

HINDUSTAN COPPER LIMITED
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CORRIGENDUM

Sub : Circular for GROUP MEDICAL INSURANCE SCHEME (GROMIS) - 2016-17 FOR EMPLOYEES SEPARATED ON ACCOUNT OF RETIREMENT, VR, DEATH AND / OR SPOUSE OF HINDUSTAN COPPER LTD. issued vide Circular No.HCL/HR/GROMIS/2016-17(Ret.) dated 12.12.2016

The corrigendum is issued in respect of Clause 8.4 of Circular dated 12.12.2016 as under.

Clause no.8.4 may be read as follows

"8.4 Insurance is with 'Nil' waiting period from 16.1.2017"

Instead of

"8.4 Insurance is with 'Nil' waiting period from 01.2.2017."


12/12/16
R S Sajwan
Chief Manager (HR)

**HINDUSTAN COPPER LIMITED
CORPORATE OFFICE**

No.HCL/HR/GROMIS/2016-17 (Ret.)

12.12.2016

CIRCULAR

**Sub: GROUP MEDICAL INSURANCE SCHEME (GROMIS) - 2016-17 FOR EMPLOYEES
SEPARATED ON ACCOUNT OF RETIREMENT, VR, DEATH AND / OR SPOUSE OF
HINDUSTAN COPPER LIMITED**

1.0 Group Medical Insurance Scheme (GROMIS) for 2016-17 has been finalized by Hindustan Copper Ltd. with The New India Assurance Co. Ltd.

2.0 Terms of the Scheme

GROMIS for retired employees and / or spouse shall be operational for a period of 01 (one) year w.e.f. 16.01.2017.

3.0 Insurance Provider

The New India Assurance Co. Ltd.
Large Corporate & Brokers' Office - Kolkata
4, Mangoe Lane, 2nd floor
Kolkata-700001

Phone: (033) 2248 5888
Contact Person: Mr. Satyen Ghosh, Dy. Manager,
Contact no. 8420377780 (M)
e-mail ID: satyen.ghosh@newindia.co.in
Website: www.newindia.co.in

4.0 Third Party Administrator (TPA)

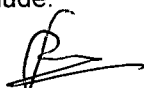
Family Health Plan Insurance TPA Ltd.
16/2, Lakeview Road
Kolkata – 700 029

Contact nos.

1. Mr. Anindya Mondal : 9038876112 (M)
E mail: anindya.mondal@fhpl.net (Helpdesk)
2. Mr. Mihir Kanti Das : 8334918811 (M)
E mail: mihirkanti.das@fhpl.net
3. Mr. Arnab Roy
E mail: arnabray@fhpl.net

5.0 Coverage

Facility under GROMIS 2016-17 will be extended to the Ex-employees and / or Spouse on account of Retirement, VR and Spouse of deceased employees (hereinafter called the 'Members') who opt for the Scheme (on 1+0 or 1+1 basis) on payment of premium by such ex-employees/spouse of deceased employees as detailed at Para 6.0 below. Coverage shall include.



: 2:

- (i) Hospitalization treatment facility in respect of the separated employees and their spouse (number of beneficiary being restricted to two only) against the Family Floater Sum Insurance of Rs.3 (Three) lakhs for a year.
- (ii) Spouse of the ex-employee covered under this Category shall continue to avail facilities as stated at Para 5 (i) above in the event of death of the ex-employee during the insured period.

6.0 Insurance Premium

The premium is to be paid by members as per age slab (maximum age being 85 years) for coverage under the Scheme for a period of one year w. e. f. **16.01.2017**.

Age Slab	Premium + 15% Service Tax (Rs.)	
	For 1+0	For 1+1
Upto 50	13000 + 1950 (ST) = 14950	20000 + 3000 (ST) = 23000
51 - 55		
56 - 60		
61 - 65		
66 - 70		
71 - 75		
76 - 80		
81 - 85		

7.0 Entitlement towards Bed / Cabin charges

Ceiling of Room rent for hospitalization of Ex-employees and his/her spouse covered under GROMIS shall be as under.

- a) For ICCU / ITU – Maximum of Rs.6,000/- per day.
- b) Other than 7 (a) above – Maximum of Rs.3,000/- per day.

8.0 GENERAL TERMS & CONDITIONS

- 8.1 Eligible separated employees and / or their spouse can join the Scheme on payment of full premium through NEFT to the credit of Hindustan Copper Limited and proof of payment of premium along with duly filled in declaration form should reach at Corporate Office of Hindustan Copper Ltd. by **10th January, 2017**.
- 8.2 All pre-existing diseases will be covered from day one of the insurance cover.
- 8.3 Maternity benefit and mental ailment is excluded from the cover.
- 8.4 Insurance cover is with 'Nil' waiting period from 01.02.2017.
- 8.5 There is no exclusion for any disease under the insurance cover.



