

No matter how big your family,  
now it's easier to cover everyone.



Heartbeat Health Insurance Plan



# Your family's health comes first

We all aspire to provide the very best for our families. Nothing is more important than their well being, and that is surely at the top of your mind.

Today, even as medical science is making revolutionary progress in healthcare, the average age of people affected by lifestyle diseases seems to be reducing rapidly. The solution then, would be to make changes towards leading a healthier, happier life. And what would be better, if you knew that you also had access to the very best of healthcare; if you might need it some day.

There is no better solace than knowing that the best treatment is there for you when you need it. And a good health insurance cover gives you just that. Peace of mind, and the freedom to protect your hard earned assets.

When it comes to your family's health, you need a partner you can trust. Someone who will be there for you, through thick and thin.

# Max Bupa: Combining local understanding with global expertise

Max India and Bupa, an international health insurance company, have joined hands to bring to India Max Bupa Health Insurance. We believe in nurturing long-term relationships with our customers by providing the highest levels of quality in service. Read more about our parent companies.

## Max India Limited: A reputation for excellence

The Max India Group brings expertise in Insurance and Healthcare with a strong presence in Life Insurance (Max New York Life Insurance Company Limited), Healthcare (Max Healthcare Institute Limited) and Clinical Research (Max Neeman Medical International Limited).

A Rs. 7,300 crore group, it has over 700 offices across more than 500 locations in India, more than one lac people, all focused on delivering value to its 4 million customers.

## Bupa: 60 years of care

Established in 1947 as the British United Provident Association, Bupa today has over 10 million customers across 190 countries.

Bupa brings in a wealth of experience in serving customers directly in Health Insurance across the world. In addition to quality Health Insurance, Bupa runs Care Homes for elderly and young disabled people. It also provides health assessments, health coaching and workplace health programmes for customers.

## Recognition and awards

### Max India Limited:

- Max New York Life was declared a 'Superbrand' by Superbrands India in the 3<sup>rd</sup> edition of Consumer Superbrands 2008
- CII-Exim Bank Award for Business Excellence awarded to Max New York Life in 2008
- CIO 100 Award for technology implementation

### Bupa:

- The Health Insurance Company of the Year Award - awarded at the U.K. Health Insurance Awards 2009
- Best International Private Medical Insurance Provider 2008 - awarded at the U.K. Health Insurance Awards
- Best Medical Insurer Company (Bupa Arabia, 2008) - awarded at the Jeddah Chamber of Commerce and Industry Health Committee Awards
- Best Healthcare Provider of the Year - awarded at the U.K. Corporate Adviser Awards 2009
- Best Individual Private Medical Insurance Provider - awarded at the U.K Money Marketing Awards 2009

Source - [www.maxindia.com](http://www.maxindia.com)

Source - [www.bupa.com](http://www.bupa.com)



“ I put my trust in a name  
trusted by 10 million people  
across 190 countries. ”



Heartbeat Health Insurance Plan is easy to understand, and even easier to claim.



# Heartbeat Health Insurance Plan - Start a healthy relationship with us

Heartbeat Health Insurance Plan (Heartbeat) is a family oriented Health Insurance Plan which is simple to buy and very easy to understand. In addition to comprehensive Health Insurance that suits your needs, we also help you care for your health proactively over time. You don't just buy an annual insurance from us. Our focus is on building a long-term health relationship with you and your family.

We believe that a healthy relationship is built by understanding your needs, by coming closer to you, through a continuous dialogue with you on what matters the most. Here are 11 good reasons why we are the right health insurance partner for you.

## 1. We talk directly to you

We talk to you directly, and not through any third parties. We are always there for you when you need us. Because you should concentrate on getting better or looking after your loved ones, rather than chasing a 'third party' for the settlement of your claims or service requests.

## 2. Cashless facility at quality hospitals

You can access cashless facility at quality hospitals near you, thanks to our valued relationship with them.

## 3. Assured plan renewal for life

We are there for you for lifetime. We assure you renewability for life. We are not here for just one year of your life, we are there for you for a lifetime. At renewal you pay premium based on your completed years of age, rather than individual premium based on your claim history. There are no extra loadings based on your claim history.

