

CAREHEALTH PLUS

EXCLUSIONS FROM COVERAGE:

1. Care by non-accredited Physician and/or in a non-preferred / non-accredited hospital/clinic except in emergencies wherein the emergency provision of the agreement will apply.
2. All pregnancy related conditions requiring medical/surgical care and screening tests related thereto
3. Sterilization of either sex or reversal of such, artificial insemination, sex transformations or diagnosis and treatment of infertility, and circumcision.
4. Rest cures, custodial, domiciliary or convalescent care
5. Cosmetic surgery, dental / oral surgery, and dermatological procedures for the purpose of beautification except reconstructive surgery to treat a dysfunctional defect due to disease or accident.
6. Psychiatric disorders, psychosomatic illnesses, hyperventilation syndrome, adjustment disorders, alcoholism and its complications or conditions related to substance or drug abuse, addiction and intoxication
7. Organ Donor Services "for organ transplants and/or open heart surgery and all services related thereto"
8. Sexually transmitted diseases
9. Medical and surgical procedures which are not generally accepted as standard treatment by the medical profession
10. Procurement or use of corrective appliances, artificial aids, durable equipment, and orthopedic prosthesis and implants
11. Surcharges resulting from additional personal (luxuries/accommodation) request or service including special nursing services
12. Physical examination required for obtaining employment, medical certification, insurance or a government license
13. Injuries or illnesses due to military, paramilitary, police service, high risk activities, or suffered under conditions of war
14. Reimbursement of procedures obtained through government programs
15. Injuries or illnesses, which are self-inflicted, caused by attempt at suicide or incurred as a result of or while participating in a crime or acts involving the violation of laws or ordinances
16. Outpatient/take-home medicines
17. Valvular Heart Disease and Rheumatic Heart Disease
18. Medico-legal consultations
19. When a member is discharged against medical advice, and all subsequent benefits/services related thereto 20 Blood / Organ Donor screening / other screening procedures that are purely diagnostic or for screening purposes including among others, Purified Protein Derivative (PPD), and procedures conducted prior to hormonal replacement therapy
20. All hospital charges and professional fees after the day and time hospital discharge has been duly authorized and professional fees of Assistant Surgeons
21. All dental related services not expressly stipulated in the Dental Benefits form
22. Hypersensitivity/allergy tests
23. Diseases declared by the Department of Health (DOH) as Epidemic
24. Blood / Organ Donor screening / other screening procedures that are purely diagnostic or for screening purposes including among others, Purified Protein Derivative (PPD), and procedures conducted prior to hormonal replacement therapy
25. Use of Emergency Room Facilities on non- emergency cases or by reason of conditions/ injuries not falling under the term "Emergency" as defined in the Agreement (Emergency shall mean the sudden, unexpected onset of illness or injury having the potential of causing immediate disability or death, or requiring the immediate alleviation of severe pain & discomfort.) For the purpose of implementation, the final diagnosis shall be the basis for a member's eligibility to emergency care benefits under his/her plan.
26. Miscellaneous Fees not related in the diagnosis and treatment of a member's condition such as, but not limited to, nursing fee, waste/biologic hazard disposal fee, management fee, local taxes, and other analogous fees