



Muskurate Raho

IFFCO-TOKIO GENERAL INSURANCE CO. LTD
Regd. Office: IFFCO Sadan, C-1, Distt. Centre, Saket, New Delhi-110017

Group Medishield Insurance Policy

For

INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI

Period of Insurance : 01/08/2020 To 31/07/2021

Policy No : H0390737

Signature valid

Digitally signed by SUBRATA MONDAL
Date: 2020.08.24 17:49:18 +05'30'
Reason: Valid Policy Copy
Location: IFFCO Tokio General Insurance Company Ltd, India



IFFCO-TOKIO GENERAL INSURANCE COMPANY LIMITED

Regd. Office: " IFFCO Sadan ", C-1, District Centre, Saket, New Delhi - 110017
Guwahati SBU Office: 1-B, 1st Floor, Aditya Tower, G S Road, Dispur, Guwahati - 781006 (Assam)
Phone: 0361-2333635



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TOKIO MARINE

Welcome to the world of ITGI

We would like to take this opportunity to thank you for patronizing ITGI for Group Medishield Policy. At IFFCO TOKIO General Insurance Company Limited (ITGI), we are fully committed to provide insurance products and services to you in a convenient and satisfying manner.

Our policies and different Add-on coverage have been designed to provide you with more than just a healing touch in those unfortunate, yet unavoidable, circumstances of life.

We have made every effort to make our products and procedures simple, transparent and customer friendly. Our product range will serve almost all your insurance needs.

This booklet contains the Policy Schedule with add on covers, List of employees covered, Third Party Administrator details (for claims assistance) along with policy wordings of "Group Medishield Policy Coverage". We have taken adequate measures to issue the policy document as per your requirements. In case of any discrepancy please inform policy issuing office immediately.

It would be our privilege to assist you for your insurance requirements or feedback anytime. You may contact our SBU or Toll-Free number available on Policy Schedule.

With ITGI, your future is in safe hands. "**Muskurate Raho**".

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IFFCO TOKIO General Insurance Company Limited
 Regd. Office L IFFCO SADAN, C1 Distt Centre, Saket, New Delhi-110017
 Corporate Identification Number (CIN) U74899DL2000PLC107621, IRDA Reg. No. 106

Issuing Office SBU A5
 IFFCO-TOKIO GENERAL
 INSURANCE
 COMPANY LIMITED
 1-B
 1st Floor, Aditya Tower, G S Road,
 Dispur,
 DISPUR GUWAHATI
 781006
 INDIA
 GSTIN : 18AAACI7573H7Z5
 General insurance Service :9971



Group Medishield Insurance Policy Schedule
CUM TAX INVOICE

INSURED	INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI			
Address	MEDICAL SECTION			
	KAMRUP METROPOLITAN			
	I I T S.O			
	TILING GAON			
	ASSAM			
	INDIA			
	PIN CODE	781039	STATE CODE	18
Phone No	000000001			
GSTIN	18AAAJH0130P1Z8			
Agent No	A5000005			
Policy Invoice No.		H0390737		
Policy No.		H0390737		
Date Of Issuance		24/08/2020		
Date Of Insurance from 00.00 hours on		01/08/2020		
To Mid Night On		31/07/2021		

Member Details

Total Members Covered	7742
Total Self Covered	5733
Total Dependent Covered	2009

Co-insurance Details

Insurance Company	Share (%)
IFFCO TOKIO GENERAL INSURANCE CO. LTD	100

Premium Details

Net Premium	Gross Premium
17,315,677	20,432,499

GST Details

	CGST	SGST	UGST	IGST
Percentage (%)	9	9	0	0
Amount (Rs.)	1,558,410	1,558,410	0	0

TPA Details

1 Raksha TPA Pvt. Ltd.


Policy Conditions/Extensions/Endorsements

INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI			
Coverage Name	PlanName		
Sum Insured Opted	STAFF MEMBERS	Sum Insured List(INR) : 100000, 200000, 300000, 400000, 500000, 600000, 700000, 800000, 900000, 1000000, 1100000, 1200000, 1300000, 1400000	
	STUDENTS	Sum Insured List(INR) : 100000, 200000, 300000, 400000, 500000, 600000, 700000, 800000, 900000, 1000000, 1100000, 1200000, 1300000	
Family Composition List	STAFF MEMBERS	Family Size	: No Limit
		Family Definition	: Self + Spouse + Dependent Child + Dependent Parents + Dependent Parent Inlaws
		Relationship	Min Age Max Age
		Self/Employee	18 80
		Spouse	18 80
		Son	0 60
		Daughter	0 60
	Mother	30 99	
	Father	30 99	

