

Health Insurance Division, 4-1-898, 'Oasis Plaza', Tilak Road, Abids, Hyderabad 500 001
Telephone: 24785024 Email: co_hicclaims@licindia.com

Ref: LIC/CO-HI-Claims/CIC Order/RTI

TO WHOMSOEVER IT MAY CONCERN

FAQs under LIC's Health Protection Plus (Plan No. 902) (UIN: 512L253V01)

1. Is this Plan a Fixed benefit plan or Indemnity plan?

The Benefits under this plan are fixed as per the Initial Daily Benefit opted by the policyholder at proposal stage and has no relation to actual expenses incurred by him during Hospitalization.

2. Are the benefits payable even if they are claimed under any other Mediclaim scheme?

Yes, the health benefits under this plan (as per policy terms and conditions) are payable in addition to the payment received under mediclaim or indemnity based health insurance products offered by other Insurers.

3. What are the Health related benefits available under this plan as per terms and conditions of the plan?

The different types of Health related benefits available under this Plan are:

- i) Hospital Cash Benefit.
- ii) Major Surgical Benefit.
- iii) Domiciliary Treatment Benefit.

4. How many surgeries are covered under the Major Surgical Benefit available under this Plan?

49 surgeries are covered under the Major Surgical Benefit available under this Plan.

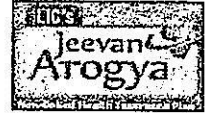
For details, please refer Surgical Benefit Annexure provided along with the policy document.

5. What is the minimum duration of hospitalisation required for claiming Hospital Cash Benefit?

The minimum duration of hospitalisation required for claiming Hospital Cash Benefit is more than 52 hours. In case the duration of hospitalisation is 52 hours or less, nothing is payable under Hospital Cash Benefit.


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6. What is the minimum duration of hospitalisation required for claiming Major Surgical Benefit?

There is no minimum duration of hospitalisation required for claiming Major Surgical Benefit.

7. What is the Waiting period under this Plan?

There shall be a waiting period of 180 (one hundred and eighty) days from the Date of Cover Commencement and of 90 (ninety) days from the Date of reinstatement of cover in respect of each Insured, if the said hospitalisation or surgery occurred due to Sickness.

There shall be no waiting period for Hospital Cash Benefit or Major Surgical Benefit in case of hospitalisation or surgery due to Accidental Bodily Injury.

8. Is surrender available under this Plan?

Surrender facility is not available under this plan.

9. Is Partial Withdrawal allowed under this Plan?

Partial Withdrawal is not allowed under this plan.

10. Is Loan available under this Plan?

Loan facility is not available under this plan.

11. What is "Pre-existing condition" under this Plan?

"Pre-existing condition"- any medical condition or any related condition (e.g. illnesses, symptoms, treatments, surgery, pains, etc) that have arisen at some point prior to the commencement of this coverage, irrespective of whether or not any medical treatment or advice was sought. Any such condition or related condition about which the Principal Insured or insured dependant know, knew or could reasonably have been assumed to have known, will be deemed to be pre-existing.

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12. What are the requirements to be submitted to LIC for claiming health claim benefits under this Plan?

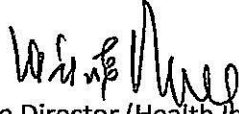
The following are the requirements to be submitted to LIC for claiming health claim benefits:





- i) Original claim form duly filled in
- ii) Original Hospital Treatment Form (HTF) with all questions fully answered (A clear copy of the Health Card/Photo ID (e.g. PAN card/Voter Card/Passport/Driving license etc.) of the patient need to be affixed on HTF in the requisite Box provided and is to be signed by the principal insured (PI) and attested by Hospital Authorities with stamp/Seal.
- iii) Attested copy of the Discharge summary
- iv) Attested copy of the Final Hospital Bill
- v) Attested copies of the pathological/USG/MRI reports, if any
- vi) Attested copies of the surgical reports/OT notes in case of surgery is performed
- vii) Attested copies of MLC/FIR reports, in case of Road Traffic Accidents (RTA)
- viii) Self Declaration explaining cause of Accident/Fall in cases of accidents other than RTA
- ix) Any other document that may be called for in the course of claim evaluation.

13. What is Fraud?

"If any of the insured or the claimant shall make or advance any claim knowing the same to be false or fraudulent as regards amount or otherwise, this policy shall immediately become void and all claims or payments in respect of all the Insured under this policy shall be forfeited. Non disclosure of any health event or ailment/condition/sickness/Surgery which occurred prior to the taking of this policy whether such condition is relevant or not to the ailment /disease/surgery for which the insured is admitted/treated, shall also constitute Fraud ".

LEGAL DISCLAIMER: The information must be read in conjunction with the policy document. In case of any conflict between this FAQs and the policy document, the terms and conditions mentioned in the policy document shall prevail.


Executive Director (Health Insurance)

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