

DIABETES SAFE INSURANCE POLICY

Unique Identification No. : IRDA/NL-HLT/SHAI/P-H/V. I/173/13-14

The proposal, declaration and other documents if any given by the proposer form the basis of this policy of insurance

PLAN A (With pre-acceptance medical screening)

1. Coverage

In consideration of the premium paid and subject to the terms and conditions as set out in the Schedule with all its Parts the Company by this Policy agrees as under:

a. Section 1

If during the policy period stated in the schedule, the **Insured Person** shall develop any complications of Diabetes Mellitus and if such complications shall require the Insured Person, upon the advice of the duly Qualified **Medical Practitioner**, to incur hospitalization expenses for medical/surgical treatment at **Nursing Home / Hospital** in India as an **inpatient**, the Company will pay the amount of such expenses as are **reasonably and necessarily** incurred as would fall under different heads as stated hereto up-to the limits indicated but not exceeding the sum insured in aggregate in any one policy period.

- A. Room (Single Standard A/C room), Boarding and Nursing Expenses.
- B. Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialist Fees.
- C. Anaesthesia, Blood, Oxygen and Operation Theatre charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and diagnostic imaging modalities, X-ray and stent. With regard to coronary stenting, the company will pay such amount up to the extent of cost of bare metal stent/drug eluting cobalt-chromium stent/drug eluting stainless steel stent only
- D. Relevant **Pre-Hospitalization** medical expenses incurred for a period not exceeding 30 days prior to the date of Hospitalisation, on the disease/illness contracted following an admissible claim under the policy.
- E. Emergency ambulance charges up-to a sum of Rs. 2000/- per policy period for transportation of the insured person by private ambulance service when this is needed for medical reasons to go to hospital for treatment, provided however there is an admissible claim under this section.
- F. **Post-Hospitalization** expenses incurred up to 60 days after discharge from the hospital. The amount payable shall not exceed the sum equivalent to 7% of the hospitalization expenses or Rs 5000/- per hospitalization whichever is less

b. Special conditions applicable for Section 1:

1. Donor expenses for kidney transplantation where the insured person is the recipient are payable provided the claim for transplantation is payable and subject to the availability of the sum insured. Donor screening expenses and post-donation complications of the donor are not payable.
2. Expenses incurred on dialysis (**inclusive of AV fistula /graft creation charges**) are payable up-to Rs.1,000/- per sitting commencing from the policy year in which Chronic Kidney disease occurs and payable for up to 24 consecutive months provided the policy is in force.

Claims directly or indirectly relating to Cardio Vascular System, Renal System, Diseases of eye, Foot Ulcer and other complications of diabetes are eligible to be payable under Section 1 only, except where specifically provided for.

Claim for cataract surgery is payable under Section 2 only

The expenses as above are payable only where the in-patient hospitalization is for a minimum period of 24 hours. However this time limit will not apply to the day-care treatments detailed elsewhere in the policy.

All other expenses relating to the hospitalization will be considered in proportion to the eligible room rent or actual whichever is less.

Note: Only complications of Diabetes that are declared by the insured and accepted by the company shall be considered as covered under Section 1.

c. Exclusions applicable for Section 1

The Company shall not be liable to make any payments under this policy in respect of any expenses what so ever incurred by the Insured Person in connection with or in respect of:

1. Injury/disease directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not)
2. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials
3. All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympho Tropic Virus type III (HTLV III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS and sexually transmitted diseases.
4. Treatment arising from or traceable to pregnancy, childbirth, miscarriage, abortion or complications of any of these (other than ruptured ectopic gestation), family planning treatment. All types of treatment for infertility and its complications thereof.
5. Expenses incurred on weight control services including surgical procedures for treatment of obesity, medical treatment for weight control, treatment for metabolic, genetic and endocrine disorders
6. Convalescence, general debility, run-down condition or rest cure, nutritional deficiency states, psychiatric, mental and behavioural disorders, congenital external disease or defects or anomalies, venereal disease, intentional self injury and use of intoxicating drugs / alcohol, smoking and tobacco chewing

7. Expenses incurred on High Intensity Focused Ultra Sound, Baloon Sinoplasty, Enhanced External Counter Pulsation Therapy and related therapies, Deep Brain Stimulation, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy and such other similar therapies
8. Expenses incurred on Lasik Laser or Refractive Error Correction, all treatment for eye disorders requiring intra-vitreous injections and related procedures.
9. Charges incurred at Hospital or Nursing Home primarily for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at hospital/nursing home.
10. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician.
11. Naturopathy Treatment, unconventional, untested/unproven, experimental therapies.
12. Stem cell Therapy and related transplantation, Chondrocyte Implantation Immunotherapy, Oral Chemo Therapy
13. Hospital registration charges, admission charges, record charges, telephone charges and such other charges
14. Expenses incurred for treatment of diseases/illness/accidental injuries by systems of medicines other than Allopathy
15. Change of sex or cosmetic or aesthetic treatment of any description, plastic surgery (other than as necessitated due to an accident or as a part of any illness).
16. Cost of spectacles and contact lens, hearing aids, Cochlear implants, walkers and crutches, wheel chairs, CPAP, BIPAP, infusion pump and such other similar aids.
Note: Cost of artificial limbs following amputation is payable up-to 10% of Sum Insured provided the claim for such amputation is admissible under the policy
17. Other expenses as detailed in the list

d. Section 2

If during the period stated in the Schedule the insured person, upon the advice of a duly Qualified Physician/Medical Specialist/**Medical Practitioner** or of duly **Qualified Surgeon** to incur Hospitalization expenses for medical/surgical treatment for any disease/illness/sickness (Other than those falling under Section 1 above), accidental injuries at any **Nursing Home / Hospital** in India as an **in-patient**, the Company will pay to the **Insured Person/s** the amount of such expenses as are reasonably and necessarily incurred up-to the limits indicated but not exceeding the sum insured in aggregate in any one period stated in the schedule hereto.

- A. Room, Boarding and Nursing Expenses at 1.5% of the sum insured subject to a maximum of Rs. 8,500/- per day
- B. Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialist Fees.
- C. Anaesthesia, Blood, Oxygen and Operation Theatre charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and diagnostic imaging modalities and X-ray.
- D. Relevant **Pre-Hospitalization** medical expenses incurred for a period not exceeding 30 days prior to the date of Hospitalisation, on the disease/illness contracted following an admissible claim under the policy.
- E. Emergency ambulance charges up-to a sum of Rs. 2000/- per policy period for transportation of the insured person by private ambulance service when this is needed for medical reasons to go to hospital for treatment, provided however there is an admissible claim under this section.
- F. **Post-Hospitalization** expenses incurred up to 60 days after discharge from the hospital. The amount payable shall not exceed the sum equivalent to 7% of the hospitalization expenses or Rs 5000/- per hospitalization whichever is less

Note : The expenses incurred on treatment of cataract are as per the following table

Sum Insured	Limit
Sum Insured Rs.3,00,000/- to Rs. 5,00,000/-	Rs.20,000/- per eye per person and not exceeding Rs.30,000/-per policy period
Sum Insured Rs. 10,00,000/-	Rs.30,000/- per eye per person and not exceeding Rs.40,000/-per policy period

Where Package rates are charged by the hospitals the Post-Hospitalization benefit will be calculated after taking the room, boarding and nursing charges at 1.5% of sum insured subject to a maximum of Rs.8,500/- per day.

e. Special conditions applicable for Section 2:

1. The expenses as above are payable only where the in-patient hospitalization is for a minimum period of 24 hours. However this time limit will not apply to the day-care treatments detailed elsewhere in the policy.
2. All other expenses relating to the hospitalization will be considered in proportion to the eligible **room rent** or actual whichever is less.

f. Exclusions applicable for Section 2

The Company shall not be liable to make any payments under this policy in respect of any expenses what so ever incurred by the Insured Person in connection with or in respect of:

1. Pre Existing Diseases as defined in the policy until 48 consecutive months of continuous coverage have elapsed, since inception of the first policy with any Indian Insurer. However the limit of the Company's liability in respect of claim for pre-existing diseases shall be limited to the sum insured under first policy with any Indian Insurance Company.
2. Any disease contracted by the insured person during the first 30 days from the commencement date of the policy. This exclusion shall not apply in case of the insured person having been covered under any health insurance policy (Individual or Group insurance policy) with any of the Indian Insurance companies for a continuous period of preceding 12 months without a break.

