



Why take AMC Health and Accident Policy?

The AMC H&A Scheme is not just a policy
It is a social welfare scheme- Made by the members for the members

Personal touch and easy point of contact with the committee members
&
Claims are scrutinized and passed by the H&A committee
Flexible condoning of delay in submitting claims

Age of entry up to 79 years completed as compared to 60 years in most policies
No investigations needed

Extremely Age friendly policy premium freezes at 60 (10 yrs. in scheme) and reduces at 70
The earlier you enter the greater are the benefits in premium rate
No loading

Policy can be taken for spouse, children parents, parents of spouse, son & daughter-in-law & grand children-They
can continue even after the death of primary member

Room rent 1.5% of CSI & 2.5% of CSI for ICU (For CSI Rs. 3 Lacs and above)

Sophisticated investigations on OPD basis are reimbursed

Most Day Care procedures are reimbursed

Co-payment- After the age of 60 Yrs. Our Co-payment is less compared to other policies in the market

We are looking at phasing out Co-payment in a graded manner

No claim for 10 years-No Co-payment

No claim for 5 year -5% Co-payment

(Applicable for CSI at that time and for 1st claim only)

No claim for 10 years -No capping

No claim for 5 years-Capping increased to 85% of the CSI

Unique Life cover up to 60 years without additional premium

Generous claim settlement done for all Covid admission claims

Time to time benefits passed on to the members

(Our H& A Scheme is not here for profit but more a Social responsibility and unique benefits have been passed on to the members over the years. Sp TOPUP taken on 1st June 2020 (Covid pandemic) extended till 30th September 2021

Complimentary for H& A members. Our financial wisdom and planning keeps us ready for any Contingency)

Highly supportive agents available to you throughout the year and to support you for filing your claims

**Dr. Suhas Kate
Chairman H& A**

**Dr. Sushmita Bhatnagar
President**

**Dr. Jayesh Shah
Dr. Smita Sharma
Convenors**

**Dr. Pradeep Baliga
Hon. Secretary**



HEALTH & ACCIDENT INSURANCE SCHEME OF AMC OCTOBER 2020 - SEPTEMBER 2021

**ASSOCIATION OF MEDICAL CONSULTANTS (MUMBAI),
4, GANPATI NIWAS,
OLD POLICE LINE,
OPP. ANDHERI STATION - (EAST)
MUMBAI - 400069**

H & A Cell – Neft Details
Name: Association of Medical Consultants Mumbai

Bank Name	Central Bank Of India
Branch	Andheri
IFSC Code	CBIN0280595
Account No	3 1 5 4 8 0 4 1 8 6
Account Type	Saving

INTRODUCTION

Few Decades back the expression "Pre Existing Diseases" (PED) sent shivers down the spine of both patients as well as doctors. Come Dr. Mahindra Seth, a pioneer and senior founder member, Past President and Managing Trustee of the AMC along with Dr. Prabhakar Rao, Past President, Trustee of AMC who with their uncanny power of persuasion and persistence showed the insurer the reasons and ways to accommodate a claim for PED, which now has rightly become a beacon of light to steer the Health Insurance industry to what it is today.

*** The Far Reaching Health Policy of The Future ***

Even the most ardent die hard advocates of your AMC Health & Accident Policy (H&A Policy) are rubbing their eyes with absolute disbelief. The long cherished dream of our pioneer founders of the scheme Dr. Mahendra Sheth & Dr. Prabhakar Rao to make our scheme a 'SOCIAL RESPONSIBILITY' is no longer a pipe dream but has become an astonishing reality.

This vision, wisdom and social responsibility continues till today under the able guidance of Dr. Suresh Rao Past Chairman and now Advisor to H&A Cell and Dr. Suhas Kate the current Chairman of the Cell. In this unexpected pandemic we have come up with a unique TOP UP policy which is the need of the hour. The Brochure of the TOP UP is attached for your reference. All existing members have been given a complimentary top up and Non members of H& A have been joining our policy at a very reasonable premium

This year has been unexpected for all of us. Keeping in mind the financial difficulties that we are all facing we have decided to reduce and remove Co payment in a graded fashion. Also the limit of Capping is being increased. We appeal to our young members to see the term benefits of being in AMC Health and Accident policy, join early so that you can avail more benefits as a senior citizen. In 2019-20 we had given a 15% concession in premium to all members upto 55 years of age. Our benefits to the senior members continue. Regular benefits like No claim discounts continue. We urge our members to go through our prospectus and convince yourself that:-