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		Father in Law	30	99	 IFFCO-TOKIO GENERAL INSURANCE <i>Muskurate Raho</i>
		Mother in Law	30	99	
	STUDENTS	Family Size	: 1		
		Family Definition	: Student		
		Relationship	Min Age	Max Age	
		Self/Employee	15	65	
Pre Existing Diseases	STAFF MEMBERS	Covered from Day 1			
	STUDENTS	Covered from Day 1			
First 30 Days Exclusion	STAFF MEMBERS	Waived			
	STUDENTS	Waived			
First Year Exclusion	STAFF MEMBERS	Waived			
	STUDENTS	Waived			
Maternity Benefit	STAFF MEMBERS	Maternity Benefit: Reimbursable maximum benefit upto Rs.75,000/- for both students and employees. This will be applicable from the day one of the date of effect of the policy			
	STUDENTS	Other Terms as per expiring policy no. H0128614			
Pre & Post Natal Expense	STAFF MEMBERS	Not Covered			
	STUDENTS	Not Covered			
New Born Baby Cover	STAFF MEMBERS	From Day 1 Within SI (subject to declaration as per Condition of Mid term inclusion and not exceeding maximum stipulated family size under the Policy even after inclusion of the new born child)			
	STUDENTS	From Day 1 Within SI (subject to declaration as per Condition of Mid term inclusion and not exceeding maximum stipulated family size under the Policy even after inclusion of the new born child)			
Room Rent Capping	STAFF MEMBERS	*Room and other charges : (a) Room: Room expenses as provided by the Hospital/nursing home not exceeding 2.0 % of the sum insured per day or actual, whichever is less. (b) Nursing: 10% of room rent or actual whichever is less. (c) Dressing: 10% of room rent or actual whichever is less. (d) Service Fee: 10% of room rent or actual whichever is less. Intensive Care Unit (ICU): Intensive Care Unit (ICU) / Intensive Cardiac Care Unit (ICCU) expenses not exceeding 4.0 % of the sum insured per day, or actual, whichever is less.			
	STUDENTS	*Room and other charges : (a) Room: Room expenses as provided by the Hospital/nursing home not exceeding 2.0 % of the sum insured per day or actual, whichever is less. (b) Nursing: 10% of room rent or actual whichever is less. (c) Dressing: 10% of room rent or actual whichever is less. (d) Service Fee: 10% of room rent or actual whichever is less. Intensive Care Unit (ICU): Intensive Care Unit (ICU) / Intensive Cardiac Care Unit (ICCU) expenses not exceeding 4.0 % of the sum insured per day, or actual, whichever is less.			
Pre & Post Hospitalization coverage	STAFF MEMBERS	Expenses incurred for Pre Hospitalization upto 30 Days and Post Hospitalization upto 60 Days are covered .			
	STUDENTS	Expenses incurred for Pre Hospitalization upto 30 Days and Post Hospitalization upto 60 Days are covered .			
Domiciliary Hospitalization	STAFF MEMBERS	Covered			
	STUDENTS	Covered			
Corporate Buffer	STAFF MEMBERS	Corporate Buffer: It is a special provision formulated under the policy which is meant to meet contingency expenditure which could not be met by an individual within the sum insured under the policy. The Corporate Buffer is to be provided by the Insurer as an incentive in lieu of the anticipated unutilized sum insured during the policy periods. The Corporate Buffer is fixed under this policy as Rs. 30 lakhs which shall float on the entire group subject to terms and condition of the policy issued. Utilization of Corporate Buffer: The Corporate Buffer shall be at the discretion of the Director, ITG, the Insured. In case the sum insured of a member is exhausted, but the continuation of the treatment is found inevitable, on case to case basis, the Director, ITG, the Insured, may allot an amount (equivalent to sum insured) from the Corporate Buffer and recommend the same to the Insurer for utilization of this fund subject to the terms and conditions of the policy.			
	STUDENTS	*Corporate Buffer :It is a special provision formulated under the policy which is meant to meet contingency expenditure which could not be met by an individual within the sum insured under the policy. The Corporate Buffer is to be provided by the Insurer as an incentive in lieu of the anticipated unutilized sum insured during the policy periods. The Corporate Buffer is fixed under this policy as Rs. 30 lakhs which shall float on the entire group subject to terms and condition of the policy issued. *Utilization of Corporate Buffer: The Corporate Buffer shall be at the discretion of the Director,			

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		ITG, the Insured. In case the sum insured of a member is exhausted but continuation of the treatment is found inevitable, on case to case basis, the Director, IITG, the Insured, may recommend the amount (equivalent to sum insured) from the Corporate Buffer and recommend the same to the Insurer for utilization of this fund subject to the terms and conditions of the policy.
Ambulance Charges	STAFF MEMBERS	Ambulance service @ 1% of the sum insured or actual, whichever is less, for every shifting of a patient from residence to hospital vice-versa or from one Hospital/Nursing Home to another Hospital/Nursing Home in connection with hospitalization must be allowed.
	STUDENTS	Ambulance service @ 1% of the sum insured or actual, whichever is less, for every shifting of a patient from residence to hospital vice-versa or from one Hospital/Nursing Home to another Hospital/ Nursing Home in connection with hospitalization must be allowed.
Limits for common ailments	STAFF MEMBERS	Special cases: As a special case the following treatments/diseases/disorders also will be covered: a) Cataract: Operation cost as well as actual cost of intra ocular lens (not spectacle/contact lens) limited to Rs. 24,000/- per eye and additional Rs.10,000/- for every Rs. 1 lakh top-up.
	STUDENTS	Special cases: As a special case the following treatments/diseases/disorders also will be covered: a) Cataract: Operation cost as well as actual cost of intra ocular lens (not spectacle/contact lens) limited to Rs. 24,000/- per eye and additional Rs.10,000/- for every Rs. 1 lakh top-up.
OPD Cover	STAFF MEMBERS	Not Covered
	STUDENTS	Not Covered
Special Case	STAFF MEMBERS	As a special case the following treatments/diseases/disorders also will be covered: a) Cataract: Operation cost as well as actual cost of intra ocular lens (not spectacle/contact lens) limited to Rs. 24,000/- per eye and additional Rs.10,000/- for every Rs. 1 lakh top-up. b) Congenital/Psychiatric cases: Disorders under this category also will be covered. c) Peritoneal Ambulatory dialysis up to Rs 3,500/- per day. d) Robotic Surgery: Covered (on a 50% co-payment basis).
	STUDENTS	As a special case the following treatments/diseases/disorders also will be covered: a) Cataract: Operation cost as well as actual cost of intra ocular lens (not spectacle/contact lens) limited to Rs. 24,000/- per eye and additional Rs.10,000/- for every Rs. 1 lakh top-up. b) Congenital/Psychiatric cases: Disorders under this category also will be covered. c) Peritoneal Ambulatory dialysis up to Rs 3,500/- per day. d) Robotic Surgery: Covered (on a 50% co-payment basis).
Sum Insured Bifurcation	STAFF MEMBERS	Employee: Faculty/Non teaching/Pensioner - Fellow - Deputation -----Rs 2 lakhs for each family Students: Rs. 1 lakh per student. Day Care Treatment: Coverage of day care must include the treatment or diseases mentioned in Annexure III from the day one of the date of effect of the policy. In addition to the said list, the Insurer may also include other treatment under the Day Care treatment as per their standard list. *Basic Sum Insured: Basic sum insured for regular employee is Rs. 2 lakh per family and Rs. 1 lakh per registered student under the combined policy. Top-up Sum Insured: Under the policy, employees and students may opt for top-up in the blocks of Rs. 1 lakh up to 12 lakhs over and above the basic sum insured. In case of retiree, institute fellow, employee under deputation and lien may opt for sum insured from minimum Rs. 2 Lakhs and maximum of 14 Lakhs. Floater Sum Insured: In case of employee and retirees, the total sum insurance (basic + top-up) of an individual family shall be utilized on family floater basis. This means the sum insured is available for any one or all members of the employee's or retirees's family.
	STUDENTS	Employee: Faculty/Non teaching/Pensioner - Fellow - Deputation -----Rs 2 lakhs for each family Students: Rs. 1 lakh per student. Day Care Treatment: Coverage of day care must include the treatment or diseases mentioned in Annexure III from the day one of the date of effect of the policy. In addition to the said list, the Insurer may also include other treatment under the Day Care treatment as per their standard list. *Basic Sum Insured: Basic sum insured for regular employee is Rs. 2 lakh per family and Rs. 1 lakh per registered student under the combined policy. Top-up Sum Insured: Under the policy, employees and students may opt for top-up in the blocks of Rs. 1 lakh up to 12 lakhs over and above the basic sum insured. In case of retiree, institute fellow, employee under deputation and lien may opt for sum insured from minimum Rs. 2 Lakhs and maximum of 14 Lakhs. Floater Sum Insured: In case of employee and retirees, the total sum insurance (basic + top-up) of an individual family shall be utilized on family floater basis. This means the sum insured is available for any one or all members of the employee's or retirees's family.
Insurer's Liability	STAFF MEMBERS	The Insurer's liability in respect of all claims admitted during the period of Insurance shall not exceed the sum insured, unless otherwise decided by the competent authority for utilization of Corporate Buffer.
	STUDENTS	The Insurer's liability in respect of all claims admitted during the period of Insurance shall not exceed the sum insured, unless otherwise decided by the competent authority for utilization of Corporate Buffer.
Other Exclusions	STAFF MEMBERS	Other exclusions as per expiring policy.
	STUDENTS	Other exclusions as per expiring policy.

