



UNIVERSITY GRANTS COMMISSION

Finance Circular Letter No.01/2015

9th July 2015

Vice – Chancellors of Universities
Directors of Institutes
Rectors of Campuses

Proposed Health Insurance Scheme for Members of the Universities Provident Fund

Presently a common insurance scheme has not been introduced in the university system except individual schemes operated by the Higher Educational Institutions as per their capacity. This matter was discussed at a COPE meeting and pointed out their concern to expedite the establishment of Health Insurance Scheme for the employees of the university system.

01. Accordingly, University Grants Commission (UGC) at its 912th meeting held on March 13th, 2015 granted approval to establish a Health Insurance Scheme with effect from 2015 with the consent of employees. The proposed Health Insurance Scheme will not be compulsory for the employees of the University System.

02. This insurance Scheme will consist of three components.

- i. Medical Insurance cover
- ii. Critical Illness cover
- iii. Personal Accident and Natural Death cover

The details of the proposed Health Insurance Scheme including benefits and other conditions are given below for the information of the prospective members.

3) Eligibility

All the active members of the Universities Provident Fund will be eligible to join the Plan -01 or Plan -02 of the proposed medical insurance scheme.

4) Benefits

Annual Inpatient Benefit	Plan 01 Rs.	Plan 02 Rs.
Any Year Limit / Any One Benefit	400,000	200,000
Inpatient Benefits (Private Hospitals)		
01) Hospital & Nursing Home Maintenance Charges including Room Charges Limit	160,000	80,000
Per Day	8,500	7,500
02) Consultant's/ Specialist's / Surgeon's & Anesthetists Fees		
Medical & Operational Expenses, Nursing charges including use of operating theater	240,000	120,000
Investigation & Special treatment on the recommendation		
Consultant Specialist on Hospitalization		
Additional Benefits		
01) Normal Birth Cover	160,000	80,000
02) Cesarean Birth Cover	200,000	150,000
03) Instrumental Child Birth	200,000	150,000

<i>Inpatient Benefits (Government Hospitals)</i>	Plan 01	Plan 02
01) Govt. Hospital Per Day (Non Paying wards Max 30 days) (One Night considered a day)	3,500	2,000
02) Expenses incurred on drugs purchased & Test, Scans, & X-rays undergone whilst being an inpatient in Govt. Hospital	100,000	75,000
<i>Other Benefits</i>		
01) Birth of twin within indoor limit	25,000	10,000
02) Cost of Lens kit for Cataract Surgery (Maximum Limit)	30,000	30,000
<i>Personal Accidental Benefits (Member Only)</i>		
01) Accidental Death Cover	500,000	500,000
02) Natural Death Cover	100,000	100,000
<i>Annual Premium(Excluding Taxes)</i>		
Individual	17,500	8,250
Per Family (Insured , Spouse and any number of children)	20,750	9,650
<i>Annual Premium(Including Taxes)</i>		
Individual	20,070	9,462
Per Family (Insured , Spouse and any number of children)	23,797	11,067
<i>Critical Illness Cover (Member Only/24 Critical Illnesses)</i>		
Any one event per person per year	800,000	600,000
Annual Limit	24,000,000	18,000,000
Maximum event per year	30	30

05. Registration Procedure

Secretary of the UGC or Registrars of the Universities/ HEIs are requested to register the eligible employees and submit Form I - A of the ***Annex I – i*** directly to the UGC. Form II of the ***Annex II*** should be filled by the individual employee in two copies and submitted to their University/HEIs.

06. Payment of Premium

Initially, cost of the premium shall be borne by the individual employee until the alternative arrangement is notified by the UGC.

The Bursars of the universities shall be responsible to deduct the insurance premium from the monthly salary of the registered employee or otherwise and should be remitted to UGC with the list of employees as per the Form I-B of the ***Annex I- ii***.

07. Claim Procedure

Claims will be settled by the insurance provider as follows.

- a) Direct Basis – Upon the submission of “Health Plus Card” at the time of admission to the list of the registered hospitals provided in the ***Annex V***.
- b) Reimbursement basis- All claims shall be submitted to the Sri Lanka Insurance Corporation through Establishment Branch of the university/HEIs for the reimbursement.
- c) Claims on Critical Illness cover are settled only on reimbursement basis.

08. Optional Benefits- Group Term Life Assurance Cover


The members of the proposed scheme shall be eligible to apply for the Group Term Life Assurance Cover based on the rates and benefits given in *Annex-VI* of this circular.

