

**Policy Benefit Chart**

**National Law School Of India University**

<b>Policy Number</b>	OG-24-1904-8402-00000094	<b>HAT Reference Number</b>	135842
<b>Risk Inception Date</b>	29-DEC-23	<b>Policy Active With other Insured</b>	1
<b>Risk Expiry Date</b>	28-DEC-24	<b>Policy Active With Bajaj Allianz</b>	0
<b>Floater Details</b>	Not Applicable	<b>Beneficiary Name</b>	UVWF GP V
		<b>Corporate A/C No</b>	

**Outpatient details** No

Relation	Coverage	Health Prime (Group) Rider	Limit on Number of children	Entry age for child coverage	Beneficiary Name	Pre-Existing Diseases	% OF SI	30 Days waiting	1 Year waiting	02 Year waiting	04 Year waiting	Maximum Liability	Liability Limit	Co-Payment clause[%]	Percentage
STUDENT	Covered	Not Covered		0	Insured	Covered		Not Applicable	Not Applicable	Not Applicable	Not Applicable	No		No	

<b>Maternity Benifit</b>	Not Covered	<b>Max liability on maternity exp</b>		<b>9 Months waiting period</b>	Not Applicable
<b>Limit for no of children</b>		<b>Co-payment for maternity</b>		<b>Max for normal delivery</b>	
<b>Max for LSCS</b>		<b>Corporate buffer</b>	Refer Claim condition	<b>Per Family Maximum</b>	
<b>Corporate Buffer Amount</b>					
<b>Room Restrictions</b>	Refer Claim condition				
	Yes				

**Claim Conditions**

\*Policy Type: Roll Over Business

\*Family Definition Family definition # students only

\*Room Rent Restriction Room rent restricted to 3% of the SI per day for normal and 5% of the SI per day for ICU and all other charges in accordance with room rent restrictions. Room rent restriction will be applicable on restricted sum insured wherever sum insured is restricted. No Room Rent Proportionate deductions to be applied for ICU hospitalization and also for Normal Room in hospitals where there is no differential billing adopted by the hospital based on Room Category. Emergency Ambulance Ambulance charges covered upto INR 1000 per case in case of emergency only. Ambulance charges will be applicable for transferring patient to Hospital or between Hospitals in the Hospital's ambulance or in an ambulance provided by any ambulance service provider only.

\*Corporate Buffer Corporate Buffer Rs. 5,00,000/- (to extend the additional coverage) up to 5 students at the rate of Rs. 1,00,000/- each student after exhausting the sum insured and applicable for below mentioned critical illnesses only. maternity related claims and all capped ailments. Corporate buffer cannot be used for any restricted SI and OPD claims. Corporate buffer can be used after exhaustion of base SI. Claims under corporate buffer shall be administered as per rest policy terms and conditions. HR approval will be required for utilization of corporate buffer. Critical illness list-Cancer, Coronary Artery Bypass Surgery, First Heart Attack: (Myocardial Infarction), Kidney Failure, Major Organ Transplant, Multiple Sclerosis, Stroke, Aorta Graft Surgery, Paralysis, Primary Pulmonary Arterial Hypertension.#A timeline of 1 month from date of loss or expiry of the policy (whichever is earlier) would be applicable for triggering a corporate buffer request.

\*Maternity Condition; Not covered

\*Per Person Premium Type Per Person Age Band Wise / SI Wise

\*Other Conditions 1 Pre-post hospitalization is 30-60 days respectively.: Internal congenital diseases are covered, external is not covered.: Infertility treatment not covered under the policy.: Correction of refractive errors for eye correction is covered for eye power more than +/- 7. However the final decision will be taken by claims team on receipt of complete set of documents.

\*Other Conditions 2 Covid Hospitalization expenses - The company shall indemnify Medical Expenses incurred for Hospitalization (Minimum 24 hrs hospitalization is mandatory) of the Insured Beneficiary during the Cover Period for the treatment of Covid on positive diagnosis of Covid in government laboratories or ICMR approved private laboratories including the expenses incurred on treatment of any comorbidity along with the treatment for Covid up to the Sum Insured specified in the policy. This also includes expenses incurred under Ayurveda, Yoga, Naturopathy, Unani, Siddha and Homeopathy systems of medicines. The company shall also indemnify Pre and Post Hospitalization expenses incurred related to an admissible hospitalization for the period as specified in the policy t and c.

