

[Demo] NLP Dataset for Customer Service Automation

Company Type	Health Insurance Companies
Inquiry Category	Prosthetic devices/inclusive durable medical equipment coverages
Inquiry Sub-Category	Coverage Limitations
Description	Customers seeking clarification on the coverage limitations for prosthetic devices and durable medical equipment, including frequency limits, lifetime maximums, and any exclusions related to specific conditions or diagnoses.
Data Size	5,062 paraphrases
Want to buy data?	Please contact nlp-data@gross.me via your business email address.

Masked sample paraphrases of one "Health Insurance Company" customer inquiry. (Purchased data will not be masked.)

Does my policy exclude _____ conditions _____ diagnoses _____ to prosthetics _____ ?

Does _____ insurance _____ cover _____ artificial _____ and _____ tools?

_____ policy excludes _____ for certain conditions or diagnoses _____ purpose _____ ?

Can my plan exclude _____ relating _____ devices?

Does the _____ exclude coverage _____ conditions, or _____ and _____ medical _____ ?

_____ any exclusions _____ to _____ limbs and _____ ?

Does my _____ not _____ diagnoses associated _____ medical _____ ?

Do the insurance _____ and healthcare tools?

_____ any exclusion _____ to _____ equipment in my policy?

_____ diagnoses related _____ equipment _____ be included _____ my policy?

_____ sure _____ coverage excludes certain _____ or diagnoses related _____ equipment used in _____.

Maybe _____ excludes certain diagnoses associated _____ and _____.

Is prostheses _____ included in _____ insurance plan?

_____ excludes coverage for _____ diagnoses of Prosthetics?

_____ excludes certain conditions or diagnoses _____ to artificial _____ and _____ medical _____.

_____ to know _____ coverage _____ diagnoses _____ to Prostheses _____ medical equipment.

_____ policy _____ coverage for _____ conditions and diagnoses _____ relation _____ and other _____ ?

Is the _____ excludes diagnoses _____ prostheses and _____ ?

Are _____ or conditions _____ use of _____ excluded from _____ plan?

_____ exclude coverage _____ specific conditions or diagnoses related _____ ?

_____ my _____ deny _____ related to prosthetics _____ medical equipment?

Your policies _____ coverage for _____ related _____ medical gizmos, right?

Does _____ exclude _____ specific conditions like Prosthetics _____.

Is _____ covering _____ conditions _____ Prosthetics?

Does _____ cover certain conditions and diagnoses _____ equipment?

_____ an _____ artificial limbs and _____ within my policy?

Will _____ insurance refuse _____ illnesses related to _____ ?

_____ my _____ coverage for _____ conditions with _____ equipment?

I ____ know ____ my ____ certain ____ diagnoses associated ____ medical equipment or ____.

I want ____ know if my coverage ____ diagnoses ____ Prostheses ____.

____ policy going to reject ____ for any ____ are tied to artificial ____?

I ____ know ____ coverage excludes ____ related to medical equipment used ____

____ possible that ____ current ____ doesn't ____ diagnoses associated with ____ gear?

____ there ____ policy covering any ____ for Prosthetics, ____ Equipment ____ something ____?

____ there an ____ in ____ for ____ equipment diagnoses?

Does ____ policy excludes ____ for particular conditions ____ diagnoses ____ and ____?

I ____ wondering if ____ plan has ____ excluded ____ Medical Devices.

____ like to ____ if my ____ excludes ____ or ____ to ____ devices.

Is there a ____ diagnosis or condition ____ equipment ____ my ____?

Does ____ policy not cover specific ____ like ____ related ____ specific conditions?

____ the ____ exclude ____ for the purpose of prosthetics ____ related equipment?

Does the ____ artificial limbs and healthcare ____?

____ there ____ exclusion ____ my policy ____ or diagnoses related to ____?

____ the policy ____ of ____ for Prosthetics?

Does the ____ certain conditions or ____ related ____?

I do not know whether my ____ and Prostheses.

Is there ____ exclusion in ____ conditions ____ diagnoses related ____ equipment?

Does ____ policy ____ Prosthetics ____ equipment?

Does ____ prevent coverage for certain conditions ____?

____ policy ____ for certain ____ diagnoses in relation ____ equipment.

____ policy ____ coverage for certain ____ or ____ to ____ equipment?

Does ____ plan ____ diagnoses related ____ Prostheses and ____?

____ the policy exclude coverage of ____ conditions ____?

Is ____ for my insurance ____ of specific ____ medical devices?

Is ____ and ____ apparatuses within my policy.

____ there an exclusion in ____ policy for ____ medical ____ and ____?

Is my plan including ____ and Medical ____?

I ____ know if ____ coverage excludes certain ____ or ____ equipment.

____ the policy not include ____ specific ____ diagnoses ____ relation to ____ equipment?

____ it possible that ____ insurance ____ pay ____ problems ____ diagnoses ____ to ____ gadgets?

____ it ____ your ____ pay for certain ____ connected with medical ____?

____ plan ____ covered by ____ related ____ medical devices?

Does my ____ exclude ____ with ____ equipment and ____?

____ there ____ in my insurance ____ it ____ medical equipment ____?

____ my policy exclude ____ for certain ____ or ____ equipment?

Does my ____ coverage ____ conditions related ____ medical ____?

____ excludes ____ relating to ____ limbs?

Does ____ not cover fake ____ and medical ____?

Does the ____ conditions ____ diagnoses in ____ to equipment?

____ the ____ exclude coverage ____ specific ____ or ____ relation to prostheses ____ other ____?

____ the policy excludes coverage ____ diagnoses ____ limbs and equipment?

Does ____ plan ____ coverage for ____ limbs or ____ gadgets?

Does my ____ certain ____ diagnoses regarding medical equipment?

____ am ____ if ____ excludes ____ to medical equipment and ____.

____ wondered if ____ plan included ____ excluded ____ Medical Devices.

I wonder ____ my ____ includes ____ for ____ Medical Devices.

____ there a ____ on certain Conditions ____ Equipment ____ something like ____?

____ it ____ my insurance ____ treatment ____ certain ailments ____ medical devices?

_____ sure if my coverage _____ associated _____ Prostheses and _____ equipment.
 _____ the insurance _____ artificial limbs?
 Is _____ coverage _____ excluded for _____ to medical _____?
 Does _____ specifically exclude fake limbs _____?
 Can _____ plan _____ excluded _____ Prostheses and Medical _____?
 I _____ about whether _____ coverage excludes conditions associated _____ and _____.
 _____ my _____ not include _____ and _____ the use _____ medical devices?
 _____ my _____ not _____ specific _____ like amputations, _____ medical equipment or _____?
 The _____ certain diagnoses regarding _____ and healthcare tools.
 _____ the _____ cover certain diagnoses _____ tools _____ limbs?
 Does _____ insurance _____ diagnoses _____ artificial limbs?
 _____ diagnoses and conditions related to _____ from coverage?
 Is _____ or _____ for medical equipment _____ covered by my policy?
 Does my _____ not cover _____ conditions, _____ related to _____ or _____?
 _____ excludes _____ specific conditions, or diagnoses related _____ Prosthetics?
 _____ certain diagnoses _____ with _____ and medical equipment.
 _____ cover _____ regarding _____ limbs and healthcare _____?
 I _____ if my _____ excludes _____ associated _____ limbs and _____ equipment.
 _____ am _____ if the plan includes _____ for _____ and _____.
 _____ if my _____ excludes _____ diagnoses associated with artificial limbs _____ medical _____.
 _____ my _____ exclude conditions _____ equipment?
 Is _____ from my policy _____ conditions _____ diagnoses _____ medical equipment?
 Is _____ an exclusion in _____ policy _____ medical equipment?
 My _____ exclude diseases _____ with prostheses and _____.
 I don't _____ my plan includes excluded _____ for _____.
 _____ if _____ plan includes any _____ for Prostheses _____ Medical _____.
 Is _____ policy _____ any _____ for _____ Medical Equipment or _____ like _____?
 I _____ my _____ excludes certain _____ with artificial limbs and related _____.
 Is my coverage _____ for _____ by medical _____?
 I'm wondering _____ my coverage _____ conditions associated with _____.
 _____ there _____ exclusion for _____ medical equipment?
 Does my _____ excludes diagnoses _____ related _____ medical devices?
 _____ am _____ if _____ coverage _____ conditions associated with _____ equipment _____ Prostheses.
 Is _____ specifically _____ with medical equipment and prostheses?
 Does _____ for specific _____ they are _____ to prosthetics and medical equipment?
 Is _____ excluded in _____ plan _____ my Prosthetics and _____?
 _____ my insurance to exclude treatment of certain ailments _____?
 Does _____ conditions, like amputations or _____ equipment?
 I am wondering _____ my plan _____ any excluded _____ Prostheses _____.
 _____ your policy _____ to _____ conditions _____ to artificial limbs _____ fancy medical _____?
 Is it _____ that _____ plan excludes coverage _____ associated _____ medical _____?
 _____ there _____ policy on _____ specific _____ for Prosthetics, Medical _____ like _____?
 _____ the _____ excludes certain conditions _____?
 _____ comes to _____ equipment diagnoses, _____ coverage _____ my insurance?
 _____ to know if my _____ with medical _____ and Prostheses.
 _____ my _____ exclude _____ for _____ and medical gadgets?
 Does _____ plan _____ fake limbs _____?
 _____ policy _____ specific conditions, _____ diagnoses _____ relation _____ equipment, like Prosthetics?
 _____ my _____ exclude _____ relating to _____
 I _____ an idea _____ whether _____ coverage excludes certain _____ with artificial limbs _____.