General Conditions

INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI	
STAFF MEMBERS	
Day One Cover	*Inclusion of new employee : Subject to payment of pro-rata premium, coverage shall be provided to the newly appointed employees and their families. The terms and conditions for these members shall be the same with other members of the policy. The premium for a new employee shall be fixed at an average rate. The details of

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	GMIS beneficiaries sent by Insured should be updated under the existing policy within a week from the date of receipt of intimation. The insurer should immediately inform the insured about the completion of task of updation. In the eventuality of any dispute arising out of non-compliance with the intimation the matter should be resolved between insurer and TPA without any interference by IIT Guwahati.
2	Newly Acquired Dependant Mid-term inclusion of Existing Employee's newly acquired dependent (Newly Married Spouse/ New born baby/ newly adopted child), to be declared within 30 days of succeeding month subject to maintenance of sufficient CD Balance.
3	Deletion of employee / Member from Group In case of deletion of member from the Group the cover will be suspended from the date of separation from the group. Refund of premium on account of deletion will be allowed from the date of separation provided the declaration of the same is submitted to us latest within 30 days of succeeding month. Succeeding Month days of succeeding month(default)/ 30 days of separation from the group; failing which refund will be calculated from the date of submission of declaration to ITGI.
4	Package Treatment In case of package treatment where individual bifurcation of room rent, medicines, operation theater expenses, doctor's consultation charges etc are not available, then the package charges shall be proportionately linked to the entitled room rent of the insured person under the Policy.
5	Intimation of claims As per Expiring Policy
6	Submission of Claim Documents As per expiring
7	Duplicate Member/Employee Restriction No Employee / Family member should be covered twice in the policy.
8	Member ID Card Type Physical
9	Mid term Change in SI Mid-term change in SI is not allowed
10	Claim Type Cashless and Reimbursement



ADDITIONAL GENERAL CONDITIONS

11	Other Terms & Condition AS per expiring policy with revised maternity coverage (from existing Rs 50,000 to Rs 75,000) and robotic surgery (on a 50% co-payment basis).
STUDENTS	

<p>The coverage is as per policy wordings / endorsements / clauses attached. Please go through the Group Medishield Insurance Policy and in case of any discrepancy, please inform us. Policy is cancelled ab-initio in case of Cheque Dishonor. In case of exports of services invoice shall carry an endorsement "Supply meant for export on payment of integrated tax"</p>	
<p>1)"Policy Issuing Office: Delhi". 2)"Consolidated Stamp Duty deposited as per the order of Government of National Capital Territory of Delhi"</p>	
<p>Toll Free: 1800-103-5499 (24 hours all days) or SMS "CLAIMS" to 56161.</p>	<p>For IFFCO-Tokio General Insurance Company Limited</p>  <p>Authorised Signatory Subrata Mondal</p>

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Contact Details

IFFCO TOKIO General Insurance Company Limited



Name of Co-ordinator	Mr Gunamani Das
Contact No	9954074275
Email ID	medsec@iitg.ac.in

Third Party Administrator : Raksha TPA Pvt. Ltd.

Toll Free (24 hours)	1800-220-456
Email ID	enrollmentfbd@rakshatpa.com,kunal@rakshata.com,+
Address	

Details of Intermediary/ Agent

Name	A5- DIRECT SBU CODE
Contact No	0000000001
Email Id	testuser@iffcotokio.co.in

Settlement Type : Cash Less

Health ID Cards : Non-Photo Id

Claim payment to be made to : Employer

Industry Type : Educational Institutes

Expiring Policy Details:

Policy Number	H0128614
Start Date	01/08/2019
End Date	31/07/2020

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Group MediShield Policy Wording

This POLICY is evidence of the contract between YOU and US. The proposal along with any written statement(s), declaration(s) of YOURS in the proposal and this POLICY forms part of this contract.

This POLICY witnessed that in consideration of YOUR having paid the premium for the period stated in the schedule or for any further period for which WE may accept the payment for renewal of this policy, WE will insure the Insured Person(s) and accordingly. WE will pay to YOU or to insured person(s) or their legal representatives, as the case may be in respect of events occurring during the period of insurance in the manner and to the extent set-forth in the policy including endorsements provided that all the terms, conditions, provisions, and exceptions of this policy in so far as they relate to anything to be done or complied with by YOU and/or Insured Person(s) have been met.

The Schedule shall form part of this POLICY and the term 'POLICY' whenever used shall be read as including the Schedule.

Any word or expression to which a specific meaning has been attached in any part of this POLICY or of Schedule shall bear such meaning whenever it may appear.

THE POLICY is based on information which have been given to US about Insured Person(s) pertaining to risk insured under the policy and the truth of this information shall be condition precedent to YOUR or the Insured Person(s) right to recover under this POLICY.

Definition of Words

1. **Any One illness** It 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 may have been taken.
2. **Cashless facility** means a facility extended by the insurer to the insured where the payments, of the costs of treatment undergone by the insured in accordance with the policy terms and conditions, are directly made to the network provider by the insurer to the extent pre-authorization approved.
3. **Condition Precedent** shall mean a policy term or condition upon which the Insurer's liability under the policy is conditional upon.
4. **Congenital Anomaly**-- Congenital Anomaly refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.
 - a. **Internal Congenital Anomaly:** Anomaly which is not in the visible and accessible parts of the body
 - b. **External Congenital Anomaly:** Anomaly which is in the visible and accessible parts of the body
5. **Contribution** is essentially the right of an insurer to call upon other insurers, liable to the same insured, to share the cost of an indemnity claim on a ratable proportion of the Sum Insured.
6. **Domiciliary Hospitalization** means Medical treatment for an illness/ disease/ injury which in the normal course would require care and treatment at a *hospital*, but is actually taken while confined at home under any of the following circumstances:
 - a. Condition of the patient is such that he/she is not in a condition to be removed to a hospital or
 - b. The patient takes treatment at home on account of non availability of room in hospital.
7. **Emergency Care** means management for a severe illness or injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a *medical practitioner* to prevent death or serious long term impairment of the insured person's health.
8. **Grace Period** means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of *Pre-existing diseases*. Coverage is not available for the period for which no premium is received.
9. **Hospital** 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.

