

**Star Group Health Insurance**  
**Unique id : SHAHLGP19028V011819**  
**Policy Schedule**

<b>Policy No.</b> : P/161200/01/2021/005129	<b>Previous Policy No.</b> : P/161200/01/2020/004064
Proposer's Code : 9655956	GSTIN : 07AAJCS4517L1Z0
Proposer's Name : SOUTH ASIAN UNIVERSITY	SAC Code : 997133/Accident and Health Insurance Services
Address : AKBAR BHAWAN CHANAKAYAPURI NEW DELHI - 110021 New Delhi, South West, Delhi-110021	Issuing Office Code : 161200 Issue Office Name : Area Office 2 DELHI Address : G-8, First Floor, Hauz Khas Market New Delhi 110016
Phone No : 0/9000000000/ Email id :	Phone No : 011-40572101 - 09 Email id : delhi.ao2@starhealth.in
Proposer GSTIN : UIN0717UNO00175UNQ	Place of Supply : Delhi / State Code : 07
Receipt No : 1203004843	Fulfiller Code : SH32581
Receipt Date : 24/07/2020	<b>Intermediary Code : BA0000242676</b>
Premium : Rs. 5,72,208 CGST @9% : 51,499 /- SGST/UTGST@9%: 51,499 /- Stamp Duty : Re. 1 Total Premium : Rs. 6,75,206	<b>Name : Mr.SADANAND KUMAR</b> <b>Phone : 9911385099/9935082456</b> <b>Email id : sadanand1988lakshmi@gmail.com</b>

Total Premium in words	: Indian Rupees Six Lakhs Seventy Five Thousand Two Hundred Six Only
Period Of Insurance From	: 01/08/2020 00:00:00 Hrs To Midnight Of : 31/07/2021 23:59:59
<b>Co-insurance</b>	

**Risk Coverage Details**


No. of Employees / Members Covered	364
No. of Dependents Covered	0
Total No. of Persons covered	364
Sum Insured Slab	Rs. 1,50,000/- only
Total Sum Insured	Rs. 5,46,00,000/- only
Total Sum Insured (in words)	Indian Rupees Five Crores Forty-Six Lakhs Only

**Extensions Offered**

30 days waiting Period	Exclusion no.1 appearing in the policy clause stands deleted
First Year Exclusion	Exclusion no.2 appearing in the policy clause stands deleted

Entered by : SH6614  
Approved by : SH18630  
Place :  
Date : 05/08/2020

For and on behalf of  
Star Health and Allied Insurance Company Ltd.

  
Authorised Signatory  
Please see overleaf

**IRDAI Regn. No 129**  
**Corporate Identity Number U66010TN2005PLC056649**  
**Email ID : info@starhealth.in**

Attached to and forming part of Policy No : P/161200/01/2021/005129

First Two Year Exclusion	Exclusion no.3 appearing in the policy clause stands deleted
Pre-existing Diseases Exclusion	Exclusion no.4 appearing in the policy clause stands deleted

**Special Conditions**

Family Definition	Individual SI ( Students only )
Room Rent limits including Boarding, Nursing Charges, etc,	<p>Restricted to 2% of sum insured subject to a maximum of Rs.4000/-per day and No Limit in ICU.</p> <p>If the Insured occupies a room with a room rent limit other than his eligibility as per the insurance policy, all the other charges shall be limited to the charges applicable for the eligible room rent or actuals, whichever is lower.</p> <p>Treatment in our network hospitals only, However in the case of Medical Emergencies &amp; Accidents, treatment can be taken in other Hospitals. In all cases immediate intimation shall be given to our Call Center within 24 hours of Hospitalisation.</p>
Pre & Post Hospitalisation limits	Pre Hospitalisation - 30 Days and Post Hospitalisation - 60 Days
Ambulance Expenses limits	Emergency ambulance charges up-to a sum of Rs.750/- per hospitalization and overall limit of Rs.1,500/- per policy period.
Sub Limits	Sublimits only for Cataract Rs.20,000/- per eye.
Addition / Deletion of Employees & Dependents	<p>Insured will be allowed a window period of 30 days from the policy Inception date to review the Stdents list covered under the policy . All Addition / deletion / Correction of the persons to be done subject to additional premium . if there is a change in the group size.</p> <p>After the inception of the Policy, NO midterm inclusion of any employee unless he is a new joinee and such inclusion is also subject to payment of additional premium on pro rata basis. For newly joined employees, the Insured shall provide the date of joining.</p> <p>We agree for providing cover for additions from the date of joining of the new employee by charging prorata premium from the date of joining till the expiry of the policy, subject to maintenance of free and adequate balance under Cash Deposit maintained by the Insured with us or the coverage will be effective from the date of payment of premium.</p> <p>The Insured shall submit of list of additions and deletions on monthly basis to reach us at the latest by the 10th of subsequent month.</p>
Other conditions	We shall issue photo ID cards in respect of all the covered persons and we require the passport size/stamp size photo for the same.

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Attached to and forming part of Policy No : P/161200/01/2021/005129

	AYUSH Treatment: Expenses incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a Government Hospital or in any institute recognized by the government and/or accredited by the Quality Council of India/National Accreditation Board on Health up to 25% of the sum insured subject to a maximum of Rs.25,000/- per policy period. All Day Care Procedures covered.  All Day Care Procedures covered.
Other conditions	All Other Terms & Conditions Subject to printed Policy (Star Group Health Insurance Policy) Clauses attached
Claims will be settled through Inhouse claims team.	

**Sector Classification :**

Urban Social	Informal Sector	Informal Sector includes small scale, self-employed workers typically at a low level of organisation and technology, with the primary objective of generating employment and income, with heterogeneous activities like retail trade, transport, repair and maintenance, construction, personal and domestic services and manufacturing, with the work mostly labour intensive, having often unwritten and informal employer-employee relationship
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**Renewability:** In the event of the group policy being discontinued or not renewed or when the members of the group leave the group on account of resignation/retirement/termination or otherwise, the following provision shall apply.

**The cover for the persons covered earlier under the group policy will be granted only as per standard retail policies. However, in respect of persons who have been covered continuously for a period of one year under the group policy with our Company, we shall waive the 30 days waiting period and First year exclusions. In respect of persons who have been covered continuously for a period of two years under the group policy with our Company, we shall waive the 30 days waiting period, First year exclusions and First two year exclusions.**

**In respect of persons who have been continuously covered for a period a four years under the group policy with our Company, we shall grant cover for Pre Existing diseases also.**

**Condition precedent:** In the event of any claim under the policy or intimation should be given to the company immediately, through toll free no: 1800 425 2255 or 1800 102 4477, 044 2826 3300 (chargeable), or email: support@starhealth.in or fax - 1800 425 5522.


STAR value added unique services : Web enabled service for Policy details and health tips  
Inhouse Cashless facility for treatment at network hospitals across india.  
24\*7 customer care center  
Free General Physician advice

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

The insurance under this policy is subject to conditions, clauses, warranties, endorsements as per forms attached.

Entered by : SH6614  
Approved by : SH18630  
Place :  
Date : 05/08/2020

For and on behalf of  
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**TAX Invoice**

Invoice No. : 7E203Y21P0000125	Customer ID : CB0000029535
Invoice Date : 04/08/20	Policy No : P/161200/01/2021/005129
<b>Recipient</b>	<b>Supplier</b>
GSTIN : UIN0717UNO00175UNQ	GSTIN : 07AAJCS4517L1Z0
Proposer's Name : SOUTH ASIAN UNIVERSITY	NAME : Star Health and Allied Insurance Co Ltd - Area Office 2 DELHI
Address : AKBAR BHAWAN CHANAKAYAPURI NEW DELHI - 110021	Address : G-8, First Floor, Hauz Khas Market New Delhi 110016
City :	City : AREA OFFICE 2 DELHI
State : Delhi	State : Delhi
Pincode : 110021	Pincode : 110016
Client Category : CORP	Place of Supply : 7 - Delhi

HSN / SAC Code	Description of Service(s)	Total A	Discount B	Taxable Value C = A - B	IGST @ 18% D = C * IGST	CGST @9% E = C *CGST	UT/SGST@9% F = C *UTGST or SGST	CESS@1% G=C*Cess	Total Invoice Value H=C+D+E+F+G
997133	Insurance Services	572208	0	572208		51499	51499		Rs. 6,75,206

Total Invoice Value (in Figures) : Rs. 6,75,206

Total Invoice Value (in Words) : Indian Rupees Six Lakhs Seventy Five Thousand Two Hundred Six Only

Amount of Tax Subject to reverse Charge : No

**Important Note:**

The invoice is issued as per Section 31 of the CGST Act

In case no GSTIN or incorrect GSTIN is provided by the Proposer at Proposal stage, Star Health and Allied Insurance Co Ltd shall not be responsible for any Input Tax Credit losses and no subsequent revision of invoice will be undertaken.

**E. & O.E**

This is a digitally signed document and hence no physical signature is required

**IRDAI Regn. No 129 Corporate Identity Number U66010TN2005PLC056649 Email ID : stargst@starhealth.in**

Entered by : SH6614  
Approved by : SH18630  
Place :  
Date : 05/08/2020

For and on behalf of  
Star Health and Allied Insurance Company Ltd.

