

Annexure II

To

The Branch/ Divisional Manager,
BO/DO, United India Insurance Co. Ltd.
(Servicing Office Address)

Subject: LETTER OF UNDERTAKING

Claim no. _____ under Policy No. _____

Madam/ Sir,

It is to state:

1. We have purchased a Group Health Policy from United India Insurance covering our employees and their dependents for the period from _____ to _____.
2. We understand that many of the state governments have capped the treatment cost of Covid-19.
3. Many of our covered members are undergoing/ have undergone treatment for Covid-19. In some of the cases the Hospitals are charging in excess of the state government notified rates.
4. In all such cases, the insured persons are informing the State Health Authorities about the excess billing by the hospital and are seeking refund of the amount collected in excess.
5. We are hopeful that after the state government's intervention, the hospital shall refund the overbilled amount to the insured persons.
6. We agree that any such refund of the overbilled amount so received by our employees or their dependents shall be arranged to be remitted to United India Insurance Co. Ltd. (hereinafter mentioned as 'the Company') to the extent of the difference between the claim amount paid by the Company and the Covid-19 treatment cost as notified by the Government.
7. We shall arrange for this refunded amount to the Company immediately and not later than seven days from the date of receipt of the refund to insured person.

Signature

Name of the Official

Designation

Date:

Place: