# CareShield Health Insurance Co.

# **Policy Document**

Policy Number: POL-IN-987654
Plan: CareShield Plus (Family Floater)
Policy Period: 2025-04-01 to 2026-03-31

### Policyholder

Aarav Mehta (DOB: 1992-07-11)

Phone: +91-98-7654-3210 • Email: aarav.mehta@example.com Address: 702, Sunshine Residency, Sector 62, Noida 201301, UP

### **Insured Members**

Name	Relationship	Insured ID
Aarav Mehta	Self	CS-IM-0001
Riya Mehta	Spouse	CS-IM-0002

#### Plan Benefits

Coverage Limit (INR)	1,000,000
Deductible (INR)	10,000
Co-pay (%)	10%
Room Rent Limit (INR)	6,000/night
Network Hospital Only	No

#### **Covered Services**

hospitalization, daycare procedures, diagnostics, prescription drugs, pre & post hospitalization (30/60 days)

# **Key Terms**

- Cashless available at network hospitals.
- Claim intimation within 24 hours of admission for cashless.
- Non-payables as per IRDAI guidelines excluded.
- Pre-authorization mandatory for planned admissions.

Premium Paid (INR): 21,499

Status: Active