

INSURANCE SCHEME 2022

Host by Sri Lanka Insurance Corporation for Employees of University of Sri Jayewardenepura

ANNUAL INPATIENT BENEFIT	Optional Covers						
	Plan 01 (Rs.)	Plan 02 (Rs.)	Plan 03 (Rs.)	Plan 04 (Rs.)	Plan 05 (Rs.)	Plan 06 (Rs.)	Plan 07 (Rs.)
ANY ONE EVENT	90,000	90,000	180,000	270,000	360,000	450,000	675,000
ANY YEAR LIMIT	100,000	100,000	200,000	300,000	400,000	500,000	750,000
INPATIENT BENEFITS (PRIVATE HOSPITALS)	Plan 01	Plan 02	Plan 03	Plan 04	Plan 05	Plan 06	Plan 07
[01] Hospital & Nursing Home Maintenance Charges including Room Charges limit Per day (Rs.)	3,500	3,500	4,500	6,000	9,000	11,000	13,000
[02] Consultant's and Specialist's Fees, Surgeon's and Anesthetists Fees,	100,000	100,000	200,000	300,000	400,000	500,000	750,000
[03] Medical and Operational Expenses, Nursing Charges including use of operating theatre. Investigations & Special Treatment on the Recommendation Consultant Specialist on Hospitalization.							
#. OTHER FRINGE BENEFITS WITHIN INPATIENT LIMIT							
CHILD BIRTH BENEFITS (PRIVATE HOSPITALS)	Plan 01	Plan 02	Plan 03	Plan 04	Plan 05	Plan 06	Plan 07
[01] Vaginal child Birth (Normal child birth cover) (Applicable to family unit or Married employee)	50,000	50,000	75,000	75,000	150,000	200,000	225,000
[02] Maximum amount payable for Instrumental Child birth (Forceps and vacuum delivery) (Applicable to family unit or Married employee)	75,000	75,000	100,000	100,000	200,000	250,000	275,000
[03] Caesarean Child Birth Cover (Maximum Limit) (Applicable to family unit or Married employee)	75,000	75,000	100,000	100,000	200,000	250,000	275,000
CHILD BIRTH BENEFITS (GOVERNMENT HOSPITALS)	Plan 01	Plan 02	Plan 03	Plan 04	Plan 05	Plan 06	Plan 07
[01] Vaginal child Birth (Normal child birth cover) (Applicable to family unit or Married employee)							
[02] Maximum amount payable for Instrumental Child birth (Forceps and vacuum delivery) (Applicable to family unit or Married employee)	10,000	10,000	15,000	15,000	30,000	50,000	50,000
[03] Caesarean Child Birth Cover (Maximum Limit) (Applicable to family unit or Married employee)							
Per day allowance not applicable							
INPATIENT BENEFITS (GOVERNMENT HOSPITALS)	Plan 01	Plan 02	Plan 03	Plan 04	Plan 05	Plan 06	Plan 07
[01] Government Hospital per day (Non paying wards Max .30 days) (One night Considered a day)	1,000	1,000	1,500	1,750	2,000	2,500	3,000
[02] Expenses incurred on drugs purchased & test, scans,& x-rays undergone whilst being an inpatient in a non paying ward of a Government Hospital (Subject to bills being produced)	15,000	15,000	30,000	45,000	60,000	75,000	112,500

OTHER BENEFITS	Plan 01	Plan 02	Plan 03	Plan 04	Plan 05	Plan 06	Plan 07
[01] Birth of twin within indoor limit	10,000	10,000	10,000	10,000	10,000	10,000	10,000
[02] Cost of Lens Kit for Cataract surgery (Maximum Limit)	30,000	30,000	30,000	30,000	30,000	30,000	30,000
[03] Emergency Traveling Allowance within Sri Lanka to obtain emergency treatment charges payable within indoor Limit (Subject to bills being produced)-Ambulance charges only.	2,000	2,000	2,000	2,000	2,000	2,000	2,000
[04] Spectacles Cover once in 3 years. (Prescribed by eye Surgeon) Employee only	5,500	5,500	8,000	9,000	16,000	17,500	17,500