_____ am wondering _____ my _____ excludes _____ prostheses and _____ devices.

Does _____ plan exclude _____ relating to the _____ of _____?

Is there an exclusion _____ the policy about conditions _____?

Does _____ exclude _____ specific conditions _____ diagnoses related to limbs _____?

Is my _____ limited _____ certain _____ related to _____ equipment?

Does the _____ excludes _____ or _____ related to Prosthetics?

_____ don't _____ if _____ excludes certain _____ with artificial limbs _____ medical _____.

I _____ if my _____ excludes _____ diagnoses associated _____ artificial limbs and _____.

Does _____ conditions and diagnoses related to _____ devices?

Is _____ exclusion for medical _____ diagnoses _____ my _____?

_____ have _____ idea about _____ my _____ excludes certain _____ related _____ medical equipment _____.

It's possible _____ my _____ excludes certain conditions or _____ medical equipment _____.

Is _____ excluded _____ certain _____ with medical _____?

_____ exclusion _____ ailments related _____ artificial limbs and _____ in my _____?

_____ it _____ your insurance _____ for specific problems _____ related to medical _____?

_____ coverage _____ excluded for _____ equipment?

_____ do not know if _____ coverage _____ medical equipment _____ Prosthetics.

_____ the policy exclude coverage _____ conditions _____ the _____ of _____?

_____ don't know _____ coverage excludes conditions _____ to _____ medical _____ in _____.

I have _____ whether my coverage excludes certain conditions _____ diagnoses _____ medical _____ used _____

_____ whether my _____ excludes certain conditions _____ related _____ medical equipment used _____ Prosthetic.

I do _____ know if _____ excludes certain _____ associated with _____ limbs _____.

My _____ certain conditions for _____ medical equipment.

Does the policy _____ cover _____ Prosthetics?

Is _____ policy _____ excludes _____ specific _____ diagnoses for _____ and equipment?

Does _____ insurance plan _____ specific diagnoses _____ to _____ equipment?

_____ don't know _____ excludes _____ or _____ related _____ Prosthese medical equipment.

I have _____ idea _____ diagnoses associated _____ artificial limbs and equipment.

I am _____ includes any excluded _____ Medical Devices _____.

Does my _____ exclude _____ diagnoses related _____ medical _____?

I _____ if diseases associated _____ healthcare _____ excluded _____ insurance plan.

Is _____ for _____ types of _____ equipment?

_____ my plan _____ any excluded diagnoses _____ Devices

Is my coverage _____ conditions _____?

Does _____ policy exclude _____ conditions for _____ purpose of _____ medically related _____?

Does the policy _____ conditions or _____ the purpose of _____ related _____?

Are _____ related to _____ from _____ insurance plan?

_____ coverage _____ medical equipment related _____?

Are _____ limbs _____ healthcare tools _____ covered _____ insurance?

_____ policy excludes coverage _____ specific conditions, _____ to equipment, _____ Prosthetics and _____.

Is _____ policy that _____ conditions _____ diagnoses _____ relation to _____ and other _____ equipment?

_____ any conditions _____ in _____ for my Prosthetics and Medical Devices?

Is _____ my _____ when it _____ to _____ related to medical equipment?

Does my plan exclude _____ to _____?

_____ my coverage not _____ conditions _____ with medical _____?

_____ insurance deny _____ certain conditions or _____ medical devices?

What _____ exclusions _____ coverage _____ it comes to _____ medically required _____?

_____ my _____ preventing _____ certain conditions linked _____ equipment?

_____ it possible that I have _____ with medical gear?

_____ exclude _____ specific conditions or diagnoses for _____ and _____?

Does ____ policy cut ____ coverage ____ related to ____ equipment?
 ____ my policy not able ____ cover certain ____ medical equipment?
 ____ an idea ____ whether ____ coverage excludes certain conditions ____ diagnoses ____ the medical ____ in ____.
 ____ there an ____ in my ____ conditions ____ to ____ equipment?
 ____ the policy ____ coverage for ____ in ____ to ____ like ____ and Medical
 I'm ____ my plans include ____ diagnoses ____ Prostheses and ____.
 I know ____ my coverage excludes ____ diagnoses associated ____ artificial ____ medical ____.
 Does the ____ exclude ____ specific ____ or diagnoses ____ relation ____?
 Does ____ policy exclude ____ or diagnoses ____ to ____?
 Is ____ equipment-related ____ excluded ____ my ____?
 ____ there ____ illnesses related to ____ and medical devices.
 Do diagnoses related ____ equipment ____ excluded ____ my ____?
 Does the ____ not cover ____ or ____ to ____ devices?
 Is ____ an exclusion for ____ equipment ____ in ____ policy?
 Does my ____ coverage for ____ medical equipment?
 ____ the ____ excludes ____ conditions, or diagnoses in relation ____ limbs ____?
 Is ____ exclusion for prosthetics ____ medical ____ diagnoses?
 Is ____ any ____ in the plan ____ the specific ____ Medical Devices?
 Will ____ insurance ____ conditions or diagnoses related to ____?
 Does ____ policy ____ certain conditions ____ are ____ medical equipment?
 Does the insurance do ____ cover ____ devices?
 Does ____ excludes ____ of specific ____ or diagnoses ____ the ____ prosthetics?
 ____ my ____ policies on ____ related ____ and medicare?
 ____ are the ____ coverage for ____ medically ____ devices?
 Do ____ exclude diagnoses ____ to ____ medical devices?
 ____ an exclusion for certain ____ prostheses?
 Does ____ plan exclude ____ conditions for the ____ diagnoses ____ Medical ____?
 Is my ____ deny coverage based on ____ medical ____?
 I ____ know if ____ associated with Prostheses and ____ equipment.
 ____ am curious if ____ plan includes any excluded diagnoses ____.
 I have an idea ____ or ____ related to the ____ equipment used in ____.
 I ____ whether my coverage ____ and medical ____.
 Does ____ policy deny coverage for certain ____ medical ____?
 ____ are the ____ exclusions in ____ for ____ medically required ____?
 Does the ____ exclude coverage ____ specific conditions or ____ to ____?
 ____ know if ____ coverage excludes ____ or diagnoses ____ to medical ____ Prosthetics.
 ____ my policy specifically ____ associated with medical ____?
 ____ my plan ____ fake ____ and medical ____?
 ____ coverage excludes ____ or diagnoses ____ with medical ____ Prostheses.
 ____ exclusion ____ limbs and healthcare apparatuses ____ policy?
 Does my ____ any excluded ____ for ____ and ____?
 Are conditions ____ with ____ equipment excluded ____?
 I'm unsure whether ____ coverage ____ certain conditions ____ artificial ____.
 Does ____ and medical equipment?
 I ____ know ____ my coverage ____ conditions or ____ associated ____ artificial ____.
 ____ don't know if my ____ excludes ____ with ____ and ____ Equipment.
 ____ insurance ____ cover certain conditions ____ diagnoses associated with ____?
 Does ____ coverage for ____ conditions, ____ for diagnoses ____ relation ____ limbs ____ equipment?
 ____ to ____ whether ____ certain conditions ____ diagnoses associated with ____ limbs.
 Is there ____ exclusion ____ my policy for specific ____ equipment ____?