09. Minimum Number of Membership

As per the Sri Lanka Insurance Corporation, at least 10,000 members are required to implement the **Health Insurance Scheme** while membership should not be less than 4,000 to implement the **Group Term Life Assurance Cover**. Accordingly, University Grants Commission will not be responsible to implement the above schemes without minimum number of members.

You are requested to submit the information of the eligible members who has agreed to join the Health Insurance Scheme on or before 30th July 2015 in order to facilitate them to receive the benefits of the proposed Health Insurance Scheme as per the form given in *Annex I*.

All formats are available for download at www.ugc.ac.lk


Prof. Mohan De Silva
Chairman

Copies:

1. Secretary/ Ministry of Higher Education
2. Chairman's Office/ UGC
3. Vice Chairman/UGC
4. Members of the UGC
5. Secretary/UGC
6. Deans of Faculties
7. Registrars of Universities
8. Accountant/UGC
9. Bursars of Universities
10. Librarians/SAL/AL of the Higher Educational Institutes/Institutes
11. Deputy Registrars/Snr. Asst. Registrars/Asst. Registrars of Campuses/ Institutes
12. Deputy Bursars/Snr. Asst. Bursars/Asst. Bursars of Campuses/ Institutes
13. Internal Auditor/UGC
14. Govt. Audit Superintendents of Universities
15. Deputy Int. Auditors/Snr. Asst. Int. Auditors/ Asst. Int. Auditors of HEIs
16. Secretaries of Trade Unions
17. Auditor-General

UGC/F/HIS/2015/1

Health Insurance Scheme for Members of the UPF

Higher Educational Institution / Higher Educational Institution:

List of Eligible Members

Member Name	UPF Number	Member Since	Member Details			Dependent's Details		Insurance Plan	
			Member Status /Permanent/Temp	National ID Number	Date of Birth	Dependents Names	Date of Birth	Plan 01	Plan 02

.....
Signature of DR/SAR/AR
Establishment Branch

.....
Signature of Registrar

You are requested to submit duly filled hard copy with soft copy to insurance@ugc.ac.lk on or before July 30th 2015 to Accountant /UGC.

Health Insurance Scheme for Members of the UPF

Higher Educational Institution / Higher Educational Institution:

Insurance Premium for Eligible Members

Member Details			Insurance Premium (Rs.)		Insurance Premium for Life Term Insurance (Rs.)
Member Name	UPF Number	Member Since	Plan 01	Plan 02	

.....
Signature of DB/SAB/AB
Finance Branch

.....
Signature of Bursar

You are requested to submit duly filled hard copy with soft copy to insurance@ugc.ac.lk on or before July 30th 2015 to Accountant /UGC.

Insurance Plan I

II

Employee No.

Health Insurance Scheme for Members of the Universities Provident Fund- 2015
Application

Name of the University / HEI:.....

1. Employee Name with Initials:
2. Designation:
3. Universities Provident Fund No:
4. Date of UPF Membership:
5. Date of Birth:
6. NIC No.:.....
7. Contact Address:
8. Civil Status:
9. Dependents Information for Family Unit:

i. Name of spouse (If Married)	Date of Birth	NIC No.
.....

ii. Details of Unmarried Children 0- 21 Years

Name of Children	Date of Birth	NIC No. (Age over 18 Years)
.....
.....
.....
.....
.....

10. I certify that all the particulars given by us in this application are true and accurate.
11. I hereby express my consent to deduct from my monthly salary as annual premium of Insurance Scheme as follows.

- a) Annual Premium for Health Insurance Scheme - Rs.
- b) Annual Premium for Group Term Life Assurance Cover - Rs.

.....
Signature of Applicant

Note: This application is for the use of Higher Educational Institution / Higher Educational Institute only. Not necessary to send this to the UGC

