GLOBALBenefit Solutions

User Manual for Employee

Web Portal & Mobile Application

Web portal Employee Login Page

Basic Requirement for Web Portal

Before you start make sure below mentioned requirements should be fulfilled.

White Listing : Below mentioned URL's & IP Address should be white listed

• URL's

> https://(systemgeneratedcorporatename).globalinsurance.co.in

- Email ID's :
 - noreply@globalinsurance.co.in
 - Eb.helpdesk@globalinsurance.co.in
- IP Address → URL IP: 180.179.20.30
- **Browser Compatibility**
- ✓ Internet Explorer: Version 10+
- ✓ All versions of chrome and Firefox

Hey !	Login with Password Login	GLOBAL Benefit
Welcome	Member D(Implayee D)(Ima) ID/Mobie Number (Fsubmitsed) Password * *Indicates Required Field <u>Forgot F</u>	ossion \$
	Login The E Login See See:	About (s) [Missiphility] [SiteSime]] sense and condition Destination of the sense of the sense of the sense Site Site Site Site Site Site Site Site



Employee Home Page

	test	DBAL Benefit
пеу:	Login with Password Login with OTP	You can use Login with OTP button to Login on portal
Welcome	Member ID/Employee ID/Email ID/Mobile Number (if submitted) * Password * *Indicates Required Field Forgot Password	Use Employee ID/Corporate Email ID/Mobile Number (If Submitted) and Password which you have received in Welcome Mailer from
	Login How to Login? view Demo	After Click on Login Button Select
	About Us Privacy Policy Disciain Glabal Insurance Brokers Put Ltd. A wing Kala Ghod Insura Download "GLOBAL BENEFIT SOLUTIONS" mobile app Regulated by Insurance Regulations of Do s 2017-2024, Insuran s 2017-2024, Insuran S 2017-2024, Insuran S 2017-2024, Insuran S 2017-2024, Insuran	A post All register mer void (CR) CRA a soft All register mer void (CR) CRA a soft All register mer void (CR) CRA tor Address and the soft of the s



Employee Profile Page – Change Password

		8 7	Dashboard » Change Passwo	ord	
			Change Pass	sword	
	Ameya Kamat (Employee)	Profile			
	Home	Change Password Logout	Enter new password *		
Click here to change	<u>แแ</u> Dashboard	د۸			
the password	🗅 Coverages	>	Confirm new password *		
	🗘 Wellness		Lowercase	Special character	
	& Support	>	Oppercase	Minimum 8 characters	
			Contains numbers	Passwords Match	_
				<u>Clear</u> Submit	
				↓	
			Please cheo requiremer password	ck the password nts and change your	



Employee Profile Page

Dashboard >> Profile		
Profile		
Personal Details		~
First Name *	Last Name *	
Ameya	Kamat	
Date of Birth *	Marital Status *	
06-Sep-1993	Married	\sim
	Gender *	
Mobile number	Male	\sim
* Indicator Required Field		
- Indicates Required Field		
	Sa	ve
	*	
	You can edit profile details by clicking here. Please update maximum details here. Only Personal details can be edited. Employee cannot edit his/her employment details.	



Customize Landing Page





Employee Dashboard



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Add Dependent

	ip Mediclaim Policy	2024-25 - T 🗸 🗸				Add Dependent		Here you can view and the dependent details
Dependent D	etails							
First Name	Last Name	Relation	Date Of Birth / Age	Gender	E-Card	Action		Here you can add and
, au	Dependent							
Fi	rst Name *	Last Name	•		Update t	he maximum:		
					details r given scr	nentioned in [.] een to add y	the our	
					dananda	nt		
R	elation *	Gender *	· · · · · · · · · · · · · · · · · · ·		depende			
R	elation *	Gender *	Ť		depende			