_____ policy excludes _____ conditions or _____ of _____ and Medical
 I _____ unsure _____ excludes _____ related _____ Prostheses _____ medical equipment.
 Does _____ policy _____ coverage _____ specific _____ diagnoses in _____ to prosthetics _____ medical _____?
 _____ possible _____ a diagnosis related _____ will be excluded _____?
 _____ if _____ plan _____ excluded diagnoses for _____ and Medical _____.
 I _____ if _____ associated _____ prostheses and _____ equipment are _____ my insurance _____.
 _____ know if _____ excludes certain _____ or diagnoses relating _____ artificial _____.
 _____ there _____ excluded _____ policy regarding artificial _____ and _____ apparatuses?
 Does _____ excludes coverage for certain _____ and _____?
 _____ the policy excludes _____ conditions, _____ and Medical.
 _____ my _____ cutting out _____ for _____ conditions associated with _____?
 Are _____ policies of yours going _____ coverage for _____ conditions related _____ artificial _____ fancy _____?
 Does the policy _____ coverage _____ like _____ Medical.
 _____ specific _____ diagnosis _____ equipment that _____ covered by my policy?
 _____ have an idea _____ whether my _____ excludes _____ conditions _____ equipment and _____.
 I _____ if _____ coverage excludes _____ associated with Prostheses _____ medical _____.
 _____ wonder if my insurance excludes coverage _____.
 I don't know _____ my _____ conditions associated _____ artificial _____ medical _____.
 Is _____ any _____ artificial _____ and _____ apparatuses within _____ policy?
 Is _____ my insurance to _____ treatments connected _____ medical _____?
 _____ policy exclude _____ types _____ medical _____ from coverage?
 Is it _____ medical _____ are not included in my _____?
 _____ any exclusion in my plan _____ diagnoses _____ to medical _____?
 Is _____ my insurance _____ cover diagnoses of medical _____?
 My coverage _____ exclude certain _____ associated with _____ equipment.
 It's _____ that _____ coverage excludes _____ conditions or diagnoses _____ to _____ used _____.
 _____ if _____ coverage excludes _____ conditions associated _____ equipment.
 Does my policy _____ coverage for _____ or diagnoses _____?
 _____ it possible that my policy _____ medical _____?
 Is _____ any _____ my _____ for _____ diagnoses related _____ medical equipment?
 _____ it _____ excluded _____ the coverage if _____ diagnosis _____ to prosthetics?
 _____ the _____ exclude _____ conditions or for _____ relating _____ Prosthetics?
 Is my _____ compatible _____ for _____ and Medical _____?
 Does _____ policy not include coverage _____ specific _____ or _____ in relation _____?
 Is a diagnosis _____ prosthetics _____?
 _____ diagnoses _____ conditions related to the use _____ from my _____?
 _____ my plan limited _____ equipment-linked conditions?
 Is my _____ the conditions associated _____ equipment _____ prosthetics?
 Is _____ excluded for conditions _____ with _____?
 I don't _____ if _____ coverage excludes _____ to the _____ Prosthetic.
 I don't know if _____ diagnoses _____ Medical Devices.
 _____ there an _____ for prosthetics and _____ in my _____?
 Is _____ a _____ diagnosis _____ medical equipment _____ covered _____ policy?
 _____ it _____ that my _____ plan _____ not cover diagnoses _____ medical _____?
 Does _____ coverage _____ specific conditions or _____ for _____ of equipment?
 I am wondering if _____ excludes Prostheses _____.
 _____ the _____ not cover _____ diagnoses relating _____ limbs?
 _____ an idea _____ coverage _____ conditions or diagnoses _____ medical equipment used in Prosthetic.
 Is _____ a block on _____ for _____ replacement aid _____ apparatus?
 Is _____ any _____ my policy for conditions linked _____?

Does the policy ____ not ____ specific conditions ____ of ____?

Is ____ exclude diagnoses that ____ related ____ medical ____?

____ or may ____ exclude certain ____ associated with ____ medical equipment.

____ health ____ plan exclude ____ if I have ____ condition ____ with ____?

____ an exclusion in my ____ specific ____ equipment?

Does the policy ____ of certain conditions ____ of prosthetics ____ equipment?

____ my plan ____ diagnoses for ____?

____ plan don't mention fake ____ or ____?

____ my ____ for conditions that are tied ____?

I ____ know if ____ insurance ____ treatment of certain ____ connected ____ medical devices.

Does my policy ____ not ____ conditions, ____ amputations ____ medical ____?

Does my ____ exclude ____ conditions ____ medical ____?

Is ____ possible ____ current ____ cover certain diagnoses associated with ____?

I'm not ____ excludes ____ or diagnoses ____ to ____ equipment used in Prosthetic.

Does the ____ cover specific conditions or ____ for ____?

Is my insurance ____ diagnoses ____?

____ plan ____ related to ____ and medical devices?

I ____ know if ____ excludes ____ diagnoses ____ medical equipment used ____ Prosthetic.

____ possible that my ____ diagnoses ____ Prostheses and medical equipment.

Is medical ____ and ____ by my ____ plan?

____ the ____ coverage ____ conditions or for ____ in relation to ____?

Does ____ diagnoses ____ artificial ____ and healthcare tools?

Is there an exclusion ____ medical equipment ____?

____ there an ____ my ____ specific ____ related ____ and medical devices?

____ plan ____ and conditions pertaining ____ the use ____ medical ____?

Does insurance ____ diagnoses ____ to artificial limbs ____?

I ____ know ____ my ____ excludes ____ of ____ ailments ____ to medical devices.

____ it ____ my ____ does ____ cover certain ____ linked to medical equipment?

____ there any exclusion ____ illnesses ____ and medical devices?

____ there a ____ that ____ specific ____ Prosthetics, Medical Equipment ____ something like ____?

Do ____ insurance ____ diagnoses of ____ and healthcare ____?

____ the policy excludes ____?

____ possible for my insurance ____ exclude treatment ____ ailments ____ to ____?

____ the ____ cover ____ relating to artificial ____?

____ there ____ my policy for any ____ or ____ to medical ____?

I don't know ____ my ____ limbs ____ medical ____.

Is ____ excluded ____ related problems?

____ policy ____ coverage for ____ diagnoses ____ to limbs and equipment?

____ diagnoses ____ to medical equipment ____ my policy?

____ my plan do not ____ coverage ____ limbs ____ gadgets?

____ plan ____ diagnoses and ____ related to ____ devices?

Does ____ or diagnoses related to equipment?

____ not know if ____ excludes certain ____ diagnoses ____ with ____ limbs and medical ____.

The ____ may exclude ____ diagnoses ____ limbs and healthcare ____.

I ____ if my ____ includes any ____ diagnoses ____ medical ____.

I know if my coverage excludes ____ conditions ____ artificial limbs ____.

____ don't cover ____ conditions related to medical ____?

____ the insurance ____ diagnoses regarding ____ limbs and ____?

Does my ____ exclude diagnoses ____ medical devices

____ wondering ____ coverage excludes certain conditions associated ____ limbs ____ medical ____.

_____ cover diagnoses related to medical _____?

_____ condition _____ body _____ not be _____ by insurance?

I have _____ idea if _____ excludes _____ or _____ related _____ Prosthese _____ equipment.

Specific _____ limbs and _____ apparatuses are _____ included within my _____.

_____ don't _____ if _____ excludes any _____ or _____ associated with artificial _____.

I don't _____ my coverage _____ related _____ medical equipment _____ in Prosthese.

I _____ if my _____ excludes certain diagnoses _____ with _____

_____ my policy do _____ cover _____ amputations _____ equipment?

_____ my _____ not cover any specific _____ or _____ equipment?

I _____ my _____ excludes certain _____ or _____ associated with artificial _____.

_____ think _____ certain conditions _____ diagnoses _____ to _____ medical equipment used in _____.

_____ coverage _____ conditions _____ with medical equipment?

_____ any _____ artificial limbs and healthcare _____?

I don't know _____ my coverage excludes _____ conditions or _____ with _____ medical _____

Is it _____ your _____ for specific _____ diagnoses _____ medical gadgets?

Does my plan do _____ diagnoses related _____?

Is it _____ your _____ problems _____ diagnoses connected with medical gadgets?

I _____ not know if _____ coverage _____ certain _____ with medical equipment _____ in _____.

_____ an _____ about whether _____ conditions _____ with medical equipment and Prosthetics.

Does _____ policy _____ of _____ conditions or _____ relation _____ Prosthetics?

Does _____ exclude _____ certain conditions, like Prosthetics _____.

I _____ know if my _____ conditions _____ with medical _____ and _____.

Is there _____ exclusion in my _____ for _____ diagnoses _____ medical equipment?

_____ exclusion _____ my policy for _____ are related _____ medical equipment?

Does _____ policy _____ for _____ diagnoses relating to Prosthetics?

Is _____ my policy excludes stuff _____ equipment?

_____ know _____ excludes certain conditions _____ prosthetics and medical equipment.

_____ have _____ of whether _____ excludes certain conditions _____ to _____ equipment and Prosthetics.

Does _____ policy excludes _____ diagnoses of medical equipment?

_____ my _____ in coverage for specific conditions _____ to _____?

_____ Prosthetics exempt from my _____?

_____ the _____ covering certain _____ regarding _____ and healthcare tools?

_____ for medical _____ diagnoses _____ my insurance?

I don't _____ excludes some _____ associated with artificial _____ and equipment.

_____ coverage excludes _____ conditions or diagnoses _____ artificial limbs and _____ equipment.

_____ my _____ conditions _____ are _____ to medical equipment?

_____ idea _____ whether my coverage _____ certain _____ associated with Prostheses _____ medical _____.

Is _____ certain diagnosis related _____ coverage?

Specific _____ related _____ medical devices _____ not _____ by my policy.

_____ coverage _____ certain diagnoses _____ to _____ and _____ equipment.

I am unsure _____ my _____ or diagnoses _____ to artificial _____.

I don't know if my _____ related _____ medical equipment.

Does _____ policy _____ include _____ for specific _____ or _____ relation _____ and equipment?

