-Jan-1985	34	Self	300000
272	60495	HARSHAD GHARPURE	Male	4-Aug-1982	36	Spouse	300000
273	60500	SUNIL RAM BARSING	Male	1-Apr-1987	32	Self	300000
274	60500	ARCHANA SUNIL BARSING	Female	15-Jan-1988	31	Spouse	300000
275	60500	ASIT SUNIL BARSING	Male	27-Feb-2016	3	Child1	300000
276	60504	ASHOK KUMAR	Male	3-May-1989	30	Self	300000
277	60504	GEETA	Female	27-Oct-1994	24	Spouse	300000
278	60416	JYOTI MEHRA	Female	29-Jun-1991	27	Self	300000
279	60513	NEHA RAMRATAN VERMA	Female	1-Dec-1991	27	Self	300000
280	60520	BHAGAT RAM	Male	2-Sep-1983	35	Self	300000
281	60520	RITIKA SHARMA	Female	14-Jul-2013	5	Child1	300000
282	60520	REKHA RANI	Female	5-Feb-1990	29	Spouse	300000
283	60523	RUCHIKA SHARMA	Female	26-Nov-1987	31	Self	500000

Sr. No	Employee No.	Name	Gender	Date Of Birth	Age	Relation	Sum Insured
284	60523	ARUN KANDPAL	Male	21-Jul-1987	31	Spouse	500000
285	60533	PURVI RAMNIK SHAH	Female	22-Dec-1978	40	Self	700000
286	60534	ROHIT RAJENDRA PARDESHI	Male	5-Sep-1989	29	Self	300000
287	60534	HARSHA ROHIT PARDESHI	Female	6-Jun-1991	27	Spouse	300000
288	60537	RAJESH KUMAR	Male	12-Nov-1986	32	Self	500000
289	60537	ANJU	Female	9-Aug-1991	27	Spouse	500000
290	60541	MANISH VASANT SAMANT	Male	15-Mar-1987	32	Self	300000
291	60543	AKASH KUMAR	Male	13-Oct-1992	26	Self	300000
292	60548	VIKASH KUMAR PANDEY	Male	15-Jan-1993	26	Self	500000
293	60567	VENKATARAJU N	Male	2-Dec-1992	26	Self	300000
294	60570	SANJYOLI CHHETRI	Female	9-Dec-2003	15	Child2	500000
295	60570	KUNZUM CHHETRI	Female	1-Nov-2000	18	Child1	500000
296	60570	AMITA CHHETRI	Female	30-Jun-1973	45	Spouse	500000
297	60570	PURAN CHHETRI	Male	1-May-1976	43	Self	500000
298	60571	NEHA GWARI	Female	24-Aug-1990	28	Self	500000
299	60571	NIKHIL KUMAR GWARI	Male	8-Oct-1986	32	Spouse	500000
300	60574	ANITA HARRY DSOUZA	Female	30-Jan-1978	41	Self	500000
301	60574	HARRY DSOUZA	Male	16-Aug-1968	50	Spouse	500000
302	60574	JANICIA DSOUZA	Female	13-Dec-2006	12	Child1	500000
303	60575	MOHAMMED ARIF ABDUL QAYYUM SHAIKH	Male	16-Dec-1984	34	Self	300000
304	60575	ZAKIYA ARIF SHAIKH	Female	25-Oct-1990	28	Spouse	300000
305	60575	MAHIRA ARIF SHAIKH	Female	9-Oct-2016	2	Child1	300000
306	60576	RAVI HIRALAL SOLANKI	Male	1-Mar-1983	36	Self	500000
307	60576	AGASTYA RAVI SOLANKI	Female	2-Dec-2012	6	Child1	500000
308	60576	POONAM RAVI SOLANKI	Female	13-Jul-1987	31	Spouse	500000
309	60577	SARMISTHA DAS	Female	31-Mar-1979	40	Self	700000
310	60577	SIBA SOUMENDRA PATRO	Male	16-Jun-1979	39	Spouse	700000
311	60577	YASHVARDHAN PATRO	Male	9-Feb-2011	8	Child1	700000
312	60581	PRATIK DATTA	Male	7-May-1984	35	Self	700000
313	60583	UMESH RAJENDRAN GOUNDER	Male	7-Dec-1989	29	Self	300000
314	60584	DAKSHITA PARIKSHIT ASHAR	Female	20-Dec-1985	33	Self	500000
315	60584	PARIKSHIT BHARAT ASHAR	Male	18-Oct-1979	39	Spouse	500000
316	60584	ANAYA PARIKSHIT ASHAR	Female	5-Jan-2016	3	Child1	500000
317	60586	GUPTA PRASAD SAHOO	Male	26-Jun-1985	33	Self	500000
318	60590	TABRAZ ALI	Male	19-May-1980	39	Self	500000
319	60590	AALIYA AFREEN	Female	25-Jan-1992	27	Spouse	500000
320	60590	MOHAMMED RAYYAN	Male	23-Jun-2011	7	Child1	500000
321	60590	MOHAMMED SUFIYAN	Male	16-Aug-2015	3	Child2	500000
322	60135	ROHAN PRAMOD SHINDE	Male	22-Apr-1987	32	Spouse	500000
323	60452	DIBYAMJYOTI BISWAL	Male	24-Mar-2019	1	Child1	300000
324	60090	AAHWAN JHA	Male	4-Aug-2018	1	Child1	500000
325	60585	TUHINA SEN	Female	11-Nov-1985	33	Self	500000
326	60585	ROHAN PAUL	Male	4-Jan-1985	34	Spouse	500000
327	60587	RAJEE SRINIVASAN	Female	1-Feb-1984	35	Self	500000
328	60591	RAKESH LAXMAN NEMADI	Male	25-Aug-1991	27	Self	300000
329	60595	PRIYAL JATIN LONE	Female	21-Nov-1992	26	Self	500000
330	60595	JATIN PRAVIN LONE	Male	6-Mar-1986	33	Spouse	500000

Sr. No	Employee No.	Name	Gender	Date Of Birth	Age	Relation	Sum Insured
331	60594	PRASHANT GUPTA	Male	11-Feb-1993	26	Self	300000
332	60596	RAJNI KANT TRIVEDI	Male	4-Apr-1990	29	Self	300000
333	60596	NEHA	Female	10-Oct-1995	23	Spouse	300000
334	60126	HARSH PRANAY RAUT	Male	27-Jan-2013	6	Child2	300000
335	60597	ASHISH GOPAL SAXENA	Male	22-Jan-1983	36	Self	700000
336	60597	NAMITA ASHISH SAXENA	Female	8-Aug-1985	34	Spouse	700000
337	60597	ANSH ASHISH SAXENA	Male	15-Jul-2012	7	Child1	700000
338	60598	ADITI VINAY POTDAR	Female	19-Oct-1987	31	Self	300000
339	60600	PRIYA SANTWANI	Female	7-Jul-1992	27	Self	300000
340	60600	VIKAS KATARIA	Male	18-Aug-1987	31	Spouse	300000
341	60601	KEYUR BIPINCHANDRA JANI	Male	14-Jun-1991	28	Self	500000
342	60606	RONAK PREMCHAND VISHWAKARMA	Male	1-Jun-1987	31	Self	300000
343	60606	SUREKHA R. VISHWAKARMA	Female	8-Feb-1990	29	Spouse	300000
344	60606	VIVAAN R VISHWAKARMA	Male	19-Dec-2015	3	Child1	300000
345	60606	MAANAV R VISHWAKARMA	Male	23-Jan-2019	0.6	Child2	300000
346	60602	SAKSHI SHARMA	Female	3-Apr-1993	26	Self	500000
347	60605	LALITA BISHT	Female	19-Apr-1991	28	Self	300000
348	60605	Narender Singh Negi	Male	28-Apr-1986	33	Spouse	300000
349	60612	KAMPARAJU PREMASAGAR GOUD	Male	1-Aug-1991	27	Self	300000
350	60614	SWATI PATWAL	Female	14-Sep-1989	29	Self	500000
351	60614	VIKAS SAMKARIA	Male	8-Mar-1989	30	Spouse	500000
352	60615	PALLAVI RAI	Female	31-Aug-1992	26	Self	300000
353	60617	SURYAKANT SEN	Male	10-Apr-1991	27	Self	300000
354	60618	DURGESH KUMAR MISHRA	Male	2-Jul-1994	25	Self	300000
355	60619	DEVESH JHA	Male	25-Oct-1994	25	Self	300000
356	60607	KARTHIK KUMAR REDDY J	Male	5-Aug-1989	29	Self	500000
357	60613	PRANESH K P	Male	18-Mar-1980	39	Self	500000
358	60613	SRIDEVI D.	Female	17-Nov-1987	32	Spouse	500000
359	60613	SURYA NARAYANAN	Male	14-May-2009	10	Child1	500000
360	60613	VARUN KRISHNA	Male	14-Nov-2014	5	Child2	500000
361	60608	BOGINENI NARESH BABU	Male	12-Jun-1995	24	Self	300000
362	60622	Kunal Sharma	Male	31-Aug-1994	24	Self	300000
363	60624	Vikas Gupta	Male	30-Dec-1989	29	Self	500000
364	60624	Niketa Gupta	Female	9-Jul-1996	23	Spouse	500000
365	60624	Vedika Gupta	Female	14-May-2019	3 months	Child1	500000
366	60620	MUGDHA DEEPAK CHATURVEDI	Female	7-Aug-1988	30	Self	700000

POLICY DATA

Policy Number: OG-18-1116-8403-00000067
 Partner Desc: BALMER LAWRIE AND CO LTD
 Risk Inc Date: February 26, 2018
 Risk Expiry Date: February 25, 2019
 Policy Age: 340
 Policy Period: 365
 Today's Date: February 25, 2019

Cashless Vs Reimbursement Claim

Claim Type	Claim Count	Claim Count %	Incurred Amt	Incurred Amt %
Cashless	7	50.00%	230360	52.33%
Reimbursement	7	50.00%	209861	47.67%
Total	14	100.00%	440221	100.00%

Member Summary

Member count: 369
 Members At Inception: 310
 Active Members: 329

CLAIMS Summary

	Cashless		Reimbursement		Overall		Mix (%)	
	Claim Count	Claim Severity	Claim Count	Claim Severity	Claim Count	Claim Severity	Claim Count	Claim Severity
APPROVED	6	33,393	6	34,977	12	34,185	85.71%	85.71%
CLOSED WITHOUT OUTSTANDING	1	30,000	1	30,000	1	30,000	7.14%	7.14%
Sum:	7	63,393	7	64,977	14	64,185	100.00%	100.00%
Mix (%)	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%

PREMIUM AND PROFITABILITY

Gross Premium	735485
Net Premium	6,23,293
Earned Premium	5,80,602
Incurred Claims (Paid + Ostd)	440221
Incurred Claims Closed w/o pay	34,000
IBNR (@ 4%)	18,969
IBNR included Incurred Claim Amount	4,93,190
Salvage Amt	0
Claim Ratio on Net Premium	76.08%
Claim Ratio on Earned Premium	81.68%
Claim Ratio on Earned Premium Incl IBNR	84.94%
Claim Frequency	4.07%

Claim Location	Sr No	Clid	Insured	Employee Name	Patient	Sum Insured	Doj
1002	8124912	1788815	BALMER LAWRIE AND CO LTD	TRACY D SOUZA	TRACY D SOUZA	500000	2/26/2018
1002	8162450	1811293	BALMER LAWRIE AND CO LTD	MAITRI PARIKH	DEVANSH PARIKH	500000	2/26/2018
1002	8466631	1809673	BALMER LAWRIE AND CO LTD	AMRISH KUMAR	AMRISH KUMAR	300000	2/26/2018
1002	8620763	1933179	BALMER LAWRIE AND CO LTD	KRISHAN KANT SHARMA	PRIYANSHI SHARMA	300000	2/26/2018
1002	8761817	1966720	BALMER LAWRIE AND CO LTD	MAANTA MUKHERJEE	ANJU MUKHERJEE	500000	2/26/2018
1002	8770267	1945815	BALMER LAWRIE AND CO LTD	MEENU CHOUDHARY	MEENU CHOUDHARY	500000	2/26/2018
1002	9308686	2605553	BALMER LAWRIE AND CO LTD	PRASAD NITIN MANUREKAR	SHILPA PRASAD MANUREKAR	400000	5/5/2018
1002	9353137	2607419	BALMER LAWRIE AND CO LTD	AQUEEL AHMAD KHAN	ANIA KHAN	400000	2/26/2018
1002	9373114	2694070	BALMER LAWRIE AND CO LTD	HEMANT KUMAR PATRA	RASMITA RAY	300000	7/1/2018
1002	9513691	2555098	BALMER LAWRIE AND CO LTD	AQUEEL AHMAD KHAN	ANIA KHAN	400000	2/26/2018
1002	9518402	2571966	BALMER LAWRIE AND CO LTD	RIDHI SHARMA	RIDHI SHARMA	300000	2/26/2018
1002	9519151	2606958	BALMER LAWRIE AND CO LTD	RIDHI SHARMA	B/O RIDHI SHARMA	300000	12/1/2018
1002	9519868	2647832	BALMER LAWRIE AND CO LTD	V VASANTHI	V VASANTHI	300000	9/20/2018
1100	8029939	1756694	BALMER LAWRIE AND CO LTD	AMRISH KUMAR	AMRISH KUMAR	300000	2/26/2018