## 4. Maternity & child care benefits

- **Maternity benefit:** The Family Floater and Family First option provides you maternity benefits for up to two deliveries. This benefit is available after you have been covered for 24 months continuously and have paid three continuous premiums.
- **New Born Coverage:** All new born babies (where we have paid the maternity claim) are automatically covered from birth until next renewal of the plan.
- **Vaccinations for children:** First year vaccinations for all new borns (where we have paid the maternity claim) are covered under the plan.



## 5. No age restriction for enrollment

We cover every member of your family, across every stage in life - from new borns to senior citizens. There is no minimum or maximum age for enrollment.

## 6. Responsible enrollment

To start a relationship that lasts a lifetime, we make every effort to understand your health profile before you sign up. So that when you need us, we are there to provide speedy and efficient support and faster settlement of claims.

## 7. Free look period

Our health insurance policies are transparent and easy to understand. In case if you are not satisfied, we provide you a 15-day freeloop period within which you can cancel your plan stating the reason.

## 8. More comprehensive coverage

- *All day care procedures covered:* We cover all day care procedures, not a select few.
- *Limited exclusions:* Heartbeat has limited exclusions, whether it is one year, two years or permanent exclusions.
- *Wide range of covers:* We provide covers ranging from Rs. 2 lacs to Rs. 50 lacs, so that you and your family can choose comprehensive coverage.

## 9. Proactive health relationship and management benefits

- *Health check-up on renewal (as per Heartbeat Plan chosen):* Because your health is precious and should be well looked after.
- *24/7 health line:* You can access health advice when you need it.
- *Health relationship loyalty programme:* If the plan is renewed with us without any break, Individual and Family Floater plans are eligible for health services and products worth up to 10% of your renewal premium. You can carry forward these benefits for usage through the years. Family First plans are eligible for health services and products worth up-to 10% of last premium paid.

## 10. High quality service

- *Relationship manager:* Specially for Gold and Platinum customers we may assign a relationship manager who will personally help you at the time of hospitalisation and attend to your claims settlement, leaving you free to concentrate on getting yourself or your loved ones better.
- *24x7 customer service:* Our 24x7 customer helpline is always there to help you whenever the need arises. The helpline provides you a range of services including pre-authorisation, plan and payment related queries, claims information and other services that you may need.
- *Health information at your finger tips:* As a customer, you can access your own page on the Max Bupa website for storing your claims history, health information and health profile, including records of tests you may have taken while enrolling with us. Based on your requirements, you can access relevant health information and support to make better decisions about improving your lifestyle and your family's health.







## 11 Reasons to choose Heartbeat

- Direct settlement of claims
- Cashless facility
- Assured renewal for life
- Maternity and child care benefits
- No age restriction for enrollment
- Responsible enrollment
- Free look period
- More comprehensive coverage
- Proactive health management
- High quality service
- Tax savings

### 11. Tax savings

You will save tax under Section 80D of The Income Tax Act. Tax benefits are subject to change in the tax laws, please consult your tax advisor for details.

### Exclusively for Platinum plan holders

#### *Specialist doctor consultation and diagnostic tests:*

You are covered for outpatient consultation with a specialist doctor. We also pay for any diagnostic tests prescribed by the specialist doctor.

If your plan is renewed without any break and there is an unutilised amount, we carry forward 80% of this

unutilised amount to the next plan year. The total amount should not exceed 2.5 times the amount of the entitlement.

*E-opinion:* In case you need a second opinion for a life threatening medical condition, we can provide you one e-opinion for the same.

*Pre and post maternity hospitalisation:* We pay for pre and post hospitalisation expenses related to maternity claims paid by us.

*Child care:* We provide vaccinations as well as nutrition and diet consulting for children up to 12 years.

