

Group Activ Health - Policy Schedule

Policy No. 2-81-24-0001316-000

Policy Issuing Office	Unit no 1101 & 1104 11th floor, Unit no 1501& 1502, 15th floor, G Corp Tech Park, Kasarwadavali, Ghodbunder Road, Thane West-400615	Policy Servicing Office	2nd Floor, 317 - A, 9th Main Road,5th Block, Jayanagar,,,,,INDIA,560041
Intermediary Name	Sridhara H R	Intermediary Code	ABH11142129
Intermediary Contact Details	9743287828	Intermediary E-mail ID	nsandconsultant@gmail.com
Toll Free Number	18002707000		

TPA Details			
TPA Name	Aditya Birla Health Insurance Co. Limited	TPA ID	TPA001
TPA Address	7 Floor, New Building, MBC Park,Kasarvadavali, Godhbunder Road,,400615	Contact Number	

I. Details of Policyholder	
Policyholder Name	RASHTREEYA SIKSHANA SAMITHI TRUST.
Policyholder Address	15, R.V. TEACHERS COLLEGE BUILDING,,ASHOKA PILLAR ROAD, JAYANAGAR 2ND BLOCK,,Bengaluru Urban, Karnataka,,Bangalore,Bengaluru,KARNATAKA,INDIA,560011
Contact Number	9743287828
Email Id	accounts.rvim@rvei.edu.in
Policyholder GSTIN	29AAATR0758A1ZP

II. Policy Details			
Product Name	Group Activ Health		
Product Code	5211		
Policy Number	2-81-24-0001316-000	Policy Issued Date & Time	05/08/2024 12:08
Start date & Time of Policy	From 00:00 Hrs of 10/07/2024	Expiry Date & Time of Policy	To Midnight 23:59 Hrs of 09/07/2025
Group Type	Employer-Employee relationship	Policy Tenure	1 Year
Policy Category	New Business-Floater		
Premium Payment Frequency	Annual		

III. Co-Insurance Details	
Co-Insurance Details	
NA	NA

IV. Coverage Details		
Coverage Details	Name of the Benefit	Total Sum Insured
Group Mediclaim	As per Quote & Policy Wordings	As per the Annexure

CATEGORY 1

Sr No	Cover Name	Coverage
1.1	In Patient Hospitalisation	Sum Insured: Rs. 100000.00 Hospital room covered upto 1% of Sum Insured per day, maximum upto Rs 1000 ICU Charges covered upto Double the limit of normal room. All other charges in accordance with room rent limit.
1.2	Day Care Treatment	527 Day care procedures are covered
1.3	Domiciliary Hospitalization	Domiciliary Hospitalization is covered as defined in GHI Policy Wordings
1.4	Pre hospitalization Medical Expenses	Pre-hospitalization Medical Expenses are covered upto 30 days.
1.5	Post hospitalization Medical Expenses	Post-hospitalization Medical Expenses are covered upto 60 days.
1.6	Organ Donor Expenses	Organ cost shall not be covered. Medical expenses shall be covered. Rest as per policy wordings.
1.7	Road Ambulance Expenses	Road ambulance charges are covered upto Rs. 1000 per incident in case of emergency. Per Hospitalisation subject to submission of bill (for Inward cases only)
5	AYUSH Treatment (In-patient Hospitalization)	Cover upto Rs.25000.00 please refer special conditions
6	Psychiatric In-patient Care	We will cover the Medical Expenses up to Rs. 30000 for In-patient treatment in a recognized psychiatric unit of a Hospital including consultations, diagnostics, counselling and/or therapy and medication. The In-patient treatment under this Benefit must at all times be administered under the direct control of a registered psychiatrist.

Aditya Birla Health Insurance Co. Limited

Product Name: Group Activ Health, Product UIN: ADIHLGP22190V032122

1800 270 7000 | care.healthinsurance@adityabirlacapital.com | www.adityabirlahealthinsurance.com

Trademark/Logo Aditya Birla Capital is owned by Aditya Birla Management Corporation Private Limited and

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Registered Office:

9th Floor, Tower1, One World Centre, Jupiter Mills Compound,
841, Senapati Bapat Marg, Elphinstone Road, Mumbai 400013.