_____ the _____ coverage for specific _____ diagnoses _____ limbs and equipment?

Can I _____ my health _____ excludes coverage for _____ associated _____ medical _____?

I am not _____ coverage _____ diagnoses related _____ and _____ equipment.

_____ my policy refuse _____ certain _____ to _____ equipment?

_____ policy _____ coverage for specific conditions _____ diagnoses _____ are _____ Prosthetics?

_____ my _____ excluded for conditions _____ with _____?

_____ the policy _____ coverage _____ conditions, or _____ equipment, like Prosthetics?

_____ don't know whether my coverage _____ associated _____ artificial limbs _____ medical _____.
 _____ the policy exclude _____ conditions _____ diagnoses related to _____ Prosthetics?
 _____ plan _____ fake _____ and _____ gadgets from coverage?
 Is there a policy _____ certain conditions _____ Equipment _____ like _____?
 _____ connected to _____ limbs or _____ are _____ included in _____ policy.
 _____ the policy _____ coverage _____ conditions or _____ purposes of prosthetics?
 I am wondering if my _____ and Medical _____.
 _____ my coverage do _____ cover conditions _____ equipment?
 _____ don't know _____ my _____ excludes conditions _____ artificial limbs _____.
 _____ it possible _____ won't _____ treatment of specific _____ medical devices.
 _____ policy _____ coverage _____ conditions, or diagnoses _____ relation to equipment, _____ Medical
 _____ there _____ exclusions _____ artificial _____ and healthcare apparatuses _____ my _____?
 _____ my _____ excludes conditions related _____ prosthetics and _____ equipment.
 Does the policy _____ not _____ specific _____ the purpose _____ prosthetics or medically _____?
 Is there exclusions _____ artificial _____ apparatuses in _____?
 _____ to _____ my plan has _____ excluded _____ Prostheses and Medical _____.
 _____ my plan _____ any _____ diagnoses for Prostheses _____?
 _____ don't know if my coverage _____ associated _____ equipment.
 I don't _____ if _____ coverage excludes _____ conditions _____ with _____ equipment and _____
 I don't _____ if _____ diagnoses _____ with artificial limbs.
 _____ excludes coverage _____ specific conditions _____ as Prosthetics?
 _____ have _____ idea if my _____ conditions or _____ related with the medical _____ used _____
 _____ any _____ exclusion for medical equipment diagnoses _____?
 Is _____ possible that _____ not cover _____ of _____ equipment?
 _____ the policy _____ coverage _____ conditions _____ Prosthetics?
 Is _____ possible _____ my _____ treatment for _____ ailments _____ medical devices?
 Does _____ plan exclude diagnoses _____ conditions _____ medical _____?
 _____ related to _____ get _____ from my _____?
 I _____ know whether _____ coverage excludes certain conditions or diagnoses _____ with _____ Prosthetic.
 _____ my plan exclude _____ devices?
 Does the insurance _____ certain _____ or _____ related to _____?
 _____ the policy that _____ specific _____ or diagnoses _____ to _____ and _____ equipment?
 Is there an _____ artificial limbs _____ healthcare apparatuses _____?
 _____ it possible _____ cover medical _____ diagnoses?
 Is _____ an _____ for _____ ailments connected to _____ healthcare _____ my policy?
 Does _____ plan not _____ diagnoses related _____ use _____ medical _____?
 _____ I need _____ diagnosis _____ it be excluded from the _____?
 _____ know _____ my coverage _____ conditions or _____ to _____ limbs and medical _____.
 Does _____ don't include _____ or diagnoses for Prosthetics?
 _____ it possible to _____ ailments connected _____ limbs _____ healthcare _____ my policy?
 Is it _____ your insurance _____ for _____ problems or _____ with _____ devices?
 _____ plan exclude _____ and _____ to medical devices?
 My coverage may _____ not exclude certain _____ diagnoses associated _____ and _____.
 _____ insurance cover diagnoses _____ limbs or _____ tools?
 Is it _____ coverage _____ diagnoses _____ to prostheses and _____?
 Specific _____ or diagnoses related to _____ equipment _____ may _____ be covered _____.
 _____ my _____ deny _____ for certain _____ or _____ related to _____?
 _____ don't know _____ my coverage _____ conditions _____ medical _____ or _____.
 Is _____ possible _____ exclude _____ ailments _____ to _____ limbs _____ apparatuses?
 Does _____ do _____ cover _____ conditions or diagnoses _____?

_____ coverage _____ cover diagnoses associated with medical _____?
 Does _____ insurance _____ diagnoses for _____ limbs _____ healthcare _____?
 Is it _____ insurance _____ not _____ for certain problems or _____ gadgets?
 _____ specific diagnoses for medical _____ that _____ by my _____?
 I _____ wondering _____ my _____ excludes certain _____ related _____ medical equipment _____ in _____.
 I _____ my _____ excludes _____ conditions _____ diagnoses _____ to medical equipment _____ in Prosthetic.
 Is there _____ limbs and _____ apparatuses _____ policy?
 _____ my _____ do _____ cover diagnoses _____ to _____ equipment?
 I don't know _____ coverage _____ conditions _____ diagnoses related to _____.
 _____ policy affect coverage _____ certain _____ to medical _____?
 I'm _____ if _____ coverage excludes _____ related _____ Prostheses and _____.
 Does _____ policy exclude _____ Prosthetics?
 Can diseases _____ prostheses and healthcare equipment _____ excluded _____?
 I'm _____ my _____ excludes _____ or diagnoses associated _____ artificial limbs _____.
 Is my _____ with _____ equipment and prosthetics?
 Does _____ stop coverage for _____ conditions _____ medical _____?
 Does _____ coverage for _____ conditions _____ in relation _____ equipment?
 I _____ know if _____ says _____ coverage _____ fake limbs _____ gadgets.
 _____ coverage _____ certain conditions _____ diagnoses related _____ the medical _____ in Prosthetic
 I don't _____ my coverage excludes conditions associated _____ devices.
 Will my _____ any _____ for _____ and _____ Devices?
 _____ insurance _____ exclude diagnoses _____ to _____ equipment _____ coverage?
 _____ wondering if _____ excluded _____ for _____ and Medical _____ in my _____.
 _____ my _____ exclude _____ or _____ relating to the _____ of _____
 _____ the _____ excludes coverage _____ specific _____ or _____ for _____ and medical _____?
 _____ it _____ that _____ insurance _____ problems or diagnoses _____ with _____ gadgets?
 Is _____ certain conditions linked to medical equipment?
 Some artificial _____ and _____ be _____ from the _____.
 Do the _____ my policy preclude coverage for _____ to medical _____?
 _____ my insurance plan exclude _____ related to _____?
 _____ if _____ coverage excludes certain conditions _____ with _____ used in Prosthetic.
 _____ conditions _____ to medical equipment _____ from my _____?
 _____ for prosthetics or diagnoses?
 _____ have _____ about _____ my _____ certain conditions or _____ to medical _____ and Prosthetics.
 I don't _____ my coverage excludes _____ diagnoses associated with medical _____.
 Does the _____ exclude _____ specific conditions or _____ prosthetics and medical _____
 _____ there an exclusion in _____ and diagnoses related to _____ medical _____?
 I _____ or _____ my _____ certain conditions associated _____ artificial _____ and medical _____.
 _____ my _____ exclude _____ conditions linked _____ medical devices?
 Are _____ policies that reject _____ artificial limbs or fancy _____?
 _____ the policy _____ cover specific _____ diagnoses in _____ to _____?
 I know whether my _____ excludes certain _____ to artificial _____ and _____.
 Does _____ excludes _____ for certain _____ and diagnoses _____ to _____?
 Is my plan _____ covering _____ to _____ medical _____?
 _____ my _____ deny coverage _____ certain diagnoses _____ equipment?
 _____ coverage _____ conditions _____ with medical equipment and _____?
 Is there _____ of _____ healthcare apparatuses in my _____?
 Does the policy _____ coverage for specific conditions _____ diagnoses _____?
 Does _____ policy _____ the coverage of specific _____ for _____?
 _____ those policies _____ reject _____ for _____ conditions _____ to artificial limbs _____ gizmos?

_____ an idea _____ whether my coverage excludes _____ conditions _____ medical _____ Prostheses.

Is there _____ policy for conditions _____ with medical _____?

_____ if _____ coverage excludes certain conditions associated with _____ medical _____.

Does _____ policy exclude _____ for _____ or _____ to medical _____?

_____ if my coverage _____ diagnoses _____ to _____ medical equipment.

_____ an exclusion _____ my _____ for conditions and _____ linked _____ medical _____?

_____ there an exclusion _____ artificial limbs or _____ within _____?

Is medical _____ included in my _____ for _____?

Is _____ excluded _____ certain conditions of medical _____?

_____ my policy deny _____ for certain _____ conditions _____ to _____?

Are diseases associated _____ prostheses and _____ equipment _____ from _____?

Is _____ for medical equipment _____ my _____ plan?

Can a _____ lead to _____ of _____ this policy?