***Following are the enactments specified under the Schedule of section 56 of clinical Establishments (Registration and Regulation) Act, 2010 as of October 2013. Please refer to the act for amendments, if any.**

1. The Andhra Pradesh Private Medical Care Establishments (Registration and Regulation) Act, 2002.
2. The Bombay Nursing Homes Registration Act, 1949.
3. The Delhi Nursing Homes Registration Act, 1953.
4. The Madhya Pradesh Upcharya Griha Tatha Rujopchar Sanbaddu Sthapamaue (Ragistrikaran TathaAnugyapan) Adhinyam, 1973.
5. The Manipur Homes and Clinics Registration Act, 1992.
6. The Nagaland Health Care Establishments Act, 1997.
7. The Orissa Clinical Establishments (Control and Regulation) Act, 1990.
8. The Punjab State Nursing Home Registration Act, 1991.
9. The West Bengal Clinical Establishments Act, 1950.

10. **Hospitalization** means admission in a Hospital for a minimum period of 24 hours Inpatient Care consecutive hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

11. **Illness** means a sickness or pathological condition leading to the impairment of normal physiological function which manifests itself during the Policy Period and requires medical treatment.

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12. **Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.
13. **Inpatient Care** means treatment for which the insured person has to stay in a *hospital* for more than 24 hours for a covered event.
14. **Insured Person:** The person named as insured person(s) in the schedule lodged with US by YOU.
15. **Intensive Care Unit** means an identified section, ward or wing of a *hospital* which is under the constant supervision of a dedicated *medical practitioner(s)*, and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
16. **Maternity Expenses** shall include
 - a. medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization).
 - b. expenses towards lawful medical termination of pregnancy during the Policy period.
17. **Medical Advice** Any consultation or advice from a Medical Practitioner including the issue of any prescription or repeat prescription.
18. **Medical Practitioner** is a person who holds valid registration from the Medical Council of any State or Medical Council of India or Council of Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of license. The registered Medical Practitioner should not be the Insured or close family member.
19. **Network Provider** means hospitals or health care providers enlisted by an insurer or by a TPA and insurer together to provide medical services to an insured on payment by a cashless facility.
20. **Non- Network** means any *hospital*, day care centre or other provider that is not part of the *network*.
21. **Notification of Claim** is the process of notifying a claim to the Insurer or TPA by specifying the timelines as well as the address / telephone number to which it should be notified.
22. **Period of Insurance:** It means the duration of this policy as shown in the Schedule.
23. **Policy** It means the policy booklet, the Schedule and any applicable endorsement or memoranda. The policy contains details of the extent of cover available to Insured person (s), what is excluded from the cover and the conditions on which the policy is issued.
24. **Portability--** Portability means transfer by an individual health insurance policy holder (including family cover) of the credit gained by the insured for pre-existing conditions and time bound exclusions if he/she chooses to switch from one insurer to another.
25. **Post Hospitalization Medical Expenses** means medical expenses incurred immediately after the Insured Person is discharged, provided that
 - a. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
 - b. The In-patient Hospitalization claim for such Hospitalization is admissible by the Insurance Company.
26. **Pre-existing Disease** Any condition, ailment or injury ,or related condition (s) for which you had signs or symptoms, and / or were diagnosed, and / or received medical advice / treatment within 48 months to prior to the first policy issued by the insurer.
27. **Pre-Hospitalization Medical Expenses** means medical expenses incurred immediately before the Insured Person is Hospitalized, provided that
 - a. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
 - b. The In-patient Hospitalization claim for such Hospitalization is admissible by us
28. **Proposal** It means any signed proposal by filing up the questionnaires and declarations, written statements and any information in addition thereto supplied to US by YOU.
29. **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.
30. **Reasonable and Customary Charges** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.
31. **Renewal** defines the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of all waiting periods.
32. **Schedule** It means latest Schedule issued by US as part of the policy. It provides details of the policy of Insured person(s) which are in force and the level of cover Insured Person(s) have.
33. **Subrogation** shall mean the right of the insurer to assume the rights of the insured person to recover expenses paid out under the policy that may be recovered from any other source.
34. **Sum Insured** It means the monetary amount shown against Insured Person.
35. **Surgery/Surgical Procedure** It 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*.
36. **Terrorism / Terrorist Incident** Means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or the commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered terrorist activity.
Terrorism shall also include any act, which is verified or recognized by the relevant Government as an act of terrorism.
37. **Third Party Administrator** means any person who is licensed under the IRDA (Third Party Administrators - Health Services) Regulations,2001

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by the Authority, and is engaged, for a fee or remuneration by an insurance company, for the purposes of providing health services.



- 38. **WE/OUR/US:** It means IFFCO-TOKIO GENERAL INSURANCE COMPANY LIMITED.
- 39. **YOU/YOUR:** It means the person(s)/the company/the entity named as Insured in the Schedule.
- 40. **Coverage**

