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Base Covers

Family Scope

Gipsa

Day Care

Ailment Capping

Room Rent Restriction

Pre Existing Disease

30 Days Exclusion

1st,2nd ,3rd & 4th Year Exclusion

Pre Hospitalization

Post Hospitalization Covered

OPD Treatment

Domiciliary Hospitalization

Intimation Clause

Submission Clause

Psychiatric Ailments And Psychosomatic Disorders

Oral/Subcutaneous Chemotherapy (Even If There Is No
Hospitalization)

Continuous Ambulatory Peritoneal Dialysis (Capd):

Administration Of Injection Avastin / Lucentis Towards
Treatment Of Age Related Macular Degeneration Of The Eye

Treatments Such As Rotational Field Quantum Magnetic
Resonance (Rfqmr), External Counter Pulsation (Ecp), Enhanced
External Counter Pulsation (Eecp), Hyperbaric Oxygen Therapy

Co-Payment Clause

Ambulance Cost

Ayurvedic Treatment Yes 25 % Of Sum Insured Remark-
Ayurvedic Treatment : Payable In Government Recognized
Hospital Upto 25% Of The Sum Insured Provided The Treatment
Is Justified

Coverage

Father & Mother

Not Applicable

Covered

Applicable

Single Standard AC

Covered

Covered

Covered

Covered Max Days : 60

Covered Max Days : 90

Not Covered

Not Covered

Not Applicable

Not Applicable

Covered

Covered

Covered

Covered

Not Applicable

For Parents 20% co pay is applicable

Covered Maximum Upto Rs 10000 Remark-Per Policy period in case patient
has to be shifted from residence to hospital for admission in emergency
ward or ICU or from one hospital to another hospital by fully equipped
ambulance for better medical facilities.

Covered