Employee Name	Age	Gender	Relation	Id Card	Co Empnum1	Hat Empcode	Policy	Rid	Red	Hospital Type	Hospital
TRACY D SOUZA	32	FEMALE	SELF	GMC-181116360038	60038	60038	OG-18-1116-8/2/28/2018	2/25/2019		NON-NETWO	ONP MEERA
MATRI PARKH	10	MALE	CHILD1	GMC-181116360083	60083	60083	OG-18-1116-8/2/28/2018	2/25/2019		NON-NETWO	SPARSH PAE
AMRISH KUMAR	44	MALE	SELF	GMC-181116360228	60228	60228	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	KHUSHI HOS
KRISHAN KANT SHARMA	13	FEMALE	CHILD1	GMC-181116360015	60015	60015	OG-18-1116-8/2/28/2018	2/25/2019		NON-NETWO	PARMESHWA
MAMTA MUKHERJEE	38	MALE	SPOUSE	GMC-181116360328	60328	60328	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	SHRI MOOLC
MEENU CHOUDHARY	32	FEMALE	SELF	GMC-181116360090	60090	60090	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	AMRI HOSPT
PRASAD NITIN MANJREKAR	34	FEMALE	SPOUSE	GMC-181116360128	60128	60128	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	NOWROSJEE
AQUEEL AHMAD KHAN	12	FEMALE	CHILD1	GMC-181116360028	60028	60028	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	HOLY FAMILY
HEMANT KUMAR PATRA	26	FEMALE	SPOUSE	GMC-181116360242	60242	60242	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	INSTITUTE O
AQUEEL AHMAD KHAN	12	FEMALE	CHILD1	GMC-181116360028	60028	60028	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	HOLY FAMILY
RIDHI SHARMA	26	FEMALE	SELF	GMC-181116360421	60421	60421	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	APOLLO CRA
RIDHI SHARMA	1	FEMALE	CHILD1	GMC-181116360421	60421	60421	OG-18-1116-8/2/28/2018	2/25/2019		NETWORK	APOLLO CRA
V VASANTHI	31	FEMALE	SELF	GMC-181116360184	60184	60184	OG-18-1116-8/2/28/2018	2/25/2019		NON-NETWO	NAVAJEEVAN
AMRISH KUMAR	44	MALE	SELF	GMC-181116360228	60228	60228	OG-18-1116-8/2/28/2018	2/25/2019		NON-NETWO	KHANNA HOS

Employee Name	Addr1	Addr2	City	State	Pin	Std	Phone	Fax	Pre Auth Date	Pre Auth Amt	Amnt Amount
TRACY D SOUZA	710/B-4 Shanker Seth Road		PUNE	MAHARASHTRA							
MAITRI PARIKH	100-B, Swastik Soc,Opp Sarf		AHMEDABAD	GUJARAT							
AMRISH KUMAR	PLOT NO-1, HDWARKA	DPS SCHOOL	NEW DELHI	DELHI	110075	11	42811244	42811344	4/29/2018	30000	19592
KRISHAN KANT SHARMA	Near Police Chowki, Govind		GHAZIABAD	UTTAR PRADESH							
MAMTA MUKHERJEE	Lajpat Nagar I,		NEW DELHI	DELHI	110024	011	42000000	42000421	8/11/2018	26000	22714
MEENU CHOUDHARY	PLOT NO. 1, BESIDE SATY		KHANDAGIRI	ORISSA	751030	0674	8666600	8666789	8/2/2018	80700	50000
PRASAD NITIN MANJUREKAR	ACHARYA DD		MUMBAI	MAHARASHH	400012	22	24146963 TO 67				
AQUEEL AHMAD KHAN	OKHLA ROAD		NEW DELHI	DELHI	110025	011	26845900-90926312415	11/24/2018	18268	18268	18268
HEMANT KUMAR PATRA	K-8,KALINGA NAGAR,GHAT		BHUBANESH	ORISSA	751003	674	2386281/EXT-2225	1/2/2019	30500	30500	30000
AQUEEL AHMAD KHAN	OKHLA ROAD		NEW DELHI	DELHI	110025	011	26845900-90926312415				
RIDHI SHARMA	15A, NAGAR		NEW DELHI	DELHI	110015	011	011-48130400	011-48130409	12/11/2018	70000	50000
RIDHI SHARMA	15A, SHIVAJI MARG	NAGAR METRO STATION	NEW DELHI	DELHI	110015	011	011-48130400	011-48130409	12/19/2018	20000	10919
V VASANTHI	34 B THANUJAI SALAI VILAM		THIRUVARUR	TAMIL NADU							
AMRISH KUMAR	C-2/398, JANAKPURI		DELHI	DELHI	110058	011	25601711-13-45026110				

Employee Name	Room Category	Auth Date	Name Dr	Expected Do	Expected Do	Expected Do	Actual Do	Actual Do	Provisional D	Claimed Amt	Corporate Bu
TRACY D SOUZA			ONP neera				12-04-2018	14-04-2018		86550	0
MAITRI PARIKH			shah				18-04-2018	18-04-2018		44606	0
AMRISH KUMAR	PRIVATE A/C	5/1/2018	DR SHALABH	29-04-2018	01-05-2018		29-04-2018	01-05-2018	UTI with renal c	57944	0
KRISHAN KANT SHARMA			Shikha Yadav				05-06-2018	06-06-2018		13340	0
MAMTA MUKHERJEE	GENERAL WARD	8/1/2018	Rajesh Mehta	10-08-2018	12-08-2018		10-08-2018	12-08-2018	Viral fever	22714	0
MEENU CHOUDHARY	PRIVATE A/C	8/2/2018	Dr	30-07-2018	06-08-2018		03-08-2018	06-08-2018	Maternity	54937	0
PRASAD NITIN MANUREKAR			anagha				01-11-2018	02-11-2018		42528	0
AQUEEL AHMAD KHAN	SEMI PRIVATE	11/25/2018	Singh	23-11-2018	25-11-2018				Acute gastroe	18268	0
HEMANT KUMAR PATRA	PRIVATE A/C	1/2/2019	GYN	02-01-2019	07-01-2019				Maternity		0
AQUEEL AHMAD KHAN			supriya				23-11-2018	25-11-2018		18257	0
RIDHI SHARMA	TWIN SHARING - AC	12/11/2018	Shama	12-12-2018	14-12-2018		11-12-2018	14-12-2018	Maternity	60000	0
RIDHI SHARMA	ICU	12/19/2018		18-12-2018	19-12-2018		18-12-2018	21-12-2018	FUC Term (37	14330	0
V VASANTHI			DR				16-11-2018	19-11-2018		46841	0
AMRISH KUMAR			Dr Vivek Khanna				27-02-2018	01-03-2018		29758	0

Employee Name	Claim Type	Registration	Treatment Ty	Claim No	Claim Status	General Rem	Document Re	Dr. Requirement	Reputation	Final Diagnosed Code
TRACY D SOUZA	Reimburseme	4/23/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		4/19/2018			Maternity-FTN O80
MAITRI PARIKH	Reimburseme	5/2/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		4/25/2018			Left Inguinal h K40
AMRISH KUMAR	Cashless	4/29/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		5/16/2018			uf with renal d N39
KRISHAN KANT SHARMA	Reimburseme	7/23/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		7/20/2018	-Original Discharge Summary		Acute abdome R10.0
MAMTA MUKHERJEE	Cashless	8/11/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		8/27/2018			Viral fever R50
MEENU CHOUDHARY	Cashless	8/2/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		8/27/2018			Maternity O82
PRASAD NITIN MANJREKAR	Reimburseme	12/18/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		12/12/2018			Primigravida O15.0
AQUEEL AHMAD KHAN	Cashless	11/24/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		12/13/2018			N/A updated fr A09
HEMANT KUMAR PATRA	Cashless	1/22/2019	HOSPITALIZA	OC-19-1002-8	CASHLESS APPROVED					Castrocinone O80
AQUEEL AHMAD KHAN	Reimburseme	12/7/2018	HOSPITALIZA	OC-19-1002-8	CLOSED	-NON-SUBM	12/1/2018	-Kindly Provide Pre-Printed		Castrocinone A09
RIDHI SHARMA	Cashless	12/11/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		1/13/2019			Maternity O82
RIDHI SHARMA	Cashless	12/19/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		1/15/2019			FUC Term (37 E80.6
V VASANTHI	Reimburseme	12/26/2018	HOSPITALIZA	OC-19-1002-8	CLOSED		12/22/2018	-Kindly provide Original Disc		Single delivery O82
AMRISH KUMAR	Reimburseme	3/24/2018	HOSPITALIZA	OC-18-1100-8	CLOSED	-Closed Without Payment				Emetic with G A09.9

Employee Name	Disease	Gate	Medical Or	St Hospital Bill	Total Bill	Pre Hosp	Chc Room Charge	Doctor Charg	Of Charges	Pharmacy	Pathology	Radiology
TRACY D SOUZA	Pregnancy, ch	SURGICAL		~3399	86550		11530	21700		6977	3680	
MAITRI PARIKH	Diseases of th	SURGICAL		~425	44606	800	3000	4300	3000	3006		
AMRISH KUMAR	Diseases of th	MEDICAL		~10~1210	57944	2732	3200			3392	5700	1500
KRISHAN KANT SHARMA	Symptoms, sig	MEDICAL		~084	13340			1500	1500	2516		800
MAMTA MUKHERJEE	Symptoms, sig	MEDICAL		~0	22714							
MEENU CHOUDHARY	Pregnancy, ch	SURGICAL		~0	54937							
PRASAD NITIN MANJREKAR	Pregnancy, ch	MEDICAL		~6034567	42528	0	1200	2100		4930		
AQUEEL AHMAD KHAN	Certain infecti	MEDICAL		~5507	18268							
HEMANT KUMAR PATRA	Pregnancy, ch	SURGICAL										
AQUEEL AHMAD KHAN	Certain infecti	MEDICAL		~18023215	18257							
RIDHI SHARMA	Pregnancy, ch	SURGICAL		~0	60060							
RIDHI SHARMA	Endocrine, nu	MEDICAL		~7326	14330			6300		2619	375	
V VASANTHI	Pregnancy, ch	SURGICAL		~547	46341		3600	28100	3500	6301	0	
AMRISH KUMAR	Certain infecti	MEDICAL		~732	29758	850	5600	6400		5652	5400	

Employee Name	Cardiology	Equipment	Ambulance	Non Medical	Discount	Miscellaneous	Post Hosp C	Approval Dat	Approved Am	Authorization Dr	Requirem
TRACY D SOUZA		3950				600		4/26/2018	50000		
MATRI PARIKH						0		5/4/2018	44106		
AMRISH KUMAR				0	2295		32343	7/12/2018	51472		~ Room rent restricted max u
KRISHAN KANT SHARMA								8/8/2018	12816		
MAMTA MUKHERJEE						20042		9/7/2018	19701		~ Room rent restricted max u
MEENU CHOUDHARY						50000		9/10/2018	50000		~ If sterilization is done then I
PRASAD NITIN MANJREKAR				0			5000	12/20/2018	32730		
AQUEEL AHMAD KHAN						18268		12/27/2018	18268		~ Room rent restricted max u
HEMANT KUMAR PATRA											~ Room rent restricted max u
AQUEEL AHMAD KHAN						18257			0		
RIDHI SHARMA								1/22/2019	50000		~ Room rent restricted max u
RIDHI SHARMA				0	2075			1/22/2019	10919		~ Expenses incurred during t
V VASANTHI				0				1/23/2019	43601		
AMRISH KUMAR						150	1456	3/28/2018	26608		

Employee Name	Dr. Requirement	Payable To: H	Hospital	Disa	Hospital	Disa	Payable To: In Insured	Disa	Insured	Disa	Insured	Disa	Payable To: In Assessment	D	Medical	Mgt	Assessment
TRACY D SOUZA							50000		36550				~maximum limit for maternity	4/23/2018			
MAITRI PARIKH							44106		500				~tegaderm 100/-not payable	5/2/2018			
AMRISH KUMAR	p to Rs 3000/-	16297				6395			36175				~Rs 50/-can fix not payable	5/23/2018			
KRISHAN KANT SHARMA									12816		524		~Betadine lotion Rs.103/-, Col	7/23/2018			
MAMTA MUKHERJEE	p to Rs 5000/-	19701				3013							~band id, hand guard, thermometer, dressing, ecg electrode, gloves, dietic	9/7/2018			
MEENU CHOUDHARY	kindly collect 1	50000				4937							~Sum Insured for Maternity exhausted	9/10/2018			
PRASAD NITIN MANJREKAR									32730		9798		~photocopy 622/-61/-417/-36	12/18/2018			
AQUEEL AHMAD KHAN	p to Rs 4000/-	18268				0							~NA	12/27/2018			
HEMANT KUMAR PATRA	p to Rs 3000/-												p to Rs 3000/- per day for Normal & Rs. 6000/- for ICU, all other hospitalization expenses shall be entitled as per room rent. ~ if sterilization is done then kindly coll				
AQUEEL AHMAD KHAN	~kindly hold this claim till main CLID 2507419 get settled					0			18257				~def	12/7/2018			
RIDHI SHARMA	p to Rs 3000/-	50000				10000							~Sum Insured for Maternity exhausted	1/22/2019			
RIDHI SHARMA	hospitalization s	10919				3411							~Tegaderm, swab, handrub charges are not payable	1/22/2019			
													~Admission charges				
V VASANTHI									43601		3240		~Rs.105/-Mask Rs.85/-Diap	12/26/2018			
AMRISH KUMAR									26608		3150		~N/R With reference to the c	3/24/2018			