WHAT IS COVERED	WHAT IS NOT COVERED
<p>If the Insured Person sustains injury or contracts any disease and upon advice of Medical Practitioner, he/she has to incur Hospitalization Expenses then WE will pay for the following in Hospitalization Expenses:</p> <ol style="list-style-type: none"> 1. Room, Boarding Expenses as provided by the Hospital/Nursing Home. 2. Nursing Expense. 3. Medical Practitioner/Anesthetist, Consultant fees 4. Expense on Anesthesia, Blood, Oxygen, operation Theatre charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and X-ray, Dialysis, Chemotherapy, Radiotherapy, Cost of pacemaker, Artificial Limbs, Cost of organs and similar expenses. 5. Expenses on Vitamins and Tonics forming part of treatment as certified by the attending Medical Practitioner. 6. WE will also pay for those of above relevant expenses in Domiciliary Hospitalization. 7. Pre-Hospitalization and Post Hospitalization expenses for 30 and 60 days respectively as defined under the Policy will also be reimbursed along with the aforesaid Hospitalization expenses subject to the overall Sum Insured limit of the Insured Person. 	<p>WE will not pay for:</p> <ol style="list-style-type: none"> 1. Any expense incurred for treatment of any pre-existing condition. 2. Any Expense on Hospitalization /Domiciliary Hospitalization for any diseases other than those stated in Clause 3 of "What is not covered" during first 30 days of commencement of this Insurance cover. This exclusion shall not however apply if in the opinion of Panel of Medical Practitioners constituted by US, the Insured Person could not have known of the existence of the Disease or any symptoms or complaints thereof at the time of making the proposal for Insurance to US. This exclusion shall not, however, apply in case of the Insured Person having been covered under this Scheme or Group Insurance Scheme with any of Indian Insurance Companies for a continuous period of preceding 12 months without any break. 3. In the first year of operation of Insurance Cover on treatment of disease such as: <ul style="list-style-type: none"> • Cataract, Benign, Prostatic Hyperthropy, Hysterectomy for Menorrhagia or Fibromyoma • Hernia, Hydrocele, Congenital Internal Disease. • Fistula in anus, Piles, Sinusitis and related disorders. If the above mentioned diseases are pre-existing at the time of proposal, they will not be covered even during subsequent period of renewal too. 4. Circumcision except for disease not excluded here or Injury, Vaccination or Inoculation or change of life or cosmetic or aesthetic treatment of any description, plastic surgery except for relating to treatment of injury or illness. 5. Cost of Spectacles and contact lens, hearing aids. 6. Convalescence, General Debility, Run down condition or rest cure, congenital External Disease or defects or anomalies, sterility, venereal disease, intentional self injury and use of Intoxicating drugs /alcohols. 7. Any Expense of any treatment related to Human T.Cell Lymphotropic viruses Types III (11TLB-III) or Lymphadinspathy Associated viruses (LAV) or the Mutant derivatives or Variations Deficiency Syndrome or any syndrome or a Condition of a similar kind referred to as AIDS. 8. Expenses on Diagnostic, X-Ray, or Laboratory examinations unless related to the treatment of sickness or injury falling within ambit of Hospitalization or Domiciliary Hospitalization. 9. (a) Expenses on treatment as a consequence of pregnancy childbirth including caesarean section. (This exclusion will stand deleted where policy is extended to cover Maternity Benefits). (b) Voluntary Medical termination of pregnancy during the first 12 (twelve) weeks from the date of conception 10. Any Expenses on treatment of Insured person as outpatient in the Hospital. 11. Any Expenses on Naturopathy 12. Any Expenses under Domiciliary Hospitalization for <ul style="list-style-type: none"> • Pre and Post Hospitalization treatment • Treatment of following diseases: <ol style="list-style-type: none"> I. Asthma II. Bronchitis III. Chronic Nephritis and Nephritic Syndrome IV. Diarrhoea and all type of Dysenteries including Gastro-enteritis V. Diabetes Mellitus and Insipidus VI. Epilepsy VII. Hypertension VIII. Influenza, Cough and Cold IX. All types of Psychiatric or Psychosomatic Disorders X. Pyrexia of unknown Origin for less than 20 days XI. Tonsillitis and Upper Respiratory Tract infection including Laryngitis and Pharyngitis XII. Arthritis, Gout and Rheumatism XIII. Dental Treatment or Surgery 13. Terrorism / Terrorist Incident of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

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General Conditions



1. **Conditions Precedent**- Where this Policy requires You/your family member(s) named in the Schedule to do or not to do something, then the complete satisfaction of that requirement by You or someone claiming on Your behalf is a precondition to any obligation We have under this Policy. If You or someone claiming on Your behalf fails to completely satisfy that requirement, then We may refuse to consider Your claim. You/your family member(s) named in the schedule will cooperate with Us at all times.
2. **Reasonable Precautions** YOU/Insured Person shall take all reasonable precautions to prevent injury, illness, disease in order to minimize claims.
3. **Notice** YOU/Insured Person will give every notice and communication in writing to our office through which this insurance is affected.
4. **Disclosure to information norm:** The Policy shall be void and all premium paid hereon shall be forfeited to the Company in the event of misrepresentation, non-description or non-disclosure of any material fact.
5. **Changes in Circumstances** YOU must inform US, as soon as reasonably possible of any change in information YOU have provided to US about Insured person(s) which may affect the Insurance cover provided e.g. duty, business, occupation..Claim Procedure and Requirements
6. **Claim Procedure and Requirements**
Notification of Claim: An event which might become a claim under the policy must be reported to US as soon as possible, but not later than 7 days from the date of Hospitalization. A written statement of the claim will be required and a claim form will be provided and the claim must be filed within 30 days from the date of discharge from the Hospital except for in extreme cases of hardship where it is proved to our satisfaction that under the circumstances, in which YOU, the Insured Person or his/her personal representative were placed, it was not possible for any one of YOU to give notice or file claim within the prescribed time limit. The Insured Person must give all bills, receipts, certificates, information and evidences from a Medical Attendant or otherwise required by US in the manner and form as WE may prescribe. In such claims our representative shall be allowed to carry out examination and obtain information in case of alleged injury or disease requiring Hospitalization if and when we may reasonably require.
7. **Fraud:** If a claim is fraudulent in any respect or supported by any fraudulent statement or device with or without YOUR knowledge or that of Insured Person, all benefit(s) under this Policy shall be forfeited. **Contribution** is essentially the right of an insurer to call upon other insurers, liable to the same insured, to share the cost of an indemnity claim on a ratable proportion.
8. **Contribution** is essentially the right of an insurer to call upon other insurers, liable to the same insured, to share the cost of an indemnity claim on a ratable proportion.
9. **Renewal** The renewal defines the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of all waiting periods.
10. **Cancellation** WE may cancel this policy by sending 30(Thirty) days notice by registered post to YOUR last known address. YOU will then be entitled to a pro-rata refund of premium for unexpired period of this policy in respect of such insured person(s) in respect whom no claim has arisen.
YOU may cancel the policy by sending written notice to US under Regd. Post WE will then allow a refund on following scale, except for those Insured Person(s) where claim has been preferred on US under the current policy:

Period of Cover up to	Refund of Annual Premium rate (%)
1 Month	75%
3 Month	50%
6 Month	25%
Exceeding Six Months	NIL
11. WE will not be bound to take notice or be affected by any notice of any trust, charge, lien, assignment or other dealings with or relating to this policy. YOUR receipt or receipt of Insured Person shall in all cases be an effective discharge to US.
12. **Arbitration** Should any dispute arise between US and YOU on quantum of Amount payable (liability being admitted by US), such dispute will be referred to Arbitrator to be appointed in accordance with statutory provisions of the country in force at that time. Further, if when any dispute is referable or referred to arbitration, the making of an award by arbitration, shall be a condition precedent to any right of action by YOU against US.
13. **Disclaimer Clause** If WE shall disclaim our liability in any claim and such claim shall not have been made subject matter of suit in a court of law within 12(twelve) months from date of disclaimer, then the claim shall for all purpose be deemed to have been abandoned and shall not thereafter be recoverable under this Policy.
14. No sum payable under this policy shall carry any interest/ penalty.
15. The geographical scope of this policy will be India.
16. **Maternity Expenses Benefit** (Wherever applicable) This is an optional cover, which can be obtained on payment of additional premium for all the Insured Persons under the Policy.
 - a. Option for Maternity Benefits has to be exercised at the inception of the policy period and no refund is allowable in case of Insured's cancellation of this option during currency of the policy.
 - b. The maximum benefit allowable under this clause will be up to Rs.50,000/- or 20% of the Sum Insured opted by the member of the group whichever is lower.
 - c. **Special conditions applicable to Maternity Expenses Benefit Extension**
 1. These benefits are admissible only if the expenses are incurred in Hospital/Nursing Home as in-patients in India.
 2. A waiting period of 9 months is applicable for payment of any claim relating to normal delivery or caesarean section or abdominal operation for extra uterine Pregnancy. The waiting period may be relaxed only in case of delivery, miscarriage or abortion induced

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by accident or other medical emergency.

