

TERMS AND CONDITIONS AND SALIENT FEATURES OF GHIP 2026-27

INSURER: ORIENTAL INSURANCE CO.LTD.

TPA: HEALTH INDIA INSURANCE TPA SERVICES PVT. LTD.

BROKER: PREMIUM INSURANCE BROKERS PVT. LTD.

ELIGIBILITY: GHIP IS ONLY AVAILABLE FOR AILREA MEMBERS, NO MEMBER CAN BE COVERED TWICE

VALIDITY: 08 Sep 2026 till 07 Sep 2027

ENTRY AGE/MEDICAL TESTS: NO AGE LIMIT AND NO TESTS

CONDITIONS FOR REJOINING AFTER TAKING A BREAK IN YEAR 2025-26

1. All members who join back after a break for any reason whatsoever will be considered as new members.
2. Members who do not continue their membership the following year after making a claim are not permitted to re-join for one additional year. Hence if you made a claim in 2024-25 and failed to renew your policy in 2025-26, then you cannot join this policy now in 2026-27. You will have to wait one more year, to be eligible to re-join the GHIP Policy in 2027-2028.
3. However, members who took a break in 2025-26 but had not made any claims in 2024-25 are welcome to re-join this year.

COVER FOR PRE EXISTING DISEASES

For existing members who continue their policy without a break with effect from 08 Sep 2026, all preexisting disease are covered from day one.

COOLING PERIOD: **New members**, joining GHIP for the first time, as well as those joining after a break, are subject to a cooling period of 60 days before any claim can be entertained.

New members also cannot make any claim with respect to Cancer or Joint replacement treatment in the first year of joining.

LEVELS OF COVERAGE:

Scheme offers cover for individual and floater (individual plus spouse) for Rs.5, 7.5 and 10 lakhs.

HOSPITAL LISTS and CASHLESS COVERAGE:

Extensive list of network hospitals Pan India is available which can be checked on TPA website or by using help lines of

[HealthIndia Insurance TPA Services Pvt. Ltd. \(healthindiatpa.com\)](http://healthindiatpa.com)

Important Policy Terms and Conditions listed below.

Important Policy Terms and Conditions	
Particulars	Coverage.
Eligibility	Members of AIR INDIA LTD RETIRED EMPLOYEES ASSOCIATION
Family Size	Self& Spouse
Sum Insured	Rs.5,00,000/- or Rs.7,50,000/- or Rs.10,00,000/-

Room Rent Capping (Per day)	1% of Sum Insured for Normal Room and 2% of Sum Insured for ICU Proportionate clause All benefits as an inpatient in a hospital attached to Room will be restricted to the Room which falls within the room rent limits allowed. The Enhance difference in expenses due to opting rooms with higher room rent than what has been allowed will be borne by the insured only excluding cost of pharmacy, consumable implants, medical devices and diagnostics medically prescribed by treating doctor under the policy. Wherever the room rent base tariff for the other expenses is not available, the payment would be done in same proportion as per the entitlement of room rent under the policy.
Day Care Treatment	Covered as per Oriental Insurance Co. Ltd. list of day care procedures

Pre-hospitalization Medical Expenses	30 days prior to the date of admission								
Post-hospitalization Medical Expenses	60 days from the date of discharge								
Ailment Capping	Cataract Rs.35,000 per eye, Knee Replacement and Hip replacement Rs2 lacs per knee and per Hip. If due to accident or fall where Knee joint or Hip Joint is damaged then the above capping will not be applied. (Or applicable for planned surgery only). Angioplasty Rs.2 lacs, AngiographyRs.35,000. FOR CHEMOTHERAPY, RADIOLOGY AND KIDNEY DIALYSISAS FOLLOWS: <table> <tr> <td>Sum Insured</td><td>Capping for chemo therapy, radiology, dialysis</td></tr> <tr> <td>5 lakh</td><td>1 lakh</td></tr> <tr> <td>7.5 lakh</td><td>1.5 lakh</td></tr> <tr> <td>10 lakh</td><td>2 lakh</td></tr> </table>	Sum Insured	Capping for chemo therapy, radiology, dialysis	5 lakh	1 lakh	7.5 lakh	1.5 lakh	10 lakh	2 lakh
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Co-pay	15% co-pay on all claims. Pre-post hospitalisation claims will also attract 15% co-pay. No co-pay on capped ailments mentioned above.
Congenital Internal Diseases	Internal congenital disease or defects Covered. External congenital disease or defects not Covered.
Terrorism	Terrorism related hospitalization covered.
Special Conditions	Immunotherapy-Monoclonal Antibody to be given as injection - Up to 20% of Sum Insured subject to a maximum of Rs.2 Lacs per policy period / per family. Lucentis, Avestin, macugen, accentrix, remicade and similar such medicines which can be administered in OPD are paid.