3. During the first two years of continuous operation of insurance cover any expenses on
 - a) Cataract, Retinal detachment, Glaucoma, Diseases of ENT, Diseases related to Thyroid, Prolapse of intervertebral disc (other than caused by accident), varicose veins and varicose ulcers, benign prostatic hypertrophy, Stapedectomy, all types of hernia, varicocele, hydrocele, fistula / fissure in ano, Hemorrhoids, stricture urethra and Congenital Internal disease / defect
 - b) All treatments (conservative, interventional, laparoscopic and open) for Hepato-pancreato-biliary including gall bladder and pancreatic calculi. All types of management for kidney and genitourinary tract calculi.
 - c) All treatments (conservative, interventional, laparoscopic and open) for Uterine prolapse, Dysfunctional Uterine Bleeding, Fibroids, Pelvic Inflammatory Diseases, all diseases of fallopian tubes, cervix and ovaries.
 - d) Conservative, operative treatment and all types of intervention for diseases related to tendon, ligament, bones and joint [other than caused by accident]
 - e) Degenerative disc and vertebral diseases and degenerative diseases of the musculo-skeletal system
 - f) Subcutaneous benign lumps, sebaceous cyst, dermoid cyst, lipoma, neurofibroma, ganglion and similar pathology
 - g) Any transplant and related surgery.

This waiting period shall not however apply in the case of the Insured person/s having been covered under any Individual health insurance scheme with any of the Indian Insurer for a continuous period of preceding 24 months without any break.

The claim for such illnesses/diseases/disabilities contracted/suffered if admitted will be processed as per the sum insured of immediately preceding 24 months policy only. Where there is a change in the sum insured in the second continuous policy year the lower of the sum insured will apply.

If these are pre-existing at the time of proposal they will be covered subject to Exclusion No 1 above.

4. Circumcision, Inoculation or Vaccination (except for post-bite treatment and for medical treatment other than for prevention of diseases.)
5. Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization. (Dental implants are not payable)
6. Convalescence, general debility, run-down condition or rest cure, nutritional deficiency states, psychiatric, mental and behavioural disorders, congenital external disease or defects or anomalies, venereal disease, intentional self injury and use of intoxicating drugs / alcohol, smoking and tobacco chewing
7. Injury/disease directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not)
8. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials
9. All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympho Tropic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS and sexually transmitted diseases.
10. Treatment arising from or traceable to pregnancy, childbirth, miscarriage, abortion or complications of any of these (other than ruptured ectopic gestation), family planning treatment. All types of treatment for infertility and its complications thereof.
11. Expenses incurred on weight control services including surgical procedures for treatment of obesity, medical treatment for weight control, treatment for metabolic, genetic and endocrine disorders
12. Expenses incurred on High Intensity Focused Ultra Sound, Baloon Sinoplasty, Enhanced External Counter Pulsation Therapy and related therapies, Deep Brain Stimulation, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy and such other similar therapies
13. Expenses incurred on Lasik Laser or Refractive Error Correction, all treatment for disorders of eye requiring intra-vitreous injections and related procedures.
14. Charges incurred at Hospital or Nursing Home primarily for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at hospital/nursing home.
15. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician.
16. Naturopathy Treatment, unconventional, untested, unproven, experimental therapies.
17. Stem cell Therapy and related transplantation, Chondrocyte Implantation, Immunotherapy, Oral Chemo Therapy.
18. Hospital registration charges, admission charges, record charges, telephone charges and such other charges
19. Expenses incurred for treatment of diseases/illness/accidental injuries by systems of medicines other than Allopathy
20. Change of sex or cosmetic or aesthetic treatment of any description, plastic surgery (other than as necessitated due to an accident or as a part of any illness).
21. Cost of spectacles and contact lens, hearing aids, Cochlear implants, walkers and crutches, wheel chairs, CPAP, BIPAP, infusion pump and such other similar aids.

Note: Cost of artificial limbs following amputation is payable up-to 10% of Sum Insured provided the claim for such amputation is admissible under the policy

22. Other expenses as detailed in the list.

2. Coverage

In consideration of the premium paid and subject to the terms and conditions as set out in the Schedule with all its Parts the Company by this Policy agrees as under:

a. Section 1

If during the policy period stated in the schedule, the **Insured Person** shall develop any complications of Diabetes Mellitus and if such complications shall require the Insured Person, upon the advice of the duly Qualified **Medical Practitioner**, to incur hospitalization expenses for medical/surgical treatment at **Nursing Home / Hospital** in India as an **inpatient**, the Company will pay the amount of such expenses as are **reasonably and necessarily** incurred as would fall under different heads as stated hereto up-to the limits indicated but not exceeding the sum insured in aggregate in any one policy period.

- A. Room (Single Standard A/C room), Boarding and Nursing Expenses.
- B. Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialist Fees.
- C. Anaesthesia, Blood, Oxygen and Operation Theatre charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and diagnostic imaging modalities, X-ray and stent. With regard to coronary stenting, the company will pay such amount up to the extent of cost of bare metal stent/drug eluting cobalt-chromium stent/drug eluting stainless steel stent only
- D. Relevant **Pre-Hospitalization** medical expenses incurred for a period not exceeding 30 days prior to the date of Hospitalisation, on the disease/illness contracted following an admissible claim under the policy.
- E. Emergency ambulance charges up-to a sum of Rs. 2000/- per policy period for transportation of the insured person by private ambulance service when this is needed for medical reasons to go to hospital for treatment, provided however there is an admissible claim under this section.
- F. **Post-Hospitalization** expenses incurred up to 60 days after discharge from the hospital. The amount payable shall not exceed the sum equivalent to 7% of the hospitalization expenses or Rs 5000/- per hospitalization whichever is less

b. Special conditions applicable for Section 1:

1. A waiting period of 30 days from the date of commencement of the first policy with this insurer shall apply in respect of any and every disease or illness
2. A waiting period of 15 months of continuous coverage without break from the date of commencement of this insurance will apply for any diseases directly or indirectly relating to Cardio Vascular System, Renal System, Diseases of eye and Foot Ulcer. Any transplant and related surgery shall have a waiting period of 24 months from the date of commencement of this insurance. The waiting periods mentioned above are subject to Portability guidelines of the Regulator
3. Donor expenses for kidney transplantation where the insured person is the recipient are payable provided the claim for transplantation is payable and subject to the availability of the sum insured. Donor screening expenses and post-donation complications of the donor are not payable
4. Expenses incurred on dialysis (**inclusive of AV fistula /graft creation charges**) are payable up-to Rs. 1,000/- per sitting commencing from the policy year in which Chronic Kidney disease occurs and payable for up to 24 consecutive months provided the policy is in force.

Claims directly or indirectly relating to any Cardio Vascular System, Renal System, Diseases of eye, Foot Ulcer and other complications of diabetes are eligible to be payable under Section 1 only, except where specifically provided for.

The expenses payable in respect of diseases relating to Cardio Vascular System is limited to the amount mentioned there against

Serial No	Sum Insured(Rs)	Limit of the Company's Liability per policy period (Rs).
1	3,00,000	2,00,000
2	4,00,000	2,50,000
3	5,00,000	3,00,000
4	10,00,000	4,00,000

Claim for cataract surgery is payable under Section 2 only.

The expenses as above are payable only where the in-patient hospitalization is for a minimum period of 24 hours. However this time limit will not apply to the day-care treatments detailed elsewhere in the policy.

All other expenses relating to the hospitalization will be considered in proportion to the eligible **room rent** or actual whichever is less.

Note: Only complications of Diabetes that are declared by the insured and accepted by the company shall be considered as covered under Section 1.

c. Exclusions applicable for Section 1

The Company shall not be liable to make any payments under this policy in respect of any expenses what so ever incurred by the Insured Person in connection with or in respect of:

1. Injury/disease directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not)
2. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials
3. All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympho Tropic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS and sexually transmitted diseases.

