



Dear Sir,

QUOTATION FOR SURGICAL & HOSPITAL EXPENSES INSURANCE SCHEME

We thank for having invited us to quote for the renewal of the above insurance and we would like to inform our premiums & benefits for your kind consideration.

INPATIENT BENEFIT	PLAN 01
[O1] Hospital & Nursing Home Maintenance Charges including Room Charges limit. Consultant's and Specialist's Fees , Surgeon's and Anesthetists Fees, Medical and Operational Expenses, Nursing Charges including use of operating theatre. Investigations & Special Treatment on the Recommendation Consultant Specialist on Hospitalization.	500,000
[O2] Government Hospital per day allowance (Non paying wards Max .15 days) (One night Considered a day)	2,000
CHILD BIRTH BENEFITS (PRIVATE HOSPITALS) *	
[O1] Vaginal child Birth (Normal child birth cover) (Applicable to family unit or Married employee)	Up to the limit
[O2] Maximum amount payable for Instrumental Child birth (Forceps and vacuum delivery) (Applicable to family unit or Married employee)	Up to the limit
[O3] Caesarian Child Birth Cover (Maximum Limit) (Applicable to family unit or Married employee)	Up to the limit
OTHER BENEFITS	
[O1] Cost of Lens Kit for Catract surgery (Maximum Limit)	75,000
[O2] Expenses incurred on drugs purchased & Test, Scans, X-rays undergone whilst being an In-patient in a non paying Government hospital	150,000
[O3] Spectacles cover for judge (once in 02 years and should be prescribed by an Eye specialist)	15,000

All above benefits are paid within the annual limit

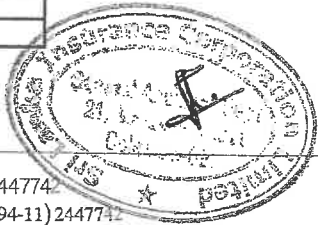
LIMITS	Plan 01
ANY ONE EVENT / ANY YEAR LIMIT	500,000

OUTPATIENT BENEFITS (Individual / Family)	Plan 01
Cost of drugs (Excluding vitamins) prescribed by Specialist / MBBS Doctor / General Practitioner or Registered Ayurvedic Doctor, Specialist Consultants fees Tests & Investigations, X-rays, Scans, Eye tests, Precautionary Vaccination covered Vaccination covered (Government scheduled existing vaccinations only/ epidemic and pandemic diseases vaccination not covered) OPD Ayurvedic treatments recommended by qualified Ayurvedic doctors Eg DAMS Dental treatments (excluding dentures/polishing & scaling) Spectacles for spouse Rs. 7,500/- within OPD limit (Once in 2 Yrs) (Prescribed by an Eye specialist)	35,000

Premium
 VAT CHARGED ON HOSPITALISATION BILLS PAYABLE WITHIN INDOOR BENEFIT

PREMIUM (Excluding Taxes)	Plan 01
Individual (Judge Only)	69,300
Family - 1 - Judge and spouse only	78,000
Family - 2 - Judge, Spouse and any number of children	84,000
Family - 3 - Unmarried judge and parents	84,000

(above premiums are subject to admin fees 2.9141% & 15% vat, policy fee 500/- and subject to government tax revisions.)



(41) Insured Person-

- (I) An Individual - Employee only.
- (II) Family Unit 1- Employee, spouse.
- (III) Family Unit 11- Employee, spouse and any number of children.
- (IV) Family Unit 111- Unmarried employee and parents.

(42) Age Limit

- (I) Employee 18-70 Years / Spouse 18-70 Years / Children 0- 25 Years(unmarried & unemployee) _ (Last birth day)

(43) Waiting Period

- (I) 10 months maternity waiting period is applicable for maternity claims. Unless otherwise the insured has Continued cover from any other insurer.
- (II) Minimum stay of 6 hours in the Hospital is considered as an admission. This is not applicable for surgeries.

(44) Child Birth Cover

- (I) Pregnancy related ailments are covered. Sub-fertility/ fertility investigation reports fees and consultant fees are covered, under OPD Benefit recommended by VOG consultant doctors.