Employee Name	Presuth	Excl	Denial	Reaso	Denial	Date	Pay Status	Reserve Amt	Claim Close	Close Date	Orphan Rem	Orphan Clair	Telephone	Patent Adore
TRACY D SOUZA							With Pay	87000	APPROVED	4/25/2018				
MAITRI PARIKH							With Pay	45000	APPROVED	5/4/2018				
AMRISH KUMAR							With Pay	36000	APPROVED	7/12/2018				
KRISHAN KANT SHARMA							With Pay	13800	APPROVED	8/8/2018				
MAMTA MUKHERJEE							With Pay	22714	APPROVED	9/7/2018				
MEENU CHOUDHARY							With Pay	50000	APPROVED	9/10/2018				
PRASAD NITIN MANJUREKAR							With Pay	34000	APPROVED	12/20/2018				
AQUEEL AHMAD KHAN							With Pay	18268	APPROVED	12/27/2018				
HEMANT KUMAR PATRA							In Process	30000						
AQUEEL AHMAD KHAN							Without Pay	34000	CLOSED WIT	1/23/2019				
RIDHI SHARMA							With Pay	50000	APPROVED	1/22/2019				
RIDHI SHARMA							With Pay	10919	APPROVED	1/22/2019				
V VASANTHI							With Pay	47000	APPROVED	1/23/2019				
AMRISH KUMAR							With Pay	29758	APPROVED	3/28/2018				

Employee Name	Cheque No	Cheque Date	Cheque Rec	Cheque Dis	Mobile No	Bank Name	Bank Ac No	Debit Card N	Processor	Ind Code	Dr Intimation
TRACY D SOUZA					9885392299				abhjeet.kudre	10008153	
MATRI PARIKH					9978814250				abhjeet.kudre	10008153	
AMRISH KUMAR					9911746323				abhjeet.kudre	10008153	
KRISHAN KANT SHARMA					9971082817				abhjeet.kudre	10008153	7/23/2018
MAMTA MUKHERJEE					7042995934,9910991210				abhjeet.kudre	10008153	
MEENU CHOUDHARY									abhjeet.kudre	10008153	
PRASAD NITIN MANJREKAR					9967837003				abhjeet.kudre	10008153	
AQUEEL AHMAD KHAN									supriya.gokha	10008153	
HEMANT KUMAR PATRA					9777003386				vijay.patil01@	10008153	
AQUEEL AHMAD KHAN					9810202704				sachin.rajpure	10008153	12/7/2018
RIDHI SHARMA									abhjeet.kudre	10008153	
RIDHI SHARMA									abhjeet.kudre	10008153	
RIDHI SHARMA									abhjeet.kudre	10008153	
V VASANTHI					9176539144				abhjeet.kudre	10008153	12/28/2018
AMRISH KUMAR									abhjeet.kudre	10008153	

Employee Name	Dr Reply Date	Diagnosis	De Dig	Procedur	Updated On	Other Deduct	Premium	Co Payment	Surgeon Cha	Nursing Char	Icu Charges	Reputation
TRACY D SOUZA					4/28/2018	35717			36250	1000		
MAITRI PARIKH					5/8/2018				30000			
AMRISH KUMAR					7/14/2018				4900	0		
KRISHAN KANT SHARMA	8/2/2018				8/10/2018	0			3500		3000	
MAMTA MUKHERJEE					9/1/2018	341						
MEENU CHOUDHARY					9/12/2018							
PRASAD NITIN MANJREKAR					12/23/2018				18000	1500		
AQUEEL AHMAD KHAN					12/30/2018							
HEMANT KUMAR PATRA					1/3/2019							
AQUEEL AHMAD KHAN					1/24/2019	18257						
RIDHI SHARMA					1/25/2019							
RIDHI SHARMA					1/25/2019						3700	
VASANTHI	1/19/2019				1/25/2019					500	1000	
AMRISH KUMAR					4/7/2018				100	1000		

Employee Name	Tds Rate	Doc. Receive	Reopen Date	Eligible Room	Eligible Room	Room Availled	Room Availled	Room Cnt	Unit Roc	Net	Network	Member	Co F	Room	Ren I D
TRACY D SOUZA		4/19/2018				OTHER	OTHER								
MAITRI PARKH		4/30/2018			5000	OTHER	OTHER								
AMRISH KUMAR		7/11/2018	07-12-18			OTHER	OTHER								
KRISHAN KANT SHARMA		8/6/2018			6000	OTHER	ICU	3000		3000					
MAMTA MUKHERJEE		8/27/2018													
MEENU CHOUDHARY		8/27/2018													
PRASAD NITIN MANUREKAR		12/13/2018			4000	OTHER	OTHER								
AQUEEL AHMAD KHAN		12/13/2018													
HEMANT KUMAR PATRA															
AQUEEL AHMAD KHAN		12/5/2018			4000	OTHER	OTHER								
RIDHI SHARMA		1/13/2019													
RIDHI SHARMA		1/8/2019													
V VASANTHI		1/14/2019			3000	OTHER	OTHER	1200		1000					
AMRISH KUMAR		3/24/2018			3000	OTHER	DELUX	2800							

Employee Name	Implant Char	Package Cha	Neo Natal Ch	Cause Of Los	Pcs Code	Pcs Descript	Pcs Id	Eligible Room	Eligible Room	Room Availd	Room Availd	Room
TRACY D SOUZA									OTHER	OTHER		
MAITRI PARIKH								5000	OTHER	OTHER		
AMRISH KUMAR								3000	OTHER	PRIVATE A/C	2800	
KRISHAN KANT SHARMA								6000	OTHER	ICU	3000	
MAJTA MUKHERJEE									OTHER	OTHER		
MEENU CHOUDHARY									OTHER	PRIVATE A/C		
PRASAD NITIN MANJREKAR								4000	OTHER	OTHER		
AQUEEL AHMAD KHAN								0	AA	AA	0	
HEMANT KUMAR PATRA												
AQUEEL AHMAD KHAN								4000	OTHER	OTHER		
RIDHI SHARMA								50000	OTHER	TWIN SHARING - AC		
RIDHI SHARMA									OTHER	ICU		
V VASANTHI								3000	OTHER	OTHER	1200	
AMRISH KUMAR								3000	OTHER	DELUX	2800	

Employee Name	Crit. Unit	Room	Unique Id	Medical Ass	Policy Loc	Approved Ac	Hospital Qual	Pri Type	Discount 1	Discount On	Room Desc	Bonus St
TRACY D SOUZA					1116			NA				
MAITRI PARIKH					1116			NA				
AMRISH KUMAR			0		1116	PPN	PPN-PACKAG15		15% Discount On Total Bill	Excluding Packs		
KRISHAN KANT SHARMA	3000				1116		NA					
MAMTA MUKHERJEE			110024021		1116	NON PPN	NA	0	NA		4 BEDDED	
MEENU CHOUDHARY			761030001		1116	NON PPN	NA	0	0		SINGLE AC	
PRASAD NITIN MANJUREKAR			NOT IN LIST		1116	NON PPN	NA	5	5% Discount on Total Bill			
AQUEEL AHMAD KHAN	0		110026022		1116	NON PPN	NA	0				
HEMANT KUMAR PATRA			67531		1116	NON PPN	NA	5	5% Discount		SINGLE AC	
AQUEEL AHMAD KHAN			110026022		1116	NON PPN	NA	0				
RIDHI SHARMA			NA		1116	PPN	PPN-PACKAG20		20% discount		TWIN SHARING	
RIDHI SHARMA			NA		1116	PPN	PPN-PACKAG20		20% discount		NICU	
V VASANTHI	1000				1116							
AMRISH KUMAR					1116	NON PPN	NA					

Employee Name	Sr Condition	Ip No	Query Remar	Orphan Date	P Master Pol	Salvage Amt	Incurred Amt	Revvd Claim	IC Amt
TRACY D SOUZA		0				0	50000	APPROVED	50000
WALTRI PARKH		425				0	44106	APPROVED	44106
AMRISH KUMAR		gas & Consum	1210		~Kindly send complete and duly filled New F0	0	51472	APPROVED	51472
KRISHAN KANT SHARMA		1				0	12816	APPROVED	12816
MAMTA MUKHERJEE		0				0	19701	APPROVED	19701
MEENU CHOUDHARY		0				0	50000	APPROVED	50000
PRASAD NITIN MANUREKAR		8094687				0	32730	APPROVED	32730
AQUEEL AHMAD KHAN		AA5607				0	18268	APPROVED	18268
HEMANT KUMAR PATRA						0	30000	OUTSTANDIN	30000
AQUEEL AHMAD KHAN		18023215				0		CLOSED WITHOUT PAYMENT	
RIDHI SHARMA		0				0	50000	APPROVED	50000
RIDHI SHARMA		1				0	10919	APPROVED	10919
V VASANTHI		0				0	43601	APPROVED	43601
AMRISH KUMAR		1				0	26608	APPROVED	26608

POLICY DATA

Policy Number	OG-19-1113-8403-00000370
Partner Desc	BALMER LAWRIE AND CO LTD
Risk Inc Date	February 26, 2019
Risk Expiry Date	May 26, 2019
Policy Age	144
Policy Period	365
Today's Date	July 19, 2019

Cashless Vs Reimbursement Claim Sum

Claim Type	Claim Count	Claim Count/Inurred Amt	Inurred Amt
Cashless	6	85.71%	334941
Reimbursement	1	14.29%	21031
Total		100.00%	100.00%

Member Summary

Member count	362
Members At Inception	336
Active Members	341

CLAIMS Summary

	Cashless			Reimbursement			Overall			Mix (%)
	Claim Count	Inurred Amt	Claim Severity	Claim Count	Inurred Amt	Claim Severity	Claim Count	Inurred Amt	Claim Severity	Claim Count(%)
APPROVED	3	1,07,548	35,849	1	21,031	21,031	4	1,28,579	32,145	57.14%
OUTSTANDING	2	2,27,393	1,13,697				2	2,27,393	1,13,697	28.57%
REPLICATION	1						1			14.29%
Sum:										
Mix (%)										

PREMIUM AND PROFITABILITY

Gross Premium	213559
Net Premium	1,80,983
Earned Premium	71,402
Inurred Claims (Paid + Ostd)	355972
Inurred Claims Closed w/o pay	
IBNR (@ 4%)	14,239
IBNR Included Inurred Claim Amount	3,70,211
Salvage Amt	0
Claim Ratio on Net Premium	196.69%
Claim Ratio on Earned Premium	496.55%
Claim Ratio on Earned Premium Incl IBNR	518.40%
Claim Frequency	4.80%

Claim Sr No	Clid	Insured	Employee Name	Patient	Sum Insur Dej	Age	Gender	Relation		
1002	10029137	3178043	BALMER LAWRIE AND CO LTD	MR DEEPAK ROJINDAR	HAANSAJ ROJINDAR	300000	2/26/2019	10	MALE	CHILD1
1002	10160776	3197126	BALMER LAWRIE AND CO LTD	MAYANK GAUTAM	PREMANGI GAUTAM	300000	2/26/2019	29	FEMALE	SPOUSE
1002	10166128	3177931	BALMER LAWRIE AND CO LTD	MR DEEPAK ROJINDAR	HAANSAJ ROJINDAR	300000	2/26/2019	10	MALE	CHILD1
1002	10275081	3231571	BALMER LAWRIE AND CO LTD	N.UMA MAHESH	N.MAHESWARI	400000	2/26/2019	36	FEMALE	SPOUSE
1002	10403212	3270859	BALMER LAWRIE AND CO LTD	DEBASIS BISWAL	MADHUSMITA BEJRA	300000	2/26/2019	23	FEMALE	SPOUSE
1002	10542838	3312716	BALMER LAWRIE AND CO LTD	M NEELAKANDAN .	M NEELAKANDAN .	300000	2/26/2019	36	MALE	SELF
1002	10546082	3294887	BALMER LAWRIE AND CO LTD	TABRAZ ALI	AALIYA AFREEN	500000	3/21/2019	27	FEMALE	SPOUSE

Employee Name	Id Card	Co Emprnumb	Hat Emprco	Policy	Rid	Red	Hospital Type
MR DEEPAK ROJINDAR	GMC-1911330370-60340B	60340	60340	OG-19-1113-8403-00000370	2/26/2019	2/25/2020	NETWORK
MAYANK GAUTAM	GMC-1911330370-60363A	60363	60363	OG-19-1113-8403-00000370	2/26/2019	2/25/2020	NETWORK
MR DEEPAK ROJINDAR	GMC-1911330370-60340B	60340	60340	OG-19-1113-8403-00000370	2/26/2019	2/25/2020	NETWORK
N.JMA MAHESH	GMC-1911330370-60022A	60022	60022	OG-19-1113-8403-00000370	2/26/2019	2/25/2020	NETWORK
DEBASIS BISWAL	GMC-1911330370-60452A	60452	60452	OG-19-1113-8403-00000370	2/26/2019	2/25/2020	NON-NETWORK
M NEELAKANDAN	GMC-1911330370-60116	60116	60116	OG-19-1113-8403-00000370	2/26/2019	2/25/2020	NETWORK
TABRAZ ALI	GMC-1911330370-60590A	60590	60590	OG-19-1113-8403-00000370	2/26/2019	2/25/2020	NETWORK

