

[Demo] NLP Dataset for Customer Service Automation

Company Type	Pet Insurance Companies
Inquiry Category	Coverage details and policy options
Inquiry Sub-Category	Alternative therapies
Description	Explanation on coverage for complementary and alternative treatments like acupuncture, chiropractic care, physical therapy, or herbal medicine.
Data Size	5,898 paraphrases
Want to buy data?	Please contact nlp-data@gross.me via your business email address.

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

What is the maximum coverage _____ for _____ my policy options?
_____ limit _____ annum for the treatments you _____ tell _____?
You're _____ to tell me _____ max _____ treatments _____ this _____?
Do _____ information _____ sum insured per _____ specifically dedicated _____ these _____?
Do you have _____ information _____ maximum _____ insured per _____ for _____ that _____?
Is _____ a limit _____ how much _____ I get _____ of _____?
_____ you _____ the coverage cap _____ these treatments?
_____ amount _____ cover for treatments _____ year?
Can you share _____ allowed for _____ my _____?
_____ per available policy _____ what _____ the _____ amount _____ treating these _____?
Is there a limit _____ much can _____ paid _____ year _____?
I _____ to _____ the _____ coverage _____ is for _____ types.
What the _____ limit _____ is _____ these treatments?
_____ a _____ annual _____ limit _____ kind of treatment if I choose _____ your _____?
I _____ know what _____ ceiling _____ for _____ of treatment.
Can you give _____ the _____ amount _____ treatments?
_____ would _____ to _____ about _____ that can be _____ for these types of _____.
_____ you know _____ maximum _____ limit _____ these _____ my policy?
Can _____ tell me _____ coverage _____ my treatment?
Can _____ about _____ maximum _____ allowed for these treatments?
_____ would _____ to know the _____ per _____ for these treatment _____.
_____ you _____ me what _____ yearly maximum coverage _____ for _____?
_____ you _____ information _____ insured per _____ dedicated to procedures based _____ policies I can _____?
Can you tell _____ is _____ annually for _____ under _____ plan?
Is the maximum _____ per year _____ options _____ my _____?
Can you tell _____ plan _____ my treatments?
What _____ the _____ coverage _____ my _____?
_____ tell _____ annual max _____ on _____ this plan?
Can you _____ cap for my policies?

_____ what is the _____ limit of _____ offered?

_____ the yearly ceiling _____ coverage of this _____?

_____ wanted to know about _____ maximum amount _____ annually _____ these _____.

Is there _____ limit on the _____ of _____ can be treated _____?

What's the uppermost level of _____ policies?

_____ is _____ yearly _____ amount of coverage _____ these _____ my _____?

_____ there _____ on how _____ covered each _____ certain treatments?

_____ would _____ maximum amount covered each year _____ types _____ treatments.

What is the ceiling _____ this _____ of _____ choice?

_____ much _____ is offered annually _____ for these treatments?

_____ the _____ these treatments _____ my policy?

Is _____ a _____ limit _____ what _____ insurance _____?

What is _____ coverage limit _____ types _____ my policy _____?

_____ policy _____ what _____ the maximum coverage limit _____?

I _____ to know _____ that can be _____ these types _____ treatments.

_____ me _____ maximum coverage per year _____ is _____ for _____ treatments?

I need to _____ the _____ will _____ covered _____ for these _____.

_____ me the _____ coverage amount _____ my treatments?

_____ a limit to _____ much can _____ for _____ procedures _____ year?

What are _____ maximum _____ coverage offered for _____?

_____ is _____ annual _____ of cover _____ for these _____?

What _____ can be _____ annually under _____ policies?

Can you _____ me _____ limit _____ annum _____ the _____ treatments?

I _____ know _____ amount of treatments _____ my plan.

_____ restriction is there _____ this _____ with _____ choice?

I need to know _____ coverage _____ in _____ policy.

You _____ tell me your annual _____ limit _____ plan?

_____ for covering this type of _____ my policies.

Do you have _____ information _____ maximum _____ insured _____ annum specifically dedicated to _____ on _____ that _____?

_____ annual _____ for covering this _____ of treatment _____ policies?

I need _____ coverage limitation for _____ treatments.

_____ will cover yearly for _____ of treatments?

_____ you _____ the _____ that will be covered _____ for _____ of treatments?

Does _____ annually by my _____ have any limitations?

_____ limit to how _____ can _____ paid towards _____ each year?

How _____ coverage _____ insurance provide _____ for this category _____?

_____ is _____ limit per year for the _____ my _____?

_____ you _____ the _____ sum insured per annum _____ such procedures based _____ policies I choose?

Is the _____ coverage _____ these treatment _____ included _____ options?

_____ there a _____ how much _____ be _____ procedures each year?

_____ is the maximum amount that _____ be covered _____?

How _____ does _____ insurance cover per year _____ of _____?

Is there _____ on the _____ plan covers for _____?

Can _____ tell me _____ coverage _____ those treatments?

What _____ coverage _____ for these treatments in _____?

_____ if there is _____ yearly _____ what _____ policy covers.

I'm _____ there _____ a yearly _____ on what _____ policy _____.

_____ me the yearly coverage cap _____.

Was _____ maximum coverage _____ for these _____ policy _____?

_____ limit _____ what my policies cover?

I would ____ to know the ____ these types ____ year.
 ____ there a limit on the ____?
 ____ is ____ maximum ____ on the treatment ____ my ____?
 I want to know ____ annual ____ these ____ with ____.
 ____ is ____ highest ____ of ____ coverage ____ get for these ____?
 ____ the maximum ____ for ____ treatments ____ my policy?
 ____ is the ____ limit ____ types in ____ policy?
 ____ is the maximum annual ____ of ____ that ____ get ____ options?
 ____ there ____ maximum payment ____ treatments in your policy?
 I ____ to know about your ____ on treatments ____?
 I want to ____ if you ____ any ____ on the ____ per ____ dedicated ____ such ____.
 ____ is the maximum annual ____ of ____ these ____ my selected ____?
 What is ____ maximum coverage ____ for ____ treatments ____ for?
 Can ____ me know ____ the policy ____ for ____ treatments?
 ____ me ____ much ____ is ____ for these ____ within my policy ____?
 I want ____ the maximum ____ my plan ____ these ____ of treatments.
 ____ much my ____ covers for this category ____?
 I would like ____ know ____ payment ____ my ____ these treatments.
 Can ____ the ____ limit ____ for these treatments?
 ____ want ____ the yearly coverage cap for these ____.
 ____ me the maximum ____ coverage amount ____ treatments ____ plan offers?
 What is ____ maximum amount of ____ available ____?
 ____ maximum annual limit of ____ these treatments?
 ____ any ____ how much can be ____ certain procedures ____ year?
 ____ the maximum ____ coverage I can get for ____?
 ____ it ____ the annual ____ coverage amount for ____ offered ____ my ____?
 ____ expect ____ threshold in case I ____ frequent ____ of treatment ____ my ____?
 ____ many ____ be ____ annually by ____ policies?
 What ____ the uppermost ____ coverage offered ____ these treatments?
 ____ my insurance ____ annually ____ this category of ____?
 What ____ maximum ____ of coverage for ____ treatments ____ options?
 ____ you ____ the ____ coverage for the treatments ____ options?
 Can ____ please ____ yearly cap for ____ treatments?
 ____ selecting one of ____ policies, is ____ a specific ____ kind of ____?
 ____ a ____ on the amount ____ covered by ____ policy?
 ____ clarify the ____ coverage available ____ these treatments ____ policy ____?
 ____ know how much ____ policy limits ____ for ____ treatments.
 ____ it ____ to specify the ____ coverage ____ by my plan?
 What ____ the ____ amount of ____ offered each ____ my ____?
 ____ the ____ of ____ these treatments?
 ____ like to ____ amount that ____ chosen ____ covers for ____ of treatments.
 ____ the maximum annual limit of coverage ____ offered ____ treatments?
 Can ____ tell me the ____ coverage limit ____?
 What ____ the maximum ____ of ____ I ____ get for the ____?
 ____ much will ____ cover every ____ for this ____ of ____?
 ____ for ____ this kind of treatment ____ my policy ____?
 ____ give me ____ information about ____ maximum coverage allowed ____?
 ____ limit available per ____ for covering the ____?
 Depending on available ____ what's ____ highest ____ payable annually ____ treating ____?
 ____ you mean your ____ on treatments with ____?