_____ artificial limbs and _____ tools excluded from _____?

I don't know _____ my coverage _____ conditions _____ to _____ or _____.

Are _____ reject coverage _____ any conditions related _____ limbs or _____?

Does the policy _____ certain conditions _____ diagnoses _____ to _____?

_____ about _____ connected _____ and healthcare apparatuses?

I _____ if my coverage _____ certain conditions _____ diagnoses _____ the _____ Prosthetic.

I have _____ idea _____ my coverage _____ certain conditions _____ diagnoses related with the _____.

Does the _____ coverage _____ the _____ prosthetics or _____ related equipment?

Does _____ policy _____ conditions _____ for Prosthetics?

_____ policy leave _____ coverage _____ or _____ in relation to equipment?

Is _____ an exclusion in _____ policy when it _____ conditions _____ equipment?

_____ my plan _____ coverage for _____ to medical equipment?

_____ coverage _____ medical equipment conditions?

Does the _____ for _____?

_____ an _____ in my policy _____ conditions _____ to medical _____?

_____ don't know _____ my _____ excludes conditions _____ diagnoses _____ and Prostheses.

Is there _____ condition excluded _____ for the specific _____ Prosthetics _____ Devices?

Are there _____ relating _____ artificial _____ and _____ apparatuses?

Is it _____ my coverage _____ associated with medical _____?

_____ don't know _____ excludes conditions associated with _____ equipment _____.

_____ exclusion _____ to _____ or _____ apparatuses within my policy?

Is there _____ for Artificial _____ and _____ within the _____?

Are _____ from the plan _____ specific _____ of my _____ and _____ Devices?

Does the _____ conditions _____ diagnoses _____ Prosthetics _____ Medical Devices?

_____ an _____ for _____ and medical _____ in _____ policy?

_____ policy _____ specific conditions _____ the purpose of prosthetics?

_____ is possible that my _____ excludes certain _____ limbs and equipment.

Is my coverage _____ for the conditions _____?

_____ wondering _____ coverage excludes _____ related _____ the medical equipment used in _____.

Is there a policy _____ for _____ Medical Equipment?

Is _____ exclusions _____ conditions _____ medical _____ and prosthetics?

_____ it possible _____ my insurance to _____ of specific _____ linked to _____?

_____ exclude diagnoses _____ about the use of _____ devices?

_____ am wondering if _____ plan _____ diagnoses for Prostheses and _____.

_____ medical equipment related _____ get _____ out of _____?

_____ policy _____ for conditions _____ to medical equipment?

_____ policy _____ for specific _____ or _____ relation to the limbs and _____?

Is there an _____ for Artificial limbs _____ policy?
 _____ my _____ conditions related to medical _____ and limbs?
 _____ not pay _____ conditions _____ related to medical devices?
 _____ there an _____ artificial limbs _____ apparatuses?
 Is _____ exclusion for artificial _____ healthcare _____ my policy?
 _____ there an exclusion _____ limbs _____ healthcare _____ within _____ policy?
 I'm _____ if _____ plan includes _____ diagnoses for _____ and _____.
 Is there any specific exclusions _____ required _____?
 There are some ailments _____ to artificial limbs that _____.
 Does my coverage _____ related _____?
 _____ excludes _____ conditions related to medical devices?
 _____ not cover _____ related to _____ use of medical _____?
 _____ my coverage _____ certain conditions or _____ equipment and Prostheses.
 I _____ my _____ excludes diagnoses related to Prostheses and _____.
 Is there any exclusion _____ equipment _____ my _____?
 Does the policy _____ include _____ of _____ diagnoses for _____?
 Does my policy exclude _____ amputations _____ equipment?
 _____ my plans say no _____ fake _____ medical _____?
 _____ it possible that _____ doesn't _____ for _____ problems or diagnoses _____ to _____?
 _____ my _____ exclude _____ conditions _____ the use of _____ devices?
 Is _____ possible that my _____ does _____ equipment _____?
 Does _____ exclude _____ conditions like Prosthetics and _____
 Is _____ an _____ in my policy when _____ to medical equipment?
 Does _____ excludes _____ for _____ conditions or for diagnoses _____ equipment?
 _____ insurance able _____ exclude certain treatments _____ medical _____?
 Does _____ relating to the use of medical _____?
 Is _____ excluded for conditions _____ equipment and prosthetics.
 I don't _____ if my _____ diagnoses associated with _____ limbs _____ equipment.
 _____ there _____ policy _____ covers any _____ conditions _____ Prosthetics, Medical _____ similar?
 _____ my _____ exclude diagnoses _____ medical _____?
 _____ policy _____ coverage for certain conditions _____ to limbs and _____?
 Does _____ coverage for _____ conditions, or diagnoses _____ limbs _____?
 _____ it _____ for my _____ cover certain _____ connected _____ medical devices.
 _____ possible that _____ policy _____ specific _____ to prosthesis and _____ devices?
 _____ are _____ connected _____ limbs that are _____ by my policy.
 There is _____ whether my coverage _____ diagnoses associated _____.
 _____ plans _____ diagnoses that _____ to medical devices?
 _____ don't know if my _____ excludes _____ conditions _____ associated _____.
 _____ not _____ excludes diagnoses related _____ Prostheses and _____ equipment.
 Can _____ pay _____ treatments associated with _____ devices?
 _____ it _____ doesn't pay for specific _____ or diagnoses _____ are connected with _____?
 I don't _____ whether _____ coverage _____ medical _____ diagnoses.
 Is my coverage excluded _____ with _____?
 _____ policy excludes _____ coverage of _____ for Prosthetics?
 _____ exclude coverage for _____ conditions, or _____ diagnoses _____ to _____ like Prosthetics?
 _____ a diagnosis related _____ excluded from the _____?
 Is _____ possible that _____ excludes _____ to _____ devices?
 _____ associated _____ medical equipment _____ get included in _____ policy?
 _____ it _____ my _____ exclude treatment of certain ailments _____ medical _____?
 _____ the _____ certain _____ or _____ diagnoses in relation to _____ other medical equipment?

Is the ____ of ____ excluded by my ____?

____ policy exclude coverage for ____ or diagnoses in ____ equipment?

____ am unsure ____ coverage ____ conditions ____ with medical equipment ____ Prostheses.

I do ____ excludes conditions associated with ____ medical equipment.

____ policy ____ coverage for ____ conditions or diagnoses in ____ to ____

____ my ____ certain conditions related to medical ____?

____ policy ____ for specific conditions ____ diagnoses ____ with Prosthetics?

____ my ____ to ____ cover the ____ of specific ailments connected to ____.

____ for certain conditions related ____ medical equipment?

____ my ____ not ____ amputations or ____?

Do my plan ____ any ____ Prostheses ____ Medical ____?

____ the policy exclude ____ diagnoses or ____ the ____ prosthetics or medically ____ equipment?

____ have an idea whether ____ certain ____ associated ____ medical equipment ____.

____ excludes coverage ____ specific conditions or ____ in relation ____ medical equipment?

____ an ____ in ____ policy for certain illnesses ____ to ____ devices?

Is there a policy ____ Conditions ____ Equipment ____ something?

____ it ____ diagnoses related to medical ____ are not ____ my ____?

____ if ____ excludes conditions ____ with medical equipment ____ Prostheses.

____ policy ____ coverage of certain ____ or ____ the ____ of prosthetics?

Has my coverage ____ associated ____ medical ____?

Can ____ be ____ for conditions associated with ____?

Is ____ possible that ____ won't pay ____ certain problems and ____ gadgets?

I ____ to know if my ____ artificial ____ and medical ____.

Will a ____ diagnosis ____ to prosthetics ____ from ____?

Is ____ policy ____ to ____ diagnoses or conditions ____ with ____?

Is there a way to ____ limbs ____ healthcare ____?

Does the ____ exclude ____ specific ____ or ____ in ____ to limbs ____

____ like to know if ____ plan includes ____ Prostheses.

____ it ____ exclude ____ connected to artificial ____ within my policy?

Does ____ insurance cover certain ____ like ____ healthcare ____?

Is my ____ coverage ____ related ____ medical equipment?

Is a certain diagnosis related ____ excluded ____?

Is there an ____ policy when it ____ conditions ____ equipment?

Is ____ that ____ treatment of ____ ailments connected to ____ devices.

Does my ____ medical devices?

____ if my coverage ____ conditions ____ diagnoses associated with ____.

Is there ____ in ____ plan ____ excludes ____ medical devices?

____ my ____ conditions or diagnoses associated ____ equipment?

____ my ____ exclude coverage for ____ conditions or diagnoses ____?

____ insurance not ____ diagnoses relating ____ artificial ____ and ____ tools?

____ my ____ diagnoses relating to the ____ of ____ devices?

Is it ____ for ____ insurance ____ cover ____ of ____ connected to medical ____?

____ policy exclude ____ conditions ____ diagnoses for equipment?

____ unable to cover ____ or conditions linked to ____?

____ the insurance not cover ____ conditions or ____ medical ____?

____ my plan exclude ____ medical ____?

Does my policy do ____ certain ____ related ____?

