

Ref: IRDAI/HLT/REG/CIR/193/07/2020

22nd July, 2020

All Insurers (excluding specialized insurers) and TPAs, wherever applicable

Sub: Master Circular on Standardization of Health Insurance Products

1. Objective:

1.1 The extant IRDAI (Health Insurance) Regulations 2016 were notified on 18th July, 2016 superseding IRDA (Health Insurance) Regulations 2013.

1.2 The Guidelines on Standardization in Health Insurance were issued on 29th July, 2016.

1.3 Subsequently Modification Guidelines have been issued from time to time amending aforementioned Guidelines. Further, some new Guidelines have been issued under the provisions of the Insurance Act, 1938 and IRDAI (Health Insurance) Regulations 2016.

1.4 In consolidation of all the Guidelines issued up to 31st March, 2020 and in force as on date, this Master Circular on Standardization of Health Insurance Products is issued.

2. Applicability:

2.1 This Master Circular is applicable to all insurers (excluding specialized insurers) and the TPAs wherever applicable unless otherwise specified thereunder.

3. Legal and other provisions:

3.1 This Master Circular is issued under the provisions of Section 34 (1)(a) of the Insurance Act, 1938, Regulation 14(2)(e) of the IRDAI Act 1999, Regulation 2(i)(o), 18, 31(e) and 37 of IRDAI (Health Insurance) Regulations 2016.

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4. Repeal and Savings:

4.1 This Master circular supersedes the following Guidelines/Circulars:

Sl. No.	Circular Reference	Description
1.	IRDA/HLT/REG/CIR/146/07/2016 dated 29.07.2016	Guidelines on Standardization in Health Insurance
2.	IRDA/HLT/CIR/212/10/2016dated 27.10.2016	Clarification to Guidelines on Standardization in Health Insurance
3.	IRDA/HLT/GDL/CIR/257/12/2016 dated 29.12.2016	Clarification to Guidelines on Standardization in Health Insurance
4.	IRDA/HLT/REG/CIR/006/01/2017 dated 10.01.2017	Partial Modification of the provisions of Guidelines on Standardization in Health Insurance
5.	IRDA/HLT/GDL/CIR/114/07/2018 dated 27.07.2018	Modified Guidelines on Standards and Benchmarks for hospitals in the provider network
6.	IRDA/HLT/GDL/CIR/136/08/2018 dated 27.08.2018	Modified Guidelines on Items for which optional cover may be offered by insurers
7.	IRDA/HLT/GDL/CIR/122/07/2019 dated 26.07.2019	Extension of timelines to comply with the Guidelines on Standards and Benchmarks for the Hospitals in the Provider Network
8.	IRDA/HLT/REG/CIR/176/09/2019 dated 27.09.2019	Modification Guidelines on Standardization in Health Insurance
9.	IRDA/HLT/REG/CIR/177/09/2019 dated 27.09.2019	Guidelines on Standardization of Exclusions in Health Insurance Contracts
10.	IRDA/HLT/REG/CIR/209/11/2019 dated 26.11.2019	Modified guidelines on Standardization in Health Insurance Business
11.	IRDA/HLT/REG/CIR/001/01/2020 dated 01.01.2020	Guidelines on Standard Individual Health Insurance Product
12.	IRDA/HLT/REG/CIR/002/01/2020 dated 01.01.2020	Modification guidelines on standardization in health insurance
13.	IRDA/HLT/REG/CIR/ 031/01/2020 dated 24.01.2020	Modification Guidelines on Standard Individual Health Insurance Product
14.	IRDA/HLT/REG/CIR/046/02/2020 dated 10.02.2020	Amendments in respect of provisions of Guidelines on Standardization of Exclusions in Health Insurance Contracts and Modification Guidelines on Standardization in Health Insurance
15.	IRDA/HLT/REG/CIR/055/03/2020 dated 04.03.2020	Modification Guidelines on Standard Individual Health Insurance Product

5. The Master Circular is divided into three sections.
 - 5.1 Section 1 - Guidelines on Standardization in Health Insurance,
 - Section 2 - Guidelines on Standardization of Exclusions in Health Insurance Contracts; and
 - Section 3 - Guidelines on Standard Individual Health Insurance Product

6. Effective date :

This Master circular shall come into force with immediate effect.


D V S Ramesh
General Manager (Health)

Chapter II: Exclusions not allowed in Health Insurance Policies

1. On examining the extant wordings in the health insurance policy contracts and the prevailing exclusions, it is directed that the following exclusions shall not be allowed in health insurance (Other than PA & Travel) policies. No Health Insurance Policy shall incorporate the following exclusions in the terms and conditions of the policy contract.
 - a. Diseases contracted after taking the health insurance policy, except for the conditions excluded for which standard wordings are prescribed in Chapter III.
 - b. Injury or illness associated with hazardous activities. (Explanation: However, only treatment necessitated due to participation in adventure or hazardous sports is permitted as exclusion.)
 - c. Impairment of Persons' intellectual faculties by usage of drugs, stimulants or depressants as prescribed by a medical practitioner.
 - d. Artificial life maintenance, including life support machine use, where such treatment will not result in recovery or restoration of the previous state of health under any circumstances unless in a vegetative state as certified by the treating medical practitioner. (Explanation: Expenses up to the date of confirmation by the treating doctor that the patient is in vegetative state shall be covered as per the terms and conditions of the policy contract).
 - e. Treatment of mental illness, stress or psychological disorders and neurodegenerative disorders.
 - f. Puberty and Menopause related Disorders: Treatment for any symptoms, illness, complications arising due to physiological conditions associated with Puberty, Menopause such as menopausal bleeding or flushing.
 - g. Age Related Macular Degeneration (ARMD)
 - h. Behavioural and Neuro developmental Disorders:
 - i. *Disorders of adult personality ;*
 - ii. *Disorders of speech and language including stammering, dyslexia;*
 - i. Expenses related to any admission primarily for enteral feedings.
 - j. Internal congenital diseases, genetic diseases or disorders.
 - k. If specified aetiology for the medical condition is not known.
 - l. Failure to seek or follow medical advice or failure to follow treatment.

Chapter V: Modern Treatment Methods and Advancement in Technologies:

1. To ensure that the policyholders are not denied availability of health insurance coverage to Modern Treatment Methods Insurers shall ensure that the following treatment procedures shall not be excluded in the health insurance policy contracts. These Procedures shall be covered (wherever medically indicated) either as in-patient or as part of domiciliary hospitalization or as day care treatment in a hospital.
 - A. Uterine Artery Embolization and HIFU
 - B. Balloon Sinuplasty
 - C. Deep Brain stimulation
 - D. Oral chemotherapy
 - E. Immunotherapy- Monoclonal Antibody to be given as injection
 - F. Intra vitreal injections
 - G. Robotic surgeries
 - H. Stereotactic radio surgeries
 - I. Bronchical Thermoplasty
 - J. Vaporisation of the prostate (Green laser treatment or holmium laser treatment)
 - K. IONM - (Intra Operative Neuro Monitoring)
 - L. Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.
2. Subject to product design sub-limits may be imposed for any of the above treatments.
3. Insurers may endeavour to cover any other modern treatment methods