The AMC h. & a. Scheme is THE ONLY POLICY TAILORED TO SUIT YOUR NEEDS

ENUMERATED BELOW ARE THE UNIQUE BENEFITS OF THE AMC POLICY SPECIALLY DESIGNED BY THE DOCTORS FOR THE DOCTORS AND THEIR FAMILY

	General Mediclaim	H & A
1	<i>Medical checkups before accepting a health cover could easily cost over thousands of rupees, and gets costlier as you age.</i>	<i>We do not ask for any checkup even if you are seventy nine years at joining.</i>
2	<i>Try getting a policy when you are above 60-65 years of age.... If you do,...consider yourself VERY LUCKY.</i>	<i>We admit fresh entrants till 79 years of age and after that the insurance cover if unbroken, will be provided for life.</i>
3	<i>Costly investigation like a MRI, CT Angiography, will have to be paid from your pocket, if hospital stay is not taken, or even refused reimbursement should the investigation does not show any evidence of disease.</i>	<i>We will honor such costly investigations without your need to be hospitalized.</i>
4	<i>Day care procedures, mostly rebutted, rarely reimbursed.</i>	<i>We definitely look after this too.</i>
5	<i>Congenital disease, a favorite taboo from the pre-existing disease complex which rarely</i>	<i>Procedures necessary to correct any functional disability is readily covered by us.</i>

	would even merit their concern.	
6	Your bed charges during a hospital stay is titrated against your CSI for reimbursement i.e. if your CSI is 3 lacs, you can avail of a room up to only 1% i.e. Rs. 3000/day.	We cover your bed charges reimbursement up to 1.5% in ward and 2.5% for any needed ICU treatments for all CSI 3 lacs and over.
7	Portability from one insurance to another is a veritable mine field of obstacles.	We have removed of the obstacles-The waiting period being the most important. If you are Insured with another and rightly desire to improve your policy terms you can do portability to AMC policy

YOU AND YOUR FAMILY CAN JOIN AND ENJOY THE PRIVILEGES OF THE H & A SCHEME PROVIDED A FEW REQUIREMENTS SPECIFIED BELOW ARE MET

- A. *If the applicant is below 55 years (Then their only restriction/exclusion is for pre-existing diseases for 2 year. However if you are changing over an existing policy to our H & A policy, these restrictions of 2 year will be removed if you have not claimed in previous year in existing policy.*
- B. *If age more than 60 years the applicant desirous of changing over to our H&A policy must provide proof of having held any health insurance policy for at least last 3 continuous years along with details of claim if any. Depending on whether the past outgoing insurance has been claim free or any claim had been made in those years, continuity of benefits of our policy will be determined (The 4 diseases restrictions clause table seen elsewhere in this brochure will then be made applicable according to the number of claim free years of the outgoing health insurance of the applicant.)*
- C. *Member should give an undertaking or certificate from previous insurance company that the existing policy is discontinued. Should the member wish to continue with his old policy and still want to join us... he can join us as a **totally new member***
- D. *The age for fresh entrants will be 79yrs of completed age and after that insurance cover if unbroken will be provided for life. Increase in sum insured will not be allowed after 79 years of age. However when limit is increased general, highest sum insured holding persons will be allowed to increase their sum insured irrespective of age once.*
- E. *Those discontinuing from the H & A scheme after having made a claim during the current year will not be readmitted in the scheme for at least the next five years.*
- F. *H&A committee reserves the rights to refuse acceptance of proposals where some family members/dependents is suffering from serious/terminal/congenital disease. Specific exclusions may also be imposed if accepted.*

MOST IMPORTANT OF ALL

The scrutiny of all claims is by the H & A Committee of AMC, whose decision is final and binding on "The Oriental Insurance Co. Ltd" who are our official insurers.

A person realizes the importance of a policy only when you really need it. Claim settlement in most policies is impersonal. Your agent has no means to influence the decisions or challenge the unfairness of the settlement. That's what makes our AMC policy so special. The decision lies with the AMC H&A committee (within IRDA guidelines) and most of the times our members end up getting far more than they would have got from a regular policy

Special terms in the h & a policy from 1.10.2020 to 30.09.2021

No prophecy to tell you that.....