	Cyber knife Surgery is restricted to reasonable charges or max. upto 50% of Sum Insured.
	Cochlear Implant / Bionic Ear, Circumcision, Laser surgery for vision correction, Botox injection for treatment other than for cosmetic use. For Eye Surgery, all types of lens are allowed .Surgery for eyesight correction is covered if the number is +7/-7.
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Domiciliary Hospitalization	Covid Home Care Treatment covered upto 10% of Sum Insured
	Home Care Treatment means Treatment availed by the Insured Person at home for Covid-19 on positive diagnosis of Covid-19 in a Government authorized diagnostic Centre, which in normal course would require care and treatment at a hospital but is actually taken at home maximum upto 14 days per incident provided that: - Ø the Medical Practitioner advises the Insured Person to undergo treatment at home - Ø there is a continuous active line of treatment with monitoring of the health status by a medical Practitioner for each day through the duration of the home care treatment - Ø daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained - Ø insured shall be permitted to avail the services as prescribed by the Medical Practitioner. Cashless facility shall be offered under home care expenses if the treatment is through a network provider - Ø In case the insured intends to avail the services of non-network provider claims shall be subject to reimbursement, a prior approval from the Insurer/TPA needs to be taken before

	availing such services. Ø the Home Care treatments shall include the following, if prescribed by the treating Medical Practitioner and is related to treatment of COVID: i. Diagnostic tests undergone at home or at diagnostics center ii. Medicines prescribed in writing iii. Consultation charges of the medical practitioner iv. Nursing charges related to medical staff v. Medical procedures limited to parenteral administration of medicines vi. Cost of Pulse Oximeter, Oxygen cylinder and Nebulizer
Cashless Benefit	Covered. Cashless will be provided in TPA and Insurance network hospitals.
Additional Coverages	1. Uterine Artery Embolization & High Intensity Focused Ultrasound (HIFU) - Up to 20% of Sum Insured subject to a maximum of Rs.2 Lacs per policy period for claims involving Uterine Artery Embolization & HIFU 2. Balloon Sinuplasty - Up to 10% of Sum Insured subject to a maximum of Rs.1 Lac per policy period for claims involving Balloon Sinuplasty 3. Deep Brain Stimulation - Upto70% of Sum Insured per policy period for claims involving Deep Brain Stimulation 4. Oral Chemotherapy - Up to 20% of Sum Insured subject to a maximum of Rs.2 Lacs per policy period for claims involving Oral Chemotherapy 5. Immunotherapy-Monoclonal Antibody to be given as

	injection - Up to 20% of Sum Insured subject to a maximum of Rs.2Lacs per policy period. Lucentis, Avestin, macugen, accentrix, remicade and similar such medicines which can be administered in OPD are paid 6. Intra vitreal Injections - Up to 10% of Sum Insured subject to a maximum of Rs.1Lac per policy period. 7A. Robotic Surgeries (Including Robotic Assisted Surgeries) Upto 75% of Sum Insured per policy period for claims involving Robotic Surgeries for (i) the treatment of any disease involving Central Nervous System irrespective of aetiology; (ii) Malignancies
	7B. Upto 50% of Sum Insured per policy period for claims involving Robotic Surgeries for other diseases 8. Stereotactic Radio Surgeries - Up to 50% of Sum Insured per policy period for claims involving Stereotactic Radio Surgeries 9. Bronchial Thermoplasty - Up to 30% of Sum Insured subject to a maximum of Rs.3 Lacs per policy period for claims involving Bronchial Thermoplasty. 10. Vaporisation of the Prostate (Green laser treatment for holmium laser treatment) - Up to 30% of Sum Insured subject to a maximum of Rs.2Lacs per policy period. 11. Intra Operative Neuro Monitoring (IONM) - Up to 15% of Sum Insured per policy period for claims involving Intra Operative Neuro Monitoring subject to a maximum of Rs.1Lac per policy period. 12. Stem Cell Therapy: Hematopoietic Stem Cells for bonemarrow transplant for haematological conditions to be coveredonly - No additional sub-limit