Employee Name	Hospital
MR DEEPAK ROJINDAR	CHOITHRAM HOSPITAL AND RESEARCH CENTRE - Indore
MAYANK GAUTAM	EAST DELHI MEDICAL CENTRE - DELHI
MR DEEPAK ROJINDAR	CHOITHRAM HOSPITAL AND RESEARCH CENTRE - Indore
N.JUMA MAHESH	SUSHEELA HOSPITAL - HYDERABAD
DEBASIS BISWAL	SREERAM HOSPITAL
M NEELAKANDAN	CHENNAI MEENAKSHI MULTISPECIALITY HOSPITAL LTD - Chennai
TABRAZ ALI	FORTIS LA FEMME - BANGALORE

Employee Name	Addr1	Addr2	City	State	Pin	Std
MR DEEPAK ROJINDAR	Manik Bagh Road 11000, G.F. ROAD, WANDOMAKOVERTANK, BANGALORE	-	INDORE	MADHYA PRADESH	452014	0731
MAYANK GAUTAM			DELHI	DELHI	110032	011
MR DEEPAK ROJINDAR	Manik Bagh Road	-	INDORE	MADHYA PRADESH	452014	0731
N.UMA MAHESH	E - SEVA ROAD, RAMANTHAPUR,		HYDERABAD	TELANGANA	500013	40
DEBASIS BISWAL	NH-42, SREERAM CHHAK, KALPALESHWAR, CHODWAR, CUTTACK.		CUTTACK	ORISSA		
M NEELAKANDAN	No 148, Luz Church Road, Mylapore	-	CHENNAI	TAMIL NADU	600004	044
TABRAZ ALI	#62 Richmond Road, mother teresa Road richmond Town		BANGALORE	KARNATAKA	560025	80

Employee Name	Phone	Fax	Pre Auth Date	Pre Auth Amt	Auth Amount	Room Category	Auth Date	Name Dr
MR DEEPAK ROJINDAR	2362491 - 99	2470068	4/8/2019	40000	0	PRIVATE A/C	-	-
MAYANK GAUTAM	22583204	22583205	4/26/2019	30000	30000	PRIVATE A/C	4/26/2019	DR JYOTI REDDY
MR DEEPAK ROJINDAR	2362491 - 99	2470068	4/8/2019	68444	43444	PRIVATE NON A/C	4/8/2019	DR GOURI PASSI
N.UMA MAHESH	27030208		6/1/2019	36693	27393	PRIVATE A/C	6/1/2019	DR RAGHU R
DEBASIS BISWAL								DR. Girish
M NEELAKANDAN .	42938938	24993282	7/15/2019	263000	200000	TWIN SHARING - AC	7/17/2019	SHANMUGASUNDARAM
TABRAZ ALI	67454444		6/29/2019	87069	50000	TWIN SHARING - AC	6/30/2019	DR PRATHIMA REDDY

Employee Name	Expected Doa	Expected Dod	Actual Doa	Actual Dod	Provisional Diagnosis	Claimed Amt	Corporate Buffer Amt
MR DEEPAK ROJINDAR	07-04-2019	13-04-2019			Enteric fever		0
MAYANK GAUTAM	26-04-2019	29-04-2019	26-04-2019	29-04-2019	Maternity-Isacs	30000	0
MR DEEPAK ROJINDAR	07-05-2019	12-05-2019	12-04-2019	15-04-2019	Enteric fever	43444	0
N.JUMA MAHESH	31-05-2019	04-06-2019			ACUTE gastroenteritis , Typhoid , anaemias		0
DEBASIS BISWAL			24-03-2019	27-03-2019		21221	0
M NEELAKANDAN	15-07-2019	24-07-2019			FRACTURE BOTH BONES RT LEG		0
TABRAZ ALI	28-06-2019	02-07-2019	28-06-2019	01-07-2019	MATERNITY	87461	0

Employee Name	Claim Type	Registration Date	Treatment Type	Claim No	Claim Status
MR DEEPAK ROJINDAR	Cashless	4/8/2019	HOSPITALIZATION	OC-20-1002-8403-00003871	CLOSED
MAYANK GAUTAM	Cashless	4/26/2019	HOSPITALIZATION	OC-20-1002-8403-00012885	CLOSED
MR DEEPAK ROJINDAR	Cashless	4/8/2019	HOSPITALIZATION	OC-20-1002-8403-00003800	CLOSED
N.UMA MAHESH	Cashless	6/1/2019	HOSPITALIZATION	OC-20-1002-8403-00031151	CASHLESS APPROVED
DEBASIS BISWAL	Reimbursement	6/16/2019	HOSPITALIZATION	OC-20-1002-8403-00040783	CLOSED
M NEELAKANDAN	Cashless	7/15/2019	HOSPITALIZATION	OC-20-1002-8403-00056119	CASHLESS APPROVED
TABRAZ ALI	Cashless	6/29/2019	HOSPITALIZATION	OC-20-1002-8403-00048044	CLOSED

Employee Name	General Remarks	Document Receive Date
MR DEEPAK ROJINDAR	--Closed Without Payment :: Cashless denied, hence claim closed without payment after the 7 days	
MAYANK GAUTAM		5/7/2019
MR DEEPAK ROJINDAR		5/9/2019
N.UMA MAHESH		
DEBASIS BISWAL		6/15/2019
M NEELAKANDAN .		
TABRAZ ALI		7/13/2019

Employee Name	Dr Requirement Insured	Repudiation Reason	Final Diagnosis	Icd Code
MR DEEPAK ROJINDAR				A01.0
MAYANK GAUTAM			Maternity-Isos	O82
MR DEEPAK ROJINDAR			Enteric fever	A01.0
N.LUMA MAHESH				A01.A09.D84
DEBASIS BISWAL			Primi with obstructive labour LSCS	O82.9
M NEELAKANDAN				S82
TABRAZ ALI			MATERNITY	O82

Employee Name	Disease Category
MR DEEPAK ROJINDAR	Certain infectious and parasitic diseases
MAYANK GAUTAM	Pregnancy, childbirth and the puerperium
MR DEEPAK ROJINDAR	Certain infectious and parasitic diseases
N.UMA MAHESH	Certain infectious and parasitic diseases, Certain infectious and parasitic diseases, Diseases of the blood and blood-forming organs and certain disorders
DEBASIS BISWAL	Pregnancy, childbirth and the puerperium
M NEELAKANDAN .	Injury, poisoning and certain other consequences of external causes
TABRAZ ALI	Pregnancy, childbirth and the puerperium

Employee Name	Medical Or Surgical	Hospital Bill No	Total Bill	Pre Hosp Charges	Room Charges	Doctor Charges	Ot Charges	Pharmacy	Pathology
MR DEEPAK ROJINDAR	SURGICAL								
MAYANK GAUTAM	SURGICAL	~0	30000						
MR DEEPAK ROJINDAR	MEDICAL	~02	43444		21600	6625		8162	2968
N.UMA MAHESH	MEDICAL								
DEBASIS BISWAL	SURGICAL	~1	21221		4800	9000	2000	4831	
M NEELAKANDAN .	SURGICAL								
TABRAZ ALI	SURGICAL	~1	87461			5000		18441	3850

Employee Name	Radiology	Cardiology	Equipment	Ambulance	Non-Medical	Discount	Miscellaneous	Post Hosp Charges	Approval Date
MR DEEPAK ROJINDAR									
MAYANK GAUTAM									5/11/2019
MR DEEPAK ROJINDAR							672		5/13/2019
N.UJMA MAHESH									
DEBASIS BISWAL									6/20/2019
M.NEELAKANDAN.									
TABRAZ ALI						6902	2150		7/18/2019

Employee Name	Approved Amt
MR DEEPAK ROJINDAR	
MAYANK GAUTAM	27301
MR DEEPAK ROJINDAR	37150
N.UMA MAHESH	
DEBASIS BISWAL	21031
M NEELAKANDAN .	
TABRAZ ALI	43097

Employee Name	Authorization Remarks
MR DEEPAK ROJINDAR	~ Room rent restricted max up to Rs 3000/- per day for Normal & Rs. 6000/- for ICU, all other hospitalization expenses shall be entitled as per room rent. ~ Kindly co
MAYANK GAUTAM	~ Room rent restricted max up to Rs 3000/- per day for Normal & Rs. 6000/- for ICU, all other hospitalization expenses shall be entitled as per room rent. ~ If steriliza
MR DEEPAK ROJINDAR	~ Room rent restricted max up to Rs 3000/- per day for Normal & Rs. 8000/- for ICU, all other hospitalization expenses shall be entitled as per room rent.~ Kindly coll
N.UJMA MAHESH	~ Room rent restricted max up to Rs 4000/- per day for Normal & Rs. 8000/- for ICU, all other hospitalization expenses shall be entitled as per room rent. ~Authorizat
DEBASIS BISWAL	
M NEELAKANDAN	~ Room rent restricted max up to Rs 3000/- per day for Normal & Rs. 6000/- for ICU, all other hospitalization expenses shall be entitled as per room rent.~ This authc
TABRAZ ALI	~ Room rent restricted max up to Rs 5000/- per day for Normal & Rs 10000/- for ICU, all other hospitalization expenses shall be entitled as per room rent. ~ If steriliza

Employee Name	Dr. Requirement	Hospital	Dr. Requirement	Others	Payable To	Hospital	Hospital Disallowed Amt
MR DEEPAK ROJINDAR	hospital bill from the client (Differential charges as per room rent restriction Co-pay) excluding non-medical e						
MAYANK GAUTAM	kindly collect 15% of the total admissible bill amount or				27301		2699
MR DEEPAK ROJINDAR	hospital bill from the client (Differential charges as per room				37150		6294
N.LUMA MAHESH	hospital deductions (INR 6750/-) as:- Tariff excess deduction - [Single 750*5-3750, Nursing 500*5-2500, Visit 50*						
DEBASIS BISWAL							
M NEELAKANDAN	for 3 days stay only. If it extends please provide clinical indication from treating doctor for increase in length						
TABRAZ ALI	kindly collect 15% of the total admissible bill amount or				43097		44364

Employee Name	Hospital Disallow Amt Reason	Payable To Insured	Insured Disallowed Amt
MR DEEPAK ROJINDAR	Expenses.~ No room rent difference to be collected in addition to 17% co-payment.~ Final Copayment will be decided at the time of final bill.		
MAYANK GAUTAM	~9% co pay		
MR DEEPAK ROJINDAR	~Tegaderm~14% Room Rent differential co-pay.		
N.UMA MAHESH	0-500.] Total:INR 6750/-~ Kindly do not collect Rs. 6750/- amount from the patient (Tariff Deduction: Rs. 6750/-)		
DEBASIS BISWAL		21031	190
M NEELAKANDAN .	of stay.		
TABRAZ ALI	~10% discount on total bill excluding Pharmacy and consumables.~Paid by Patient		

Employee Name	Insured Disallow Amt Reason	Payable To Investigator	Assessment Date	Medical Mgt Date	Assessment Exclude
MR DEEPAK ROJINDAR					
MAYANK GAUTAM			5/10/2019		
MR DEEPAK ROJINDAR			5/13/2019		
N.UMA MAHESH					
DEBASIS BISWAL	~Cotton Rs.25/-, Wipes Rs.165/-		6/18/2019		
M NEELAKANDAN		1180			
TABRAZ ALI			7/17/2019		

Employee Name	Preauth Exclude	Denial Reason	Denial Date	Pay Status	Reserve Amt	Claim Close Status	Close Date
MIR DEEPAK ROJINDAR	-General Denial Clause 20	~ Erroneously Registered.	4/8/2019	Without Pay	40000	REPUDIATION	4/16/2019
MAYANK GAUTAM				With Pay	30000	APPROVED	5/11/2019
MIR DEEPAK ROJINDAR				With Pay	43444	APPROVED	5/13/2019
N.UJMA MAHESH				In Process	27393		
DEBASIS BISWAL				With Pay	34000	APPROVED	6/20/2019
M NEELAKANDAN				In Process	200000		
TABRAZ ALI				With Pay	50000	APPROVED	7/18/2019

Employee Name	Mobile No	Bank Name	Bank Ac No	Debit Card No	Processor	Imd. Code	Dr. Intimation Date	Dr. Reply Date
MR DEEPAK ROJINDAR	9669078555				vijay.patil01@bajajallianz.co.in	10008153		
MAYANK GAUTAM	8800465242				abhijeet.kudre@bajajallianz.co.in	10008153		
MR DEEPAK ROJINDAR	9669078555				abhijeet.kudre@bajajallianz.co.in	10008153		
N.UMA MAHESH	9949691183				vajdali.desai@bajajallianz.co.in	10008153		
DEBASIS BISWAL	7381012683				abhijeet.kudre@bajajallianz.co.in	10008153		
M NEELAKANDAN .	9710973847				yogesh.mandaikar@bajajallianz.co.in	10008153		
TABRAZ ALI	9945007856				abhijeet.kudre@bajajallianz.co.in	10008153		