  
Authorised Signatory  
Please see overleaf

## INSURED PERSON DETAILS :

No of Persons Covered : 364

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
1	Mr.Chimi Dendup	Students-School And College	SAU/A M(M)/20 19/01	Others	07/02/1996	24	5	Male	150000	96559562100000100	
2	Mr.Ali Niazi	Students-School And College	SAU/A M(M)/20 19/02	Others	10/03/1996	24	4	Male	150000	96559562100000200	
3	Ms.Kezang Yuden	Students-School And College	SAU/A M(M)/20 19/03	Others	06/09/1990	29	10	Female	150000	96559562100000300	
4	Mr.Liaqat	Students-School And College	SAU/A M(M)/20 19/04	Others	20/05/1996	24	2	Male	150000	96559562100000400	
5	Mr.Bilal Noori	Students-School And College	SAU/A M(M)/20 19/05	Others	28/05/1994	26	2	Male	150000	96559562100000500	
6	Mr.Mahdi Rezai	Students-School And College	SAU/A M(M)/20 19/06	Others	13/04/1988	32	3	Male	150000	96559562100000600	
7	Mr.Din Mohammad Yosufi	Students-School And College	SAU/A M(M)/20 19/07	Others	01/12/1994	25	8	Male	150000	96559562100000700	
8	Mr.Ahmad Farhad Zahir	Students-School And College	SAU/A M(M)/20 19/08	Others	05/01/1996	24	6	Male	150000	96559562100000800	
9	Mr.Abdul Tamim Karimi	Students-School And College	SAU/A M(M)/20 19/09	Others	15/12/1995	24	7	Male	150000	96559562100000900	
10	Ms.Sabira Sultana	Students-School And College	SAU/A M(M)/20 19/10	Others	03/04/1994	26	3	Female	150000	96559562100001000	
11	Mr.Hezbollah Rahimi	Students-School And College	SAU/A M(M)/20 19/11	Others	04/09/1996	23	10	Male	150000	96559562100001100	
12	Mr.Mohammad Ali Tamim	Students-School And College	SAU/A M(M)/20 19/12	Others	22/10/1996	23	9	Male	150000	96559562100001200	
13	Mr.Gul Agha Jan	Students-School And College	SAU/A M(M)/20 19/13	Others	27/09/1991	28	10	Male	150000	96559562100001300	
14	Mr.Aayushman Raina	Students-School And College	SAU/A M(M)/20 19/14	Others	05/05/1998	22	2	Male	150000	96559562100001400	
15	Mr.Ekansh Mallik	Students-School And College	SAU/A M(M)/20 19/15	Others	13/01/1999	21	6	Male	150000	96559562100001500	
16	Ms.Shallu Nanda	Students-School And	SAU/A	Others	26/02/1998	22	5	Female	150000	96559562100001600	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	M(M)/20 19/17								
17	Ms.Nisha	Students-School And College	SAU/A M(M)/20 19/18	Others	30/09/1998	21	10	Female	150000	96559562100001700	
18	Ms.Kirti Singh	Students-School And College	SAU/A M(M)/20 19/19	Others	22/07/1998	22	0	Female	150000	96559562100001800	
19	Mr.Ankit Kumar	Students-School And College	SAU/A M(M)/20 19/20	Others	22/09/1999	20	10	Male	150000	96559562100001900	
20	Mr.Shikhar Gupta	Students-School And College	SAU/A M(M)/20 19/21	Others	06/12/1999	20	7	Male	150000	96559562100002000	
21	Mr.Shubham Singh	Students-School And College	SAU/A M(M)/20 19/22	Others	08/12/1998	21	7	Male	150000	96559562100002100	
22	Mr.Maniya Paras Vinubhai	Students-School And College	SAU/A M(M)/20 19/23	Others	31/12/1996	23	7	Male	150000	96559562100002200	
23	Ms.Simran Chhabra	Students-School And College	SAU/A M(M)/20 19/24	Others	19/11/1996	23	8	Female	150000	96559562100002300	
24	Mr.Riaz Mahmud	Students-School And College	SAU/A M(M)/20 19/25	Others	28/04/1996	24	3	Male	150000	96559562100002400	
25	Mr.Md. Alamin	Students-School And College	SAU/A M(M)/20 19/26	Others	15/10/1995	24	9	Male	150000	96559562100002500	
26	Ms.Shirani Punniyamoorthy	Students-School And College	SAU/BI O(M)/20 19/01	Others	29/12/1993	26	7	Female	150000	96559562100002600	
27	Mr.Bivek Pokharel	Students-School And College	SAU/BI O(M)/20 19/02	Others	17/08/1995	24	11	Male	150000	96559562100002700	
28	Mr.Rupak Parajuli	Students-School And College	SAU/BI O(M)/20 19/03	Others	02/12/1994	25	7	Male	150000	96559562100002800	
29	Mr.Sharad Paneru	Students-School And College	SAU/BI O(M)/20 19/04	Others	18/06/1993	27	1	Male	150000	96559562100002900	
30	Mr.Dawa	Students-School And College	SAU/BI O(M)/20 19/05	Others	11/03/1997	23	4	Male	150000	96559562100003000	
31	Mr.Deo Kumar Rai	Students-School And College	SAU/BI O(M)/20 19/06	Others	15/02/1993	27	5	Male	150000	96559562100003100	
32	Ms.Ugyen Dema	Students-School And	SAU/BI	Others	19/04/1997	23	3	Female	150000	96559562100003200	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(M)/20 19/07								
33	Ms.Sonam Yangdon	Students-School And College	SAU/BI O(M)/20 19/08	Others	12/10/1996	23	9	Female	150000	96559562100003300	
34	Mr.Irshad Arshad	Students-School And College	SAU/BI O(M)/20 19/09	Others	15/01/1996	24	6	Male	150000	96559562100003400	
35	Ms.Munira Haque	Students-School And College	SAU/BI O(M)/20 19/10	Others	06/06/1995	25	1	Female	150000	96559562100003500	
36	Mr.Hedayaturahman Habibzai	Students-School And College	SAU/BI O(M)/20 19/11	Others	10/02/1993	27	5	Male	150000	96559562100003600	
37	Ms.Vranda	Students-School And College	SAU/BI O(M)/20 19/12	Others	01/03/1997	23	5	Female	150000	96559562100003700	
38	Mr.Vishal Dey	Students-School And College	SAU/BI O(M)/20 19/13	Others	15/09/1998	21	10	Male	150000	96559562100003800	
39	Ms.Arushi Jain	Students-School And College	SAU/BI O(M)/20 19/14	Others	22/09/1998	21	10	Female	150000	96559562100003900	
40	Ms.Nandini Mehrotra	Students-School And College	SAU/BI O(M)/20 19/15	Others	27/12/1997	22	7	Female	150000	96559562100004000	
41	Mr.Manik Goel	Students-School And College	SAU/BI O(M)/20 19/17	Others	30/06/1998	22	1	Male	150000	96559562100004100	
42	Ms.Disha Sharma	Students-School And College	SAU/BI O(M)/20 19/18	Others	16/05/1999	21	2	Female	150000	96559562100004200	
43	Ms.Mahima Kumari	Students-School And College	SAU/BI O(M)/20 19/19	Others	21/04/1999	21	3	Female	150000	96559562100004300	
44	Ms.Shambhavi Dwivedi	Students-School And College	SAU/BI O(M)/20 19/20	Others	25/09/1997	22	10	Female	150000	96559562100004400	
45	Ms.Prerna Yadav	Students-School And College	SAU/BI O(M)/20 19/21	Others	06/11/1997	22	8	Female	150000	96559562100004500	
46	Ms.Aradhana Gangwr	Students-School And College	SAU/BI O(M)/20 19/22	Others	20/07/1994	26	0	Female	150000	96559562100004600	
47	Ms.Shivani Vohra	Students-School And College	SAU/BI O(M)/20 19/25	Others	14/11/1997	22	8	Female	150000	96559562100004700	
48	Ms.Ritika Das	Students-School And	SAU/BI	Others	26/02/1997	23	5	Female	150000	96559562100004800	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(M)/20 19/26								
49	Ms.Fahmida Altaf	Students-School And College	SAU/BI O(M)/20 19/27	Others	28/02/1990	30	5	Female	150000	96559562100004900	
50	Mr.Saidul Karim	Students-School And College	SAU/BI O(M)/20 19/28	Others	05/05/1995	25	2	Male	150000	96559562100005000	
51	Mr.Zargul	Students-School And College	SAU/BI O(M)/20 19/29	Others	01/01/1994	26	6	Male	150000	96559562100005100	
52	Mr.Sivang Goswami	Students-School And College	SAU/BI O(M)/20 19/23	Others	10/07/1998	22	0	Male	150000	96559562100005200	
53	Ms.Sonali Sambyal	Students-School And College	SAU/BI O(M)/20 19/24	Others	29/01/1997	23	6	Female	150000	96559562100005300	
54	Mr.Karma Dorji	Students-School And College	SAU/CS (M)/201 9/01	Others	28/04/1996	24	3	Male	150000	96559562100005400	
55	Ms.Jamyang Choden	Students-School And College	SAU/CS (M)/201 9/02	Others	05/09/1995	24	10	Female	150000	96559562100005500	
56	Mr.Ravi Kumar Gupta	Students-School And College	SAU/CS (M)/201 9/03	Others	21/07/1995	25	0	Male	150000	96559562100005600	
57	Mr.Khalilullah	Students-School And College	SAU/CS (M)/201 9/04	Others	18/04/1995	25	3	Male	150000	96559562100005700	
58	Ms.Nazifa Kazimi	Students-School And College	SAU/CS (M)/201 9/05	Others	12/09/1996	23	10	Female	150000	96559562100005800	
59	Mr.Md. Abdul Malek Chowdury	Students-School And College	SAU/CS (M)/201 9/06	Others	30/12/1996	23	7	Male	150000	96559562100005900	
60	Mr.M. Mohaiminul Islam	Students-School And College	SAU/CS (M)/201 9/07	Others	22/07/1994	26	0	Male	150000	96559562100006000	
61	Mr.Ashish Kumar	Students-School And College	SAU/CS (M)/201 9/08	Others	26/09/1997	22	10	Male	150000	96559562100006100	
62	Mr.Kamran Khan	Students-School And College	SAU/CS (M)/201 9/09	Others	26/12/1995	24	7	Male	150000	96559562100006200	
63	Mr.Sher Singh	Students-School And College	SAU/CS (M)/201 9/10	Others	04/04/1993	27	3	Male	150000	96559562100006300	
64	Ms.Nadira Ahmadi	Students-School And	SAU/CS	Others	23/10/1997	22	9	Female	150000	96559562100006400	



