



Eligibility Criteria

Eligibility Criteria

Employee Eligibility for Su-Swastha Yojna



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Eligibility Criteria

Employee Eligibility for Su-Swastha Yojna



Overview

The Su-Swastha Yojna is primarily designed to be a cashless health services scheme, for the employee and his/her dependent family members. Only enrolled beneficiary members as per below rules can avail benefits of Su-Swastha Yojna in any of the 400+ empanelled hospitals within the Su-Swastha Yojna network of providers.

Definition of Employee

An employee is also called a **“primary member”** (as against family members who are called dependents), the term member also is used interchangeably for **“beneficiary”**

- i. All employees of the Sikkim government appointed against the regular Post from the date of joining regular post
- ii. A central government servant or a government servant of any other state while on deputation to the Government of Sikkim

Definition of Dependant Family Members

Dependents as below shall be considered as “dependent family members/ beneficiaries”. A family can have a maximum of five (5) dependent beneficiaries for one (1) government employee.

- i. Parents of the primary member or spouse (step-parents are excluded)
- ii. Legally wedded spouse (husband/ wife) of primary beneficiary member; a legally divorced spouse cannot be added as a dependent. When both spouses are government regular employees they can choose to enrol separately as primary member of Su-Swastha Yojna OR as dependent on the other spouse.
- iii. Children, biological or legally adopted, of the primary beneficiary member as below
 - a) Unemployed unmarried male child upto age of 30 years
 - b) Unemployed unmarried female child upto any age
 - c) Unmarried unemployed child suffering from certified mental or certified physical disability preventing gainful employment of either gender upto any age till the tenure of employment of primary beneficiary member* Disability means blindness, hearing impairment, locomotor disability, mental retardation, mental illness, or any other illness or disability certificate by the competent authority or medical board
- iv. Unmarried and unemployed biological brother and/or sister age of 30 years
- v. Unmarried and unemployed biological brother and/or sister suffering from certified mental or certified physical disability preventing gainful employment of upto any age till the tenure of employment of primary beneficiary member
- vi. Maximum of five (5) dependents can be added for a primary member or employee the list of dependents mentioned above; in no case can more than 5 dependents be added to a primary member. However, any combination of family members from the list of eligible dependents above can be used to constitute and enrol 5 dependents in the scheme.
- vii. In no case can the enrolment/membership for a dependent continue if the primary member is not enrolled in the scheme; if the primary man has exited the scheme due to causes including but not limited to death, retirement, termination or resignation, the cover of benefit for dependents automatically stops.
- viii. Primary member can add or remove a dependant anytime during the tenure of the membership without requiring a consent of the dependant for such removal
- ix. The responsibility of truth in declaration of dependent family members is of the employee and action may be taken against the employee if information regarding the dependent is found to be untrue



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What Am I Covered For?

10 lacs base cover + 10 lacs additional critical care cover or the family- irrespective of number of dependents in the family

a. In-patient Treatment - Covers hospitalisation expenses for period more than 24 hrs.

Section-1
(A,B,C)

b. Road Ambulance Expenses-Expenses incurred for transportation of the Beneficiary by private ambulance service from home/one hospital to another hospital. 3500 per hospitalization to maximum 3 times a year

Section-1
(D)

c. All pre existing diseases covered from day 1 of completing enrolment

Section-1
(E)

d. Post-Hospitalisation- Medical Expenses incurred up to 30 days from the date of discharge from the hospital

Section-1
(F)

e. Special conditions, treatments and implants

Section-1 (G,H,I)

f. Coverage for Delivery Maximum Rs.50,000- new born baby cover limit upto included.

Section-2
Section-3

g. Day care Dental and Ophthalmic treatment inclusive of implants

h. Organ Donor Expenses-Expenses incurred for organ transplantation from the Donor to the recipient Su Swastha beneficiary are payable provided the claim for transplantation is payable

Section-4

i. Vehicular Accident and Trauma

Section-5

j. Reimbursement vs cashless benefits

Section-6

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What are the Major Exclusions in the Scheme?

i. Any hospital admission primarily for investigation and/or diagnostic purpose

ii. May include OPD services, Persistent vegetative disease, vaccinations / routine immunizations

iii. Domiciliary treatment, treatment outside India

iv. Sex change surgery, bariatric surgery, cosmetic surgery & plastic surgery for non-essential treatments

v. corrective & cosmetic dental surgeries

vi. Substance abuse, self-inflicted injuries

vii. Hazardous sports, war, terrorism, civil war or breach of law

viii. Any kind of service charge, surcharge, admission fees, registration fees levied by the hospital.