Sophisticated medical treatment is getting costlier by the hour. Even routine treatment is often beyond the reach of many an individual. Our H & A policy was tailor made to meet the demands of our medical community on an ongoing basis depending of the need of the hour
Indeed no prophecy told us that Corona would impact our lives in this way
Kindly note that Co-payment of 10% in our policy thus far was for 55 years and above. We have modified it and NOW

“Those in scheme for 5 years or more, without a claim in last 5 years, pay only 5% as Co-Pay. Those in scheme for 10 years or more, without a claim in last 10 years, Co-pay will be nil

THIS IS APPLICABLE TO THE CSI AT THAT TIME

**&
THIS IS APPLICABLE FOR FIRST CLAIM ONLY.”**

THE SALIENT FEATURES OF OUR H & A POLICY ARE BEING TABLED BELOW ALONG WITH OUR LATEST PREMIUM TABLE.

The following four conditions mentioned in this table have WAITING PERIOD. KINDLY NOTE THE WAITING PERIOD OF EACH CONDITION INDIVIDUALLY

Investigation and treatment of the following 4 conditions will be payable as per the following schedule:-

SR. NO.	Disease	Year 1	Year 2	Year 3	Year 4	Year 5	6 to 10 Years	Beyond 10 Years
1	JOINT REPLACEMENT	Not Covered	Not Covered	Not Covered	50% of Cap Amount	75% of CSI	75% of CSI	75% of CSI
2	CHRONIC RENAL PROBLEM / TRANSPLANTS	Not Covered	Not Covered	Not Covered	50%	Full	Full	Full
3	MORBID OBESITY	Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	50%	Full
4	ROBOTIC SURGERY	Not Covered	Not Covered	Not Covered	75% of CSI	75% of CSI	75% of CSI	75% of CSI

MEMBERS ARE REQUESTED TO TAKE A SPECIAL NOTE OF THE FOLLOWING CLAUSES AND CONDITIONS FOR CLAIM SETTLEMENT

- A. CAPPING ON CERTAIN TREATMENTS AS PROVIDED ELSEWHERE WILL BE APPLICABLE.**
- B. ALL PRE-EXISTING DISEASES AND AILMENTS AND THEIR INVESTIGATION WILL BE COVERED AFTER THE APPLICABLE WAITING PERIOD (KINDLY NOTE THAT MOST POLICIES DO NOT COVER PREEXISTING DISEASES FOR FULL LIFE SPAN)**
- C. ALL OTHER PRE-EXISTING DISEASES ALONG WITH DISEASE LEADING TO HYSTERECTOMY, CATARACT, MALIGNANCY & CARDIAC AILMENTS ARE NOT COVERED IN INITIAL 2 YEARS OF JOINING THE SCHEME AND 3 YEARS ABOVE AGE OF 55 YEARS.**
- D. ENHANCED SUM INSURED IS NOT AVAILABLE FOR CLAIM IN FIRST TWO YEARS FOR PRE-EXISTING DISEASES AND THREE YEARS ABOVE AGE OF 55 YEARS.**

- E. **DISEASE LEADING TO HYSTERECTOMY AND MALIGNANCY IS FULLY COVERED FROM 3RD YEAR ONWARDS PROVIDED YOU HAVE JOIN THE SCHEME BELOW THE AGE OF 60 YEARS OTHERWISE IT WILL BE ELIGIBLE FROM 4TH YEAR ONWARDS.**
- F. **CASHLESS SERVICES ARE AVAILABLE FOR THE HOSPITALS EMPANNELED WITH PARAMOUNT FOR THE ORIENTAL INSURANCE CO LTD. THE UPDATED LIST IS AVAILABLE ON THE WEBSITE OF PARAMOUNT HEALTHCARE PVT LTD**
- G. **OBSTETRICS & MATERNITY NOT COVERED.**
- H. **NEWER MODALITIES OF TREATMENT WILL BE CONSIDERED AS PER STANDARD MEDICLAIM POLICY OF "ORIENTAL**
- I. **ALL OTHER TERMS CONDITIONS OF STANDARD GROUP MEDICLAIM POLICY APPLY.**
- J. **IF HOSPITAL HAS AN AGREEMENT WITH ORIENTAL OR TPA ABOUT CHARGES; ONLY THOSE CHARGES ARE PAYABLE.**

Hospital stays charges per day:

If your Capital Sum Insured (CSI) is less than Rs 3 lacs, the room charges payable per day will be restricted to 1% of CSI in wards/rooms and 2% of sum insured in ICU.

