# icicilombard.com

✓ Instant Policy
✓ No Paperwork



Big on Benefits & Tax-savings, small on price



Hospitalization + OPD Expenses + Tax Savings

Health and wellness form an important aspect of the balance in your life. To ensure that you are taken care of when the need arises, we present 'Health Advantage Plus', a unique health policy that covers you not only for hospitalisation expenses but also for Out Patient Treatment expenses (OPD expenses) caused by, including but not limited to, accidents arising out of terrorist activities. Now, get covered even against Swine Flu / H1N1 influenza in case of hospitalisation, if it's not a pre-existing illness. You can also avail of tax benefits~ on your premium paid subject to the provisions of Section 80D of the Income Tax Act, 1961 and amendments made thereafter.

Health Advantage Plus - A comprehensive health insurance policy that offers you complete protection!

~ Tax benefits are subject to changes in tax laws.



**Key Benefits** 

#### Floater is a common cover for both the members

#### **Floater Cover**

Anyone out of the 2 adults insured can avail of either covers under Health Advantage Plus; Floater provides a common cover for both members.

#### No Medical Check-up

No health check-up up to the age of 55 years (age as on last birthday)

### **Cashless Hospitalization**

Simply use your 'Health Advantage Plus' ID card at any of the empanelled **3500+** hospitals and avail of cashless service, a boon for those times when you need finance the most. This benefit is only for hospitalisation claims.

#### **Maximum Tax Benefit**

You can avail a full utilisation of tax benefit on up to  $\stackrel{?}{\stackrel{?}{\sim}}$  15,000/-( $\stackrel{?}{\stackrel{?}{\sim}}$  20,000 for Senior Citizens) as premium paid under Section 80D of the Income Tax Act,1961. This will save up to  $\stackrel{?}{\stackrel{?}{\sim}}$  4635/- ^ in your tax liability in one year.

### **Pre-existing Disease**

Pre-existing diseases covered from the third year onwards upon two consecutive renewals with the company



### Coverages

# Basic Hospitalisation Cover

Covers medical expenses incurred as an inpatient during hospitalisation for more than 24 hours, including room charges, doctor's / surgeon's fee, medicines, diagnostic tests, etc.

- 30 days pre-hospitalisation
- 60 days post-hospitalisation
- Pre-existing diseases shall be covered after 2 years of continuous renewal with the company
- Coverage against Swine Flu / H1N1 influenza in case of hospitalisation~
- Following technologically advanced treatments that do not need 24-hour hospitalisation\* but are covered under this policy are::
  - Cataract
  - Dilatation and curettage
  - Cardiac Catheterization
  - Lithotripsy (Kidney Stone removal)
  - Chemotherapy
  - Tonsillectomy

<sup>^</sup> Indicative figure. Consult your Tax Advisor for benefits applicable to you. Tax benefits are subject to changes in tax laws.

- Radiotherapy
- Eye Surgery
- Coronary Angiography
- Dialysis



# Outpatient Treatment Expenses Cover

For the first time in India, you can avail of an insurance cover for **orthopedic**, **maternity**, **dental**, **pharmacy**, **general practitioner** and other medical expenses incurred up to the sum insured on OPD basis.

The	following	OPE	) e	xpenses		are	covered:
Room,	Boarding	Expenses	as	charged	by	the	Hospital
Nursing							Expenses
Expenses	rel	related		to De			Treatment
Surgeon,	Anaesthetist,	Medical	Practitioner,	Consulta	nts,	Specialist	Fees
Anaesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Consumables, Medicines and							
Drugs, Diagnostic Materials and X-ray, Dialysis, Chemotherapy, Radiotherapy, Cost of Pacemaker,							
Cost of Artificial Limbs External Medical Aids, Dental treatment charges, Ambulance charges							

**Note:** The OPD claims can be made only on a reimbursement basis. You can lodge a claim only once during the Period of Insurance, i.e. 90 days after commencement of policy and up to 30 days after expiry of the Period of Insurance.