Exclusions
1-30

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Section 1 : Hospitalization Coverage

During the period stated in the Schedule, In the event of the beneficiary contracting any disease, or suffer from any illness or sustain bodily injury through accident and if such disease or injury shall require the Beneficiary, upon the advice of a duly Qualified Medical Practitioner to incur Hospitalization expenses for medical/surgical treatment at any Nursing Home / Hospital in India as an in-patient, the Company will pay to the Beneficiary the amount of such expenses as are reasonably and necessarily incurred up-to the limits mentioned in the Schedule.

A. Room (Private Single A/C room), Boarding and Nursing Expenses as provided by the Hospital / Nursing Home

Non ICU – any category upto Private AC/Non-AC room – max limit 5000/day (deluxe, super-deluxe, suite category not included)

ICU room- SICU, MICU, Cardiac ICU, nephron ICU, Neuro ICU, pediatric ICU, Neonatal ICU, HDU- all ICU category rooms upto 10,000/ day are included.

B. Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialist Fees.

C. Anaesthesia, Blood, Oxygen, Operation Theatre charges, ICU charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and X-ray, diagnostic imaging modalities, Dialysis, Chemotherapy, Radiotherapy, cost of Pacemaker, stent and such other similar expenses. With regard to coronary stenting, the Company will pay such amount up to the extent of cost of bare metal stent/drug eluting cobalt- chromium stent/drug eluting stainless steel stent.

D. Road ambulance expenses: Subject to an admissible hospitalization claim, road ambulance expenses incurred for the following are payable:-

i. for transportation of the Beneficiary by private ambulance service to go to hospital when this is needed for medical reasons

or

ii. for transportation of the Beneficiary by private ambulance service from one hospital to another hospital for better medical treatment

or

iii. for transportation of the Beneficiary from the hospital where treatment is taken to their place of residence provided the requirement of an ambulance to the residence is certified by the medical practitioner.

iv. In all the above situations maximum permissible expense for ambulance is 3500/- three thousand five hundred only to a maximum of three (3) times per year.

or

v. The mode of transport always not necessarily the ambulance in the case of remote and inaccessible areas. The rate per vehicle will be paid from su-swastha coverage to the maximum of Rs 3500/- provided there was a requirement of ambulance. Nonetheless, the transportation charges from home to hospital will not be paid in normal situations.

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E. Pre-existing diseases are covered from day 1 of successful enrolment in Su-Swastha Yojna

F. Post Hospitalization: Medical expenses incurred for a period up to 30 days from the date of discharge from the hospital wherever recommended by the Medical Practitioner / Hospital, where the treatment was taken are payable, provided

- i. such expenses so incurred are following an admissible claim for hospitalization, and
- ii. such expenses so incurred are in respect of ailment for which the Beneficiary was hospitalized

G. Medical and / or surgical treatment of Sleep apnea, treatment for genetic and endocrine disorders are covered to the limits of Su Swastha Yojna

H. Bone marrow Transplant, Other transplants, Cancer care are covered till maximum cover amount of Su Swastha Yojna.

I. Cochlear implants and procedure related hospitalization expenses, Cost of spectacles and contact lens (in excess of what is specifically provided), hearing aids, Cochlear implants and procedures, walkers and crutches, wheel chairs, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis, infusion pump and such other similar aids are covered till the limits of Su Swastha Yojna as long as they are necessitated for medical or surgical treatment and charged in same hospitalization. The rates of these will be as per empanelment contract with hospitals and cannot exceed the MRP of such implants and items.

Limits on implants- payments shall be made upto

- i. the cost invoiced by hospital
- ii. MRP of the implant or
- iii. Tariff agreed by Su-Swastha Yojna (whichever is lower) and shall be excluding handling charges or surcharges.

