

## Procedure for settling Hospital Claims through IFFCO TOKIO

**Purpose:** PRMS policy is to set up a benefit for catering to the medical requirements of the eligible employees who are retired on or after 01.01.2007 and their dependent spouse.

The PRMS will be operated through insurance. Currently, the Scheme would be operated by M/s. IFFCO TOKIO Insurance Company. The policy will commence w.e.f. 2.10.2020 initially for a period of one year, unless communicated otherwise; the policy will be extended with M/s IFFCO Tokio, for next two policy years.

### **Procedure:-**

- a) The hospitalization facility will be available for the employee and the spouse , who are retired on or after 01.01.2007 after retirement irrespective of the location from where they have retired.
- b) The limits for reimbursement of medical expenses are the combined limits for the employees and the dependent spouse.
- c) Hospitalization is allowed in empanelled as well as non empanelled hospitals, the list of empanelled hospital is available on IFFCO TOKIO website.
- d) The concerned ex-employee/spouse will have to intimate directly to IFFCO TOKIO with CC to SCI for admission to a hospital. The procedure to be followed for the PRMS hospitalization (Empanelled / Non-empanelled hospital) is given below:
- e) **PPN Rates: Preferred Provider network (PPN)** means a network of hospitals which have agreed to a cashless packaged pricing for certain procedures. Reimbursement of expenses incurred in PPN Hospitals for the procedures shall be subject to the rates applicable to PPN package pricing. For capped ailments lower of PPN rates or capping amount will be applicable and for rest of the ailments PPN rates shall be applicable. The list of hospitals can be viewed from the following link.

[https://www.iffcotokio.co.in/content/dam/iffcotokio/iffco-pdf/sites/default/files/List%20of%20Network%20Hospitals\\_1.pdf](https://www.iffcotokio.co.in/content/dam/iffcotokio/iffco-pdf/sites/default/files/List%20of%20Network%20Hospitals_1.pdf)

#### **1) Network (Empanelled) hospital:**

Submission of an intimation letter alongwith doctor's letter to IFFCO TOKIO by filling forms which are available on the link of claim form is :-

[https://www.iffcotokio.co.in/content/dam/iffcotokio/iffco-pdf/sites/default/files/pdf/Health%20Claim%20Form\\_0.pdf](https://www.iffcotokio.co.in/content/dam/iffcotokio/iffco-pdf/sites/default/files/pdf/Health%20Claim%20Form_0.pdf)

**The communication details for cashless are:-**

[cashless@iffcotokio.co.in](mailto:cashless@iffcotokio.co.in)

mobile no.0124-4722020/22/234

[khanarashad.os@ext.iffcotokio.co.in](mailto:khanarashad.os@ext.iffcotokio.co.in)

mobile no 9654005945

[pradeep1.sharma@iffcotokio.co.in](mailto:pradeep1.sharma@iffcotokio.co.in)

mobile no.9599054906

**2) Non-Network (Non-empanelled) hospital :-**

·The ex-employee gets directly admitted in the hospital

·Email/phone as intimation is required from the employee or relative of the ex-employee to IFFCO TOKIO and CC to SCI.

·Doctor's letter with respect to an hospitalization is to be sent to IFFCO TOKIO alongwith the intimation.

·After the patient is discharged all bills/receipt in original alongwith discharge summary , pre-post hospitalization to be submitted to the following IFFCO TOKIO office address :-

IFFCO Tower,  
1181 Waterfield Road,  
3<sup>rd</sup> floor, Bandra (West),  
Mumbai 400 050.

**The Communication details for reimbursement of claims:**

Claim reimbursement : [healthclaims@iffcotokio.co.in](mailto:healthclaims@iffcotokio.co.in).

Claim status : [megha.gawde@ext.iffotokio.co.in](mailto:megha.gawde@ext.iffotokio.co.in)

Claims processing : [vikram.bagal@iffotokio.co.in](mailto:vikram.bagal@iffotokio.co.in) - Mob. No. 9029311967

[jharnab@iffcotokio.co.in](mailto:jharnab@iffcotokio.co.in). – Mob. No. 9818668133

[sbhandari\\_itgi@iffcotokio.co.in](mailto:sbhandari_itgi@iffcotokio.co.in) - Mob. No. 7738084258

**Corporate Buffer:** Additional corporate buffer of Rs. 50,00,000( Rupees Fifty lakhs only) will be part of the policy. Parameters for utilisation will be as follows:

- a. Restricted to Rs. 2,00,000 per family per policy year.
- b. Only for Critical Illness cases at SCI's discretion.
  1. Cancer
  2. CABG/Open Heart surgery
  3. Heart Attack
  4. Open Heart Replacement or Repair of Heart Valves
  5. Coma
  6. Kidney Failure Requiring Regular treatment
  7. Stroke Resulting in Permanent paralysis/disability.
  8. Major Organ/Bone Marrow Transplantation

9. Permanent Paralysis of Limbs
10. Motor Neuron Diseases with Permanent Symptoms
11. Multiple Sclerosis with persisting symptoms
12. Accidental Cases.

**Standard Deductible:**

There will be Standard Deductible of Rs. 5,000/- for each claim upto Rs. 1,00,000/- and Rs. 10,000/- for each claim above Rs. 1,00,000/-. In case of continuous period of illness including relapse within 45 days from the date of last consultation with the Hospital / nursing home where treatment may have been taken. During this period the standard deductible shall not be applicable.

**Capping on Ailments** : - The following capping on procedures/ packages as given below, shall be applicable:

Ailment Capping	Applicable (INR)
Cataract	Rs. 50,000 per eye
Prostate (other than treatment of Prostate Cancer)	Rs.95,000/-per hospitalization
Knee Replacement	Unilateral Rs. 2,25,000
	Bilateral Rs. 4,50,000
Kidney Stone removal	Rs. 75,000/-per hospitalization