____ be excluded ____ coverage ____ I need ____ diagnosis related ____?

Is it ____ certain ____ related ____ prostheses and ____ gear?

I ____ wondering ____ associated with artificial ____ and equipment.

Does the _____ coverage for specific conditions, _____ diagnoses _____ to _____ equipment?
 _____ it _____ that _____ insurance excludes _____ connected to medical devices.

Does the _____ not include coverage of _____ or diagnoses _____ purpose _____?
 _____ not cover conditions associated _____ equipment?
 _____ coverage _____ for some conditions _____ with _____ equipment?

I _____ know _____ my coverage _____ conditions related to _____ or _____.

Is it _____ to exclude _____ certain ailments connected to _____?
 _____ ailments connected _____ and healthcare apparatuses are not covered _____.

_____ want to know if _____ prostheses _____ are included _____ my _____ plan.

Does _____ conditions associated with medical _____?
 _____ want _____ if _____ includes any excluded diagnoses for _____.

_____ policy not _____ like amputations, _____ medical equipment, or _____?
 _____ don't know _____ my coverage _____ associated with _____ equipment.

Does my _____ related _____ the medical devices?

I _____ excludes _____ associated with medical equipment and Prostheses.

Does _____ insurance _____ specific conditions that _____ to _____ devices?

Is my _____ specifically excluded _____ conditions _____ to _____?

Does the insurance exclude _____?

Is my coverage _____ excluded for _____ related _____?
 _____ there _____ connected to artificial _____ and healthcare apparatus?
 _____ my plan limited _____ coverage for specific _____ linked _____?
 _____ coverage excludes diagnoses _____ Prostheses and medical _____.

_____ policy _____ cover certain _____ with medical equipment?
 _____ my _____ exclude stuff _____ medical _____?
 _____ it possible for _____ treatment of _____ ailments with medical _____?
 _____ policy not covering _____ in relation _____ limbs and equipment?

Is there coverage _____ medical _____ from my _____?
 _____ my policy do _____ stuff about _____ equipment?
 _____ the _____ cover _____ conditions _____ related to Prosthetics?

Does _____ exclude _____ that _____ to _____ with medical _____?
 _____ wonder _____ insurance excludes _____ specific conditions or diagnoses _____ to _____.

_____ the _____ coverage for specific conditions _____ diagnoses _____ equipment?
 _____ policy exclude _____ for specific conditions or _____ diagnoses related _____?
 _____ possible for _____ insurance to not cover _____ medical _____?

Does _____ coverage for fake _____ and _____ gadgets?

My _____ may _____ prostheses and healthcare equipment.

Is _____ diagnosis not applicable _____ prostheses and medical _____?

I _____ coverage excludes certain conditions _____ prosthetics.

Does the _____ specific conditions _____ in relation to _____?

Is _____ possible that _____ excludes _____ related _____ medical devices?

Is _____ specifically _____ conditions associated _____ medical equipment?
 _____ the policy excludes _____ conditions _____ for diagnoses _____ limbs and _____?
 _____ idea about _____ coverage excludes _____ or _____ related to medical _____ in Prosthetic.

_____ know that _____ reject _____ conditions related _____ artificial limbs _____ fancy medical gizmos?
 _____ want _____ if my coverage _____ conditions _____ artificial _____ and equipment.
 _____ plan excludes _____ and _____ related _____ medical devices?

Does _____ specific conditions and diagnoses related to limbs _____?
 _____ want _____ know _____ my _____ certain _____ or _____ associated with artificial _____.

Is _____ possible to exclude ailments _____ artificial _____ apparatuses?
 _____ know if _____ coverage _____ conditions associated _____ medical _____ and _____.

_____ unsure of _____ my _____ excludes conditions associated _____ medical equipment _____.
 _____ that _____ insurance will not _____ the treatment of _____ connected to _____.
 _____ my _____ certain conditions associated with medical _____?
 _____ policy do _____ coverage _____ conditions _____ diagnoses for _____ purpose _____ prosthetics or _____ related equipment?
 _____ the _____ excludes _____ artificial limbs?
 _____ plan exclude diagnoses _____ conditions in relation _____?
 Specific ailments _____ are connected _____ artificial _____ are _____ in my policy.
 Does _____ exclude coverage for certain _____ diagnoses _____ to _____ equipment?
 Is it possible _____ doesn't _____ for _____ diagnoses connected with medical _____?
 _____ my plan not _____ diagnoses or _____ use of medical _____?
 _____ my _____ not able _____ cover certain _____ or _____ linked _____ equipment?
 _____ of yours going _____ for _____ to artificial _____ or medical gizmos?
 _____ there _____ relating to artificial _____ and _____ apparatuses in _____?
 _____ the _____ prohibit coverage for _____ conditions or _____ equipment?
 I don't _____ if _____ excludes _____ Prostheses and _____ equipment _____.
 Does _____ policy exclude coverage _____ certain _____ diagnoses _____ of prosthetics?
 Is my plan _____ in its coverage _____ certain _____?
 _____ wondering _____ my _____ includes _____ diagnoses _____ and Medical Devices
 Is there any _____ artificial limbs _____ within _____ policy?
 _____ exclude coverage _____ specific _____ or diagnoses _____ prosthetics and medical _____?
 _____ insurance not cover _____ treatment of _____ to medical _____?
 _____ wondering if _____ conditions associated _____ artificial _____ and medical equipment.
 Is _____ possible for _____ not _____ the treatment _____ ailments connected to _____?
 I _____ if _____ excludes _____ or diagnoses _____ medical _____ and Prosthetics.
 Is _____ way _____ artificial limbs _____ healthcare apparatus from _____?
 Is there _____ specific ailments related _____ and healthcare _____?
 Does _____ policy exclude _____ or diagnoses for the _____ or medically related equipment?
 _____ the policy _____ include _____ or diagnoses _____ Prosthetics?
 _____ my _____ not _____ certain _____ diagnoses _____ to medical equipment?
 _____ it possible _____ exclude specific _____ from _____ policy?
 _____ plan _____ diagnoses and conditions _____ medical _____?
 Is there _____ for artificial _____ and healthcare _____ within _____?
 Does _____ coverage exclude _____ types _____?
 _____ idea if _____ certain _____ or diagnoses related _____ the medical equipment _____ in Prosthetic
 Is _____ cover _____ diagnoses related _____ medical equipment?
 _____ do _____ excludes certain conditions _____ associated with _____ limbs and equipment.
 Does _____ exclude coverage for specific _____ about _____ equipment?
 Is it possible that _____ pay for _____ problems _____ diagnoses _____ with _____?
 _____ the _____ exclude _____ Prosthetics?
 _____ excluded _____ coverage for conditions _____ with _____ equipment?
 _____ the _____ excludes coverage _____ specific conditions and _____ relation _____ equipment?
 _____ no _____ for fake _____ or _____ in my plan?
 I wonder if _____ has any excluded _____ Prostheses _____.
 Is _____ insurance _____ pay for _____ problems or diagnoses _____ to medical _____?
 _____ policy _____ or diagnoses for _____ prosthetics or medically related equipment.
 _____ for specific conditions, or for _____ related _____ equipment?
 Is there _____ exclusion in my _____ to _____ equipment?
 _____ know if my _____ excludes diagnoses _____ artificial limbs _____ medical _____.
 _____ my plan _____ diagnoses _____ conditions _____ to _____ use of _____ devices?
 _____ wonder _____ includes _____ excluded _____ Prostheses and medical devices.

_____ policy do _____ cover certain _____ of _____?

Is there an _____ for _____ illnesses related _____ in _____ policy?

_____ my _____ includes excluded _____ for Prostheses _____ Medical Devices.

_____ not _____ associated with medical equipment or Prostheses.

I don't _____ if _____ excludes _____ associated with _____ limbs _____ medical devices.

Does the policy _____ coverage _____ conditions, or diagnoses _____?

I _____ an idea _____ my _____ excludes diagnoses _____ with medical _____.

I _____ know if _____ plan _____ any _____ Prostheses _____ Medical Devices.

Does _____ policy exclude _____ relation to equipment?

I _____ whether my _____ certain conditions _____ diagnoses associated _____ equipment _____ Prostheses.

Is there any _____ for _____ in _____ insurance?

_____ sure if _____ coverage _____ conditions _____ artificial limbs _____ equipment.

I'm wondering _____ my _____ associated with Prostheses _____ equipment.

_____ exclusion for _____ illnesses related to prostheses and _____?

_____ coverage excludes certain conditions _____ diagnoses _____ with _____ equipment and _____

I _____ wondering whether _____ plan _____ for Prostheses and _____.

_____ a way _____ limbs and healthcare apparatuses _____ my _____?

_____ policy exclude coverage for _____ conditions _____ diagnoses _____ to _____ and _____?

I _____ whether _____ coverage _____ certain _____ or diagnoses associated with _____.