*However when your CSI is 3 Rs lacs and above, the hospital stay charges will be available upto 1.5 % of the CSI per day in the ward or room and upto 2.5% of CSI per day if admitted in an ICU. **This feature is exclusively for AMC H & A policy.** This bed charge limit includes Nursing charges, Bed charges, RMOs and Intensivist charges*

Obviously if you wish to avail of single room facility in a Tertiary care hospital you would be better off having a minimum of Rs.3lac CSI For e.g. If your capital sum insured is Rs. 1 Lac then you are entitled for hospital stay charges Rs. 1000 per day in ward/room and Rs. 2000/- per day in ICU. How ever if your sum insured is Rs.3 Lacs then you are entitled for hospital stay charges of Rs. 4500/- per day in ward and Rs. 7500/- per day in ICU.

Remember, if you use a room of a class higher than your eligibility for reimbursement, the hospitalization and all other charges will only be reimbursed as per your eligibility in that class. Rates billed in a class higher than your eligibility will be reduced on percentage basis i.e. if the member is eligible for room up to Rs. 1000 but is admitted in a room (+nursing charges) Rs. 1500, he will be entitled to 2/3 of all other expenses (except Material Cost) subject to maximum of 50% deduction.

DOMICILIARY TREATMENT

*Domiciliary Hospitalization and/or Domiciliary treatment are not reimbursable. Nursing charges are only payable when the patient is admitted in a hospital and a fully qualified registered nurse is specially called for by the treating physician to do nursing services, exclusively for the patient. A stamped receipt from the qualified nurse for such payment made to her must be sent separately with the bills for reimbursement. **KINDLY NOTE THAT THIS CLAUSE IS APPLICABLE TO HOME TREATMENT IN CASE OF COVID INFECTION WHICH WILL NOT BE COVERED BY AMC H&A POLICY***

PHYSIOTHERAPY

Physiotherapy taken during hospitalization is fully covered. However domiciliary Physiotherapy given by qualified physiotherapist is covered within the period of 30 days of hospitalization and the maximum payable amount is 5% of sum insured in Dept. of Physiotherapy in a hospital or Physiotherapy Institute.

CONDITIONS THAT HAVE CAPPING

Charges payable toward surgical treatments for cataracts / CABG / Angioplasty / Jt. Replacement are being capped as below:

SUM INSURED	Amount Per Eye	CABG/ Angioplasty	Jt. Replacement Per one joint	Robotic Surgery
Rs.100000	25000	75000	75000	75000
Rs.200000	30000	150000	150000	150000
Rs.300000	35000	225000	225000	225000
Rs.400000	45000	300000	300000	300000
Rs.500000	50000	375000	375000	375000
Rs.600000	55000	450000	450000	450000
Rs.700000	60000	525000	525000	525000
Rs.800000	65000	600000	600000	600000
Rs.900000	70000	675000	675000	675000
Rs.1000000	75000	750000	750000	750000

From 1st October 2020 the following members will be given additional benefit

“Those in the scheme for 5 years or more, with no claims in past 5 years; capping shall be 85%. Those in scheme for 10 years or more, with no claim in last 10 years; there shall be no capping”. The NO CLAIM referred to here is applicable to all claims not restricted to the above 4 conditions

For Cataract surgery: Status quo will maintained as per above chart as AMC is settling claims at a rate significantly more than other contemporary policies

MOST IMPORTANT CONCESSIONS:-

- 1) Bonus rate of 5% reduction will be applicable for those who shift their existing mediclaim policy to AMC provided there is no claim in last 3 years & a copy of last 3 yrs policy is enclosed along with the proposal.
- 2) Up to the age of 60 years 5% bonus will be given in the premium payable for every claim free year for existing members of H & A scheme subject to a maximum of 20% reduction. However if you make a claim then in the next year contract you will not be eligible for any bonus. Again you earn a cumulative 5% bonus for every claim free year automatically. However between 60 and 70 years maximum bonus payable is 10%. I.e. 5% for every claim free year.
- 3) Eligible for one discount either for 60 to 70 years Bonus for No claim or more than 10 years in H & A schemes whichever is more.