. All above benefits are paid within annual Inpatient Limit

OUTPATIENT BENEFITS	Plan 01	Plan 02	Plan 03	Plan 04	Plan 05	Plan 06	Plan 07
[01] Cost of drugs (Excluding Vitamins) specialist or MBBS Doctor, Consultants fees, Vaccination covered (Government scheduled existing vaccinations only/ epidemic and pandemic diseases vaccination not covered) Ayurvedic treatment included Qualified Ayurvedic Doctors (Eg: DAMS) Dental Treatments (excluding dentures/polishing & Scaling)	4,000	9,000	15,000	20,000	30,000	32,000	35,000
[02] Test & Investigations							

Life Benefits	Plan 01	Plan 02	Plan 03	Plan 04	Plan 05	Plan 06	Plan 07
Life Cover	200,000	200,000	200,000	200,000	200,000	200,000	200,000

Critical Illness Cover -Employee only (Surgeries Only)	Plan 01	Plan 02	Plan 03	Plan 04	Plan 05	Plan 06	Plan 07
Critical Illness Cover	500,000	500,000	500,000	500,000	500,000	500,000	500,000

ANNUAL PREMIUM: With Epidemic & pandemic cover (Excluding Taxes) **-WITH OPD**

Per Individual	10,700	14,750	23,330	34,920	49,180	64,685	101,925
Per Family	12,700	16,750	27,350	40,650	65,180	84,685	124,425

ANNUAL PREMIUM: With Epidemic & pandemic cover (Excluding Taxes) **-WITHOUT OPD**

Per Individual	6,500	6,500	13,280	19,920	28,680	40,685	75,675
Per Family	8,500	8,500	17,100	25,650	44,680	60,685	98,175

University Contribution	8,500	8,500	8,500	8,500	8,500	8,500	8,500
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Monthly Instalment: (Including Taxes) **-WITH OPD**

Per Individual	198.00	562.50	1,334.70	2,377.80	3,661.20	5,056.65	8,408.25
Per Family	378.00	742.50	1,696.50	2,893.50	5,101.20	6,856.65	10,433.25

Monthly Instalment: (Including Taxes) **-WITHOUT OPD**

Per Individual	Free	Free	430.20	1,027.80	1,816.20	2,896.65	6,045.75
Per Family	Free	Free	774.00	1,543.50	3,256.20	4,696.65	8,070.75

(01) Insured Person

- (I) An Individual - Employee only.
- (II) Family Unit - Employee, spouse and 03 children OR Unmarried employee & their parent.
For each additional child an additional premium of 10% of the family premium will be charged.

(02) Age Limit

- (I) Employee 18-65 Years / Spouse 18-65 Years / Children 0- 25 Years(*unmarried & unemployed*) _ (Last birth day)
Parent up to 70 Years.

(03) Waiting Period

- (I) Ten (10) months maternity waiting period is applicable for maternity claims for new members .
Unless otherwise the insured has Continued cover from any other insurer.
- (II) Minimum stay of 6 hours in the Hospital is considered as an admission. This is not applicable for surgeries.

(04) Child Birth Cover

- (I) Pregnancy related ailments are covered.

(05) Other Benefit

- (I) In the event of a hospitalization, the follow up drugs are allowed for two weeks.
- (III) Cover for OPD Surgeries under L/A (Surgeries available with out hospitalization)
within indoor limit ,maximum up to Rs: 50,000/-
done by a general surgeon .(All superficial skin & subcutaneous surgeries including removal of Abscess,
Cysts , Warts Gangrenes , Lumps , Hematomas , Nails , Lymphomas , Furuncles , Callosities , Keloids, Skin
Tags & External Manipulations of Fractures & Traumas) , Excluding Dental.
- (IV) Following tests expenses are re-imbursed under indoor limit on the recommendation of the Doctor,
without admission to the Hospital. There is no direct settlement for such payments.
a) MRI b) Endoscopy c) Colonoscopy d) Bronchoscopy e) Sigmoidoscopy f) CT Scans
*The doctor's charges payable for Endoscopy, Colonoscopy and related procedures would be the maximum
of Rs.10,000/- each.

