

## Rules/Regulations & Standard Exclusions List for Health Insurance.

- 1. The cost of Hospitalization due to accident will be covered from Day 1.
- 2. Hospitalization costs of diseases contracted by the insurance person during the first 30 days or hospitalization cost of diseases which is occurred after 30 days, but symptoms of those diseases infected in 1st 30 days will be not covered.
- 3. While taking the policy, the expenses of existing illness/diseases (**Pre-existing Disease**) will be covered **after 24/36/48 months**. (Renewal of policy is necessary for this clause).
- 4. First two years exclusion from the policyholder taking out the policy: Cataract, Hysterectomy for menorrhagia, any joints, knee & hip Replacement, Slip disk, Varicose veins & Varicose Ulcers, Hernia, Hydrocele, Piles, Fistula in Anus, Sinusitis, Internal congenital disease/defects, Peptic / Duodenum, Treatment of Gall Stones, Renal Stone treatment, Prolapsed of indivertible disk etc. (*Final list as per actual policy wordings.*)

## 5. Permanent Exclusion:

Cosmetic Treatments, Dental Treatment (Except Accidental treatment), Treatment Related to HIV/AIDS, Ayurveda and Homeopathy, General Disability, Related Maternity (Except Ectopic Pregnancy), Claims due to any kinds of addiction, Suicide Attempt, Cardiovascular Disease (heart disease), Diabetes (Taking Insulin), Who Gone Through already from Major accident injury, Congenital internal Disease, Mental\Physical Disabilities.



- 6. Admission merely for examination purpose will not accepted Or will not get paid by The Company.
- 7. "While taking policy if person hides any health information, related to weight, operations or any ailment then Co. has right to reject his claim or decline his policy."
- 8. Claim should be registered on insurance Co. **toll free number** within **24 hours** while being admitted into hospital.
- 9. It is necessary to be admitted into hospital for at least 24 hours due to any type of accident or illness. (Except Day Care Treatments).
- 10. Getting insurance policy **does not mean 100% hospitalization cost** will be paid by insurance company. Consumables, Tonics, Hospital Registration, and administration expenses etc. should be paid by the customer.

Special Riders are available to cover these if required.

11. Do not delay premium payments to POLICY GRACE PERIOD.

Any claims which are incurred during grace period and if any disease contracted by the insured person during grace period is not payable even if premium payment is done just before hospitalization in grace period.

12. For any hospitalization or planned treatments and/or for faster claim settlements, ALWAYS give first reference to agreed network hospitals for cashless and other benefits. Please keep list of these hospitals handy with you and your family members.



13. Five important things to be aware of:
a) Get admitted in Network Hospital for cashless claims.
b) Claim Intimation compulsory within 24 hours of hospitalization.
$\ensuremath{c}\xspace$ If admitted to non-network hospital due to emergency, send the claim file within 15days of Discharge.
d) If you are admitted to "Excluded provider Hospital" claim will not be paid. In case of emergency, get the 1 <sup>st</sup> line of treatment, and please get yourself moved to network hospital.
e) Always inform your advisor/insurer at earliest in case of hospitalization.
Our aim is to assist YOU from 'purchase to claims' with unbiased information. We would always try to have Clear answers to your questions before you go ahead insuring you and your family with adequate health cover.
I Read, Understand and Accept above Rules Completely
Note: For more information and legal updates please refer the insurer's website and product POLICY WORDINGS.
Sign:
Name: ()
Date:
9819335593   contactus@capitalup.in  www.capitalup.in