“ My Health Insurance Company understands me, so that it can take care of me. ”



“ Choosing the right plan matters a lot. ”

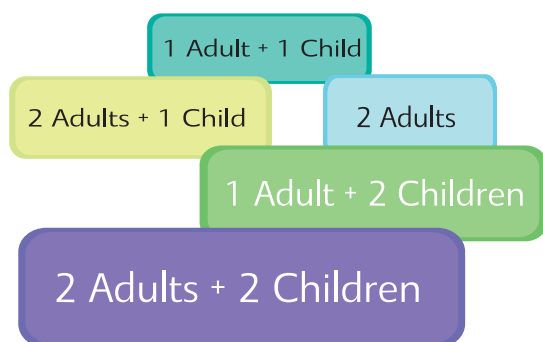
# Plan for every family size

## Choose your plan

Heartbeat is a comprehensive, transparent and flexible plan that can be customised according to the size of your family. Allowing you to include all family members in the plan. It also allows you to choose between an individual and a family cover. The Heartbeat plan is available in three variants:

- a) **Family Floater (for nuclear families)**
- b) **Family First (for joint families)**
- c) **Individual**

**Family Floater:** Custom-made for the nuclear family and its health insurance needs, this plan enables you to cover your immediate family (spouse and up to 2 kids). The premium for family floater depends on the age of the eldest insured member. You can choose any combination from the options illustrated below:



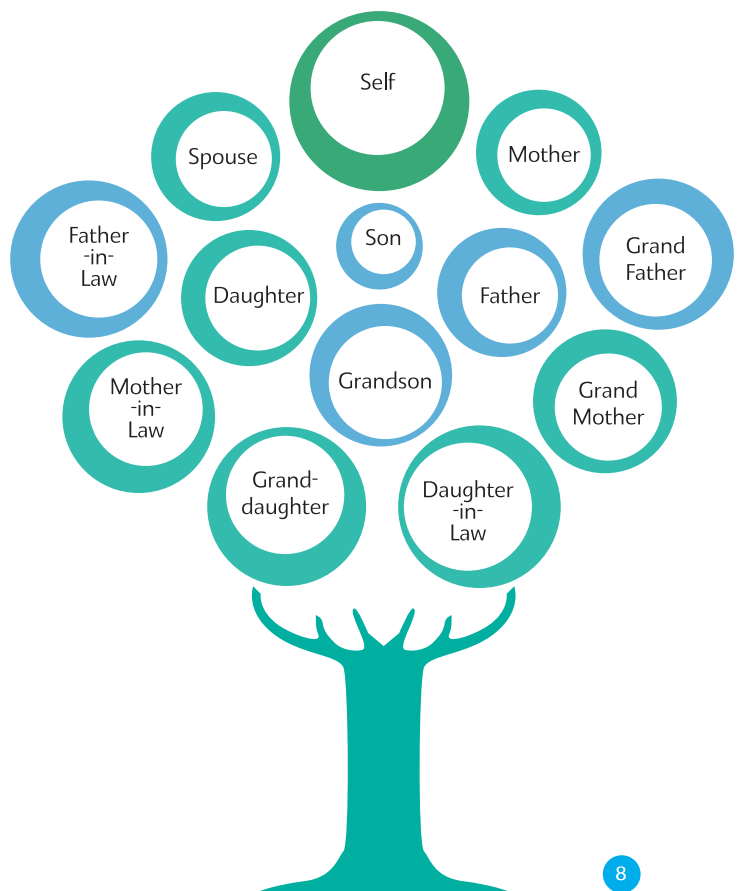
## Introducing Family First

A first of its kind plan, Family First has been designed keeping in mind the health insurance needs of the Indian joint family. It allows you to cover not just your spouse or your kids, but each and every member of your family. You can cover up to 13 relationships in your family (e.g. your parents, in-laws, brothers, sisters, spouse, kids etc.).

The plan provides flexibility to families so that they can decide their optimal cover. The sum insured may be chosen in the following two ways:

1. **Individual Sum Insured:** An individual insurance cover for each Insured Person. The Individual Sum Insured is same for all family members.
2. **Floater Sum Insured:** A floating insurance cover that is available to all family members and can be used once Individual Sum Insured is exhausted. This provides flexibility for families to decide their optimal cover.

