

### **Conditions for NHM employees. Insurance scheme**

- Family Definition: Employee + Spouse + Dependent Children upto 25 Years
- Age Band 0-65 years
- Sum Insured Bands: Uniform SI INR 2 Lakhs / 3 lakhs / 4 lakhs / 5 lakhs
- Policy Type : FLOATER
- Maternity Covered for C- SEC: 1) Metro city – 50,000 & Non-metro – 40,000 And NORMAL: 2) Metro city – 40,000 & Non-metro – 25,000 for first 2 children only.
- Metro, Non – Metro Bifurcation – Metro-Mumbai, Delhi, Kolkata, Chennai, Hyderabad and Bangalore; Non- Metro – Rest of India
- Maternity related complication covered upto SI
- Coverage of 3rd child – Allowed in case of twins in 2nd delivery
- Baby covered from day 1 with individual SI
- Pre Existing diseases covered from day 1
- Waiver of time exclusions for diseases (30 days / 1 year/2 years/3 years/4 years)
- Waiver of 30days waiting period for New Joiners for non-accidental claims
- Coverage of New Joiners - wef Date of Joining
- Room Rent covered up to 1% of SI for Normal and 2% of SI for ICU per day.
- Capping on associated charges linked to Room Rent restrictions – NOT applicable.
- Surgeon, anesthesia, medical practitioner, consultant specialist fees, if it is not part of Final Bill – TO be PAID as per actuals
  
- Cochlear Implant-Covered
- Oral Chemotherapy – Covered
- Coverage of all treatment related to Chemotherapy
- Claim Intimation-Within 14 days
- Ayurvedic, Homeopathic, Unani Treatment (Ayush Treatment) – Covered upto SI if treatment taken in Govt hospital and approved hospitas
- Waiver of 9 months waiting period for maternity benefit
- Corporate floater INR 50 Lacs as per direction of HR.
  
- Pre & Post hospitalization for 30 & 60 days respectively
- Terrorism and pandemics like covid 19 related Hopsitalization-covered
  
- Pre and Post-natal expenses covered from the date of conception till the date of discharge from the hospital after delivery (IPD & OPD both). This is covered within maternity sub-limit.
- Ambulance charges covered up to 1% of SI or INR 2,000 whichever is less per person per

year.

- Ambulance charges will be applicable for transferring patient to Hospital or between Hospitals in the Hospital ambulance or in an ambulance provided by any ambulance service provider only
- External Congenital Diseases are covered under life threatening situations
- Internal Congenital diseases are covered
- Sub-limits – Not Applicable in this policy
- Infertility treatment is not covered under the policy
- Psychiatric and psychosomatic disorders are to be covered

Dental Treatment – Covered for accidental Hospitalization

- Claim Submission-Within 45 days of discharge from Hospital
- Addition on -Prorata basis
- Any other inbuilt restriction under policy-Not applicable