S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	(M)/201 9/11								
65	Ms.Kauveri Rawat	Students-School And College	SAU/CS (M)/201 9/12	Others	22/01/1997	23	6	Female	150000	96559562100006500	
66	Ms.Hina Gupta	Students-School And College	SAU/CS (M)/201 9/13	Others	31/08/1997	22	11	Female	150000	96559562100006600	
67	Mr.Hadi	Students-School And College	SAU/CS (M)/201 9/24	Others	05/01/1993	27	6	Male	150000	96559562100006700	
68	Ms.Kanishka Arora	Students-School And College	SAU/CS (M)/201 9/25	Others	07/03/1998	22	4	Female	150000	96559562100006800	
69	Ms.Avantika Gaur	Students-School And College	SAU/CS (M)/201 9/26	Others	10/09/1999	20	10	Female	150000	96559562100006900	
70	Ms.Priya Kesharwani	Students-School And College	SAU/CS (M)/201 9/27	Others	10/04/1998	22	3	Female	150000	96559562100007000	
71	Ms.Sonakshi Garg	Students-School And College	SAU/CS (M)/201 9/28	Others	16/05/1998	22	2	Female	150000	96559562100007100	
72	Mr.Ruhollah Yousufi	Students-School And College	SAU/CS (M)/201 9/29	Others	03/10/1995	24	9	Male	150000	96559562100007200	
73	Ms.J.Sweta	Students-School And College	SAU/CS (M)/201 9/30	Others	11/09/1997	22	10	Female	150000	96559562100007300	
74	Ms.Divyanshi Gupta	Students-School And College	SAU/CS (M)/201 9/15	Others	27/12/1998	21	7	Female	150000	96559562100007400	
75	Mr.Muskan	Students-School And College	SAU/CS (M)/201 9/16	Others	24/02/1998	22	5	Male	150000	96559562100007500	
76	Mr.Sayed Mortaza	Students-School And College	SAU/CS (M)/201 9/17	Others	20/10/1993	26	9	Male	150000	96559562100007600	
77	Mr.Mohammad Arqam	Students-School And College	SAU/CS (M)/201 9/18	Others	16/03/1998	22	4	Male	150000	96559562100007700	
78	Mr.Manjeet	Students-School And College	SAU/CS (M)/201 9/19	Others	09/10/1996	23	9	Male	150000	96559562100007800	
79	Mr.Debanjan Chakraborty	Students-School And College	SAU/CS (M)/201 9/23	Others	14/04/1998	22	3	Male	150000	96559562100007900	
80	Mr.Sudeepto Das	Students-School And	SAU/EC	Others	28/11/1998	21	8	Male	150000	96559562100008000	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(M)/20 19/01								
81	Ms.Preksha Jain	Students-School And College	SAU/EC O(M)/20 19/02	Others	11/08/1996	23	11	Female	150000	96559562100008100	
82	Mr.Abhishek Yadav	Students-School And College	SAU/EC O(M)/20 19/03	Others	20/11/1997	22	8	Male	150000	96559562100008200	
83	Ms.Sapnam Adhikari	Students-School And College	SAU/EC O(M)/20 19/04	Others	05/12/1993	26	7	Female	150000	96559562100008300	
84	Mr.Namgay Wangchuk	Students-School And College	SAU/EC O(M)/20 19/05	Others	02/03/1997	23	4	Male	150000	96559562100008400	
85	Mr.Mohammad Zarif Mohammadinia	Students-School And College	SAU/EC O(M)/20 19/06	Others	12/10/1993	26	9	Male	150000	96559562100008500	
86	Mr.Hashmatullah Shafiq	Students-School And College	SAU/EC O(M)/20 19/07	Others	02/01/1996	24	6	Male	150000	96559562100008600	
87	Ms.Diksha Pandey	Students-School And College	SAU/EC O(M)/20 19/24	Others	17/09/1997	22	10	Female	150000	96559562100008700	
88	Ms.Ritika Jain	Students-School And College	SAU/EC O(M)/20 19/26	Others	01/10/1999	20	9	Female	150000	96559562100008800	
89	Ms.Meghali Arora	Students-School And College	SAU/EC O(M)/20 19/27	Others	13/02/1998	22	5	Female	150000	96559562100008900	
90	Ms.Ramandeep Kaur Hora	Students-School And College	SAU/EC O(M)/20 19/28	Others	28/02/1995	25	5	Female	150000	96559562100009000	
91	Mr.Aditya Ranjan	Students-School And College	SAU/EC O(M)/20 19/29	Others	24/12/1998	21	7	Male	150000	96559562100009100	
92	Mr.Mohammad Khalil Taqawi	Students-School And College	SAU/EC O(M)/20 19/08	Others	31/08/1992	27	11	Male	150000	96559562100009200	
93	Mr.Mohammad Jawad Eshraq	Students-School And College	SAU/EC O(M)/20 19/09	Others	04/10/1993	26	9	Male	150000	96559562100009300	
94	Mr.Khair Mohammad	Students-School And College	SAU/EC O(M)/20 19/10	Others	11/10/1995	24	9	Male	150000	96559562100009400	
95	Mr.Mohammad Mustafa Noori	Students-School And College	SAU/EC O(M)/20 19/11	Others	01/05/1992	28	3	Male	150000	96559562100009500	
96	Mr.Sayed Esmat Sajjadi	Students-School And	SAU/EC	Others	29/03/1996	24	4	Male	150000	96559562100009600	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(M)/20 19/12								
97	Ms.Arпита S Abraham	Students-School And College	SAU/EC O(M)/20 19/13	Others	16/03/1998	22	4	Female	150000	96559562100009700	
98	Ms.Harshita Panda	Students-School And College	SAU/EC O(M)/20 19/14	Others	10/08/1997	22	11	Female	150000	96559562100009800	
99	Ms.Payal Sharma	Students-School And College	SAU/EC O(M)/20 19/15	Others	06/02/1999	21	5	Female	150000	96559562100009900	
100	Mr.Ajay Saharan	Students-School And College	SAU/EC O(M)/20 19/16	Others	03/11/1998	21	8	Male	150000	96559562100010000	
101	Ms.Aarushi Singh	Students-School And College	SAU/EC O(M)/20 19/17	Others	17/06/1999	21	1	Female	150000	96559562100010100	
102	Ms.Subhanshi Negi	Students-School And College	SAU/EC O(M)/20 19/18	Others	20/01/1997	23	6	Female	150000	96559562100010200	
103	Ms.Anshika Jain	Students-School And College	SAU/EC O(M)/20 19/19	Others	16/06/1999	21	1	Female	150000	96559562100010300	
104	Ms.Chahat Preet Kaur	Students-School And College	SAU/EC O(M)/20 19/20	Others	02/06/1997	23	1	Female	150000	96559562100010400	
105	Mr.Abdul Hussain	Students-School And College	SAU/EC O(M)/20 19/23	Others	24/04/1996	24	3	Male	150000	96559562100010500	
106	Ms.Sifat Umme Aiman	Students-School And College	SAU/LL M/2019/ 01	Others	12/03/1991	29	4	Female	150000	96559562100010600	
107	Mr.Jamiul Hasan Joy	Students-School And College	SAU/LL M/2019/ 02	Others	03/01/1996	24	6	Male	150000	96559562100010700	
108	Ms.Nirogini Thambaiya	Students-School And College	SAU/LL M/2019/ 03	Others	07/03/1991	29	4	Female	150000	96559562100010800	
109	Mr.Muhibullah Stanikzai	Students-School And College	SAU/LL M/2019/ 04	Others	15/02/1995	25	5	Male	150000	96559562100010900	
110	Mr.Awal Khan	Students-School And College	SAU/LL M/2019/ 05	Others	28/09/1991	28	10	Male	150000	96559562100011000	
111	Mr.Makan Tamang	Students-School And College	SAU/LL M/2019/ 06	Others	02/12/1993	26	7	Male	150000	96559562100011100	
112	Ms.Tasnim Binta Mukhlis	Students-School And	SAU/LL	Others	23/06/1995	25	1	Female	150000	96559562100011200	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	M/2019/07								
113	Mr.Samiul Mahmud Rokib	Students-School And College	SAU/LL M/2019/08	Others	05/02/1993	27	5	Male	150000	96559562100011300	
114	Mr.Atif Iqbal	Students-School And College	SAU/LL M/2019/09	Others	09/04/1990	30	3	Male	150000	96559562100011400	
115	Ms.Anupa Aryal	Students-School And College	SAU/LL M/2019/10	Others	18/04/1995	25	3	Female	150000	96559562100011500	
116	Ms.Prakriti Malla	Students-School And College	SAU/LL M/2019/11	Others	03/01/1996	24	6	Female	150000	96559562100011600	
117	Mr.Md. Al Imran Khan	Students-School And College	SAU/LL M/2019/12	Others	25/03/1986	34	4	Male	150000	96559562100011700	
118	Ms.Antarnihita Mishra	Students-School And College	SAU/LL M/2019/13	Others	22/03/1996	24	4	Female	150000	96559562100011800	
119	Mr.Saijeet Pratap Singh	Students-School And College	SAU/LL M/2019/15	Others	21/07/1998	22	0	Male	150000	96559562100011900	
120	Mr.Vivek Kumar	Students-School And College	SAU/LL M/2019/16	Others	14/11/1995	24	8	Male	150000	96559562100012000	
121	Mr.Subham Kumar Sahu	Students-School And College	SAU/LL M/2019/17	Others	19/08/1995	24	11	Male	150000	96559562100012100	
122	Mr.Sultan Mehmud	Students-School And College	SAU/LL M/2019/28	Others	15/07/1996	24	0	Male	150000	96559562100012200	
123	Mr.Syed Ehteshamuddin Ahmed	Students-School And College	SAU/LL M/2019/29	Others	11/07/1972	48	0	Male	150000	96559562100012300	
124	Mr.Asif Ali	Students-School And College	SAU/LL M/2019/18	Others	10/05/1996	24	2	Male	150000	96559562100012400	
125	Mr.Suyash Bharatiya	Students-School And College	SAU/LL M/2019/19	Others	12/05/1991	29	2	Male	150000	96559562100012500	
126	Ms.Nazneen Rasinna H	Students-School And College	SAU/LL M/2019/20	Others	25/09/1996	23	10	Female	150000	96559562100012600	
127	Ms.Deepika S	Students-School And College	SAU/LL M/2019/21	Others	10/02/1997	23	5	Female	150000	96559562100012700	
128	Mr.Rohan George	Students-School And	SAU/LL	Others	28/10/1993	26	9	Male	150000	96559562100012800	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	M/2019/ 22								
129	Mr.Praharsh Gour	Students-School And College	SAU/LL M/2019/ 23	Others	23/11/1994	25	8	Male	150000	96559562100012900	
130	Mr.Vikash Kumar	Students-School And College	SAU/LL M/2019/ 24	Others	02/06/1996	24	1	Male	150000	96559562100013000	
131	Mr.Ashwin Menon V	Students-School And College	SAU/LL M/2019/ 25	Others	30/12/1995	24	7	Male	150000	96559562100013100	
132	Mr.Mohd Imran	Students-School And College	SAU/LL M/2019/ 26	Others	01/07/1996	24	0	Male	150000	96559562100013200	
133	Mr.Jamshed Ahmad Siddiqui	Students-School And College	SAU/LL M/2019/ 27	Others	02/05/1996	24	2	Male	150000	96559562100013300	
134	Mr.Suraj Gautam	Students-School And College	SAU/IR( M)/2019 /01	Others	24/06/1994	26	1	Male	150000	96559562100013400	
135	Mr.Tek Raj Koirala	Students-School And College	SAU/IR( M)/2019 /02	Others	09/10/1996	23	9	Male	150000	96559562100013500	
136	Mr.Jigme Tshering	Students-School And College	SAU/IR( M)/2019 /03	Others	27/07/1997	23	0	Male	150000	96559562100013600	
137	Ms.Benafsha Attar	Students-School And College	SAU/IR( M)/2019 /04	Others	27/11/1996	23	8	Female	150000	96559562100013700	
138	Mr.Ramesh Gurung	Students-School And College	SAU/IR( M)/2019 /05	Others	01/01/1987	33	6	Male	150000	96559562100013800	
139	Ms.Tabassum Iqbal	Students-School And College	SAU/IR( M)/2019 /06	Others	29/10/1997	22	9	Female	150000	96559562100013900	
140	Mr.Homayoon	Students-School And College	SAU/IR( M)/2019 /07	Others	06/07/1991	29	0	Male	150000	96559562100014000	
141	Mr.Himadri Roy Chowdhury	Students-School And College	SAU/IR( M)/2019 /08	Others	15/12/1995	24	7	Male	150000	96559562100014100	
142	Mr.Muhibullah Shadan	Students-School And College	SAU/IR( M)/2019 /09	Others	15/09/1990	29	10	Male	150000	96559562100014200	
143	Mr.Rajib Kumar Das	Students-School And College	SAU/IR( M)/2019 /10	Others	02/01/1994	26	6	Male	150000	96559562100014300	
144	Mr.Hisham Eslam	Students-School And	SAU/IR( M)/2019 /11	Others	11/02/1992	28	5	Male	150000	96559562100014400	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	M)/2019/11								
145	Ms.Rituja Ghosh	Students-School And College	SAU/IR(M)/2019/12	Others	18/03/1997	23	4	Female	150000	96559562100014500	
146	Mr.Yash Singh	Students-School And College	SAU/IR(M)/2019/13	Others	13/09/1994	25	10	Male	150000	96559562100014600	
147	Mr.Prashant Panche	Students-School And College	SAU/IR(M)/2019/14	Others	17/08/1996	23	11	Male	150000	96559562100014700	
148	Mr.Abhishek Sharma	Students-School And College	SAU/IR(M)/2019/15	Others	16/01/1996	24	6	Male	150000	96559562100014800	
149	Mr.Kapil Kumar	Students-School And College	SAU/IR(M)/2019/17	Others	14/03/1996	24	4	Male	150000	96559562100014900	
150	Mr.Ashish Abhishek	Students-School And College	SAU/IR(M)/2019/19	Others	24/10/2000	19	9	Male	150000	96559562100015000	
151	Mr.Shubhangkar Roy Sarkar	Students-School And College	SAU/IR(M)/2019/20	Others	19/08/1998	21	11	Male	150000	96559562100015100	
152	Mr.Jayant Nariala	Students-School And College	SAU/IR(M)/2019/21	Others	17/06/1995	25	1	Male	150000	96559562100015200	
153	Mr.Sougat Roy	Students-School And College	SAU/IR(M)/2019/22	Others	11/06/1987	33	1	Male	150000	96559562100015300	
154	Mr.Yug Desai	Students-School And College	SAU/IR(M)/2019/25	Others	15/10/1996	23	9	Male	150000	96559562100015400	
155	Mr.Barat Ibrahim	Students-School And College	SAU/IR(M)/2019/27	Others	01/01/1994	26	6	Male	150000	96559562100015500	
156	Mr.Mohammad Amin	Students-School And College	SAU/IR(M)/2019/29	Others	20/06/1991	29	1	Male	150000	96559562100015600	
157	Mr.Reza	Students-School And College	SAU/IR(M)/2019/23	Others	25/07/1995	25	0	Male	150000	96559562100015700	
158	Mr.Ugyen Pelden	Students-School And College	SAU/SOC(M)/2019/01	Others	13/10/1996	23	9	Male	150000	96559562100015800	
159	Mr.Prashant Das	Students-School And College	SAU/SOC(M)/2019/02	Others	13/02/1989	31	5	Male	150000	96559562100015900	
160	Ms.Kinley Wangmo	Students-School And	SAU/S	Others	01/03/1998	22	5	Female	150000	96559562100016000	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	OC(M)/ 2019/03								
161	Ms.Asrin Sarker Urme	Students-School And College	SAU/S OC(M)/ 2019/04	Others	10/01/1993	27	6	Female	150000	96559562100016100	
162	Mr.Md. Zaminur Rahman	Students-School And College	SAU/S OC(M)/ 2019/05	Others	31/12/1995	24	7	Male	150000	96559562100016200	
163	Ms.Cheki Zangmo	Students-School And College	SAU/S OC(M)/ 2019/06	Others	28/02/1996	24	5	Female	150000	96559562100016300	
164	Mr.Md Rahamatullah	Students-School And College	SAU/S OC(M)/ 2019/07	Others	25/10/1997	22	9	Male	150000	96559562100016400	
165	Mr.Dorji Choda	Students-School And College	SAU/S OC(M)/ 2019/08	Others	15/02/1996	24	5	Male	150000	96559562100016500	
166	Ms.Ajita Krishnakumar	Students-School And College	SAU/S OC(M)/ 2019/09	Others	15/05/1993	27	2	Female	150000	96559562100016600	
167	Mr.Ashir Gil	Students-School And College	SAU/S OC(M)/ 2019/10	Others	04/06/1994	26	1	Male	150000	96559562100016700	
168	Mr.Mohammad Zia Nikzad	Students-School And College	SAU/S OC(M)/ 2019/11	Others	23/09/1993	26	10	Male	150000	96559562100016800	
169	Mr.Farshid Mirzadah	Students-School And College	SAU/S OC(M)/ 2019/12	Others	10/08/1994	25	11	Male	150000	96559562100016900	
170	Ms.Nandana Bhattacharjee	Students-School And College	SAU/S OC(M)/ 2019/13	Others	10/11/1997	22	8	Female	150000	96559562100017000	
171	Ms.Sudatta Ghosh	Students-School And College	SAU/S OC(M)/ 2019/14	Others	13/11/1997	22	8	Female	150000	96559562100017100	
172	Mr.Tridib Mukherjee	Students-School And College	SAU/S OC(M)/ 2019/15	Others	24/02/1998	22	5	Male	150000	96559562100017200	
173	Ms.Rachna Rai	Students-School And College	SAU/S OC(M)/ 2019/25	Others	12/05/1998	22	2	Female	150000	96559562100017300	
174	Mr.Aryaman Chatterjee	Students-School And College	SAU/S OC(M)/ 2019/16	Others	14/10/1997	22	9	Male	150000	96559562100017400	
175	Mr.Yogesh Upadhyay	Students-School And College	SAU/S OC(M)/ 2019/17	Others	11/06/1994	26	1	Male	150000	96559562100017500	
176	Mr.Buddha Prakash Dhamma	Students-School And	SAU/S	Others	10/10/1997	22	9	Male	150000	96559562100017600	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
	Piya Asoka	College	OC(M)/2019/18								
177	Mr.Fawaz Basheer	Students-School And College	SAU/S OC(M)/2019/19	Others	26/05/1998	22	2	Male	150000	96559562100017700	
178	Mr.Manuram K R	Students-School And College	SAU/S OC(M)/2019/20	Others	13/01/1997	23	6	Male	150000	96559562100017800	
179	Ms.Mahuwa Choudhury	Students-School And College	SAU/S OC(M)/2019/21	Others	27/10/1997	22	9	Female	150000	96559562100017900	
180	Ms.Ankita Goswami	Students-School And College	SAU/S OC(M)/2019/22	Others	21/07/1997	23	0	Female	150000	96559562100018000	
181	Mr.Pritish Menon	Students-School And College	SAU/S OC(P)/2019/04	Others	26/09/1995	24	10	Male	150000	96559562100018100	
182	Mr.Subhash Nepali	Students-School And College	SAU/S OC(P)/2019/03	Others	20/08/1979	40	11	Male	150000	96559562100018200	
183	Mr.Johns Thomas	Students-School And College	SAU/S OC(P)/2019/02	Others	13/09/1996	23	10	Male	150000	96559562100018300	
184	Mr.Md Raihan Raju	Students-School And College	SAU/S OC(P)/2019/01	Others	08/11/1991	28	8	Male	150000	96559562100018400	
185	Ms.Farjana Sharmin	Students-School And College	SAU/IR(P)/2019/01	Others	29/12/1989	30	7	Female	150000	96559562100018500	
186	Mr.Md. Khalilur Rahman	Students-School And College	SAU/IR(P)/2019/02	Others	12/01/1991	29	6	Male	150000	96559562100018600	
187	Ms.Akhila Nagar	Students-School And College	SAU/IR(P)/2019/03	Others	28/12/1992	27	7	Female	150000	96559562100018700	
188	Mr.Shivam Bahuguna	Students-School And College	SAU/IR(P)/2019/04	Others	01/10/1995	24	9	Male	150000	96559562100018800	
189	Mr.Aditya Roy	Students-School And College	SAU/LS(P)/2019/01	Others	15/01/1992	28	6	Male	150000	96559562100018900	
190	Ms.Apoorva Pathak	Students-School And College	SAU/LS(P)/2019/02	Others	26/02/1991	29	5	Female	150000	96559562100019000	
191	Mr.Siddharth Singh	Students-School And College	SAU/LS(P)/2019/03	Others	12/12/1991	28	7	Male	150000	96559562100019100	
192	Mr.H M V Herath	Students-School And	SAU/LS	Others	29/11/1974	45	8	Male	150000	96559562100019200	