### **Terms of Renewalability**

### Health Advantage Plus Plan can be renewed instantly\*

- a. The policy can be renewed under the then prevailing Health Advantage Plus Plan or its nearest substitute approved by IRDA in the event that the plan has been discontinued.
- b. **Renewal Premium** Premium payable on renewal and on subsequent continuation of cover are subject to change with prior approval from IRDA
- c. Maximum Entry Age The maximum entry age under this policy is 65 years.
- d. Maximum Renewal Age This policy can be renewed up to a maximum age of 70 years.
- e. **Floater Benefit** The floater benefit under this policy is available up to the age of 55 years. All floater policies thereafter will be renewed under individual plan up to the age of 70 years.
- f. **Grace Period** The Policy may be renewed by mutual consent and in such event the renewal premium shall be paid to the Company on or before the date of expiry of the Policy and in no case later than 15 days (Grace Period) from the expiry of the Policy. Insured will be treated as continuously covered in terms of continuity of benefit during such Grace Period. However, the Company shall not be liable for any claim for the period for which the premium is not received by the Company.
- g. **Cumulative Bonus** An Additional Sum Insured of 5% would be provided on cumulative bases on each renewal up to a maximum of 50% in case there is no claim under the policy. However, 10% of the Sum Insured will be reduced from the accumulated Additional Sum Insured, in case there is a claim under the policy.
- h. **Sum Insured Enhancement** Sum Insured can be enhanced only upon renewal, subject to underwriters' approval.
- i. Inclusion / Exclusion of Insured This policy allows to include or exclude a member in the plan

only at the time of renewal.

#### \* Conditions Apply

For more details, kindly refer to the Policy Wordings.



### **Eligibility**

- The enrolment age (of senior most member) can be between 5 to 65 years of age.
- Maximum two adults can be covered under a single policy.
- The Proposer needs to be above 18 years of age.
- No health check-up up to the age of 55 years (age as on last birthday).
- Individual(s) proposed for Insurance whose age is 56 years & above have to undergo medical tests at ICICI Lombard GIC Ltd designated diagnostic centrers.
- The policy is renewable till the age of 70 years.
- Income Tax benefit u/s Section 80D of the Income Tax Act, 1961 can only be availed for policies bought for self, spouse, dependent children or parents.



#### **Exclusions**

# Exclusions for Basic Hospitalisation Benefit Cover

- Exclusions valid for the first 30 Days Any illness contracted within 30 days of the inception date of the policy, except those that are incurred as a result of an accident. This clause is not applicable on the subsequent renewals of this policy with the company.
- · Exclusions valid for the first 2 Years

Treatment of the following diseases -

- Cataract \*\*
- Benign Prostatic Hypertrophy
- Myomectomy, Hysterectomy unless because of malignancy
- Hernia, Hydrocele
- Fistula in Anus. Piles
- Arthritis, Gout, Rheumatism
- Joint replacement, unless due to accident
- Sinusitis and related disorders
- Stone in the urinary and biliary systems
- Dilatation & Curettage
- Skin and all internal tumours / cysts / nodules / polyps of any kind, including breast lumps, unless malignant / adenoids and haemorrhoids
- Dialysis required for chronic renal failure
- Surgery on tonsils and sinuses
- Gastric and duodenal ulcers
- Deviated Nasal Septum

### \*\* Sub limit of ₹ 20,000 per eye is applicable

Note: If the policy is renewed with us for two consecutive years, then the above mentioned diseases / illness / ailments will be covered from the third year.

### • Pre-existing Disease Exclusion

- Any illness / disease / injury pre-existing disease before the inception of the policy. However, this exclusion ceases to apply if the policy is renewed with the Company for 2 consecutive years.

#### Permanent Exclusions

- Non-allopathic treatment, pregnancy and childbirth related diseases, cosmetic, aesthetic and obesity related treatment.
- Expenses arising from HIV or AIDS and related diseases, use or misuse of liquor, intoxicating substances or drugs as well as intentional self injury.
- War, riots, strike, nuclear weapon induced treatment.