Employee Name	Diagnosis Detail	Dig Procedure	Updated On	Other Deduction	Premium	Co Payment	Surgeon Charges	Nursing Charges	ICU Charges
MR DEEPAK ROJINDAR			4/17/2019						
MAYANK GAUTAM			5/15/2019						
MR DEEPAK ROJINDAR			5/16/2019					3171	
N.UMA MAHESH			6/5/2019						
DEBASIS BISWAL			6/25/2019					400	
M NEELAKANDAN			7/18/2019						
TABRAZ ALI			7/19/2019	37462					

Employee Name	Reputation Dt.	Orphan Intimation Dt.	Hospital Id.	Irda Unique Id.	Partner Id.	Utr No.	Tds Amount	Pan No.	Service Tax	Account No.
MR DEEPAK ROJINDAR			771	452014001	29244869					
MAYANK GAUTAM			52977	110032013	73897917					
MR DEEPAK ROJINDAR			771	452014001	29244869					
N.LUMA MAHESH			43269	500013014	58821322					
DEBASIS BISWAL			42076		55349771					
M NEELAKANDAN			2058	600004003	29251813					
TABRAZ ALI			63675	NA	90090758					

Employee Name	Bank Name	Service Tax	Tds Rate	Doc Receive Date	Max	Reopen Date	Eligible Room Rent	Eligible Room Category
MIR DEEPAK ROJINDAR								
MAYANK GAUTAM				5/4/2019				
MIR DEEPAK ROJINDAR				5/7/2019				
N.UJMA MAHESH								
DEBASIS BISWAL				6/14/2019			0	OTHER
M NEELAKANDAN								
TABRAZ ALI				7/10/2019				

Employee Name	Avalled Room Category	Avalled Room Rent Per Day	Criti Unit Room Rent Per Day	Non Network Co Pay	Member Co Pay
MR DEEPAK ROJINDAR					
MAYANK GAUTAM					
MIR DEEPAK ROJINDAR					
N.JMA MAHESH					
DEBASIS BISWAL	OTHER	0	0		
M NEELAKANDAN					
TABRAZ ALI					

Employee Name	Rooim	Rent	Diff	Co Pay	Implant Charges	Package Charges	Neo Natal Charges	Cause Of Loss	Pcs Code	Pcs Description	Pcs Id
MR DEEPAK ROJINDAR											
MAYANK GAUTAM			2699			30000					
MR DEEPAK ROJINDAR			6048								
N.UMA MAHESH											
DEBASIS BISWAL											
M NEELAKANDAN .											
TABRAZ ALI						58020					

Employee Name	Eligible Room Rent H	Eligible Room Category H	Avalled Room Category H	Avalled Room Rent Per Day H
MR DEEPAK ROJINDAR				
MAYANK GAUTAM		OTHER	PRIVATE A/C	
MR DEEPAK ROJINDAR	0	OTHER	OTHER	0
N.UMA MAHESH				
DEBASIS BISWAL	0	OTHER	OTHER	0
M NEELAKANDAN .				
TABRAZ ALI		OTHER	TWIN SHARING - AC	

Employee Name	Criti Unit Room Rent Per Day H	Irda Unique Id	Medical Ass. Date	Policy Loc.	Approved Qc Date	Hospital Qualifier	Ppn Type
MR DEEPAK ROJINDAR		452014001		1113		NON PPN	NA
MAYANK GAUTAM		110032013		1113		PPN	PPN-PACKAGES
MR DEEPAK ROJINDAR	0	452014001		1113		NON PPN	NA
N.JUMA MAHESH		500013014		1113		PPN	PPN-PACKAGES
DEBASIS BISWAL	0			1113			NA
M NEELAKANDAN .		600004003		1113		NON PPN	NA
TABRAZ ALI		NA		1113		NON PPN	NA

Employee Name	Discount 1	Discount On 1	Room Desc	Bonus Sl	Sp Conditions	Ip No	Query Remark
MIR DEEPAK ROJINDAR	0	Agreed to work on negotiated package rates					
MAYANK GAUTAM	15	15% discount except medicine, packages and 5% on medicine.				0	
MR DEEPAK ROJINDAR	0	Agreed to work on negotiated package rates				03	
N.UMA MAHESH	0	Agreed to work on negotiated package rates	SINGLE				
DEBASIS BISWAL						0	
M NEELAKANDAN .	10	10% TOTAL HOSPITAL BILL	NON AC				
TABRAZ ALI	10	10% discount on total bill excluding Pharmacy and consumables.				1	

Employee Name	Orphan Date	P Master Policy No	Salvage Amt	Incurred Amt	Rev'd Claim	Close Status	IC Amt
MR DEEPAK ROJINDAR			0		REPUDATION		
MAYANK GAUTAM			0	27301	APPROVED		27301
MR DEEPAK ROJINDAR			0	37150	APPROVED		37150
N.JMA MAHESH			0	27393	OUTSTANDING		27393
DEBASIS BISWAL			0	21031	APPROVED		21031
M NEELAKANDAN			0	200000	OUTSTANDING		200000
TABRAZ ALI			0	43097	APPROVED		43097

POLICY DATA

Policy Number	OG-20-1113-8403-00000095
Partner Desc	BALMER LAWRIE AND CO LTD
Risk Inc Date	May 26, 2019
Risk Expiry Date	August 25, 2019
Policy Age	73
Policy Period	366
Today's Date	August 6, 2019

Cashless Vs Reimbursement Claim Summary

Claim Type	Claim Count	Claim Count Incurred Amt	Incurred Amt
Cashless	1	50.00%	33750 40.30%
Reimburse	1	50.00%	50000 59.70%
Total		100.00%	100.00%

Member Summary

Member count	364
Members At Inception	340
Active Members	348

CLAIMS Summary

	Cashless			Reimbursement			Overall			Mix (%)
	Claim Count	Incurred Amt	Claim Severity	Claim Count	Incurred Amt	Claim Severity	Claim Count	Incurred Amt	Claim Severity	Claim Count (%)
APPROVED				1	50,000	50,000	1	50,000	50,000	50.00%
OUTSTANDING	1	33,750	33,750				1	33,750	33,750	50.00%
Sum:										
Mix (%)										

PREMIUM AND PROFITABILITY	
Gross Premium	217,401
Net Premium	1,84,237
Earned Premium	36,747
Incurred Claims (Paid + Ostd)	83,750
Incurred Claims Closed w/o pay	
IBNR (@ 4%)	3,350
IBNR Included Incurred Claim Amount	87,100
Salvage Amt	0
Claim Ratio on Net Premium	45.46%
Claim Ratio on Earned Premium	227.91%
Claim Ratio on Earned Premium Incl IBNR	237.03%
Claim Frequency	2.75%

Claim Locati	Sr No	Clid	Insured	Employee Na	Patient	Sum Insured	Doj	Age	Gender	Relation	Id Card
1002	10639415	3315541	BALMER LAW	CHETAN BAY	CHETAN BAY	300000	5/26/2019	28	MALE	SELF	GMC-2011133
1002	10655641	3342248	BALMER LAWS	TULASI	S TULASI	300000	5/26/2019	32	FEMALE	SELF	GMC-2011133

Employee Na	Co Empnum	Hat Empcode	Policy	Rid	Red	Hospital Type	Hospital	Add1	Add2	City	State
CHETAN BAY	60398		OG-20-1113-8	5/26/2019	5/25/2020	NETWORK	SANJIVANI H	BDG 1 ST FLOOR	OPP.BUS DEP	NAVI MUMBA	MAHARASHT
S.TULASI	60206		OG-20-1113-8	5/26/2019	5/25/2020	NON-NETWO	SRI VENKATE	3-4-259, Kachiguda station rd		HYDERABAD	ANDHRA PRA

Employee Na	Pin	Std	Phone	Fax	Pre Auth. Dat	Pre Auth Amt	Room Categ	Auth Date	Name Dr	Expected Do
CHETAN BAY	400708	022	2227790098	2227794855	7/17/2019	50300	PRIVATE A/C	7/17/2019	-	17-07-2019
S TULASI	DESH								Anjali J	

Employee Na	Expected Doc	Actual Doa	Actual Dpd	Provisional D	Claimed Amt	Corporate Bu	Claim Type	Registration	Treatment Ty	Claim No	Claim Status
CHETAN BAY	21-07-2019			Fever URTI		0	Cashless	7/17/2019	HOSPITALIZA	OC-20-1002-8	NOT ASSESS
S TULASI		25-06-2019	29-06-2019		56133	0	Reimburseme	7/26/2019	HOSPITALIZA	OC-20-1002-8	CLOSED

Employee Na	Room Charge	Doctor Charge	Ot Charges	Pharmacy	Pathology	Radiology	Cardiology	Equipment	Ambulance	Non Medical	Discount
CHETAN BAY											
S TULASI	5600	31000	7500	5858	300					0	

Employee Na	Insured Disal	Disal Payable To In	Assesment D Medical Mgt	Assessment	Prsauth Excl	Denial Reaso	Denial Date	Pay Status	Reserve Amt
CHETAN BAYATI	expenses shall be entitled as per room rent. - Expenses incurred during hospitalization shall be settled as per the agreed nego							In Process	33750
S TULASI	on maternity exp 6133 50000~Rs.50	7/26/2019						With Pay	60000

Employee Na	Bank Name	Bank Ac No	Debit Card No	Processor	Imd Code	Dr Intimation	Dr Reply Date	Diagnosis De Dig	Procedur	Updated On	Other Deduct
CHETAN BAY				kapil.sapkal@	10008153					8/3/2019	
S TULASI				abhijeet.kudre	10008153					8/6/2019	1658

Employee Na	Premium	Co Payment	Surgeon Cha	Nursing Cha	Icu Charges	Repuclation	Orphan Intim	Hospital Id	Irdi Unique	Partner Id	Ufr No
CHETAN BAY								2030	400708022	29251346	
S TULASI				1400				45616		60065705	

Employee Na	Tds Amount	Pan No	Service Tax	Account No	Bank Name	Service Tax	Tds Rate	Doc Receive	Reopen Date	Eligible Room	Eligible Room
CHETAN BAY								7/30/2019			
S TULASI								7/24/2019		3000	OTHER

Employee Na	Hospital Qua	Ppn Type	Discount 1	Discount On 1 Room Desc	Bonus Si	Sp. Condition	Ip No	Query Remar	Orphan Date	P Master Poli
CHETAN BAY PPN		PPN-PACKAG10		10% Discount On Total Hospital Bill Excluding Consumables And Packages						
S TULASI		NA					1			

Employee	Na Salvage Amt	Incurred_Amt	Rev'd Claim	IC_Amt
CHE TAN BAY	0	33750	OUTSTANDING	33750
S TULASI	0	50000	APPROVED	50000



Bajaj Allianz General Insurance Company Ltd.

GE Plaza, Airport Road, Yerwada, Pune -411006

POLICY SCHEDULE

Policy Servicing Office F 721 Wave Silver Tower, 7th Floor Plot D- 6 Sector 18, Noida, , GAUTAM BUDDHA NAGAR-201301 PHONE NO 01244507560

Policy Number OG-18-1116-8403-0000067 Product Group Mediclaim (Floater)
 First Policy No OG-18-1116-8403-0000067 Inception Date 26-FEB-2018
 Application No Scrutiny No 82804878
 GSTIN / UIN 07AABC0984E1ZX State Code 07 - Delhi / Name
 Policy Issued On 28-Feb-2018
 Period Of Insurance From 12:13 26-Feb-2018 TO 25-Feb-2019 Midnight
 Insured Name Balmer Lawrie And Co Ltd
 Insured Address Scope Complex Core-8 4th Floor 7 Lodhi Road New, , Po Area - ,
 .., Delhi - 110003

Description	Sum Insured (Rs.)
8403-Group Mediclaim (Floater) Total Members 311 = Self 128 + Dep 183	60200000

Base Premium 645000
 Special Discount
 Net Premium 645000
 Terrorism 0
 Stamp Duty 0
 Integrated GST (18%) 116100
 Final Premium 761100

*** All Premium figures are in Rupee

HAT Reference Number:

Scope Of Cover As Per The Policy wording attached
 Risk Covered 8403-Group Mediclaim (Floater) Total Members 311 = Self 128 + Dep 183
 Special Perils As per attached Group Mediclaim Policy Wordings and Benefit Chart
 Special Exclusion As per attached Group Mediclaim Policy Wordings and Benefit Chart
 Subject To Clauses As per attached Group Mediclaim Policy Wordings and Benefit Chart
 Warranties As per attached Group Mediclaim Policy Wordings and Benefit Chart
 Special Conditions As per attached Group Mediclaim Policy Wordings and Benefit Chart

Comments

Premium Collection Details:-[Receipt No/Collection No/Amount]

1116-00000339 / 82804876 / RS. 761100 ,

Broker Code 10008153	Channel Name : BR
Broker Name : SPA INSURANCE BROKING SERVICES LTD.	
Contact No : 0/0	
Email -	

BASIC GST No : 09AABC0984E1ZX | Principal Location : Bajaj Allianz General Insurance Co.Ltd, 15/64 B 2nd Floor, Virendra Smiti Complex, Civil Lines, KANPUR NAGAR - 208001 PH:0512-2338277 | Services Accounting Code : 897133 - Accident and health Insurance services. No reverse charge is payable on these services. | Invoice No. : 9418764271

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.