S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	(P)/201 9/04								
193	Mr.Tarek Rahman	Students-School And College	SAU/LS (P)/201 9/05	Others	01/01/1991	29	6	Male	150000	96559562100019300	
194	Mr.Rashedul Islam	Students-School And College	SAU/LS (P)/201 9/06	Others	09/12/1991	28	7	Male	150000	96559562100019400	
195	Ms.Konica Sehgal	Students-School And College	SAU/EC O(P)/20 19/02	Others	29/09/1994	25	10	Female	150000	96559562100019500	
196	Ms.Ritwika Patgiri	Students-School And College	SAU/EC O(P)/20 19/03	Others	25/04/1996	24	3	Female	150000	96559562100019600	
197	Mr.Samyak Jain	Students-School And College	SAU/EC O(P)/20 19/04	Others	15/11/1995	24	8	Male	150000	96559562100019700	
198	Mr.Zahidullah Muhammadi	Students-School And College	SAU/EC O(P)/20 19/05	Others	21/03/1990	30	4	Male	150000	96559562100019800	
199	Ms.Shikha Verma	Students-School And College	SAU/A M(P)/20 19/01	Others	01/12/1996	23	8	Female	150000	96559562100019900	
200	Ms.Kavita	Students-School And College	SAU/A M(P)/20 19/02	Others	15/07/1994	26	0	Female	150000	96559562100020000	
201	Mr.Prathu Bajpai	Students-School And College	SAU/A M(P)/20 19/03	Others	18/12/1994	25	7	Male	150000	96559562100020100	
202	Mr.A. M. Mohiuddin	Students-School And College	SAU/A M(P)/20 19/04	Others	12/01/1994	26	6	Male	150000	96559562100020200	
203	Mr.Kumarapeli Arachhige Kaushalya Kumarasinghe	Students-School And College	SAU/S OC(P)/2 016/01	Others	04/11/1987	32	8	Male	150000	96559562100020300	
204	Ms.Anakshi Pal	Students-School And College	SAU/S OC(P)/2 016/02	Others	26/06/1992	28	1	Female	150000	96559562100020400	
205	Mr.Shray Mehta	Students-School And College	SAU/S OC(P)/2 016/03	Others	09/06/1987	33	1	Male	150000	96559562100020500	
206	Ms.Mumitha Madhu	Students-School And College	SAU/S OC(P)/2 016/04	Others	17/05/1993	27	2	Female	150000	96559562100020600	
207	Mr.Ajmal Kamal	Students-School And College	SAU/S OC(P)/2 016/06	Others	27/03/1959	61	4	Male	150000	96559562100020700	
208	Mr.Madhav Wagley	Students-School And	SAU/A	Others	30/12/1982	37	7	Male	150000	96559562100020800	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	M(P)/20 16/01								
209	Ms.Bableen Kaur	Students-School And College	SAU/A M(P)/20 16/03	Others	15/11/1993	26	8	Female	150000	96559562100020900	
210	Mr.Vivek Panwar	Students-School And College	SAU/A M(P)/20 16/04	Others	10/05/1992	28	2	Male	150000	96559562100021000	
211	Mr.Gajendra Babu	Students-School And College	SAU/A M(P)/20 16/05	Others	18/10/1994	25	9	Male	150000	96559562100021100	
212	Mr.Aditya Narayan Pandey	Students-School And College	SAU/A M(P)/20 16/06	Others	01/12/1990	29	8	Male	150000	96559562100021200	
213	Ms.Madhu	Students-School And College	SAU/BI O(P)/20 16/01	Others	29/10/1990	29	9	Female	150000	96559562100021300	
214	Mr.Md. Babu Mia	Students-School And College	SAU/BI O(P)/20 16/02	Others	25/11/1989	30	8	Male	150000	96559562100021400	
215	Ms.Fauzia Parween	Students-School And College	SAU/BI O(P)/20 16/03	Others	04/05/1991	29	2	Female	150000	96559562100021500	
216	Mr.Rabindra Kumar Mahato	Students-School And College	SAU/BI O(P)/20 16/04	Others	21/10/1988	31	9	Male	150000	96559562100021600	
217	Mr.Amit Kumar Mishra	Students-School And College	SAU/BI O(P)/20 16/05	Others	10/09/1992	27	10	Male	150000	96559562100021700	
218	Ms.Nerina Shahi	Students-School And College	SAU/BI O(P)/20 16/06	Others	24/10/1992	27	9	Female	150000	96559562100021800	
219	Ms.Sakshi Aggarwal	Students-School And College	SAU/BI O(P)/20 16/08	Others	21/05/1993	27	2	Female	150000	96559562100021900	
220	Mr.Animesh Sarker	Students-School And College	SAU/BI O(P)/20 16/09	Others	01/01/1989	31	6	Male	150000	96559562100022000	
221	Mr.Manvendra Janmajaya	Students-School And College	SAU/CS (P)/201 6/01	Others	02/11/1991	28	8	Male	150000	96559562100022100	
222	Ms.Sakshi Pandey	Students-School And College	SAU/CS (P)/201 6/02	Others	09/04/1987	33	3	Female	150000	96559562100022200	
223	Ms.Harshita Dalal	Students-School And College	SAU/CS (P)/201 6/04	Others	26/12/1988	31	7	Female	150000	96559562100022300	
224	Mr.Sajib Kumar Biswas	Students-School And	SAU/CS	Others	21/02/1988	32	5	Male	150000	96559562100022400	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	(P)/2016/05								
225	Ms.Jayati Gulati	Students-School And College	SAU/CS (P)/2016/07	Others	10/09/1989	30	10	Female	150000	96559562100022500	
226	Ms.Jessica Thacker	Students-School And College	SAU/EC O(P)/2016/01	Others	05/12/1993	26	7	Female	150000	96559562100022600	
227	Mr.Kabir Chugh	Students-School And College	SAU/EC O(P)/2016/02	Others	09/09/1992	27	10	Male	150000	96559562100022700	
228	Mr.Ishwor Adhikari	Students-School And College	SAU/EC O(P)/2016/03	Others	29/03/1992	28	4	Male	150000	96559562100022800	
229	Ms.Princy Jain	Students-School And College	SAU/EC O(P)/2016/05	Others	19/09/1990	29	10	Female	150000	96559562100022900	
230	Mr.Tariq Basir	Students-School And College	SAU/EC O(P)/2016/06	Others	31/12/1991	28	7	Male	150000	96559562100023000	
231	Mr.Mirwais Parsa	Students-School And College	SAU/EC O(P)/2016/07	Others	07/05/1993	27	2	Male	150000	96559562100023100	
232	Mr.Uddipta Ranjan Boruah	Students-School And College	SAU/IR(P)/2016/01	Others	07/01/1989	31	6	Male	150000	96559562100023200	
233	Mr.Johny Arokiaraj P	Students-School And College	SAU/IR(P)/2016/04	Others	03/05/1989	31	2	Male	150000	96559562100023300	
234	Mr.Bipin Ghimire	Students-School And College	SAU/IR(P)/2016/05	Others	22/02/1989	31	5	Male	150000	96559562100023400	
235	Mr.Rustam Ali Seerat	Students-School And College	SAU/IR(P)/2016/07	Others	22/04/1989	31	3	Male	150000	96559562100023500	
236	Ms.Bushra Tariq	Students-School And College	SAU/LS (P)/2016/02	Others	20/03/1988	32	4	Female	150000	96559562100023600	
237	Mr.M. Z. Ashraful	Students-School And College	SAU/LS (P)/2016/04	Others	07/07/1988	32	0	Male	150000	96559562100023700	
238	Mr.Parthiban B	Students-School And College	SAU/LS (P)/2016/05	Others	15/06/1991	29	1	Male	150000	96559562100023800	
239	Mr.Ahmad Fawad Poya	Students-School And College	SAU/LS (P)/2016/06	Others	10/03/1987	33	4	Male	150000	96559562100023900	
240	Ms.Harshita Bhasin	Students-School And	SAU/EC	Others	19/04/1994	26	3	Female	150000	96559562100024000	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(P)/20 17/01								
241	Ms.Rashika Arora	Students-School And College	SAU/EC O(P)/20 17/02	Others	28/10/1994	25	9	Female	150000	96559562100024100	
242	Mr.Abdul Ahmad Bahir	Students-School And College	SAU/EC O(P)/20 17/03	Others	01/01/1989	31	6	Male	150000	96559562100024200	
243	Ms.Divya Sharma	Students-School And College	SAU/A M(P)/20 17/01	Others	02/10/1993	26	9	Female	150000	96559562100024300	
244	Mr.Rohit Manglik	Students-School And College	SAU/A M(P)/20 17/03	Others	15/06/1992	28	1	Male	150000	96559562100024400	
245	Mr.Bishnu Pada Gosh	Students-School And College	SAU/A M(P)/20 17/04	Others	01/03/1981	39	5	Male	150000	96559562100024500	
246	Mr.Asimul Haque	Students-School And College	SAU/CS (P)/201 7/01	Others	15/01/1988	32	6	Male	150000	96559562100024600	
247	Mr.Him Kafle	Students-School And College	SAU/CS (P)/201 7/02	Others	21/09/1992	27	10	Male	150000	96559562100024700	
248	Ms.Taniya Seth	Students-School And College	SAU/CS (P)/201 7/03	Others	19/03/1994	26	4	Female	150000	96559562100024800	
249	Mr.Nesar Ahmad Wasi	Students-School And College	SAU/CS (P)/201 7/04	Others	17/12/1993	26	7	Male	150000	96559562100024900	
250	Mr.Aniket Bhattacharyya	Students-School And College	SAU/BI O(P)/20 17/01	Others	13/02/1993	27	5	Male	150000	96559562100025000	
251	Ms.Rakhi	Students-School And College	SAU/BI O(P)/20 17/02	Others	12/10/1992	27	9	Female	150000	96559562100025100	
252	Ms.Ankita	Students-School And College	SAU/BI O(P)/20 17/03	Others	26/04/1993	27	3	Female	150000	96559562100025200	
253	Mr.Md. Musa Hossain	Students-School And College	SAU/BI O(P)/20 17/04	Others	20/11/1990	29	8	Male	150000	96559562100025300	
254	Ms.Diksha Narang	Students-School And College	SAU/S OC(P)/2 017/01	Others	15/02/1994	26	5	Female	150000	96559562100025400	
255	Ms.Tanvi Bhati	Students-School And College	SAU/S OC(P)/2 017/02	Others	16/08/1992	27	11	Female	150000	96559562100025500	
256	Mr.Chandra Prakash Aryal	Students-School And	SAU/S	Others	21/11/1985	34	8	Male	150000	96559562100025600	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	OC(P)/2017/03								
257	Ms.Anushka Sandhamalie Kahandagama	Students-School And College	SAU/SOC(P)/2017/04	Others	04/05/1982	38	2	Female	150000	96559562100025700	
258	Mr.Prakash Bhandari	Students-School And College	SAU/IR(P)/2017/01	Others	29/09/1987	32	10	Male	150000	96559562100025800	
259	Ms.Divisha Srivastava	Students-School And College	SAU/IR(P)/2017/02	Others	29/07/1994	26	0	Female	150000	96559562100025900	
260	Mr.Sariful Islam	Students-School And College	SAU/IR(P)/2017/03	Others	20/05/1990	30	2	Male	150000	96559562100026000	
261	Mr.Shubham Dwivedi	Students-School And College	SAU/IR(P)/2017/04	Others	03/08/1993	26	11	Male	150000	96559562100026100	
262	Mr.Santosh Anand	Students-School And College	SAU/LS(P)/2017/01	Others	25/12/1992	27	7	Male	150000	96559562100026200	
263	Ms.Farheen Ahmad	Students-School And College	SAU/LS(P)/2017/03	Others	20/01/1992	28	6	Female	150000	96559562100026300	
264	Mr.Ikramudin	Students-School And College	SAU/LS(P)/2017/04	Others	22/12/1993	26	7	Male	150000	96559562100026400	
265	Mr.Jewel Howlader	Students-School And College	SAU/AM(P)/2019/05	Others	15/06/1992	28	1	Male	150000	96559562100026500	
266	Mr.Madhav Dhakal	Students-School And College	SAU/BO(P)/2019/01	Others	01/01/1996	24	6	Male	150000	96559562100026600	
267	Ms.Nazmir Binta Alam	Students-School And College	SAU/BO(P)/2019/02	Others	17/04/1994	26	3	Female	150000	96559562100026700	
268	Ms.Priyamedha Yadav	Students-School And College	SAU/BO(P)/2019/03	Others	12/01/1986	34	6	Female	150000	96559562100026800	
269	Ms.Aradhana Singh	Students-School And College	SAU/BO(P)/2019/04	Others	14/01/1994	26	6	Female	150000	96559562100026900	
270	Mr.Khagendra Ghimeray	Students-School And College	SAU/BO(P)/2019/05	Others	23/12/1992	27	7	Male	150000	96559562100027000	
271	Mr.Sata Teja Naveen	Students-School And College	SAU/BO(P)/2019/06	Others	25/07/1996	24	0	Male	150000	96559562100027100	
272	Ms.Anjali Bhardwaj	Students-School And	SAU/CS	Others	20/05/1994	26	2	Female	150000	96559562100027200	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	(P)/201 9/01								
273	Mr.Sanjay Kumar	Students-School And College	SAU/CS (P)/201 9/02	Others	08/11/1979	40	8	Male	150000	96559562100027300	
274	Mr.Prakash Datt Bhatt	Students-School And College	SAU/CS (P)/201 9/03	Others	21/04/1988	32	3	Male	150000	96559562100027400	
275	Mr.Basanta Kumar Singh	Students-School And College	SAU/CS (P)/201 9/04	Others	22/01/1995	25	6	Male	150000	96559562100027500	
276	Mr.Vinay Kumar	Students-School And College	SAU/CS (P)/201 9/05	Others	25/09/1996	23	10	Male	150000	96559562100027600	
277	Ms.Shitu Singh	Students-School And College	SAU/A M(P)/20 18/01	Others	02/04/1995	25	3	Female	150000	96559562100027700	
278	Mr.Ashutosh Tiwari	Students-School And College	SAU/A M(P)/20 18/02	Others	28/04/1993	27	3	Male	150000	96559562100027800	
279	Ms.Garima	Students-School And College	SAU/A M(P)/20 18/03	Others	17/12/1994	25	7	Female	150000	96559562100027900	
280	Mr.Mohammad Aqil Sahil	Students-School And College	SAU/A M(P)/20 18/04	Others	21/03/1991	29	4	Male	150000	96559562100028000	
281	Mr.Obaidullah Wardak	Students-School And College	SAU/A M(P)/20 18/05	Others	26/09/1993	26	10	Male	150000	96559562100028100	
282	Mr.Yuvaj Kc	Students-School And College	SAU/BI O(P)/20 18/01	Others	17/02/1986	34	5	Male	150000	96559562100028200	
283	Mr.Amrendra Kumar Sah	Students-School And College	SAU/BI O(P)/20 18/02	Others	27/01/1993	27	6	Male	150000	96559562100028300	
284	Ms.Nikita Yadav	Students-School And College	SAU/BI O(P)/20 18/03	Others	01/01/1994	26	6	Female	150000	96559562100028400	
285	Mr.Vivek Pandey	Students-School And College	SAU/BI O(P)/20 18/04	Others	06/09/1995	24	10	Male	150000	96559562100028500	
286	Ms.Nidhi Dhama	Students-School And College	SAU/BI O(P)/20 18/05	Others	06/09/1994	25	10	Female	150000	96559562100028600	
287	Mr.Umesh Prasad Sah Hathi	Students-School And College	SAU/BI O(P)/20 18/06	Others	11/06/1994	26	1	Male	150000	96559562100028700	
288	Mr.Md. Ebrahim Khalil	Students-School And	SAU/BI	Others	01/01/1993	27	6	Male	150000	96559562100028800	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(P)/2018/07								
289	Ms.Mrinalini Sharma	Students-School And College	SAU/IR(P)/2018/08	Others	20/05/1995	25	2	Female	150000	96559562100028900	
290	Mr.Imran Ahmed	Students-School And College	SAU/CS(P)/2018/01	Others	21/04/1992	28	3	Male	150000	96559562100029000	
291	Mr.Amit Kumar Sah	Students-School And College	SAU/CS(P)/2018/02	Others	09/05/1994	26	2	Male	150000	96559562100029100	
292	Mr.Upendra Prajapati	Students-School And College	SAU/CS(P)/2018/03	Others	08/09/1991	28	10	Male	150000	96559562100029200	
293	Mr.Shubham Srivastav	Students-School And College	SAU/CS(P)/2018/04	Others	12/01/1996	24	6	Male	150000	96559562100029300	
294	Ms.Priyanka Chak	Students-School And College	SAU/SOC(P)/2018/01	Others	07/07/1988	32	0	Female	150000	96559562100029400	
295	Mr.Ediga Avinash	Students-School And College	SAU/SOC(P)/2018/02	Others	10/04/1993	27	3	Male	150000	96559562100029500	
296	Mr.Yadu Nath Sharma	Students-School And College	SAU/SOC(P)/2018/03	Others	21/03/1990	30	4	Male	150000	96559562100029600	
297	Mr.Venkata Narayana	Students-School And College	SAU/SOC(P)/2018/04	Others	05/08/1994	25	11	Male	150000	96559562100029700	
298	Ms.Sobia Hamid Bhat	Students-School And College	SAU/SOC(P)/2018/05	Others	02/08/1993	26	11	Female	150000	96559562100029800	
299	Mr.Nithhijanantham Baskaran Baskaran	Students-School And College	SAU/SOC(P)/2018/06	Others	10/03/1988	32	4	Male	150000	96559562100029900	
300	Mr.Sridhar Krishnan	Students-School And College	SAU/IR(P)/2018/01	Others	07/03/1996	24	4	Male	150000	96559562100030000	
301	Mr.Mohammad Shariful Islam	Students-School And College	SAU/IR(P)/2018/02	Others	05/07/1988	32	0	Male	150000	96559562100030100	
302	Mr.Anurag Anil	Students-School And College	SAU/IR(P)/2018/03	Others	09/02/1982	38	5	Male	150000	96559562100030200	
303	Mr.Dipyaman Chakrabarti	Students-School And College	SAU/IR(P)/2018/04	Others	29/11/1993	26	8	Male	150000	96559562100030300	
304	Mr.Maheshwar Giri	Students-School And	SAU/EC	Others	04/08/1991	28	11	Male	150000	96559562100030400	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(P)/20 18/01								
305	Mr.Saurabh Rastogi	Students-School And College	SAU/EC O(P)/20 18/02	Others	21/08/1993	26	11	Male	150000	96559562100030500	
306	Ms.Sapna Goel	Students-School And College	SAU/EC O(P)/20 18/03	Others	18/03/1996	24	4	Female	150000	96559562100030600	
307	Mr.Kumar Rohit	Students-School And College	SAU/EC O(P)/20 18/04	Others	11/06/1992	28	1	Male	150000	96559562100030700	
308	Mr.Mohammad Reza Ehsan	Students-School And College	SAU/EC O(P)/20 18/05	Others	12/10/1990	29	9	Male	150000	96559562100030800	
309	Mr.Mohammad Reza Rezay	Students-School And College	SAU/EC O(P)/20 18/06	Others	17/12/1990	29	7	Male	150000	96559562100030900	
310	Mr.Md Tabish Eqbal	Students-School And College	SAU/LS (P)/201 8/01	Others	20/01/1993	27	6	Male	150000	96559562100031000	
311	Mr.Ashfaquzzaman Chowdhury	Students-School And College	SAU/LS (P)/201 8/02	Others	18/07/1993	27	0	Male	150000	96559562100031100	
312	Mr.Syed Ali Akhtar	Students-School And College	SAU/LS (P)/201 8/03	Others	27/07/1993	27	0	Male	150000	96559562100031200	
313	Mr.Gobinda Aryal	Students-School And College	SAU/LS (P)/201 8/04	Others	02/11/1991	28	8	Male	150000	96559562100031300	
314	Mr.Abhishek Trivedi	Students-School And College	SAU/LS (P)/201 8/05	Others	18/11/1994	25	8	Male	150000	96559562100031400	
315	Ms.Mafruzza Sultana	Students-School And College	SAU/LS (P)/201 8/06	Others	13/12/1992	27	7	Female	150000	96559562100031500	
316	Ms.Kumud Bhansali	Students-School And College	SAU/S OC(P)/2 013/002	Others	04/10/1981	38	9	Female	150000	96559562100031600	
317	Mr.Rahul Srivastava	Students-School And College	SAU/LS (P)/201 3/001	Others	15/11/1990	29	8	Male	150000	96559562100031700	
318	Ms.Deepika Bhardwaj	Students-School And College	SAU/BI O(P)/20 14/03	Others	27/10/1989	30	9	Female	150000	96559562100031800	
319	Mr.Faiz Ahmad	Students-School And College	SAU/BI O(P)/20 14/07	Others	15/06/1988	32	1	Male	150000	96559562100031900	
320	Mr.Gorkha Raj Giri	Students-School And	SAU/BI	Others	28/03/1988	32	4	Male	150000	96559562100032000	