Now our H & A Scheme also gives Life Cover for members up to 60 years of Age

In the event of natural death of member up to 60 years of age and he/she being the Health scheme for more than 10 years family will be given an amount equivalent to average of the sum insured in last 10 years. If he or she in the Health scheme between 5 to 10 years than he/ she will be given 50% of amount of average sum insured in last 5 years. Deaths due to accidents and Suicides will not be payable.

HEALTH PREMIUM CHARTS

TABLE 1
BASIC REVISED PREMIUM
FOR NEW ENTRANTS AND ENHANCEMENT OF CSI OF MAIN MEMBER, SPOUSE AND
DEPENDANTS
BELOW 60 YEARS

<i>SUM ASSURED OVERALL</i>	<i>AGE UP TO 35 YEARS</i>	<i>AGE 35 + 1 DAY UPTO 45 YEARS</i>	<i>AGE 45 + 1 DAY UPTO 55 YEARS</i>	<i>AGE 55 + 1 DAY UPTO 60 YEARS</i>
<i>RS.</i>	<i>RS.</i>	<i>RS.</i>	<i>RS.</i>	<i>RS.</i>
1,00,000	1769	2381	3738	5324
2,00,000	3399	4500	7151	10219
3,00,000	4773	6296	10185	14637
4,00,000	5997	7858	12958	18744
5,00,000	7234	9410	15739	22850
6,00,000	8593	11150	18505	26947
7,00,000	9927	12808	21279	31055
8,00,000	11233	14441	23999	35135
9,00,000	12509	16044	26692	39188
10,00,000	13760	17621	29381	43238

TABLE 1-(A)
BASIC REVISED PREMIUM
FOR 10 YEARS IN SCHEME AND ENHANCEMENT OF CSI OF MAIN MEMBER, SPOUSE

<i>SUM ASSURED OVERALL</i>	<i>AGE UP TO 35 YEARS</i>	<i>AGE 35 + 1 DAY UPTO 45 YEARS</i>	<i>AGE 45 + 1 DAY UPTO 55 YEARS</i>	<i>AGE 55 + 1 DAY UPTO 60 YEARS</i>
<i>RS.</i>	<i>RS.</i>	<i>RS.</i>	<i>RS.</i>	<i>RS.</i>
1,00,000	1456	1960	3077	4381
2,00,000	2798	3703	5886	8410
3,00,000	3928	5181	8381	12047
4,00,000	4935	6466	10664	15426
5,00,000	5953	7745	12953	18806
6,00,000	7073	9176	15229	22178
7,00,000	8170	10541	17513	25559
8,00,000	9245	11884	19751	28915
9,00,000	10295	13204	21968	32252
10,00,000	11325	14502	24181	35585

TABLE 2**Basic revised premium for member and spouse above age of 60 years**

SUM ASSURED OVERALL	60 yrs + 1 day up to 70 yrs		70 yrs + 1 day up to 80 yrs		80 years and above	
	Less than 10 years in H & A Scheme	More than 10 years in H & A Scheme	Less than 10 years in H & A Scheme	More than 10 years in H & A Scheme	Less than 10 years in H & A Scheme	More than 10 years in H & A Scheme
RS.	RS.	RS.	RS.	RS.	RS.	RS.
1,00,000	6829	5979	6829	5314	6829	3986
2,00,000	13656	11955	13656	10628	13656	7971
3,00,000	20485	17934	20485	15941	20485	11955
4,00,000	27314	23913	27314	21255	27314	15941
5,00,000	34142	29891	34142	26570	34142	19928
6,00,000	40970	35870	40970	31885	40970	23913
7,00,000	47800	41847	47800	37199	47800	27900
8,00,000	54627	48676	54627	44027	54627	34728
9,00,000	61456	55506	61456	50855	61456	41555
10,00,000	68284	62335	68284	57683	68284	48384

THE ABOVE TABLES HAVE INCORPORATED THE FOLLOWING BENEFITS FOR BEING IN THE POLICY FOR LONGER PERIOD OF TIME

- ❖ *Please note those who are in our scheme (Age 60 yrs. + 1 day up to 70 yrs.) will get 5% No Claim Bonus if there is no claim in last year policy and 10% bonus if there is no claim for last 2 years.*
- ❖ *Please note in table 2 for main member and spouse premium is frozen after the age of 60 yrs resulting in reduction in premium by about 15 % at the age of 60 yrs, 30% at the age of 70, and 35 % at the age of 80 and above.*
- ❖ *If you are in H & A scheme more than 10 yrs without any break at the age of 60 yrs your premium is reduced by about 25%, at the age of 70 by 40% and at the age of 80 by 60%.*

