

NATIONAL INSURANCE COMPANY LTD. (A Government of India Undertaking)
Branch Office No.1, Post Box. No.60
"PAN AFRICAN PLAZA" 4th Floor Puthenchanthai, M.G. Road TRIVANDRUM-695 001, km 1 



ILICY SCHEDULE

Dept : Misc - Traditional Business

Group Mediclain - Tailor Made with Floater

Issuing Office Code:

Address

'olicy Number :570201/46/14/850000011

igent Code:91101000000001

Agent Mane: India Insure Risk Management and

Insurance Broking Services Pvt Ltd

Agent Contact No: (840) 27822994/ 27822990

570201

:PB. No. 60, Pan African Plaza , 4 th Floor,

Puthenchanthai, M.G. Road, Trivandrum, Kerala,

:0471 - 2331444 (G) , 2335099(D2335099Fax-0471-

isured's Name: KERALA WATER AUTHORITY

dress

: JALA BHAVAN, THIRUVANANTHAPURAM

Dist, : THIRUVANANTHAPURAM, Kerala

Pin Code: 695033

velopment Officer : 911010

te Of Proposal & Declaration:11/04/2014 Client Type:Corporate

licy Period:00:00 Hrs On 16/04/2014 To Midnight of 15/04/2015

Paid Up Capital Above Rs. 25 Crores RUPEES ONE CRORE EIGHTY TWO LAKH NINETY THOUSAND THREE HUNDRED SEVENTEEN ONLY1/14/0000001208

Special Clie2331544 : 134

NIC 570201 : 1002

t Premium :18290317

Sr1.10 1 Description

Sun Insured (Rs)

1 17500 Regular Employees of KWA and their dependents (including parents)

1,50,00,00,000.00

2 (Corporate buffer for the whole group

1,00,00,000.00

Total Sum Insured (Rs.):

Rs.1,51,00,00,000.00

tal Sum Insured (In Words): RUPEES ONE HUNDRED FIFTY ONE CRORE ONLY

cation

sks Covered

: Tailormade Group Mediclaim Policy covering 7500 Regular Employees of KWA and their dependent family members including parents as per list submitted.

ecial Peril

: As per additional covers attached sheet.

ecial Exclusion : Subject to waiver of specific exclusions as stated in the attached sheet and maternity cover, other terms,

conditions and exclusions as per Std. Group Mediclaim Policy

bject To Clause : Sum Insured per family per year : Rs.2,00,000/- on floater basis ( 7500 families X Rs.2,00,000/-).

ecial Excess : Nil

ecial Conditions: As per MOU entered into between the Insured. Total Premium for the policy Rs.4,11,02,000/- including S.T.

Premium shown below is the 1st instalment amount. Next instalment to be paid as stated in the MOU.

remium Computation :

at Premium:

Rs. 1,82,90,317.00 Service Tax: Rs. 22,60,683.00

Stamp Duty : Rs.1.00

Chargeable : No

Total : Rs. 2, 05, 51, 000.00

GOOD HEALTH PLAN LIMIT!

D. No. CC 41/1064C, 2 nd Floor

sit us at www.nationalinsuranceindia.com for information on Products, Services and Grievance Redressal Chittoor Road, Opp. Mymoon The: Pullepady Junction

Ernakulam-682018, Kerala Phone: 0484 - 4031010, 4031011

Fax • 0484 • 2362826

Email: ghpl.kerala@gmail.com 91475

for And On Behalf Of

As per Policy Terms and

Conditions Attached.

witness whereof this policy has been signed at M.G.ROAD, TRIVANDRUM-6950 this 23rd days of Aprikls: नारत 2014, का एक उपअम) पंजाकृत एवं प्रधान कार्यालयः 3 मिडिलटन रहीट,

700 071 वि.स. 2283 1705 फे.सम : 2283 1740 चेपमाउट: www.nationalinsuranceindia.com 14 11 3 cal Insurance Company Limited A good of the audio take of Registered & Head Office If affects Street

Mational Insurance Company Limited



NATIONAL INSURANCE COMPANY LTD. ATIONAL INSURANCE COMPANY LI (A Government of India Undertaking) Branch Office No.1, Post Box, No-60 "PAN AFRICAN PLAZA" 4" Floor Puthenchanthal, M.G. Rosa TRIVANDRUM-692 681, Kasa 1 Tel: 9471-2331444, Fax-9471-2331344

C.D. Debit/Credit Advice

(Duplicate)

328368

ISSUING OFFICE : STORAL LOFFICE Code) ... PR. No. 80, Pan African Plaza, the Floor, Puthenchanthai, M.G. Road, Irivandrum, Kerala, Pin : 695081 Tel:0471-2331444,2335

Voucher Number Youcher Oate

: 570201/81/14/0000001208

: 23/04/2014 Development Officer : 511016

Bank Account : 9100

A/C Code : 134 KERALA WATER AUTHORITY JALA BUAYAN, VELLAYAMBALAN, TRIYANDRUM, PIN -695616

The Balance of your CO A/C before inception of Risk was Rs. 7.85,51,000.00. Adjustment made on 23/84/2014 is Rs.2,B5,51,000.00 Your balance after adjustment is Rs.O.OO (). and your balance as on date is Rs.O.OO ().