Is _____ coverage _____ for these treatments _____ policy?

_____ is _____ limit per _____ for covering these _____?

I would _____ the yearly coverage _____ Treatments _____ my _____ preferences.

_____ a description of the _____ sum insured _____ dedicated to _____ procedures?

Is _____ annual _____ what my _____ covers?

_____ maximum annual limit of coverage _____ treatments _____?

_____ you _____ me about _____ caps for these _____?

_____ you please _____ how much is _____ by each insurance _____ related _____ kind of _____?

_____ have any _____ maximum sum insured _____ dedicated _____ such _____ based on _____ policies I choose?

_____ know if _____ have any information regarding the _____ sum _____ per _____ to such _____.

_____ highest limit per year for _____ certain _____?

Can you tell _____ what the _____?

You _____ tell me your _____ for _____ with this _____?

Let me _____ annual max limit _____ treatments _____.

Can you give me _____ coverage _____ choose?

_____ is the limitation _____ coverage _____ my policy?

Are _____ going to _____ me _____ your _____ on treatments with _____?

_____ yearly max _____ on treatments _____ plan?

What _____ the maximum _____ limit for _____ policy?

What _____ maximum coverage for _____ on my _____?

Can you give _____ maximum yearly _____ for treatments _____ my _____?

Is there any limit on the _____ policy _____?

_____ can be covered _____ by _____ for such _____?

What _____ extent of coverage that I _____ treatments?

I _____ to know about the _____ amount covered _____ for _____ types of _____ chosen _____.

I would like to know _____ maximum _____ my _____.

_____ there _____ limit to the types _____ policy _____?

_____ coverage amount for the treatments _____ my plan offers?

What _____ the _____ of coverage _____ year _____ these _____?

_____ coverage restriction on this _____ my policy?

_____ is _____ cap on coverage per year _____ this category?

Are _____ aware _____ the _____ sum _____ annum _____ is _____ such procedures?

What _____ my _____ give for this category _____ treatments?

_____ the _____ extent of _____ offered each _____ my _____?

I _____ details on _____ yearly maximum _____ limit under _____ policy _____.

Is there a _____ to the _____ therapy _____?

What's the _____ for covering this _____?

_____ to _____ the maximum amount of _____ annually for my _____.

_____ you _____ to tell me about the _____ limit _____ with _____?

_____ about the maximum sum _____ per _____ procedures based _____ policies I can choose?

What is the _____ limit allowed _____ covering _____?

_____ the _____ of coverage _____ these treatments _____ year?

_____ let me _____ maximum yearly coverage _____ for these _____?

_____ the maximum amount of _____ available for _____ year?

What _____ the _____ coverage that _____ offered _____ for _____ treatments?

What _____ uppermost _____ of _____ offered each _____ my policy _____?

_____ the _____ annual _____ coverage offered for _____ treatments _____ options?

_____ want to _____ the maximum coverage _____ year _____ types.

_____ you give _____ the maximum _____ coverage amount _____ by my _____?

My policy _____ include _____ annual _____ for _____ treatment _____.

What's the _____ year for covering _____ of _____?

_____ you tell me the limits _____ coverage _____?

What _____ highest possible _____ provided as yearly _____ particular _____ procedures?

Limit _____ amount _____ by _____ each _____ for _____ treatments.

_____ you tell me what _____ is for these _____?

Can _____ maximum _____ amount for my treatments?

_____ on coverage for this _____ of treatment?

What _____ the _____ of coverage _____ these treatments _____?

Is the _____ limit _____ these treatment _____ in _____ policy?

Tell me the _____ max limit _____ treatments _____?

What _____ the _____ year for _____ like this?

_____ annual _____ this type of treatment to be _____?

_____ know how much my _____ the _____ per year _____ such _____.

What is _____ for these treatments annually?

Is the _____ coverage limit _____ my _____ these _____?

_____ to know _____ amount of treatments covered _____ plan.

Can _____ me the maximum coverage _____ treatment?

_____ you tell me _____ yearly _____ for my _____?

_____ you _____ on the maximum _____ insured per annum that _____ procedures that I _____?

Can you explain _____ me _____ cap for _____?

_____ the annual _____ for this _____?

_____ want _____ the yearly coverage _____ for _____ treatments _____ my policy _____.

Can you _____ policy _____ for these treatments?

_____ maximum coverage limit for _____ treatments _____ policy?

What is _____ maximum yearly limit _____ treatments?

Is there _____ restriction for _____ on _____?

What's the annual coverage _____?

_____ would _____ to know the maximum payment _____ selected _____ for _____.

Is _____ any _____ on the _____ of therapy that _____?

I want _____ know _____ the _____ limit _____ for _____ specific _____.

Is there _____ maximum limit for _____ under _____?

_____ would _____ to _____ how _____ my _____ cover for these _____ of _____ annually.

I want _____ how much _____ yearly I get _____.

_____ is the _____ limit _____ these treatments under _____ policy?

Is _____ each year covered _____ plan for _____ treatments?

_____ the highest plan limit _____ treatments I have?

_____ I _____ the yearly _____ amount of _____ these _____?

Can _____ me the _____ coverage _____ these types?

_____ is _____ limit _____ year _____ the treatment _____ my policy choices.

Is there _____ annual coverage _____ in my policy _____?

Is there _____ of therapy covered by my _____?

Should _____ annual _____ types of _____ covered by my policy alternatives?

Is there a _____ can be _____ certain _____ each year?

Do you _____ what _____ per annum _____ procedures based _____ policies _____ I can choose?

_____ there a _____ how _____ I _____ be _____ for certain medical procedures?

Is _____ limit _____ is covered by _____ plan each _____?

_____ the _____ the _____ in my policy options?

_____ me _____ max _____ limit for this treatment?

Can you tell me _____ coverage _____ for these _____?

_____ tell me _____ plan _____ for specific _____?

Can you _____ the _____ coverage _____ for these treatments _____?

_____ wish _____ yearly _____ these treatments with my policy preferences.

Do you _____ sum _____ annum _____ dedicated _____ procedures that I _____ choose?

_____ the maximum coverage limits for these _____?

How much the _____ year _____ these specific _____?

Will there _____ a coverage _____ per _____ my _____?

Is _____ any limits _____ amount _____ therapy covered by _____?

_____ you tell _____ much _____ covered _____ each insurance _____ specific to _____ of treatment?

_____ tell me the annual max _____ with _____ plan?

_____ policy _____ have an _____ coverage _____ for treatment _____.

What _____ of _____ offered annually _____ policy choices _____ these treatments?

_____ the coverage restriction _____ for _____ treatment with _____ policy _____?

_____ want to _____ details _____ yearly _____ payment _____ my _____ for _____ specific treatments.

_____ tell _____ the maximum coverage amount _____ can get _____?

Can _____ tell _____ cap for these _____?

_____ how _____ can be covered _____ such treatments?

_____ much can be _____ annually _____ such _____ policies?

What _____ maximum coverage _____ for _____ within my policy _____?

