

TABLE OF BENEFITS

Below is the proposed Table of Benefits for the Health Insurance Product –

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	5 Selected hospitals (Nepal Medicity, 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 Only)
Reimbursement (Outside Network)	Not Covered even on emergency
Pre-existing & Chronic Conditions	Covered subject to a waiting period of 24 months from policy inception date
In-Patient (IP) Benefits	
IP Sublimit	90% of Sum Assured Covered
Inpatient and 150 Daycare Treatments (Including 30 Days Pre & 60 Days Post In-Hospital treatment covered)	Covered up to IP-Annual Limit
Hospital Accommodation	
Accommodation Type	Single Standard AC rooms
Consultant's, Surgeon's & Anaesthetist's Fees and cost of actual treatment	Covered
Out-Patient (OP) Benefits	
OPD Sublimit	10% of Sum Assured
Out-patient Copayment	15% 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 OP sublimit
Diagnostics (X-Ray, MRI, CT-Scan, Ultrasound etc.)	Subject to a maximum of 50% of OP Limit
Pharmacy sublimit	Subject to a maximum of 20% of OP Limit

*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.

Illustrative Example:

Below is a sample benefit grid to illustrate the structure of the product's benefit limits –

Total Annual Limit (NPR)	5,00,000	20,00,000
IP Sublimit	4,50,000	18,00,000
OP Sublimit	50,000	2,00,000
Consultation Charges	15,000	60,000
Diagnostics	25,000	1,00,000
Pharmacy	10,000	40,000