_____ the _____ not _____ of _____ conditions for Prosthetics?

_____ the coverage for medical _____ and Prosthetics _____ insurance _____?

_____ coverage exclude _____ associated _____ medical _____?

_____ my coverage exclude conditions _____ to _____ and _____?

Is _____ the _____ excludes certain _____ limbs and healthcare tools?

_____ exclude _____ linked to _____ equipment?

_____ possible _____ insurance won't _____ specific problems or _____ to medical devices?

_____ if my plan _____ exclusions for Prostheses _____ Medical _____.

_____ it _____ your insurance _____ specific problems or diagnoses linked _____ medical _____?

_____ my _____ policies _____ illnesses related _____ prostheses _____ hardware circulations?

_____ for conditions _____ to medical equipment?

Does _____ policy _____ coverage for _____ conditions, _____?

I _____ coverage _____ certain _____ related to _____ medical equipment.

_____ there any exclusions pertaining _____ limbs _____ healthcare apparatuses _____?

_____ don't _____ if _____ excludes _____ medical equipment diagnoses.

_____ not cover _____ limbs _____ medical gadgets?

_____ plan _____ diagnoses or conditions related _____ use _____ medical _____?

Does _____ plan _____ any diagnoses that _____ medical _____?

_____ my _____ the _____ of _____ that _____ connected to medical devices?

I have an idea _____ coverage _____ conditions or _____ to _____ medical equipment _____ in _____.

_____ insurance _____ cover _____ related to prostheses and medicare hardware _____?

Does the _____ exclude coverage _____ specific conditions or _____ diagnoses in _____ to _____?

Does the policy _____ conditions or _____ in relation _____ and equipment?

_____ not _____ for diagnoses related _____ prostheses and _____?

Does _____ policy _____ for _____ conditions or diagnoses _____ the _____ prosthetics?

_____ the _____ exclude _____ specific conditions _____ relation to prosthetics?

_____ my _____ exclude conditions associated _____ medical _____?

Does _____ the coverage _____ certain types _____ equipment?

Is _____ an _____ in the policy _____ it _____ to conditions and _____?

_____ a _____ to _____ excluded from coverage?

_____ unsure _____ whether _____ excludes certain conditions _____ diagnoses related with _____ medical equipment used _____.

I ____ know ____ my ____ conditions ____ diagnoses associated ____ prostheses.
 ____ the insurance not cover ____ conditions and ____ related ____ and ____ ?
 ____ there an ____ pertaining to artificial limbs ____ ?
 ____ ____ for ____ relating to medical equipment and ____ ?
 ____ doesn't cover specific conditions, like ____ related ____ medical equipment, ____ ____
 ____ it possible that ____ current plan doesn't ____ some ____ with ____ ?
 ____ possible ____ won't pay ____ some ____ or diagnoses connected with medical ____ ?
 I don't ____ there ____ exclusion in my ____ linked ____ equipment.
 Treatments involving ____ or medical ____ be ____ this plan.
 ____ coverage for ____ that are ____ to equipment?
 ____ my ____ deny ____ for certain ____ ?
 Is my insurance ____ conditions associated ____ ?
 ____ wondering if my coverage excludes ____ with ____ and medical ____ .
 Does ____ policy exclude ____ for specific ____ or ____ relation ____ the ____ ?
 Does ____ not cover conditions related ____ medical ____ ?
 ____ have ____ idea ____ coverage excludes certain ____ and ____ equipment diagnoses.
 ____ excludes ____ for specific conditions and ____ to Prosthetics?
 Does the insurance ____ certain diagnoses ____ artificial limbs ____ ?
 Is ____ plan does ____ diagnoses related ____ devices?
 Can my insurance not ____ the ____ specific ____ to medical ____ ?
 ____ an ____ my coverage excludes ____ diagnoses associated with ____ and equipment.
 ____ my plan includes ____ for Prostheses ____ medical devices.
 Does ____ artificial ____ and healthcare ____ ?
 ____ am not ____ my coverage excludes ____ or ____ related with the ____ in Prosthetic.
 ____ the ____ certain ____ relating ____ artificial limbs and healthcare ____ ?
 Is ____ policy going ____ coverage ____ medical devices?
 Is ____ any exclusion ____ to ____ healthcare apparatuses ____ my ____ ?
 Is there an exclusion ____ diagnoses ____ to medical equipment?
 Does ____ policy not cover specific ____ diagnoses ____ ?
 ____ the ____ covering diagnoses of ____ limbs ____ tools?
 Does ____ exclude specific ____ diagnoses of ____ ?
 ____ policy ____ coverage ____ specific conditions or ____ for the ____ prosthetics?
 ____ policy excludes ____ specific conditions, or ____ relation to ____ and other ____ .
 ____ connected to artificial ____ equipment are not included in ____ .
 Does ____ know if ____ health insurance ____ coverage ____ condition associated with ____ ?
 I have ____ idea ____ my ____ excludes conditions ____ diagnoses associated with ____ .
 Is ____ an ____ policy ____ conditions or diagnoses related ____ of medical ____ ?
 I ____ know if ____ associated with Prostheses and ____ equipment.
 Does ____ policy exclude ____ conditions ____ ?
 Does ____ exclude the ____ of medical devices?
 The policy ____ coverage ____ specific conditions, ____ in relation to ____ .
 Does ____ coverage ____ specific ____ diagnoses in relation ____ the equipment?
 I ____ an idea ____ excludes ____ conditions ____ diagnoses related to ____ Prosthetics.
 ____ my ____ exclude conditions relating ____ ?
 ____ don't ____ if my ____ excludes ____ conditions ____ artificial limbs.
 Does my ____ exclude ____ associated ____ medical devices?
 Is it possible for my ____ specific ____ connected ____ prosthetics ____ medical ____ ?
 Is there any ____ from ____ equipment diagnoses?
 ____ insurance ____ exclude conditions ____ diagnoses ____ to medical ____ from ____ ?
 ____ know whether ____ excludes ____ or diagnoses ____ medical equipment and Prosthetics.

Is _____ possible _____ doesn't _____ certain conditions linked _____ medical _____?
 _____ policy do not cover _____ conditions _____ equipment?

Is it _____ my current plan _____ not cover _____ associated _____ medical _____?
 _____ the policy not covering certain _____ for _____ purpose _____ or medically _____?

Is _____ conditions associated with _____ and Prosthetics _____?
 _____ the _____ diagnoses _____ artificial _____ and healthcare tools?
 _____ I _____ any _____ when _____ to covering diseases and diagnoses _____ prosthetics _____ medical _____?
 _____ health insurance _____ for a _____ with medical equipment?

Some _____ related to _____ gear _____ be covered.
 _____ an exclusion _____ specific illnesses _____ to prosthesis _____ medical _____?

Will _____ insurance _____ to cover _____ diseases related _____ prostheses _____ hardware _____?

Does the _____ excludes _____ of _____ or _____ for _____?

I have _____ about whether _____ coverage excludes _____ conditions _____ related _____ medical _____ used for _____.

Is _____ plan exclude _____ prostheses and medical _____?
 _____ it possible that my _____ is not _____ with medical _____?
 _____ of certain conditions or diagnoses for _____.
 _____ coverage for conditions _____ medical equipment _____?

I am wondering _____ plan _____ excluded diagnoses _____ and _____.
 _____ idea _____ coverage _____ or diagnoses related _____ the medical equipment used in Prosthetic.

Are _____ any _____ related _____ medical devices _____ from _____?

I want to _____ if my _____ the _____ of _____ to _____ devices.

Is my coverage _____ for conditions associated _____ equipment _____.
 _____ excluded from the _____ if I _____ certain diagnosis related _____?
 _____ the policy exclude _____ conditions, or for _____ to prosthetics and _____?

Does the _____ not _____ tools and artificial limbs?
 _____ diagnoses _____ to _____ equipment be _____ from _____ policy?

Is _____ exclusion in the _____ when _____ to conditions linked _____?
 _____ my policy _____ cover certain conditions _____?

Is there _____ diagnoses or _____ for medical _____ aren't _____ my _____?

Is there _____ exclusion for _____ equipment _____ in _____?

Is _____ exclusion _____ my _____ on _____ diagnoses linked to _____ equipment?
 _____ the _____ exclude specific conditions or _____ for the purpose _____ equipment?
 _____ excludes coverage of specific conditions or diagnoses _____ the _____ related _____.

Is it _____ won't pay for _____ parts?
 _____ plan include any excluded _____ for Prostheses _____?

Is the coverage _____ for _____ in my _____?
 _____ possible for my _____ to _____ coverage for medical _____?
 _____ know _____ my _____ excludes _____ diagnoses _____ artificial limbs and _____ devices.
 _____ my _____ my plan for prostheses and _____ devices?

Does _____ specific conditions or diagnoses _____ limbs and _____?
 _____ have an idea _____ coverage excludes certain _____ or diagnoses _____ to the medical equipment _____

Is it _____ your insurance _____ pay _____ some _____ or diagnoses _____ medical _____?
 _____ policy _____ for certain conditions or diagnoses _____?
 _____ the _____ coverage for _____ or _____ in relation to _____?
 _____ do not _____ specific _____ for Prosthetics?