What _____ annual _____ of _____ offered under my _____?

I want _____ know details on the yearly _____ limit _____.

Is _____ to what my _____ these types _____ treatments?

_____ you tell _____ the _____ coverage _____ for these _____?

_____ would like to _____ maximum amount covered _____ these types _____.

How much _____ my _____ for this category _____ every _____?

_____ annual limit of _____ for this treatment?

Is there a _____ on _____ my _____ covers _____?

_____ highest _____ per _____ for covering these treatments?

_____ you going to let _____ know your _____ treatments with _____?

What is the _____ provided _____ year for this type _____?

What _____ highest amount of yearly _____ I can provide _____?

_____ per _____ for this _____ with my policy choice?

_____ maximum amount of coverage _____ I can _____ treatments?

_____ frequent _____ covered by my policies, should _____ expect an _____ threshold?

_____ is the maximum _____ these treatments _____ policy?

I _____ to _____ maximum amount _____ for these types _____ treatments _____ plan.

Does _____ category of _____ cap _____ coverage per _____?

What _____ the _____ extent of _____ each _____ in _____ for _____ treatments?

What's _____ coverage restriction _____ treatment _____ policy?

Is there _____ on _____ amount _____ that _____ be covered by _____?

Can _____ me how the policy _____ coverage _____?

_____ you going to _____ about _____ limit on treatments?

How much does _____ insurance _____ per year _____ of _____?

_____ there _____ for the amount _____ by my plan?

_____ it comes _____ covering _____ treatments, what is _____ year?

Can you _____ me if there _____ a _____ payment _____ each plan's treatment offerings?

_____ yearly maximum coverage allowed _____ these treatments with _____?

What is _____ uppermost _____ of _____ provided _____ policy choices?

How _____ my _____ annually _____ such treatments?

Is _____ cap for _____ treatments?

Within _____ what _____ the annual ceiling for covering this _____?

_____ limit _____ this _____ of treatment if I _____ one _____ your policies?

_____ I _____ types _____ by _____ alternatives, should I expect _____ annual boundary?

What _____ annual coverage _____ these _____?

What is _____ maximum limit _____ coverage I _____ get _____?

Can you _____ maximum coverage that _____ for these _____?

_____ I _____ one of _____ a specific annual _____ limit for this _____?

_____ coverage limit _____ my policies?

_____ the policy limit _____ specific _____?

_____ much _____ covers _____ category of treatments _____?

_____ you _____ me the maximum coverage available _____ in _____ options?

I _____ like _____ the cap _____ treatments _____ policy preferences.

What _____ the _____ annual limit _____ offered for _____?

_____ a limit _____ the _____ year that my plan _____?

_____ know the maximum amount that my _____ will _____ these _____.

_____ to know _____ highest plan _____ for these _____ under _____ options.

_____ would like _____ know _____ maximum amount _____ covered _____ under my _____.

You _____ to tell _____ about _____ max _____ with this plan.

Is _____ any _____ the _____ that _____ be covered annually?

What _____ the _____ for this type of _____ plan?

I _____ like to _____ maximum _____ for _____ treatments in my _____.

My _____ options _____ coverage limit _____ the treatments.

_____ to know the maximum amount that my _____ will _____ these _____ of treatments.

_____ is the coverage _____ for _____ treatment _____ in my _____?

How _____ policy limits _____ per year _____ treatments?

I _____ like _____ know _____ maximum payment _____ under _____ policy _____ treatments.

Is there _____ on _____ sum insured _____ annum _____ dedicated to _____ on _____ that I _____?

_____ there any limit _____ the amount of _____?

_____ an annual _____ expected _____ I need frequent _____ of _____ by _____ alternatives?

_____ highest amount of _____ coverage _____ policy alternatives for these _____ procedures?

_____ is the maximum annual _____ coverage _____ my _____?

_____ a _____ on _____ of therapy _____ can be _____ annually?

Do you have _____ sum _____ per _____ specifically dedicated _____ procedures that I can _____?

_____ the _____ of coverage _____ on my policy?

_____ there _____ how _____ this _____ be treated under my _____ options?

I would _____ yearly maximum payment _____ these _____ treatments.

_____ is _____ maximum _____ of coverage _____ be had _____ these treatments?

You'll _____ about the annual max limit _____ with _____?

How _____ is covered annually _____ my _____ such _____?

Can _____ tell _____ of insurance _____ for this kind _____ year?

What's _____ ceiling _____ this _____ of treatment to _____?

_____ maximum _____ limit for these _____ my policy?

What _____ yearly _____ cap for _____ treatments with _____ preferences?

_____ is _____ annual coverage _____ for this _____?

Can you _____ the maximum _____ coverage _____ treatments?

_____ highest limit available _____ covering these treatments in _____?

Is there _____ how much _____ for certain treatments?

_____ there _____ cap for _____ treatments?

_____ treatments _____ my _____ cover each _____ for?

_____ is _____ limit for these types in _____?

How much _____ restricted by the policy _____?

Can you let _____ know the _____ annual _____ these _____?

_____ to know _____ maximum _____ covered _____ for _____ types of treatments.

_____ know how much my chosen plan will _____ for _____ of _____.

_____ give me the maximum amount that _____ will cover for _____?

_____ want _____ know if you have a _____ treatments _____ this _____.

Is there _____ limit on _____ be _____ out _____ procedures each _____?

I would _____ if there are _____ limits on _____ amount _____ covered _____ policy.

_____ there a yearly limit to _____ I _____ cover _____?

Is there a _____ year my _____ covers?

_____ me about the _____ amount _____ my _____ will cover _____ treatments?

_____ let me _____ the _____ coverage allowed for _____ treatment on _____?

_____ want _____ know if there _____ limits _____ amount of therapy _____.

_____ you _____ information about _____ maximum sum _____ per annum that _____ to _____ can choose?

_____ you give me _____ for _____ treatment types?

_____ annual _____ for these treatment _____ in _____ policy?

How _____ coverage _____ get annually for _____?

_____ looking for _____ yearly maximum _____ limit _____ my policy _____ treatments.

I would like to know _____ the _____ for _____ under my _____.

_____ expect _____ annual _____ I _____ treatment covered by my policies?

_____ you let _____ the maximum _____ I _____ my policy?

_____ the _____ amount of _____ each year _____ this _____ of treatment?

What is _____ uppermost _____ offered each year in _____?

Can _____ me the _____ coverage _____ for these _____?

Is there _____ cap on _____ much _____ can _____ for certain _____?

_____ to know the maximum coverage _____ policy options.

I _____ to know _____ coverage _____ available for these _____.

_____ maximum limit _____ treatment _____ in my _____ choices?

_____ the annual _____ limit _____ these treatments _____ like?

_____ is _____ maximum _____ year for treatment types?

_____ maximum _____ limit of the _____ offered _____ these treatments?

How _____ will _____ cover for this _____ of _____ a _____?

_____ is the _____ coverage _____ for these treatments _____?

Do you have any information _____ the _____ annum _____ procedures based on policies _____ choose?

Is there a limit _____ for _____ type _____ treatment _____ I select _____ your _____?

_____ limit _____ year that _____ plan covers?

_____ is _____ for these _____ in my _____ options?

_____ to _____ there are limits _____ the amount _____ therapy covered _____.

_____ amount _____ be covered _____ such _____?

_____ you let me _____ about the _____ yearly coverage _____?

Inform _____ about your _____ max limit _____ this _____?

_____ you know _____ the _____ sum _____ annum _____ for _____ policies I can choose?

Do you have _____ sum insured per _____ dedicated to procedures _____ policies _____ can choose?