(06) Terms & Condition(Medical Insurance)

- (I) All the professional charges/Doctors' fees and Medical expences will be paid on market rates.
- (II) Ref feral letter for hospital admission should be submitted prior to hospitalization other than admission though ETU.
- (III) Annual limits cannot be upgraded in-between the policy year.
- (IV) Test, Investigation, Spectacles , Medical Check up reports issued through Mobile Clinics are not entertained.
- (V) Doctor channelling receipts/description issued through opticians will not be entertained.
- (VI) Dental treatments should not be granted under indoor limit except surgeries performed under general anesthesia.
Maximum doctor charges limited to Rs.50,000/- .

(VII) Geographical area is in Sri Lanka.(Contracted or Treatment taken)/Overseas treatment are not covered.

(VIII) External appliances are not covered.

(IX) Following Ayurvedic Hospitals are entitled for indoor claims(Gampaha Wickramarachchi Hospital/
Siddhalepa Hospital/ Borella Ayurvedic Hospital/ Pilapitiya and Government Ayurvedic Hospitals)
Acupuncture/ Homeopathy/Healinpathy/Osteopathy treatment are not covered.

(X) Cost of expenses or per day allowances of the hospitals under the welfare Schemes
Will not be entertained within the policy.

(07) Terms & Condition (Life Insurance)

(1). Please confirm that all the employees are actively at work & in good health at the time of taking the policy.

(II). All the employees should be full time permanent employees of University of Sri Jayewardenepura .

(III). Sum Assured of each employee should not exceed 05 times annual salary

(IX)We presume that the premium will be paid by the University of Sri Jayewardenepura & is a compulsory cover for all the eligible member.

(X).Claims arising directly or indirectly due to pre-existing medical conditions which are not disclosed are excluded for a
period of one year from the date of enrolment

(XI). Suicide exclusion will apply during the first year of cover from the date of enrolment.

(XII). Kindly provide a list of all the employees indicating Name, Date of Birth, ID no,Occupation,Gender & salary indications to
work out the actual premium payable.

Upon receipt of the said data if necessary Declaration of continued good health & medicals will be obtained to consider the cover.

(XIII.) All the terms and conditions applicable for the insurance scheme is indicated in the policy document.

(08) Exclusions

(I) Occasioned by or happening through. Attempted Suicide (whether felonious or not) Alcoholism,
Psychiatric treatments , Psychiatric Mental or nervous disorders leading to insanity.

(II) An insured suffering from any physical defect or infirmity which existed prior enrolment under
the policy unless notice is given to and accepted by the Corporation

(III) Participation in Strikes or Riots.

(IV) Services of a non medical nature provided by a hospital such as television, telephone, telex
services, extra diet, radios and other similar facilities.

(V) Congenital Conditions.

(VI) Expenses Arising as a result of cosmetic surgery, cosmetic treatment and plastic surgery other than in the
Event of an accidental injury

(VII) Medical or chemical contraceptives methods of Birth control treatment , infertility, sub-fertility,

(VIII) Expenses for Lasic Treatment.

(IX) Expenses for any routine or prescribed medical checkup or examination, external and
or durable Medical / Non medical equipment of any kind used for diagnosis and/or treatment
and/or treatment and/or monitoring and/or maintenance and/ or support including CPAP,
CAPD Infusion pump, oxygen concentrator etc, ambulatory devices like walker, crutches,

belts, collars, caps, splints, stings, braces, stockings, gloves, hand soaps etc. of any kind, Diabetic footwear, Glucometer / thermometer and similar related items and also any medical equipment, which are subsequently used at home, administrative fees, biomedical waste fees, medical records charges and any luxury taxes.

