

Policy Terms and Conditions

Section	Details
Wellness Flex Overview	Wellness Flex provides a cashless-only (no reimbursement) benefit for doctor consultations, pharmacy, lab tests, vision, dental, physiotherapy and tele consultations, are available exclusively through the MediBuddy Portal or Mobile Application.
Eligible User Criteria	Only enrolled beneficiaries (enrolled during the enrollment window) are eligible for these benefits. No mid-year enrollments will be allowed.
Coverage Options	<ol style="list-style-type: none"> 1. Associate (A) 2. Associate + Spouse (AS) 3. Associate + Spouse + Children (up to 3 children) (ASC) 4. Associate + Spouse + Children + 2 Parents/Parents-in-law (ASCP) <i>Any combination of two parents can be enrolled as per choice.</i>
Beneficiaries	Associate need to be careful while providing beneficiary details during utilization and the same will be considered by Medibuddy throughout the policy year. Associate will not be able to modify beneficiary names and relations during utilization. Disclaimer: Medibuddy will have the authority to cancel the plan with no refund of premium in case any wrong information is provided by associate.
Usage Eligibility	<ol style="list-style-type: none"> a. Associates can opt for only one Flex plan from the available options. b. The selected plan is valid for one year (April 1, 2025 – March 31, 2026). c. Wallet balance must be used within the policy year. Unused benefits will lapse at the end of the policy year.

	<p>d. In case of exit, associates can continue to avail benefits until the end of the policy year via the MediBuddy Mobile Application.</p> <p>e. No refund of premium or plan cancellations are allowed once the enrollment window is closed.</p> <p>f. In the event that the benefits of the activated plan are fully utilized during the policy period, no further plans will be activated, nor wallet amount top-ups will be performed.</p>
<p>Premium deduction</p>	<p>The premium for the selected plan will be deducted from the associate's salary or paycheck.</p> <p>Associate must accept the policy terms and conditions and consent to the total premium being deducted from their salary or paycheck in three (3) equal installments from April 2025 onwards.</p>
<p>Wellness Flex Wallet</p>	<p>Based on the plan selection, the related amount will be appearing on the wallet option on Medibuddy Platform for utilization.</p>

<p>Prescribed Medicines</p>	<p>✓ Inclusions:</p> <ul style="list-style-type: none"> - Medicines can be purchased only with a valid prescription from a registered medical practitioner. - Only the prescribed quantities will be provided. <p>✗ Exclusions:</p> <ul style="list-style-type: none"> - FMCG products, medical devices, and controlled (scheduled) drugs as per government norms for online pharmacy delivery. - Food supplements, dietary pills, cosmetics, acne treatments, hair fall treatments, and weight loss products. - Ayurvedic products, non-consumables (e.g., syringes, needles), hygiene products (e.g., menstrual products, toothpaste, sanitizers, etc.). - Alcohol/drug abuse-related medicines, infertility treatments, and pregnancy-related pharmacy items will not be covered.
<p>In-person doctor appointment</p>	<p>✓ Inclusions: All specialties are covered except the exclusions below.</p> <p>✗ Exclusions:</p> <ol style="list-style-type: none"> a. AYUSH treatments are not covered. b. Skin conditions and hair loss treatments are not covered. c. Doctor's prescription submission post-consultation is mandatory.
<p>Prescribed Lab Tests</p>	<p>✓ Inclusions:</p> <ul style="list-style-type: none"> - Diagnostic tests may be availed only with a valid prescription from a registered medical practitioner. <p>✗ Exclusions:</p> <ul style="list-style-type: none"> - Cosmetic, hair fall, skin-related, smoking cessation, alcohol/drug-related, infertility, and alternative medicine-related tests. - Pregnancy-related lab tests are not covered.

<p>Vision Care</p>	<p>✓ Inclusions:</p> <ul style="list-style-type: none"> - Only Prescribed powered lenses and powered contact lenses are covered. <p>✗ Exclusions:</p> <ul style="list-style-type: none"> - Procedures such as cataract surgery, LASIK, and glaucoma surgeries etc. are not covered. - Sunglasses and frames are not covered.
<p>Dental Services</p>	<p>✓ Inclusions:</p> <ul style="list-style-type: none"> - Dental procedures booked with a valid prescription from a registered dentist are covered. - Covered procedures: X-ray, filling, RCT, extraction, scaling, and polishing. <p>✗ Exclusions:</p> <ul style="list-style-type: none"> - Crowning, surgery, implants, braces, and cosmetic dental procedures are not covered.
<p>Tele-consultations (MediBuddy Gold)</p>	<p>Unlimited General Physician (GP) Consultations (Included in Flex Plan 1 and 2)</p> <p>✓ Inclusions:</p> <ul style="list-style-type: none"> - General Physician (GP) consultations for cold, cough, fever, general medicine, and lab report analysis for enrolled beneficiaries. <p>✗ Exclusions:</p> <ul style="list-style-type: none"> - Other specialty consultations are not included under GP consults. - Fair usage policy applies (max 20 consultations per month). <p>Unlimited Specialist Consultations (Included in Flex Plan 3, 4, and 5)</p> <p>✓ Inclusions:</p> <ul style="list-style-type: none"> - Unlimited specialist consultations available on the MediBuddy platform for enrolled beneficiaries. - Fair usage policy applies (max 20 consultations per month).

<p>Vaccinations</p>	<p>✓ Inclusions:</p> <ul style="list-style-type: none"> - Child and adult vaccinations are covered as per WHO guidelines. <p>✗ Exclusions:</p> <ul style="list-style-type: none"> - Child vaccinations within the first 48 hours of birth will not be covered.
<p>Physiotherapy</p>	<p>✓ Inclusions:</p> <ul style="list-style-type: none"> - Prescribed physiotherapy sessions with a valid prescription from a registered medical practitioner are covered. - Sessions will be scheduled only with physiotherapists under the MediBuddy network.
<p>General Terms & Conditions</p>	<ul style="list-style-type: none"> a. Non-medical expenses or standard deductions during inpatient hospitalization or daycare treatments are not covered. b. Benefits are available only within the MediBuddy network. c. IPD-related expenses are not covered. d. Cosmetic procedures (consultations, diagnostics, and medicines) are not covered unless specifically mentioned under inclusions. <ul style="list-style-type: none"> - Cosmetic surgery includes treatments solely or primarily for improving appearance (e.g., chemical peels, laser hair removal). e. Maternity-related expenses, pre- and post-natal care, and IVF/infertility treatments are not covered. f. Obesity-related treatments are not covered. g. Naturopathy and related treatments/expenses are not covered. h. Excluded tests: Cosmetic, hair fall, skin-related, smoking cessation, alcohol/drug-related, infertility, and alternative medicine-related tests. <ul style="list-style-type: none"> - Generic tests (e.g., blood sugar, thyroid tests) are covered. i. Changes to plan selection or cancellations can only be done during the enrolment window period and the last modification done from your end will be taken as final enrolment for the year.