CIN:U66000MH2015PLC263677

IRDA Registration No. 153

20	Well mother Cover	Applicable Please refer special conditions
21	Preferred Provider Network	Cashless claim will be settled on PPN SME Network Hospitals. For all Reimbursement + Non PPN hospital claims there will not be any Co pay
30.1	Ultra-Modern Medicine	Cyber knife/Robotic surgery/Stem cell therapy/ Stereotactic radio surgeries - Covered with 50% Co pay
31	Corporate Buffer	Not Applicable
32	Reload of Sum Insured	Not Applicable
33	Continuity of cover in case of Pink slip	Not Applicable
35	Comprehensive Corporate Floater	Not Applicable
37	Sub-limits for specific Treatments/Surgery	a) Cataract (Per eye): Rs 25,000/- b) Tonsillectomy: Rs 20,000/- c) Sinusitis (FESS): Rs 20,000/- d) Haemorrhoids/Fissure/Fistula: Rs 30,000/- e) Appendectomy : Rs 40,000/- f) Cholecystectomy : Rs 30,000/- g) Gall-bladder stone : Rs 30,000/- h) Kidney stone : Rs 40,000/- i) Hysterectomy: Rs 40,000/- j) Hernia: Rs 40,000/- k) Joint replacement (Per joint): Rs 1 Lac or Sum Insured whichever is less l) Angioplasty/CABG: Rs 1 Lac or Sum Insured whichever is less
38	External Congenital Anomaly	Covered in case of life threatening conditions with overall policy limit is 10 lakhs

Section IV : Waivers and Discounts

39	Co-payment	Applicable for 20% on all Claims/Cashless/Reimbursement/Relation, except capped ailments. Claim Type : BOTH
40	Deductible on Per Claim	Not Applicable
41	Deductible on Aggregate Claim	Not Applicable
42	Coverage for Non-Medical Expenses	Not Applicable
43	Pre Existing Diseases Waiting Period	Waived Off
44	Specified disease / procedure waiting period	Not Applicable
45	30 day waiting period	Not Applicable
46	Waiver of exclusion of-attempted Suicide	Not Applicable

Special Conditions(if any)

Family Definition - SELF + SPOUSE + 3 CHILD

Age limit for self - 70

Age limit for spouse - 70

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Special Conditions (if any)

Age limit for children - 25

Ayush treatment (In-patient Hospitalization) - We will cover the Medical Expenses for medically required AYUSH Treatments undergone as an In-patient upto 25% of SI Max upto Rs 25000 where treatment has been taken in a government Hospital or in any institute recognized by government and- or in any institute recognized by government and- or accredited by Quality Council of India or National Accreditation Board on Health

Psychiatric In-patient Care - We will cover the Medical Expenses up to Rs. 30000-- for In-patient treatment in a recognized psychiatric unit of a Hospital including consultations diagnostics counselling and- or therapy and medication. The In-patient treatment under this Benefit must at all times be administered under the direct control of a registered psychiatrist.

Sub-Limits for Specified Illness - Conditions - a) Cataract (Per eye): Rs 25000-- b) Tonsillectomy: Rs 20000-- c) Sinusitis (FESS): Rs 20000-- d)

Haemorrhoids-Fissure-Fistula: Rs 30000-- e) Appendectomy: Rs 40000-- f) Cholecystectomy: Rs 30000-- g) Gall-bladder stone: Rs 30000-- h) Kidney stone:

Rs 40000-- i) Hysterectomy: Rs 40000-- j) Hernia: Rs 40000-- k) Joint replacement (Per joint): Rs 1 Lac or Sum Insured whichever is less l) Angioplasty-CABG:

Rs 1 Lac or Sum Insured whichever is less

Well mother cover - If an Insured Person who is less than 3 years of Age is Hospitalized in an ICU or a Neo-natal ICU or a Cardiac Care Unit of a Hospital then We will cover the Room Rent and other boarding expenses of the Insured Person's mother to stay with the Insured Person in the same Hospital upto Rs. 5000 within the Maternity Limit.

Well Baby Cover - Covered for Expenses Incurred for a Normal baby after the birth till discharge. Automatic coverage for necessary expenses related to the new-born's wellbeing after birth and before discharge. Expenses like doctor's check-up and any other check-up - tests performed to ensure that the baby is well at birth to be covered upto Rs. 5000 within the Maternity Limit.

Lasik surgery - Covered only when power of the lens is more than +-6.5

Modern Treatment - We Will Cover the below Specified Modern Treatment Upto 50% of SI on IPD basis

Sub-limits for specific Treatments-Surgery - a) Cataract (Per eye): Rs 25000-- b) Tonsillectomy: Rs 20000-- c) Sinusitis (FESS): Rs 20000-- d)

Haemorrhoids-Fissure-Fistula: Rs 30000-- e) Appendectomy: Rs 40000-- f) Cholecystectomy: Rs 30000-- g) Gall-bladder stone: Rs 30000-- h) Kidney stone:

Rs 40000-- i) Hysterectomy: Rs 40000-- j) Hernia: Rs 40000-- k) Joint replacement (Per joint): Rs 1 Lac or Sum Insured whichever is less l) Angioplasty-CABG:

Rs 1 Lac or Sum Insured whichever is less

Dental Treatment - Covered in case of hospitalization due to accident on IPD basis only

Terrorism - Any Hospitalisation person suffer due to terrorism activities will be covered upto IPD Sum Insured.

Internal congenital ailments covered - COVERED

Co-payment - 20%

EMOHA - EMOHA BENEFITS,

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