

Insurance Details - Policy Summary

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Insurance Company: HealthSecure Insurance Co.

Policy Number: HS-PL-2023-998877

Insured: John Doe

DOB: 1980-06-12

Plan Type: Comprehensive Health Plan - Family Floater

Coverage Summary:

- Inpatient hospitalization: Covered up to INR 5,00,000 per policy year
- Pre- and post-hospitalization expenses: Covered (30 days pre, 60 days post)
- Daycare procedures: Covered
- Emergency ambulance: Covered up to INR 2,000 per event

Exclusions (selected):

- Cosmetic procedures, experimental treatments, self-inflicted injuries.
- Pre-existing conditions may have waiting periods as per policy terms.

Claim Contact: 1800-123-456 (Mon-Sat 9:00-18:00)

Claims Email: claims@healthsecure.example

Authorized Signatory: HealthSecure Claims Dept.