In the Family First plan you can choose any combination from the relations illustrated below:



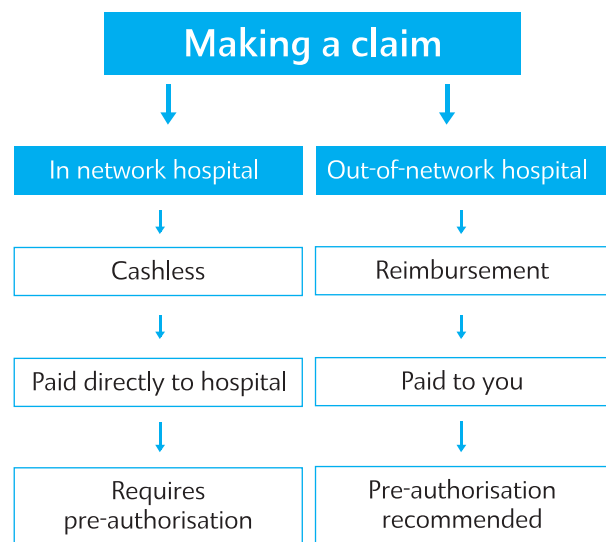
## What is covered

Your Heartbeat plan covers you for the costs of treatment of a disease, illness, injury or accident that leads to your recovery, conservation of your condition, or to restore you to your previous state of health as quickly as possible.

We cover the following expenses:

- **In-patient treatment:** Including medical fees for doctors, diagnostics, medicines, operation theatre, hospital accommodation and other related expenses.
- **Pre & post hospitalisation medical expenses:** Medical expenses incurred due to illness up to 30 days period immediately before an insured person's admission to the hospital and 60 days after discharge from the hospital.
- **Day care procedures**
- **Domiciliary treatment:** Medical expenses for treatment taken at home if the treatment continues for an uninterrupted period of 3 days.
- **Organ donation:** Medical expenses for an organ donor's treatment for harvesting of the organ.
- **Maternity & Child care benefits:** Medical expenses for maternity & child care (vaccination and nutrition consulting) under Family Floater plan and Family First
- **Emergency ambulance:** Expenses incurred to transfer the insured person following an emergency to the nearest hospital.

You are covered for emergency and non-emergency treatment, in both network & out-of-network hospitals. We pay all eligible qualifying hospital treatment and accommodation bills, up to the yearly maximum sum insured.



# Heartbeat - Product benefits table

Overall Sum Insured (rupees)	Individual/Family Floater				
	Silver Policy		Gold Policy		
	2 Lacs	3 Lacs	5 Lacs	7.5 Lacs	10 Lacs
<b>In-patient treatment</b>					
Surgical operations, including pre and post-operative care	Covered up to Sum Insured		Covered up to Sum Insured		
Nursing care, drugs and surgical dressings					
Doctors' fees					
Operation theatre charges and intensive care					
Pathology, x-rays, diagnostic tests and therapies					
Prosthetic implants					
Hospital accommodation	Shared room		Single Private Room		
Pre and post hospitalisation expenses including doctor's consultation, diagnostic tests, medicines, drugs and consumables	Covered up to 15% of Sum Insured		Covered up to 20% of Sum Insured		
All day care procedures	Covered up to Sum Insured		Covered up to Sum Insured		
<b>Child care benefits</b>					
Maternity cover for up to 2 deliveries	Covered up to Rs. 20,000	Covered up to Rs. 30,000	Covered up to Rs. 40,000	Covered up to Rs. 45,000	Covered up to Rs. 50,000
New born baby cover	Covered up to Sum Insured		Covered up to Sum Insured		
Vaccinations for children up to 12 years and nutrition and diet consulting	Not Covered		Not Covered		
<b>Further benefits</b>					
Health check up at time of renewal	Once in two years, tests as per annexure		Annual, tests as per annexure		
Organ transplant when medically necessary	Covered up to Sum Insured		Covered up to Sum Insured		
Emergency ambulance*	Covered at actual cost in network hospitals up to Sum Insured		Covered at actual cost in network hospitals up to Sum Insured		
Domiciliary treatment	Covered up to Rs. 10,000	Covered up to Rs. 15,000	Covered up to Rs. 25,000	Covered up to Rs. 37,500	Covered up to Rs. 50,000
<b>Out-patient benefits</b>					
Out-patient benefits covering specialist consultation and costs of diagnostics tests prescribed by them	Not Covered		Not Covered		
<b>Additional services</b>					
24x7 healthline	Available		Available		
Relationship manager	Not Covered		Available		
Second e-opinion	Not Covered		Not Covered		
<b>Health relationship programme</b>					
Cumulative benefit every year on renewal	Up to 10% of renewal premium		Up to 10% of renewal premium		

Co-pay of 20% of reasonable and customary charges for claims of persons above 65 years of age.