4. Treatment arising from or traceable to pregnancy, childbirth, miscarriage, abortion or complications of any of these (other than ruptured ectopic gestation), family planning treatment. All types of treatment for infertility and its complications thereof.
5. Expenses incurred on weight control services including surgical procedures for treatment of obesity, medical treatment for weight control, treatment for metabolic, genetic and endocrine disorders
6. Convalescence, general debility, run-down condition or rest cure, nutritional deficiency states, psychiatric, mental and behavioral disorders, congenital external disease or defects or anomalies, venereal disease, intentional self injury and use of intoxicating drugs / alcohol, smoking and tobacco chewing
7. Expenses incurred on High Intensity Focused Ultra Sound, Baloon Sinoplasty, Enhanced External Counter Pulsation Therapy and related therapies, Deep Brain Stimulation, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy and such other similar therapies
8. Expenses incurred on Lasik Laser or Refractive Error Correction, all treatment for eye disorders requiring intra-vitreous injections and related procedures.
9. Charges incurred at Hospital or Nursing Home primarily for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at hospital/nursing home.
10. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician.
11. Naturopathy Treatment, unconventional, untested/unproven, experimental therapies.
12. Stem cell Therapy and related transplantation, Chondrocyte Implantation Immunotherapy, Oral Chemo Therapy
13. Hospital registration charges, admission charges, record charges, telephone charges and such other charges
14. Expenses incurred for treatment of diseases/illness/accidental injuries by systems of medicines other than Allopathy
15. Change of sex or cosmetic or aesthetic treatment of any description, plastic surgery (other than as necessitated due to an accident or as a part of any illness).
16. Cost of spectacles and contact lens, hearing aids, Cochlear implants, walkers and crutches, wheel chairs, CPAP, BIPAP, infusion pump and such other similar aids.
Note: Cost of artificial limbs following amputation is payable up-to 10% of Sum Insured provided the claim for such amputation is admissible under the policy
17. Other expenses as detailed in the list

d. Section 2

If during the period stated in the Schedule the insured person, upon the advice of a duly Qualified Physician/Medical Specialist/**Medical Practitioner** or of duly **Qualified Surgeon** to incur Hospitalization expenses for medical/surgical treatment for any disease/illness/sickness (Other than those falling under Section 1 above), accidental injuries at any **Nursing Home / Hospital** in India as an **in-patient**, the Company will pay to the **Insured Person/s** the amount of such expenses as are reasonably and necessarily incurred up-to the limits indicated but not exceeding the sum insured in aggregate in any one period stated in the schedule hereto.

- A. Room, Boarding and Nursing Expenses at 1.5% of the sum insured subject to a maximum of Rs. 8,500/- per day
- B. Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialist Fees.
- C. Anaesthesia, Blood, Oxygen and Operation Theatre charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and diagnostic imaging modalities and X-ray.
- D. Relevant Pre-Hospitalization medical expenses incurred for a period not exceeding 30 days prior to the date of Hospitalisation, on the disease/illness contracted following an admissible claim under the policy.
- E. Emergency ambulance charges up-to a sum of Rs. 2000/- per policy period for transportation of the insured person by private ambulance service when this is needed for medical reasons to go to hospital for treatment, provided however there is an admissible claim under this section.
- F. Post-Hospitalization expenses incurred up to 60 days after discharge from the hospital. The amount payable shall not exceed the sum equivalent to 7% of the hospitalization expenses or Rs 5000/- per hospitalization whichever is less

Note : The expenses incurred on treatment of cataract are as per the following table

Sum Insured	Limit
Sum Insured Rs.3,00,000/- to Rs. 5,00,000/-	Rs.20,000/- per eye per person and not exceeding Rs.30,000/-per policy period
Sum Insured Rs. 10,00,000/-	Rs.30,000/- per eye per person and not exceeding Rs.40,000/-per policy period

Where Package rates are charged by the hospitals the Post-Hospitalization benefit will be calculated after taking the room, boarding and nursing charges at 1.5% of sum insured subject to a maximum of Rs.8,500/- per day.

e. Special conditions applicable for Section 2:

1. The expenses as above are payable only where the in-patient hospitalization is for a minimum period of 24 hours. However this time limit will not apply to the day-care treatments detailed elsewhere in the policy.
2. All other expenses relating to the hospitalization will be considered in proportion to the eligible **room rent** or actual whichever is less.

f. Exclusions applicable for Section 2

The Company shall not be liable to make any payments under this policy in respect of any expenses what so ever incurred by any Insured Person in connection with or in respect of:

1. Pre Existing Diseases as defined in the policy until 48 consecutive months of continuous coverage have elapsed, since inception of the first policy with any Indian Insurer. However the limit of the Company's liability in respect of claim for pre-existing diseases shall be limited to the sum insured under first policy with any Indian Insurance Company.
2. Any disease contracted by the insured person during the first 30 days from the commencement date of the policy. This exclusion shall not apply in case of the insured person having been covered under any health insurance policy (Individual or Group insurance policy) with any of the Indian Insurance companies for a continuous period of preceding 12 months without a break.
3. During the first two years of continuous operation of insurance cover any expenses on
 - a) Cataract, Retinal detachment, Glaucoma, Diseases of ENT, Diseases related to Thyroid, Prolapse of intervertebral disc (other than caused by accident), varicose veins and varicose ulcers, benign prostatic hypertrophy, Stapedectomy, all types of hernia, varicocele, hydrocele, fistula / fissure in ano, Hemorrhoids, stricture urethra and Congenital Internal disease / defect
 - b) All treatments (conservative, interventional, laparoscopic and open) for Hepato-pancreato-biliary including gall bladder and pancreatic calculi. All types of management for kidney and genitourinary tract calculi.
 - c) All treatments (conservative, interventional, laparoscopic and open) for Uterine prolapse, Dysfunctional Uterine Bleeding, Fibroids, Pelvic Inflammatory Diseases, all diseases of fallopian tubes, cervix and ovaries.
 - d) Conservative, operative treatment and all types of intervention for diseases related to tendon, ligament, bones and joint [other than caused by accident]
 - e) Degenerative disc and vertebral diseases and degenerative diseases of the musculo-skeletal system
 - f) Subcutaneous benign lumps, sebaceous cyst, dermoid cyst, lipoma, neurofibroma, ganglion and similar pathology
 - g) Any transplant and related surgery.

This waiting period shall not however apply in the case of the Insured person/s having been covered under any Individual health insurance scheme with any of the Indian Insurer for a continuous period of preceding 24 months without any break.

The claim for such illnesses/diseases/disabilities contracted/suffered if admitted will be processed as per the sum insured of immediately preceding 24 months policy only. Where there is a change in the sum insured in the second continuous policy year the lower of the sum insured will apply.

If these are pre-existing at the time of proposal they will be covered subject to Exclusion No 1 above.

4. Circumcision, Inoculation or Vaccination (except for post-bite treatment and for medical treatment other than for prevention of diseases.)
5. Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization. (Dental implants are not payable)
6. Convalescence, general debility, run-down condition or rest cure, nutritional deficiency states, psychiatric, mental and behavioural disorders, congenital external disease or defects or anomalies, venereal disease, intentional self injury and use of intoxicating drugs / alcohol, smoking and tobacco chewing
7. Injury/disease directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not)
8. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials
9. All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympho Tropic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS and sexually transmitted diseases.
10. Treatment arising from or traceable to pregnancy, childbirth, miscarriage, abortion or complications of any of these (other than ruptured ectopic gestation), family planning treatment. All types of treatment for infertility and its complications thereof.
11. Expenses incurred on weight control services including surgical procedures for treatment of obesity, medical treatment for weight control, treatment for metabolic, genetic and endocrine disorders
12. Expenses incurred on High Intensity Focused Ultra Sound, Baloon Sinoplasty, Enhanced External Counter Pulsation Therapy and related therapies, Deep Brain Stimulation, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy and such other similar therapies
13. Expenses incurred on Lasik Laser or Refractive Error Correction, all treatment for disorders of eye requiring intra-vitreous injections and related procedures.
14. Charges incurred at Hospital or Nursing Home primarily for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at hospital/nursing home.
15. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician.
16. Naturopathy Treatment, unconventional, untested, unproven, experimental therapies.
17. Stem cell Therapy and related transplantation, Chondrocyte Implantation, Immunotherapy, Oral Chemo Therapy.
18. Hospital registration charges, admission charges, record charges, telephone charges and such other charges
19. Expenses incurred for treatment of diseases/illness/accidental injuries by systems of medicines other than Allopathy
20. Change of sex or cosmetic or aesthetic treatment of any description, plastic surgery (other than as necessitated due to an accident or as a part of any illness).
21. Cost of spectacles and contact lens, hearing aids, Cochlear implants, walkers and crutches, wheel chairs, CPAP, BIPAP, infusion pump and such other similar aids.
Note: Cost of artificial limbs following amputation is payable up-to 10% of Sum Insured provided the claim for such amputation is admissible under the policy
22. Other expenses as detailed in the list.

3. DEFINITIONS COMMON FOR BOTH PLANS

Accident/Accidental means a sudden, unforeseen and involuntary event caused by external, visible and violent means

Any one Illness means continuous period of illness and it includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment has been taken. Occurrence of the same illness after a lapse of 45 days as stated above will be considered as fresh illness for the purpose of this policy.

Company means Star Health and Allied Insurance Company Limited.