	Policy Mumber Policy Effective Ot.	TR End/Ren/Dec/Clm Code Year Number	Particulars	CreditAmount (Rs.)	Debit Amount A	mount Received (Rs.)	· A/C Head Geal Sub	
. 1	\$70201/46/14/8500000011 16/04/2014	11	CASH PREMIUM A/C	1,82,90,317		1,82,90,317	5083	•
1	570201/46/14/85800000011 16/04/2014	U	SERVICE TAX	21,94,838		21,94,838	5443	*
3	570701/46/14/8500000011 16/04/2014	11	EDUCATION CESS	69,845		65,845	5443	
4	\$70201/46/14/8500000011 16/04/2014	11	C.D COMIROL A/C		2,05,51,000	-2,05,51,000	5876 134	•
			total(in Rs.) :	2,05,51,000	2,05,51,000	2,05,51,000		•

Particulars :

Note :

1 131 16

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1. Pleace quote Document No Voucher No and date in all correspondence

for Mational Insurance

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IATIONAL INSURANCE COMPANY LTD.

rivandrum Branch-I lan African Plaza,Puthenchantha I.G.Road,Thiruvananthapuram.Pin-695 001 lh:2331444,2331544(D)



Attached to and forming part of Policy No. 570201/46/14/8500000011

Policy Period: 16.04.2014 to 15.04.2015
Insured: KERALA WATER AUTHORITY

## Additional covers:-

KINGGER S. A. A. A. A.

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in James 14 (b) police control

1-14-21-5 11-5

- Waiver of exclusion relating to Pre-existing ailments for existing members and new joinees.
- Waiver of 1<sup>st</sup> 30 days waiting period for existing members and new joinees.
- 3. Waiver of 1<sup>st</sup>, 2<sup>nd</sup> and 4<sup>th</sup> year exclusion for existing and new joinees
- 4. Maternity Benefit Rs.50,000/- per family per year (Normal delivery upto Rs.20,000/- and Caesarean delivery Rs.30,000/- per delivery).
- 5. Waiver of 9 months' waiting period for maternity cover.
- 6. Baby day one cover for full floater sum insured per family
- 7. No cap on room rent
- Pre & Post hospitalization expense cover 30 days and 60 days respectively.
- 9. No maximum age restriction for dependents.
- 10 Corporate buffer Rs.1 crore with sub limit of family floater sum insured
- 11 No ailment capping / other sub limits
- 12 New joinees and their dependents covered from the date of their joining as per intimation.

Subject to the above specific additional covers, all other terms conditions of Std. Mediclaim Policy applicable.

For National Insurance Company Ltd

Authorized Signatory

नेशनल इन्श्योरेन्स कम्पनी लिमिटेड (भारत सरकार का एक उपक्रम) पंजीकृत एवं प्रधान कार्यालय: 3 मिडिलटन स्ट्रीट, कोलकाता 700 071 फोन: 2283 1705 / 1706 फेक्स: 2283 1740 वेबसाइट: www.nationalinsuranceindia.com

National Insurance Company Limited (A Gov. of India underaking) Registered & Head Office: 3 Middleton Street, Kolkata 700 071 Phone: 2283 1705 / 1706 Fax: 2283 1740 Visit us at: www.nationalinsuranceIndia.com

## F. No. G.14017/115/2011-ins.fl Government of India Winistry of Finance Department of Financial Services

E 11
30/3/15

2nd Floor, Jeevan Deep Bldg., Sansad Marg, New Delhi - 110 001, Dated:24<sup>th</sup> September 2012.

The CMDs of Public Sector General Insurance Companies

Subject: Strategy to be adopted in connection with underwriting Health Insurance Policies – reg.

Sir(s),

In supersession of our earlier communication of even number dated 18<sup>th</sup> July 2012 and based on the inputs received from the Expert Committee appointed by the National Insurance Academy, Pune, the amended strategy to be adopted in connection with underwriting Health Insurance Policies is placed below for compliance on immediate basis:

- Ratio is more than 100% No discount whatsoever shall be given in all such stand-alone Group Health Insurance policies where the combined ratio (ICR plus Management Expenses plus Agents'/Brokers' Commission plus TPA Commission and any other expenses) is more than 100%. For policies which are to be renewed for 2012-13, a proper price should be worked out, duly taking into consideration the burning cost, management expenses, medical inflation to ensure that the Combined Ratio is less than 95%. Such policies otherwise shall not be renewed. No TPA Commission shall be given for all such cases.
- Stand alone policies where combined ratio is less than 100% It will be ensured in all such stand-alone Group Health Insurance policies where the combined ratio is less than 100% that the premium is revised upward duly taking into consideration the medical inflation, margins, management expenses and other such factors. The brokerage/commission shall be restricted to a maximum of 5% to prevent unhealthy practices of letting the broker to hike the premium, by assuring him of brokerage at a higher percentage.