S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(P)/20 14/08								
321	Mr.Farhan Sufyan	Students-School And College	SAU/CS (P)/201 4/05	Others	16/02/1988	32	5	Male	150000	96559562100032100	
322	Mr.Ram Narayan Shrestha	Students-School And College	SAU/EC O(P)/20 14/03	Others	08/01/1985	35	6	Male	150000	96559562100032200	
323	Mr.Shishir Ghimire	Students-School And College	SAU/IR( P)/2014/ 01	Others	23/04/1986	34	3	Male	150000	96559562100032300	
324	Mr.Masih Ullah Khan	Students-School And College	SAU/IR( P)/2014/ 02	Others	25/12/1986	33	7	Male	150000	96559562100032400	
325	Mr.Abhishek Dwivedi	Students-School And College	SAU/S OC(P)/2 014/07	Others	19/09/1990	29	10	Male	150000	96559562100032500	
326	Ms.Joyashree Sarma	Students-School And College	SAU/S OC(P)/2 014/09	Others	14/09/1988	31	10	Female	150000	96559562100032600	
327	Mr.Mohd Shoaib Khan	Students-School And College	SAU/AP (P)/201 4/02	Others	20/05/1991	29	2	Male	150000	96559562100032700	
328	Mr.Susheel Kumar Joshi	Students-School And College	SAU/AP (P)/201 4/03	Others	14/05/1983	37	2	Male	150000	96559562100032800	
329	Ms.Iram Khan	Students-School And College	SAU/LS (P)/201 4/01	Others	18/07/1988	32	0	Female	150000	96559562100032900	
330	Mr.Anshul Gopal	Students-School And College	SAU/A M(P)/20 15/02	Others	23/04/1988	32	3	Male	150000	96559562100033000	
331	Ms.Anita Kumari Rao	Students-School And College	SAU/A M(P)/20 15/04	Others	01/01/1992	28	6	Female	150000	96559562100033100	
332	Mr.Prem Bahadur Chand	Students-School And College	SAU/A M(P)/20 15/05	Others	11/08/1973	46	11	Male	150000	96559562100033200	
333	Mr.Bhagat Singh	Students-School And College	SAU/A M(P)/20 15/06	Others	12/12/1988	31	7	Male	150000	96559562100033300	
334	Mr.Ronobir Chandra Sarker	Students-School And College	SAU/A M(P)/20 15/07	Others	25/02/1986	34	5	Male	150000	96559562100033400	
335	Ms.Meenakshi	Students-School And College	SAU/A M(P)/20 15/08	Others	24/10/1989	30	9	Female	150000	96559562100033500	
336	Ms.Shilpa Sharma	Students-School And	SAU/BI	Others	23/03/1993	27	4	Female	150000	96559562100033600	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(P)/20 15/01								
337	Mr.Ajay Kumar Yadav	Students-School And College	SAU/BI O(P)/20 15/03	Others	14/02/1984	36	5	Male	150000	96559562100033700	
338	Ms.Renu Bisht	Students-School And College	SAU/BI O(P)/20 15/04	Others	09/06/1991	29	1	Female	150000	96559562100033800	
339	Mr.Bilal Ahmad Lone	Students-School And College	SAU/BI O(P)/20 15/05	Others	03/01/1988	32	6	Male	150000	96559562100033900	
340	Ms.Sushreesangita Priyadarshini Behera	Students-School And College	SAU/BI O(P)/20 15/06	Others	25/06/1992	28	1	Female	150000	96559562100034000	
341	Ms.Dibya Ghimire	Students-School And College	SAU/BI O(P)/20 15/07	Others	03/05/1990	30	2	Female	150000	96559562100034100	
342	Mr.Md. Summon Hossain	Students-School And College	SAU/BI O(P)/20 15/08	Others	10/01/1988	32	6	Male	150000	96559562100034200	
343	Ms.Preeti Nagar	Students-School And College	SAU/BI O(P)/20 15/09	Others	07/05/1987	33	2	Female	150000	96559562100034300	
344	Mr.Mohd Sameen Chishti	Students-School And College	SAU/CS (P)/201 5/01	Others	28/03/1988	32	4	Male	150000	96559562100034400	
345	Mr.Sandeep Kumar	Students-School And College	SAU/CS (P)/201 5/02	Others	07/12/1990	29	7	Male	150000	96559562100034500	
346	Mr.Rahul Nath	Students-School And College	SAU/CS (P)/201 5/03	Others	31/03/1991	29	4	Male	150000	96559562100034600	
347	Ms.Sweta Sharma	Students-School And College	SAU/CS (P)/201 5/04	Others	23/12/1992	27	7	Female	150000	96559562100034700	
348	Mr.Sumit Kumar Banshal	Students-School And College	SAU/CS (P)/201 5/05	Others	18/07/1988	32	0	Male	150000	96559562100034800	
349	Mr.Amit Rauniyar	Students-School And College	SAU/CS (P)/201 5/06	Others	13/12/1990	29	7	Male	150000	96559562100034900	
350	Mr.Pritam Anand	Students-School And College	SAU/CS (P)/201 5/07	Others	12/12/1993	26	7	Male	150000	96559562100035000	
351	Mr.Chaitanya Talreja	Students-School And College	SAU/EC O(P)/20 15/01	Others	10/11/1990	29	8	Male	150000	96559562100035100	
352	Ms.Vaishali Kohli	Students-School And	SAU/EC	Others	07/03/1991	29	4	Female	150000	96559562100035200	

S.No	Name of Employee	Occupation	Emp Id	Relationship	DOB	Age in Yrs	Age in Mths	Sex	SI	ID Card No	Remarks
		College	O(P)/20 15/03								
353	Mr.Sahil Mehra	Students-School And College	SAU/EC O(P)/20 15/04	Others	24/12/1990	29	7	Male	150000	96559562100035300	
354	Mr.Sudesh Pokhrel	Students-School And College	SAU/IR( P)/2015/ 01	Others	15/12/1988	31	7	Male	150000	96559562100035400	
355	Mr.Syed Eesar Mehdi	Students-School And College	SAU/IR( P)/2015/ 02	Others	12/04/1988	32	3	Male	150000	96559562100035500	
356	Mr.Anil Kumar	Students-School And College	SAU/IR( P)/2015/ 05	Others	20/12/1991	28	7	Male	150000	96559562100035600	
357	Mr.Syed Murtaza Mushtaq	Students-School And College	SAU/IR( P)/2015/ 06	Others	10/03/1991	29	4	Male	150000	96559562100035700	
358	Mr.Ankur Sharma	Students-School And College	SAU/IR( P)/2015/ 08	Others	29/11/1987	32	8	Male	150000	96559562100035800	
359	Mr.Haris Jamil	Students-School And College	SAU/LS (P)/201 5/03	Others	12/10/1991	28	9	Male	150000	96559562100035900	
360	Mr.Mazharul Islam	Students-School And College	SAU/LS (P)/201 5/04	Others	01/01/1990	30	6	Male	150000	96559562100036000	
361	Ms.Pooja Kalita	Students-School And College	SAU/S OC(P)/2 015/01	Others	28/02/1991	29	5	Female	150000	96559562100036100	
362	Mr.Umesh Joshi	Students-School And College	SAU/S OC(P)/2 015/05	Others	25/10/1989	30	9	Male	150000	96559562100036200	
363	Mr.Abir Lal Mazumder	Students-School And College	SAU/S OC(P)/2 015/08	Others	25/12/1991	28	7	Male	150000	96559562100036300	
364	Mr.Satyanand Jha Vatsa	Students-School And College	SAU/S OC(P)/2 015/09	Others	18/02/1988	32	5	Male	150000	96559562100036400	

In the event of the policy being withdrawn in future, intimation about the withdrawal will be sent 3 months prior to the date when renewal falls due. The insured will have the option of migrating to any other similar health insurance policy offered by the Company at the relevant time. Continuity of benefits for waiting period and bonus, if any and if applicable, will be given provided the insured had been renewing the policy without any break (or renewing within the grace period offered)

In witness whereof the undersigned being authorised by and on behalf of the company has / have herein to set his/ their hands at Area Office 2 DELHI on 04th Day of August 2020 .

