
1. FAQ'S ABOUT MISUNDERSTANDINGS & MYTHS of JIO Health Plan

101. JIO is an Insurance Company ??

- NO

JIO is not an insurance company and does not give any type of insurance policy. JIO has ONLY played the role of a negotiator for benefits of its Shravak / Shravika members.

102. Who manages the Insurance Policy ?

The Policy is serviced by the following three entities:

a. Insurance Brokers (Like Prudent, Alliance, Almonds etc.)

Insurance brokers are the mediators and communicator between JIO and Insurance Company to receive best terms.

The responsibility of compiling the enrolment data, getting the policy endorsed, overview on claims process and resolving the queries of members is to be executed by the Insurance brokers. The Insurance brokers are the working hand of JIO for overall assistance for Group Policies.

b. Insurance Company (Like Govt. companies - National Insurance, Oriental Insurance

& Pvt. Companies - ICICI Lombard, Star Health etc.)

The Mediclaim policy is issued by the government approved Insurance Companies under the regulation of IRDA. Means, the premium collected from members is transferred to the Insurance Company. The Insurance company bears the risks of the policy and pays claims to the members as per terms of the policy.

c. Third Party Administrators - TPA (Like Paramount, Vipul TPA, IL Health Care, Health India etc)

The TPA's are appointed by the Insurance Companies for issuing members Medi-claim card, communicate terms to policy holders, prepare panel of hospitals for cashless, receiving claim documents, evaluating the documents and sanctioning the claim amount.

103. Is JIO is making profits from the policies?

- NO

JIO is not a profit making organization and is formed with a noble objective of serving its Shravak / Shravika members as well as society at large. Under the medical

insurance scheme, the premiums are collected individually from the members and then full amount is transferred as a group premium to the insurance company.

In-fact, Gurudev has inspired several Jain Shravaks to donate partly towards the premiums for members of their respective Samaj / Gnyati, who are financially troubled. Hence the health security could be availed by members of their Samaj at further discounted premiums. This will immensely help such families to face the additional financial burden of medical expenses, if any.

104. Is the Enrolment process very complex?

- NO

The enrolment process requires registering accurate details of the member and their family so that they do not face any trouble during the full year or at time of claim. The forms have been designed in a way to get the important details only and no unnecessary details are to filled.

105. Whether any person are available for help during enrollment or at the time of claim like Insurance Agents ?

JIO has not appointed/authorized any retail agents for selling / marketing its policies. When the enrolment for policy is started, JIO chapters and volunteers across India assist in the policy and enrolment process and spreading information of policy.

Because of the dedicated service of its volunteers, JIO has been able to reach huge number of Shravaks across India easily, without additional cost of hiring huge number of professionals.

And at the time of claim, members can take help / advice from helpline number of the insurance company. Alternatively, the members can also take help from any insurance agent because the process of claim is same as retail insurance policies.

106. Why so much importance is given to online process which may be difficult for a common man ?

JIO has pioneered in adopting to the latest technologies and online tool for your convenience and better service. The online enrolment process has the following major advantages:

- The data entry and processing time is saved.
- Accuracy of the data entered. This will also help in hassle free claims to the members.
- Enroll anytime from anywhere
- Immediate confirmation of enrolment completion.

107. Why JIO JAC number is compulsory ?

JIO JAC is required not only for group Mediclaim but also for other JIO schemes. JIO introduced the Jain Advantage Card (JAC) as a comprehensive scheme for benefit of its members through bulk buying.

JIO JAC is a unique and permanent identification for availing benefits of various schemes launched by JIO. Members can easily participate in the programs of JIO without having to provide various details every time.

JAC members can also connect with fellow Shravaks and take full advantage of the JIO Global network.

108. Why does the policy coverage starts very late after payment of insurance premium to JIO?

JIO Group Policy is negotiated with Insurance Company for the Best TERMS and Lowest PREMIUM based on a commitment of certain Minimum NUMBERS of enrollment.

For enrolling the members, messages are sent to Shravaks residing all over India. An enrolment window period is kept open for members to fill forms and make premium payment.

In case the numbers fall short of the minimum target, then the enrolment period is extended for few days.

After the closure of enrolment period, a list is compiled for all the forms received and payments are reconciled. Any errors found at the stage of validation and verification are corrected by contacting the members.

JIO pays the insurance premium to the Insurance Company through a single payment for all the members together for commencing policy. Upon payment, the Insurance cover period starts on common date for all the members. A single group policy document is issued in the name of JIO with the list of enrolled members and their families. On the basis of this TPA's issue Health Cards to all members with unique enrolment number for taking benefits of the policy.