Condition Precedent means the policy term or condition upon which the insurer's liability under the policy is conditional upon .

Congenital Internal means congenital anomaly which is not visible and accessible parts of the body.

Congenital External means congenital anomaly which is visible and accessible parts of the body.

Chronic Renal Failure means End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

Diagnosis means Diagnosis by a registered medical practitioner, supported by clinical, radiological, histological, histo-pathological and laboratory evidence and also surgical evidence wherever applicable, acceptable to the Company.

Disclosure to information norms means the policy shall be void and all premium paid hereon shall forfeited to the Company, in the event of misrepresentation, mis description or non disclosure of any material fact.

Day Care Treatment means medical treatment, and/or surgical procedure which is:

- undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
- which would have otherwise required a hospitalization of more than 24 hours.

Treatment normally taken on an out-patient basis is not included in the scope of this definition.

Grace Period means the specified period of time immediately following premium due date during which the payment can be made to renew or continue the policy in force without loss of continuity benefits such as waiting period and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received

Hospital, Nursing Home means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act or complies with all minimum criteria as under:

- a. Has qualified nursing staff under its employment round the clock;
- b. Has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
- c. Has qualified medical practitioner(s) in charge round the clock;
- d. Has a fully equipped operation theatre of its own where surgical procedures are carried out;
- e. Maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.

Insured Person means the persons named in the schedule of the Policy or any list attached thereto it being understood that such person/s is /are already suffering from Diabetes Mellitus.

In-Patient means an Insured Person who is admitted to Hospital and stays there for a minimum period of 24 hours for the sole purpose of receiving treatment.

Medical Practitioner is a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is there by entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of licence.

Network Hospital means all such hospitals day care centers or other providers that the Company has mutually agreed with, to provide services like cashless access to policyholders. The list is available with the Company and subject to amendment from time to time.

Non Network Hospital means any hospital, day care centre or other provider that is not part of the network

Pre-Existing Disease means any condition, ailment or injury or related condition(s) for which the insured had signs or symptoms, and/or were diagnosed, and/or received medical advice /treatment within 48 months prior to the Insured's first policy with any Indian insurer.

Pre Hospitalization means Medical Expenses incurred immediately before the Insured Person is Hospitalised, provided that:

- i. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
- ii. The In-patient Hospitalization claim for such Hospitalization is admissible by the Insurance Company

Post Hospitalization means Medical Expenses incurred immediately after the insured person is discharged from the hospital provided that:

- i. Such Medical Expenses are incurred for the same condition for which the insured person's hospitalization was required and
- ii. The inpatient hospitalization claim for such hospitalization is admissible by the insurance company.

Portability means transfer by an individual health insurance policyholder (including family cover) of the credit gained for pre-existing conditions and time-bound exclusions if he/she chooses to switch from one insurer to another.

Qualified Nurse is a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.

Room Rent means the amount charged by a hospital for the occupancy of a bed on per day (24 hours) basis and shall include associated medical expenses.

Surgery/Surgical Operation Surgery or Surgical Procedure means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a medical practitioner.

Unproven/Experimental treatment means treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.

4. COMMON CONDITIONS FOR BOTH PLANS

1. Organ transplant on the Insured Person shall satisfy the requirements of the Transplantation of Human Organs Act of 1994 and any amendments thereto.
2. It is not permissible to issue more than one policy per person. Where the Insured Person is already covered by another Diabetes Safe policy issued by the Company the maximum amount payable under all Policies combined will not exceed the amount payable under the Policy with the highest sum insured.
3. The premium payable under this policy shall be payable in advance. No receipt of premium shall be valid except on the official form of the company signed by a duly authorized official of the company. The due payment of premium and the observance and fulfillment of the terms, provision, conditions and endorsements of this policy by the Insured Person, in so far as they relate to anything to be done or complied with by the Insured Person, shall be a condition precedent to any liability of the Company to make any payment under this policy. No waiver of any terms, provisions, conditions, and endorsements of this policy shall be valid unless made in writing and signed by an authorized official of the Company.
4. Upon the happening of any event, which may give rise to a valid claim under this policy, notice with full particulars shall be sent to the Company prior to hospitalisation and in any case not later than 24 hours from the time of Hospitalisation.
5. Claim must be filed within 15 days from the date of discharge from the Hospital.

Note: Condition 4 & 5 are precedent to admission of liability under the policy. However the company may examine and relax the time limits mentioned in condition 4 & 5 depending upon the merits of the Case.

Post hospitalization bills are to be submitted within 15 days after completion of 60 days from the date of discharge from hospital

6. The Insured Person shall obtain and furnish the Company with all original bills, receipts and other documents upon which a claim is based and shall also give the Company such additional information and assistance as the Company may require in dealing with the claim

For reimbursement claims

- a. Duly completed claim form,
- b. Pre -admission investigations and treatment papers
- c. Discharge summary from the hospital in original
- d. Cash receipts from hospital, chemists
- e. Cash receipts and reports for tests done
- f. Receipts from doctors, surgeons, anesthetist
- g. Certificate from the attending doctor regarding the diagnosis.

For Cashless Treatment:

Prescriptions and receipts for Pre and Post-hospitalisation.

Note: The Company reserves the right to call for additional documents wherever required

In case of delay in payment of any claim that has been admitted as payable under the Policy terms and conditions, beyond the time period as prescribed under IRDA (Protection of Policyholders Regulation), 2002, the Company shall be liable to pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is approved by the Company. For the purpose of this clause, 'bank rate' shall mean the existing bank rate as notified by Reserve Bank of India, unless the extent regulation requires payment based on some other prescribed interest rate.

7. Any medical practitioner authorized by the company shall be allowed to examine the Insured Person in case of any alleged covered diseases/ conditions requiring Hospitalization when and as often as the same may reasonably be required on behalf of the Company at company's cost.
8. The Company shall not be liable to make any payment under the policy in respect of any claim if information furnished at the time of proposal is found to be incorrect or false or such claim is in any manner fraudulent or supported by any fraudulent means or device, misrepresentation whether by the Insured Person or by any other person acting on his behalf.
9. If the claim event falls within two policy periods, the claims shall be paid taking into consideration the available sum insured in the two policy periods, including the deductibles for each policy period. Such eligible claim amount to be payable to the insured shall be reduced to the extent of premium to be received for the renewal/due date of premium of health insurance policy, if not received earlier.
10. **Renewal:** The policy will be renewed except on grounds of misrepresentation, non disclosure / fraud committed. A grace period of 30 days from the date of expiry of the policy is available for renewal. If renewal is made within this 30 days period the continuity of benefits will be allowed. However the actual period of cover will start only from the date of payment of premium. In other words no protection is available between the policy expiry date and the date of payment of premium for renewal.

If the policy is to be renewed or ported from other Indian Insurance Company for enhanced sum insured then the waiting period as applicable to a fresh policy will apply to additional sum insured as if a separate policy has been issued for the difference. In other words the enhanced sum insured will not be available for an illness, disease, injury already contracted under the preceding policy periods

However in respect of disease / sickness / illness for which the claim/s has/have been made, the sum insured will be restricted to sum insured under the policy when the signs or symptoms was/were first diagnosed / received medical advice / treatment.

In the event of this policy being withdrawn / modified with revised terms and/or premium with the prior approval of the Competent Authority, the insured will be intimated three months in advance and accommodated in any other equivalent health insurance policy offered by the Company, if requested for by the Insured Person, at the relevant point of time.

11. **Free Look Period** : A free look period of 15 days from the date of receipt of the policy is available to the insured to review the terms and conditions of the policy. In case the insured is not satisfied with the terms and conditions, the insured may seek cancellation of the policy and in such an event the Company shall allow refund of premium paid after adjusting the cost of pre-acceptance medical screening, stamp duty charges and proportionate risk premium for the period concerned provided no claim has been made until such cancellation.

Free look cancellation is not applicable at the time of renewal of the policy

12. **Portability**: This policy is portable. If the insured is desirous of porting this policy to another Insurer towards renewal, application in the appropriate form should be made to the Company at least before 45 days from the date when the renewal is due.

Where the outcome of acceptance of portability is still waiting from the new insurer on the date of renewal, the existing policy will be extended on the request of the Insured person, for a period not less than one month on pro rata premium. Such extended cover will be cancelled only on the written request by the Insured Person, subject to a minimum pro rata premium for one month. If the Insured Person requests in writing to continue the policy with the Company without porting, it will be allowed by charging the regular premium with the same terms as per the expiring policy. In case of a claim made by the Insured person and admitted by the Company during such extension, the policy will be extended for the remaining period by charging the regular premium. Portability is not possible during the policy period. For details contact "portability@starhealth.in" or call Telephone No +91-044-28288869

13. **Automatic Restoration of Sum Insured**: There shall be automatic restoration of the Basic Sum Insured by 100% immediately upon exhaustion of the basic sum insured, once during the policy period

It is made clear that such restored Sum Insured can be utilized only for illness /disease/treatment unrelated to the illness /diseases/treatment for which claim/s was /were made.