Ambulance charges	Upto Rs.5,000/-per event subject to overall admissibility of the claim. Dr's prescription is compulsory for Ambulance charges claim
Ayurvedic or Homeopathic Treatment	AYUSH treatment will be covered under policy subject to treatment under government registered hospitals
Claim Intimation	Within 15 days from date of admission
Claim documents Submission	Within 60 days from date of discharge
General Exclusions under the policy are listed below 1. Treatment directly or indirectly arising from or consequent upon war or any act of war, invasion, act of foreign enemy, civil war, public defense, rebellion, chemical and biological weapons, ionizing radiation, contamination by radioactive material or radiation of any kind, nuclear fuel, nuclear waste. 2. Committing or attempting to commit a breach of law with criminal intent, intentional self-Injury or attempted suicide while Insured Person is sane or insane. 3. Non-adherence to Medical advice, participation or involvement in naval, military or airforce operation, circus personnel, racing in wheels or horseback, 4. Abuse or the consequences of the abuse of intoxicants or hallucinogenic 5. Weight management programs or treatment in relation to the same including vitamins and tonics, treatment of obesity (including morbid obesity). 6. All routine examinations and preventive health check-ups. 7. Cosmetic, aesthetic and re-shaping treatments and Surgeries: 8. Circumcisions 9. Non-allopathic treatment, except as per coverage of AYUSH Treatment. 10. Conditions for which treatment could have been done on an out-patient basis without any Hospitalization. 11. Unproven/Experimental treatment, 12. Admission primarily for diagnostic purposes not related to Illness for which Hospitalization has occurred. 13. Convalescence cure, rest cure, sanatorium treatment, rehabilitation measures, private duty nursing, respite care, long-term nursing care or custodial care. 14. Preventive care, vaccination including inoculation and immunizations	

15. Hearing aids, spectacles or contact lenses including optometric therapy, multi focallens.
16. Medical supplies including elastic stockings, diabetic test strips, and similar products.
17. Devices external durable medical equipment of any kind, like wheelchairs crutches, instruments used in treatment of sleep apnea syndrome or continuous ambulatory peritoneal dialysis (C.A.P.D.)
18. Parkinsons and Alzheimer's disease, general debility or exhaustion ("run down condition"), sleep-apnea, stress.
19. External Congenital Anomalies, diseases or defects, genetic disorders.
20. Venereal disease, all sexually transmitted disease or illness
21. "AIDS" (Acquired Immune Deficiency Syndrome) and/or infection with HIV (Human Immunodeficiency Virus)
22. Treatment for sterility, infertility, sub-fertility
23. Treatments such as Rotational Field Quantum Magnetic Resonance (RFQMR), External Counter Pulsation (ECP), Enhanced External Counter Pulsation (EECP), Hyperbaric Oxygen Therapy, Herceptin etc.
24. Treatment taken from a person not falling within the scope of definition of Medical Practitioner.
25. Non-medical expenses
26. Treatment taken outside India.
27. Insured Person whilst flying or taking part in aerial activities except as a fare-paying passenger in a regular scheduled airline or air charter company.
28. Air Ambulance not payable

Note: The above list is indicative in nature.

Claim Procedure:

Claims Intimation-Intimate the claim within 48hours of hospitalisation through any of the following options:

[Email:frd@healthindiatpa.com](mailto:frd@healthindiatpa.com)

Call:1800220102,022-40881000

Claims Submission: Within 30days from the date of Discharge on below address.

HEALTHINDIA INSURANCE TPA SERVICES

Neelkanth Corporate IT Park, Office No 406 to 412,4th floor, Kirol Rd, Vidyavihar West, Mumbai400086

Servicing of the Policy : PREMIUM INSURANCE BROKERS PVT.LTD. D-521, Neelkanth Business Park, 5th floor, Nathani Rd, Vidyavihar West, Mumbai 400086