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Section 2 : Women's Diseases, Fertility, Delivery, New Born

A. Expenses for a Delivery including Delivery by Caesarean section (including pre-natal and post natal hospitalization expenses) subject to a maximum of 2 deliveries in the entire life time of the Beneficiary are payable.

B. Expenses up-to the limits mentioned in the table below, incurred in a hospital/ nursing home on treatment of the New-born for any disease, illness (including any congenital disorders) or accidental injuries are payable.

C. A new born is automatically covered under the Su-Swastha Yojna till an age of 1 year. At completion of 1 year, the child must be enrolled in Su-Swastha Yojna as a dependent by the parent to continue availing benefits under the yojna. To be covered under the Su-Swastha Yojna after the child reaches 1 year of age, the employee must enrol the child as a dependent.

Delivery & New Born

Sum Insured	Limit for Delivery		Limit of New Born Cover
	Normal Delivery	Caesarean Delivery	
₹ 10Lacs (Base Cover)	₹ 50,000	₹ 50,000	No limit up to availability of sum insured

D. Treatment arising from or traceable to pregnancy, childbirth, family planning, miscarriage, abortion and complications of any of these and ectopic pregnancy are covered to the limit of the Su Swastha Yojna

E. Treatment for Sub-Fertility, Assisted Conception and or other related complications of the same including a maximum of 2 in-vitro fertilization attempts to a maximum of 2 lakhs for married women.

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Section 3 : Day care Dental and Ophthalmic Treatment

A. Expenses incurred for implants on acute treatment to a natural tooth or teeth provided by a licensed dentist for a maximum of 25,000/ implant to a maximum of 4 implants/ only. Other expenses except for implant is not covered by Su-Swastha Yojna. The implants shall be covered only to the tariff agreed with provider or the MRP on the original product labels after submission of invoices to Su-Swastha by provider of dental services.

B. Expenses incurred for the treatment of the eye or the services or supplies provided by a licensed ophthalmologist, hospital or other provider that are medically necessary to treat eye problem. This shall not cover the cost of spectacles / contact lenses which are to be covered as OP prescriptions and subject to other rules in Medical Services Facilities Rule and its amendments.

C. Expenses incurred on Lasik Laser or other procedures Refractive Error Correction and its complications, all treatment for disorders of eye requiring intra-vitreous injections are covered as long as medically necessary.

Section 4 : Organ Donor

In patient hospitalization expenses incurred for organ transplantation from the Donor to the Recipient Beneficiary are payable provided the claim for transplantation is payable. In addition, the expenses incurred by the Donor, (if any) for the complications that necessitate a Redo Surgery / ICU admission will be covered with a maximum coverage of 10lakhs anything beyond the claim shall be borne by beneficiary himself/herself.

Section 5 : Vehicular Accident & Trauma

Accidents resulting from vehicular accidents and injuries sustained in day to day activities expected in the course of normal or natural life are covered under Su Swastha Yojna.

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Section 6 : Reimbursement and cashless benefits

A. Su-Swastha Yojna is primarily a cashless benefits scheme covering beneficiaries for medical hospitalizations across empanelled hospitals only across India.

B. Cashless benefits cannot be availed if the beneficiary is admitted electively or in a medical emergency in a non-empanelled hospital across India, in or outside the state of Sikkim.

In case the employee or dependent, has incurred expenses for diagnostic tests, drugs and consumables, blood and blood products, or opinion of a doctor, when and because such services were for some reason not available in the hospital treating the hospitalized beneficiary, the employee shall be required to pay such expenses himself/herself and raise a claim request via the website or the app. Su-Swastha Facilitation Center shall process such requests and approve payments. Such payments shall then be verified and disbursed directly to the employee.

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Exclusions

Applicable for Section 1 to 6

Govt of Sikkim shall not be liable to make any payments under Su-Swastha in respect of any expenses what so ever incurred by the insured person in connection with or in respect of:

1. Advances of any amount are not covered in Su-Swastha Yojna since the Yojna functions as cashless service for its members.
2. Intentional self-injury is not included
3. Use of intoxicating substances, substance abuse, drugs / alcohol, smoking and tobacco chewing and illnesses resulting due to such abuse is excluded
4. Venereal Disease and Sexually Transmitted Diseases are excluded
5. Injury/disease directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not)
6. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials
7. Expenses incurred on weight control services including surgical procedures such as Bariatric Surgery and /or medical treatment of obesity
8. Expenses incurred on High Intensity Focused Ultra Sound, Uterine Fibroid Embolisation, Balloon Sinoplasty, Enhanced External Counter Pulsation Therapy and related therapies, Chelation therapy, Deep Brain Stimulation, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy, VAX-D, Low level laser therapy, Photodynamic therapy and such other therapies similar to those mentioned under this exclusion
9. Charges incurred on diagnostics that are not consistent with the treatment for which the insured is admitted in the hospital / nursing home. Admission primarily for diagnostic purpose with no positive existence of sickness / disease / ailment / injury and no further treatment is indicated.
10. Items for post operative home based therapies and aides such as crutches ,wheel chairs cushions and walking sticks, braces, oxygen

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Exclusions

cylinder and accessories for use of residence and other aids of similar nature are excluded.

11. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician of the hospital where the insured underwent treatment.

12. Cosmetics, diapers, oral hygiene products, talcum powder and toiletries are not covered.

13. Unconventional, Untested, Unproven, Experimental therapies.

14. Stem cell Therapy, Autologous derived Stromal vascular fraction, Chondrocyte Implantation, Procedures using Platelet Rich plasma and Intra articular injection therapy.

15. Oral Chemotherapy, Immuno-therapy and Biologicals, except when administered as an in-patient, when clinically indicated and hospitalization warranted.

16. All types of Cosmetic, Aesthetic treatment of any description, all treatment for Priapism and erectile dysfunctions, Change of Sex.

17. Plastic surgery (other than as necessitated due to an accident or as a part of any illness)

18. Hospital record charges and such other charges

19. Inoculation or Vaccination (except for post-bite treatment and for medical treatment for therapeutic reasons).

20. Dental treatment or surgery (in excess of what is specifically provided) unless necessitated due to accidental injuries and requiring hospitalization.

21. Hospital registration charges, admission charges, telephone charges and such other charges.

22. Any hospitalizations which are not Medically Necessary / does not warrant Hospitalization

23. Other Excluded Expenses as detailed and periodically revised as in the website www.suswastha.sikkim.gov.in

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Exclusions

24. Any claim arising out of Accidents that the beneficiary has caused

- i. intentionally or
- ii. by committing a crime / involved in it or
- iii. as a result of / in a state of drunkenness or addiction (drugs, alcohol).

25. Pre-hospitalization Expenses are NOT admissible by Su-Swastha unless they are included in the package of a procedure defined and agreed upon with the hospital during empanelment contracting. When pre-hospitalization is included in the package of admission and procedure, no separate bill or invoice can be raised by hospital or beneficiary member against such pre-hospitalization expenses.

26. Beneficiary engaging in Air Travel unless he/she flies as a fare-paying passenger on an aircraft properly licensed to carry passengers. For the purpose of this exclusion Air Travel means being in or on or boarding an aircraft for the purpose of flying therein or alighting there from.

27. Travelling Allowance for attendant, patient, escort shall not be covered by Su-Swastha Yojna. Such allowances may be covered by Rule 54 and 55 of Travelling Allowances Rules of Government of Sikkim. Please refer to these rules to avail travelling allowances as applicable.

28. Accidents that are results of war and warlike occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power, seizure capture arrest restraints detentions of all kings princes and people of whatever nation, condition or quality whatsoever.

29. Participation in riots, confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any government or local authority.

30. Any claim resulting or arising from or any consequential loss directly or indirectly caused by or contributed to or arising from:

- Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or from any nuclear waste from combustion (including any self sustaining process of nuclear fission) of nuclear fuel.
- Nuclear weapons material-The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
- Nuclear, chemical and biological terrorism

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Exclusions

31. Any claim arising out of sporting activities in so far as they involve the training or participation in competitions of professional or semi-professional sports persons.

32. Participation in Hazardous Sport / Hazardous Activities

33. Any loss arising out of the Insured Person's actual or attempted commission of or willful participation in an illegal act or any violation or attempted violation of the law.

34. Any payment in case of more than one claim under the policy during the period of enrolment by which the maximum liability of the Govt of Sikkim in that period would exceed the amount specified in the Su Swastha limit

35. Any claim for Death or Permanent Total Disablement of the beneficiary shall be excluded from Su Swastha benefits- Su Swastha is a scheme to pay for healthcare expenses incurred in hospitalization and not for damages paid for disability or death.