Authorized Signatory
Printed, Signed and Executed at Pune
Consolidated Stamp Duty of Rs.2.37- paid towards Insurance Stamp vide Challan No.
MH01012621120171688 Defaced No. 0006747983203716 dated 08-FEB-18 timing 13:12:55 of General
Stamp Office, Mumbai, India.

Generated by sager pimple

Bajaj Allianz General Insurance Company Ltd.

(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India (IRDA) vide Regd. No.113)

Regd Office: GE Plaza, Airport Road, Yerwada, Pune - 411006(India)

HOSPITALS NOT ELIGIBLE FOR CASHLESS OR REIMBURSEMENT CLAIMS

Policy Number OG-18-1116-8403-00000087

Hospital name	City	Address Line	PinCode
F.J. HOSPITAL	LUCKNOW	37 Canal Road Near Burlington Crossing Hus-sain Ganj -- LUCKNOW - UTTAR PRADESH	226001
AASHRWAD NURSING HOME & DIABETES CENTER - New Delhi	NEWDELHI - OTHERS	A29/3 Lions Enclave Marble Block Opp DDA Park Vikas Nagar Uttam Nagar - NEW DELHI - OTHERS - DELHI	110 059
MEDIMAX HOSPITAL (A UNIT OF SARAS HEALTH CARE PVT. LTD) -Ghaziabad	GHAZIABAD	Pratap Vihar 12-PRATAP VIHAR K - 112 Sec - 12 Behind Santosh Medical - GHAZIABAD - UTTAR PRADESH	201 009
Krishna Hospital - Vadodara	VADODARA	New Vip Road Opp. Vaikunth Bunglows -- VADODARA - GUJARAT	390022
Kausthubh Nursing Home	MUMBAI - NAVI MUMBAI	Plot No 78 Sector 6 Behind Ganesh Market And Post Office Koperkhairane -- MUMBAI - NAVI MUMBAI - MAHARASHTRA	0
Mehta Hospital	AHMEDABAD	57 Brahmin Mitra Mandal Society Ellisbridge - AHMEDABAD - GUJARAT	380006
SANJEEVANI SURGICAL AND GENERAL HOSPITAL - Mumbai	MUMBAI - MAIN	Bhavani Chambers Kedarnal Road Malad (East) -- MUMBAI - MAIN - MAHARASHTRA	400097
Govind Prabha Hospital - Surat	SURAT	Opp Ratnasagar School Kazis Maidan Gopipura -- SURAT - GUJARAT	0
GOPAL HOSPITAL - Ghaziabad	GHAZIABAD	Shanti Nagar Bus Stand Loni -- GHAZIABAD - UTTAR PRADESH	201102
VENUS HOSPITAL-HYDERABAD	HYDERABAD	D.NO.16-2-661/EFGH JUDGES COLONY MALAKPET HYDERABAD. - HYDERABAD - ANDHRA PRADESH	500036
KRISHNA HOSPITAL-Delhi	DELHI	J-21 Main Road 4th Pusta Karfar Nagar. - DELHI - DELHI	110053
ADITYA HOSPITAL INDORE,GOYAL NAGAR.	INDORE	1/5 GOYAL NAGARBANGALI CHOURA-HAINDORE. - INDORE - MADHYA PRADESH	-
AQUA LIFE CARE HOSPITAL - Navi Mumbai	MUMBAI	SHREE DURGA APT OFFICE 2 1ST FLR A WING PLOT NO-186 SEC 10 OPP JUIN-AGAR RLY STATION NR D MART MALL SANPADA (e) NAVI MUMBAI 400705 SAN-PADA (e) NAVI MUMBAI 400705 - MUMBAI - MAHARASHTRA	400705
EDEN NURSING HOME	BONGAON	Near Gobardanga Hindu College Tinamala Machalandapur - BONGAON - WEST BENGAL	0
Kabeer Hospital Pvt.Ltd.	KANPUR	Yashoda Nagar (Near Bajrang Chauraha) Kanpur Nagar-208028. Phone - 0512 2620051 3243685; E-mail: hospitalsofkabeer@gmail.comkabeerhospitalpvtltdkanpurgmail.com - KANPUR - UTTAR PRADESH	0
Greater Malwa Hospital	INDORE	5 Prime City Sukhliya Main Road INDORE - INDORE - MADHYA PRADESH	0
Millenium Hospital - Navi Mumbai	NAVI MUMBAI	Plot no 19 Sector 40 Palm Beach Road Navi Mumbai Seawood (W) Nerul - NAVI MUMBAI - MAHARASHTRA	400001
JAI GANESH NURSING HOME - Thane	MUMBAI - THANE	R. S. C 15 Plot No 67 / 68 Opp. Louis Bldg Veer Savarkar Nagar -- MUMBAI - THANE - MAHARASHTRA	400606
HEALTHY HEART- A COMPLETE CARDIAC CARE CENTRE	CHANDIGARH	# 150 SECTOR 8-A - CHANDIGARH - CHANDIGARH	160009
BORA HOSPITAL - Pune	PUNE	589 Ganesh Path -- PUNE - MAHARASHTRA	411002
SHRI RAM RATAN MEMORIAL NURSING HOME - FATEHPUR	FATEHPUR	Main GT Road GT Road - FATEHPUR - UTTAR PRADESH	212601
SHREE SAI BABA HOSPITAL	NASIK	vavives sinner-shirdi highway sinner ph 02551-224777 - NASIK - MAHARASHTRA	0

IMPORTANT

- 1.The above hospitals are not a part of the Bajaj Allianz General Insurance Network.
- 2.Cashless facility is not valid at any of the above hospitals.
- 3.Reimbursement of claims for treatment taken at these hospitals will not be accepted for reimbursement
- 4.The above hospital list can be modified without any prior notice. Kindly check with our Call Centre at 1800 22 5858 (BSNL / MTNL) or 1800 102 5858 (Bharti) or 020 - 30305858 (Others)

Policy Benefit Chart

M/S Bahner Lawrie and Co Ltd

Policy Number: OG-18-1116-9403-00000067 HAT Reference Number: 36595
 Risk Inception Date: 26-FEB-18 Policy Active With other Insured: 0 Pre Hospitalization Period [Days]: 30
 Risk Expiry Date: 25-FEB-19 Policy Active With Bajaj Allianz: 0 Post Hospitalization Period [Days]: 60
 Floater Details: GMC Floater Policy Beneficiary Name: EMPLOYEE Corporate A/C No

Outpatient No details

Relation	Coverage	Limit on Number of children	Entry age for child coverage	Pre-Existing Diseases	% OF SI	30 Days waiting	1 Year waiting	02 Year waiting	04 Year waiting	Maximum Liability	Liability Limit	Co-Payment clause[%]	Percentage
EMPLOYEES	Covered		0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	
SPOUSE	Covered		0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	
CHILD	Covered	2	0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	

Maternity Benefit: Covered **Max liability on maternity exp** 50000
Limit for no of children: 0 **Co-payment for maternity**

Max for LSCS: 50000 **Corporate buffer**

Corporate Buffer Amount: Corporate buffer

Room Restrictions: Refer claim condition
 Yes

Claim Conditions

Pre and post natal is covered up to maternity sub-limit within maternity limit in case of hospitalization and covered up to INR 5000 within maternity limit in case of OPD.

* Fresh
 * Room Rent Restriction : Room rent restricted to 1% of the SI per day for normal and 2% of the SI per day for ICU and all other charges in accordance with room rent restrictions. Room rent restriction will be applicable on restricted sum insured wherever sum insured is restricted.

* Emergency Ambulance : Ambulance charges covered upto INR 1500 per case in case of emergency/only. Ambulance charges will be 30-
 Wednesday/FEB-2018

applicable for transferring patient to Hospital or between Hospitals in the Hospital's ambulance or in an ambulance provided by any ambulance service provider only.

* Family Definition : Employees + Spouse + 2Dep. Children. Only Deepak Duseja twin daughters alongwith his son are covered as an exception.

* Other Conditions1 : Pre-post hospitalization is 30-60 days respectively.

* Other Conditions2 Infertility treatment is not covered under the policy.; Congenital Internal Diseases are covered, congenital external diseases are not covered under the policy.Psychiatric and Psychosomatic disorders are not covered under the policy.

* Other Conditions3 : Cataract treatment is restricted upto INR 24000 per eye.

Maternity Conditions

Maternity benefit is available only for self and spouse. Maternity Benefit will be applicable for first two children only.

Disclaimer :

1. No Individual (Employee or Dependent) can be Covered more than once in a policy.
2. Additional premium to be collected for each additional member.
3. The list of members submitted at the inception of the policy will be considered as final.
4. Increase of room rent restriction specified in the policy, all other hospitalization expenses (for e.g. OT Charges, Doctor Charges, Nursing charges etc.) shall be as per entitled room rent.

Quote Disclaimer :

- 1.Continuity Guideline / Portability : Group to retail portability benefit can be availed at the time of retirement or resignation from the services (provided these events are falling within the policy period) Portability option is available under the existing retail health products, std coverage's, terms, conditions, & guidelines of retail product would apply..
- 2.Claim Intimation and Submission of Documents : All reimbursement claims have to be intimated to Bajaj Allianz within 7 days of discharge and have to be submitted for reimbursement within 30 days of date of discharge of the patient. .
- 3.Guideline for Addition Endorsements : Midterm additions allowed only for natural additions subject to intimation received within 45 days. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining marriage / birth respectively. Backdation of 45 days from date of intimation shall not be allowed. Any endorsements will be from the date of addition and not from the inception of the policy. .
- 4.Guideline for Deletion Endorsements : "In case of refund endorsements on account of deletion, pro-rata refund for entire family should be done subject to nil claims, whereas refund should be nil if the premium is charged on per family basis. Deletion to be intimated immediately on finalization of last working day of employee. In case employee avails the claim after his LWD for which intimation is received after DOL, insurer would recover paid amount from available float balance. Pro-rata refund will be calculated as from DOL if intimation is within 7days else intimation date will be consider for calculation subject to nil claim. "
- 5.Other Conditions : "□50% Co-Pay for cyber-knife treatment, Gamma Knife treatment and Stem Cell Transplantation, Robotic Surgery, Femto laser treatment for eye. It will be applicable for each eye each event. Any Doctors/ Surgeons fees charged/paid over and above the Hospital Standard Tariff/Package stand excluded from the scope of the policy. In case of Chamber cases or outside visiting consultant has conducted the surgery or is being consulted. Insurance company would be liable to pay up to the agreed tariff/ package rates with the hospital. The over & above limit will have to be borne by the customer. Cochlear Implant treatment shall be restricted to 50% of the SI. Weight management services and treatment related to weight program's including treatment of obesity will not be payable. Beneficiary name for issue of claim cheques will be assumed as name of the corporate unless otherwise specified. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining, marriage / birth respectively. Additional premium for each additional member. Per person premium would be provided by HQ once the quote is finalized. No Individual(Employee / Dependent) can be covered more than once in a policy. The list of members submitted at the inception of the policy will be considered as final. As employer/group manager, by obtaining our Group Medical Policy [subject to standard terms and conditions of Group Policy to be issued by us] to cover your employees, you would, inter alia, will get additional advantage of online web integration [subject to accepting terms and conditions, disclaimers,] with our website thereby you can online access for the purpose of enabling you to service, provide claim help and support etc., to your employees covered under GMC. Claims servicing and processing will be done by In-House Health Administration Team, Bajaj Allianz General Insurance Company. Rest all as per attached Standard Group Health policy wording".

Policy Benefit Chart

Health Administration Team , Bajaj Allianz General Insurance Company Ltd :

2nd Floor, Bajaj Finserve Building, Survey No. 208 / B - 1, Behind Welkfield IT Park, Off Nagar Road, Viman Nagar

Phone : (020) 30512236 Fax : (020) 30512224



Bajaj Allianz General Insurance Company Ltd.

GE Plaza, Airport Road, Yerwada, Pune -411006

POLICY SCHEDULE

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc

Bajaj Allianz General Insurance Company Limited, 2F-09, Second Floor, JMD Galleria, Sector - 48, Sohna Road,, GURGAON, GURGAON-122002 PHONE NO 0124-4507560

Policy Number	OG-19-1113-8403-00000370	Product	Group Mediclaim (Floater)
First Policy No	OG-18-1116-8403-00000067	Inception Date	28-FEB-2019
Application No		Scruliny No	108897924
GSTIN / UIN	07AABCB0984E1ZX	State Code / Name	07 - Delhi
		Policy Issued On	09-Mar-2019
Period Of Insurance	From 00	26-Feb-2019	TO 25-Feb-2020 Midnight
Insured Name	Balmer Lawrie And Co Ltd		
Insured Address	Scope Complex Core-8 4th Floor 7 Lodhi Road New, , Po Area - ,		
Loan Account No:	NA		
	, , Delhi - 110003		

Description	Sum Insured (Rs.)
8403-Group Mediclaim (Floater)	53700000

Base Premium	180000
Special Discount	
Net Premium	180000
Terrorism	0
Stamp Duty	0
Integrated GST (18%)	32400
Final Premium	212400

*** All Premium figures are in Rupee

HAT Reference Number:

Scope Of Cover	As Per The Policy wording attached
Risk Covered	8403-Group Mediclaim (Floater)
Special Perils	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Special Exclusion	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Subject To Clauses	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Warrenties	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Special Conditions	As per attached Group Mediclaim Policy Wordings and Benefit Chart

Comments

Premium Collection Details:-[Receipt No/Collection No/Amount]

1116-00001131 / 108897924 / RS. 212400 ,

Broker Code 10008153	Channel Name : BR
Broker Name : SPA INSURANCE BROKING SERVICES LTD.	
Contact No : 0/0	
Email -	

BAGIC GST No : 06AABCB6730G1Z1 | Principal Location : 3rd Floor, JMD Regent Plaza, Silkanderpur, Mehrauli -Gurgaon road, Gurgaon - 122002 PH:4064601 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services. | Invoice No. : 113432014/1

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.