Policy Coverage Screen





Group Mediclaim Policy 2024-25	Voluntary Top up Policy - 2024-25	Voluntary Parents Policy loater policy) - 2024 Want to enroll, click o	Individua Parents-In- Policy (Floater Finology (Floater T DAYS	Il Voluntary Id Parents In _ eriod ends in 2 HOURS	To Opt for Top UP policy "Click Here
Select Policy: Voluntary Top up Po	olicy - 2024-25	View Policy Features			Click Here To Sele Policy to opt Top Policy
 Please make your selections Please also select Sum Insur 	s for members to be covered und red/ Premium.	der this Insurance Program.			Pead Important
 Family Definition – As per Ba 	se Policy.				Note
 Family Definition - As per Ba Select Family Defin Self 	se Policy. ition				Click in the check box to select
 Family Definition - As per Based Select Family Definition Self Sum Insured 	se Policy. ition ₹ 2,00,000	₹ 3,00,000	₹ 4,00,000	₹.5 ,60 ,000	Click in the chec box to select Premium for the respective Sum
Family Definition - As per Ba Select Family Defin Self Sum Insured Please Select Premium From	se Policy. ition ₹ 2,00,000 Below	₹ 3,00,000	₹ 4,00,000	₹.5,80,000	Click in the chect box to select Premium for the respective Sum Insured
Family Definition - As per Ba Select Family Defin Self Sum Insured Please Select Premium From	se Policy. ition ₹ 2,00,000 Below ₹ 4,332	₹ 3,00,000 ₹ 4,982	₹ 4,00,000 ₹ 5,729	₹ 5,00,000 ₹6,589	Click in the chec box to select Premium for the respective Sum Insured
Family Definition - As per Ba Select Family Defin Self Sum Insured Please Select Premium From	se Policy. ition ₹ 2,00,000 Below ₹ 4,332	₹ 3,00,000 ₹ 4,982	₹ 4,00,000 ₹ 5,729	₹.5,80,000 ₹ 6,589	Click in the chec box to select Premium for the respective Sum Insured
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Voting for Voluntary Top Up Policy





Voting	for	Individua	 Parents	Policy
				· eneg

2024-25	Voluntary Top up Policy - 2024-25	Voluntary Parents Policy (Floater policy) - 2024	Voluntary Parents-I Laws Policy (Floate	r Parents and I	/oluntary Parents In _ GPA P	Policy	
					Enrolment period ends 7 2 DAYS · HOURS		
"This	is a Voluntary po	licy, If you want to	enroll, click or	n Enroll butto	n below."		To Vote for Par policy "Click He
		Click Here T	o Enroll				L
Select Policy: Individu	al Voluntary Parents and Parent	ts In Law Policy - 2024-25	~				
Note Please make your s Please also select s Max Family Size: 4 Select Family E	selections for members to b Sum Insured/ Premium for e Definition	be covered under this Insurar bach member.	nce Program.				Click Here To Select Relation to add in
V Mother	Father 🗸 Mother-In-	Law Father-In-Law					Parent policy
Mother V	Father Mother-In-	Law Father-In-Law ⁴ ₹ 2,00,000	₹ 3,00,000	₹ 4,00,000	₹ 5,00,000		Parent policy
Mother Sum Insured Please Select Premium	Father Mother-In-	Law Father-In-Law ⁴ ₹ 2,00,000	₹ 3,00,000	₹ 4,00,000	₹ 5,00,000		Parent policy
Mother Control Mother Mother	Father Mother-In-	Law Father-In-Law ⁴ ₹ 2,00,000 ₹ 18,096	₹ 3,00,000 ₹ 21,094	₹ 4,00,000 ₹ 23,306	₹ 5,00,000 ₹ 26,104		Parent policy Select Sum Insured
Mother Sum Insured Please Select Premium Mother Father	Father ✓ Mother-In-	Law Father-In-Law ⁴ ₹ 2,00,000 ₹ 18,096 ₹ 18,096	₹ 3,00,000 ₹ 21,094 ₹ 21,094	₹ 4,00,000 ₹ 23,306 ₹ 23,306	₹ 5,00,000 ₹ 26,104 ₹ 26,104	•	 Parent policy Select Sum Insured all the parents
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Mother Control of the second s	Father Mother-In- 7 1,00,000 7 P From Below 7 7 16,960 7 7 16,960 7 7 16,960 7 7 16,960 7	Law Father-In-Law ⁴ 7 2,00,000 7 18,096 7 18,096	₹ 3,00,000 ₹ 21,094 ₹ 21,094 ₹ 21,094 ₹ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094	₹ 4,00,000 ₹ 23,306 ₹ 23,306 ₹ 23,306	₹ 5,00,000 ₹ 26,104 ₹ 26,104 ₹ 26,104 ₹ 26,104	•	Parent policy Select Sum Insured all the parents
Mother Control	Father Mother-In- ₹ 1,00,000 From Below \$\$\vec{16,960}\$ \$\$\vec{16,960}\$ \$\$\vec{16,960}\$ \$\$\$\vec{16,960}\$ \$\$\vec{16,960}\$ \$	Law Father-In-Law ⁴ 7 2,00,000 7 18,096 7 1	₹ 3,00,000 ₹ 21,094 ₹ 21,094 ₹ 21,094 ₹ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 10,311.48	र 4,00,000 र 23,306 र 23,306 र 23,306 र 23,306	₹ 5,00,000 ₹ 26,104 ₹ 26,104 ₹ 26,104		 Parent policy Select Sum Insured all the parents
Mother Control	Father Mother-In- ₹ 1,00,000 From Below ₹ 16,960 ₹ ₹ 16,960 ₹ ₹ 16,960 ₹ ₹ 16,960 ₹	Law Father-In-Law ⁴ 7 2,00,000 7 18,096 7 18,096 8 18,096 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	₹ 3,00,000 ₹ 21,094 ₹ 21,094 ₹ 21,094 इ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 21,094 \$ 10,311.48	₹ 4,00,000 ₹ 23,306 ₹ 23,306 ₹ 23,306	₹ 5,00,000 ₹ 26,104 ₹ 26,104 ₹ 26,104 ₹ 26,104	•	Parent policy Select Sum Insured all the parents Click Here on
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Voting for Individual Parents Policy