Can _____ tell me how _____ the _____ restricts _____ certain _____?

The annual _____ for _____ is a question.

Can you give me details on _____ treatments?

_____ the annual ceiling _____ treatment like _____?

_____ the _____ for _____ this type of treatment?

Is there _____ limit on the _____ kind _____ if _____ one of _____ policies?

_____ know how _____ is _____ for _____ of _____ under my plan?

How _____ covered _____ such treatments _____ my policies?

Tell me ____ annual max ____ for ____ this ____.
 ____ is ____ annual ____ for ____ treatment of ____ type?
 Do you ____ policy ____ for specific treatments?
 ____ the max coverage ____ per year ____ these ____?
 ____ me about the yearly maximum payment ____ policy ____ treatments.
 ____ much is the ____ for covering ____ type ____?
 ____ extent can ____ cover ____ within a year?
 What are ____ limits ____ these treatments ____ policy?
 ____ can tell me ____ yearly coverage cap ____ treatments ____ preferences.
 ____ wanted ____ the yearly maximum ____ limit ____ my policy ____ these ____.
 Can ____ know if ____ yearly maximum ____ allowed on ____ policy?
 Can ____ give me ____ maximum yearly ____ amount ____ treatments ____?
 I would like ____ know ____ covered ____ these ____ treatments under my ____.
 Can ____ the coverage limit ____ the ____ types?
 ____ about ____ sum insured per ____ which ____ dedicated to such procedures?
 ____ maximum coverage for these ____ my ____?
 Is there ____ on ____ of therapy ____ annually ____ policy?
 Is there a cap ____ how ____ covered ____ treatments?
 What ____ the ____ maximum amount ____ for these ____?
 ____ you tell ____ how much coverage I ____ treatments?
 ____ there a limit ____ how ____ be paid ____ certain procedures ____?
 ____ the maximum annual ____ of ____ for the ____?
 ____ is the ____ level of ____ each year ____ my policy ____ for ____?
 ____ a ____ on the amount of therapy ____ my ____.
 What is the maximum ____ of ____ be ____ for ____ treatments?
 I am ____ limitation per year for ____ treatment ____.
 Is there ____ this category under ____ plan option?
 What ____ extent of coverage offered annually within ____ choices ____?
 Do you know the ____ for ____ my policies?
 Can ____ me ____ maximum coverage ____ for ____ types ____ treatment?
 ____ there a ____ amount ____ therapy covered by ____ policy?
 ____ wanted ____ know ____ highest plan limit per ____ treatments.
 What is the ____ insurance cover for ____?
 ____ me ____ much ____ covered annually ____ each insurance alternative related ____ this ____ of ____?
 ____ the maximum coverage ____ year available ____ these ____ within ____?
 Can ____ tell ____ amount that ____ can ____ for my treatments?
 Can ____ tell ____ the maximum amount ____ for these ____ of ____?
 I want the ____ cap ____ these treatments ____ policy ____.
 ____ you ____ me if there is ____ coverage ____ this category of ____.
 ____ is the limit for ____ coverage of ____?
 ____ you clarify how much ____ by each ____ alternative ____ kind of ____?
 What is the ____ of coverage ____ options ____?
 Is it ____ cap on coverage for ____ of treatment under ____?
 ____ there ____ limitation per year ____ the treatment ____?
 Can there ____ to ____ much can be paid ____ each ____?
 What is ____ ceiling ____ type of treatment ____ my ____ choices?
 ____ uppermost ____ each year in my policies?
 What is the ____ coverage for ____ treatments ____?
 ____ there ____ on ____ coverage ____ this ____ of ____ if I ____ a policy?
 ____ is the ____ amount ____ year for these ____?

____ you ____ me the ____ coverage limit for ____ ____ ?
 ____ my insurance ____ category of ____ annually?
 Can you tell me the ____ my ____ provides?
 Can ____ tell ____ yearly coverage ____ for ____ treatments?
 I ____ to ____ annual ____ for ____ type of treatment.
 How ____ my insurance covers ____ this ____ treatment?
 I want ____ the ____ coverage ____ for these treatments within ____ options.
 ____ want ____ what ____ annual ____ limit ____ on ____ with this plan.
 What ____ coverage ____ for these ____ in ____ policy?
 ____ the ____ per year ____ covering ____ type ____ treatment?
 Is it possible ____ tell ____ limit ____ year ____ these treatments?
 ____ is the ____ these types in my ____ ?
 ____ would like ____ know ____ on ____ maximum payment limit ____ policy ____ these ____ .
 What ____ uppermost level of coverage ____ these treatments?
 ____ is ____ coverage ____ every year by my policies?
 ____ provide me ____ a maximum yearly coverage ____ for ____ ?
 Can ____ tell me ____ highest plan limit ____ treatments?
 Let ____ annual ____ on treatments with this plan.
 What is ____ ceiling for ____ kind of ____ policies?
 Is there a ____ this ____ my policy ____ ?
 What is ____ annual ceiling ____ this ____ of ____ my ____ ?
 Can you tell ____ the ____ payment ____ is for ____ ?
 Can there be ____ the ____ of ____ covered ____ my ____ ?
 Will ____ know ____ coverage cap for these ____ ?
 I need to ____ highest plan ____ annum for ____ .
 Should ____ expect ____ threshold or ____ I ____ frequent ____ covered by ____ alternatives?
 ____ would ____ know the maximum ____ limitation per ____ treatment types.
 ____ is ____ highest coverage limit ____ these ____ in ____ policy ____ ?
 What ____ amount of coverage provided ____ for ____ ?
 ____ ceiling for covering this ____ therapy?
 Are you aware of the maximum sum ____ per ____ dedicated to ____ I ____ ?
 Do you ____ relating to the maximum ____ per ____ dedicated ____ such ____ ?
 ____ much is covered for certain treatments?
 ____ coverage ____ for these ____ annually?
 I want to know ____ maximum ____ amount ____ my chosen ____ .
 What the maximum ____ coverage is ____ treatments ____ my ____ ?
 Is it possible ____ limit ____ on this ____ ?
 ____ there any ____ on the ____ annually by my ____ ?
 ____ an ____ for these ____ my policy options.
 ____ the maximum coverage ____ these ____ policy options?
 Limit ____ year ____ my ____ for these treatments.
 Can you tell ____ maximum ____ that ____ for treatments?
 Is there ____ limit ____ amount of ____ that is ____ policy?
 ____ you tell ____ the cap ____ the ____ for these ____ ?
 What is the ____ treatment types ____ policy?
 Can you ____ limit ____ the treatments?
 ____ would ____ to know about ____ cap for these ____ .
 Is ____ maximum ____ coverage amount for treatments ____ my ____ ?
 What ____ the maximum ____ year ____ such treatment ____ ?
 I ____ to ____ the ____ coverage ____ treatments ____ my policy.

How _____ is _____ types of treatments _____ my plan?

What is the _____ amount _____ annually in _____?

Can _____ me know _____ policy _____ coverage for _____ treatments?

Do _____ have any information on _____ yearly _____ cap _____?

You are _____ me about _____ annual _____ limit _____ treatments with _____?

How _____ do my _____ cover _____ year _____ this _____ treatments?

_____ curious _____ the annual max limit _____ with _____.

What amount of _____ can _____ these treatments _____?

What _____ coverage limit _____ for certain treatments?

What _____ the _____ maximum amount _____ coverage I can _____?

How much does my _____ of treatments _____?

Can _____ me the _____ limit for _____?

Can _____ give me _____ maximum _____ treatments that _____ choose?

I need to know _____ coverage cap _____.

Is the highest plan _____ these treatments _____?

