

ENGINEERING PROJECTS (INDIA) LTD.

(A Government of India Enterprise)

Corporate Office - HR Division

DLI/HRM/PRP/001

08<sup>th</sup> June 2017

"EPIL Superannuated Employees Medical Benefits Scheme"

**1 Title of the Scheme**

1.1 The Scheme is intended to provide medical benefits to the superannuated employees of EPIL and their spouses and shall be known as "EPIL Group Health Insurance Scheme for its Superannuated Employees". The scheme shall come in to force from the date it is made effective by the company and all other schemes of the company providing medical benefits to the retired employees and their spouses shall stand withdrawn from the date of effectiveness of this scheme.

**2 Scope of the Scheme**

2.1 This scheme shall be applicable to all the eligible superannuated employees of the company and their families. Family in this context shall mean and include the eligible superannuated employee and his /her spouse, both or the survivor whereas in case of unmarried employee the family shall mean himself or herself.

2.2 In the event the superannuated employee has two or more spouses legally permitted by personal law or otherwise, the senior most surviving spouse will only be covered under the scheme; seniority being determined on the basis of date of marriage.

2.3 The Scheme would cover all regular employees and their spouse only who have separated or will separate from the services of EPI on account of retirement on attaining the age of superannuation after rendering minimum 15 years continuous service in the Company.

2.4 Board-level appointees on attaining the age of superannuation or on completion of full tenure of appointment are also covered under this Scheme provided their past services benefits in other CPSEs are transferred to EPI and the total tenure put in together is minimum 15 years.

2.5 The spouse of the deceased employee who dies before the date of superannuation shall also be covered under this scheme subject to payment of contribution as prescribed from time to time, provided the deceased employee was eligible for coverage after reckoning his actual date of superannuation for the purpose of fulfilment of minimum years in continuous service clause.

2.6 In case of death of retired/superannuated employee who has been availing the medical benefits under this scheme, his/her spouse will continue to avail the benefits under this Scheme till his/her death/re-marriage on payment of prescribed contribution from time to time.

2.7 The services rendered by any employee in his/her previous CPSE will be reckoned for determining minimum 15 years continuous services provided Leave/Gratuity and/or other past services benefits have been transferred to EPI by the concerned CPSE.

2.8 This Scheme would not be applicable to the following cases:

- (i) Employees who have resigned/absconded or have been dismissed/ terminated from the services of EPI and all such future cases.

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- (ii) Retired employees covered under any Medical Benefits Scheme by the employer of his/her spouse/children.

### **3 Eligibility of Membership**

- 3.1 All the employees who superannuated from the Company prior 31-12-2006 but are presently not covered by any scheme of the Company providing medical benefits to such employees.
- 3.2 All superannuated employees who are covered under the Company's Medical Treatment Rules 1997 on the date of effectiveness of the Scheme.
- 3.3 All employees superannuating after the date of effectiveness of the scheme provided they have put in minimum continuous service of 15 years on the date of their superannuation either in the company or in the company and any other CPSE/CPSES put together.
- 3.4 Widows/Widowers of the employees who died after superannuation provided they registered themselves for the scheme by making the application for registration along with the annual membership fee.
- 3.5 Widow/Widower of the employee who die during service and who has registered himself/herself for the scheme by making an application and paying the annual membership fee.

### **4 Exclusion from Scheme**

4.1 The Scheme shall not apply to the following:-

- i) Adhoc Employees
- ii) Deputationists/Lien Holders
- iii) Casual employees including daily rated
- iv) Contract Employees
- v) Trainees
- vi) Apprentices recruited under the Apprentices Act
- vii) Employees who have resigned/retired/dismissed/terminated absconded or left the Company due to whatsoever reasons

### **5 Temporary Exclusion**

- 5.1 The following categories of superannuated employees may be enrolled as members but their membership shall temporarily remain suspended as long as
- a) The superannuated Employee is re-employed on full time basis elsewhere.
  - b) Availing medical facilities consequence to the employment of his/her spouse.
  - c) Employee or his spouse or both are receiving medical facilities from any organization as dependent of their wards.
  - d) The superannuated employee who has not cleared his/her outstanding dues of the Company at the time of his retirement or subsequently.

### **6 Registration of superannuated employees for the Scheme**

- 6.1 All eligible employees who intends to avail of medical facilities under this scheme shall apply in the prescribed form for registration through proper channel at least two month prior to the date of their superannuation .The applications duly completed in all respect along with two separate photographs of self and spouse (excluding the one to be pasted on the Application form) along with two specimen signatures shall be sent to the regional/corporate HR division of the Company along with annual membership fee of Rs.1000/- (Rupees One Thousand Only).

