Frequently Asked Questions

Group Personal Accident (GPA) & Group Term Life (GTL)

1. ***What does Group Personal Accident cover?***

   Group Personal Accident insurance provides benefit to employee against any unforeseen injuries or accident that may result in loss of life, disability or loss of earning.

2. ***Is GPA only applicable for accidents at office premises?***

   No, GPA coverage is a 24-hour worldwide.

3. ***Does GPA coverage include outpatient medical expenses in case of injury due to accident?***

   Yes, up to INR 10,000 per accident, if the injury does not result in permanent disability or hospitalization but results in at least Temporary Total Disablement and employee being totally incapacitated to attend to work ie. arm fracture.

4. ***Will I be eligible for both GPA & GTL coverage in case of accidental death?***

   Yes, employees will be eligible for both GPA & GTL benefit in case of accidental death.

5. ***What is the requirement for weekly disability compensation benefit under GPA?***

   Employee will need to be officially on medical leave (either paid or unpaid medical leave) in order to be eligible for claim.

6. ***What does Group Term Life cover?***

   Group Term Life insurance provides benefit to the employee's designated beneficiary (ies) in the event of death, including both natural and accidental death.

Group Health Insurance – Employee Plan

1. ***What is Health Insurance?***

   Health insurance provides financial aid against medical expenses incurred in the event of hospitalization due to Illness / Disease or Accident.

2. ***What is the minimum duration of Hospitalization for availing Health Insurance benefit?***

   A minimum of 24 hours hospital admission is required. This requirement does not apply for Day Care Procedure.

3. ***What is a Day Care Procedure?***

   Day Care Procedure refers to the course of medical treatment or surgical procedure in specialized Day Care Centre which enables the patient to be discharged on the same day. For complete list of Day Care Procedure as determined by the insurer, please login to your Mediassist.

4. ***What does Family Floater coverage mean?***

Family Floater coverage refers to the sum insured available for any one or all of the persons covered as a Family in the plan.

5. **What is Corporate Buffer?**

Corporate buffer is a common pool of coverage maintained at an organization level. This can be availed in case of any medical emergency falling under listed critical illness, after exhaustion of individual employee's Family Floater coverage. This is extended to Employee, Spouse & Children.

6. **What is the process for availing Corporate Buffer?**

Employee will be required to submit the request along with the following supporting documents to MediAssist:
- Doctor's certificate of medical procedures required and estimated costs. Concerned ailment must fall within the definition of "Critical illness". Please note that Buffer coverage cannot be used for Maternity or Maternity related ailment.
- Medical records

The insurer will verify if the request meets the policy guidelines and inform employee of status.

7. **Can I use Corporate Buffer for my parents?**

Corporate Buffer cannot be used for parent claims. It is only available for Spouse & Children, in the event of critical illness.

8. **What is considered Critical Illness?**

Any ailment which is not a planned surgery and impacts the major organs of the body is known as critical illness. Please refer to the *Employee Policy > Corporate Buffer* for list of critical illnesses.

9. **What is the eligibility requirement for dependent children?**

Dependent children include children of 25 yrs old or below who are financially dependent on their parents. Children who are above 25 yrs old but dependant on their parents due to physical /mental limitations will also be covered.

10. **What happens if I choose a higher room category than the room category entitlement (Single Private AC room) during hospital admission?**

Any additional costs as a result of higher room category will need to be borne by employee.

11. **Is there any restriction on number of children eligible?**

No

12. **Can I enroll my dependant in the middle of policy year?**

Enrolment or changes to dependant enrolment in the middle of policy year is not allowed except for new dependant due to change in marital status, newborn baby or new hires.

13. **What is co-pay and how does it work?**

Co-pay is out-of-pocket expenses to be borne by employee for each claim. The plan requires 10% co-pay of the claim amount approved by the Insurer for each claim.

For example, if the total hospitalization bill is INR 70,000 and the amount payable by the Insurer is INR 68,500 (INR 1,500 deducted towards non-medical expenses), the amount payable by employee is INR 6,850 (10% of INR 68,500) + Non-medical expenses of INR 1,500 = INR 8,350.

14. Is there any restriction on number of delivery for availing Maternity benefit?

There is no restriction on number of delivery for availing maternity benefit. Max benefit per delivery is INR 50,000.

15. Will I be eligible for Maternity benefit in case of miscarriage or abortion?

Expenses related to voluntary termination of pregnancy (abortion) are not covered, unless advised by a doctor due to health reasons.

16. The benefit covers hospitalization outside of India?

The benefit coverage is applicable for hospitalization within India only.

17. Are Dental expenses covered?

Dental expenses are covered if arising out of accidental causes only, and subject to hospitalization.

18. What is Active Line of Treatment?
If admission to a hospital is mainly for diagnosis or investigation of an ailment which can be carried out as an outpatient or for a routine evaluation of the patient and the treatment involves few oral medications only, it will not be covered under Hospitalization benefits

Group Health Insurance – Voluntary Parent Plan

1. I'm a new hire. How do I enroll my parent into the plan?

Within two weeks of your joining you will receive an enrolment notification from MediAssist. If you wish to enroll your eligible parent(s), you will need to complete the enrolment according to the instruction & timeline provided in the email. No further enrolment is allowed once the enrolment window closes.

2. What will be the effective date of my parent coverage?

Your parent coverage is voluntary and will commence from the first day of your employment, provided the enrolment is submitted within the given timeline. The cost of coverage shall be fully borne by employee.

3. Will I be eligible for sum insured 2 lakhs if I cover only 1 parent?

The coverage amount will remain the same (INR 200,000) regardless of whether employee enrolls one or both parents, as it is Family floater coverage.

