Indian Institute of Technology Kanpur Registrar office

No. IITK/Admin/MIS/2018/. 389

Date: 18.04.2018

OFFICE ORDER

Sub: Implementation of "Pan-India Cashless Medical Insurance Scheme" for Present and Retired Employees of IIT Kanpur

The Board of Governors in its 220th (2017/1st) meeting held on 10 & 11 March 2017 has approved the "Pan-India Cashless Medical Insurance Scheme for Present and Retired Employees of IIT Kanpur". The scheme will be effective from 15.05.2018 (midnight) to 14.05.2019 (midnight) for an initial period of one year and is <u>mandatory</u> for all present employees. However, this scheme is <u>optional for Retired Employees</u> of the Institute. In case of hospitalization between 01.04.2018 to 14.05.2018, reimbursement shall be made as per Institute norms. The details of Insurance Company selected for the same are as follows:

Sl. No.	Particulars	Details
1.	Name of Insurance Company	M/s New India Assurance Company Limited
2.	Local Office of Insurance Co.	121/12, W-1, Mangian Complex,
		Saket Nagar, Kanpur
3.	Name of TPA	RAKSHA TPA
4.	Regional office of TPA	Raksha Health Insurance TPA Pvt. Ltd.,
		807, 8 th Floor Cyber Height,
		Vibhuti Khand, Gomti Nagar,
		Lucknow – 226 010
		Contact No. 8090046595 / 8090046594
5.	Toll Free No. 24 X 7	18001801444
6.	FAX No.	Cashless - 08881673411 / 011-66173411 / 011-
		45823411
7.	Email Id.	crcm@rakshatpa.com,
		jyotiawasthi@rakshatpa.com,
		lucknowraksha@rakshatpa.com
8.	Kanpur Executives of RAKSHA	Mr. V.K. Asthana – 9415130435
	TPA	Mr. Shailendra Srivastav – 8382991757
9.	Contact details of Faridabad Head	129-4289999 / 8090046594 / 8090046595
	office of Raksha TPA	
10.	Website of TPA for web based	https://www.rakshatpa.eom/
	services.	Market Control Market Control

The salient features of this scheme are as follows:

- 1. The coverage of hospitals will be on Pan-India basis and it will cover more than 4200 (approx) hospitals.
- 2. The facility is available for the present employee (with family) and retired (Self & Spouse Only) employees of the Institute (Institute Main Account, Quasi Permanent Employees of R&D Office and Employees of Council of Wardens etc.).

- 3. The present employee and his/her family will get a maximum coverage of ₹ 4.00 lakh (₹ 2.00 lakh base + ₹ 2.00 lakh from Institute buffer subject to availability of funds in the buffer) under this policy. If the expenditure is more than the ceiling limit of ₹ 4.00 lakh per family in the financial year 2018 2019, then the amount exceeding the ceiling limit, will be processed for determining the maximum admissible amount based on the existing Institute rules of reimbursement of the claims.
- 4. The definition of "family" will be applicable as per the 'Medical Attendance Rules'.
- 5. The employees joining the Institute will have to submit details of their dependants to the office of DOFA, office of DORD, Administration Section and COW as the case may be for coverage of the dependants.
- 6. The employees retiring during the financial year will have to submit 'consent form' to the respective pension cell i.e. in the office of DORD, office of Council of Warden and Accounts Section (Pension Cell).
- 7. Registrar Office will serve as a nodal office for this scheme. In this regard, the offices mentioned in point no. 5 & 6, will have to submit compiled monthly list with the following details:
 - a. Newly joined faculty members and employees with their dependants.
 - b. Any addition / deletion in the name of present faculty members and employees with their dependants due to various reasons.
 - c. Any addition / deletion in the name of retired employees and his or her spouse due to various reasons. It should include detailed breakup of all retirees covered under GPF/CPF/NPS Scheme.
- 8. The retired employee and his/her spouse only (not family) will be entitled for a maximum coverage of ₹ 4.00 lakh (₹ 2.00 lakh base + ₹ 2.00 lakh from Institute buffer subject to availability of funds in the buffer) under this policy. The retired employees and his/her spouse will get similar cover under reimbursement mode from the Institute.
- 9. No premium has to be borne by present employees. However, the contributions of retired employees covered under GPF, CPF and NPS are placed at <u>Annexure 'A'</u>. Employees retiring during the year and willing to avail Insurance are deemed to have submitted their willingness before 12.02.2018.
- 10. The beneficiaries are entitled to facilities of private, semi-private and general ward depending on their entitlement, i.e. basic pay/pension as per the directives issued from Ministry of Health & Family Welfare, Government of India from time to time. The same is referred in Annexure 'B'.
- 11. The present and the retired employees residing in Kanpur will have to seek referral from Health Centre, IIT Kanpur for all planned hospitalization cases. However, in case of any emergency, the patient can be taken directly to the hospital and post referral must be taken from the Health Centre, IIT Kanpur within 24 hours of admission to the hospital.
- 12. The present and the retired employees residing outside Kanpur may avail facility directly from the hospital where they are residing after seeking advice / referral from their treating doctor & intimate the same to Health Centre, IIT Kanpur attaching the advice / referral of treating doctor within 3 days of hospitalization but before discharge.
- 13. For all the cases mentioned above in Point No. 10 & 11 is mandatory and Medical Officers attached with Health Centre, IIT Kanpur may be approached for seeking referrals. This will streamline the process and facilitate the beneficiaries in settling their claims.

