

SHIKHAR SWASTHYA SURAKSHYA

TABLE OF BENEFITS

BENEFITS	COVER
Policy period	12 months (One calendar year) from policy inception date
Renewal Clause	Subject to policy performance & insured member's health status- Renewal terms will be issued 30 days prior to policy expiry
Eligibility	This plan is valid for Nepali Citizens and foreigners residing in the country. Members age: 5-65 years
	Medical Assessment Form is mandatory for all members.
	Medical checkup is mandatory for members aged 45 years above and for Sum Insured from Rs. 500,000.00 and above.
	Any undeclared Pre-Existing condition(s) should be rejected and policy cancelled from inception of that renewal year.
Network	Selected hospitals (Nepal Medicit, Frontline, HAMS, Kathmandu Medical College & Teaching Hospital (KMC) and Norvic)
Sum Insured	NPR 5,00,000 to 20,00,000
Geographical Limit	Kathmandu (Specific Hospitals)
Reimbursement (Outside Network)	Not Covered even on emergency
Pre-existing & Chronic Conditions	Covered subject to a waiting period of 24 months from the policy inception date
In-Patient (IP) Benefits	
24 Hours Hospitalization	
150 Named Daycare Treatments (Including 30 Days Pre & 60 Days Post In-Hospital treatment covered)	Covered up to Inpatient Annual Limit
Hospital Accommodation	Covered
Accommodation Type	Single Standard AC rooms
Consultant's, Surgeon's & Anaesthetist's Fees and cost of actual treatment	Covered
Inpatient Benefit shall be Sum Insured less consumed Outpatient Benefit	
Out-Patient (OPD) Benefits	
OPD Sublimit	10% of Sum Assured
OPD Copayment	10% Co-pay payable by the insured
<i>*No costs incurred for second opinion of the same illness within 9 days of the initial visit to the same doctor without the doctor's referral</i>	
Physician Consultation Copayment (not applicable for follow up within 9 days)	1000 per visit; subject to a maximum of 30% of OPD sublimit
Diagnostics (X-Ray, MRI, CT-Scan, Ultra Sound etc.)	Subject to a maximum of 50% of OP Limit
Pharmacy sublimit	Subject to a maximum of 20% of OP Limit
Maximum limit of liability under OPD treatment shall be 10% of Sum Insured or Rs. 100,000/- whichever is lower.	
In no case shall total claim (total benefits utilized under both inpatient and outpatient treatment) exceed total Sum Insured.	
*Recurring diseases (blood pressure, thyroid, hypertension, diabetes etc) are covered first time in the policy period.	
*Exclusions related to the policy are mentioned in Annexure -1.	