4. Is there any restriction on pre-existing conditions in case of parent cover?

Pre-existing conditions are covered, there is no waiting period.

5. *What is Active Line of Treatment?*

If admission to a hospital is mainly for diagnosis or investigation of an ailment which can be carried out as an outpatient or for a routine evaluation of the patient and the treatment involves few oral medications only, it will not be covered under Hospitalization benefits

6. *Will I be able to enroll my parent-in-laws?*

This year employees have an option to include In-Laws as separate cover, however combination is not allowed under the policy (Ex. Employee cannot add one parent & one In-Law)

7. *My parents are retiring. When can I enroll them under the Voluntary Parent Cover?*

You can enroll your retiring parents during annual renewal in June each year.

8. *My sibling also works in Honeywell. Can both of us cover our parents?*

Yes dependant parents can be covered by both the siblings

9. *Can I enroll or cancel my parent cover anytime during the policy year?*

You can only enroll or cancel your parent cover during annual renewal each year. Additionally, employee can only cancel his/her parent cover if there is no claim incurred during the policy year.

10. *Will the employee get refund if one of his insured parents passes away during the current policy period?*

This is a Floater policy covering both parents; hence the unfortunate death of one parent will not result in any refund as Floater Sum Insured is available for full use by either parent

11. *What is the difference between Group Parent Cover and individual/retail parent policy?*

Following are the general differences between Group Parent Cover and a normal retail/Individual parent policy:

	Individual Parent Policy (may vary from one insurer to another, and subject to future changes by IRDA or insurer)	Group Parent Cover
Pre-existing condition	Generally excluded or covered only after 4 continuous claim-free renewals with Insurer.	Pre-existing conditions are covered, no waiting period
30-day Exclusion	Disease contracted during first 30 days is generally excluded	Waived
Waiting Period	Applicable for new member	No waiting period
Health check-up	Typically required for persons over 45 years of age, at own cost	No health check-up is required

Sum Insured	Limited Sum Insured particularly for senior citizens (age over 60 years)	Sum insured is according to the group Healthcare plan

12. What happens if I choose a higher room category than the room category entitlement (Single Private AC room) during hospital admission?

Any additional costs as a result of higher room category will need to be borne by employee

13. Will I be eligible for tax exemption for my parent's premium?

Premium deducted will be eligible for tax exemption, subject to India tax guidelines. The premium amount will be incorporated in Form 16 by Honeywell Payroll, you are not required to submit any additional documentation for availing tax exemption.

14. What is the premium recovery process?

The recovery will be done in multiple equal installments from date of enrollment.

15. Will there be premium refund if I resign from Honeywell in the middle of policy year?

Yes, the prorated premium amount will be refunded provided there are no claims. There will be no premium refund if you have incurred parent claim.

16. What happens to my Parent cover if I resign from Honeywell?

Your Parent Cover will cease effective the termination date. However employee can opt to convert the Parent Cover into a retail policy (portability benefit) with the same insurer, subject to the applicable terms, conditions, and rates from insurer as well as IRDA (Insurance Regulatory and Development Authority).

17. What are the terms and conditions for converting my Parent Cover into a retail policy (portability benefit) in the event that I resign from Honeywell?

In order to continue with the healthcare policy after leaving Honeywell India, you need to port the policy at retail premium rates.
Employee or his insured family members can migrate from the Group Corporate Policy to an Individual/Family Health Policy with the same Insurer on similar terms and Sum Insured as available.
Please note that the existing Insurance policy with Honeywell will be terminated effective your Last Working Day.

Please download the portability kit from HR Online under the How do I section

Update the attached forms and submit to New India

Also, HR signature in the portability kit is not mandatory.
Please note employee should port the policy minimum before 2 weeks before your last working day.
Please get in touch with New India, (annapurni.rajam@newindia.co.in; gurugubilli.dinesh@newindia.co.in) Contact: 080-22262987 / 22266345 for the portability.

Portability kit\
Portability Premium

Portability kit\
Portability condition

Portability kit\
Portability application

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18. Is there minimum number of service years required for employee to avail the portability benefit?

No, there are no such restrictions for availing portability benefits.

Group Health Insurance – Medical Card, Cashless Facility & Claim Reimbursement

1. How long does it take for my medical card to be issued?

Medical card will be issued within 3 weeks from your hire date or the date your dependant details are updated into MyEmployeeFile. The electronic medical card will be available for download on the MediAssist website.
The same applies for parent medical card, which will be issued within 3 weeks upon your parent enrolment in MediAssist website.

2. Is there expiry to my medical card?

Your medical card, including dependant cards, will be valid up to the end of policy year.New medical card will be issued in each year.

3. What is the procedure for availing cashless facility?

For planned admission, you will need to submit Pre-Authorization request to MediAssist at least 3 working days prior to admission.

4. How frequently can I avail cashless facility?

There is no limit to the number of times you can avail the cashless facility, subject to the Family Floater coverage of INR.250,000 per year.

5. Where can I find the list of network hospitals with cashless facility?

The list of network hospitals is available at MediAssist website at https://network.medibuddy.in/
Please note that any expenses not covered under the plan will need to be settled with the hospital directly.

6. What is the timeline to submission of claim for reimbursement?

All claims, including the supporting documents required, will need to be submitted to MediAssist within 20 days from date of discharge or treatment.

7. The Policy number is required for claim submission. Where can I find this info?

You can find the Policy number indicated on your medical card.

8. How can I check the status of my claim?

You can check your claim status via Mediassist website https://portal.medibuddy.in/IndexHoneywell.aspx using your personal login ID and password