

A1. Hospitalization Expenses

- **Coverage:** Medical Expenses up to the Sum Insured for:
 - Room rent, boarding expenses
 - Nursing
 - Intensive Care Unit (ICU)
 - Consultation fees
 - Anesthesia, blood, oxygen, operation theatre charges, surgical appliances
 - Medicines, drugs, and consumables
 - Diagnostic procedures
 - Prosthetic and other devices or equipment implanted internally during surgery
- **Note:** Maximum liability includes Hospitalization expenses (A1), Pre-hospitalization (A2), Post-hospitalization (A3), Road Ambulance (A4), Day Care expenses (A6), and Ayurvedic/Homeopathic Hospitalization Expenses (A12) within the hospitalization Sum Insured.

A2. Pre-Hospitalization

- **Coverage:** Medical Expenses incurred 60 days before hospitalization for the same illness/injury, provided the hospitalization claim is accepted under A1.
- **Note:** Maximum liability as per A1.

A3. Post-Hospitalization

- **Coverage:** Medical Expenses incurred 90 days after discharge, for the same illness/injury, provided the hospitalization claim is accepted under A1.
- **Note:** Maximum liability as per A1.

A4. Road Ambulance

- **Coverage:** Reimbursement of expenses for ambulance services in emergencies, provided the hospitalization claim is accepted under A1.
- **Note:** Maximum liability as per A1.

A5. Air Ambulance

- **Coverage:** Expenses for emergency transportation via airplane/helicopter, subject to the limit in the policy schedule.
- **Exclusions:** Return transportation to home by air ambulance.

A6. Day Care Procedures

- **Coverage:** Medical expenses for Day Care procedures/surgeries taken as inpatient, not in outpatient departments.
- **Note:** Maximum liability as per A1.

A7. Outpatient Expenses

- **Coverage:** Outpatient expenses for:
 - Specialist consultations
 - Investigations prescribed by a specialist
 - Medicines prescribed by a specialist
 - Dental procedures (Root Canal Treatment, Extractions)
 - Consultations for psychiatric disorders
- **Note:** Maximum liability as specified in the policy schedule.

A8. Organ Donor Expenses

- **Coverage:** Lump sum payment for organ donor treatment, provided the donor is compliant with legal requirements and the claim is accepted under A1.
- **Note:** Lump sum benefit as per policy schedule.

A9. Recovery Benefit

- **Coverage:** Lump sum payment if hospitalization exceeds 7 days, provided the hospitalization claim is accepted under A1.
- **Note:** One-time benefit per policy period.

A10. Physiotherapy Expenses

- **Coverage:** Expenses for physiotherapy sessions (up to 10 sittings per illness/injury) prescribed by a

specialist for

musculoskeletal/neurological/systemic diseases.

- **Conditions:** Treatment must be in a hospital; 90-day waiting period applies during the first policy year.
- **Note:** Maximum up to the specified limit as per the plan opted.

A11. Sum Insured Reinstatement Benefit

- **Coverage:** Reinstatement of 100% of the hospitalization Sum Insured if exhausted during the policy period.
- **Conditions:** Triggered only after the full Sum Insured is exhausted and only for subsequent claims.
- **Note:** Applicable only once per policy period.

A12. Ayurvedic & Homeopathic Treatment Hospitalization Expenses

- **Coverage:** Medical expenses for Ayurvedic/Homeopathic treatment if hospitalized for at least 24 hours.
- **Conditions:** Treatment must require inpatient admission and be in a government hospital.
- **Note:** Maximum liability as per A1.

A13. Maternity Expenses

- **Coverage:** Medical expenses for delivery (including caesarean) and lawful termination of pregnancy.
- **Conditions:** Coverage for a maximum of 2 deliveries/terminations during the lifetime, subject to a 24-month waiting period.
- **Note:** Coverage limited to the amount specified in the policy schedule.

A14. New Born Baby Cover

- **Coverage:** Medical expenses for the newborn during hospitalization for delivery, post-birth complications for up to 90 days, and mandatory vaccinations for 90 days.
- **Note:** Coverage within the maternity Sum Insured.

A15. Free Annual Preventive Health Check-Up

- **Coverage:** Free annual health check-up after each renewal.
- **Conditions:** Tests are specific to age and gender, as listed in the policy.
- **Note:** Limited to proposer & spouse under Floater Sum Insured Policies.

