Future Aarogya Bima

PROTECTING YOUR ENTIRE FAMILY IS NOW WITHIN YOUR REACH.

Health Insurance for the family at an affordable premium.



1800-220-233

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What is Future Aarogya Bima?
Future Aarogya Bima is an affordable health insurance policy that covers entire family.

Benefits
- Single plan, wider coverage for the whole family at a reasonable premium
- Sum insured on Individual and Floater basis

Schedule of Benefits

		Future Aarogya Bima	
A	Eligibility	**Sum Insured options (in ₹)**	**2 Lac, 3 Lac, 5 Lac**
		Entry age of Proposer	18 years – 70 years
		Entry age of Child	From birth – 25 years
		Maximum Renewal Age	Lifelong
		Individual/ Family Floater Sum Insured options	Individual/ Family Floater
		Policy Term	1/ 2/ 3 years
		Family Definition* – Individual SI	S+Sp/ Lp+4C+2P
		Family Definition* – Family Floater SI	S+Sp/ Lp+3C
		Plan options	1. Plan A – with Mandatory co-payment of 10% 2. Plan B – with Mandatory co-payment of 10% and additional co-payment of 20% 3. Plan C – with Mandatory co-payment of 10% and additional co-payment of 30% The above co-payment shall be applicable on each and every claim on the admissible hospitalisation bill, excluding claim related to pre and post hospitalisation.
B	Hospitalisation Benefits	Hospitalisation	Covered
		Room rent including Boarding, Nursing expenses	up to 1% of Sum Insured per day
C	Other Benefits	Day Care Treatment	Covered
		Pre- Hospitalisation for 60 days and Post-Hospitalisation for 90 days	Pre and Post hospitalisation combined expenses subject to 2% of Sum Insured opted
D	Discount	1. Long term discount (2 and 3 year policy term) in case of single payment of premium - 5% discount for 2 years policy, 10% for 3 years policy. 2. Family discount - 5% discount if more than 1 member is covered under single proposal with Individual sum insured	

<table>
<tr><td>E</td><td>Instalment option (monthly, quarterly, half yearly) with Loading</td><td>Available for policy term of 1/ 2/ 3 years. Loadings on standard premium will be applicable in case instalment facility is opted for premium payment.
<table>
<tr><th>Instalment frequency</th><th>Loading on standard premiums</th></tr>
<tr><td>Monthly</td><td>5%</td></tr>
<tr><td>Quarterly</td><td>4%</td></tr>
<tr><td>Half-yearly</td><td>3%</td></tr>
</table></td></tr>
<tr><td>F</td><td>Waiting Periods</td><td>1. 36 months Waiting Period for Pre-existing Disease
2. 30 days Waiting Period, except for Accidental Hospitalization
3. 24 months Waiting Period for listed conditions</td></tr>
<tr><td>G</td><td>Co-payments</td><td>Co-payments will be applicable:
1. as per plan opted
2. in case of admission in room with higher room rent</td></tr>
<tr><td>H</td><td>Sub limits</td><td>1. Mandatory Sub limits for Modern Treatment Methods and Advancement in Technologies
2. Co-payments will not be applicable in case there is a claim for the listed procedures mentioned in the Sub-limits Section.</td></tr>
<tr><td>I</td><td>Pre-insurance medical examination</td><td>1. Applicable for proposal form with any medical declaration for any sum insured
2. Mandatory Pre-insurance medical examination for age above 50 years</td></tr>
</table>

(* S- Self, Sp – Spouse, Lp - Live-In Partner, C – Dependent Child, P – Dependent Parents)

Pre-insurance medical examination

- No pre-insurance medical test is required for Insured up to the age of 50 years, subject to no medical declaration in the proposal form.
- Insured is eligible for 50% reimbursement of pre-insurance medical tests charges, subject to policy issuance and 64 VB compliance.
- All pre-insurance medical tests will be conducted at the Future Generali empanelled diagnostic centers only.
- The test reports would be valid for a period of 30 days from the date of test conducted.
- Underwriting loading, if any, shall be applicable on the individual's insured premium based on health status declared on the proposal form and findings of medical tests conducted.