3. Claim in respect of only first two children and/or operations associated therewith will be considered in respect of any one Insured Person covered under the Policy or any renewal thereof. Those Insured Persons who are already having two or more living children will not be eligible for this benefit.



4. Pre-natal and post-natal expenses are not covered unless admitted in Hospital/Nursing Home and treatment is taken there.

17. **Free Look Period:** The free look period shall be applicable at the inception of the policy and

- i. The insured will be allowed a period of at least 15 days from the date of receipt of the Policy to review the terms and conditions of the Policy and to return the same if not acceptable;
- ii. If the insured has not made any claim during the free look period, the insured shall be entitled to-
 1. A refund of the premium paid less any expenses incurred by the insurer on medical examination of the insured persons and the stamp duty charges or;
 2. Where the risk has already commenced and the option of return of the policy is exercised by the policyholder, a deduction towards the proportionate risk premium for period on cover or
 3. Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.

18. **Alteration of Policy Conditions:** The policy terms and conditions may undergo alteration as per the IRDA Health Regulation. However the same shall be duly notified to you at least three months prior to the date when such alteration or revision comes into effect by registered post at your last declared correspondence address. The timeliness for revision in terms and rates shall be as per the IRDA Health Regulation.

19. **Withdrawal of Policy:** This product may be withdrawn with the prior approval of the Authority and information of withdrawal shall be given to you in advance as per the IRDA guidelines with details of options provided by us. If we do not receive your response on the intimation of withdrawal, the existing product shall be withdrawn on the renewal date and you shall have to take a new policy available with us, subject to portability conditions.

20. Portability

a. Portability shall be granted only to the Insured Person/s who is/are presently covered and were continuously covered without any lapses under any other similar health insurance plan with equivalent Deductible with an Indian Non life/Health insurer in the past.

b. In case portability is granted by us the proviso's regarding the waiting periods specified under Exclusion Nos 1,2 and 3 of the Policy stand modified as under in respect of such insured persons granted with portability.

- i. The waiting periods shall be reduced by the number of continuous preceding years of coverage of the Insured Person under the previous health insurance policy/Policies; AND
- ii. If the proposed Sum Insured for a proposed Insured Person is more than the Sum Insured applicable under the previous health insurance policy, then the reduced waiting period shall apply only to the extent of the Sum Insured under the previous health insurance policy.
- iii. The reduction in the waiting period specified above shall be only if We have received the database and claim history from the previous Indian insurance company;
- iv. We shall consider only completed years of coverage for waiver of waiting periods. Policy extensions if any sought during or for the purpose of porting insurance policy shall not be considered for waiting period waiver

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DAY CARE PROCEDURES



ENT : Operation of the ear	26 Procedures for pterygium
1 Stapedotomy or Stapedectomy	27 Removal of a foreign body from the lens of the eye
2 Myringoplasty (Type -I Tympanoplasty)	28 Removal of a foreign body from the posterior chamber of the eye
3 Tympanoplasty (closure of an eardrum perforation)	29 Removal of a foreign body from the orbit and eyeball
4 Reconstruction and other Procedures of the auditory ossicles	30 Operation of cataract
5 Myringotomy	31 Chalazion removal
6 Removal of a tympanic drain	32 Glaucoma Surgery
7 Mastoidectomy	33 Surgery for Retinal detachment
8 Reconstruction of the middle ear	Procedures on the skin & subcutaneous tissues
9 Fenestration of the inner ear	34 Incision of a pilonidal sinus
10 Incision (opening) and destruction (elimination) of the inner ear	35 Other incisions of the skin and subcutaneous tissues
ENT: Procedures on the nose & the nasal sinuses	36 Surgical wound toilet (wound debridement)
11 Excision and destruction of diseased tissue of the nose	37 Local excision or destruction of diseased tissue of the skin and subcutaneous tissues
12 Procedures on the turbinates (nasal concha)	38 Simple restoration of surface continuity of the skin and subcutaneous tissues
13 Nasal sinus aspiration	39 Free skin transplantation, donor site
ENT: Procedures on the tonsils & adenoids	40 Free skin transplantation, recipient site
14 Transoral incision and drainage of a pharyngeal abscess	41 Revision of skin plasty
15 Tonsillectomy and / or adenoidectomy	42 Restoration and reconstruction of the skin and subcutaneous tissues
16 Excision and destruction of a lingual tonsil	43 Chemosurgery to the skin
17 Quinsy drainage	44 Excision of Granuloma
OPHTHALMOLOGY: Procedures on the eyes	45 Incision and drainage of abscess
18 Incision of tear glands	Procedures on the tongue
19 Excision and destruction of diseased tissue of the eyelid	46 Incision, excision and destruction of diseased tissue of the tongue
20 Procedures on the canthus and epicanthus	47 Partial glossectomy
21 Corrective surgery for entropion and ectropion	48 Glossectomy
22 Corrective surgery for blepharoptosis	49 Reconstruction of the tongue
23 Removal of a foreign body from the conjunctiva	Procedures on the salivary glands & salivary ducts
24 Removal of a foreign body from the cornea	50 Incision and lancing of a salivary
25 Incision of the cornea	