A16. Modern Treatment

- **Coverage:** 50% of Sum Insured or 10 Lacs (whichever is lower) for modern treatments and advancements such as:

- Uterine Artery Embolization, HIFU
- Balloon Sinuplasty
- Deep Brain Stimulation
- Oral Chemotherapy
- Immunotherapy (Monoclonal Antibody)
- Intra vitreal injections
- Robotic surgeries
- Stereotactic radio surgeries
- Bronchial Thermoplasty
- Prostate Vaporization (Green/Holmium laser)
- Intra Operative Neuro Monitoring (IONM)
- Stem Cell Therapy for bone marrow transplant

1. Waiting Period Exclusions:

- **Pre-existing Diseases (PED):** Treatment expenses related to PED are excluded for 24 months from the first policy's inception.
- **Specified Diseases/Procedures:** A 12-month waiting period applies to specific diseases or procedures listed, like cataracts, hernia, etc.
- **Other Treatments:** Certain surgeries like joint replacements or eye surgeries have a 24-month waiting period.
- **Pregnancy-Related Expenses:** Excluded for 24 months unless it's for ectopic pregnancy.

2. General Exclusions:

- **Dental Treatments:** Excluded unless required due to accidental injury.
- **Non-Hospitalized Care:** Medical expenses not requiring hospitalization or qualified nursing care are excluded.
- **Cosmetic and Plastic Surgeries:** Excluded unless due to accident, burns, or medically necessary conditions.

3. Specific Exclusions for Outpatient Expenses:

- Treatments without a disease or prescribed by a Specialist Consultant are excluded.
- Routine health checkups and expenses beyond the outpatient limit are not covered.

4. Specific Exclusions for Ayurvedic/Homeopathic Treatments:

- Treatments not defined under the policy or taken at non-qualified centers are excluded.

5. Common Exclusions for All Covers:

- **War, Terrorism, and Civil Unrest:** Exclusions apply except for terrorism-related medical expenses.
- **Lifestyle Treatments:** Such as obesity, change-of-gender treatments, and treatments for substance abuse are excluded.

- **Experimental Treatments:** Any unproven treatments are not covered.
- **Sterility and Infertility:** Including procedures like IVF, sterilization, and surrogacy are excluded.

6. Miscellaneous Exclusions:

- **Circumcision** unless medically required, cost of spectacles, hearing aids, and external medical equipment used at home.
- **Self-Injury and Intoxication:** Intentional self-harm and injuries due to intoxication are not covered.
- **Non-Allopathic Treatments:** Except Ayurvedic/Homeopathic, other non-allopathic treatments are excluded.
- **Non-Medical Items:** As per an annexure in the policy, are not covered.

7. Exclusions Related to Location and Circumstances:

- **Treatment Outside India:** Not covered.
- **Nuclear Risks:** Any claims arising from nuclear weapons/materials are excluded.

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Section 1: Ancillary Expenses Benefit

- **Eligibility:** Covers daily expenses during hospitalization due to illness or injury.
- **Coverage:**
 - **Daily Allowance:** Paid for each continuous 24-hour hospitalization, up to a maximum of 30 days (Individual) or 60 days (Floater).
 - **Intensive Care Unit (ICU) Allowance:** Double the daily allowance for each continuous 24-hour ICU stay, up to 15 days (Individual) or 30 days (Floater).
- **Conditions:** The claim is valid only if the hospitalization claim under Section A1 is accepted. The total liability is capped at the sum insured.

Section 2: Critical Illness Benefit

- **Coverage:** Lump sum payment if diagnosed with a covered critical illness during the policy period.
- **Critical Illnesses Covered:** Includes but is not limited to cancer, heart attack, coma, kidney failure, stroke, major organ/bone marrow transplant, multiple sclerosis, aplastic anemia,

end-stage lung/liver disease, Parkinson's disease, surgery of aorta, Alzheimer's disease, primary pulmonary hypertension, and major burns.

- **Exclusions:** Certain conditions like pre-existing illnesses, sexually transmitted diseases, pregnancy-related issues, and injuries from war, natural disasters, or self-inflicted harm are excluded.

Section 3: Personal Accident Cover

- **Coverage:** Payment to the insured or nominee for death, permanent total disability, permanent partial disability, or temporary total disability due to accidental bodily injury.
- **Details:**
 - **Death:** 100% of the sum insured.
 - **Permanent Total Disability:** 200% of the sum insured.
 - **Permanent Partial Disability:** Specific percentage of the sum insured based on the type of disability (e.g., 70% for an arm at the shoulder joint).
 - **Temporary Total Disability:** Weekly payments up to a maximum of 100 weeks.
- **Additional Benefits:**

- **Transportation:** Up to ₹5,000 for transporting remains in case of death.
- **Children's Education Benefit:** ₹5,000 for education of up to 2 dependent children if death or permanent total disability is claimed.