HOWEVER IF THERE IS A GENERAL INCREASE IN RATE IT WILL APPLY TO ALL CATEGORIES

TABLE 3**BASIC REVISED PREMIUM FOR DEPENDANTS ABOVE 60+1 day**

SUM ASSURED OVERALL		
	AGE 60 YRS + 1 DAY UPTO 70 YRS	AGE 71 YRS & ABOVE
RS.	RS.	RS.
1,00,000	7505	9539
2,00,000	15032	19077

3,00,000	22552	28615
4,00,000	30069	38155
5,00,000	37590	47694
6,00,000	45102	57238
7,00,000	52623	66777
8,00,000	60048	76308
9,00,000	67554	85846
10,00,000	75062	95386

NOTE: PLEASE ADD RS. 200/- PER HEAD AS AMC Corpus Fund FOR ALL 3 TABLE 1, 2 & 3 SHOWN ABOVE.

Note: - Premium is payable at rates considering the age in completed years as on 1-10-2020.

If a hospital has package deal with a provider in that institution, the same package will apply to AMC H&A members. Any additional fees will not be reimbursed.

FOR ALL NEW ENTRANTS; Insurance will be initiated from the 1st of every month and all such policies will end on 30th September 2020. The proposal form along with the requisite cheque amount must be submitted before 25th of any month to become operative from the 1st of the following month

Along with many other additional benefits, NOTE the premium payable in most of the slabs in our H&A Policy is comparable or lower than normal mediclaim policy, even though our policy covers pre-existing diseases as mentioned above plus many additions as exclusive features.

Please Note: CSI for health insurance is a minimum of RS. ONE LAC and multiple of a lac upto Rs. 10 Lacs. IN 2020 DUE TO THE COVID PANDEMIC PREMIUM PAYMENT WILL BE ONLINE ONLY

PLEASE MAKE NEFT PAYMENT TO

BANK NAME: CENTRAL BANK OF INDIA

BRANCH: ANDHERI

IFSC CODE: CBIN0280595

ACCOUNT NO: 3154804186

ACCOUNT TYPE: SAVING

PLEASE NOTE YOUR UTR NUMBER AND HAND IT OVER TO YOUR H&A AGENT

TABLE - 4

PREMIUM FOR PERSONAL ACCIDENT COVER		
Capital Sum Insured in Rupees	Premium with weekly benefit cover incl. GST in Rupees	Premium without weekly benefit cover incl. GST in Rupees
1,00,000	200	136

Important note – those having no income such as children below 21 yrs. of age, doctors above 75 of age and not in active practice, house wives are not to be given pa cover for more than rs.5lacs and that too “without weekly benefit.” (No cover “with weekly benefit”)

N.B.: FOR CSI UPTO Rs.10 LACS PREMIUM TO BE CALCULATED IN MULTIPLES OF 1 LAC

Minimum personal accident cover CSI for all New Entrants is Rs.1Lac

7) Most claims are settled without dispute. However some claims which are considered excessive, unreasonable or out of range by the H & A Committee, will be called in for scrutiny; the claimant would have to justify the fairness of the claim made by him , and abide by the decision of the professional colleagues in the H & A Cell,

Mis-representation, suppression of material fact at the inception of policy or during claim will lead to repudiation of claim.

8) When you are treated for any illness or disease in your own family institution or setups, please note all other doctor's bills, outsourced investigations and medicine bills will be completely reimbursed as per terms specified above in this brochure. However only 50% of all the hospital bills generated by his own family institution will be reimbursable; your professional charges when treating your own family will not be allowed even when your dependents are treated else where in another hospital Since it was found some of our members are disregarding this limitation, the decision of H & A cell will be final regarding any claim approval.

