



NATIONAL INSURANCE CO. LTD., PARIVAR MEDICLAIM

Total Solution for your Family's Health

This is a Family Floater Health Insurance Policy wherein entire family are covered under a single Sum Insured.

Who can take this Policy?

- Any Individual residing in India grouped in a family consisting of Self, Spouse & 2 dependant children upto 25 years of age. Parents are not covered.

→ **AGE GROUP** : 3 months to 80 years

→ **SUM INSURED** : ₹. 2 Lacs to ₹. 5 Lacs (in multiples of ₹. 50,000/-)

What does the Policy COVER?

- It covers reimbursement of Hospitalization expenses / Cashless Access Services for illness, diseases contractual or injury sustained by the Insured person, subject to limits as under:-

	Hospitalization Benefits	Limits
A	(i) Room, Boarding expenses including Nursing care, RMO charges, IV fluids / Blood transfusion / Injection charges (ii) If admitted in IC Unit	Upto 1% SI per day
B	Surgeon, Anaesthetist, Medical Practitioner, Consultants Specialist Fees, Nursing Expenses	Actual.
C	Anaesthesia, Blood, Oxygen, OT charges, Surgical appliances (any disposable surgical consumables subject to upper limit of 7% of the SI), Medicines, Drugs, Diagnostic material & X-Ray, Dialysis, Chemotherapy, Radiotherapy, cost of prosthesis artificial limbs, cost of Stent & Implants.	Actual.

(a) Total expenses incurred for anyone illness is limited to 50% of the overall SI per family.

(b) Company's family in respect of all claims admitted during the period of Insurance shall not exceed the SI per family as mentioned in the Schedule.

(c) Hospitalization expenses of person donating an organ during the course of organ transplant will also be payable subject to the sub limits under "C" above applicable to the insured person within the overall SI of the insured person.

What are the Salient features & other benefits under the Policy?

The Policy offers the following benefits.

- **PRE & POST HOSPITALISATION** : Medical Expenses incurred during Period upto 15 days prior & 30 days after Hospitalisation will be considered as part of Claim.
- **PRE-EXISTING DISEASES** : will be covered after 4 continuous CLAIM FREE years.
- **DIABETES & HYPERTENSION** : will be covered from the inception of the policy on payment of additional premium by the Insured.

→ Insured shall bear 10% of any admissible claim if he is suffering from either **DIABETES** or **HYPERTENSION** and 25% of the admissible claim amount in case he is suffering from both. This provision is applicable for Diabetes and/or Hypertension Claims only.

- Relaxation of 24 hrs. Hospitalisation limit has been made more extensive.
- Inclusion of New born baby after 3 months.
- Hospitalisation expenses of person donating Organ during the course of **Organ transplant** are also covered, subject to 50% of overall SI per illness.
- **EASY POLICY** : Entire family covered under a single floater sum insured.
- **Only one policy** per person.
- **TPA SERVICE** : The policy will be serviced by Third Party Administrator.
- Increase in SI exceeding 10% of SI per year will not be permissible.
- No mid-term increase in SI is permissible.

What is the claims procedure?

- **REIMBURSEMENT CLAIMS** : Immediate notice to be given to the TPA along with the following details, Policy No. & Name of Insured Person in respect of whom claim is made.
- Nature of illness/ injury
- Name & Address of the attending Medical Practitioner/ Hospital/ Nursing Home etc. First Claim along with receipted Bill/ Cash Memo, Claim Form & documents as required by the TPA within 30 days from the date of completion of treatment.

→ **CASHLESS ACCESS SERVICE** : Also available under the policy through listed Networked Hospital/ Nursing Home, subject to Pre-authorization by TPA.

What are the exclusions under the Policy?

The following are excluded under the Policy:

- All pre-existing illnesses/ diseases.
- Treatments other than Allopathy.
- Exclusions for certain diseases for the first 2 years of Policy.
- Any Dental treatment or surgery which is a corrective, cosmetic or aesthetic procedure.
- Maternity, Donorship, Hospitalisation, a Health Check-up.
- Nuclear Risk/ War Risks whether war be declared or not.
- Consumption unless necessary for treatment of disease.
- The cost of External equipments, spectacles (contact lenses & hearing aids).
- Consequence, general debility, "Run Down" condition or not cure, congenital external disease or defects or anomalies, sterility, venereal disease, intentional self-injury and use of intoxicating drugs/ alcohol.
- Treatment arising from or traceable to pregnancy, Childbirth, miscarriage, abortion or complications of any of these including caesarian section.

* All claims under this policy shall be payable in Indian Currency only, subject to treatments to be taken in India only.