



Complainant Rajesh Kumar Verma, a resident of Ahmedabad, had alleged that he was insured with the respondents under the **group medical insurance scheme** for the period from April 9, 2007 to April 9, 2008 for a sum of Rs 2 lakh. He was operated for angioplasty at Krishna Heart and Super Specialty Institute at Ahmedabad on December 4, 2007. He submitted his medi-claim form on February 17, 2008 to the respondents but they rejected the same on the ground that the hospitalization was for the management of an ailment, which related to pre-existing condition. He wrote numerous letters to the respondents along with the opinion of the cardiologist to consider his claim but to no avail.

Respondents in their reply stated upon receipt of claim they appointed an officer who after processing the claim found the claim was not covered under the perils.

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Source: *Times of India news*