_____ want to _____ how much your _____ for _____ treatments _____.

_____ one of your _____ is _____ annual _____ for this type of treatment?

_____ is the _____ annual _____ of _____ for my _____?

_____ me the _____ for _____ treatments with my policy preferences?

_____ it _____ to _____ me _____ yearly _____ cap for these _____.

_____ is _____ cap _____ year _____ these treatment options?

_____ much will _____ insurance _____ this _____ of treatment every _____?

What is _____ level of _____ offered each _____ within _____ policies _____?

Can you _____ coverage _____ the treatments in _____ policy?

Is there _____ limit on coverage for this _____ under _____?

_____ you _____ the policy limits _____ for certain procedures?

_____ by my _____ alternatives, should I _____ an annual threshold or _____?

What is the _____ limit of _____ treatments?

Do you _____ any _____ sum insured per annum _____ procedures _____ that I can choose?

Can you tell _____ the _____ coverage limit _____ these _____.

What _____ coverage _____ for certain _____ types?

Can _____ give me _____ coverage _____ these treatment types?

_____ how much coverage I can get for _____ each _____?

What is the yearly _____ covering this _____ my _____ choices?

What is the _____ treatments _____ policy options?

I want to _____ the _____ maximum payment _____ these _____.

How much insurance _____ per _____ this _____ of _____?

What is _____ amount _____ insurance cover for _____ of _____?

What _____ the _____ coverage _____ treatments _____ my policy options?

_____ it possible _____ to _____ me the _____ for these treatments?

Can you _____ know the _____ yearly coverage _____ can _____ treatments?

_____ you _____ me _____ coverage _____ treatments I can get?

_____ me _____ yearly coverage amount for my treatments?

_____ highest _____ available _____ for covering these treatments?

Is _____ maximum _____ available for _____ in my policy?

_____ the highest limit per year _____ covering _____?

What is _____ level of _____ offered _____ my policies?

Is there any _____ the _____ sum _____ annum specifically _____ procedures _____ I can _____?

_____ is the limit of _____ therapies _____ policy?

What about the yearly maximum _____ policy for _____?

I was wondering ____ you could ____ the ____ available ____ treatments.

____ the ____ for my policy ____ for ____ treatments?

Is there a limit ____ much ____ be ____ certain ____ each ____?

Is ____ a ____ the ____ of ____ I get ____ category?

____ highest amount of yearly coverage that I ____ for ____?

What's the ____ yearly ____ of this ____ treatment?

Is there ____ per ____ for these treatments?

What's ____ yearly maximum amount ____ for ____ options?

____ limit for the treatments ____ my policy?

____ limit on how much is ____ year ____ treatments?

____ coverage limit for these ____ my ____ options?

____ there a yearly ____ to ____ much my ____?

What is the ____ coverage limit ____ my policy ____?

Does ____ option ____ to ____ have a cap on ____ this ____?

Is ____ an ____ for covering this ____ of treatment ____ my ____?

If ____ of ____ there ____ annual coverage limit for this ____ of treatment?

____ need frequent types ____ treatment ____ by my ____ alternatives, ____ an annual ____?

What ____ annual ____ these types?

____ tell me ____ the max ____ limit ____ for my ____?

What ____ the highest ____ these treatments in ____?

____ let ____ the yearly coverage cap ____ these ____?

I ____ know the yearly ____ cap ____ these ____ with ____.

____ like ____ know what ____ yearly ____ cap is ____ treatments.

I ____ like to ____ the ____ for ____ types of ____.

What's ____ annual coverage limit ____?

I ____ what the ____ is for these ____.

Are ____ the amount ____ that is covered annually ____ my ____?

____ there a ____ amount ____ therapy covered by ____ policy?

____ know the max amount ____ provided annually for ____ treatment.

Is ____ a ____ on ____ this ____ of treatment in each ____?

I ____ to ____ how ____ coverage ____ policy ____ these treatments.

____ would ____ the ____ amount covered annually ____ treatments under ____ plan.

____ many ____ can ____ per year under my ____?

____ curious ____ the ____ amount covered annually ____ types of ____.

What is ____ for ____ treatment?

____ ceiling annually for covering ____ type ____ treatment?

How much will ____ for this ____ of ____?

____ is the maximum ____ year for these ____?

Do ____ know ____ sum insured per annum specifically ____ procedures?

____ the yearly ceiling ____ this ____ of treatment ____ my ____?

Is ____ a coverage ____ for ____ treatments in ____?

____ me with ____ plan ____ annum for these treatments?

What is ____ extent ____ coverage offered ____ within ____ policies ____ these ____?

____ would ____ to ____ details on ____ yearly ____ payment ____ my policy.

I want ____ is ____ on the coverage ____ year for ____ category of ____.

What ____ maximum annual limit ____ coverage ____ treatments under my ____?

____ to the yearly coverage ____ these ____ options?

Can you ____ me the highest ____ for ____?

Can ____ me the ____ for ____ treatment types?

I ____ to know the maximum coverage ____.

I _____ there is a _____ on coverage _____ for _____ category _____.

You'll _____ me _____ max _____ treatments with this _____?

_____ is the _____ for _____ types in _____ policies?

I would _____ to _____ the _____ coverage cap for _____.

Is there a _____ on how _____ each _____?

_____ yearly _____ these treatments, I have policy preferences.

_____ limit to _____ amount _____ that is covered annually _____ policy?

What _____ coverage _____ this type _____ treatment that _____ provides?

_____ to _____ what the _____ coverage _____ is for _____ treatments.

_____ my _____ what _____ max amount of coverage _____ type _____ treatment?

Is _____ a _____ per year _____ treatment types?

What _____ the highest limit _____ year _____ these _____?

What _____ the maximum _____ of _____ for _____ year?

_____ there a _____ limit to what I _____?

What _____ the _____ amount that can be _____ as _____ coverage _____?

_____ there a _____ long _____ be treated _____ my policies?

_____ know how much _____ chosen _____ for these types of _____ annually.

What is the _____ per _____ these _____ options _____ my _____ choices?

_____ me _____ maximum _____ that I _____ for these treatments?

_____ want to know about _____ that my plan _____ cover _____ of _____.

I _____ to know _____ there _____ a _____ annual _____ limit for _____ treatment.

_____ tell _____ your annual max limit _____?

Can you tell _____ the maximum _____ treatments?

What is _____ amount of _____ that _____ annually within _____ choices?

_____ the coverage _____ be per annum _____ my _____?

Is the maximum _____ year for these _____?

_____ is the maximum _____ per _____ for these _____ my _____?

_____ the coverage _____ these types of _____ under my _____?

What _____ for _____ options _____ my policy choices?

Is there any _____ on _____ amount _____ therapy _____ by my _____?

_____ annual coverage limit _____ policy _____?

What _____ the _____ extent _____ coverage _____ in _____ policies for _____ treatments?

_____ tell _____ maximum _____ for these treatments on _____ policy?

_____ my _____ what _____ the _____ ceiling _____ this _____ of treatment?

Do you have _____ the _____ sum insured _____ annum specifically _____ procedures _____ I can _____?

Under _____ limit for _____ this annually?

How _____ cover annually for?

_____ is the maximum _____ of _____ my _____ provides _____ treatment?

_____ year _____ my _____ limit amount, for _____ treatments?

I would like to know _____ information on the _____ insured _____ such procedures.

_____ is the _____ for the _____ policy options?

What is the _____ amount _____ coverage _____ yearly _____?

Is that your _____ max _____ treatments _____ this _____?

_____ you _____ the _____ yearly _____ for these _____ on my _____?

_____ what's _____ uppermost extent of _____ offered annually?

_____ coverage limit _____ the treatment types?

_____ you have any _____ regarding _____ maximum _____ that is _____ to procedures that _____ can _____?

Is the _____ plan _____ per _____ for these _____ you _____?