Note : This facility is not available if the policy is on a floater basis.

14. **Cancellation**: The company may at any time cancel this policy on grounds of misrepresentation, moral hazard, fraud, non disclosure of material fact or non cooperation of the insured by sending the Insured 30 days notice by registered letter at the insured last known address. The insured may at any time cancel this Policy and in such event the Company shall allow refund after retaining Premium at Company's short period rate only (table given here below) provided no claim has occurred up to the date of cancellation.

PERIOD ON RISK	RATE OF PREMIUM TO BE RETAINED
Up to one-month	1/3 rd of the annual premium
Up to three Months	½ of the annual premium
Up to six months	3/4 th of the annual premium
Exceeding six months	full annual premium

15. **Automatic Termination**: This policy shall terminate in respect of each relevant Insured Person immediately on the earlier of the following events:

- ✓ Upon the death of the Insured Person
- ✓ Upon exhaustion of the sum insured

16. If any dispute or difference shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to the dispute/difference, or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators. Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration, as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this Policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this Policy that the award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.

It is also further expressly agreed and declared that if the Company shall disclaim liability to the Insured for any claim hereunder and such claim shall not, within three years from the date of such disclaimer have been made the subject matter of a suit in a Court of Law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

17. All claims under this policy shall be payable in Indian currency. All medical/surgical treatments under this policy shall have to be taken in India.
18. **Package Charges**: The Company's liability in respect of package charges will be restricted to 80% of such amount. (Package charges refer to charges that are not advertised in the Schedule of the Hospital).
19. **Policy Disputes** Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions contained herein is understood and agreed to by both the Insured and the Company to be subject to Indian Law.
20. **Notices** Any notice, direction or instruction given under this policy shall be in writing and delivered by hand, post, or facsimile/email to Star Health and Allied Insurance Company Limited, No 1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai-600034. Fax no: 044-28319100, Toll free no: 1800-425-2255, Toll free fax no: 1800-425-5522 Email: info@starhealth.in
Notice and instructions will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail
21. **Customer Service** :If at any time the Insured Person requires any clarification or assistance, the Insured may contact the offices of the Company at the address specified, during normal business hours.
22. **Grievances** :In case the Insured Person is aggrieved in any way, the Insured may contact the Company at the specified address, during normal business hours.

Grievance Department,

Star Health and Allied Insurance Company Limited, No 1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai - 600034.
or Call 044-28288821 during normal business hours or Send e-mail to grievances@starhealth.in

In the event of the following grievances:

- 1 any partial or total repudiation of claims by an insurer;
- 2 any dispute in regard to premium paid or payable in terms of the policy;
- 3 any dispute on the legal construction of the policies in so far as such disputes relate to claims;
- 4 delay in settlement of claims;
- 5 Non-issuance of any insurance document to customer after receipt of the premium

the Insured Person may approach the Insurance Ombudsman, within whose jurisdiction the branch or office of Star Health and Allied Insurance Company Limited is located.

List of Ombudsman	
Contact Details	Areas of Jurisdiction
Office of the Insurance Ombudsman, 2nd Floor, Ambica House, Nr. C.U. Shah College, Ashram Road, AHMEDABAD-380 014 . Tel.:- 079-27546840 Fax : 079-27546142 Email ins.omb@rediffmail.com	Gujarat Union Territory of Dadra & Nagar Haveli Daman and Diu
Office of the Insurance Ombudsman, Janak Vihar Complex, 2 nd Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023 . Tel.:- 0755-2569201 Fax : 0755-2769203 Email bimalokpalbhopal@airtelmail.in	Madhya Pradesh & Chhattisgarh
Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009 . Tel.:- 0674-2596455 Email ioobbsr@dataone.in	Orissa
Office of the Insurance Ombudsman, 2nd Floor, Batra Building, S.C.O. No.101-103, Sector 17-D, CHANDIGARH-160 017 . Tel.:- 0172-2706468, Fax : 0172-2708274 Email ombchd@yahoo.co.in	Punjab , Haryana Himachal Pradesh, Jammu & Kashmir Union Territory of Chandigarh
Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI-600 018 Tel.:- 044-24333668 044-24333668 /5284 Fax : 044-24333664 Email chennaiinsuranceombudsman@gmail.com	Tamil Nadu Union Territory–Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry)
Insurance Ombudsman, Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, NEW DELHI-110 002 . Tel.:- 011-23239633 011-23239633 Fax : 011-23230858 Email iobdelraj@rediffmail.com	Delhi & Rajasthan
Insurance Ombudsman, Office of the Insurance Ombudsman, "Jeevan Nivesh", 5 th Floor, Near Panbazar Overbridge, S.S. Road, GUWAHATI-781 001 (ASSAM) . Tel.:- 0361-2132204/5, Fax : 0361-2732937 Email ombudsmanghy@rediffmail.com	Assam , Meghalaya, Manipur Mizoram, Arunachal Pradesh Nagaland and Tripura
Office of the Insurance Ombudsman, 6-2-46, 1 st Floor, Moin Court, A.C. Guards, Lakdi-Ka-Pool, HYDERABAD-500 004 . Tel : 040-65504123 040-65504123 Fax: 040-23376599 Email insombudhyd@gmail.com	Andhra Pradesh Karnataka and Union Territory of Yanam a part of the Union Territory of Pondicherry
Office of the Insurance Ombudsman, 2nd Floor, CC 27/2603, Pulinat Bldg., Opp. Cochin Shipyard, M.G. Road, ERNAKULAM-682 015 . Tel : 0484-2358759 / 0484-2358759 Fax : 0484-2359336 Email iokochi@asianetindia.com	Kerala , Union Territory of (a) Lakshadweep (b) Mahe – a part of Union Territory of Pondicherry
Insurance Ombudsman, Office of the Insurance Ombudsman, 4th Floor, Hindusthan Bldg. Annexe, 4, C.R.Avenue, Kolkatta – 700 072 . Tel: 033 22124346/(40) Fax: 033 22124341 Email: iombsbpa@bsnl.in	West Bengal , Bihar Jharkhand and Union Territory of Andaman & Nicobar Islands Sikkim
Office of the Insurance Ombudsman, Jeevan Bhawan, 6 th Floor, Phase-2, Nawal Kishore Road, Hazaratganj, LUCKNOW-226 001 . Tel : 0522 -2231331 / 0522 -2231331 Fax : 0522-2231310 Email insombudsman@rediffmail.com	Uttar Pradesh and Uttaranchal
Office of the Insurance Ombudsman, S.V. Road, Santacruz(W), MUMBAI-400 054 . Tel : 022-26106928 022-26106928 Fax : 022-26106052 Email ombudsmanmumbai@gmail.com	Maharashtra , Goa

23. **IMPORTANT NOTE:** Where the insured person has opted for floater policy, the sum insured floats amongst the insured members.

The Policy Schedule and any Endorsement are to be read together and any word or such meaning wherever it appears.

The terms conditions and exceptions that appear in the Policy or in any Endorsement are part of the contract and must be complied with. Failure to comply may result in the claim being denied.

The attention of the policy holder is drawn to our website www.starhealth.in for anti fraud policy of the company for necessary compliance by all stake holders.