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Definitions or Glossary of Terms

Definitions 1- 40 have been used in this document elsewhere and must be used as outlined below for interpretation of this document.

1. **Accident:** means a sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Any one Illness:** means continuous period of illness and it includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment may have been taken
3. **Basic Sum Insured:** means the sum insured for a beneficiary by Su-Swastha Yojna
4. **Cashless Facility:** means a facility extended by Government of Sikkim to Su-Swastha actively enrolled beneficiaries, where the payments, of the cost of treatment undergone by the beneficiary in accordance with the terms and conditions of Su-Swastha Yojna, are directly made to the provider by the Govt of Sikkim to the extent of pre-authorization approved.
5. **Congenital Anomaly:** means a condition which is present since birth, and which is abnormal with reference to form, structure or position.
 - a) Congenital Internal means congenital anomaly which is not in the visible and accessible parts of the body.
 - b) Congenital External means congenital anomaly which is in the visible and accessible parts of the body
6. **Day Care Centre:** means any institution established for day care treatment of illness and / or injuries or a medical set up within a hospital and which has been registered with the local authorities, wherever applicable and is under the supervision of a Registered and Qualified Medical Practitioner and must comply with all minimum criteria as under:-
 - i. has qualified nursing staff under its employment;
 - ii. has qualified medical practitioner/s in charge;
 - iii. has a fully equipment operation theatre of its own where surgical procedures are carried out.
 - iv. maintains daily records of patients and will make these accessible to the insurance company's authorized personnel.
7. **Day Care treatment** means medical treatment and/or surgical procedure which is;
 - a) Undertaken under General or Local Anaesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
 - b) Which would have otherwise required a hospitalization of more than 24 hours**Treatment normally taken on an out-patient basis is not included in the scope of this definition.**

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Definitions

8. **Dental Treatment** means a treatment carried out by a dental practitioner including examinations, fillings (where appropriate), crowns, extractions and surgery excluding any form of cosmetic surgery/implants.

9. **Dependent Child** means a child (natural or legally adopted) who is eligible as dependent as per terms and conditions of eligibility criteria of Su-Swastha Yojna.

10. **Diagnosis** means Diagnosis by a registered medical practitioner, supported by clinical, radiological and histological, histo-pathological and laboratory evidence and also surgical evidence wherever applicable, acceptable to the Company.

11. **Disclosure to information norms** means the policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of mis-representation, mis description or non disclosure of any material fact.

12. **Hazardous Sport / Hazardous Activities** means engaging whether professionally or otherwise in any sport or activity, which is potentially dangerous to the Beneficiary (whether trained, or not). Such Sport/Activity including but not limited to Winter sports, Ice hockey, Skiing, Skydiving, Parachuting, Ballooning, Scuba Diving, Bungee Jumping, Mountain Climbing, Riding or Driving in Races or Rallies, caving or pot holing, hunting or equestrian activities, diving or under-water activity, rafting or canoeing involving rapid waters, yachting or boating outside coastal waters, jockeys, horseback, Polo, Circus personnel, army/navy/air force personnel and policemen whilst on duty, persons working in underground mines, explosives, magazines, workers whilst involved in electrical installation with high-tension supply, nuclear installations, handling hazardous chemicals.

13. **Hospital/Nursing Home** means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act or complies with all minimum criteria as under:

- a) Has qualified nursing staff under its employment round the clock;
- b) Has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
- c) Has qualified medical practitioner(s) in charge round the clock;
- d) Has a fully equipped operation theatre of its own where surgical procedures are carried out;
- e) Maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.

14. **Hospitalization** means admission in a hospital for a minimum period of 24 in patient care consecutive hours except for specified procedures/treatment where such admission could be for a period of less than 24 consecutive hours.

Definitions

15. **Illness** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.

(a) Acute condition- Acute condition is a disease, illness or injury that is likely to respond

i) quickly to treatment which aims to return the person to his or her state of health

ii) immediately before suffering the disease/ illness/ injury which leads to full recovery

(b) Chronic condition- A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:

i) it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests

ii) it needs ongoing or long-term control or relief of symptoms

iii) it requires rehabilitation for the patient or for the patient to be specially trained to cope with it

iv) it continues indefinitely

v) it recurs or is likely to recur

16. **Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.