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- 6.2 The regional/corporate HR division as the case may be shall verify the application and send it to the trust provided that application of employee who has not cleared all his/her outstanding dues of the company at the time of his superannuation shall not be recommended for membership as long as the arrears of the Company are not cleared.
- 6.3 In case the superannuated employee is considered eligible to become member of the Scheme, the trust shall issue him a membership card in the prescribed form containing photographs of the retired employee as also his/her spouse for availing of medical benefits. The membership card issued to the superannuated employee after he registers himself in the scheme will become invalid from the date he/she ceases to fulfill the eligibility criteria.
- 6.4 The Insurance Company or its TPA shall provide to the retired employee the photo identity card specifying there in the name and age of the insured, policy no and period of insurance together with handbook explaining the procedure for lodging claims for treatment as in and out door patient. The handbook shall also contain list of Nursing Homes/Hospitals recognized by the Insurance Company for indoor as well as outdoor treatment.

## **7 Operation of the Scheme**

- 7.1 The scheme will be operated as "EPIL Group Health Insurance Scheme for its Superannuated Employees" through a group mediclaim policy taken by the Trust from an IRDA approved insurer selected by the company with an annual ceiling on the amount of claim admissible for the superannuated employee and his spouse both for the (IPD) (In Patient Department) and IPD (In Patient Department).
- 7.2 The initial annual ceiling for the superannuated employee and his/her spouse shall be **Rs. 5 Lacs** (Rupees Five Lacs Only) for the IPD and **Rs. 20,000/-** (Rupees Twenty Thousand Only) for OPD and will be applicable on floater basis. The retired employee joining the scheme in the first year shall be entitled to an amount proportionate to the number of months for which the benefits will be availed after registration upto 31st March of that financial year.
- 7.3 The ceilings indicated in clause 7.2 may be revised upward/downward at the discretion of the Company depending upon the profitability and affordability of the Company.

## **8 Financing of the Scheme**

- 8.1 The medical facilities to the superannuated employees and their spouses shall be provided through the mediclaim insurance policy bought by the trust from IRDA approved insurer selected by the company with an initial annual ceiling mentioned in clause 7.2 of the scheme. The expenses beyond the prescribed ceilings if any shall be borne by the member.
- 8.2 The company's contribution to the scheme shall not be more than 5% of PA and DA for the employees superannuated on or after 01-01-2007 and 1.5% of the profit before tax of the previous year for the employees superannuated on or before 31-12-2006. The first year's contribution shall be based on the ceilings on the policy indicated in clause 7.2 and thereafter on the basis of ceilings as may be fixed by the company depending on its profitability and affordability.

## **9 Contributions Non Refundable**

- 9.1 The contribution once made by the company to the trust shall not be refunded provided that if the company at any stage determines that the contributions already made by it to the trust are in excess of the amounts required for operation of the scheme, it may alter the amount of subsequent contribution payable to the trust.

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## 10 Coverage of Insurance

- 10.1 The insurance cover is valid for treatment only in INDIA.
- 10.2 The insurance cover shall remain in force without any exit age either for the superannuated employee or his/her spouse provided that he/she continues to be the member of the Scheme.
- 10.3 The superannuated employees and their spouses covered under the scheme can get them treated as in patient in the registered network Nursing homes/Hospitals of the insurance Company at their place of residence as per the terms of the policy. The facilities in such hospitals are generally cash less.
- 10.4 The expenses both for the inpatient and outpatient are subject to annual ceiling and in case the expenses are incurred beyond the ceiling either by the employee or his /her spouse, the excess over the ceiling shall be borne by the employee.
- 10.5 If the superannuated employee is admitted to the scheme during the pendency of the year the expenses on his medical treatment under the scheme for the first year will be proportionate to the number of months for which the benefits will be availed after registration up to 31st March of that financial year.

## 11 Coverage of IPD expenses under Policy

- 11.1 The details about the coverage would be indicated in the handbook issued by the insurance company or its TPA as the case may be. However in case of hospitalization (inpatient treatment) for any injury, illness or disease, the policy will generally cover the following:-
- a) Room charges, ICU charges, nursing expenses, anesthesia charges, blood, oxygen, operation theatre charges, surgical appliances, dialysis, chemotherapy, radiation therapy, angioplasty, CABG, cost of pace maker, cost of artificial limbs and similar other expenses.
  - b) Dental procedure that are not cosmetic in nature
  - c) Professional charges of Doctors, Surgeon, Anesthetists, Medical Practitioners, Consultants, Specialists etc.
  - d) Ambulance charges excluding Air ambulance
  - e) Medical and diagnostic tests and other related expenses
  - f) Medicines and drug expenses
  - g) Pre hospitalization expenses up to 30 days and post hospitalization expenses up to 60 days after discharge from hospital.
  - h) Cost of domiciliary hospitalization medical treatment for a period exceeding 3 days
  - i) Hospitalization expenses consequent upon an accident
  - j) Expenses on hospitalization for a minimum period of 24 hours are admissible. The time limit will not apply for specific treatment like Dialysis, Chemotherapy, Eye- Surgery, Lithotripsy (kidney Stone Removal), tonsillectomy done in the hospital or nursing home.