	Mother	[
First Name *	Last Name *	Update the maximum
Gender *	Date of Birth *	given screen and "SA"
Female	Please update Date Of Birth as per Government ID proof	the details.
	Rack Previous Save	
Confirm	×	
Confirm I / We hereby agree an Third Party Administrat including but not limitir	K d authorize, Global Insurance Brokers Pvt. Ltd. , the Insurance Company and its or [TPA] to handle , process and use my data for Insurance related work, ng to processing, analysis, soliciting etc.	Click here on I/We
Confirm I / We hereby agree an Third Party Administrat including but not limitir	X d authorize, Global Insurance Brokers Pvt. Ltd. , the Insurance Company and its or [TPA] to handle , process and use my data for Insurance related work, ng to processing, analysis, soliciting etc.	Click here on I/We Confirm Button
Confirm I / We hereby agree an Third Party Administrat including but not limitir	d authorize, Global Insurance Brokers Pvt. Ltd. , the Insurance Company and its or [TPA] to handle , process and use my data for Insurance related work, ng to processing, analysis, soliciting etc. Cancel I/We Confirm	Click here on I/We Confirm Button
Confirm I / We hereby agree an Third Party Administrat including but not limitir	d authorize, Global Insurance Brokers Pvt. Ltd. , the Insurance Company and its or [TPA] to handle , process and use my data for Insurance related work, ng to processing, analysis, soliciting etc. Cancel I/We Confirm	Click here on I/We Confirm Button
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Group Mediclaim Policy 2024-25	Voluntary Top up Poli 2024-25	cy - Voluntary Parents (Floater policy) -	Policy Voluntary Pare 2024– Laws Policy (F	nts-In- Individual V loater _ Parents and F	oluntary G Parents In CEnrolment period er 7 2	PA Policy	
"This	is a Voluntary p	colicy, If you wa	nt to enroll, click Here To Enroll	on Enroll button	below."	RS	To Vote for Parent policy "Click Here'
Select Policy: Individua	al Voluntary Parents and Pa	rents In Law Policy - 2024-29 View Po	5 V				
Please make your s	elections for members t	to be covered under this	Insurance Program				
Please make your s Please also select S Max Family Size: 4 Select Family De Mother V F	elections for members t um Insured/ Premium fo efinition Father	to be covered under this or each member.	Insurance Program.				Click Here To Select Relation to add in Parent policy
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 Please make your s Please also select S Max Family Size: 4 Select Family De Mother Sum Insured Please Select Premium F	elections for members t um Insured/ Premium fo efinition Father ₹ 1,00,000 rom Below ₹ 29,276	to be covered under this or each member. ₹ 2,00,000 ₹ 31,666	Insurance Program. ₹ 3,00,000 ₹ 36,416	₹ 4,00,000 . ₹ 40,787	₹ 5,00,000 ₹ 45,679		Click Here To Select Relation to add in Parent policy Select Sum Insured for all the parents
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GLOBAL Benefit