List of Day Care Treatments

ENT	51	Removal of foreign body from conjunctiva
1 Stapedotomy	52	Biopsy of tear gland
2 Myringoplasty(Type I Tympanoplasty)	53	Removal of Foreign body from cornea
3 Revision stapedectomy	54	Incision of the cornea
4 Labyrinthectomy for severe Vertigo	55	Other operations on the cornea
5 Stapedectomy under GA	56	Operation on the canthus and epicanthus
6 Ossiculoplasty	57	Removal of foreign body from the orbit and the eye ball.
7 Myringotomy with Grommet Insertion	58	Surgery for cataract
8 Tympanoplasty (Type III)	59	Treatment of retinal lesion
9 Stapedectomy under LA	60	Removal of foreign body from the posterior chamber of the eye
10 Revision of the fenestration of the inner ear.		Oncology
11 Tympanoplasty (Type IV)	61	IV Push Chemotherapy
12 Endolymphatic Sac Surgery for Meniere's Disease	62	HBI-Hemibody Radiotherapy
13 Turbinectomy	63	Infusional Targeted therapy
14 Removal of Tympanic Drain under LA	64	SRT-Stereotactic Arc Therapy
15 Endoscopic Stapedectomy	65	SC administration of Growth Factors
16 Fenestration of the inner ear	66	Continuous Infusional Chemotherapy
17 Incision and drainage of perichondritis	67	Infusional Chemotherapy
18 Septoplasty	68	CCRT-Concurrent Chemo + RT
19 Vestibular Nerve section	69	2D Radiotherapy
20 Thyroplasty Type I	70	3D Conformal Radiotherapy
21 Pseudocyst of the Pinna - Excision	71	IGRT- Image Guided Radiotherapy
22 Incision and drainage - Haematoma Auricle	72	IMRT- Step & Shoot
23 Tympanoplasty (Type II)	73	Infusional Bisphosphonates
24 Keratosis removal under GA	74	IMRT- DMLC
25 Reduction of fracture of Nasal Bone	75	Rotational Arc Therapy
26 Excision and destruction of lingual tonsils	76	Tele gamma therapy
27 Conchoplasty	77	FSRT-Fractionated SRT
28 Thyroplasty Type II	78	VMAT-Volumetric Modulated Arc Therapy
29 Tracheostomy	79	SBRT-Stereotactic Body Radiotherapy
30 Excision of Angioma Septum	80	Helical Tomotherapy
31 Turbinoplasty	81	SRS-Stereotactic Radiosurgery
32 Incision & Drainage of Retro Pharyngeal Abscess	82	X-Knife SRS
33 Uvulo Palato Pharyngo Plasty	83	Gammaknife SRS
34 Palatoplasty	84	TBI- Total Body Radiotherapy
35 Tonsillectomy without adenoidectomy	85	intraluminal Brachytherapy
36 Adenoidectomy with Grommet insertion	86	Electron Therapy
37 Adenoidectomy without Grommet insertion	87	TSET-Total Electron Skin Therapy
38 Vocal Cord lateralisation Procedure	88	Extracorporeal Irradiation of Blood Products
39 Incision & Drainage of Para Pharyngeal Abscess	89	Telecobalt Therapy
40 Transoral incision and drainage of a pharyngeal abscess	90	Telecesium Therapy
41 Tonsillectomy with adenoidectomy	91	External mould Brachytherapy
42 Tracheoplasty	92	Interstitial Brachytherapy
Ophthalmology	93	Intracavity Brachytherapy
43 Incision of tear glands	94	3D Brachytherapy
44 Other operation on the tear ducts	95	Implant Brachytherapy
45 Incision of diseased eyelids	96	Intravesical Brachytherapy
46 Excision and destruction of the diseased tissue of the eyelid	97	Adjuvant Radiotherapy
47 Removal of foreign body from the lens of the eye.	98	Afterloading Catheter Brachytherapy
48 Corrective surgery of the entropion and ectropion	99	Conditioning Radiotherapy for BMT
49 Operations for pterygium	100	Extracorporeal Irradiation to the Homologous Bone grafts
50 Corrective surgery of blepharoptosis	101	Radical chemotherapy

- 102 Neoadjuvant radiotherapy
- 103 LDR Brachytherapy
- 104 Palliative Radiotherapy
- 105 Radical Radiotherapy
- 106 Palliative chemotherapy
- 107 Template Brachytherapy
- 108 Neoadjuvant chemotherapy
- 109 Adjuvant chemotherapy
- 110 Induction chemotherapy
- 111 Consolidation chemotherapy
- 112 Maintenance chemotherapy
- 113 HDR Brachytherapy

Plastic Surgery

- 114 Construction skin pedicle flap
- 115 Gluteal pressure ulcer-Excision
- 116 Muscle-skin graft, leg
- 117 Removal of bone for graft
- 118 Muscle-skin graft duct fistula
- 119 Removal cartilage graft
- 120 Myocutaneous flap
- 121 Fibro myocutaneous flap
- 122 Breast reconstruction surgery after mastectomy
- 123 Sling operation for facial palsy
- 124 Split Skin Grafting under RA
- 125 Wolfe skin graft
- 126 Plastic surgery to the floor of the mouth under GA

Urology

- 127 AV fistula - wrist
- 128 URSL with stenting
- 129 URSL with lithotripsy
- 130 Cystoscopic Litholapaxy
- 131 ESWL
- 132 Haemodialysis
- 133 Bladder Neck Incision
- 134 Cystoscopy & Biopsy
- 135 Cystoscopy and removal of polyp
- 136 Suprapubic cystostomy
- 137 Percutaneous nephrostomy
- 138 Ureterocoele decompression
- 139 Cystoscopy and "SLING" procedure.
- 140 TUNA- prostate
- 141 Excision of urethral diverticulum
- 142 Removal of urethral Stone
- 143 Excision of urethral prolapse
- 144 Mega-ureter reconstruction
- 145 Kidney renoscopy and biopsy
- 146 Ureter endoscopy and treatment
- 147 Vesico ureteric reflux correction
- 148 Surgery for pelvi ureteric junction obstruction
- 149 Anderson hynes operation
- 150 Kidney endoscopy and biopsy
- 151 Paraphimosis surgery
- 152 Injury prepuce- circumcision

- 153 Frenular tear repair
- 154 Meatotomy for meatal stenosis
- 155 Surgery for fourmier's gangrene scrotum
- 156 Surgery filarial scrotum
- 157 Surgery for watering can perineum
- 158 Repair of penile torsion
- 159 Drainage of prostate abscess
- 160 Orchiectomy
- 161 Cystoscopy and removal of FB

Neurology

- 162 Facial nerve physiotherapy
- 163 Nerve biopsy
- 164 Muscle biopsy
- 165 Epidural steroid injection
- 166 Glycerol rhizotomy
- 167 Spinal cord stimulation
- 168 Motor cortex stimulation
- 169 Stereotactic Radiosurgery
- 170 Percutaneous Cordotomy
- 171 Intrathecal Baclofen therapy
- 172 Entrapment neuropathy Release
- 173 Diagnostic cerebral angiography
- 174 VP shunt
- 175 Ventriculoatrial shunt

Thoracic surgery

- 176 Thoracoscopy and Lung Biopsy
- 177 Excision of cervical sympathetic Chain Thoracoscopic
- 178 Laser Ablation of Barrett's oesophagus
- 179 Pleurodesis
- 180 Thoracoscopy and pleural biopsy
- 181 EBUS + Biopsy
- 182 Thoracoscopy ligation thoracic duct
- 183 Thoracoscopy assisted empyaema drainage

Gastroenterology

- 184 Pancreatic pseudocyst EUS & drainage
- 185 RF ablation for barrett's Oesophagus
- 186 ERCP and papillotomy
- 187 Esophagoscope and sclerosant injection
- 188 EUS + submucosal resection
- 189 Construction of gastrostomy tube
- 190 EUS + aspiration pancreatic cyst
- 191 Small bowel endoscopy (therapeutic)
- 192 Colonoscopy ,lesion removal
- 193 ERCP
- 194 Colonoscopy stenting of stricture
- 195 Percutaneous Endoscopic Gastrostomy
- 196 EUS and pancreatic pseudo cyst drainage
- 197 ERCP and choledochoscopy
- 198 Proctosigmoidoscopy volvulus detorsion
- 199 ERCP and sphincterotomy
- 200 Esophageal stent placement
- 201 ERCP + placement of biliary stents
- 202 Sigmoidoscopy w / stent