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## 12 Exclusion under the Policy

12.1 The insurer shall not be liable to reimburse any expenses whatsoever incurred by the superannuated employee either for himself or for his/her spouse in respect of exclusion as per guidelines of IRDA as amended from time to time and indicated in the handbook issued to the member by the insurer or its TPA. Some of the exclusions are:-

- i) Injury or disease directly or indirectly caused by or arising from or attributable to War or War like situations.
- ii) Circumcision, Congenital external disease or defects/ anomalies, HIV and AIDS.
- iii) Venereal Diseases, Psychiatric Treatment, Intentional self-injury, intemperance or the use of intoxicant drugs or liquor.
- iv) Registration Fees, admission fees, cafeteria/ telephone charges. Vaccination of baby, Hospital surcharges, Membership/ subscription, Private nurses etc.
- v) Routine eye examination and cost of glasses, contact lenses, hearing aids etc.
- vi) Dental treatment or Surgery of any kind unless requiring hospitalization arising out of an accident.
- vii) External or durable medical/non-medical equipment used for any kind of diagnosis.
- viii) Treatment of infertility, menopause, voluntary termination of pregnancy.
- ix) Naturopathy, ARMD, Genetic Disorders, Thalassemia, Cosmetic & Plastic surgery except for correction of injury.
- x) Health foods, Energy drinks, Supplements, Toiletries, Glycerin, Antiseptic cream, Glucometer/ Thermometer etc.
- xi) Vitamins and tonic unless used for treatment of injury or disease.

## 13 Outpatient charges under the policy

13.1 Claims for reimbursement of OPD expenses are to be submitted separately for the superannuated employee and his/her spouse once in 2 months or after incurring a total expenditure of ₹3000 whichever is earlier. An OPD claim is to be submitted within 6 months of incurring the expenses.

## 14 Mode of Reimbursement

14.1 The claims for reimbursement of admissible expenses incurred by the member on medical attendance and treatment, purchase of medicines from open market and payment for diagnostic tests including fees paid to the AMA and Specialists will be submitted direct to the insurer or his TPA as the case may be along with the requisite documents as prescribed in the hand book. The reimbursement of these claims shall be made direct to the member as per the terms of the policy.

14.2 The payment for the indoor treatment at the linked hospitals of the insurer shall be made by the insurer directly to the hospital. However, if treatment is had at a hospital other than the linked hospital, the payment for the treatment shall be made by the member and then claim for reimbursement submitted to the insurer or his TPA along with the requisite documents prescribed by the insurer. The insurer or the TPA shall make reimbursement direct to the member as per the terms of the policy. The Claim for reimbursement of indoor treatment shall be submitted along with the requisite documents to the insurer within three months after the completion of treatment and discharge from the hospital.

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- 14.3 Claims for reimbursement should invariably be submitted along with prescription from the doctor, bills of hospitals, receipts for consultation and injection fees, cash memos for the purchase of medicines, clinical laboratories for pathological tests and other documents mentioned in the hand book.
- 14.4 The superannuated employee should sign on the back of cash memos, cash receipts and other documents.
- 14.5 All the enclosures should be serialized date wise.

### **15 Management of the Scheme**

- 15.1 The scheme shall be managed by the trust having equal number of representatives from the management and the employees to be nominated by the Chairman. The minimum number of trustees shall be 2.
- 15.2 The trust will receive contributions from the company, make payment to the insurance company as also invest surplus cash in the Funds approved by IRDA on the advice of the fund Manager appointed by the Company.
- 15.3 The fund shall be known as "EPIL-Group Health Insurance Fund for its Superannuated Employees" and will be in consonance with the provisions of Income tax Act 1961.

### **16 General Provisions**

- 16.1 The Management has the right to withdraw/reduce the facilities available under this scheme without any notice from those beneficiary/beneficiaries where it is satisfied that it is being misused. The decision of the Chairman shall be final in this regard and the same will not be contested.
- 16.2 The scheme is non statutory in nature and Company's contribution to the scheme are not guaranteed. The Company thus reserves the right to modify, amend, alter or even completely withdraw the scheme at its discretion.
- 16.3 Management reserves the right to amend, alter or modify these rules from time to time.
- 16.4 Superannuated employees held guilty for submission of wrong information or false or dubious claims in respect of themselves and their spouses shall be liable to be debarred from availing this facility for such period or periods as Chairman may deem fit. The decision of the Chairman in this regard shall be final and binding.
- 16.5 In the event of any dispute as regards interpretation and applicability of these rules to the superannuated employees of the Company as also to their families, the decision of the Chairman shall be final and binding.
- 16.6 In the event of unfortunate death of either of the members, the surviving member should inform the concerned office at the earliest for updating of records.
- 16.7 With the introduction of this Scheme, medical/hospitalization facilities available under the existing post-retirement medical benefits will be discontinued in respect of retired employees.

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