

COMPREHENSIVE HEALTH INSURANCE POLICY

Policy Number: HI-2024-001234

Insurance Provider: HealthCare Insurance Ltd.

Issue Date: January 1, 2024

Policy Term: Annual (Renewable)

SECTION 1: DEFINITIONS

Insured Person: The individual(s) named in the policy schedule whose medical expenses are covered under this policy.

Pre-existing Condition: Any condition, ailment, injury, or disease that existed during the 48 months prior to the first policy issuance date.

Hospitalization: Admission to a hospital as an inpatient for a minimum continuous period of 24 hours for medical treatment.

Network Hospital: Hospitals that have a cashless arrangement with the insurer.

Room Rent: The amount charged by the hospital for room accommodation per day.

SECTION 2: ELIGIBILITY CRITERIA

2.1 Age Limits

- Minimum Entry Age:** 18 years (as of policy commencement date)
- Maximum Entry Age:** 65 years (as of policy commencement date)
- Dependent Children:** 91 days to 25 years
- Renewal:** Lifelong renewal available after initial enrollment

2.2 Sum Insured Options

Available coverage amounts: ₹3,00,000 | ₹5,00,000 | ₹10,00,000 | ₹25,00,000 | ₹50,00,000

SECTION 3: WAITING PERIODS

3.1 Initial Waiting Period

30 days from policy commencement date for all illnesses and diseases except accidental injuries.

Exception: Accidental injuries are covered from Day 1.

3.2 Pre-existing Disease Waiting Period

Pre-existing conditions are covered after **48 months** of continuous coverage.

3.3 Specific Disease/Procedure Waiting Period

The following conditions are covered after **24 months** of continuous coverage:

- Joint replacement surgery (knee, hip, shoulder)
- Cataract surgery
- Benign prostatic hypertrophy
- Hernia (all types)
- Hysterectomy
- Stones in kidney, bladder, urinary tract
- Sinusitis and related disorders
- Piles, fissure, and fistula
- Hydrocele
- Congenital internal diseases
- Non-infective arthritis
- Gastric and duodenal ulcers

3.4 Maternity Waiting Period

Maternity benefits (normal/caesarean delivery) are covered after **36 months** of continuous coverage.

SECTION 4: COVERAGE & BENEFITS

4.1 In-Patient Hospitalization

Covers expenses for:

- Room, boarding, and nursing charges (up to 1% of sum insured per day)
- Surgeon, anesthetist, medical practitioner fees
- Intensive Care Unit (ICU) charges
- Surgical procedures and operations
- Medicines, drugs, diagnostic tests
- Blood, oxygen, operation theatre charges
- Medical implants (as per policy terms)

4.2 Pre-Hospitalization Expenses

Covered for **60 days** prior to hospitalization for the same condition.

4.3 Post-Hospitalization Expenses

Covered for **90 days** after discharge for the same condition.

4.4 Day Care Procedures

Covers 150+ day care procedures that don't require 24-hour hospitalization, including:

- Chemotherapy
- Dialysis
- Radiotherapy
- Lithotripsy
- Tonsillectomy
- And other approved procedures

4.5 Ambulance Charges

Up to ₹2,000 per hospitalization.

4.6 Organ Donor Expenses

Expenses related to organ donor covered up to sum insured.

4.7 Annual Health Check-up

Free annual health check-up for each policy year completed without claims.

- Sum Insured \geq ₹5,00,000: Up to ₹1,000
- Sum Insured \geq ₹10,00,000: Up to ₹2,000

4.8 Restoration of Sum Insured

If sum insured is exhausted, it will be restored 100% once during the policy year for unrelated illnesses.

SECTION 5: EXCLUSIONS

5.1 Permanent Exclusions (Never Covered)

5.1.1 Cosmetic and Aesthetic Procedures

- Cosmetic surgery, plastic surgery (except for medically necessary reconstructive surgery following accident or cancer)
- Aesthetic treatments
- Hair transplant, wigs, hairpieces
- Obesity treatment, weight reduction programs
- Laser treatment for refractive errors

5.1.2 Dental Treatment

- Dental procedures unless necessitated by accidental injury to natural teeth
- Dental implants, dentures, dental prosthesis

5.1.3 Specific Conditions

- Congenital external diseases

- Infertility and assisted reproduction (IVF, GIFT, etc.)
- Contraception, sterilization, vasectomy
- Venereal diseases, sexually transmitted diseases
- HIV/AIDS related conditions
- Self-inflicted injuries, suicide attempts
- War, invasion, foreign enemy acts
- Nuclear contamination
- Use of intoxicating substances
- Injuries while participating in hazardous sports (mountaineering, racing, etc.)