- 203 EUS + coeliac node biopsy
- General Surgery**
- 204 Infected keloid excision
- 205 Incision of a pilonidal sinus / abscess
- 206 Axillary lymphadenectomy
- 207 Wound debridement and Cover
- 208 Abscess-Decompression
- 209 Cervical lymphadenectomy
- 210 Infected sebaceous cyst
- 211 Inguinal lymphadenectomy
- 212 Incision and drainage of Abscess
- 213 Suturing of lacerations
- 214 Scalp Suturing
- 215 Infected lipoma excision
- 216 Maximal anal dilatation
- 217 Piles
- A) Injection Sclerotherapy
- B) Piles banding
- 218 Liver Abscess- catheter drainage
- 219 Fissure in Ano- fissurectomy
- 220 Fibroadenoma breast excision
- 221 Oesophageal varices Sclerotherapy
- 222 ERCP - pancreatic duct stone removal
- 223 Perianal abscess I&D
- 224 Perianal hematoma Evacuation
- 225 Fissure in ano sphincterotomy
- 226 UGI scopy and Polypectomy oesophagus
- 227 Breast abscess I & D
- 228 Feeding Gastrostomy
- 229 Oesophagoscopy and biopsy of growth oesophagus
- 230 UGI scopy and injection of adrenaline, sclerosants - bleeding ulcers
- 231 ERCP - Bile duct stone removal
- 232 Ileostomy closure
- 233 Colonoscopy
- 234 Polypectomy colon
- 235 Splenic abscesses Laparoscopic Drainage
- 236 UGI SCOPY and Polypectomy stomach
- 237 Rigid Oesophagoscopy for FB removal
- 238 Feeding Jejunostomy
- 239 Colostomy
- 240 Ileostomy
- 241 Colostomy closure
- 242 Submandibular salivary duct stone removal
- 243 Pneumatic reduction of intussusception
- 244 Varicose veins legs - Injection sclerotherapy
- 245 Rigid Oesophagoscopy for Plummer vinson syndrome
- 246 Pancreatic Pseudocysts Endoscopic Drainage
- 247 ZADEK's Nail bed excision
- 248 Subcutaneous mastectomy
- 249 Excision of Ranula under GA
- 250 Rigid Oesophagoscopy for dilation of benign Strictures
- 251 Eversion of Sac
- a) Unilateral
- b) Bilateral
- 252 Lord's plication
- 253 Jaboulay's Procedure
- 254 Scrotoplasty
- 255 Surgical treatment of varicocele
- 256 Epididymectomy
- 257 Circumcision for Trauma
- 258 Meatoplasty
- 259 Intersphincteric abscess incision and drainage
- 260 Psoas Abscess Incision and Drainage
- 261 Thyroid abscess Incision and Drainage
- 262 TIPS procedure for portal hypertension
- 263 Esophageal Growth stent
- 264 PAIR Procedure of Hydatid Cyst liver
- 265 Tru cut liver biopsy
- 266 Photodynamic therapy or esophageal tumour and Lung tumour
- 267 Excision of Cervical RIB
- 268 Laparoscopic reduction of intussusception
- 269 Microdochectomy breast
- 270 Surgery for fracture Penis
- 271 Sentinel node biopsy
- 272 Parastomal hernia
- 273 Revision colostomy
- 274 Prolapsed colostomy- Correction
- 275 Testicular biopsy
- 276 Laparoscopic cardiomyotomy(Hellers)
- 277 Sentinel node biopsy malignant melanoma
- 278 Laparoscopic pyloromyotomy(Ramstedt)
- Orthopedics**
- 279 Arthroscopic Repair of ACL tear knee
- 280 Closed reduction of minor Fractures
- 281 Arthroscopic repair of PCL tear knee
- 282 Tendon shortening
- 283 Arthroscopic Meniscectomy - Knee
- 284 Treatment of clavicle dislocation
- 285 Arthroscopic meniscus repair
- 286 Haemarthrosis knee- lavage
- 287 Abscess knee joint drainage
- 288 Carpal tunnel release
- 289 Closed reduction of minor dislocation
- 290 Repair of knee cap tendon
- 291 ORIF with K wire fixation- small bones
- 292 Release of midfoot joint
- 293 ORIF with plating- Small long bones
- 294 Implant removal minor
- 295 K wire removal
- 296 POP application
- 297 Closed reduction and external fixation
- 298 Arthrotomy Hip joint
- 299 Syme's amputation
- 300 Arthroplasty
- 301 Partial removal of rib

- 302 Treatment of sesamoid bone fracture
- 303 Shoulder arthroscopy / surgery
- 304 Elbow arthroscopy
- 305 Amputation of metacarpal bone
- 306 Release of thumb contracture
- 307 Incision of foot fascia
- 308 calcaneum spur hydrocort injection
- 309 Ganglion wrist hyalase injection
- 310 Partial removal of metatarsal
- 311 Repair / graft of foot tendon
- 312 Revision/Removal of Knee cap
- 313 Amputation follow-up surgery
- 314 Exploration of ankle joint
- 315 Remove/graft leg bone lesion
- 316 Repair/graft achilles tendon
- 317 Remove of tissue expander
- 318 Biopsy elbow joint lining
- 319 Removal of wrist prosthesis
- 320 Biopsy finger joint lining
- 321 Tendon lengthening
- 322 Treatment of shoulder dislocation
- 323 Lengthening of hand tendon
- 324 Removal of elbow bursa
- 325 Fixation of knee joint
- 326 Treatment of foot dislocation
- 327 Surgery of bunion
- 328 Intra articular steroid injection
- 329 Tendon transfer procedure
- 330 Removal of knee cap bursa
- 331 Treatment of fracture of ulna
- 332 Treatment of scapula fracture
- 333 Removal of tumor of arm/ elbow under RA/GA
- 334 Repair of ruptured tendon
- 335 Decompress forearm space
- 336 Revision of neck muscle (Torticollis release)
- 337 Lengthening of thigh tendons
- 338 Treatment fracture of radius & ulna
- 339 Repair of knee joint

Paediatric surgery

- 340 Excision Juvenile polyps rectum
- 341 Vaginoplasty
- 342 Dilatation of accidental caustic stricture oesophageal
- 343 Presacral Teratomas Excision
- 344 Removal of vesical stone
- 345 Excision Sigmoid Polyp
- 346 Sternomastoid Tenotomy
- 347 Infantile Hypertrophic Pyloric Stenosis pyloromyotomy
- 348 Excision of soft tissue rhabdomyosarcoma
- 349 Mediastinal lymph node biopsy
- 350 High Orchiectomy for testis tumours
- 351 Excision of cervical teratoma
- 352 Rectal-Myomectomy
- 353 Rectal prolapse (Delorme's procedure)

- 354 Orchiopexy for undescended testis
- 355 Detorsion of torsion Testis
- 356 Lap.Abdominal exploration in cryptorchidism
- 357 EUA + biopsy multiple fistula in ano
- 358 Cystic hygroma - Injection treatment
- 359 Excision of fistula-in-ano

Gynaecology

- 360 Hysteroscopic removal of myoma
 - 361 D&C
 - 362 Hysteroscopic resection of septum
 - 363 Thermal Cauterisation of Cervix
 - 364 MIRENA insertion
 - 365 Hysteroscopic adhesiolysis
 - 366 LEEP
 - 367 Cryocauterisation of Cervix
 - 368 Polypectomy Endometrium
 - 369 Hysteroscopic resection of fibroid
 - 370 LLETZ
 - 371 Conization
 - 372 Polypectomy cervix
 - 373 Hysteroscopic resection of endometrial polyp
 - 374 Vulval wart excision
 - 375 Laparoscopic paraovarian cyst excision
 - 376 Uterine artery embolization
 - 377 Bartholin Cyst excision
 - 378 Laparoscopic cystectomy
 - 379 Hymenectomy(imperforate Hymen)
 - 380 Endometrial ablation
 - 381 Vaginal wall cyst excision
 - 382 Vulval cyst Excision
 - 383 Laparoscopic paratubal cyst excision
 - 384 Repair of vagina (vaginal atresia)
 - 385 Hysteroscopy, removal of myoma
 - 386 TURBT
 - 387 Ureterocoele repair - congenital internal-(Rpt of 167)
 - 388 Vaginal mesh For POP
 - 389 Laparoscopic Myomectomy
 - 390 Surgery for SUI
 - 391 Repair recto- vagina fistula
 - 392 Pelvic floor repair(excluding Fistula repair)
 - 393 URS + LL (Rpt of 168)
 - 394 Laparoscopic oophorectomy
- Critical care**
- 395 Insert non- tunnel CV cath
 - 396 Insert PICC cath (peripherally inserted central catheter)
 - 397 Replace PICC cath (peripherally inserted central catheter)
 - 398 Insertion catheter, intra anterior
 - 399 Insertion of Portacath
- Dental**
- 400 Splinting of avulsed teeth
 - 401 Suturing lacerated lip/oral mucosa
 - 402 Oral biopsy in case of abnormal tissue presentation
 - 403 FNAC
 - 404 Smear from oral cavity

Other Excluded Expenses
TOILETRIES/ COSMETICS/ PERSONAL COMFORT OR CONVENIENCE ITEMS