- 14. The other features of this scheme are as follows:
 - a. Pre-existing disease/conditions without any waiting time are covered.
 - b. Coverage for new employees and their dependents from day one.
 - c. Coverage of new born will be provided from day one.
 - d. The reimbursement pre and post-hospitalization expenses will be for a maximum of 30 and 60 days respectively.
 - e. Cashless facility up to the sum assured amount will be available in all the empanelled hospitals.
 - f. The list of Pan-India empanelled hospitals can be downloaded from the website www.iitk.ac.in However, the list of cashless empanelled hospitals in Kanpur is placed at Annexure 'C'.
 - g. Coverage of ailments/surgeries etc. requiring one day or more of hospitalization are covered from day one (1). The list of exclusions are placed at <u>Annexure 'D'</u>.
 - h. Ailments covered under day-care procedure(s) are placed at Annexure 'E'.
- 15. In case of treatment in a hospital which is not empanelled 'OR' in case of any emergency where networked hospitals are not available 'OR' for all government hospitals, the claim will be reimbursed as per entitlement on submission of all documents. All reimbursement claims will be routed through Health Centre, IIT Kanpur for verification of referral. Health Centre, IIT Kanpur will send the bills to the respective Accounts Section of employees concerned to check the admissibility of claims for onward submission to the Insurance Company. On receipt approved of the amount of against the claim from the insurance company, the said amount will be transferred to the account of the claimant.
- 16. For availing cashless facility in networked hospitals where the hospitalization is planned the Insured has to make sure that he carries the Institute Identity Card along with PAN/AAdhar Card etc. to the hospital. The same will be deposited with the hospital during the period of his/her treatment. The employee, serving / retired will be identified with his PF.No. / Key No. as the case may be. No separate cards will be issued for this purpose by the Insurance Company.
- 17. Any query in regard to this scheme document, may be addressed to the Registrar, IIT Kanpur. Individual request / suggestion for changing any of the terms & conditions will not be entertained.
- 18. The Institute reserve the right to make modifications / changes in the policy as may be decided by the Board from time to time. Any changes in the policy terms & conditions will be put upon the website. No separate communication will be issued.
- 19. For further details / forms etc. please visit IIT K website.

K.K. Tiwari) Registrar

Copy to:

- 1. Director
- 2. Deputy Director
- 3. All Deans
- 4. All Head of Departments / IDPs / Centres / Sections / Unit-in-Charges
- 5. Finance Officer
- 6. Concerned Offices / Sections
- 7. Website through Webmaster
- 8. Hindi Cell for translation in Hindi
- 9. Circulation 'nonstudents@list.ac.in' (text only)

1	All the pensioners who had submitted their option for Medical Insurance Scheme before the due date i.e. 12.02.2018	₹ 15,000/-
2	All the pensioners who had submitted their option for Medical Insurance Scheme after the due date i.e. 12.02.2018. (Negotiated rate by the Institute). Conditions of Institute policy shall apply.	
	For the age band 61 year to 65 year For the age band 65 and above	₹ 23,342/- ₹ 31,478/-

Expenses related to treatment subject to category of room are appended below:

Sl. No.	Pay (in the Pay Band) / Pension / Family Pension (As per VIth CPC)	Category of Room
1.	Upto ₹ 13,950	General Ward
2.	₹ 13,960 to 19,530	Semi Private Ward
3.	₹ 19,540 and above	Private Ward

List of Cashless Hospitals in Kanpur

Sl. No.	Name of Hospital	Address	Contact No.
1	Apollo Spectra Hospital	14/138 Chunniganj, The Mall	0512 - 3922780
2	Chandini Hospital	9/60 Arya Nagar	0512 - 2551885
3	Kanpur Medical Centre	Plot No 120/5002 (24), Lajpat Nagar,	0512 - 2295152
4	Kulwanti Hospitals & Research Centre	117/N/8m Saket Puri, Kakdeo	0512 - 6711351
5	Madhuraj Nursing Home	113/121 A, Swaroop Nagar, Opp. Shivaji Gate Moti Jheel	0512 - 3042075
6	Regency Hospital	A-2 Sarvodaya Nagar, Near RTO Office	0512 - 3081111
7	SPM Hospital Research & Trauma Centre	C 46-50 Kalyanpur	0512 - 2570553

List of Exclusions

1. Obesity treatment and its complications, mainly Bariatric Surgery resulting due to metabolic syndrome and diabetes – if the claim documents specify BMI is below normal (25 or less) and there is documented history of uncontrolled DM with medications, only then it is payable. Else it is defined as treatment of obesity or its related complications. Only doctor's certification that surgery is required is not sufficient. Obesity treatment (Bariatric surgery) is not the target treatment for diabetes / metabolic syndrome.