EXCLUSIONS FOR AMC HEALTH AND ACCIDENT POLICY

The Insurance company shall not be liable to make any payment under this policy in respect of any expenses whatsoever incurred by any insured person in connection with or in respect of:-

- 1) Any cosmetic surgery including surgery for correction of eye sight cost of spectacles, contact lenses, hearing aids etc.
- 2) External and or durable Medical / non medical equipment of any kind used for diagnosis and or treatment including CPAP, BIPAP, NEBULIZER, CAPD, Infusion pump etc. Ambulatory devices i.e. walker, Crutches, Belts, Collars, Caps, splints, slings, braces, Stockings etc. of any kind, Diabetic foot wear, Glucometer / Thermometer ,Dialysis Equipment and similar related items etc and also any medical equipment which is subsequently usable at home etc.
- 3) Stem cell therapy
- 4) Any condition excluded in standard mediclaim will also be considered excluded in our policy unless specified otherwise.
- 5) Circumcision (unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to any accident), vaccination, inoculation or change of sex or cosmetic or of aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness.
- 6) Any dental treatment or surgery which is corrective, cosmetic or of aesthetic procedure, filling of cavity, root canal including wear and tear etc unless arising from accidental injury and which requires hospitalisation for treatment.
- 7) The treatment of macular degeneration, photodynamic therapy, the injection of lucent is, injection visudyne & other such treatments however will not be eligible for reimbursement. Neither will payment for Osteoporosis supplements, TNF alpha inhibitors & visco supplements etc. be done.
- 8) Convalescence, general debility, "run down" condition or rest cure, congenital external diseases or defects or anomalies, sterility, any fertility, sub-fertility or assisted conception procedure, venereal diseases, intentional self-injury/suicide, all psychiatric and psychosomatic disorders and diseases / accident due to and or use, misuse or abuse of drugs / alcohol or use of intoxicating substances or such abuse or addiction etc.
- 9) Naturopathy treatment, unproven procedure or treatment, experimental or alternative medicine and related treatment including acupressure, acupuncture, magnetic and such other therapies etc.

10) Doctor's home visit charges, Attendant / Nursing charges during pre and post hospitalization period.

11) Treatment which is continued before hospitalization and continued during and after discharge for an ailment / disease / injury different from the one for which the hospitalization was necessary.

Your family members are welcome to join our scheme.

Criteria for Dependents of AMC members

Dependents who can avail of our scheme include parents, children, grand children, and parents of spouse, son-in-law and daughter-in-law. **Parents/in-laws are only covered if the children are insured also with us.**

Kindly note that

Children and Son & Daughter in Law can enter the policy upto the age of 25 years

Parents and Parents in law can enter the policy upto the age of 79 years

N.B.: CSI of any dependent cannot exceed the CSI of main member of group. Member cannot increase his CSI after the age of 79 years.

CSI of parents of Non member spouse can be equal to or less than the CSI of the concerned spouse.

In the unfortunate event of death of the main member (consultant) in the scheme, those family members who are already enrolled with us will be permitted to continue in the H & A scheme of the AMC, provided there is no break in continuity of their existing policies with us.

As you can see for yourself -Your H & A policy is not just another product available to you. It is tailor made to meet our requirements and provide cover for dependents. It's a not just an insurance; it is social security insurance, where the consultant community looks after the health needs of its members and their dependents to the maximum extent feasible.

- If you are in policy for more than 10 year in the 11th year you get a 15% reduction in premium and premium freezes at 60.
- Premium stays same from 60 to 70
- Premium starts reducing at 70 and reaches rock bottom at 80

HENCE A WORD OF CAUTION

• **Members must understand ours is a group health Insurance and NOT standard mediclaim.** If we make higher claims, the total of all claims made by our members will go up more than the premium paid by us in that year. If this happens, all of us have to pay higher premium next year. Hence it is in OUR INTEREST that the hospital bills claimed by us are fair and reasonable to prevent an increase in premium the next year. We request you to go to a tertiary care center or major hospital only for major illnesses; for other illness please take treatment in smaller hospitals where the bills generated and claims amount will be much less.

• If scrutinizing committee of H & A Cell feels the bills submitted are inflated or unreasonable then H & A Cell decision will be final regarding approval of claims.

HEALTH & ACCIDENT CELL

1	Dr. Suhas Kate	Chairman	-	Cell: 98201 47041
2	Dr. Smita Sharma	Co-Convenor	-	Cell: 9820046656
3	Dr. Jayesh Shah	Convenor	TEL: C-26131803/ 98190 67414	Cell: 98690 57414
4	Dr. S.S.Rao	Patron	-	Cell: 98200 25201
5	Dr. Deepak Vaidya	Member	TEL: C-26286688	Cell: 93225 11069
6	Dr. Nitin Rao	Member	-	Cell: 98200 22368
7	Dr. P. N. Rao	Founder	-	Cell: 98200 42957

HEALTH & ACCIDENT INSURANCE SCHEME OF AMC

List of approved Insurance Agents for Health & Accident policy.

