

## **ORIENTAL SUPER HEALTH TOP-UP**

This policy addresses the gap between what you can pay (Base Health Policy SI) and the actual amount incurred, in an unfortunate event of an unexpected, expensive hospitalization. i.e. the amount in excess of your Base policy.

### **BENEFITS:**

- a) In patient hospitalisation expenses
- b) AYUSH treatments
- c) Day Care treatments
- d) Pre & post hospitalisation expenses for 30days and 60days respectively.
- e) This policy triggers when the aggregate of all admissible expenses incurred in respect of any one or more claims in a policy period, exceed the Deductible chosen.
- f) **Insured as Donor:** This policy pays a lumpsum amount of 10% of Sum Insured when the Insured person is an Organ Donor, donation being carried out as per the applicable extant laws, subject to waiting period of 24months.
- g) **Insured as Recipient:** The policy covers in-patient hospitalisation expenses in respect of the person donating an organ to the insured person, donation being carried out as per the applicable extant laws.
- h) This Policy provides coverage in respect of (i) **maternity expenses** (waiting period of 12months apply, also covers pre natal and post natal expenses if there is hospitalisation. Cover under this section is not available to those insureds who already have two or more living children) and (ii) **new born baby cover** from day one. Sub-limits of 10% & 5% of Sum Insured respectively apply for the two covers.
- i) **Treatment in SAARC countries viz:** Afghanistan, Bangladesh, Bhutan, Maldives, Nepal, Pakistan, Sri Lanka, considered only on re-imburement basis

### **AGE LIMIT:**

- Between the ages of 18 to 65 years
- Maximum entry age under the policy is 65years for all members. However, persons above the age of 65 years and upto the age of 70 years can also take this policy with a loading of 10%. This loading will also apply on subsequent renewals thereof. No such loadings shall, apply in respect of insured persons who had entered the policy at the age of 65 years or earlier.

### **SUM INSURED**

Policy can be purchased for any amount between Rs.3 Lac to Rs. 30 Lacs

### **PLANS AND SUM INSURED**

There are two Plans available viz – Individual & Family Floater, with Deductible / Sum Insured slabs as given under ‘Premium Table’.

**i. INDIVIDUAL PLAN** : As per below table + Applicable Taxes

Sl. No.	Deductible	SUM INSURED	AGE BAND			
			0-35	36-45	46-60	Above 60
1	3,00,000	3,00,000	1778	2576	3651	6642
2	3,00,000	5,00,000	2446	3451	4646	8283
3	5,00,000	5,00,000	1523	1936	2480	4127
4	5,00,000	7,00,000	1790	2240	2888	5167
5	6,00,000	6,00,000	1398	1707	2310	4127
6	6,00,000	8,00,000	1650	1993	2643	5006
7	8,00,000	8,00,000	1387	1570	2230	4641
8	8,00,000	10,00,000	1655	1859	2576	5397
9	10,00,000	10,00,000	1409	1560	2089	4641
10	10,00,000	15,00,000	2052	2272	2982	6073
11	15,00,000	10,00,000	1325	1449	1955	3471
12	15,00,000	15,00,000	1968	2160	2848	4641
13	18,00,000	10,00,000	1306	1437	1967	3029
14	18,00,000	12,00,000	1563	1722	2325	3471
15	20,00,000	10,00,000	1294	1432	1979	2795
16	20,00,000	20,00,000	2506	2785	3682	4899
17	20,00,000	30,00,000	3652	4076	5310	6936

Completed age to be taken, for a person aged 45 years 364 days, age would be 45 years and premium to be charged on the age of 45 yrs & not 46 yrs.

**ii. FAMILY FLOATER PLAN:**

Insured Member's age	Premium to be charged
Member with highest age	100% of the premium as applicable to that age & Deductible/Sum Insured combination.
Member with second highest age	50% of the premium as applicable to that age & Deductible/Sum Insured combination
All other members with lower ages	40% of the premium as applicable to that age & Deductible/Sum Insured combination.

- The Policy gets triggered only when the aggregate of all the claims, in any Policy period exceed(s) the Deductible opted under the Policy.

**Removal of Room rent limit** – loading depending upon the Deductible chosen,

Deductible (INR)	Additional Premium to be charged
Upto 5,00,000	20% of applicable premium as per table above
6,00,000- 10,00,000	10% of applicable premium as per table above
15,00,000 and above	5% of applicable premium as per table above

## **DISCOUNTS:**

- a) Family Discount (If two or more family members are covered in an Individual Plan) - 10% to each member
- b) Loyalty Discount -10%. Available only in respect of the insured member who has Company's retail Health insurance policy / Bancassurance Health policy
- c) Staff Discount (serving and retired)-33%. This discount will be allowed to the family members as well.
- d) Portal Discount – 10%, subject to maximum of Rs.2000. This discount is available if the Policy is taken On-line using our Portal and where no Intermediary is involved. This discount is not available on renewals.

All loadings and discounts shall be applied successively in the same order as they appear above and not on cumulative basis.

## **EXCLUSIONS UNDER THE POLICY**

- All Pre-existing Diseases (whether treated / untreated, declared or not declared in the Proposal Form), are excluded upto 48 months of the Policy being in force and shall be covered only after the Policy has been continuously in force for 48 months
- Any diseases contracted within 30 days of purchasing the policy.
- If continuity of Renewal is not maintained then subsequent cover will be treated as fresh Policy
- Dental Treatment unless requiring hospitalization. Cost of spectacles, contact lenses, hearing aids, Implants etc.
- All expenses arising out of any condition directly or indirectly caused by AIDS, HIV and its complications including sexually transmitted diseases.
- Expenses for investigation / treatment irrelevant to the disease.
- Expenses incurred at Hospital primarily for evaluation / diagnostic purposes which is not followed by active treatment for the ailment during the hospitalised period
- All non-medical expenses or services like wi-fi / internet charges, telephone, television, ayah / barber or beauty services, diet charges, baby food, cosmetics, toiletry items etc.