If _____ frequent _____ of treatment covered _____ alternatives, _____ I expect _____ annual _____?

_____ is the _____ amount of _____ for treatment?

What's _____ limit _____ my treatments?

_____ treatments, what is _____ annual limit _____ offered?

_____ are the limits _____ for these treatments?

Is _____ any limit on the _____ of therapy _____?

_____ of _____ each year for this kind of treatment?

Can _____ tell me _____ the _____ coverage _____ is for _____?

_____ there _____ limit _____ how much _____ be _____ each year _____ procedures?

What _____ the maximum _____ limit per _____ certain _____ of _____?

Is it _____ a limit on _____ per _____ of treatment?

Is there a maximum _____ for the _____ plan?

Can _____ me _____ maximum _____ treatments my plan offers?

What is _____ uppermost extent _____ my policy choices?

Can _____ me _____ much _____ policy limits _____ certain treatments?

What _____ coverage _____ treatments in my policies?

_____ is _____ annual _____ covering this type _____ within _____ policies.

_____ covered annually by my _____?

Can you _____ maximum yearly _____ allowed _____ my policy?

_____ limits of coverage for the _____ treatments?

How much _____ cover per year for _____ category _____?

_____ you share _____ coverage _____ is _____ on my policy?

_____ you give me _____ the _____ payment _____ the treatments?

_____ a specific _____ coverage _____ for this _____?

_____ a _____ the amount _____ coverage that _____ given for this category _____?

There _____ an _____ limit for _____ treatments in my _____.

_____ you tell _____ the annual _____ for these _____ my _____?

Is there _____ coverage _____ the _____ my policy?

_____ give me details _____ yearly _____ payment limit under _____?

_____ tell _____ the coverage limit _____ treatments?

I _____ to _____ limit per annum _____ the _____ my options.

Do _____ your _____ max limit on _____ with _____?

_____ want to _____ the _____ chosen plan will cover _____ these _____ treatments.

_____ wish _____ the maximum coverage available _____ these _____ within my _____.

Is the _____ coverage _____ my policy choices?

What _____ coverage _____ treatment on my policy?

_____ is _____ annual _____ coverage _____ category of treatments?

What's the uppermost _____ of _____ annually _____ policies _____ treatments?

_____ tell _____ the maximum coverage I _____ my policies?

What's _____ amount _____ coverage offered _____ for _____ treatments?

Is there _____ limit to _____ much _____ towards certain _____ year?

Can _____ the _____ maximum _____ amount for _____ treatments?

I want to _____ of treatments covered _____ my _____ plan.

_____ there a yearly cap _____ coverage for _____ treatment?

What's _____ maximum _____ for _____ my policy?

_____ is _____ max amount _____ coverage _____ this _____ of treatment?

_____ limit _____ covered annually by my policy?

I would _____ to know _____ treatments _____ annually _____ my chosen _____.

Can you _____ maximum amount _____ plan will _____ for _____ types _____ treatments?

What _____ the _____ amount _____ coverage my _____ provides for _____ treatment?

_____ my _____ choices, what is _____ for _____ treatment options?

Can you give _____ yearly coverage I _____ for _____?

How much my insurance covers annually _____?

_____ is the maximum limit _____ applies _____ in my _____?

Can _____ me _____ coverage limitation for _____?

_____ want to _____ the _____ amount _____ treatments that _____ will _____ annually.

Can _____ the maximum coverage _____ on _____ policy?

_____ you _____ me the plan limit for _____?

What is the _____ amount _____ provided _____ for this _____?

_____ is _____ highest _____ for _____ treatments in _____ policy?

What is _____ amount of coverage _____ in _____ plan?

Can _____ tell me _____ limitation _____ treatment types?

_____ want _____ know _____ maximum amount _____ treatments _____ will cover annually.

_____ any limits on _____ much _____ be paid _____ each year?

Do _____ the maximum _____ insured per _____ to such procedures?

_____ the ceiling _____ covering this _____ in _____ policy _____?

_____ there a _____ the _____ of therapy _____ covered _____ year?

_____ there a _____ treatments my policy covers?

I want _____ maximum coverage limitations _____ treatment _____.

Do you _____ regarding _____ maximum _____ insured per _____ dedicated _____ such procedures _____ on _____ policies _____ choose?

I want to _____ the maximum _____ that _____ chosen plan _____.

Is _____ a _____ to how _____ this can _____ under _____ policy _____?

Is _____ a _____ limit for _____ under my _____?

I _____ to know _____ maximum _____ covered annually _____ types _____.

What is the annual _____ these _____ my policy _____?

_____ is the _____ limit _____ coverage for _____ treatments _____ choose?

What _____ on this treatment for my _____?

_____ is the _____ covering this type _____ treatments?

_____ is _____ extent _____ my policy choices for these _____?

Is _____ a limit _____ much is _____ these treatments?

What _____ can I _____ yearly?

If _____ select one _____ your _____ a _____ coverage limit for _____ treatment?

_____ maximum _____ coverage provided _____ this type of treatment?

Under my _____ how much can _____ covered _____?

_____ the yearly _____ amount of coverage _____ treatments _____?

_____ there _____ on the _____ that my policy covers?

I _____ like to know _____ the _____ amount _____ treatments _____ plan will _____.

_____ you tell _____ coverage per _____ for my policies?

_____ want to _____ coverage per year I can _____ treatments.

Is there an _____ coverage limit for this kind of _____?

_____ the highest _____ for coverage for these _____ in _____?

_____ to _____ on _____ this category of treatment each year?

_____ tell _____ highest _____ per year _____ the treatments?

_____ much will my _____ this _____ of _____ each year?

_____ possible to share _____ maximum _____ coverage _____ these treatments _____ my _____?

_____ maximum amount of _____ provided _____ this type of _____?

_____ like to _____ the highest plan limit _____ specific _____.

I _____ the _____ coverage for these treatments.

What's _____ for covering this _____ treatment in the _____?

_____ coverage offered each year in _____ policy choices?

How much _____ can I get for _____?

Can you _____ me _____ coverage available for _____?

I ____ like to ____ the ____ would be covered ____ for ____ treatments.

Can ____ tell ____ how ____ coverage ____ are for ____ treatments?

What ____ the ____ coverage ____ for ____ in ____ policy choices?

How ____ my insurance ____ per ____ for ____ treatments?

What amount of my ____ cover annually ____ ?

Can ____ me know the ____ yearly ____ amount ____ my ____ ?

____ know ____ amount covered annually for these ____ under my ____ plan.

____ is ____ annual ____ for covering this ____ of ____ ?

____ much my ____ will cover ____ this category of ____ ?

____ you know ____ the ____ coverage ____ certain treatments?

____ is the yearly ____ limit ____ ?

____ is ____ of coverage ____ treatments with my options?

____ for these treatments ____ my policy options?

I ____ know the ____ for treatments offered by my ____.

What ____ ceiling ____ coverage of this ____ of ____ ?

Can you ____ maximum ____ the treatments?

What is ____ highest amount ____ yearly ____ for ____ within ____ policy alternatives?

What is the ____ my ____ for ____ category ____ treatments?

____ there a limit ____ the ____ for these ____ ?

____ want to know ____ annual coverage ____ for ____.

Can ____ maximum ____ covered annually for these ____ treatments?

____ the maximum amount ____ will ____ annually for these types ____ treatments.

Can ____ me the coverage ____ for ____.

Which ____ highest ____ of ____ per year ____ treatments?

____ you ____ me about the ____ payment limit under ____ policy for ____ ?

I would like to ____ limits on the amount ____ covered ____.

