



# Health QuBE Insurance Policy

FOR ICCR SCHOLARS



## WHAT IS THIS POLICY?

- The Health QuBE Insurance Policy (Comprehensive Plan) is an ICCR-recommended health insurance plan made specially for ICCR students studying in India.
- Health insurance provides financial protection against hospitalization and medical expenses arising from illness / Accident.
- Students can focus on recovery instead of worrying about medical bills.



## KEY DETAILS

### Policy Period

Minimum 1 year  
Option to buy  
2-year policy



Health Coverage Amount  
**₹5,00,000**  
per policy year



## ADDITIONAL BENEFITS

- ✓ Day Care Procedures: Covered up to full Sum Insured
- ✓ Pre-Hospitalization Expenses: Up to 60 days
- ✓ Post-Hospitalization Expenses: Up to 90 days
- ✓ Room Rent ICU: No limit covered as per actual bill
- ✓ No Claim Bonus (NCB) : 5% sum insured increase every claim-free year or Discount on renewal premium
- ✓ Accident Cover: From Day 1
- ✓ Health Check-up: Once every year



## WAITING PERIOD



30 Days  
General  
illnesses



2-3 Years  
Specific  
illnesses



3 Years  
Pre-existing  
diseases

(Standard policy exclusions apply)



## WHAT EXPENSES ARE COVERED?

### HOSPITALIZATION EXPENSES

If you are admitted to a hospital, the policy covers:



Doctor's fees  
(Physician,  
Surgeon,  
Specialist)



Tests  
&  
Diagnostics



Medicines &  
IV fluids



Operation  
theatre  
charges



Anaesthesia



Blood &  
oxygen



Room rent  
& nursing  
charges



Surgical  
implants



Hospital stay of  
minimum 24 hours  
is covered



Day care treatments are  
covered even if 24 hours  
are not completed



## KEY EXCLUSIONS

- Hospitalization for Investigation & evaluation purpose only
- Obesity/weight control treatments
- Cosmetic or plastic Surgery
- Hazardous or Adventure sports
- Breach of Law
- Treatment for, Alcoholism, drug or substance abuse
- Any expenses incurred on OPD treatment
- Treatment taken outside the geographical limits of India

Note: Refer policy wordings for complete list of exclusions



## FIND A NETWORK HOSPITAL NEAR YOU

To avail cashless treatment, please visit a network hospital.

Hospital Locator:

<https://www.rahejaqbe.com/hospitalLocator>



## HOW TO MAKE A CLAIM?

You can make a claim in two simple ways - Cashless or Reimbursement.



### OPTION 1: CASHLESS CLAIM (RECOMMENDED)



Available if you are admitted to a Network Hospital.

1



Visit a Network Hospital

2



Show your Health Card/  
Policy Number at the  
hospital's TPA/Insurance desk

3



Hospital contacts the TPA  
The hospital sends a cashless  
request to the TPA  
(Third Party Administrator)

4



#### Approval by TPA

Approved, if payable as per  
policy terms and conditions.  
You only pay for non-payable items (if any).

After discharge, the claim submission  
is done directly by Hospital to TPA/RQBE.  
No reimbursement paperwork required from you.

₹

RQBE pays the hospital directly.



Always check network hospitals and Excluded  
Hospitals on our website before admission.



No Cashless/Reimbursement claims will be payable  
if treatment taken in Excluded Hospital



If cashless is not approved, member can submit the  
claim documents for reimbursement. Process for  
reimbursement to be followed.

### OPTION 2: REIMBURSEMENT CLAIM



If you are admitted to a Non-Network Hospital/  
Cashless facility is not approved due to any reason.

1



Pay hospital bills  
as per hospital policy

2



Collect all original medical documents, such as:

- Discharge summary
- Hospital bills with breakup
- Doctor prescriptions
- Test reports
- Medicine bills
- Payment Receipts  
(advance, interim and final receipt)
- Original invoices
- Clear copy of KYC, NEFT details.

3



Claim Intimation

Call TPA helpline/customer service team to intimate the claim.

- Planned hospitalization: Inform TPA 48 hours before admission
- Emergency hospitalization: Inform TPA within 24 hours of admission

4



Submit Claim documents to TPA

Step 1: Upload copies of all documents on TPA portal  
or share by email

| TPA NAME     | PORTAL LINK  | EMAIL ID                               |
|--------------|--|--|
| Mediassist   | <a href="https://maven.mediassist.in/">https://maven.mediassist.in/</a>  | info@mediassistindia.com               |
| Paramount    | <a href="https://member.paramounttpa.com/">https://member.paramounttpa.com/</a>  | contact.puig@<br>paramounttpa.com      |
| Health India | <a href="https://www.healthindiatpa.com/Web Claim Initiation.aspx">https://www.healthindiatpa.com/<br/>Web Claim Initiation.aspx</a> | customersupport@<br>healthindiatpa.com |

Step 2: Physical submission of claim documents  
with duly filled claim form

5



Approved Claim amount is settled  
directly to your bank account



Documents must be submitted within 15 days from discharge.

### NEED HELP OR HAVE QUESTIONS?

#### POLICY PURCHASE, RENEWAL & COVERAGE

Nodal Officer: Dr. Ketan Gawde



WhatsApp: 8419925839



Email: Ketan.Gawde@rahejaqbe.com

#### CLAIM SUPPORT

Third Party Administrator (TPA)



TPA contact details are  
mentioned in your policy  
document & Health card

#### CUSTOMER CARE



1800 102 7723 (9 AM - 8 PM)  
(Monday-Saturday)



customercare@rahejaqbe.com