

Dear Valued Customer,

We thank you for choosing Assuria as your preferred insurer.

Please see below for the **TERMS and CONDITIONS** relating to your policy.

- **Waiting Periods**

- a) Optical – 3 months
- b) Dental – 3 months
- c) Maternity – 6 months
- d) Pre-existing conditions – 6 months

- **Premiums**

Premiums are due on or before the date the policy fell due. A grace period of one month is allowed for the payment of premium, if the premium is not paid before the expiration of the period then policy shall be terminated.

- **Indebtedness**

The amount not eligible under the plan as a result of the benefit being exhausted or not covered results in an 'indebtedness'. This amount will be communicated to insured who is required to pay within 21 working days from receipt of letter. Failure to do so will result in the credit facility arrangement being cancelled or put on hold.

- **Dependents Coverage**

Dependents are any unmarried children legitimate or illegitimate including legally adopted children, who are less than 19 years old, or those children of the Member who are under 25 years who would otherwise qualify as a dependant provided such dependant is a full-time student at a University or any similar institution of learning and provided further that such children are dependant on the Member for support. Evidence of such qualification and support satisfactory to the Insurer must be furnished by the Member.

- **Termination**

The medical card issued is the property of Assuria and should be returned upon the termination of the insurance.

- **Claiming**

Claims are required to be submitted to Assuria within 90 days from the date of visit. The Claim should be accompanied by a completed Assuria claim form, receipts, and breakdown of costs (if applicable).

- **NIS/ other Insurance Company**
Should the policyholder be claiming from NIS or any other insurance Company, then the original receipt/s should be submitted to the first insurer who the claim is submitted to. The second insurer will require certified copies of the receipts and a breakdown of the reimbursement received from the first insurer along with a claim form.

- **Hospitalization**
In the event of a hospitalization either emergency or planned, the insured is require to provide a quotation/ bill from the medical provider in order to obtain a Guarantee Letter from Assuria.

- **Exclusions**

The following are not covered:

- a) Fertility/ Infertility testing (consultation, procedure, labs, drugs, etc.)
- b) Pregnancy for dependent's children.
- c) Self-inflicted injuries
- d) STI/ STD (Syphilis, Herpes, Genital Warts, Chlamydia etc.)
- e) Liposuction
- f) Cosmetic treatment: (laser treatment, face wash, cleanser, shampoo, moisturizer, hair removal, skin lightening, chemical peel/ microdermabrasion)
- g) Voluntary termination of pregnancy
- h) Inoculation (Vaccines)
- i) Preventative Care (Medical check-up)

Optical:

- a) Service charge
- b) Sunglasses, unless medically required

Dental:

- a) Braces
- b) Retainers
- c) Toothbrush
- d) Toothpaste
- e) Mouthwash
- f) Whitening



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Mr. Yogindra Arjune
Managing Director