Terms & Conditions of the Scheme

- 1.) Family unit consisting of Insured, spouse and any number of children (Children 0- 21 Years).
- 2.) Age limits - Employee 18-65 Years / Spouse 18-65 Years / Children 0- 21 Years (Last birth day)
- 3.) All the professional charges/Doctors' fees and Medical expenses will be paid on market rates.
- 4.) The doctor's charges payable for Endoscopy, Colonoscopy and related procedures would be the maximum of Rs.7500/- each.
- 5.) 10 months maternity waiting period is waived off subject to inclusion of all dependents to the policy at beginning or renewal of the policy period. Midway inclusions are not granted under this policy.
- 6.) Pregnancy related ailments and Routine clinics are covered.
- 7.) Dental treatments should not be granted under indoor limit except surgeries performed under general anesthesia. Maximum doctor charges limited to Rs.30,000/- .The wisdom Tooth removal is also not entertained.
- 8.) In the event of a hospitalization, the follow up drugs to be accommodated for two weeks.
- 9.) Annual limits cannot be upgraded in-between the policy year.
- 10.) All Member and dependent details should be giving within 30 days from the commencement of the policy as per the format.
- 11.) Claims are settled on direct basis only for the hospitals list provided and other claims are on re-imburement basis.
- 12.) Routine health checkups are not covered.
- 13.) Following tests expenses are re-imbursed under indoor limit on the recommendation of the Doctor, without admission to the Hospital.
 - a. MRI
 - b. Endoscopy
 - c. Colonoscopy
 - d. Bronchoscopy
 - e. Sigmoidoscopy
 - f. CT Scans
- 14.) Test, Investigation, Medical Checkup reports issued through Mobile Clinics are not entertained.
- 15.) Critical Illness Cover Claims are settled on re-imburement basis. Only for 24 Critical Illnesses & paid for surgeries only.
- 16.) Medical administration charges incorporated to the bill being issued by Lanka hospital will not be entertained under policy.
- 17.) Geographical area is in Sri Lanka.(Contracted or Treatment taken)
- 18.) External appliances are not covered.
- 19.) All Claims should be lodged to Sri Lanka Insurance Corporation Limited immediately after incurring the expenses but in no event later than 90 days.
- 20.) Standard Policies conditions and exclusions will be applied.

Illnesses Covered under Critical Illness Cover – Surgeries Only (Member Only)

- 1 Myocardial Infarction
- 2 Coronary Artery Surgeries
- 3 Strokes
- 4 Cancer (Radio & Chemo therapy treatment will be paid up to 50% from CIC limit)
- 5 Renal Failures
- 6 Major Organ Transplant (*The actual undergoing of transplantation as the recipient of a heart, lung, liver pancreas, small bowel, kidney or bone marrow.*)
- 7 Paralyzes
- 8 Multiple Sclerosis
- 9 Pulmonary Arterial Hypertension
- 10 Fulminant Viral Hepatitis
- 11 Heart Valve surgery
- 12 Surgery for a Disease of the Aorta
- 13 Chronic Liver Disease
- 14 Major Burns
- 15 Blindness
- 16 Deafness (Sickness-related)
- 17 Muscular Dystrophy
- 18 Loss of Speech.
- 19 Chronic Lung disease.
- 20 Apallic Syndrome
- 21 Angioplasty Cover
- 22 Benign Brain Tumor
- 23 Coma.
- 24 Motor Neuron Disease.

Annex V

**Sri Lanka Insurance Corporation Surgical and Hospitalization Insurance Approved Hospitals for
"Health Plus" (Direct Basis Claims)**