17. **Beneficiary** means the name/s of person/s shown actively enrolled with Su Swastha Yojna.

18. **In-Patient** means an Insured Person who is admitted to Hospital and stays there for a minimum period of 24 hours for the sole purpose of receiving treatment.

19. **ICU (Intensive Care Unit) Charges** means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges.

20. **Intensive Care Unit** means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.

Note: Such facility must be separate and apart from surgical/ post-procedural recovery room and from rooms' beds and wards customarily used for patient confinement.

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Definitions

21. **Medical Advise** means any consultation or advice from a Medical Practitioner including the issue of any prescription or repeat prescription.
22. **Medical expenses** means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.
23. **Medically Necessary** means any treatment, tests, medication or stay in hospital or part of a stay in a hospital which – is required for the medical management of the illness or injury suffered by the Insured – must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration or intensity – must have been prescribed by a Medical Practitioner – must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
24. **Notification of claim** means the process of notifying a claim to the insurer by specifying the timelines as well as the address or the telephone number to which it should be notified.
25. **Qualified Medical Practitioner** is a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of licence.
26. **Maternity expense** shall include
- Medical treatment expenses traceable to child birth (including complicated deliveries and caesarean sections) incurred during Hospitalization
 - expenses towards the lawful medical termination of pregnancy during the Policy Period.
27. **Network Hospital** means all such hospitals or other providers that Su Swastha has mutually agreed with, to provide services like cashless access to policyholders. The list is available with the Company and subject to amendment from time to time.
28. **New Born Baby** means baby born during active enrolment of primary beneficiary and is aged 1 day or above.
29. **Non Network Hospital** means any hospital or other provider that is not part of the network Notification of claim is the process of notifying a claim to the insurer by specifying the timelines as well as the address / telephone number to which it should be notified.
30. **Out-patient treatment** is one in which the Insured visits a clinic/hospital or associated

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Definitions

facility like a consultation room for diagnosis and treatment based on the advice of a medical practitioner. The beneficiary is not admitted as a day care or in-patient.

30. **Pre-Existing Disease** means any Condition, ailment or injury or related condition (s) for which the insured person had signs or symptoms, and/or was diagnosed, and/or received medical advice / treatment within 48 months prior to the enrolment with Su Swastha

31. **Pre-hospitalization Expenses** means medical expenses incurred immediately before the beneficiary is hospitalized, provided that

- a) Such medical expenses are incurred for the same condition for which the hospitalization was required and
- b) The inpatient hospitalization claim for such hospitalization is admissible but the pre-hospitalization expenses are NOT admissible by Su-Swastha unless they are included in the package of a procedure defined and agreed upon with the hospital during empanelment contracting. When pre-hospitalization is included in the package of admission and procedure, no separate bill or invoice can be raised by hospital or beneficiary member against such pre-hospitalization expenses.

32. **Post Hospitalization Expenses:** means medical expenses incurred immediately after the beneficiary is discharged from the hospital provided that

- a. Such medical expenses are incurred for the same condition for which the hospitalization was required and
- b. The inpatient hospitalization claim for such hospitalization is admissible by Su-Swastha.

Post hospitalization or any other home based/ domiciliary care is not covered under Su-Swastha Yojna.

33. **Portability** means transfer of benefits covered under Su Swastha to any other health scheme

34. **Private Single A/c Room** means a single occupancy air-conditioned room with attached wash room and a couch for the attendant. The room may have a television and /or a telephone. Such room must be the most economical of all accommodations available in that hospital as single occupancy. This does not include Deluxe room or a suite

35. **Qualified Nurse** means a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.

36. **Reasonable and Customary charges** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved

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Definitions

37. **Renewal** defines the terms on which the enrolment with Su Swastha can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of all waiting periods.

38. **Room Rent** means the amount charged by the hospital for occupancy of a bed on per day (24 hrs) basis and shall include associated medical expenses.

39. **Surgery/Surgical Operation** means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a medical practitioner

40. **Unproven/Experimental treatment:** Treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.