**Policy Clause**  
**Star Group Health Insurance**  
**Unique id : SHAHLGP19028V011819**

The declaration and other documents if any shall be the basis of this Contract and is deemed to be incorporated herein.

In consideration of the premium paid, subject to the terms, conditions, exclusions and definitions contained herein the Company agrees as under.

That if during the period stated in the Schedule the insured person shall contract any disease or suffer from any illness or sustain bodily injury through accident and if such disease or injury shall require the insured Person/s, upon the advice of a duly Qualified Physician/Medical Specialist **/Medical Practitioner** or of duly **Qualified Surgeon** 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 **Insured Person/s** the amount of such expenses as are **reasonably and necessarily** incurred up-to the limits mentioned in the schedule but not exceeding the **sum insured** stated in the schedule hereto.

### **1.COVERAGE**

A)Room, boarding, nursing expenses as provided by the Hospital / Nursing Home up to the limits mentioned in the schedule

B)Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees.

C)Anesthesia, blood, oxygen, operation theatre charges, surgical appliances, medicines and drugs, diagnostic materials and X-ray, diagnostic imaging modalities, dialysis, chemotherapy, radiotherapy, cost of pacemaker, stent and similar expenses

D)Emergency ambulance charges up to the limits mentioned in the schedule for transportation of the insured person by private ambulance service when this is needed for medical reasons to go to hospital for treatment, provided however there is an admissible claim under the policy.

E)Relevant Pre-Hospitalization and Post-Hospitalization medical expenses up to the limits mentioned in the schedule

F)**AYUSH Treatment:** Expenses incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a Government Hospital or in any institute recognized by the government and/or accredited by the Quality Council of India/National Accreditation Board on Health up to 25% of the sum insured subject to a maximum of Rs.25,000/- per policy period.

Expenses on Hospitalization are payable provided the hospitalization is for minimum period of 24 hours. However this time limit will not apply for the day care treatments / procedures taken in the Hospital / Nursing Home where the Insured is discharged on the same day. The company's liability for specified ailment / surgical procedure is up to the limits mentioned in the schedule.

**Expenses relating to hospitalization will be considered in proportion to the room rent stated in the policy schedule.**

**Co-payment: Claims payable subject to copayment as stated in the schedule**

### **2. DEFINITIONS**

**Accident / Accidental** - means a sudden unforeseen and involuntary event caused by external, visible and violent means.

**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 has been taken. Occurrence of the same illness after a lapse of 45 days as stated above will be considered as fresh illness for the purpose of this policy.

**AYUSH Treatment** refers to the medical and / or hospitalization treatments given under 'Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems.

**Condition Precedent** means the policy term or condition upon which the insurer's liability under the policy is conditional upon.

**Congenital Anomaly:** means a condition which is present since birth, and which is abnormal with reference to form, structure or position.

**a) Internal Congenital Anomaly** : Congenital anomaly which is not in the visible and accessible parts of the body.

**b) External Congenital Anomaly** : Congenital anomaly which is in the visible and accessible parts of the body

**Co-payment** is a cost-sharing requirement under a health insurance policy that provides that the policy holder/insured will bear a specified percentage of the admissible claim amount. A Co-payment does not reduce the Sum Insured.

**Company** means Star Health and Allied Insurance Company Limited

**Day Care treatment** means medical treatment and/or surgical procedure which is :-

a. Undertaken under general or local anesthesia 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.

**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 equipped 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.

**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.

**Dependent Child** means a child (natural or legally adopted) who is financially dependent and does not have his or her independent source of income and not over 30 years

**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.

**Disclosure to information norm** means the policy shall be void and all premium paid hereon shall forfeited to

the Company, in the event of mis-representation, mis description or non disclosure of any material fact

**Group Administrator / Proposer** means the person/organization who has signed in the proposal form / declaration form and named in the Policy Schedule. He may or may not be insured under the policy

**Hospitalization** means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

**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:

- Has qualified nursing staff under its employment round the clock;
- 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;
- Has qualified medical practitioner(s) in charge round the clock.
- Has a fully equipped operation theatre of its own where surgical procedures are carried out;
- Maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.

**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.

**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 quickly to treatment which aims to return the person to his or her state of health 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:

1. it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
2. it needs ongoing or long-term control or relief of symptoms
3. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
4. it continues indefinitely
5. it recurs or is likely to recur

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

**Insured Person** means the name/s of persons shown in the schedule of the Policy

**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

**Medically Necessary** means any treatment, tests, medication, or stay in hospital or part of a stay in 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

**Maternity expense** shall include a) Medical Expenses traceable to child birth (including complicated deliveries and caesarean sections) incurred during Hospitalization b) expenses towards the lawful medical termination of pregnancy during the Policy Period.

**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 there by entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of licence.

**Network Hospital** means hospitals or health care providers enlisted by an insurer, TPA or jointly by an insurer and TPA to provide medical services to an insured by a cashless facility

**Non Network Hospital** means any hospital, day care centre or other provider that is not part of the network

**Notification of claim** means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.

**Newborn baby** means baby born during the Policy Period and is aged between 1 day and 90 days, both days inclusive.

**Out-patient treatment** is one in which the Insured visits a clinic/hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a medial practitioner. The insured is not admitted as a day care or in-patient.

**Pre-Existing Disease** means 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 insured person's first policy with the Company.

**Pre Hospitalization** means Medical Expenses incurred immediately before the Insured Person is Hospitalised, provided that :

- a. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
- b. The In-patient Hospitalization claim for such Hospitalization is admissible by the Insurance Company

**Post Hospitalization** means Medical Expenses incurred immediately after the insured person is discharged from the hospital provided that:

- a. Such Medical Expenses are incurred for the same condition for which the insured person's hospitalization was required and
- b. The inpatient hospitalization claim for such hospitalization is admissible by the insurance company.

**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

**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

**Room Rent** means the amount charged by a Hospital towards Room and Boarding expenses and shall include the associated medical expenses.

**Single Standard A/C** 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

**Sum Insured** wherever it appears shall mean the amount of insurance for which the premium has been paid. Where coverage is on individual basis / family floater basis the sum insured is the amount shown against each individual / family unit respectively

**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.

**Unproven/Experimental treatment** is treatment, including drug Experimental therapy, which is based on established medical practice in India, is treatment experimental or unproven

### **3. EXCLUSIONS**

The Company shall not be liable to make any payments under this policy in respect of any expenses what so ever incurred by the insured person in connection with or in respect of:

1. Any disease contracted by the insured person during the first 30 days from the commencement date of the policy.
2. During the first year of operation of the Insurance cover, the expenses on treatments (conservative, interventional, laparoscopic and open) related to Hepato-pancreato-biliary diseases including Gall bladder and Pancreatic calculi, all types of management for kidney and genitourinary tract calculi., all Diseases of Prostate, all types of Hernia,, Hydrocele, Congenital Internal disease/defect anomalies (Except to the extent covered under Newborn Baby Cover if specifically opted) Pilonidal sinus and Fistula / Fissure in ano, Piles, Sinusitis and related disorders, If these are Pre-Existing at the time of proposal they will be covered subject to exclusion number 4 mentioned below.
3. During the first two years of continuous operation of Insurance Policy, any expenses on
  - a) Cataract and diseases of the anterior and posterior chamber of the Eye, Diseases of ENT, Diseases related



to Thyroid, Prolapse of intervertebral disc (other than caused by accident), Varicose veins and Varicose ulcers, all Stricture Urethra, all Obstructive Uropathies, Epididymal Cyst, Benign Tumours of Epididymis, Spermatocele, Varicocele, Hemorrhoids, Rectal Prolapse, Stress Incontinence.

b) Desmoid tumour of anterior abdominal wall.

c) All treatments (conservative, interventional, laparoscopic and open) related to all Diseases of Uterus, Fallopian tubes, Cervix and Ovaries, Uterine bleeding, Pelvic Inflammatory Diseases, Benign breast diseases, Umbilical sinus, Umbilical fistula.

d) Conservative, operative treatment and all types of intervention for Diseases related to Tendon, Ligament, Fascia, Bones and Joint Including Arthroscopy and Arthroplasty [other than caused by accident]

e) Degenerative disc and Vertebral diseases including Replacement of bones and joints and Degenerative diseases of the Musculo-skeletal system

f) Subcutaneous Benign lumps, Sebaceous cyst, Dermoid cyst, Mucous cyst lip / cheek, Carpal tunnel syndrome, Trigger finger, Lipoma, Neurofibroma, Fibroadenoma, Ganglion and similar pathology

g) Any transplant and related surgery

Note : If these are pre-existing at the time of proposal, they will be covered subject to exclusion number 4 mentioned below

4. Pre Existing Diseases as defined in the policy until 48 consecutive months of continuous coverage have elapsed under this Group Health Insurance policy since inception of the first policy with the Company.

Note : In the event of this Star Group Health Insurance Policy not being renewed or when the Individual member of the group leaves the group on account of resignation / retirement / termination or otherwise, such individual member has the option to migrate to any individual health insurance policy on indemnity basis offered by the Company. In such an event the continuity of benefits with respect to waiting periods under exclusions 1, 2, 3 and 4 will be given in the individual health insurance policy according to the number of years covered continuously under this Star Group Health Insurance

5. Circumcision, Preputioplasty, Frenuloplasty, Preputial Dilatation and Removal of SMEGMA, Inoculation or Vaccination (except for post-bite treatment and for medical treatment other than for prevention of diseases)

6. Congenital External diseases/condition defects or anomalies

7. Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization. (Dental implants are not payable)

8. Convalescence, general debility, run-down condition or rest cure, Nutritional deficiency states, Psychiatric, mental and behavioral disorders, Venereal disease and Sexually transmitted diseases, intentional self injury and use of intoxicating drugs / alcohol, smoking and tobacco chewing

9. 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)

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10. Injury or disease directly or indirectly caused by or contributed to by nuclear weapons/materials
11. All expenses arising out of any condition directly or indirectly caused due to or associated with Human T-cell Lympho Tropic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS. It is however made clear that such of those who are positive for HIV (Human Immuno Deficiency Virus) would be entitled for expenses incurred for treatment, other than for opportunistic infections and for treatment of HIV/AIDS, provided at the time of first commencement of insurance under this policy, their CD4 count is not less than 350.
12. Treatment arising from or traceable to pregnancy, childbirth, miscarriage, abortion or complications of any of these (other than ectopic pregnancy), family planning treatment and all types of treatment for infertility and its complications thereof.
13. Expenses incurred on weight control services including surgical procedures for treatment of obesity, medical treatment for weight control, treatment for genetic and endocrine disorders, treatment for sleep apnea
14. 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 herein under exclusion no14
15. Expenses incurred on Lasik Laser or Refractive Error Correction and its complications all treatment for disorders of eye requiring intra-vitreous injections and related procedures.
16. Charges incurred at Hospital or Nursing Home primarily for diagnostic, Radiology or laboratory Tests not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at hospital/nursing home.
17. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Physician.
18. Naturopathy Treatment, unconventional, untested, unproven, experimental therapies.
19. Stem cell Therapy, Chondrocyte Implantation, Procedures using Platelet Rich plasma and Intra articular injection therapy. Immunotherapy without proper indication.
20. Oral Chemotherapy, Immuno therapy and Biologicals, except when administered as an in-patient, when clinically indicated and hospitalization warranted.
21. Hospital registration charges, admission charges, record charges, telephone charges and such other charges
22. Change of sex or cosmetic or aesthetic treatment of any description, plastic surgery (other than as necessitated due to an accident or as a part of any illness), all treatment for erectile dysfunctions.
23. Cost of spectacles and contact lens, hearing aids, Cochlear implants and procedures, walkers and

crutches, wheel chairs, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis, infusion pump and such other similar aids.

24. Other expenses as detailed under "Other Excluded Expenses"

#### **4. CONDITIONS:**

1. The premium payable under this policy shall be payable in advance. No receipt of premium shall be valid except acknowledged on the official form of the company signed by a duly authorized official of the company. The due payment of premium and the observance of fulfillment of the terms, provision, conditions and endorsements of this policy by the Insured Person/s, in so far as they relate to anything to be done or complied with by the Insured Person/s, shall be a condition precedent to any liability of the Company to make any payment under this policy. No waiver of any terms, provisions, conditions, and endorsements of this policy shall be valid unless made in writing and signed by an authorized official of the Company.

2. Upon the happening of any event, which may give rise to a claim under this policy, notice with full particulars shall be sent to the Company within 24 hours from the date of occurrence of the event.

3. Claim must be filed within 15 days from the date of discharge from the Hospital.

**Note: Conditions 2 & 3 are precedent to admission of liability under the policy. However the Company will examine and relax the time limit mentioned in these conditions depending upon the merits of the case.**

4. The Insured Person shall obtain and furnish the Company with all original bills, receipts and other documents upon which a claim is based and shall also give the Company such additional information and assistance as the Company may require in dealing with the claim

Documents to be submitted in support of claim are -

##### For Reimbursement claims:

- a. Duly completed claim form, and
- b. Pre Admission investigations and treatment papers.
- c. Discharge Summary from the hospital in original
- d. Cash receipts from hospital, chemists
- e. Cash receipts and reports for tests done
- f. Receipts from doctors, surgeons, anaesthetist
- g. Certificate from the attending doctor regarding the diagnosis.

Claims of Out Patient Consultations / treatments (wherever applicable) will be settled on a reimbursement basis on production of cash receipts in original and supporting medical records.