____ want ____ know ____ yearly coverage cap ____ treatments ____ my ____ preferences.

What is the ____ coverage available ____ year ____ treatments?

____ you ____ amount for treatments?

I need to ____ how much ____ the ____ limits ____.

Is there ____ how ____ can be ____ for specific procedures ____ ?

What are ____ of ____ for the treatments ____ ?

____ limit for ____ this under ____ policies?

____ the ____ the treatments ____ my policy?

Should I know the ____ treatments?

____ these ____ is ____ extent ____ coverage offered annually?

____ is the ____ amount of coverage ____ policy?

____ annually ____ the insurance alternatives related ____ this kind ____ treatment?

Will you ____ yearly coverage allowed ____ these ____ policy?

Is there ____ for treating this ____ policy?

____ you ____ the maximum ____ amount ____ by my ____ ?

____ the ____ extent ____ each year within my ____ choices?

What ____ the annual ____ limit ____ in ____ policy options?

What ____ the ____ ceiling for ____ this ____ type ____ ?

What is the annual ____ limit ____ treatment ____ ?

____ my options, ____ annual ____ of coverage available?

I would like to ____ of ____ my plan will ____.

____ the ____ coverage ____ this type ____ treatment in ____ plan?

I ____ know ____ maximum amount ____ treatments ____ my plan.

I want to know ____ there ____ information ____ the maximum sum ____ to ____ procedures.

____ you ____ me the ____ coverage limitation ____ types?
 Should ____ a ____ frequent ____ of treatment covered by my ____ alternatives?
 ____ there ____ cap on ____ this ____ of treatment ____ each ____ option?
 Is there ____ yearly limit ____ cover?
 ____ there ____ yearly maximum ____ coverage offered ____ these ____?
 What ____ restriction on this treatment with ____?
 In ____ I need frequent ____ treatment ____ my ____ should ____ expect ____ annual ____ or boundary?
 Can ____ me ____ maximum ____ will be ____ annually ____ these treatments?
 ____ the annual ____ covering ____ treatment?
 How much my insurance covers ____ of ____?
 I ____ to ____ the ____ limit ____ my policy ____ these treatments.
 ____ I ____ a ____ what my policy covers?
 ____ would like ____ know ____ max coverage ____ these treatments in ____.
 Can ____ tell ____ maximum ____ amount for treatments I ____?
 My ____ options have ____ annual coverage ____ for ____.
 Do ____ have information on the maximum ____ insured ____ to ____ based on ____ I ____ choose?
 ____ to know ____ there ____ a ____ for this kind of treatment.
 I ____ to ____ coverage ____ treatments within my policy options.
 What's ____ limit for ____ in ____ policy?
 ____ there any ____ on ____ therapy that can be ____?
 ____ any ____ the amount ____ covered by my policy?
 ____ wondering ____ the ____ limits coverage for ____ treatments.
 Do ____ have ____ information ____ the ____ sum insured ____ annum ____ dedicated ____ procedures?
 ____ policy ____ can you share ____ coverage for these ____?
 Do you know ____ the ____ restricts ____ treatments?
 What's the ____ limit for ____ type ____?
 In ____ policy choices, ____ the maximum ____ per year ____?
 What's ____ uppermost ____ coverage ____ each year for ____?
 Is ____ on ____ be covered annually for ____ treatments?
 Do ____ have ____ maximum sum insured per ____ specifically ____ these procedures?
 Is it ____ the ____ yearly coverage amount ____ the ____ offered by ____?
 Can ____ let me ____ yearly ____ cap is ____ these ____?
 Can ____ tell ____ the plan ____ is for ____ specific ____?
 Do ____ maximum ____ insured per annum ____ based on the policies ____ I choose?
 ____ the annual ____ kind of treatment?
 Which ____ maximum amount of coverage ____ these ____?
 Is there any ____ the amount of ____ year?
 Can ____ tell ____ the highest ____ limit ____ these treatments?
 ____ what is ____ coverage limit ____ these treatments?
 Is it ____ to specify ____ maximum ____ amount ____ my ____?
 ____ the maximum ____ per year ____ these treatments ____ policy?
 Can ____ tell ____ how much coverage is ____ for ____ treatments?
 ____ available ____ these ____ within my policy choices?
 Is ____ limit ____ the amount ____ therapy ____ year?
 ____ there a limit to how ____ each ____ towards ____ specific procedures?
 ____ you have ____ about ____ maximum ____ insured per ____ to procedures that I ____ choose?
 ____ is ____ annual limit of coverage ____ for ____?
 ____ me ____ your ____ on treatments with this ____.
 Can ____ the maximum ____ available ____ these ____ my policy ____?
 ____ it possible to ____ me the yearly maximum ____?

For these _____ the yearly _____ coverage?

_____ to know _____ you _____ an _____ max limit _____ treatments _____ plan.

_____ there _____ the _____ of therapy covered _____ my policy.

I _____ interested in _____ sum _____ per _____ specifically _____ such procedures based _____ policies _____ I can _____.

_____ there _____ limit to _____ my policy _____?

What _____ of _____ available _____ these treatments?

_____ you _____ the maximum _____ amount that _____ plan _____ for _____?

_____ annual ceiling _____ covering _____ type _____ within my policy?

_____ is _____ maximum _____ coverage provided annually for this _____?

_____ is _____ uppermost amount _____ for _____ treatments annually?

Is _____ a _____ cap on _____ per _____ that _____ tailored _____ the treatment offerings within _____?

_____ there a limit _____ can be _____ certain procedures _____ to different _____?

What _____ the uppermost amount _____ coverage _____ year by _____?

In my _____ choices, what is _____ limit _____ on _____ options?

_____ you _____ me the yearly _____ amount for _____?

_____ coverage _____ get _____ year for these treatments?

_____ I _____ one _____ your policies, _____ there _____ annual coverage _____ this kind _____ treatment?

_____ you _____ me your annual max _____ with this _____?

_____ wondering if _____ could clarify the _____ coverage _____ year _____ treatments.

_____ you _____ maximum coverage limitation for these _____?

If I select _____ of _____ there a _____ coverage _____ for _____ kind _____?

What _____ the _____ how _____ can _____ each year _____ certain medical procedures?

Do you _____ information _____ the maximum sum insured _____ specifically _____ to _____?

_____ tell me the maximum _____ can get _____ these treatments?

_____ is the _____ annual limit of _____ for _____?

_____ my policy, _____ the highest limit _____ covering _____ treatments?

I need _____ the maximum coverage limit _____ my _____.

_____ let _____ maximum _____ for _____ treatments on my policy choices?

_____ there _____ cap _____ how much will _____ for certain _____?

_____ is the _____ extent _____ given _____ year _____ these treatments?

I _____ like _____ the maximum sum _____ annum specifically dedicated to such _____ based _____ choose.

Is there _____ limitation on _____ amount _____ therapy _____?

Is there a yearly _____ these _____ with my _____?

What's the maximum _____ the _____ options _____ my _____?

Is _____ limit _____ year on the treatment options _____?

Can _____ maximum yearly coverage _____ for _____ I have chosen?

_____ the coverage limit per _____ treatments on _____?

_____ is _____ ceiling for _____ treatment?

I _____ to know if you have _____ information _____ maximum sum insured _____ specifically _____ to _____.

I _____ like _____ maximum amount _____ plan _____ cover _____ these types of _____.

Is _____ a limit _____ that _____ policy covers?

_____ there _____ max coverage _____ per _____ my policy?

_____ is _____ max _____ year for these _____?

_____ like to know the yearly _____ cap _____.

I _____ to know what _____ coverage _____ year _____ these _____.

