

my:health Women Suraksha

Sec	Sub Sec	Coverage	Women Cancer Plan	Women Cancer Plus Plan	Women Cardiac Plan	Women CI Essential Plan	Women CI Comprehensive Plan	Women Assault & Burns	Sum Insured Limits
A. Coverage									
A I - Major Illnesses & Procedures									
1		Cancer Cover	Covered	Covered	X	Covered	Covered	X	1 Lac to 1 CR
		Malignant Cancer of the following sites: <ul style="list-style-type: none"> • Breast • Cervix • Uterus • Fallopian Tube • Ovary • Vagina/Vulva Other Cancers Other Major Cancers • Carcinoma in situ of Cervix Uteri • Carcinoma in situ of Breast 							
2		Major Illnesses	X	Covered	X	Covered	Covered	X	1 Lac to 1 CR
		<ul style="list-style-type: none"> • Systemic Lupus Erythematosus with Lupus Nephritis • Rheumatoid Arthritis • Severe Osteoporosis 							
3		Surgical Procedures	X	X	X	Covered	Covered	X	1 Lac to 1 CR
		<ul style="list-style-type: none"> • Breast Lumpectomy • Mastectomy • Breast Reconstructive Surgery • Hysterectomy • Wertheim's Operation • Radical Vulvectomy • Total Pelvic Exenteration • Complicated Repair of Vaginal Fistula 							
4		Cardiac Ailments & Procedures	X	X	Covered	Covered	Covered	X	1 Lac to 1 CR
		<ul style="list-style-type: none"> • Open Chest CABG • Heart Valve Repair • First Heart Attack of Specified • Coma of Specified Severity • Stroke Resulting in Permanent Symptom • Angioplasty • Balloon Valvotomy or Valvuloplasty • Insertion of Pacemaker 							
5		Critical Illnesses	X	X	X	X	Covered	X	1 Lac to 1 CR
		As per Annexure							

A II - Assault & Burns									
6		Assault & Burns	Optional	Optional	Optional	Optional	Optional	Covered	1 Lac to 1 CR (over and above base SI, should not exceed base SI if applicable)
	a	Assault							
	b	Burns							
B. my:Health Active									
1		Fitness Discount	Covered	Covered	Covered	Covered	Covered	Covered	Not Applicable
2		Health Incentives	Covered	Covered	Covered	Covered	Covered	Covered	Not Applicable
3		Wellness & Health Coach	Covered	Covered	Covered	Covered	Covered	Covered	Not Applicable
C. Renewal Benefits									
1		Preventive Health Check-up	Covered	Covered	Covered	Covered	Covered	Covered	Covered
D. Optional Covers (Applicable only with Section A I)									
1		Pregnancy & Newborn Complications	Not Applicable	Optional	Not Applicable	Optional	Optional	Not Applicable	25% of SI, Max 500,000
	a	Pregnancy Complications							
	b	Newborn Congenital Conditions							
2		Post diagnosis Support	Optional	Optional	Optional	Optional	Optional	Not Applicable	
	a	Molecular Gene Expression Profiling Test							
	b	Outpatient Counselling							
	c	Second Medical Opinion							
3		Loss of Job Benefit	Optional	Optional	Optional	Optional	Optional	Not Applicable	up to 50% of monthly Salary upto 6 months