##### For Cashless Treatment:

- a. Call the 24 hour help-line for assistance - 1800 425 2255
- b. Inform the ID number for easy reference
- c. On admission in the hospital, produce the ID Card issued by the Company at the Hospital Helpdesk
- d. Obtain the Pre-authorisation Form from the Hospital Help Desk, complete the Patient Information and resubmit to the Hospital Help Desk.
- e. The Treating Doctor will complete the hospitalisation/ treatment information and the hospital will fill up expected cost of treatment.
- f. This form is submitted to the Company

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- g. The Company will process the request and call for additional documents/ clarifications if the information furnished is inadequate.
- h. Once all the details are furnished, the Company will process the request as per the terms and conditions as well as the exclusions therein and either approve or reject the request based on the merits.
- i. In case of emergency hospitalization information to be given within 24 hours of hospitalization
- j. Cashless facility can be availed only in networked Hospitals
- k. In non-network hospitals payment must be made up-front and then reimbursement will be effected on submission of documents

**Note:** The Company reserves the right to call for additional documents wherever required.

Please note that denial of a Pre-authorization request is in no way to be construed as denial of treatment or denial of coverage. The Insured Person can go ahead with the treatment, settle the hospital bills and submit the claim for a possible reimbursement.

The Company shall pay interest as per Insurance Regulatory and Development Authority of India (Protection of Policyholders' Interests) Regulations, 2017, in case of delay in payment of an admitted claim under the Policy.

5. Any medical practitioner authorized by the company shall be allowed to examine the **Insured Person/s** in case of any alleged injury or diseases requiring hospitalization when and as often as the same may reasonably be required on behalf of the Company at the Company's cost.

6. The Company shall not be liable to make any payment under the policy in respect of any claim if such claim is in any manner fraudulent or supported by any fraudulent means or device, misrepresentation / non disclosure at the time of proposal / at the time of claim, whether by the Insured Person/s or by any other person acting on his behalf.

**7. Renewal:** The policy may be renewed subject to mutual consent and mutually agreed terms and conditions. The Company, however, shall not be bound to give notice that the policy is due for renewal.

**8. Cancellation:** The Company may cancel this policy on grounds of misrepresentation, fraud, Moral Hazard, non disclosure of material fact as declared at the inception of the policy / at the time of claim, or non-co-operation by the proposer / group administrator, by sending the proposer / group administrator 30 days notice by registered letter to its last known address. Where the misrepresentation, fraud, moral hazard, non disclosure either at inception or at the time of claim is by the insured person, then the insurance cover in respect of such insured person will cease immediately. The proposer / group administrator may at any time cancel this policy and in such event the Company shall allow refund only for those insured person / family who have not made claim as on the date of cancellation, after retaining premium at Company's short period rate only (table given below)

<b>PERIOD ON RISK</b>	<b>RATE OF PREMIUM TO BE RETAINED</b>
Up to one-month	25% of annual premium
Exceeding one month and Up to three months	40% of annual premium
Exceeding three months and Up to six months	60% of annual premium
Exceeding six months and Up to nine months	80% of annual premium
Exceeding nine months	Full annual premium

**9. Automatic Termination:** The insurance under this policy with respect to each relevant insured person / family shall terminate immediately on the earlier of the following events:

1. Upon the death of the Insured Person. This also means that in case of family floater policy, cover for the other surviving members of the family will continue, subject to other terms of the policy.

2. Upon exhaustion of the sum insured

**10. Automatic Termination of Individual Certificate of Insurance.** The Certificate of Insurance will terminate on the earliest of the following dates:

The date of expiry of certificate of insurance or

The date the Insured Person is no longer eligible within the classification of Insured Person(s) described in the Policy Schedule or

The Insured person ceases to be a resident of India or

From the date the Certificate of Insurance is cancelled either by the Company or Insured Person(s)

### **11. Role of Group Administrator / Proposer**

The Group administrator / Proposer shall play a facilitative role between the Insurer and the Insured Person. Such role includes

1) Furnish to the Company detailed list of Insured Person/s for preparation of Individual Certificate and ID cards

2) Distribute Individual Certificate and ID cards received from the Company. (However, where the Company issues ID card / Individual Certificates in electronic form directly to the Insured Person/s this will not apply).

3) To facilitate Insured Person / s in availing all insurance related services including cashless facility wherever required.

4) If a member leaves the group as per group rules, group administrator should facilitate to provide option to migrate to another policy at premium as applicable for such individual insurance. In such event :-

a. Members who have been covered continuously for a period of one year under this Star Group Health Insurance with the Company, 30 days waiting period and First year exclusions shall be waived.

b. Members who have been covered continuously for a period of two years under this Star Group Health Insurance with the Company, 30 days waiting period, First year exclusions and First two year exclusions / First two year waiting period shall be waived.

c. In respect of members who have been covered continuously for a period a four years under this Star Group Health Insurance with the Company, 30 days waiting period, First year, First two year exclusions, 48 months waiting period with reference to Pre Existing diseases shall be waived.

**12. Arbitration** If any dispute or difference shall arise as to the quantum to be paid under this policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to the dispute/difference, or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators. Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration, as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.

It is also further expressly agreed and declared that if the Company shall disclaim liability to the Insured for any claim hereunder and such claim shall not, within three years from the date of such disclaimer have been made the subject matter of a suit in a Court of Law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

13. All claims under this policy shall be payable in Indian currency. All medical /surgical treatments under this policy shall have to be taken in India.

**14. Important Note:**

- a. Where the policy is on floater basis the sum insured and sub-limits float amongst family members covered
- b. The Policy Schedule, Certificate of Insurance and Endorsement are to be read together and any word or such meaning wherever it appears shall have the meaning as stated in the Act / Indian Laws. The Special Conditions if any stated in the Schedule supersede these policy wordings.
- c. The terms conditions and exceptions that appear in the Policy or in any Endorsement are part of the contract, must be complied with. Failure to comply may result in the claim being denied.
- d. The attention of the policy holder / Insured Person is drawn to our website [www.starhealth.in](http://www.starhealth.in) for anti fraud policy of the company for necessary compliance by all stake holders

**15. Policy disputes:**

Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions contained herein is understood and agreed to by both the Insured and the Company to be subject to Indian Law.

**16. Notices**

Any notice, direction or instruction given under this policy shall be in writing and delivered by hand, post, or facsimile/email to Star Health and Allied Insurance Company Limited, No 1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai-600034. Toll free no: 1800-425-2255 / 1800-102-4477 Email: [support@starhealth.in](mailto:support@starhealth.in)

Notice and instructions will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail.

**17. Customer Service**

If at any time the Insured Person requires any clarification or assistance, the insured may contact the offices of the Company at the address specified, during normal business hours

**18. Grievances:**

In case the Insured Person is aggrieved in any way, the insured may contact the Company at the specified address, during normal business hours.

Grievance Department, Star Health and Allied Insurance Company Limited, No 1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai - 600034. or Call 044-28243921 during normal business hours. or Send e-mail to [grievances@starhealth.in](mailto:grievances@starhealth.in)

In the event of the following grievances:

- a.any partial or total repudiation of claims by the Company
- b.any dispute in regard to premium paid or payable in terms of the policy;
- c.any dispute on the legal construction of the policies in so far as such disputes relate to claims;
- d.delay in settlement of claims;
- e.non-issuance of any insurance document to customer after receipt of the premium

the insured person may approach the Insurance Ombudsman at the address given below, within whose jurisdiction the branch or office of Star Health and Allied Insurance Company Limited or the residential address or place of the Insured Person is located

**List of Insurance Ombudsman**

<b>CONTACT DETAILS</b>	<b>JURISDICTION</b>
<p><b>AHMEDABAD</b> Office of the Insurance Ombudsman, 6th floor, Jeevan Prakash Building, Near S.V. College, Relief Road, Ahmedabad 380001, Tel 079-25501201-02-05-06. Email:- <a href="mailto:bimalokpal.ahmedabad@ecoi.co.in">bimalokpal.ahmedabad@ecoi.co.in</a> Website : <a href="http://www.ecoi.co.in">www.ecoi.co.in</a></p>	<p>Gujarat, Dadra &amp; Nagar Haveli, Daman and Diu</p>
<p><b>BENGALURU</b> Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No.57-27-N- 19, Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru-560 078. Tel.:-080- 26652048/26652049 Email:- <a href="mailto:bimalokpalbhopal@airtelbroadband.in">bimalokpalbhopal@airtelbroadband.in</a></p>	<p>Karnataka.</p>
<p><b>BHOPAL</b> Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp.Airtel Office, Near New Market, Bhopal - 462 033. Tel.:- 0755-2769201/202 Fax:- 0755-2769203 Email:- <a href="mailto:bimalokpal.bhopal@gbic.co.in">bimalokpal.bhopal@gbic.co.in</a></p>	<p>States of Madhya Pradesh and Chattisgarh.</p>
<p><b>BHUBANESHWAR</b> Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar - 751 009. Tel.:- 0674-2596461 / 2596455 Fax:- 0674- 2596429 Email:- <a href="mailto:ioobbsr@dataone.in">ioobbsr@dataone.in</a></p>	<p>State of Orissa.</p>
<p><b>CHANDIGARH</b> Office of the Insurance Ombudsman, S.C.O. No. 101, 102 &amp; 103, 2nd Floor, Batra Building, Sector 17 - D, Chandigarh - 160 017. Tel.:- 0172-2706196/ 2706468 Fax:- 0172- 2708274 Email:- <a href="mailto:ombchd@yahoo.co.in">ombchd@yahoo.co.in</a></p>	<p>States of Punjab, Haryana, Himachal Pradesh, Jammu &amp; Kashmir and Union territory of Chandigarh.</p>



<p><b>CHENNAI</b> Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI - 600 018. Tel.:- 044-24333668 / 24335284 Fax:- 044-24333664 Email:- <a href="mailto:insombud@md4.vsnl.net.in">insombud@md4.vsnl.net.in</a></p>	<p>State of Tamil Nadu and Union Territories - Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).</p>
<p><b>DELHI</b> Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi - 110 002. Tel.:- 011- 23239633/23237532 Fax:- 011-23230858 Email:- <a href="mailto:bimalokpal.delhi@gbic.co.in">bimalokpal.delhi@gbic.co.in</a></p>	<p>State of Delhi</p>
<p><b>ERNAKULAM</b> Office of the Insurance Ombudsman, 2nd floor, Pulinat Building, Opp. Cochin Shipyards, M.G. Road, Ernakulum - 682 015. Tel.:- 0484- 2358759/2359338 Fax:- 0484-2359336 Email:- <a href="mailto:bimalokpal.ernakulum@gbic.co.in">bimalokpal.ernakulum@gbic.co.in</a></p>	<p>Kerala, Lakshadweep, Mahe-a part of Pondicherry</p>
<p><b>GUWAHATI</b> Office of the Insurance Ombudsman, 'Jeevan Nivesh', 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati - 781001(ASSAM). Tel.:- 0361- 2132204 / 2132205 Fax:- 0361-2732937 Email:- <a href="mailto:bimalokpal.guwahati@gbic.co.in">bimalokpal.guwahati@gbic.co.in</a></p>	<p>States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.</p>
<p><b>HYDERABAD</b> Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court" Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi- Ka-Pool, Hyderabad - 500 004. Tel.:- 040-65504123/23312122 Fax:- 040- 23376599 Email:- <a href="mailto:bimalokpal.hyderabad@gbic.co.in">bimalokpal.hyderabad@gbic.co.in</a></p>	<p>States of Andhra Pradesh, Telangana and Union Territory of Yanam - a part of the Union Territory of Pondicherry.</p>
<p><b>JAIPUR</b> Office of the Insurance Ombudsman, Jeevan Nidhi-II Bldg., Ground Floor,</p>	<p>State of Rajasthan.</p>

Bhawani Singh Marg, Jaipur - 302005. Tel.:- 0141-2740363 Email:- bimalokpal.jaipur@gbic.co.in	
<b>KOLKATA</b> Office of the Insurance Ombudsman, Hindustan Building Annexe, 4th floor, 4, CR Avenue, Kolkata - 700 072. Tel.:- 033-22124339 / 22124340 Fax:- 033-22124341 Email:- bimalokpal.kolkata@gbic.co.in	States of West Bengal, Bihar, Sikkim and Union Territories of Andaman and Nicobar Islands.
<b>LUCKNOW</b> Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow-226 001. Tel.:- 0522-2231330 / 2231331 Fax:- 0522-2231310. Email:- bimalokpal.lucknow@gbic.co.in	District of Uttar Pradesh: Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varansi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sulanpur, Maharajganj, Santkabirnagar, Azamgarh, Kaushinagar, Gorkhpur, Deoria, Mau, Chandauli, Ballia, Sidharathnagar.
<b>MUMBAI</b> Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.:- 022- 26106552/26106960 Fax:- 022-26106052 Email:- bimalokpal.mumbai@gbic.co.in	States of Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.
<b>NOIDA</b> Office of the Insurance Ombudsman, Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector-15, Distt: Gautam Budh Nagar, U.P-201301 Tel: 0120-2514250 / 2514252 / 2514253 Email:- bimalokpal.noida@gbic.co.in	States of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozabad, Gautam Budh Nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.

