

MediCare Health Co.

Registered Office: 21/A, Corporate Park, Business District, Mumbai, India
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Health (Family Floater) Policy Document

Policy Number	HLT-334053
Policy Type	Health (Family Floater)
Policyholder	Amit Shah
Sum Insured	■ 10,00,000
Annual Premium	■ 31,500
Validity	01-Apr-2024 to 31-Mar-2025
Insurer	MediCare Health Co.

Policyholder Contact Details

Amit Shah
766/9, Jaipur, India - 341148

Coverage Benefits (Scope & Sub-limits)

- In-patient hospitalization up to 10,00,000.
- Pre-hospitalization (30 days) and post-hospitalization (60 days).
- Room rent up to 5,000 per day; ICU up to 10,000 per day.
- Daycare procedures (as listed) covered without 24-hour hospitalization.
- Ambulance cover up to 5,000 per hospitalization.
- Cashless treatment at network hospitals; reimbursement otherwise.

Exclusions (What is not covered)

- Pre-existing diseases for first 36 months from inception.
- Cosmetic or aesthetic treatments, dental and vision (unless due to accident).
- Obesity/weight control treatments, hormone replacement therapy.
- Injuries due to self-harm, war, or participation in hazardous activities.

Claim Process (Step-by-step with timelines)

1. For planned hospitalization, obtain pre-authorization 48 hours prior.
2. For emergency hospitalization, intimate within 24 hours.
3. Submit discharge summary, prescriptions, bills, and diagnostic reports.
4. Cashless subject to network hospital TPA approval; reimbursement in 10–15 days.

Mandatory Documents for Claims

- Duly filled and signed claim form.
- Valid photo identity proof and address proof.
- Original policy schedule and premium payment receipts.
- FIR/Police intimation for theft/accident cases, as applicable.
- Hospital bills, discharge summary, prescriptions, and diagnostic reports (for health claims).
- Repair estimates, photographs, and garage invoice (for motor claims).
- Death certificate, cause of death certificate, and KYC of nominee (for life claims).

Terms & Conditions

- Free-look period: 15 days from the receipt of policy. During this period, you may cancel and receive a refund after applicable deductions.
- Grace period for premium payment: 30 days for yearly/half-yearly/quarterly modes and 15 days for monthly mode.
- Non-disclosure or misrepresentation of material facts may render the policy void ab initio.
- All claims are subject to investigation and verification of submitted documents.
- Jurisdiction: Any disputes are subject to the courts situated in the policy issuing city.
- Renewal is subject to underwriting guidelines and may include change in premium/riders at renewal.
- Waiting periods: As specified for particular benefits (pre-existing diseases, specific illnesses).
- Network providers/hospitals list is dynamic and may change without prior notice.
- No benefits shall be payable where the loss arises out of criminal acts or breach of law by the insured.
- GST and other applicable taxes are extra and payable as per prevailing law.
- Portability: You may apply at least 45 days before renewal date to port this policy to another insurer.
- The company reserves the right to revise product features and premium rates with IRDAI approval.
- Nomination and assignment: As per the provisions of the Insurance Act and applicable rules.

Key Definitions

- Definition: Pre-existing Disease – Any condition, ailment, or injury that existed prior to the effective date of the policy.
- Definition: Waiting Period – The period from the commencement of the policy during which specified conditions are not covered.
- Definition: Sum Insured – The maximum amount payable by the company under the policy.
- Definition: Network Provider – A healthcare provider/garage with whom the insurer has a service level agreement.
- Definition: Deductible – The amount payable by the insured that is subtracted from a claim amount before settlement.

For and on behalf of the Insurer

Authorized Signatory

(This is a sample document for ML testing. Not a real policy.)