(45) Other Benefit

- (I) In the event of a hospitalization, the follow up drugs are allowed for two weeks.
- (II) Cover for OPD Surgeries under L/A (Surgeries available with out hospitalization) within indoor limit ,maximum up to Rs:75,000/- done by a general surgeon .(All superficial skin & subcutaneous surgeries including removal of Abscess, Cysts , Warts Gangrenes , Lumps , Hematomas , Nails , Lymphomas , Furuncles , Callosities , Keloids, Skin Tags & External Manipulations of Fractures & Traumas) , Excluding Dental.
- (III) Following tests expenses are re-imbursed under indoor limit on the recommendation of the Doctor, without admission to the Hospital. There is no direct settlement for such payments.
 - a) MRI b) Endoscopy c) Colonoscopy d) Bronchoscopy e) sigmoidoscopy f) CT Scans
 *The doctor's charges payable for Endoscopy, Colonoscopy and related procedures would be the maximum of Rs.20,000/- each.

(46) Terms & Condition

- (I) All the professional charges/Doctors' fees and Medical expences will be paid on market rates.
- (II) Ref feral letter for hospital admission should be submitted prior to hospitalization other than admission though ETU.
- (III) Annual limits cannot be upgraded in-between the policy year.
- (IV) Test, Investigation, Spectacles , Medical Check up reports issued through Mobile Clinics are not entertained.
- (V) Doctor channeling receipts/description issued through opticians will not be entertained.
- (VI) Dental treatments should not be granted under indoor limit except surgeries performed under general anesthesia. Maximum doctor charges limited to Rs.75,000/- .
- (VII) Geographical area is in Sri Lanka.(Contracted or Tretment taken)/Overseas treatment are not covered.
- (VIII) External appliances are not covered.
- (IX) Following Ayurvedic Hospitals are entitled for indoor claims(Gampaha wickramarachchi Hospital/ Siddhalepa Hospital/ Borella Ayurvedic Hospital/ Pilapitiya and Government Ayurvedic Hospitals) Accepuncher/ homeopathy/Healinpathy/Osteopathy treatment are not covered.
- (X) Cost of expenses or per day allowances of the hospitals under the welfare Schemes Will not be entertained within the policy.
- (XI) Spectacle to be prescribed by an eye specialists. Prescription should be obtain from government hospital or registered private hospital or registered channeling centers. Prescriptions are not accepted from optical centers. (Maximum validity period of spectacles prescription should be 06 months from the date of issue)

(47) Exclusions

- (I) Occasioned by or happening through. Attempted Suicide (whether felonious or not) Alcoholism, Psychiatric treatments , Psychiatric Mental or nervous disorders leading to insanity.
- (II) An insured suffering from any physical defect or infirmity which existed prior enrollment under the policy unless notice is given to and accepted by the Corporation
- (III) Participation in Strikes or Riots.
- (IV) Services of a non medical nature provided by a hospital such as television, telephone, telex-services, extra diet, radios and other similar facilities.
- (V) Congenital Conditions.
- (VI) Expenses Arising as a result of cosmetic surgery, cosmetic treatment and plastic surgery other than in the Event of an accidental injury
- (VII) Medical or chemical contraceptives methods of Birth control treatment , infertility, sub-fertility,
- (VIII) Expenses for Lasic Treatment.
- (IX) Expenses for any routine or prescribed medical checkup or examination, external and or durable Medical / Non medical equipment of any kind used for diagnosis and/or treatment and/or treatment and/or monitoring and/or maintenance and/ or support including CPAP, CAPD Infusion pump, oxygen concentrator etc, ambulatory devices like walker, crutches, belts, collars, caps, splints, stings, braces, stockings, gloves, hand soaps etc. of any kind, Diabetic footwear, Glucometer / thermometer and similar related items and also any medical equipment, which are subsequently used at home, administrative fees, biomedical waste fees, medical records charges and any luxury taxes.
- (X) Medical expenses relating to any Hospitalization primarily for diagnostic, X-ray or any other investigations.
- (XI) Venereal Disease and Any sexually transmitted diseases or any condition directly or indirectly caused by or Associated with Human Immune Deficiency Virus (HIV) or any Syndrome or condition of a Similar kind commonly referred to as AIDS (Acquired Immune Deficiency Syndrome) .
- (XII) Medical administration charges incorporated to the bill being issued by all hospitals will not be entertained under policy.
- (XIII) Bills issue from Special clinics, promotional packages conducted by insured concerned and or third party organization
- (XIV) Doctor's channeling receipts ,prescriptions issued through opticians.
- (XV) Precautionary tests and screening tets (Eg: PCR)