AGENT'S NAME	TEL NO. AND CELL NO.	AREAS OF COVERAGE
Mrs. Shobha Shah.	9821091530 / 24185483	South Mumbai upto Matunga (C.Rly) & (W.Rly)
Mr. Bhupendra Shah.	9820181275 / 25013447	Sion and All Central Rly. Suburbs up to Kalwa, Navi Mumbai
Mr. Sushil Punyarthi.	9821079832 / 9821729832	Mahim to Dahisar
Mr. Krishnakant Garodia.	9322227801	South Mumbai to Andheri
Mr. Pawankumar Agarwal.	9223445779 / 9320566788 / 9820026622	Malad to Virar till Dahanu
Mrs. Trupti Sampat.	9869072993 / 8879431307 / 9702440249	South Mumbai to Borivali
Mr. Mandar Datar.	9769527708 / 25368029	Beyond Kalwa on Central Rly New Mumbai
Mr. Sanjay M Sureka.	9820497117 / 26114812	Churchgate To Andheri
Mr. Rooproy Harbinder Singh	9869468615 / 9702061070	Churchgate To Borivali & Chembur
Mr. Jitendra K Udeshi.	9819587785 / 0251-2861361	Dombivali & Central Suburban
Mr. Kiran Shah.	9869104614 / 27454171	Panvel – New Mumbai
Mr. Shailesh Mawani	9869038208	Western Mumbai
Mr. Sagar Mestry	8286746427	All
Mr. Vasant Sakpal	9405655215 / 7387659852	All
Ms. Apeksha Sanghavi	9833608733 / 9930950216	Western Mumbai
Mrs. Uma Suri	9987369298	South Mumbai upto Matunga (C.Rly)&(W.Rly) Powai
Mr. Sachin Patkar	7558553276	All

Any new member in the H & A scheme will generally be serviced by the agent covering that area However members do have the right to choose any agent from the list above.

AMC Office (10 am – 6 pm) Mrs. Janhavi Salvi: TEL: 022- 26836019/ 26844639 / 26821109

AMC - WhatsApp Number: 9867450066 / Janhavi:- 77764847454 Jyoti:- 8828294748

IN CASE OF CLAIM:-**Paramount Health Services (TPA) Pvt. Ltd**

Paramount is our outsourced center for receiving & processing of claims. They will be receiving all the claim papers and processing them, as per the terms and conditions of our policy and making payment.

It is advised to intimate a claim prior to hospitalization for planned hospitalization and within 7 days of admission for emergency hospitalization. All claim papers along with pre hospitalization bills (up to 30 days prior to hospitalization) must be submitted to Paramount within 15 days from the date of discharge.

However where treatment is continuing, (period upto 60 days after hospitalization) post hospitalization bills can be submitted within 75 days of discharge from hospital or within 15 days of completion of post hospitalization treatment whichever is earlier. No claim will be entertained beyond this period.

- a) Please Submit Cancelled Chq (signed with name written / printed) For Direct Payment To Your Account.**
- b) In Case The Claim Is Above Rs1 Lac Pls Submit Photo Id Proofs Such As Aadhar Card, Passport Copy Etc. Along With Claim Form**

TPA- Paramount Health Services Pvt. Ltd.
Mr. Santosh Patil
Vice President
: Mob- 9323231050/022 68342815
Head Office: PLOT NO. A-442, Road No. 28,
M.I.D.C., Industrial Area, Wagale Estate, Ram
Nagar

POLICY ISSUING OFFICE:
MCDO 22, The Oriental Insurance Co. Ltd.
Oriental Bldg. 3 rd. Floor, above LIC of India
Flora Fountain, Mumbai - 400 001.
Mrs. Jyoti Shetty, Sr.Divisional Manager - 22853323
(D) Board -22853324, 22024773 Fax-22043700
Email: 112500@orientalinsurance.co.in
Mrs. Jyoti Bhosle : 8828294748

Claim Intimation Email:

Claim.intimation@paramounttpa.com & amcmumbai.hacell@gmail.com