# Exclusions for OPD (Outpatient Department Expenses)

Suicide self-inflicted injury Alcohol or drug abuse War, riots, nuclear related hospitalisation Non-allopathic, experimental and unproven treatment - Expenses arising from treatment of HIV / AIDS or related disease, use or misuse of alcohol and other intoxicating substances and intentional self-injury

This is only an indicative list. For a complete list refer to the Policy Wordings



#### **How Do I Claim My Insurance**

In case of emergency or planned hospitalisation, just use your **Health ID Card** at ICICI Lombard Health Care network hospitals and avail of cashless service. Call our **24x7** Toll-free number **1800-209-8888** for the complete assistance. For treatment in non-cashless hospitals, the claim form should be filled fully after discharge from hospital and sent to ICICI Lombard Health Care office along with following documents in original\*

#### **CLAIM PROCESS** CASHLESS Inform TPA/ TPA/ ICICI Lombard Health Care settles bills directly ICICI Lombard **Hospitalisation** Health Care with hospital/ provides financial Validation & Helpline and assistance Authorisation register claim REIMBURSEMENT Inform TPA/ Within ICICI Lombard Medical 14 days TPA/ ICICI Lombard expenses Health Care Health Care Mail the required & other Helpline and to check and Validation & documents to claims reimburse payment register claim Authorisation Claims Dept. at mailing address

\* Only expenses relating to hospitalisation will be reimbursed as per the policy coverage. Non-medical expenses will not be reimbursed.

## Standard list of documents required:

- Claim form duly filled & signed by the insured & doctor.
- Original discharge card/ summary & final bill.
- All investigation reports in originals.
- All medicines /lab/ hospital bill in original.
- All payments receipts in original and should be stamped.
- Any other required documents depending upon the case.



**Premium Grid** 

Age of Senior Most Member (as on his last birthday)	Individual Fixed Premium ₹ 15,000							
	Sum Insured under Hospitalisation Sum Insured under Hospitalisation							
		Benefit =		Benefit -				
	₹ 2 Lakhs			₹ 3 Lakhs				
Age in Years	Sum Insured under OPD Benefit as below	How much do you save? Total Savings = (OPD Benefit + Tax Benefit)	Effective Premium = (Total Premium - Total Savings)	Sum Insured under OPD Benefit as below	How much do you save?  Total Savings = (OPD Benefit + Tax Benefit)	Effective Premium = (Total Premium - Total Savings)		
5 - 18	₹ 10,000	₹ 14,365	₹ 635	₹ 9,500	₹ 14,135	₹ 865		
19 - 35	₹ 9,000	₹ 13,635	₹ 1,365	₹ 8,800	₹ 13,435	₹ 1,565		
	·	ŕ	·	,	,	,		
36 - 45	₹ 8,500	₹ 13,135	₹ 1,865	₹ 8,000	₹ 12,635	₹ 2,365		
46 - 55	₹ 6,000	₹ 10,635	₹ 4,365	₹ 5,500	₹ 10,135	₹ 4,865		
56 - 60*	₹ 4,500	₹ 9,135	₹ 5,865	₹ 3,500	₹ 8,135	₹ 6,865		
Fixed Premium ₹ 20,000								
61 - 65	₹ 7,000	₹ 11,635	₹ 8,365	₹ 5,500	₹ 10,135	₹ 9,865		
66 - 70 (for	₹ 4,000	₹ 8,635	₹ 11,365	₹ 2,000	₹ 6,635	₹ 13,365		
renewal only)**	2 Adults (Floater Benefit)							
			ium ₹ 15,000					
	Sum Insured under Hospitalisation Benefit =			Sum Insured under Hospitalisation Benefit -				
		₹ 2 Lakhs			₹ 3 Lakhs			
Age in Years	Sum Insured under OPD Benefit as below	How much do you save? Total Savings = (OPD Benefit + Tax Benefit)	Effective Premium = (Total Premium - Total Savings)	Sum Insured under OPD Benefit as below	How much do you save?  Total Savings = (OPD Benefit + Tax	Effective Premium = (Total Premium - Total Savings)		

5 - 18			-			
19 - 35	₹ 8,000	₹ 12,635	₹ 2,365	₹ 7,500	₹ 12,135	₹ 2,865
36 - 45	₹ 7,000	₹ 11,635	₹ 3,365	₹ 6,500	₹ 11,135	₹ 3,865
46 - 55	₹ 3,000	₹ 7,635	₹ 7,365	₹ 2,000	₹ 6,635	₹ 8,365
56 - 60*			-			
1) * Medical 2) Age is 3) ** 65 years is the 4) The maximum bereach section	e maximum a	•	•	as on renewable up		birthday of 70 years
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