(10) Membership

- (1) The membership should not be less than 360.
 - * Premiums is quoted on the understanding that at less 360 employees will be enrolled under this insurance, in the event that there is a deduction in the member count, we have the right to revised the premium.
 - (2) Member/dependant inclusions / Deletions. New Inclusions Annual Premium will be charged.
 - Deletions - Premium will be refunded on pro rata basis subject to no claims, if there are claims, premium will not be refunded. (when the claims ratio exceeds the net premium received at the time of deletion, premium will not be refunded.)
 - (3) In respect of a new employee, new born & newly married, mid way inclusion are granted subject to documentary proof as detailed below:-
 - * New Employee - Letter from employee on their letter head.
 - * New Born - Copy of Birth Certificate.
 - * Newly Married - Copy of Marriage Certificate.
- All dependant inclusions for employees should be done within one month from the inception date.

(11) Claims Settlement

- (1) Claims are settled on re-imburement basis. Direct settlement is only for approved hospitals as per the attached Hospital list
 - * Private Hospital Definitions.
 - (a) List of hospital which are approved by SLIC for on the spot settlement.
 - (b) Hospital registered under private health service regulatory council (PHSRC) as a private hospital other than unapproved hospitals by SLIC.
- (2) Re-imburement Claims should be submitted to the claims department within 90 days from the bill date, At the end of the policy period, all outstanding claims including re-submissions should be submitted within 30 days.
 - Required documents for re-imburement
 - (a) Duly filled Indoor claim form. (b) Original or certified diagnostic ticket copy. (c) Original hospital bills/Detail bill. (d) Original payment receipts. (e) Any other relevant documents (if necessary)
- (3) Health plus card is valid for admission to approved hospital but it's is not a certificate of insurance.

(12) Quotation Validity Period

- (1) This quotation is valid up to 01st September 2023

(13) Epidemic & pandemic cover (COVID 19)

- (1) Admission for the government hospital due to epidemic & pandemic cover will be paid Rs. 2,000/- Per day maximum up to 14 days within government hospital per day limit.
- (ii) Admission for private hospital or any facilities run by approved Private hospital due to epidemic & pandemic cover would be payable within inpatient limit subject to provide details breakup of hospital bill. However, Covid patient's admission to private hospital wards/ICU due to complications of the Covid (Ex: -Pneumonia) will be considered within inpatient limit.
- (iii) Approved intermediately care center maintained by Health Ministry registered private Hospitals (PHSRC) also covered under this facility. (Medical Centers are not covered) (Details bill should be provided in favor of hospital name)
- (iv) In the event that no detailed breakup of the bill is given and only a flat amount per day is shown on the bill, we will pay Rs. 10,000/- per day for a maximum up to 10 days within above given limit for cover. single patient admission allowed only for single package expenses including single room rate. double room or triple room package are not allowed for single patient. Admission for Luxury rooms are not allowed for any patient.
- (v) The above benefit is available for patient with a PCR test result positive report approved by relevant authority.

- (01) VAT charged on hospitalization claims will be paid within inpatient limit.
- (02) This offer is granted with the understanding that the insured's insurance portfolio to be placed with Sri Lanka Insurance Corporation Limited. (Stand alone surgical policies will not be issued)
- (03) Sri Lanka Insurance Corporation Limited reserves the rights to withdraw Quotation &/or Change Premium &/or terms & conditions prior to accept proposal &/or issue Policy based on change of risk information

Special Note: These premiums are quoted in consideration of the prevailing tax structure and therefore the benefit too will be based on the same. Any changes to the taxes in respect of claims will not be entertained within the policy period. We hope that the above details will be acceptable to you and look forward to hearing from you early. Assuring you of our best services at all times.

Yours faithfully,
SRI LANKA INSURANCE CORPORATION LIMITED,

Handwritten:
Manager, 8/6/2023
Surgical & Health Insurance.

H. H. SHANEEG DE SILVA
Assistant Manager
SHE/PA - UW & Claims
Sri Lanka Insurance Corporation Ltd.