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51 Excision of diseased tissue of a salivary gland and a salivary duct	82 Sclerotherapy
52 Resection of a salivary gland	83 Therapeutic Ascitic Tapping
53 Reconstruction of a salivary gland and a salivary duct	84 Endoscopic ligation /banding
Procedures on the mouth & face	85 Dilatation of digestive tract strictures
54 External incision and drainage in the region of the mouth, jaw and face	86 Endoscopic ultrasonography and biopsy
55 Incision of the hard and soft palate	Replacement of Gastrostomy tube
56 Excision and destruction of diseased hard and soft palate	87 Endoscopic decompression of colon
57 Incision, excision and destruction in the mouth	88 Therapeutic ERCP
58 Plastic surgery to the floor of the mouth	89 Nissen fundoplication for Hiatus
59 Palatoplasty	Hernia /Gastro esophageal reflux Disease
Trauma surgery and orthopaedics	90 Endoscopic Gastrostomy
60 Incision on bone, septic and aseptic	91 Laparoscopic procedures e.g. colecystectomy, appendicectomy etc.
61 Closed reduction on fracture, luxation or epiphyseolysis with osteosynthesis	92 Endoscopic Drainage of Pseudopancreatic cyst
62 Suture and other Procedures on tendons and tendon sheath	93 Hernia Repair (Herniotomy / hernioraphy / hernioplasty)
63 Reduction of dislocation under GA	Procedures on the female sexual organs
64 Arthroscopic knee aspiration	94 Incision of the ovary
65 Aspiration of hematoma	95 Insufflation of the Fallopien tubes
66 Excision of dupuytren's contracture	96 Dilatation of the cervical canal
67 Carpal tunnel decompression	97 Conisation of the uterine cervix
68 Surgery for ligament tear	98 Incision of the uterus (hysterotomy)
69 Surgery for meniscus tear	99 Therapeutic curettage
70 Surgery for hemoarthrosis/pyoarthrosis	100 Culdotomy
71 Removal of fracture pins/nails	101 Local excision and destruction of diseased tissue of vagina and Pouch of Douglas
72 Removal of metal wire	102 Procedures on Bartholin's glands (cyst)
73 Joint Aspiration - Diagnostic / therapeutic	103 Endoscopic polypectomy
Procedures on the breast	104 Myomectomy , hysteroscopic or laparoscopic biopsy or removal
74 Incision of the breast	Procedures on the prostate & seminal vesicles
75 Procedures on the nipple	105 Incision of the prostate
76 Excision of breast lump /Fibro adenoma	106 Transurethral excision and destruction of prostate tissue
Procedures on the digestive tract	107 Open surgical excision and destruction of prostate tissue
77 Incision and excision of tissue in the perianal region	
78 Surgical treatment of anal fistulas	
79 Surgical treatment of haemorrhoids	
80 Division of the anal sphincter (sphincterotomy)	
81 Ultrasound guided aspirations	
Procedures on the digestive tract	

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	136 Tran urethral resection of bladder tumor
108 Radical prostatovesiculectomy	
109 Incision and excision of periprostatic tissue	137 Suprapubic cystostomy
Procedures on the scrotum & tunica vaginalis testis	Procedures of Respiratory System
110 Incision of the scrotum and tunica vaginalis testis	138 Brochosopic treatment of bleeding lesion
111 Operation on a testicular hydrocele	139 Brochosopic treatment of fistula / stenting
112 Excision and destruction of diseased scrotal tissue	140 Bronchoalveolar lavage & biopsy
113 Plastic reconstruction of the scrotum and tunica vaginalis testis	141 Direct Laryngoscopy with biopsy
Procedures on the testes	142 Therapeutic Pleural Tapping
114 Incision of the testes	Procedures of Heart and Blood vessels
115 Excision and destruction of diseased tissue of the testes	143 Coronary angiography (CAG)
116 Orchidectomy- Unilateral / Bilateral	144 Coronary Angioplasty (PTCA)
117 Orchidopexy	145 Insertion of filter in inferior vena cava
118 Abdominal exploration in cryptorchidism	146 TIPS procedure for portal hypertension
119 Surgical repositioning of an abdominal testis	147 Blood transfusion for recipient
120 Reconstruction of the testis	148 Therapeutic Phlebotomy
121 Implantation, exchange and removal of a testicular prosthesis	149 Pericardiocentesis
Procedures on the spermatic cord, epididymis and Ductus Deferans	150 Insertion of gel foam in artery or vein
122 Surgical treatment of a varicocele and hydrocele of spermatic cord	151 Carotid angioplasty
123 Excision in the area of the epididymis	152 Renal angioplasty
124 Epididymectomy	153 Varicose vein stripping or ligation
125 Reconstruction of the spermatic cord	OTHER Procedures
126 Reconstruction of the ductus deferens and epididymis	154 Radiotherapy for Cancer
Procedures on the penis	155 Cancer Chemotherapy
127 Procedures on the foreskin	156 True cut Biopsy
128 Local excision and destruction of diseased tissue of the penis	157 Endoscopic Foreign Body Removal
129 Amputation of the penis	158 Vaccination / Inoculation - Post Dog bite or Snake bite
130 Plastic reconstruction of the penis	159 Endoscopic placement/removal of stents
Procedures on the urinary system	160 Tumor embolisation
131 Cystoscopical removal of stones	161 Aspiration of an internal abscess under ultrasound guidance
132 Lithotripsy	
133 Haemodialysis	
134 PCNS (Percutaneous nephrostomy)	
135 PCNL (Percutanous Nephro-Lithotomy)	

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LIST OF NON PAYABLE ITEMS



TOILETRIES/COSMETICS/ PERSONAL COMFORT OR CONVENIENCE ITEMS Raho

1 HAIR REMOVAL CREAM	41 GUEST SERVICES
2 BABY CHARGES (UNLESS SPECIFIED/INDICATED)	42 BED PAN
3 BABY FOOD	43 BED UNDER PAD CHARGES
4 BABY UTILITES CHARGES	44 CAMERA COVER
5 BABY SET	45 CLINIPLAST
6 BABY BOTTLES	46 CREPE BANDAGE
7 BRUSH	47 CURAPORE
8 COSY TOWEL / TOWEL	48 DIAPER OF ANY TYPE
9 HAND WASH	49 DVD, CD CHARGES
10 MOISTURISER PASTE BRUSH	50 EYELET COLLAR
11 POWDER	51 FACE MASK
12 RAZOR	52 FLEXI MASK
13 SHOE COVER	53 GAUSE SOFT
14 BEAUTY SERVICES	54 GAUZE
15 BELTS/ BRACES	55 HAND HOLDER
16 BUDS	56 HANSAPLAST/ADHESIVE BANDAGES
17 BARBER CHARGES	57 INFANT FOOD
18 CAPS	58 SLINGS
19 COLD PACK/HOT PACK	ITEMS SPECIFIC ALL Y EXCLUDED IN THE POLICIES
20 CARRY BAGS	59 WEIGHT CONTROL PROGRAMS/ SUPPLIES/ SERVICES
21 CRADLE CHARGES	60 COST OF SPECTACLES/ CONTACT LENSES/ HEARING AIDS ETC
22 COMB	61 DENTAL TREATMENT EXPENSES THAT DO NOT REQUIRE HOSPITALISATION
23 DISPOSABLES RAZORS CHARGES (for site preparations)	62 HORMONE REPLACEMENT THERAPY
24 EAU-DE-COLOGNE / ROOM FRESHNERS	63 HOME VISIT CHARGES
25 EYE PAD	64 INFERTILITY/ SUBFERTILITY/ ASSISTED CONCEPTION PROCEDURE
26 EYE SHIELD	65 OBESITY (INCLUDING MORBID OBESITY) TREATMENT IF EXCLUDED IN POLICY
27 EMAIL / INTERNET CHARGES	66 PSYCHIATRIC & PSYCHOSOMATIC DISORDERS Exclusion in policy unless
28 FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL)	67 CORRECTIVE SURGERY FOR REFRACTIVE ERROR
29 FOOT COVER	68 TREATMENT OF SEXUALLY TRANSMITTED DISEASES
30 GOWN	
31 LEGGINGS	
32 LAUNDRY CHARGES	
33 MINERAL WATER	
34 OIL CHARGES	
35 SANITARY PAD	
36 SLIPPERS	
37 TELEPHONE CHARGES	
38 TISSUE PAPER	
39 TOOTH PASTE	
40 TOOTH BRUSH	

