

**Maternity coverage under Employees' State Insurance (ESI) Scheme**

Step-by-step process to avail maternity benefits:

1. Confirm eligibility to claim maternity benefits under ESI
  - Check your insurance status (Entitlement to maternity Benefits) and contribution history via the ESI portal (<https://www.esic.in>) or ask your HR/ESI nodal officer to assist you in checking this.
  - Entitlement to maternity benefits is linked to period of service and minimum 70 days ESI contributions being paid in two contribution periods preceding the expected date of pregnancy/pregnancy and/or any other term as may be made applicable by Employees' State Insurance Corporation (ESIC). There are two half yearly contribution periods in a year: April to September and October to March.
2. Notify employer and obtain documentation
  - Inform the employer/HR of pregnancy and expected date of delivery; employers handle initial claims processing under ESI rules.
  - Obtain necessary employer endorsements and return-to-work clearances when required.
3. Obtain medical certification
  - Get a medical certificate from an ESIC-recognized medical officer (ESI hospital/dispensary) or a government/recognized private practitioner if permitted by the local ESIC office.
  - For pregnancy: certificate stating expected date of delivery or confirmation after delivery.
  - For miscarriage: clinical certificate confirming the event and dates.
4. Lodge the claim with the ESI Hospital/Insurance Medical Officer
  - Visit the designated ESI hospital/dispensary where you are registered (or the one your employer directs).
  - Submit required documents: Employee's IP number, identity proof, employer certificate, pregnancy/ delivery medical certificate, discharge summary (post-delivery), and any annexures demanded by the local office.
  - For cash benefit (maternity benefit payment): submit the prescribed maternity claim form (Form MAT or as per local format) to the ESI medical authorities. Many states/regions use an online submission process linked to employer payroll.
5. Employer's role and reimbursement (where applicable)
  - Employer forwards lodged claim to ESIC/Designated Authority for approval.

- After ESIC approval, benefit is disbursed — either directly to the insured woman's bank account or routed via the employer as per ESIC(local practice).

#### 6. Benefit types and payment

- Cash maternity benefit: 100% of average daily wage for the period of actual absence for pregnancy (usually 26 weeks for normal delivery, 6 weeks for miscarriage/medical termination; extended in case of certain conditions like disabled child or multiple births as per latest ESIC rules).
- Medical care: Full medical care for pregnancy and delivery at ESI hospitals or cashless treatment at empanelled hospitals as per terms of ESIC.
- For adoption or commissioning mother: benefits differ; check current ESIC provisions (adoption commissioning rules are updated periodically).

#### 7. Follow-up and claim tracking

- Keep copies of all submitted documents, receipt acknowledgements, and IP number.
- Track claim status via ESIC portal or through employer/ESI nodal officer.
- If delayed beyond statutory timelines, escalate to the Grievance Redressal through ESIC's regional office or online grievance system.

#### Common documents required (may vary by region)

- ESIC IP number / ESI Card
- Employer certificate / Form as required by ESIC
- Identity proof (Aadhaar, PAN, passport, etc.)
- Medical certificate of pregnancy / delivery / miscarriage / termination
- Discharge summary and birth certificate (for child-related claims)
- Bank details for direct benefit disbursement

#### Practical tips

- Start the process early: inform employers and visit ESIC medical facilities well before the expected delivery date to ensure contribution checks and documentation are in order.
- Use ESIC online services where available to pre-check contribution history and submit complaints.
- Retain originals of medical records and copies of all forms submitted; photograph/date-stamp receipts when possible.
- For complicated cases (maternity beyond typical durations, disputes over eligibility), contact the regional ESIC office or consult a labour/ESI specialist.