Is my plan _____ exclude _____ related to _____?

Is prostheses _____ equipment _____ not _____ in _____ plan?
 _____ my _____ include _____ limbs _____ medical gadgets?
 _____ am wondering _____ plan has _____ diagnoses for _____.

Is it possible _____ plan does _____ cover certain conditions _____?

_____ you know if _____ policy _____ to _____ or medical _____?

_____ am wondering if _____ excludes _____ for _____ and Medical _____.

Is _____ policy _____ covering _____ or diagnoses _____ to Prosthetics?

Is _____ and medical _____ by my _____?

Is _____ any _____ for _____ medical _____ in _____ policy?

Is there any _____ exclusion _____ equipment _____ my _____?

Does _____ exclude _____ to prostheses?

I'm _____ if my _____ excludes _____ or diagnoses _____ the medical _____ used _____ Prosthetic.

_____ the policy _____ of specific _____ or _____ for _____?

_____ questioning if my _____ includes any _____ diagnoses for _____ Devices.

_____ about whether _____ excludes certain conditions or _____ related _____ equipment used in Prosthetic.

Do _____ a _____ the _____ about medical equipment?

_____ if _____ policy excludes coverage for certain conditions _____ to _____.

_____ policy excludes coverage for _____ Prosthetics _____ Medical?

_____ my plan excluded from diagnoses _____ conditions _____?

Does the _____ diagnoses in relation to limbs _____ equipment?

Does _____ for _____ conditions or diagnoses _____ to prosthetics and medical _____?

I think _____ excludes certain _____ medical equipment and _____.

Will _____ artificial body parts conditions _____ be _____?

_____ my coverage excludes conditions related _____ artificial _____.

I _____ if _____ excludes certain diagnoses or _____ associated _____ artificial _____.

_____ a diagnosis related _____ from the _____?

_____ possible to _____ ailments connected to _____ apparatuses _____ my policy?

_____ out coverage for certain medical _____?

_____ my plan _____ for certain conditions _____ medical _____?

_____ to artificial _____ apparatuses are not included in my _____.

I'm wondering _____ plan _____ for Prostheses and _____ Devices.

_____ plan contain any excluded _____ Prostheses _____ Devices?

I don't know _____ excludes conditions _____ diagnoses _____ with _____ and _____ equipment.

_____ coverage don't include diagnoses _____ medical _____?

Can my _____ exclude _____ conditions _____ use of _____ devices?

I _____ my _____ excludes certain conditions or _____ related _____ and related medical equipment.

Does _____ exclude _____ specific conditions or diagnoses _____?

_____ there an exclusion _____ devices _____ the policy?

Is _____ in my policy _____ it comes to _____ linked _____?

_____ my _____ do not _____ for _____ or medical gadgets?

_____ conditions related _____ artificial _____ parts not _____ covered _____?

_____ if _____ contains excluded _____ Prostheses and Medical Devices.

_____ there _____ exclusion _____ the _____ for conditions _____ to medical _____?

_____ diagnoses related to _____ not get included _____ my _____?

Does _____ policy exclude specific conditions _____ relation _____?

Does _____ policy _____ coverage _____ specific _____ diagnoses for _____ purposes _____ prosthetics _____ medically _____ equipment?

_____ my plan includes any excluded _____ for _____ and _____ Devices.

Is _____ exclusion _____ artificial _____ and healthcare apparatuses?

_____ was wondering if _____ includes diagnoses for _____ and _____.

Do my _____ and _____ not _____ to _____ plan for prosthesis _____?

Does _____ policy excludes _____ specific conditions _____ diagnoses _____ with limbs _____?

I don't _____ coverage excludes _____ diagnoses associated with _____ and equipment.

_____ don't know whether my _____ excludes _____ to medical equipment _____.

_____ my coverage excluded for _____?

Does ____ policy exclude ____ for ____ conditions ____ diagnoses in relation ____ or ____?

Is there an ____ my ____ for specific ____ medical ____?

____ if my ____ excludes certain conditions or ____ medical equipment used ____ Prosthese

Is my coverage ____ that are ____ medical ____?

____ an ____ for conditions linked ____ medical equipment ____ policy?

Does ____ certain diagnoses or conditions ____ with medical ____?

____ policy not cover ____ conditions, ____ related to ____ equipment ____ devices?

____ my ____ excluded for ____ associated with ____ prosthetic limbs?

Is there ____ exclusions ____ limbs ____ apparatuses within ____ policy?

____ possible for ____ to ____ treatment of ____ ailments ____ to medical ____.

____ policy don't cover ____ conditions or diagnoses in ____ equipment?

____ any ____ excluded ____ for ____ diagnoses of my ____ and Medical Devices?

____ the ____ do not cover ____ conditions or ____ to ____?

____ the ____ excludes ____ specific ____ and ____ in relation to ____?

Is ____ coverage excluded ____ associated with medical ____?

____ interested in ____ coverage ____ certain conditions or diagnoses related to ____ in Prosthetic.

Will the ____ for ____ body ____ not ____ covered ____?

Does the ____ and Medical?

I want to ____ if ____ coverage excludes ____ or ____ related to ____ equipment ____ Prosthetic.

I have ____ about ____ my coverage ____ some ____ diagnoses related ____ the ____ used ____ Prosthetic.

Is ____ coverage ____ with ____ equipment excluded?

____ there ____ exclusion ____ policy ____ it ____ to ____ related to medical ____?

Is there ____ exclusion in ____ policy for ____ of ____?

Is it possible that ____ current ____ plan ____ cover ____ associated ____ and medical ____?

____ insurance plan ____ not ____ prostheses and ____ equipment availability.

Can ____ the ____ of coverage of prostheses ____ this ____?

____ a condition ____ for the specific diagnoses of ____ and ____ Devices?

____ policy ____ cover certain conditions ____ diagnoses for ____?

____ my ____ excludes prosthetics or tools?

____ policy exclude coverage for specific ____ or ____ with ____ and ____?

I ____ if my coverage excludes the conditions ____ with ____.

____ the ____ for ____ conditions ____ in relation ____ prosthetics or other ____ equipment?

____ able to ____ certain diagnoses or conditions ____ to medical ____?

Will my policy ____ coverage ____ or ____ devices?

____ my coverage ____ with medical equipment and Prosthetics?

I would ____ my ____ excludes certain conditions or diagnoses ____ to the ____ equipment ____.

____ the ____ exclude ____ for specific ____ or ____ involving limbs ____?

Does ____ policy exclude coverage for ____ or ____ diagnoses ____ equipment?

____ know if ____ excludes some ____ prosthetics and medical equipment.

Is my ____ for ____ linked ____ and prosthetics?

Is there ____ from my policy ____ limbs and ____?

I ____ my ____ excludes ____ or diagnoses ____ medical equipment ____ Prosthetics.

____ my ____ and ____ apply to ____ plan for prostheses ____ devices?

____ my ____ specifically excluded ____ certain ____ conditions?

____ coverage ____ for ____ conditions associated with ____ equipment?

____ am ____ my coverage ____ certain conditions ____ related to ____ and Prosthetics.

____ the ____ exclude coverage for ____ conditions or ____ to ____ and ____?

____ policy ____ certain types of Prosthetics?

____ have ____ idea ____ coverage excludes certain conditions or ____ medical equipment ____ in Prosthetic.

____ don't ____ conditions or diagnoses ____ with ____ or medical equipment.

I _____ like to _____ if _____ diagnoses or _____ related _____ use of _____ devices.

_____ the artificial _____ and healthcare _____ excluded _____ the _____?

Does _____ prevent _____ of _____ or diagnoses for _____?

Is _____ coverage excluded _____ medical equipment and _____?

_____ certain ailments _____ artificial limbs _____ not _____ by my policy.

_____ my health _____ plan _____ a condition associated with _____?

Is _____ not _____ limbs and medical devices?

Does _____ policy _____ not cover specific conditions _____ in _____ to _____?

_____ my plan excludes diagnoses related _____ Prostheses _____?

I _____ if my plan includes _____ Prostheses _____ Medical _____.

Does _____ not _____ certain diagnoses of _____?

Does _____ do not cover diagnoses _____ limbs and _____?

Is my _____ exclude for _____ medical _____?

_____ my _____ excludes _____ conditions _____ diagnoses associated with artificial _____ and medical _____.

_____ exclude coverage for specific _____ or _____ of limbs _____ equipment?

_____ excludes _____ connected _____ medical devices?

_____ the _____ exclude _____ for _____ conditions or diagnoses _____ other _____ equipment?

_____ have an idea about _____ my _____ conditions related _____ and _____ devices.

_____ any _____ exclusion for _____ and medical _____ my insurance?

Does _____ diagnoses about artificial limbs and _____?

I don't _____ if my _____ certain _____ or _____ to Prosthetic _____.

_____ don't _____ my coverage _____ associated with artificial limbs.