\*Other Conditions 3 Covid Exclusions a)Expenses related to any admission primarily for diagnostics and evaluation purposes only. B)Any diagnostic expenses which are not related or not incidental to the Covid 19 diagnosis and treatment. C)Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes (i) Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons. (ii) Any services for people who are terminally ill to address physical, social, emotional and spiritual needs. C) Dietary supplements and substances that can be purchased w/o prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a Network Provider as part of Hospitalization claim or Home care treatment. d) Unproven Treatments: Expenses related to any unproven treatment, Contd.

\*Other Conditions 4 services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness. However, treatment authorized by the government for the treatment of Covid 19 shall be covered. e)Any claim in relation to Covid 19 where it has been diagnosed prior to Group Policy Start Date. f)Any expenses incurred on Day Care treatment and OPD treatment.g)Testing done at a Diagnostic centre which is not authorized by the Government/ICMR shall not be recognized under this Group Policy.h)All covers under this Group Policy shall cease if the Insured Person travels to any country placed under travel restriction by the Government of India.i)Home Quarantine Treatment Expenses or treatment availed by the Insured Beneficiary at home for Covid-19.Other terms and conditions as per the agreed policy level benefits of the group medi-claim programme and standard policy wordings.

\*Other Conditions 5 Modern Treatment Methods and Advancement in Technologies (as per below list) shall be restricted to 50% of Sum insured.- List - Uterine Artery Embolization and HIFU, Balloon Sinuplasty, Deep Brain stimulation, Oral chemotherapy, Immunotherapy- Monoclonal Antibody to be given as injection, Intra vitreal injections, Robot- ic surgeries, Stereotactic radio surgeries, Bronchial Thermoplasty, Vaporisation of the prostate (Green laser treatment or holmium laser treatment), IONM -(Intra Operative Neuro Monitoring), Stem cell therapy - Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.50% Co-Pay for cyber-knife treatment, Gamma Knife treatment, Femto laser treatment for eye. It will be applicable for each eye each event. Cochlear Implant treatment shall be restricted to 50% of the SI.

\*Other Conditions 6 Upon mutual agreement between the Insurer and the Group manager the claim settlement can be done by the Insurer either in favour of the Group Manager or the Insured Member. However, wherever it has been agreed to settle the claim in favour of the Group Manager , the Insurer must seek an undertaking from the Group Manager that confirms that the final claim settlement will be done to the Insured Member within 15 days of claim settlement to the Group Manager as per policy t&c. The employer may utilize the insurance amount as part of the overall service benefit and pass on the balance , if any to the Insured Member.

Health Prime (Group) Rider : Benefits	
Opted plan	
Tele Consultation Cover	
Investigations Cover #Pathology and Radiology Expenses	
Doctor Consultation Cover	
Annual Preventive Health Check-up cover	

**Disclaimer :**

1. No Individual (Employee or Dependent) can be Covered more than once in a policy.
2. Additional premium to be collected for each additional member.
3. The list of members submitted at the inception of the policy will be considered as final.

## Policy Benefit Chart

4. In case of room rent restriction specified in the policy, all other hospitalization expenses (for e.g. OT Charges, Doctor Charges, Nursing charges etc.) shall be as per entitled room rent.

### Quote Disclaimer :

1. Continuity Guideline / Portability : .
2. Claim Intimation and Submission of Documents : .
3. Guideline for Addition Endorsements : .
4. Guideline for Deletion Endorsements : .
5. Other Conditions : .
6. Other Conditions 1 : .

### Guideline for Health Prime (Group) Rider

**Health Administration Team , Bajaj Allianz General Insurance Company Ltd :**

**2nd Floor, Bajaj Finserv Building, Survey No. 208 / B - 1, Behind Weikfield IT Park, Off Nagar Road, Viman Nagar**

**Phone : (020) 30512236 Fax : (020) 30512224**