5.1.4 Alternative Medicine

- Treatment taken from practitioners of alternative medicine (Ayurveda, Homeopathy, Unani, Siddha) unless hospitalized
- Naturopathy, acupuncture, magnetic therapy

5.2 General Exclusions

- Treatment taken outside India
- Non-allopathic treatment (unless hospitalized for minimum 24 hours)
- Expenses not related to medical treatment
- Rest cure, rehabilitation, respite care
- Spectacles, contact lenses, hearing aids
- Vitamin and mineral supplements (unless part of treatment)
- Charges for email, phone, television, internet
- Pharmacy bills not connected with hospitalization

5.3 Sub-limits and Co-payment

- **Room Rent Limit:** 1% of sum insured per day (or actual, whichever is lower)
- **ICU Charges:** 2% of sum insured per day
- **Senior Citizens (60+ years):** 20% co-payment on all claims

SECTION 6: CLAIM PROCEDURES

6.1 Cashless Claims

1. Obtain pre-authorization from network hospital
2. Submit health card and photo ID

3. Hospital sends treatment details to insurer
4. Approval within 2-6 hours for planned procedures
5. Settle only co-payment and non-covered items

6.2 Reimbursement Claims

Submit within **30 days** of discharge:

- Completed claim form
- Original hospital bills and receipts
- Discharge summary and case papers
- Investigation reports
- Doctor's prescriptions
- Payment receipts
- Any other documents as requested

6.3 Claim Settlement Timeline

- **Cashless:** Approved within 6 hours for emergencies
 - **Reimbursement:** Processed within 30 days of receiving complete documents
-

SECTION 7: POLICY CONDITIONS

7.1 Premium Payment

- Annual premium must be paid before policy inception/renewal date
- Grace period of 15 days for renewal
- Policy lapses if premium not paid within grace period

7.2 Renewal

- Policy renewable for lifetime
- Continuous renewal without break maintains waiting period benefits
- Premium may increase with age band changes

7.3 Disclosure Requirements

- Insured must disclose all pre-existing conditions, past medical history
- Material misrepresentation may lead to claim rejection or policy cancellation

7.4 Free Look Period

30 days from policy receipt to review and return for full refund if dissatisfied.

7.5 Portability

Policy can be ported to another insurer with credit for waiting periods served.

7.6 Geographical Coverage

Coverage valid only for treatment taken within India.

SECTION 8: SPECIAL CONDITIONS

8.1 Medical Examination

May be required based on:

- Age of insured person
- Sum insured selected
- Medical history

8.2 Modification of Terms

Insurer reserves right to modify terms and conditions with 30 days notice.

8.3 Cancellation

- By Insured: Anytime with written notice (premium refund on pro-rata basis)
- By Insurer: For non-payment of premium, fraud, material misrepresentation

8.4 Grievance Redressal

Contact Customer Care: 1800-XXX-XXXX | grievances@healthcareinsurance.com Response within 15 days. May escalate to Insurance Ombudsman if unresolved.

SECTION 9: CONTACT INFORMATION

Head Office:

HealthCare Insurance Ltd.
Tower A, Insurance Plaza
Mumbai - 400001
India

Customer Care: 1800-123-4567

Email: support@healthcareinsurance.com

Website: www.healthcareinsurance.com

Toll-Free Claims Helpline: 1800-987-6543 (24x7)

SECTION 10: REGULATORY INFORMATION

IRDAI Registration Number: 123

Policy Version: v2024.1

UIN: HCIHLIP24001V012024

This policy is subject to the Insurance Regulatory and Development Authority of India (IRDAI) regulations and guidelines.

Note: This is a standard policy document. Specific terms may vary based on individual policy selection. Please read all terms and conditions carefully before purchase.

Issued Date: January 1, 2024

Authorized Signatory: HealthCare Insurance Ltd.