- (X) Medical expenses relating to any Hospitalization primarily for diagnostic, X-ray or any other Investigations.
- (XI) Venereal Disease and Any sexually transmitted diseases or any condition directly or indirectly caused by or Associated with Human Immune Deficiency Virus (HIV) or any Syndrome or condition of a Similar kind commonly referred to as AIDS (Acquired Immune Deficiency Syndrome). .
- (XII) Medical administration charges incorporated to the bill being issued by all hospitals will not be entertained under policy.
- (XIII) Bills issue from Special clinics, promotional packages conducted by insured concerned and or third party organization
- (XIV) Doctor's channelling receipts ,prescriptions issued through opticians.
- (XV) Precautionary tests and screening test (Eg: PCR)

(09) Membership

(I) The membership should not be less than 1,800.

***.Premiums is quoted on the understanding that at less 1,800 employees will be enrolled under this insurance,**

in the event that there is a deduction in the member count, we have the right to revised the premium.

All employees should enrolled to the selected basic cover at the beginning of the policy and selection for optional covers

should be inform to SLIC within one month from the policy start date.

- (II) Member/dependant inclusions / Deletions. New Inclusions Annual Premium will be charged.
Deletions - Premium will be refunded on pro rata basis subject to no claims, If there are claims, premium will not be refunded.
- (III) In respect of a new employee, new born & newly married, mid way inclusion are granted subject to documentary proof as detailed below:-
 - * New Employee-Letter from employee on their letter head.
 - * New Born- Copy of Birth Certificate.
 - * Newly Married - Copy of Marriage Certificate.All dependant inclusions for employees should be done within one month from the inception date.

(10) Claims Settlement

- (I) Claims are settled on re-imburement basis. Direct settlement is only for approved hospitals as per the attached Hospital list
- (II) Re-imburement Claims should be submitted to the claims department within 90 days from the bill date,
At the end of the policy period, all outstanding claims including re-submissions should be submitted within 30 days.
Required documents for re-imburement
 - (a)** Duly filled Indoor claim form. **(b)**Original or certified diagnostic ticket copy. **(c)**Original hospital bills/Detail bill.
 - (d)**Original payment receipts. **(e)** Any other relevant documents (If necessary)
- (III) Health plus card is valid for admission to approved hospital but It's is not a certificate of insurance.**

(11) Quotation Validity Period

(I) This quotation is valid 30 days from the date of issue.

(12) CIC Cover

(I) Critical Illness Claims are settled on re-imburement basis & paid for surgeries relating to the given list of illness.

Total reimbursement amount including hospitalization benefit limit under critical illness cover per member is limited to per individual/per event limit.

(13) No Claim Bonus

At the end of the policy period , if the total claim paid for the policy period is less than 75% the different between the actual claims paid and the 75% margin will be shared equally between the SLIC and University of Sri Jayewardenepura .

(14) Epidemic & pandemic cover (COVID 19)

(I) Admission for the government hospital due to epidemic & pandemic cover will be paid Rs. 1,000/-

Per day maximum up to 14 days within government hospital per day limit.

(ii) Admission for private hospital or any facilities run by approved Private hospital due to epidemic & pandemic cover

would be payable within inpatient limit subject to provide details breakup of hospital bill.

However, Covid patient's admission to private hospital wards/ICU due to complications of the Covid (Ex: -Pneumonia) will be considered within inpatient limit.

(iii)Approved intermediately care center maintained by Health Ministry registered private Hospitals(PHSRC) also covered under this facility. (Medical Centers are not covered) (Details bill should be provided in favour of hospital name)

(iv) In the event that no detailed breakup of the bill is given and only a flat amount per day is shown on the bill,

we will pay maximum Rs. 10,000/- per day for a maximum up to 10 days within above given limit for cover.

single patient admission allowed only for single package expenses including single room rate. double room or triple room package are not allowed for single patient .Admission for Luxury rooms are not allowed for any patient.

(v) The above benefit is available for patient with a PCR test result positive report approved by relevant authority.