Voting for Individual Parents Policy

	Mother	
First Name *	Last Name *	Update the maximum
Gender *	Date of Birth *	given screen and "SA"
remaie	Please update Date Of Birth as per Government ID proof	the details.
	Back Previous Save	
Confirm	×	
	X	
Confirm I / We hereby agree and Third Party Administrato	A authorize, Global Insurance Brokers Pvt. Ltd. , the Insurance Company and its or [TPA] to handle , process and use my data for Insurance related work,	Click boro on I/Ma
Confirm I / We hereby agree and Third Party Administrato including but not limiting	A authorize, Global Insurance Brokers Pvt. Ltd. , the Insurance Company and its or [TPA] to handle , process and use my data for Insurance related work, g to processing, analysis, soliciting etc.	Click here on I/We Confirm Button
Confirm I / We hereby agree and Third Party Administrato including but not limiting	X d authorize, Global Insurance Brokers Pvt. Ltd. , the Insurance Company and its or [TPA] to handle , process and use my data for Insurance related work, g to processing, analysis, soliciting etc.	Click here on I/We Confirm Button
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Group Mediclaim Policy 2024-25	Voluntary Top up Poli 2024-25	cy - Voluntary Parents (Floater policy) -	Policy Voluntary Pare 2024– Laws Policy (F	nts-In- Individual V loater _ Parents and F	oluntary G Parents In CEnrolment period er 7 2	PA Policy	
"This	is a Voluntary p	colicy, If you wa	nt to enroll, click Here To Enroll	on Enroll button	below."	RS	To Vote for Parent policy "Click Here'
Select Policy: Individua	al Voluntary Parents and Pa	rents In Law Policy - 2024-29 View Po	5 V				
Please make your s	elections for members t	to be covered under this	Insurance Program				
Please make your s Please also select S Max Family Size: 4 Select Family De Mother V F	elections for members t um Insured/ Premium fo efinition Father	to be covered under this or each member.	Insurance Program.				Click Here To Select Relation to add in Parent policy
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 Please make your s Please also select S Max Family Size: 4 Select Family De Mother I Family De Mother I Family De Sum Insured Please Select Premium F Interview For Selected M \$57,286 Total Premium Including GST \$67,597,48 Employee Shore 	elections for members t um Insured/ Premium fo efinition Father ₹ 1,00,000 rom Below ₹ 29,276	to be covered under this or each member. ₹ 2,00,000 ₹ 31,666	Insurance Program. ₹ 3,00,000 ₹ 36,416 GST (18 %) ₹ 10,311.48	₹ 4,00,000 `₹ 40,787 ✓	₹ 5,00,000 ₹ 45,679		Click Here To Select Relation to add in Parent policy Select Sum Insured for all the parents Click Here on Proceed button