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69 DONOR SCREENING CHARGES	95 URINE CONTAINER
70 ADMISSION/REGISTRATION CHARGES	ELEMENTS OF ROOM CHARGE
71 HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE	96 LUXURY TAX
72 EXPENSES FOR INVESTIGATION/ TREATMENT IRRELEVANT TO THE DISEASE FOR WHICH ADMITTED OR DIAGNOSED	97 HVAC Part of room charge not
73 ANY EXPENSES WHEN THE PATIENT IS DIAGNOSED WITH RETRO VIRUS + OR SUFFERING FROM /HIV/ AIDS ETC IS DETECTED/ DIRECTLY OR INDIRECTLY	98 HOUSE KEEPING CHARGES
74 STEM CELL IMPLANTATION/ SURGERY and storage	99 SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED
ITEMS WHICH FORM PART OF HOSPITAL SERVICES WHERE SEPARATE CONSUMABLES ARE NOT PAYABLE BUT THE SERVICE IS	100 TELEVISION & AIR CONDITIONER CHARGES
75 WARD AND THEATRE BOOKING CHARGES	101 SURCHARGES
76 ARTHROSCOPY & ENDOSCOPY INSTRUMENTS	102 ATTENDANT CHARGES
77 MICROSCOPE COVER	103 IM IV INJECTION CHARGES
78 SURGICAL BLADES, HARMONIC SCALPEL, SHAVER	104 CLEAN SHEET
79 SURGICAL DRILL	105 EXTRA DIET OF PATIENT
80 EYE KIT	106 BLANKET/WARMER BLANKET ADMINISTRATIVE OR NON-MEDICAL CHARGES
81 EYE DRAPE	107 ADMISSION KIT
82 X-RAY FILM	108 BIRTH CERTIFICATE
83 SPUTUM CUP	109 BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES
84 BOYLES APPARATUS CHARGES	110 CERTIFICATE CHARGES
85 BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES	111 COURIER CHARGES
86 Antiseptic or disinfectant lotions Not Payable	112 CONVENYANCE CHARGES
87 BAND AIDS, BANDAGES, STERILE INJECTIONS, NEEDLES, SYRINGES	113 DIABETIC CHART CHARGES
88 COTTON	114 DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES
89 COTTON BANDAGE	115 DISCHARGE PROCEDURE CHARGES
90 MICROPOROUS/ SURGICAL TAPE	116 DAILY CHART CHARGES
91 BLADE	117 ENTRANCE PASS / VISITORS PASS CHARGES
92 APRON	118 EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE
93 TORNQUET	119 FILE OPENING CHARGES
94 ORTHOBUNDLE, GYNAEC BUNDLE	120 INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)
	121 MEDICAL CERTIFICATE
	122 MAINTENANCE CHARGES
	123 MEDICAL RECORDS
	124 PREPARATION CHARGES
	125 PHOTOCOPIES CHARGES
	126 PATIENT IDENTIFICATION BAND / NAME TAG
	127 WASHING CHARGES
	128 MEDICINE BOX
	129 MORTUARY CHARGES
	130 MEDICO LEGAL CASE CHARGES (MLC CHARGES)

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Muskurate Raho

131 WALKING AIDS CHARGES	166 LOZENGES
132 BIPAP MACHINE	167 MOUTH PAINT
133 COMMODE	168 NEBULISATION KIT If used during
134 CPAP/ CAPD EQUIPMENTS	169 NOVARAPID
135 INFUSION PUMP	170 VOLINI GEL/ ANALGESIC GEL
136 OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)	171 ZYTEE GEL
137 PULSEOXYMETER CHARGES	172 VACCINATION CHARGES Routine Vaccination not
138 SPACER	PART OF HOSPITAL'S OWN COSTS AND NOT PAYABLE
139 SPIROMETRE	173 AHD
140 SP02 PROBE	174 ALCOHOL SWABES
141 NEBULIZER KIT	175 SCRUB SOLUTION/STERILLIUM OTHERS
142 STEAM INHALER	176 VACCINE CHARGES FOR BABY
143 ARMSLING	177 AESTHETIC TREATMENT / SURGERY
144 THERMOMETER	178 TPA CHARGES
145 CERVICAL COLLAR	179 VISCO BELT CHARGES
146 SPLINT	180 ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]
147 DIABETIC FOOT WEAR	181 EXAMINATION GLOVES
148 KNEE BRACES (LONG/ SHORT/ HINGED)	182 KIDNEY TRAY
149 KNEE IMMOBILIZER/SHOULDER IMMOBILIZER	183 MASK
150 LUMBOSACRAL BELT	184 OUNCE GLASS
151 NIMBUS BED OR WATER OR AIR BED CHARGES	185 OUTSTATION CONSULTANT'S/ SURGEON'S FEES
152 AMBULANCE COLLAR	186 OXYGEN MASK
153 AMBULANCE EQUIPMENT	187 PAPER GLOVES
154 MICROSHEILD	188 PELVIC TRACTION BELT
155 ABDOMINAL BINDER ITEMS PAYABLE IF SUPPORTED BY A PRESCRIPTION	189 REFERAL DOCTOR'S FEES
156 BETADINE\ HYDROGEN\ PEROXIDE\ SPIRIT\ DISINFECTANTS ETC	190 ACCU CHECK (Glucometry/ Strips)
157 PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES	191 PAN CAN
158 NUTRITION PLANNING CHARGES	192 SOFNET
159 SUGAR FREE Tablets Payable -Sugar free	193 TROLLY COVER
160 CREAMS POWDERS LOTIONS	194 UROMETER, URINE JUG
161 Digestion gels	195 AMBULANCE
162 ECG ELECTRODES	196 TEGADERM / VASOFIX SAFETY
163 GLOVES Sterilized Gloves	197 URINE BAG
164 HIV KIT	198 SOFTOVAC
165 LISTERINE/ ANTISEPTIC MOUTHWASH	199 STOCKINGS Essential for case like CABG etc. where it should be paid

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