1	Anne French Charges	54	Face Mask
2	Baby Charges (unless Specified/indicated)	55	Flexi Mask
3	Baby Food	56	Gause Soft
4	Baby Utilites Charges	57	Gauze
5	Baby Set	58	Hand Holder
6	Baby Bottles	59	Hansaplast/ Adhesive Bandages
7	Bottle	60	Lactogen/ Infant Food
8	Brush	61	Slings (Except For Upper Arm Fractures In Which Case, Cost Of One Sling Is Payable)
9	Cosy Towel		Items Specifically Excluded In The Policy
10	Hand Wash	62	Weight Control Programs/ Supplies/ Services
11	Moisturiser Paste Brush	63	Cost Of Spectacles/ Contact Lenses/ Hearing Aids Etc.,
12	Powder	64	Dental Treatment Expenses That Do Not Require Hospitalisation
13	Razor	65	Hormone Replacement Therapy
14	Towel	66	Home Visit Charges
15	Shoe Cover	67	Infertility/ Subfertility/ Assisted Conception Procedure
16	Beauty Services	68	Obesity (including Morbid Obesity) Treatment
17	Belts/ Braces (Except For Cases Who Have Undergone Surgery Of Thoracic Or Lumbar Spine)	69	Psychiatric & Psychosomatic Disorders
18	Buds	70	Corrective Surgery For Refractive Error
19	Barber Charges	71	Treatment Of Sexually Transmitted Diseases
20	Caps	72	Donor Screening Charges
21	Cold Pack/hot Pack	73	Admission/registration Charges
22	Carry Bags	74	Hospitalisation For Evaluation/ Diagnostic Purpose)
23	Cradle Charges	75	Expenses For Investigation/ Treatment Irrelevant To The Disease For Which Admitted Or Diagnosed
24	Comb	76	Any Expenses When The Patient Is Diagnosed With Retro Virus + Or Suffering From /hiv/ Aids Etc Is Detected/ Directly Or Indirectly (however Please See Specific Exclusion For This Purpose)
25	Disposables Razors Charges (For Site Preparations)	77	Stem Cell Implantation/ Surgery
26	Eau-de-cologne / Room Freshners		Items Which Form Part Of Hospital Services Where Separate Consumables Are Not Payable But The Service Is
27	Eye Pad	78	Ward And Theatre Booking Charges
28	Eye Sheild	79	Arthroscopy & Endoscopy Instruments
29	Email / Internet Charges	80	Microscope Cover
30	Food Charges (other Than Patient's Diet Provided By Hospital)	81	Surgical Blades,harmonic Scalpel,shaver
31	Foot Cover	82	Surgical Drill
32	Gown	83	Eye Kit
33	Leggings (except For Bariatric And Varicose Vein Surgery Where Surgery Itself Is Payable)	84	Eye Drape
34	Laundry Charges	85	X-ray Film
35	Mineral Water	86	Sputum Cup
36	Oil Charges	87	Boyles Apparatus Charges
37	Sanitary Pad	88	Blood Grouping And Cross Matching Of Donors Samples
38	Slippers	89	Savlon
39	Telephone Charges	90	Band Aids, Bandages, Sterile Injections, Needles, Syringes
40	Tissue Paper	91	Cotton
41	Tooth Paste	92	Cotton Bandage
42	Tooth Brush	93	Micropore/ Surgical Tape
43	Guest Services	94	Blade
44	Bed Pan	95	Apron
45	Bed Under Pad Charges	96	Torniquet
46	Camera Cover	97	Orthobundle, Gynaec Bundle
47	Care Free	98	Urine Container Elements Of Room Charge
48	Cliniplast	99	Luxury Tax
49	Crepe Bandage	100	Hvac
50	Curapore	101	House Keeping Charges
51	Diaper Of Any Type		
52	Dvd, Cd Charges (payable If Cd Is Specifically Sought For)		
53	Eyelet Collar		

102	Service Charges Where Nursing Charge Also Charged	155	Ambulance Collar
103	Television & Air Conditioner Charges	156	Ambulance Equipment
104	Surcharges	157	Microsheild
105	Attendant Charges	158	Abdominal Binder (except For Post-surgery Patients Of Major Abdominal Surgery Including Tah, Lscs Incision Hernia Repair, Exploratory Laparotomy For Intestinal Obstructions , Liver Transplant Etc)
106	Im Iv Injection Charges		Items Payable If Supported By A Prescription
107	Clean Sheet	159	Betadine \ Hydrogen Peroxide\spirit\dettol(payable When Prescribed For Patient, Not Payable For Hospital Use In Ot Or Ward Or For Dressings In Hospital)
108	Extra Diet Of Patient(other Than That Which Forms Part Of Bed Charge)	160	Private Nurses Charges- Special Nursing Charges
109	Blanket/warmer Blanket	161	Nutrition Planning Charges - Dietician Charges- (except Patient Diet Provided By Hospital)
	Administrative Or Non-medical Charges	162	Alex Sugar Free
110	Admission Kit	163	Creams Powders Lotions (toileteries Are Not Payable, Only Prescribed Medical Pharmaceuticals Payable)
111	Birth Certificate	164	Digene Gel/ Antacid Gel (payable When Prescribed)
112	Blood Reservation Charges And Ante Natal Booking Charges	165	Ecg Electrodes (except Upto 5 Electrodes For Every Case Visiting Ot Or Icu. For Longer Stay In Icu, Least One Set Every Second Day Payable.
113	Certificate Charges	166	Gloves (except For Sterilized Gloves)
114	Courier Charges	167	Hiv Kit
115	Convenyance Charges	168	Listerine/ Antiseptic Mouthwash (except If Prescribed)
116	Diabetic Chart Charges	169	Lozenges (except If Prescribed)
117	Documentation Charges / Administrative Expenses	170	Mouth Paint (except If Prescribed)
118	Discharge Procedure Charges	171	Nebulisation Kit (except If Used During Hospitalization Is Payable Reasonably)
119	Daily Chart Charges	172	Neosprin (except If Prescribed)
120	Entrance Pass / Visitors Pass Charges	173	Novarapid (except If Prescribed)
121	Expenses Related To Prescription On Discharge (to Be Claimed Under Post Hospitalisation Where Admissible)	174	Volini Gel/ Analgesic Gel ((except If Prescribed))
122	File Opening Charges	175	Zytee Gel (except If Prescribed)
123	Incidental Expenses / Misc. Charges (not Explained)	176	Vaccination Charges (except For Post Bite Treatment)
124	Medical Certificate	177	Ahd
125	Maintainance Charges	178	Alcohol Swabes
126	Medical Records	179	Scrub Solution/sterillium
127	Preparation Charges	180	Vaccine Charges For Baby
128	Photocopies Charges	181	Aesthetic Treatment / Surgery
129	Patient Identification Band / Name Tag	182	Tpa Charges
130	Washing Charges	183	Visco Belt Charges
131	Medicine Box	184	Any Kit With No Details Mentioned [delivery Kit,
132	Mortuary Charges Beyond 24 Hrs (shifting Charges Not Payable)	185	Examination Gloves
133	Medico Legal Case Charges (mlc Charges)	186	Kidney Tray
	External Durable Devices	187	Mask
134	Walking Aids Charges	188	Ounce Glass
135	Bipap Machine	189	Outstation Consultant's/ Surgeon's Fees (not Payable, Except For Telemedicine Consultations If Covered By Policy)
136	Commode	190	Oxygen Mask
137	Cpap/ Capd Equipments	191	Paper Gloves
138	Infusion Pump - Cost	192	Pelvic Traction Belt (payable In Case Of Pivd Requiring Traction)
139	Oxygen Cylinder (for Usage Outside The Hospital)	193	Referal Doctor's Fees
140	Pulseoxymeter Charges	194	Accu Check (Glucometry/ Strips)
141	Spacer	195	Pan Can
142	Spirometre	196	Sofnet
143	Spo2 Probe	197	Trolley Cover
144	Nebulizer Kit	198	Urometer, Urine Jug
145	Steam Inhaler	199	Ambulance (except For Charges Incurred Ambulance From Home To Hospital Or Interhospital Shifts , Rta)
146	Armsling	200	Tegaderm / Vasofix Safety (payable - Maximum Of 3 In 48 Hrs And Then 1 In 24 Hrs)
147	Thermometer	201	Urine Bag (payable Where Medically Necessary Till A Reasonable Cost - Maximum 1 Per 24 Hrs)
148	Cervical Collar	202	Softovac
149	Splint	203	Stockings (except For Case Like Cabg Etc.)
150	Diabetic Foot Wear		
151	Knee Braces (Long/ Short/ Hinged)		
152	Knee Immobilizer/shoulder Immobilizer		
153	Lumbo Sacral Belt (except For Cases Who Have Undergone Surgery Of Lumbar Spine)		
154	Nimbus Bed Or Water Or Air Bed Charges (except For Treatment Of Patients In Icu For More Than 6 Consecutive Days, Patients With Paraplegia /quadriplegia. Up To A Maximum Of Rs.200/- Per Day)		