GLOBAL Benefit

De-Vote / De-selection for Parents Policy

Dashboard	Velopher	un Dellau	December Delle	Valuation Departs					
Group Mediclaim Polic 2024-25	y Voluntary Top 2024-	25 (Floate	ary Parents Policy er policy) - 2024	Voluntary Parents-In- Laws Policy (Floater	Individual Voluntar Parents and Parents	y In _	GPA Policy		
					(Enrolment per 7 DAYS	iod ends in 2 HOURS		To De- Vote for Parents policy "Click
"This	s is a Volunt	arv policy, If v	ou want to e	enroll, click on E	nroll button be	low."			Here"
		, po,,,	Click Here To	Enroll					L
Select Family Defi	nition								
Mother Father Mother-In-Law Father-In-Law									To De- Vote for Parents
									Insured " And click on
Sum Insured	₹ 1,00,000	₹ 2,00,000	₹ 3,00,00	00 ₹ 4,00,000) ₹ 5,00,000				PROCEED button.
Please Select Premium Fro	om Below					\leq		X	
Mother	₹ 16,960	₹ 18,096	₹ 21,094	₹ 23,306	2 26,104				
Total Premium For Selected Memb	ers		GST (18 %)						
₹ 0			₹ 0						
Total Premium Including GST									
Employee Share									
₹ 0									
				Back	Proceed				
rm.			×						
			<u>^</u>						
Sure You Want To Unvote?				Click on	YES"				
			No Yes						
					You Have	Opted C	out Of Th	e Voluntary	Policy Sucessfully!
	You'll recei	ved this mes	sage 🔶					,	, ,
	L								

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Solutions

Helpdesk and Useful Link





Mobile Application



Mobile Application Employee Login Page

Basic Requirement for Mobile Application

Before you start make sure below mentioned requirements should be fulfilled.

Android Version:

- Current built version 1.0.0
- Compatibility : Requires Android Versions 4.4 or later

iOS :

- Current built version 1.0.0
- Compatibility : Requires iOS 7.0 or later. Compatible with iPhone, iPad and iPhone





Employee Login Page

Contractions	
Corporate Name Orgonite Name Username Image: State of the stat	Use below mentioned details from mail to log in mobile application Your account details to access "My Benefits" on your mobile devices are: Corporate Name: geappliances Username: ganesh.gurav@globalinsurance.co.in Password: X79PBCXhjju
Forgot Password ?	Regular user can reset password by selecting forgot password option Click login button to proceed further
Development Authority of India. License Number: 119. License Validity: 03/03/2015 to 02/03/2018, CIN: U67200MH2002PTC137954, Insurance is subject matter of solicitation Version 1.0 ©2016, Insurance Assist. All rights reserved.	



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Employee Dashboard





View Policy Features

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By clicking on this link, Employee can view GMC, GPA and GTL policy features.

My Policies

111200/48/2016/322 Group MediClaim ₹1,500,000.00 01 Aug 2015 - 30 Jul 2016 The Oriental Insurance Co. Ltd., N...

GL000388-58470828

Group Term Life 01 Aug 2015 - 30 Jul 2016 Future Generali India Life Insuran...

₹8,500,000.00

←

F

Policy Number

Policy Type

Insurance Company : Co. Ltd., New Delhi Insurance Company : The Oriental Insurance Branch Co. Ltd. - A-25/27, , New Delhi Policy Start Date 01 Aug 2015 : Policy End Date 30 Jul 2016 : Third Party : Paramount Health Services (TPA) Pvt. Ltd. Administrator Family Floater : Yes Family Definition Employee + Spouse + : Child 1 + Child 2 + Parents Age Limit For Parents : NA Age Limit For NA : Children View Top-Up

Policy Details

111200/48/2016/322

The Oriental Insurance

Group MediClaim

Insurance Details

:

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You will get this screen after clicking the mentioned link

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Add Dependent

	← Depende	nts	← Add Dependent			
	Search	٩	Enter your Dependent details here:			
Employee can view his	Abc Gadekar	å Female	🛔 First Name			
	₩ 01 May 1978	• 401107	Last Name			
			Select Relations	hip 🔻		
			🚉te Of Birth	<u></u>		
			* O †			
			Q PIN Code			
			Email-ID			
			Mobile Number			
Employee can add his dependent by adding require	Add Depend	lents	🗙 Cancel Save 🖺			
details which is						



mentioned in aside screenshot ----

Add Nominee





My Claims





Helpdesk and Useful Link





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Thank you!

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