The above process takes lot of time and efforts, hence the commencement of policy is after necessary period from the date of payment.

109. Why the Claims process is complex?

The process of filing claims for Cashless or Reimbursement with the Insurance Company is the same for JIO policy like any other retail mediclaim policies and in accordance with IRDA guidelines. In-fact, the norms for intimation of claim and the period for submitting claim documents after discharge are more beneficial in JIO Policy.

110. Whether insurance companies wrongly make huge deductions in JIO policy?

The deductions from claims are as per the terms of the policy and no ad-hoc deductions are made by the TPA or Insurance Company. The TPA and insurance company are bound by the guidelines of Insurance Regulatory & Development Authority.

However, in case any claims are wrongly deducted or disallowed, then the members can approach grievance department of Insurance company or Ombudsman department of IRDA. These actions are within the rights of every policy holder.

111. Whether JIO is responsible for answering queries on claims disbursement and deductions?

As clarified above, JIO is neither the Insurance Broker / Agent to the policy nor the company undertaking the insurance. JIO has played a role of Group Leader to the policy issuance.

All the queries regarding the claims process, status of claims, reasons of deductions from claim etc, are handled by the concerned Third Party Administrator (TPA).

In cases, where the grievances of the policy members remain unresolved by the TPA, the members can escalate such urgent / important issues with the JIO officials. JIO in turn will take up these issues with the concerned authorities through brokers. However the claims will be decided on merits of the case and within the terms of the policy.

112. Why has JIO not kept its word at the time of renewal by Increasing Insurance premiums and altering certain terms like amount cappings on specific treatments and Co-pays on pre-existing diseases?

The 1st phase of policy saw an overwhelming response due to unbelievably low premiums and attractive benefits which are not available in any other policies. The biggest benefit of the policy was to cover elder members and members who were already ill. Due to such extra ordinary benefits, our Shravak families received a claim of almost 350% over the premiums paid. As a result of the heavy claim ratio, the renewal premiums were bound to be increased extensively by the Insurance Companies.

However it was necessary for JIO to keep the premium low and also provide suitable terms to members who have not lodged any claim. It is also necessary that group policy has a good share of healthy families to keep the claim ratio balanced along-with affordable premiums year after year. This will help to serve more number of needy and sick people with stable premium year after year.

Accordingly JIO had renegotiated the terms of policy with insurance company and achieved a group policy with balanced terms and appropriate premiums which were still better than the market rates.

The JIO mediclaim policy still continues to be hugely beneficial to the middle class families and the senior citizens who otherwise were not able to take benefit out of medical insurance.

113. Why do Insurance Companies, brokers or TPA change at time of each renewal?

Each phase of policy had been negotiated with different insurance companies and the Best offer with maximum benefits and lowest premiums has been selected. The brokers and TPA change accordingly.

114. Why there are so many phases of the Shravak Arogyam policies with different terms?

JIO is a group policy and enrolment for each phase is open only for a limited period. The coverage for all members of one phase commences on same date.

Due to heavy demand for enrolments even after the closure of one phase, JIO had negotiated for further policy and launched subsequent phases as per the demand.

It is important to note that based on previous experiences, each new phases has always added new features.

115. When do the new phase are introduced and how will the Shravaks be informed about the same?

The introduction of new phases is not as per a planned schedule. JIO receives proposals from different insurance companies and if JIO is convinced about the

suitability of the terms, the new phase will be announced through SMS, e-mails and website to all JIO JAC members.

116. Why there are no proper contact details for call or email for filing grievances?

Why No one answers the call or proper answers are not received from helpline?

The responsibility for coordination of enrollment and claims has been assigned to the brokers by JIO. The brokers are required to maintain appropriate number of contact points in the form of helpline numbers and email id for helping members and resolving their queries.

For any help or assistance at the time of enrollment the members can contact the brokers helpline numbers.

For any assistance at the time of claim, the members can contact the TPA helpline. The details of contact numbers and emails for every phase of policies are available on JIO's website.

117. Whether the policy is a temporary affair or will continue for several years to come?

The JIO group policy is NOT a temporary affair and will continue in future like all other insurance policies.

However, as discussed earlier, the terms of the policies and the premiums are subject to change at the time of each renewal based on previous year experience & analysis.

JIO group Mediclaim policy was started with a noble vision of giving financial security in medical emergency to all the Shravak / Shravika families. Therefore JIO will never think about discontinuing the scheme.