Concise by yamit
Bajaj Allianz



Authorized Signatory
Printed, Signed and Executed at Pune
Consolidated Stamp Duty of Rs.8.67, paid towards Insurance Stamp vide Challan No.
MH010396114261819M Defaced No. 0008908086201819 Order No. CSD1862019127819 order dated
18-Jan-2019 defaced dated 17-JAN-19 Timing 14:19:37 of General Stamp Office, Mumbai, India.

Generated by vikas ghadge01

Bajaj Allianz General Insurance Company Ltd.

(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India (IRDA) vide Regt. No.113)

Regd Office: GE Plaza, Airport Road, Yerwade, Pune - 411006(India)

HOSPITALS NOT ELIGIBLE FOR CASHLESS OR REIMBURSEMENT CLAIMS

Policy Number OG-19-1113-8403-0000370

Hospital name	City	Address Line	PinCode
F.I. HOSPITAL	LUCKNOW	37 Cantt Road Near Burlington Crossing Hus-sain Ganj - - LUCKNOW - UTTAR PRADESH	226001
AASHIRWAD NURSING HOME & DIABETES CENTER - New Delhi	NEW DELHI - OTHERS	A29/3 Lions Enclave Marble Block Opp DDA Park Vikas Nagar Utam Nagar - NEW DELHI - OTHERS - DELHI	110 059
Krishna Hospital - Vadodara	VADODARA	New Vip Road Opp. Vaikunth Bungalows - - VADODARA - GUJARAT	390022
Mehta Hospital	AHMEDABAD	57 Brahmin Mitra Mandal Society Ellisbridge - - AHMEDABAD - GUJARAT	380008
SANJEEVANI SURGICAL AND GENERAL HOSPITAL - Mumbai	MUMBAI - MAIN	Bhavani Chambers Kedarnal Road Malad (East) - - MUMBAI - MAIN - MAHARASHTRA	400097
Govind Prabha Hospital - Surat	SURAT	Opp Retnasagar School Kazis Maidan Gopipure - - SURAT - GUJARAT	0
Millenium Hospital - Navi Mumbai	NAVI MUMBAI	Plot no 19 Sector 40 Palm Beach Road Navi Mumbai Seawood (W) Nerul - NAVI MUMBAI - MAHARASHTRA	400001
MEDIMAX HOSPITAL (A UNIT OF SARAS HEALTH CARE PVT. LTD) -Ghaziabad	GHAZIABAD	Pratap Vihar 12-PRATAP VIHAR K - 112 Sec - 12 Behind Santosh Medical - GHAZIABAD - UTTAR PRADESH	201 009
Kausthubh Nursing Home	MUMBAI - NAVI MUMBAI	Plot No 76 Sector 6 Behind Ganesh Market And Post Office Koperkhairane - - MUMBAI - NAVI MUMBAI - MAHARASHTRA	0
GOPAL HOSPITAL - Ghaziabad	GHAZIABAD	Shanti Nagar Bus Stand Loni - - GHAZIABAD - UTTAR PRADESH	201102
VENUS HOSPITAL -HYDERABAD	HYDERABAD	D.NO.16-2-861/EFCH JUDGES COLONY MALAKPET HYDERABAD, - HYDERABAD - ANDHRA PRADESH	500036
KRISHNA HOSPITAL-Delhi	DELHI	J-21 Main Road 4th Pusta Kartar Nagar. - DELHI - DELHI	110053
ADITYA HOSPITAL-INDORE,Goyal Nagar.	INDORE	1/5 GOYAL NAGARBANGALI CHOURA-HAINDORE. - INDORE - MADHYA PRADESH	-
AQUA LIFE CARE HOSPITAL - Navi Mumbai	MUMBAI	SHREE DURGA APT OFFICE 2 1ST FLR A WING PLOT NO-186 SEC 10 OPP JJIN-AGAR RLY STATION NR D MART MALL SANPADA (e) NAVI MUMABAI 400705 SAN-PADA (e) NAVI MUMABAI 400705 - MUMBAI - MAHARASHTRA	400705
EDEN NURSING HOME	BONGAON	Near Gobardanga Hindu College Tinamlala Machalandapur - BONGAON - WEST BENGAL	0
Kabeer Hospital Pvt.Ltd.	KANPUR	Yashoda Nagar (Near Bajrang Chauraha) Kanpur Nagar-206029. Phone - 0512 2620061 3243685; E-mail: hospitalsofka-beer@gmail.comkabeerhospitalpvtldkanpur@gmail.com - KANPUR - UTTAR PRADESH	0
Greater Malwe Hospital	INDORE	5 Prime City Sukhliya Main Road INDORE - INDORE - MADHYA PRADESH	0
JAI GANESH NURSING HOME - Thane	MUMBAI - THANE	R. S. C 15 Plot No 67 / 66 Opp. Louis Bldg Near Savarkar Nagar - - MUMBAI - THANE - MAHARASHTRA	400606
NORTH DELHI NURSING HOME - New Delhi	NEW DELHI - OTHERS	3 Community Centre - II - - NEW DELHI - OTHERS - DELHI	110052

IMPORTANT

- 1.The above hospitals are not a part of the Bajaj Allianz General Insurance Network.
- 2.Cashless facility is not valid at any of the above hospitals.
- 3.Reimbursement of claims for treatment taken at these hospitals will not be accepted for reimbursement
- 4.The above hospital list can be modified without any prior notice. Kindly check with our Call Centre at 1800 22 5858 (BSNL / MTNL) or 1800 102 5858 (Bharti) or 020 - 30305858 (Others)

Policy Benefit Chart

Balmer Lawrie And Co Ltd

Policy Number: 06-19-1113-8403-00000370 HAT Reference Number: 508220

Risk Inception Date: 26-FEB-19 Policy Active With other Insured: Policy Active With Bajaj Allianz Pre Hospitalization Period[Days]: 30

Risk Expiry Date: 25-FEB-20 Policy Active With Bajaj Allianz: 1 Post Hospitalization Period[Days]: 60

Floater Details: GMC Floater Policy Beneficiary Name: EMPLOYEE Corporate A/C No

Outpatient No details

Relation	Coverage	Limit on Number of children	Entry age for child coverage	Pre-Existing Diseases	% Of SI	30 Days waiting	1 Year waiting	02 Year waiting	04 Year waiting	Maximum Liability	Liability Limit	Co-Payment clause[%]	Percentage
EMPLOYEES	Covered		0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	
SPOUSE	Covered		0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	
CHILD	Covered	2	0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	

Maternity Benefit: Covered Max liability on maternity exp: 50000 9 Months waiting period: Not Applicable
 Limit for no of children: 0 Co-payment for maternity: Max for normal delivery: 50000

Max for LSCS: 50000 Corporate buffer: Per Family Maximum

Corporate Buffer Amount: Room Restrictions: Refer Claim condition
 Yes

Claim Conditions: Pre and post natal is covered up to maternity sub-limit within maternity limit in case of hospitalization, OPD is not covered.

- * Previous Policy Number: 06-18-1116-8403-00000067
- * Family Definition : Employees + Spouse + 2Dep. Children. Only Deepak Duseja twin daughters alongwith his son are covered as an exception
- * Room Rent Restriction : Room rent restricted to 1% of the SI per day for normal and 2% of the SI per day for ICU and all other charges in accordance with room rent restrictions. Room rent restriction will be applicable on restricted sum insured whenever sum insured is restricted.

* Emergency Ambulance : Ambulance charges covered upto INR 1500 per case in case of emergency only. Ambulance charges will be applicable for transferring patient to Hospital or between Hospitals in the Hospital's ambulance or in an ambulance provided by any ambulance service provider only.

* Maternity Condition : Maternity benefit is available only for self and spouse. Maternity Benefit will be applicable for first two children only.

* Pre and Post Natal Expenses : Pre and post natal is covered up to maternity sub-limit within maternity limit in case of hospitalization, OPD is not covered.

* Other Conditions1 : Pre-post hospitalization is 30-60 days respectively.

* Other Conditions2 : Internal congenital diseases are covered, external is not covered.

* Other Conditions3 : Psychiatric ailments and Infertility treatment is not covered in the policy.

* Other Conditions4 : Mid-term Sum Insured enhancement is not allowed in GWC policy unless it is specified at the time of proposal acceptance.

* Other Conditions5 : This is 3 month extension policy for Policy No. OG-18-1116-8403-00000067. No claim should be paid under this policy for hospitalization after 25th May 2019.

* Other Conditions6 : Sum Insured will be as per last year policy, only remaining sum insured need to be mapped in the extension period.

Maternity Conditions

Maternity benefit is available only for self and spouse. Maternity Benefit will be applicable for first two children only.

Disclaimer :

1. No Individual (Employee or Dependent) can be Covered more than once in a policy.
2. Additional premium to be collected for each additional member.
3. The list of members submitted at the inception of the policy will be considered as final.
4. Increase of room rent restriction specified in the policy, all other hospitalization expenses (for e.g. OT Charges, Doctor Charges, Nursing charges etc.) shall be as per entitled room rent.

Quote Disclaimer :

1.Continuity Guideline / Portability : Group to retail portability benefit can be availed at the time of retirement or resignation from the services (provided these events are falling within the policy period) Portability option is available under the existing retail health products, std coverage's, terms, conditions, & guidelines of retail product would apply. .

2.Claim Intimation and Submission of Documents : All reimbursement claims have to be intimated to Bejesj Allianz within 7 days of discharge and have to be submitted for reimbursement within 30 days of date of discharge of the patient. .

3.Guideline for Addition Endorsements : Midterm additions allowed only for natural additions subject to intimation received within 45 days. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining marriage / birth respectively. Backdate of 45 days from date of intimation shall not be allowed. Any endorsements will be from the date of addition and not from the inception of the policy. .

4.Guideline for Deletion Endorsements : In case of refund endorsements on account of deletion, pro-rata refund for entire family should be done subject to nil claims, whereas refund should be nil if the premium is charged on per family basis. Deletion to be intimated immediately on finalization of last working day of employee. In case employee avails the claim after his LWD for which intimation is received after DOA, Insurer would recover paid amount from available float balance. Pro-rata refund will be calculated as from DOL if intimation is within 7days else intimation date will be consider for calculation subject to nil claim. .

5.Other Conditions : 50% Co-Pay for Cyber-knife treatment, Gamma Knife treatment and Stem Cell Transplantation, Robotic Surgery, Femto laser treatment for eye. It will be applicable for

Policy Benefit Chart

each eye each event. Any Doctors/ Surgeons fees charged/paid over and above the Hospital Standard Tariff/Package stand excluded from the scope of the policy. In case of Chamber cases or outside visiting consultant has conducted the surgery or is being consulted, Insurance company would be liable to pay up to the agreed tariff/ package rates with the hospital. The over & above limit will have to be borne by the customer. Cochlear Implant treatment shall be restricted to 50% of the St. Weight management services and treatment related to weight program's including treatment of obesity will not be payable. Beneficiary name for issue of claim cheques will be assumed as name of the corporate unless otherwise specified. Any additions for new employees, spouse / children would be allowed within 45 days of date of joining, marriage / birth respectively. Additional premium for each additional member. Per person premium would be provided by HO once the quote is finalized. No Individual(Employee / Dependent) can be covered more than once in a policy. The list of members submitted at the inception of the policy will be considered as final. As employer/group manager, by obtaining our Group Medical Policy [subject to standard terms and conditions of Group Policy to be issued by us] to cover your employees, you would, inter alia, will get additional advantage of online web integration [subject to accepting terms and conditions, disclaimers,] with our website thereby you can online access for the purpose of enabling you to service, provide claim help and support etc., to your employees covered under GMC. Claims servicing and processing will be done by In-house Health Administration Team, Bajaj Allianz General Insurance Company. Rest all as per attached Standard Group Health policy wording. .

Health Administration Team / Bajaj Allianz General Insurance Company Ltd :

2nd Floor, Bajaj Finserv Building, Survey No. 208 / B - 1, Behind Weikfield IT Park, Off Nagar Road, Viman Nagar

Phone : (020) 30512236 Fax : (020) 30512224



Bajaj Allianz General Insurance Company Ltd.