- 8.6 The cover extends 30 days pre-hospitalization and 60 days post hospitalization benefits.
- 8.7 Day Care' facilities (where treatment in Hospital/ Nursing Home takes less than 24 hours and the patient is released on the same day) have been covered.
- 8.8 The coverage provides "Cash less" facility to members who are covered under the Scheme on All India basis in Insurance / TPA listed hospitals.
- 8.9 Ambulance charges up to a ceiling of Rs.1000/- shall be admissible as part of hospital bills only for the admission into the hospital. No Ambulance charge is admissible at the time of discharge from the hospital. The Ambulance charges will be covered within the overall ceiling of Sum Insured as the case may be included in the hospital bills.
- 8.10 HCL has its own hospitals located at its three mining Units at Khetrinagar, Rajasthan, Malanjkhand, Madhya Pradesh, Ghatsila, and Jharkhand. These three hospitals are covered under the Group Medical Insurance Scheme for eligible separated employees & their spouse and spouse of deceased employees who opt for GROMIS. The bills in connection with the above in-house treatment shall be sent to the TPA by HCL for settlement.
- 8.11 Bills towards cost of treatment at TPA non-listed hospitals shall be submitted by the Separated Employees / Spouse of deceased employees to the TPA directly as mentioned at Para 4.0 above.
- 8.12 Coverage under GROMIS for Separated Employees and/or Spouse shall be on All India basis.

9.0 Procedure

- 9.1 Ex-employees (eligible as per Para 5 above) who are interested for coverage under the GROMIS 2016-17 are requested to deposit premium amount along with Service Tax indicated against age-slab for 1+0 and 1+1 at Para 6.0 above, through NEFT to Hindustan Copper Limited. The Account details of Hindustan Copper are given below.

NAME OF BENEFICIARY	HINDUSTAN COPPER LIMITED
DESTINATION BANK'S NAME & BRANCH	STATE BANK OF BIKANER AND JAIPUR 14, NETAJI SUBHAS ROAD KOLKATA-700 001
IFSC NO.	SBBJ0010004
ACCOUNT NO.	51044082858

- 9.2 To fill in the attached form of declaration and send the same along with required Documentary proof mentioned at Para 10.0 below to the under mentioned address along with proof of payment of premium (paid through NEFT to the credit of Hindustan Copper Ltd.)

Smt. Leena Chakraborty
Senior Manager (Administration)
Tamra Bhavan', 1, Ashutosh Chowdhury Avenue,
Kolkata-700 019

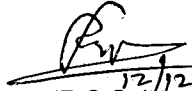
Contact phone number (Monday to Friday):033-2283-2840/2283-2940/2283- 2832 Extn: 131



: 4:

- 10.0 Documentary Proof required to be submitted by applicant along with duly filled in form of declaration.
- 10.1 Proof of NEFT payment of Premium to Hindustan Copper Limited
- 10.2 Proof of age.
- 10.3 A cancelled cheque (in original) with A/c No., IFSC Code and name of accountholder printed on cheque. In case name of accountholder is not printed on the cheque, a copy of passbook is required to be submitted.
- 10.4 Copy of Service Certificate
- 10.5 In case of deceased employee copy of Death Certificate

This issues with the approval of the Competent Authority.


12/12/16
(R S Sajwan)
Chief Manager (HR)

Encl: As above

Distribution:

1. CMD
2. D (P)/ D (Fin.)/ D (Mining), D (Opns.)
3. CVO
4. Unit Head/ KCC/MCP/ICC/TCP/GCP
5. DGM (F)/ CO
6. Regional Manager /Delhi/Bengaluru/Mumbai Office
7. General Secretary of Officers' Associations of Units /Offices
8. General Secretary of Recognized Unions of Units/Offices

GROUP MEDICAL INSURANCE SCHEME
(To be filled up by the Retired/VR separated employee / Spouse of deceased employee)

DECLARATION

I am interested to avail Insurance Cover under the Group Medical Insurance Scheme (GROMIS) as per Circular No. HCL/HR/GROMIS/2016-17(Ret.) dated 12.12.2016. The details are enumerated below:

1. Name :
2. Date of Birth and Age :
3. Name of Spouse :
4. Date of Birth of Spouse and Age :
5. Correspondence Address :
6. Contact Number (Land/Mobile) : Land (with STD code):
Mobile:
7. E-mail address :
8. Details of Bank A/c:
Name of the Bank :
Address of the Branch:
Nature of A/c :
Account Number :
Bank IFSC Code Number :
9. Amount of Premium along with S.Tax deposited in HCL's account:
for 1+0 / 1+1 membership

I declare that the above particulars are correct to the best of my knowledge.

Signature.....

Name

Date.....

Place.....

- Encl:
1. Cancelled cheque with signature of A/c holder where IFS code is mentioned
 2. Documentary proof of NEFT payment of premium
 3. Copy of Service Certificate
 4. Age proof
 5. Copy of Death Certificate in case of deceased employee