<p><b>PATNA</b> Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna - 800 006.Tel:0612- 2680952 Email:- bimalokpal.patna@gbic.co.in</p>	<p>States of Bihar and Jharkhand.</p>
<p><b>PUNE</b> Office of the Insurance Ombudsman, Jeevan Darshan Building, 3rd Floor, CTS Nos. 195 to 198, NC Kelkar Road, Narayan Peth, Pune - 411 030 Tel: 020 -41312555 Email:- bimalokpal.pune@gbic.co.in</p>	<p>States of Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.</p>

Sl.No.	Other Excluded Expenses	
<b>TOILETRIES/ COSMETICS/ PERSONAL COMFORT OR CONVENIENCE ITEMS</b>		
1	HAIR REMOVAL CREAM	Not Payable
2	BABY CHARGES (UNLESS SPECIFIED/INDICATED)	Not Payable
3	BABY FOOD	Not Payable
4	BABY UTILITES CHARGES	Not Payable
5	BABY SET	Not Payable
6	BABY BOTTLES	Not Payable
7	BRUSH	Not Payable
8	COSY TOWEL	Not Payable
9	HAND WASH	Not Payable
10	MOISTURISER PASTE BRUSH	Not Payable
11	POWDER	Not Payable
12	RAZOR	Payable
13	SHOE COVER	Not Payable
14	BEAUTY SERVICES	Not Payable
15	BELTS/ BRACES	Essential and may be paid specifically for cases who have undergone surgery of thoracic or lumbar spine
16	BUDS	Not Payable

17	BARBER CHARGES	Not Payable
18	CAPS	Not Payable
19	COLD PACK/HOT PACK	Not Payable
20	CARRY BAGS	Not Payable
21	CRADLE CHARGES	Not Payable
22	COMB	Not Payable
23	DISPOSABLES RAZORS CHARGES ( for site preparations)	Payable
24	EAU-DE-COLOGNE / ROOM FRESHNERS	Not Payable
25	EYE PAD	Not Payable
26	EYE SHEILD	Not Payable
27	EMAIL / INTERNET CHARGES	Not Payable
28	FOOD CHARGES (OTHER THAN PATIENTs DIET PROVIDED BY HOSPITAL)	Not Payable
29	FOOT COVER	Not Payable
30	GOWN	Not Payable
31	LEGGINGS	Essential in bariatric and varicose vein surgery and should be considered for these conditions where surgery itself is payable.
32	LAUNDRY CHARGES	Not Payable
33	MINERAL WATER	Not Payable
34	OIL CHARGES	Not Payable
35	SANITARY PAD	Not Payable
36	SLIPPERS	Not Payable
37	TELEPHONE CHARGES	Not Payable
38	TISSUE PAPER	Not Payable
39	TOOTH PASTE	Not Payable
40	TOOTH BRUSH	Not Payable
41	GUEST SERVICES	Not Payable
42	BED PAN	Not Payable
43	BED UNDER PAD CHARGES	Not Payable
44	CAMERA COVER	Not Payable
45	CLINIPLAST	Not Payable
46	CREPE BANDAGE	Not Payable/Payable by the patient
47	CURAPORE	Not Payable
48	DIAPER OF ANY TYPE	Not Payable
49	DVD, CD CHARGES	Not Payable (However if CD is specifically sought by Insurer/TPA then payable)
50	EYELET COLLAR	Not Payable

51	FACE MASK	Not Payable
52	FLEXI MASK	Not Payable
53	GAUSE SOFT	Not Payable
54	GAUZE	Not Payable
55	HAND HOLDER	Not Payable
56	HANSAPLAST/ ADHESIVE BANDAGES	Not Payable
57	INFANT FOOD	Not Payable
58	SLINGS	Reasonable costs for one sling in case of upper arm fractures should be considered

**ITEMS SPECIFICALLY EXCLUDED IN THE POLICIES**

59	WEIGHT CONTROL PROGRAMS/ SUPPLIES/ SERVICES	Not Payable
60	COST OF SPECTACLES/ CONTACT LENSES/ HEARING AIDS ETC.,	Not Payable
61	DENTAL TREATMENT EXPENSES THAT DO NOT REQUIRE HOSPITALISATION	Not Payable
62	HORMONE REPLACEMENT THERAPY	Not Payable
63	HOME VISIT CHARGES	Not Payable
64	INFERTILITY/ SUBFERTILITY/ ASSISTED CONCEPTION PROCEDURE	Not Payable
65	OBESITY (INCLUDING MORBID OBESITY) TREATMENT IF EXCLUDED IN POLICY	Not Payable
66	PSYCHIATRIC & PSYCHOSOMATIC DISORDERS	Not Payable
67	CORRECTIVE SURGERY FOR REFRACTIVE ERROR	Not Payable
68	TREATMENT OF SEXUALLY TRANSMITTED DISEASES	Not Payable
69	DONOR SCREENING CHARGES	Not Payable
70	ADMISSION/REGISTRATION CHARGES	Not Payable
71	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE	Not Payable
72	EXPENSES FOR INVESTIGATION/ TREATMENT IRRELEVANT TO THE DISEASE FOR WHICH ADMITTED OR DIAGNOSED	Not Payable
73	ANY EXPENSES WHEN THE PATIENT IS DIAGNOSED WITH RETRO VIRUS + OR SUFFERING FROM /HIV/ AIDS ETC IS DETECTED/ DIRECTLY OR INDIRECTLY	Not Payable except to the extent provided under exclusion no.11
74	STEM CELL IMPLANTATION/ SURGERY and Storage	Not Payable except Bone Marrow Transplantation where covered by policy

**ITEMS WHICH FORM PART OF HOSPITAL SERVICES WHERE SEPARATE CONSUMABLES ARE NOT PAYABLE BUT THE SERVICE IS**

75	WARD AND THEATRE BOOKING CHARGES	Payable under OT Charges, not payable separately
76	ARTHROSCOPY & ENDOSCOPY INSTRUMENTS	Rental charged by the hospital payable. Purchase of Instruments not payable.
77	MICROSCOPE COVER	Payable under OT Charges, not separately.
78	SURGICAL BLADES,HARMONIC SCALPEL,SHAVER	Payable under OT Charges, not separately
79	SURGICAL DRILL	Payable under OT Charges, not separately
80	EYE KIT	Payable under OT Charges, not separately
81	EYE DRAPE	Payable under OT Charges, not separately
82	X-RAY FILM	Payable under Radiology Charges, not as consumable
83	SPUTUM CUP	Payable under Investigation charges, not as consumable
84	BOYLES APPARATUS CHARGES	Part of OT charges, not separately
85	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES	Part of Cost of Blood, not payable
86	Antiseptic or disinfectant lotions	Not Payable-Part of Dressing Charges
87	BAND AIDS, BANDAGES, STERILE INJECTIONS, NEEDLES, SYRINGES	Not Payable-Part of Dressing Charges
88	COTTON	Not Payable-Part of Dressing Charges
89	COTTON BANDAGE	Not Payable-Part of Dressing Charges
90	MICROPORE/ SURGICAL TAPE	Not Payable- Payable by the patient when prescribed, otherwise included as Dressing Charges
91	BLADE	Not Payable
92	APRON	Not Payable-Part of Hospital Services/Disposable linen to be part of OT/ICU charges
93	TORNIQUET	Not Payable(service is charged by hospitals, consumables cannot be separately charged)
94	ORTHOBUNDLE, GYNAEC BUNDLE	Part of Dressing Charges
95	URINE CONTAINER	Not Payable

#### **ELEMENTS OF ROOM CHARGE**

96	LUXURY TAX	Actual tax levied by government is payable. Part of room charge for sub limits
97	HVAC	Part of room charge not payable separately
98	HOUSE KEEPING CHARGES	Part of room charge not payable separately
99	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED	Part of room charge not payable separately
100	TELEVISION & AIR CONDITIONER CHARGES	Payable under room charges not if separately levied
101	SURCHARGES	Part of room charge not payable separately
102	ATTENDANT CHARGES	Not Payable-Part of Room Charges
103	IM IV INJECTION CHARGES	Part of nursing charges, not payable
104	CLEAN SHEET	Part of Laundry/Housekeeping not payable separately

105	EXTRA DIET OF PATIENT(OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)	Patient Diet provided by hospital is payable
106	BLANKET/WARMER BLANKET	Not payable-part of room charges
<b>ADMINISTRATIVE OR NON-MEDICAL CHARGES</b>		
107	ADMISSION KIT	Not Payable
108	BIRTH CERTIFICATE	Not Payable
109	BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES	Not Payable
110	CERTIFICATE CHARGES	Not Payable
111	COURIER CHARGES	Not Payable
112	CONVENYANCE CHARGES	Not Payable
113	DIABETIC CHART CHARGES	Not Payable
114	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES	Not Payable
115	DISCHARGE PROCEDURE CHARGES	Not Payable
116	DAILY CHART CHARGES	Not Payable
117	ENTRANCE PASS / VISITORS PASS CHARGES	Not Payable
118	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE	To be claimed by patient under Post Hosp where admissible
119	FILE OPENING CHARGES	Not Payable
120	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)	Not Payable
121	MEDICAL CERTIFICATE	Not Payable
122	MAINTAINANCE CHARGES	Not Payable
123	MEDICAL RECORDS	Not Payable
124	PREPARATION CHARGES	Not Payable
125	PHOTOCOPIES CHARGES	Not Payable
126	PATIENT IDENTIFICATION BAND / NAME TAG	Not Payable
127	WASHING CHARGES	Not Payable
128	MEDICINE BOX	Not Payable
129	MORTUARY CHARGES	Payable upto 24 hrs, shifting charges not payable
130	MEDICO LEGAL CASE CHARGES (MLC CHARGES)	Not Payable
<b>EXTERNAL DURABLE DEVICES</b>		
131	WALKING AIDS CHARGES	Not Payable
132	BIPAP MACHINE	Not Payable
133	COMMODE	Not Payable

134	CPAP/ CAPD EQUIPMENTS	Device not Payable
135	INFUSION PUMP - COST	Device not Payable
136	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)	Not Payable
137	PULSEOXYMETER CHARGES	Device not Payable
138	SPACER	Not Payable
139	SPIROMETRE	Device not Payable
140	SPO2 PROBE	Not Payable
141	NEBULIZER KIT	Not Payable
142	STEAM INHALER	Not Payable
143	ARMSLING	Not Payable
144	THERMOMETER	Not Payable (paid by patient)
145	CERVICAL COLLAR	Not Payable
146	SPLINT	Not Payable
147	DIABETIC FOOT WEAR	Not Payable
148	KNEE BRACES ( LONG/ SHORT/ HINGED)	Not Payable
149	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER	Not Payable
150	LUMBO SACRAL BELT	Essential and should be paid specifically for cases who have undergone surgery of lumbar spine.
151	NIMBUS BED OR WATER OR AIR BED CHARGES	Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadruplegia for any reason and at reasonable cost of approximately Rs.200/day
152	AMBULANCE COLLAR	Not Payable
153	AMBULANCE EQUIPMENT	Not Payable
154	MICROSHEILD	Not Payable
155	ABDOMINAL BINDER	Essential and should be paid in post surgery patients of major abdominal surgery including TAH, LSCS, incisional hernia repair, exploratory laparotomy for intestinal obstruction, liver transplant etc.

**ITEMS PAYABLE IF SUPPORTED BY A PRESCRIPTION**

156	BETADINE \ HYDROGEN PEROXIDE\SPIRIT\DISINFECTANTS ETC	May be payable when prescribed for patient, not payable for hospital use in OT or ward or for dressings in hospital
157	PRIVATE NURSES CHARGES-SPECIAL NURSING CHARGES	Post hospitalization nursing charges not payable
158	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES-DIET CHARGES	Patient Diet provided by hospital is payable
159	SUGAR FREE Tablets	Payable-Sugar free variants of admissible medicines are not EXCLUDED
160	CREAMS POWDERS LOTIONS (TOILETRIES ARE NOT PAYABLE, ONLY PRESCRIBED MEDICAL PHARMACEUTICALS PAYABLE)	Payable when prescribed



161	Digestion gels	Payable when prescribed
162	ECG ELECTRODES	Upto 5 electrodes are required for every case visiting OT or ICU, For longer stay in ICU, may require a change and at least one set every second day must be payable.
163	GLOVES	Sterilized Gloves payable/unsterilized gloves not payable
164	HIV KIT	Payable - payable pre operative screening
165	LISTERINE/ ANTISEPTIC MOUTHWASH	Payable when prescribed
166	LOZENGES	Payable when prescribed
167	MOUTH PAINT	Payable when prescribed
168	NEBULISATION KIT	If used during hospitalization is payable reasonably
169	NOVARAPID	Payable when prescribed
170	VOLINI GEL/ ANALGESIC GEL	Payable when prescribed
171	ZYTEE GEL	Payable when prescribed
172	VACCINATION CHARGES	Routine Vaccination not payable/Post Bite Vaccination payable
<b>PART OF HOSPITAL'S OWN COSTS AND NOT PAYABLE</b>		
173	AHD	Not Payable-Part of Hospital's internal Cost
174	ALCOHOL SWABES	Not Payable-Part of Hospital's internal Cost
175	SCRUB SOLUTION/STERILLIUM	Not Payable-Part of Hospital's internal Cost
<b>OTHERS</b>		
176	<b>VACCINE CHARGES FOR BABY</b>	Not Payable
177	<b>AESTHETIC TREATMENT / SURGERY</b>	Not Payable
178	<b>TPA CHARGES</b>	Not Payable
179	<b>VISCO BELT CHARGES</b>	Not Payable
180	<b>ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]</b>	Not Payable
181	<b>EXAMINATION GLOVES</b>	Not Payable
182	<b>KIDNEY TRAY</b>	Not Payable
183	<b>MASK</b>	Not Payable
184	<b>OUNCE GLASS</b>	Not Payable
185	<b>OUTSTATION CONSULTANTS/ SURGEONS FEES</b>	Not Payable
186	<b>OXYGEN MASK</b>	Not Payable

187	<b>PAPER GLOVES</b>	Not Payable
188	<b>PELVIC TRACTION BELT</b>	Should be payable in case of PIVD requiring traction as this is generally not reused
189	<b>REFERAL DOCTORS FEES</b>	Not Payable
190	<b>ACCU CHECK ( Glucometry/ Strips)</b>	Not Payable pre hospitalization or post hospitalization/ Reports and Charts required/Device not payable
191	<b>PAN CAN</b>	Not Payable
192	<b>SOFNET</b>	Not Payable
193	<b>TROLLY COVER</b>	Not Payable
194	<b>UROMETER, URINE JUG</b>	Not Payable
195	<b>AMBULANCE</b>	Payable-Ambulance from home to hospital or interhospital shifts is payable/RTA as specific requirement is payable
196	<b>TEGADERM/ VASOFIX SAFETY</b>	Payable-maximum of 3 in 48 hrs and then 1 in 24 hrs
197	<b>URINE BAG</b>	Payable where medically necessary till a reasonable cost-maximum 1 per 24 hrs
198	<b>SOFTOVAC</b>	Not Payable
199	<b>STOCKINGS</b>	Essential for case like CABG etc, where it should be paid