Capping: 50% of SI

- 2. Treatment related to all psychiatric and psychosomatic disorders 30 K capping and only IPD.
- 3. Hyperbaric Oxygen Therapy Hyperbaric Oxygen Therapy may be payable during a hospitalization for:

Air or gas embolism
Carbon monoxide poisoning
Clostridal myositis and myonecrosis (gas gangrene)
Crush injury, compartment syndrome, and other acute traumatic ischemias
Cyanide poisoning

4. Maternity benefit capped at ₹ 1.00 Lakh only.

13. WHAT ARE THE DAY CARE TREATMENTS COVERED UNDER THIS POLICY?

Following are the day-care treatments covered under this policy (treatments done within 24 hours).

1	Adenoidectomy	
2	Appendectomy	

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3	Anti-Rables Vaccination	
	Coronary angiography	P.
	Coronary angiopiasty	
5	Dilatation & Curettage	į
7	ERCP (Endoscopic Retrograde Cholangiocaricreatography)	
8	ESWL (Extracorporeal Shock Wave Lithotripsy)	4
9	Excision of Cyst/granuloma/lump	i j
10	FOLLOWING EYE SURGERIES:	}
Α	Cataract Surgery (Extra Capsular Cataract Excision or Phacoemulsification + Intra Ocular Lens	
В	Corrective surgery for blepharoptosis when not congenital/cosmetic	
С	Corrective Surgery for entropion / ectropion	
D	Dacryocystorbinostomy [DCR]	\$
E	Excision involving one-fourth or more of lid margin, full-thickness	1 10
F	Excision of lacrimal sacand passage	1
G	Excision of major lesion of eyelid, full-hickness	= =
Ha	Manipulation of lacrimal passage	<u> </u>
1 ,	Operations for pterygions	Ì
13	Operations of canthus and epicanthus when Jone for adhesions due to chronic infections	
K	Removal of a deeply embedded foreign body from the conjunctiva with incision	
L	Removal of a deeply embedded foreign body from the cornea with incision	, i
M	Removal of a foreign body from the lens of the eye-	
N	Removal of a foreign body from the posterior chamber of the eye	197
. O	Repair of canaliculus and punctum	•
Р	Repair of corneal laceration or wound with conjunctival flap	
Q	Repair of post-operative wound dehiscence of cornea	j.
R	Penetrating of Non-Penetrating Surgery for treatment of Glaucoma	
11		
	Turbinectomy/turbinoplasty.	1 13
13	Excision of pilonidal sinus	Dirth.
14		1000
15	Collisación of dieses	
. 16	Medically necessary Circumcision	1
17	サーニー こうしん 最高 ディスト しんきつしょう こうしょう カメコー・カメコー だんかん	1
18	Nephrotomy	105 July 1
19	Oopnerectority	
20		
2.1	PCNL(percutaneous nephrolithotomy)	
27	Reduction of dislocation under General Anaesthesia	
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29	Tympanoplasty & revision tympanoplasty
30	Arthroscopic Knee Aspiration if Proved Therapeutic
31	Perianal abscess Incision & Drainage
32	DJ stent insertion
33	FESS (Functional Endoscopic Sinus Surgery)
34	Fissurectomy / Fistulectomy
35	Fracture/dislocation excluding hairline fracture
36	Haemo dialysis
37	Hydrocelectomy
38	Hysterectomy
39	Inguinal/ventral/ umbilical/femoral hernia repair
40	Laparoscopic Cholecystectomy
41	Lithotripsy
42	Liver aspiration.
43	Mastoidectomy
44	Parenteral chemotherapy
45	Haemorrhoidectomy
46	Polypectomy
47	FOLLOWING PROSTATE SURGERIES
A	TUMT(Transurethral Microwave Thermotherapy)
G	TUNA(Transurethral Needle Ablation)
С	Laser Prostatectomy
D	TURP(transurethral Resection of Prostate)
E	Transurethral Electro-Vaporization of the Prostate(TUEVAP)
48	Radiotherapy
49	Sclerotherapy
50	Sclerotherapy Septoplasty
51	Surgery for Sinusitis
52	Varicose Vein Ligation
53	Tonsillectomy
54	Surgical treatment of a varicocele and a hydrocele of the spermatic cord
55	Retinal Surgeries
56	Ossiculoplasty
57	Ascitic/pleural therapeutic tapping
58	therapeutic Arthroscopy
. 59	Mastectomy
60	Surgery for Carpal Tunnel Syndrome
61	Cystoscopic removal of urinary stones / DJ stents
62	AV Malformations (Non cosmetic only)
63	Orchidectomy
64	Cystoscopic fulguration of tumour
65	Amputation of penis
66	Creation of Lumbar Subarachnoid Shunt
67	Radical Prostatectomy

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68	Lasik surgery (non-cosmetic)
69	Orchidopexy (non-congenital)
70	Nephrectomy
71	Palatal surgery
72	Stapedectomy & revision of stapedectomy
73	Myringotomy
74	Or any other surgeries / procedures agreed by the TPA and the Company which require less than 24 hours Hospitalisation and for which prior approval from TPA is mandatory.