What is the highest _____ available _____ treatments?

_____ is the annual _____ for the _____?

Do _____ have information _____ the _____ sum _____ annum _____ is specifically dedicated to _____ procedures _____ choose?

_____ there _____ treatment with my policy?

You _____ tell _____ the annual _____ on treatments with _____.

Can you tell _____ maximum _____ amount _____ I choose?

How much _____ can _____ for these _____?

What _____ the annual _____ for the treatment _____?

I _____ to know _____ you _____ information on the maximum sum _____ per _____.

What _____ annual coverage _____ treatments?

Do you have any _____ on _____ sum _____ per _____ is specifically _____ procedures that I _____?

Will _____ me _____ highest plan limit _____ these _____?

_____ you tell _____ coverage _____ these treatments _____ my policy options?

Can you give _____ limitation for these _____?

_____ you tell _____ maximum _____ coverage _____ that my plan _____?

Is _____ max limit _____ for _____ this _____ policy _____?

Should an _____ set if I _____ of _____ covered by _____ alternatives?

_____ a coverage _____ for this _____ on _____ policy?

_____ you tell _____ coverage limit _____ treatments in _____ policy?

_____ limit for treating this under my _____?

_____ the maximum coverage limitations _____ these treatment _____?

What is _____ annual _____ for these _____ types in _____?

What _____ of _____ does _____ policy _____ for treatments _____?

I wanted to know the maximum _____ under my chosen _____.

_____ would _____ know the maximum _____ covered annually _____ these _____ treatments under _____ plan.

Can you tell me _____ for _____ types?

_____ is the maximum _____ limit _____ these _____ treatments under _____?

_____ is the annual ceiling _____ this _____ of _____?

What _____ coverage _____ for these treatments on _____?

_____ to _____ the _____ coverage available _____ treatments within _____ policy.

_____ highest amount _____ be provided as _____ coverages within _____ alternatives?

Can you _____ me my annual max _____ on _____?

I want to know _____ the policy _____ treatments.

Under my policies, how much _____ annually _____?

_____ maximum coverage limit for _____ treatments?

Can you _____ me know the _____ coverage I _____ have _____?

_____ limit _____ the amount of _____ that _____ policy covers?

_____ limits on _____ can be paid _____ each _____ certain procedures?

_____ want _____ know about the _____ that is _____ these types _____ treatments.

Is _____ limit _____ coverage _____ on my policy?

You need to tell _____ annual _____ on _____ with _____.

I was _____ if _____ me information on the yearly _____ these _____.

What _____ the _____ for _____ treatment _____ in my _____?

What is _____ of _____ that _____ each year for _____ treatments?

_____ is _____ highest amount of yearly _____ can provide _____ these _____?

_____ is _____ level _____ coverage _____ year _____ these treatments?

_____ yearly coverage is provided _____ certain _____ procedures?

_____ know _____ maximum amount _____ treatments covered annually by my _____.

What _____ limit per _____ treatment _____ in my policies?

Is _____ limits _____ is _____ each year by _____ policy?

_____ the _____ for covering this type _____ treatment _____ the _____?

Can you _____ me _____ per annum for _____?

Can _____ much each _____ alternative _____ for this kind of _____?

What _____ the _____ offered _____ these treatments?

What's the max _____ limit _____ treatments in _____?

____ I ____ an annual threshold or ____ if I ____ covered ____ policy ____?
 ____ the annual ____ of coverage ____ this type ____?
 ____ you tell me the ____ yearly ____ amount for ____?
 Are ____ to tell me ____ max limit ____ with this ____?
 ____ you tell me ____ much will ____ yearly ____ treatments?
 What ____ the ____ limit ____ per ____ for ____ specific treatments?
 Can you tell ____ this treatment type?
 What ____ the maximum annual ____ of ____ that ____?
 Should ____ annual ____ I need ____ covered ____ my alternative policies?
 What ____ the ____ of coverage for ____ my options?
 ____ there a maximum payment ____ for ____ specific treatments?
 I want to ____ the maximum ____ is ____ these ____.
 ____ curious about ____ annual ____ on ____ this plan.
 ____ you tell ____ much ____ policy limits ____ specific treatments?
 ____ would ____ to know ____ amount of ____ that can ____ covered ____.
 ____ am interested ____ coverage cap for these ____.
 Will ____ a ____ restriction ____ this treatment with my ____?
 ____ the annual coverage limit for ____ of ____?
 What ____ maximum limit for ____ options ____ my policy ____?
 What ____ limit of ____ these treatments ____ policy?
 ____ is the maximum limit ____ treatment options in ____?
 Is the ____ for ____ treatments ____ the policy ____?
 ____ there a ____ each year ____ my ____ covers?
 ____ is the maximum ____ amount of ____ these ____?
 How ____ covered annually ____ the ____ alternatives ____ kind of ____?
 Is ____ highest ____ limit ____ treatments ____ my policy ____?
 ____ the ____ limit for these treatments ____?
 ____ insurance covers ____ this category ____ treatments per ____?
 Is ____ a ____ to ____ amount of therapy that ____ annually ____?
 What coverage ____ I ____ treatments ____ year?
 ____ extent ____ my policy ____ treatment costs ____ a ____?
 ____ is ____ annual ____ for treatment ____ in ____ policy?
 Can ____ tell me the ____ coverage cap ____?
 I ____ to know ____ coverage ____ for these Treatments ____ policy ____.
 Is there a ____ for how ____ this ____ be ____ my ____?
 What is the ____ coverage ____ types ____ treatments?
 I ____ much ____ limits coverage to specific treatments.
 ____ it ____ about the ____ amount ____ annually for these treatments?
 ____ you tell ____ how ____ the policy ____ coverage ____ treatments?
 ____ is ____ maximum ____ year ____ covering these treatments?
 Is there ____ for ____ treatment types ____ my policies?
 ____ any information on the maximum sum ____ per annum ____ is ____ to ____ that ____?
 ____ possible to specify the ____ coverage amount ____ treatments ____?
 ____ need to know the highest ____ for specific ____.
 ____ you ____ with ____ the maximum yearly ____ for these ____?
 ____ is a yearly ____ on what ____ policy covers?
 ____ possible ____ me ____ maximum ____ covered annually for these ____ of ____?
 ____ the highest plan ____ for ____ under my options?
 You will tell ____ your annual ____ on ____ plan?
 Do you have information ____ the ____ sum insured ____ to ____ procedures?

_____ I expect an annual _____ I _____ frequent kinds _____ covered _____ alternatives?

Will you tell _____ your _____ with this plan?

_____ is covered _____ for these _____ of treatments under _____?

_____ there any information about the maximum sum _____ specifically _____ procedures based _____ policies _____?

_____ the annual _____ limit _____ these _____?

_____ want to _____ the _____ for these treatment _____.

_____ it _____ the _____ coverage allowed for _____ treatments on my _____ choices?

_____ curious about _____ maximum coverage _____ per _____ for these _____.

There _____ the amount of _____ covered _____ my policy.

I want to _____ the coverage _____.

Is there _____ limit _____ my _____ covers?

Can _____ give me _____ amount _____ treatments offered by my _____?

Does my policy _____ the _____ covered _____?

I _____ like _____ know _____ the _____ amount _____ treatments _____ my plan.

_____ the annual coverage _____ these types _____ my _____?

How _____ policies _____ for _____ treatments?

Is there _____ limit to _____ things _____ covers?

Can you _____ how much _____ restricted _____ the _____ for _____ treatments?

What _____ the _____ this under my policies?

_____ the maximum _____ options in my policy choices?

_____ wondering _____ the maximum amount covered _____ of treatments _____ my plan.