\*Emergency ambulance - maximum of Rs. 2000/- per event for out-of-network.

			Family First	
Platinum Policy			Silver	Gold
15 Lacs	20 Lacs	50 Lacs	Individual Cover: 1Lac, 2Lacs, 3Lacs, 4Lacs and 5Lacs per Insured Person Floater Cover: 3Lacs, 4Lacs, 5Lacs, 10Lacs and 15Lacs.	
Covered up to Sum Insured			Covered up to Sum Insured	Covered up to Sum Insured
Single Private Room (upgrade to next level, subject to availability)			Shared room	Single Private Room
Covered up to Sum Insured			Covered up to 15% of Sum Insured	Covered up to 20% of Sum Insured
Covered up to Sum Insured			Covered up to Sum Insured	Covered up to Sum Insured
Covered up to Rs.60,000	Covered up to Rs.75,000	Covered up to Rs.1,00,000	Covered up to Rs.25,000 per Policy Year	Covered up to Rs.50,000 per Policy Year
Covered up to Sum Insured			Covered up to Sum Insured	Covered up to Sum Insured
Covered up to Sum Insured			Not Covered	Not Covered
Annual, tests as per annexure			Once in two years, tests as per annexure	Annual, tests as per annexure
Covered up to Sum Insured			Covered up to Sum Insured	Covered up to Sum Insured
Covered at actual cost in network hospitals up to Sum Insured			Covered at actual cost in network hospitals up to Sum Insured	Covered at actual cost in network hospitals up to Sum Insured
Covered up to Rs.75,000	Covered up to Rs.1,00,000	Covered up to Rs.2,50,000	Covered up to Rs.15,000	Covered up to Rs.37,500
Covered up to Rs 10,000	Covered up to Rs 15,000	Covered up to Rs 20,000	Not Covered	Not Covered
Available			Not Covered	Not Covered
Available			Not Covered	Not Covered
Available			Not Covered	Not Covered
Up to 10% of renewal premium			10% of the last paid premium	10% of the last paid premium

“ I need to be absolutely clear about what I am not covered for. ”

## What is not covered

- **Pre-existing conditions:** Benefits will not be available for pre-existing conditions until 48 months of continuous coverage from first plan start date.
- **90 days waiting period:** We will not cover treatment during first 90 days of the plan, unless the treatment needed is a result of an accident or emergency. This waiting period does not apply for renewal plans.
- **Specific waiting periods:** For persons above 60 years of age some conditions will be subject to a waiting period of 24 months and will be covered in the third plan year.
- **Co-pay:** If any person is 65 years or above on the date of commencement of the plan, we will pay 80% of reasonable and customary charges.
- **Permanent exclusions:** Addictive conditions and disorders; ageing and puberty; artificial life maintenance; circumcision; conflict and disaster; congenital conditions; convalescence and rehabilitation; cosmetic surgery; dental/oral treatment; eyesight; experimental treatment; health hydros, nature cure, wellness clinics etc.; HIV and AIDS; hereditary conditions;

non-allopathic treatment; obesity; neurological and psychiatric conditions; self-inflicted injuries; sexual problems and gender issues; sexually transmitted diseases; sleep disorders; speech disorders; treatment for developmental problems; treatment received outside India; unrecognised physician or facility.

For details of what is not covered please visit [www.maxbupa.com/whatisnotcovered](http://www.maxbupa.com/whatisnotcovered)




For more details on terms and conditions, exclusions and waiting periods please read sales brochure of Heartbeat Health Insurance Policy carefully before concluding a sale.

Statutory Warning: Prohibition of rebates (under section 41 of Insurance Act 1938); no person shall allow or offer to allow either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to life or property, in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or the tables of the insurer. Any person making default in complying with the provision of this section shall be punished with fine, which may extend to five hundred rupees.

## What to do next

If you would like to find out more, or would like a personal quote, please speak to our specially trained sales team or your Max Bupa advisor. We are available to fully understand your requirements and help you select the right plan for you and your family.

 **Call:** 011 - 3300 3333 or 1800 3010 3333 (Toll Free)

 **\*SMS** 'Maxbupa' to 53030 or

 **Log on** to [www.maxbupa.com](http://www.maxbupa.com)



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Insurance is the subject matter of solicitation. \*Premium SMS rates apply.

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