GE Plaza, Airport Road, Yerwada, Pune -411006

POLICY SCHEDULE

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc
 Bajaj Allianz General Insurance Company Limited, 2F-09, Second Floor, JMD Galleria, Sector - 48, Sohna Road,, GURGAON, GURGAON-122002 PHONE
 NO 0124-4507560

Policy Number	OG-20-1113-8403-00000095	Product	Group Mediclaim (Floater)
First Policy No	OG-19-1113-8403-00000370	Inception Date	26-MAY-2019
Application No		Scrutiny No	119130275
GSTIN / UIN	07AABC0984E1ZX	State Code / Name	07 - Delhi
		Policy Issued On	11-Jun-2019
Period Of Insurance	From 00	26-May-2019	TO 25-May-2020Midnight
Insured Name	Balmer Lawrie And Co Ltd		
Insured Address	Scope Complex Core-8 4th Floor 7 Lodhi Road New, , Po Area - ,		
Loan Account No:	NA		
	, , Delhi - 110003		

Description	Sum Insured (Rs.)
Total member 340 (Self 138 + Dept 202)	5,34,00,000.00

Base Premium	1,83,784.00
Special Discount	
Net Premium	1,83,784.00
Terrorism	0.00
Stamp Duty	0.00
Integrated GST (18%)	33,081.00
Final Premium	2,16,865.00

*** All Premium figures are In Rupee

HAT Reference Number:

Scope Of Cover	As Per The Policy wording attached
Risk Covered	Total member 340 (Self 138 + Dept 202)
Special Perils	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Special Exclusion	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Subject To Clauses	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Warranties	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Special Conditions	As per attached Group Mediclaim Policy Wordings and Benefit Chart
Comments	

Premium Collection Details:-[Receipt No/Collection No/Amount]

1113-00086752 / 119130275 / RS. 216865 ,

Broker Code 10008153	Channel Name : BR
Broker Name : SPA INSURANCE BROKING SERVICES LTD.	
Contact No : 0/0	
Email -	

BAGIC GST No : 06AABC065730G1Z1 | Principal Location : 3rd Floor, JMD Regent Plaza, Sikanderpur, Mahrauli -Gurgaon road, Gurgaon - 122002 PH:4064501 | Services Accounting Code : 997133 - Accident and health insurance services. No reverse charge is payable on these services. | Invoice No. : 121608659/1

For & On Behalf of Bajaj Allianz General Insurance Company Ltd.



Caringly yours



Authorized Signatory

Placed, Signed and Executed at Pune

Consolidated Stamp Duty of Rs.0.0/- paid towards Insurance Stamp via Challan No. MH060889742201920H Detached No. 000637460201920 dated 13-10-19
Timing 16:25:17 of Central Stamp Office, Mumbai, India.

This document is digitally signed, hence counter signature / stamp is not required

Generated by sagar pimple

Bajaj Allianz General Insurance Company Ltd.

(A Company Incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India (IRDA) vide Regt. No.113)

Regd Office: GE Plaza, Airport Road, Yerwada, Pune - 411008(India)

HOSPITALS NOT ELIGIBLE FOR CASHLESS OR REIMBURSEMENT CLAIMS

Policy Number OG-20-1113-8403-00000095

Hospital name	City	Address Line	PinCode
F.I. HOSPITAL	LUCKNOW	37 Canal Road Near Burlington Crossing Hus-sain Ganj -- LUCKNOW - UTTAR PRADESH	226001
MEDIMAX HOSPITAL (A UNIT OF SARAS HEALTH CARE PVT. LTD) -Ghaziabad	GHAZIABAD	Pratap Vihar 12-PRATAP VIHAR K - 112 Sec - 12 Behind Sanlosh Medical - GHAZIABAD - UTTAR PRADESH	201 009
Krishna Hospital - Vadodara	VADODARA	New Vip Road Opp. Vaikunth Bunglows -- VADODARA - GUJARAT	380022
SANJEEVANI SURGICAL AND GENERAL HOSPITAL - Mum-bai	MUMBAI - MAIN	Bhavani Chambers Kedarnal Road Malad (East) -- MUMBAI - MAIN - MAHARASHTRA	400097
Govind Prabha Hospital - Surat	SURAT	Opp Ratnasagar School Kazis Maidan Gopipura -- SURAT - GUJARAT	385001
GOPAL HOSPITAL - Ghaziebad	GHAZIABAD	Shanti Nagar Bus Stand Loni -- GHAZIABAD - UTTAR PRADESH	201102
VENUS HOSPITAL-HY-DERABAD	HYDERABAD	D.NO.16-2-661/EFGH JUDGES COLONY MALAKPET HYDERABAD. - HYDERABAD - ANDHRA PRADESH	500036
Kabeer Hospital Pvt.Ltd.	KANPUR	Yashoda Nagar (Near Bajrang Chauraha) Kanpur Nagar-208028. Phone - 0512 2620051 3243885; E-mail: hospitalsofkabeer@gmail.com;kabeerhospitalpvtltdkanpur@gmail.com - KANPUR - UTTAR PRADESH	208011
Millenium Hospital - Navi Mum-bai	NAVI MUMBAI	Plot no 19 Sector 40 Palm Beach Road Navi Mumbai Seawood (W) Nerul - NAVI MUMBAI - MAHARASHTRA	400001
AASHIRWAD NURSING HOME & DIABETES CENTER - New Delhi	NEW DELHI - OTHERS	A28/9 Lions Enclave Marble Block Opp DDA Park Vikas Nagar Uttam Nagar - NEW DELHI - OTHERS - DELHI	110 059
Kausthubh Nursing Home	MUMBAI - NAVI MUM-BAI	Plot No 76 Sector 8 Behind Ganesh Market And Post Office Koperchhatrane - MUMBAI - NAVI MUMBAI - MAHARASHTRA	0
Mehra Hospital	AHMEDABAD	57 Brahmin Mitra Mandal Society Ellisbridge - AHMEDABAD - GUJARAT	380006
KRISHNA HOSPITAL-Delhi	DELHI	J-21 Main Road 4th Pusta Karlar Nagar. - DELHI - DELHI	110053
AQUA LIFE CARE HOSPITAL - Navi Mumbai	MUMBAI	SHREE DURGA APT OFFICE 2 1ST FLR A WING PLOT NO-186 SEC 10 OPP JUIN-AGAR RLY STATION NR D MART MALL SANPADA (e) NAVI MUMABAI 400705 SAN-PADA (e) NAVI MUMABAI 400705 - MUMBAI - MAHARASHTRA	400705
Greater Malwa Hospital	INDORE	5 Prime City Sukhliya Main Road INDORE - INDORE - MADHYA PRADESH	452005
JAI GANESH NURSING HOME - Thane	MUMBAI - THANE	R. S. C 15 Plot No 67 / 66 Opp. Louis Bldg Veer Sevarkar Nagar -- MUMBAI - THANE - MAHARASHTRA	400606
EDEN NURSING HOME	BONGAON	Near Gobardanga Hindu College Tinamta Machalandapur - BONGAON - WEST BENGAL	743235
ADITYA HOSPITAL-IN-DORE,GOYAL NAGAR.	INDORE	1/5 GOYAL NAGARBANGALI CHOURA-HAINDORE. - INDORE - MADHYA PRA-DESH	452016
NORTH DELHI NURSING HOME - New Delhi	NEW DELHI - OTHERS	3 Community Centre - II -- NEW DELHI - OTHERS - DELHI	110052

IMPORTANT

1. The above hospitals are not a part of the Bajaj Allianz General Insurance Network.
2. Cashless facility is not valid at any of the above hospitals.
3. Reimbursement of claims for treatment taken at these hospitals will not be accepted for reimbursement
4. The above hospital list can be modified without any prior notice. Kindly check with our Call Centre at 1800 22 5858 (BSNL / MTNL) or 1800 102 5858 (Bharti) or 020 - 30305858 (Others)

Policy Benefit Chart

BALMER LAWRIE AND CO LTD

Policy Number: OG-20-1113-8403-00000095 HAT Reference Number: 58571
 Risk Inception Date: 26-MAY-19 Policy Active With other Insured: 0
 Risk Expiry Date: 25-AUG-19 Policy Active With Bajaj Allianz: 1
 Floater Details: GMC Floater Policy Beneficiary Name: EMPLOYEE
 Post Hospitalization Period [Days]: 60
 Corporate A/C No

Outpatient No details

Relation	Coverage	Limit on Number of children	Entry age for child coverage	Pre-existing Diseases	% OF SI	30 Days waiting	1 Year waiting	02 Year waiting	04 Year waiting	Maximum Liability	Liability Limit	Co-Payment clause[%]	Percentage
EMPLOYEES	Covered		0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	
SPOUSE	Covered		0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	
CHILD	Covered	2	0	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	

Maternity Benefit: Covered Max liability on maternity exp: 50000
 Limit for no of children: 0 Co-payment for maternity: 9 Months waiting period: Not Applicable
 Max for normal delivery: 50000

Max for LSCS: 50000 Corporate buffer: Per Family Maximum

Room Restrictions: Room rent restricted to 1% of the SI per day for normal and 2% of the SI per day for ICU and all other charges in accordance with room rent restrictions. Room rent restriction will be applicable on restricted sum insured wherever sum insured is restricted.
 Yes

Claim Conditions

Pre and post natal is covered up to maternity sub-limit within maternity limit in case of hospitalization, OPD is not covered.
 * Previous Policy Number: OG-19-1113-8403-00000370

* Emergency Ambulance : Ambulance charges covered upto INR 1500 per case in case of emergency only. Ambulance charges will be applicable for transferring patient to Hospital or between Hospitals in the Hospital's ambulance or in an ambulance provided by any ambulance service provider only.

* Family Definition : Employees + Spouse + 2Dep. Children. Only Deepak Dusega twin daughters alongwith his son are covered as an exception

* Other Conditions1 : Pre-post hospitalization is 30-60 days respectively.

* Other Conditions2 Internal congenital diseases are covered, external is not covered. Psychiatric ailments and Infertility treatment is not covered in the policy.

* Other Conditions3 : Mid-term Sum insured enhancement is not allowed in GMC policy unless it is specified at the time of proposal acceptance.

Maternity Conditions

Maternity benefit is available only for self and spouse. Maternity Benefit will be applicable for first two children only.

Disclaimer :

1. No Individual (Employee or Dependent) can be Covered more than once in a policy.
2. Additional premium to be collected for each additional member.
3. The list of members submitted at the inception of the policy will be considered as final.
4. Increase of room rent restriction specified in the policy, all other hospitalization expenses (for e.g. OT Charges, Doctor Charges, Nursing charges etc.) shall be as per entitled room rent.

Quote Disclaimer :

1. Continuity Guideline / Portability : Group to retail portability benefit can be availed at the time of retirement or resignation from the services (provided these events are falling within the policy period) Portability option is available under the existing retail health products, std coverage, terms, conditions, & guidelines of retail product would apply. .
2. Claim Intimation and Submission of Documents : All reimbursement claims have to be intimated to Bajaj Allianz within 7 days of discharge and have to be submitted for reimbursement within 30 days of date of discharge of the patient. .
3. Guideline for Addition Endorsements : Midterm additions allowed only for natural additions subject to intimation received within 45 days. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining marriage / birth respectively. Backdate of 45 days from date of intimation shall not be allowed. Any endorsements will be from the date of addition and not from the inception of the policy. .
4. Guideline for Deletion Endorsements : In case of refund endorsements on account of deletion, pro-rata refund for entire family should be done subject to nil claims, whereas refund should be nil if the premium is charged on per family basis. Deletion to be intimated immediately on finalization of last working day of employee. In case employee avails the claim after his LWD for which intimation is received after DOW, insurer would recover paid amount from available float balance. Pro-rata refund will be calculated as from DOL if intimation is within 7days else intimation date will be consider for calculation subject to nil claim. .
5. Other Conditions : 50% Co-pay for cyber-knife treatment, Gamma Knife treatment and Stem Cell Transplantation, Robotic Surgery, Femto laser treatment for eye. It will be applicable for each eye each event. Any Doctors/ Surgeons fees charged/paid over and above the Hospital Standard Tariff/package stand excluded from the scope of the policy. In case of Chamber cassettes or outside visiting consultant has conducted the surgery or is being consulted, Insurance company would be liable to pay up to the agreed tariff/ package rates with the hospital. The over & above limit will have to be borne by the customer Cochlear Implant treatment shall be restricted to 50% of the St. Weight management services and treatment related to weight program's including treatment of obesity will not be payable. Beneficiary name for issue of claim cheques will be assumed as name of the corporate unless otherwise specified. Any additions for new employee, spouse / children would be allowed within 45 days of date of joining, marriage / birth respectively. Additional premium for each additional member. Per person premium would be provided by HO once the quote is finalized. No Individual(Employee / Dependent) can be covered more than once in a policy. The list of members submitted at the inception of the policy will be considered as final. As employer/group manager, by obtaining our Group Medical Policy (subject to standard terms and conditions of Group Policy to be issued by us) to cover your employees, you would, inter alia, will get additional advantage of online web integration (subject to accepting terms and conditions, disclaimers,) with our website thereby you can online access for the purpose of enabling you to service, provide claim help and support etc., to your employees covered under GMC. Claims servicing and processing will be done by In-house Health Administration Team, Bajaj Allianz General Insurance Company, Rest all as per attached Standard Group Health policy wording. .



Policy Benefit Chart

Health Administration Team, Bajaj Allianz General Insurance Company Ltd :

2nd Floor, Bajaj Finserv Building, Survey No. 208 / B - 1, Behind Weikfield IT Park, Off Nagar Road, Viman Nagar

Phone : (020) 30512236 Fax : (020) 30512224