	<i>Name of the Hospital</i>	<i>Telephone No</i>
1	Apollo Hospitals (Pvt)Ltd Co.5	011-4530 000
2	The Central Hospital Col.10 (Asha)	011-4660 000
3	Asiri Hospitals - Colombo 05	011-4523 300
4	Asiri Surgical - Colombo 05	011-2368 407
5	Durdans Hospital Colombo 03 (Card is not entertained for Heart Centre)	011-2575 555
6	Jeewaka Hospital Padukka	011-2859 157
7	Kandy Nursing Homes Ltd Kandy	081-2222 041
8	Lake Side Hospitals Kandy	081-2223 466
9	Mc-Carthy Hospital Colombo 07	011-2693 953
10	Medical Center Ltd Dehiwela	011-2717 979
11	Winsetha Hospital (Fomer Medicare Hospital) - Colombo 10	011-2667 297
12	Nawaloka Hospital Colombo 02	011-5577 111
13	New Delmon Hospital-Colombo 06	011-2586 893
14	Oasis Hospital Ltd Colombo 05	011-5506 000
15	Pannipitiya Nursing Home	011-2840 384
16	Suleiman Hospital-Colombo 14	011-2422 184
17	SuwaSewana Hospital Kandy	081-2236 404
18	Katukurunda Clinic & Nursing	034-2222 212
19	Leesons Hospital - Ragama	011-2951 488
20	Joseph Fraser Hospital - Col 7	011-2556 338
21	New Philip Hospitals Kalutara	034-2222 886 034-2222 888
22	Panadura Nursing Home	038-2236 300
23	Sri Jayewardanapura General Hospital	011-2778 610-12
24	Ninewells Care Hospital (Pvt) Ltd.	011-4520 999
25	Kandy Private Hospital	081-2234 338
26	Royal Hospital Wellawatte	011-2597 565
27	Golden Key ENT Hospital	011-2880 288
28	St. Joseph Hosp. Negombo	031-2225 474
29	Family Care Kalutara	034-2229 944
30	Ave Maria Hospital-Negombo	031-2232 670 031-2222974
31	Mobile Medicare Hospital Kandy	081-2203366 081-4470366
32	Hemas Hospital Ltd.Wattala	011-7888 888
33	Arogya Hospital Ltd -Gampaha	033-2224592
34	Siddalepa Ayurveda Hospital-Mt.Lavinia	011-2721365
35	Viweka Hospital -Veyangoda	033-2295965
36	Gampaha Co-operative Hospital – Gampaha	033-2222201
37	Sethma Hospital-Gampaha	033-2233501
38	Mohotti (Pvt) Hospital -Matara	041-2222737
39	Matara Co-operative -Matara	041-2222 084
40	Asiri Hospital Matara (Pvt) Ltd -	041-4390 900 041-2223180
41	Cooprative Hospital- Kurunegala	037-2222 464
42	Seth Sewana Hospital -Kurunegala	037-2232 365
43	Nawinne Hospital -Kurunegala	037-2223 111
44	Co-oprative Hospital Galle	091-2224424
45	Ruhunu Hospital-Karapitiya Galle	091-2234 059
46	Hemas Southern Hospital-Galle	091-2222 187
47	Miracle Hospital -Kurunegala	037-7390 350
48	Dr. Neville Fernando Teaching Hospital -Kaduwela	011-2407608

Unapproved Hospitals for both Cashless and reimbursement

	<i>Name of the Hospital</i>
1	BorellaPvt Hospital
2	Kolonnawa Nursing Home
3	Nugegoda Nursing Home
4	Horana Pvt Hospital
5	Suwa Shanthi Hospital - Anuradhapura
6	Navodya Hospital - Embilipitiya

EXCLUSIONS

This Policy shall not extend to provide benefit for expenses:

- 1) Occasioned by or happening through. Attempted Suicide (whether felonious or not) Alcoholism, Venereal Disease, Psychotic Mental or nervous disorders leading to insanity.
- 2) An Insured Suffering from any physical defect or infirmity which existed prior enrollment under the Policy unless notice is given to and accepted by the Corporation
- 3) Participation in Strikes or Riots.
- 4) Services of a non-medical nature provided by a hospital such as television, telephone, telex services, extra diet, radios and other similar facilities.
- 5) Congenital Conditions.
- 6) Arising as a result of cosmetic surgery, cosmetic treatment and plastic surgery other than in the Event of an accidental injury
- 7) Medical or chemical contraceptives methods of Birth control treatment , infertility, sub-fertility,
- 8) Expenses for Lasic and Laser Treatment.

Cost and Benefit of the Group Term Life Assurance (Loan Protection)**Cost**

Age Category	Annual Premium Per Member (Rs.)			
	Option I	Option II	Option III	Option IV
18 – 30	1,915	3,825	5,740	7,650
31 – 35	1,930	3,870	5,810	7,745
36 – 40	2,125	4,245	6,370	8,490
41 – 45	2,390	4,785	7,180	9,570
46 – 50	2,960	5,920	8,875	11,835
51 - 55	4,020	8,040	12,060	16,085
56 – 60	6,050	12,110	18,165	24,220
61 - 65	9,650	19,295	28,940	38,590

Benefits

	Sum Assured (Rs.)			
	Option I	Option II	Option III	Option IV
Life Cover	500,000	1,000,000	1,500,000	2,000,000
Accidental Death Benefit	500,000	1,000,000	1,500,000	2,000,000
Total Permanent Disability due to Accident	500,000	1,000,000	1,500,000	2,000,000
Total Permanent Disability due to Sickness	500,000	1,000,000	1,500,000	2,000,000
Partial Permanent Disability due to Accident	500,000	1,000,000	1,500,000	2,000,000

Note : If one of the above incident is taken place, sum assured will be paid to Member/Nominee.