Free Look Period

1. The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy.
2. The insured person shall be allowed free look period of thirty days from date of receipt of the policy document to review the terms and conditions of the policy, and to return the same if not acceptable.
3. If the insured has not made any claim during the Free Look Period, the insured shall be entitled to:
    i. A refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges or;

ii. Where the risk has already commenced and the option of return of the policy is exercised by the insured person, a deduction towards the proportionate risk premium for period of cover or;

iii. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

Exclusions

- Any condition, ailment, injury or related condition(s) for which you have been diagnosed, received medical treatment, had signs and / or symptoms, prior to the inception of your first policy until 36 months from the date of inception.
- Any disease contracted during the first 30 days from the commencement of the policy.
- Diseases/ surgeries like Cataract, Hernia, Tumour, Gallstones, Renal stones, etc shall be covered after a waiting period of 24 months.
- Congenital External Illness/ disease/ defect anomaly.
- Expenses incurred towards treatment of illness or injury arising out of alcohol use/ misuse or abuse of alcohol, narcotic substance or drugs (Whether prescribed or not).

*The above list is indicative in nature, please refer to policy wordings for complete details.

Basis of claims payment

a) We shall make payment in Indian Rupees only.

b) Co-Payments Applicable under the policy

i. **Mandatory co-payment** – 10% co-payment is applicable on each and every claim, on the admissible hospitalisation bill, excluding claim related to pre and post hospitalisation.

ii. **Optional co-payment** – You have the option to choose additional co-payment of 20% or 30% on each and every claim, on the admissible hospitalisation bill, excluding claim related to pre and post hospitalisation. Discount on premium will be applicable if additional co-payment is opted by the Insured.

iii. Co-payment in view of admission in higher room category

- In case Insured opts for a room with rent higher than the entitled room limit, the following co-payment will be applicable on the Associated Medical expenses (excluding pharmacy, consumables, implants, medical devices and diagnostics)

Co-payment in case of admission in room with higher room rent is as below			
Sum insured (in ₹)	**200000**	**300000**	**500000**
Applicable limit on the sum insured	1%	1%	1%
Applicable room rent	2000	3000	5000
above 2000 to 3000	15%	0%	0%
above 3000 to 5000	15%	15%	0%
above 5000 to 10000	15%	15%	15%
above 10000	15%	15%	15%

- Room, Boarding and Nursing Expenses as provided by the Hospital/ Nursing Home up to 1% of Sum Insured per day or actual, whichever is lower.
- During your hospital stay if at any time you are admitted in a Non-ICU room having room rent of more than the defined limit then the co-payment shall be applicable on the total Associated Medical expenses (excluding pharmacy, consumables, implants, medical devices and diagnostics).
- If a person is admitted in ICU any time during the hospitalisation and later shifted to Non-ICU room within the defined room rent limit, no co-payment shall apply and in case shifted to Non-ICU room with higher room rent limit, co-payment shall applicable on the Associated Medical expenses (excluding pharmacy, consumables, implants, medical devices and diagnostics) applicable to Non ICU-Room.
- Co-payment is not applicable in case of admission in an ICU room having room rent more than the defined limit.
- If a person is admitted only in ICU during entire hospitalisation, we will pay up to actual expenses and no co-payment shall apply.
- Co-payment on Associated Medical expenses (excluding pharmacy, consumables, implants, medical devices and diagnostics) for opting a Non –ICU room with higher room rent limit is not applicable for those hospitals where differential billing based on the room category is not adopted.
- Reasonable and Customary charges would be applicable only in cases where the services (like Professional Fees, OT charges etc), applied are higher as compared to standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness/ injury involved.

c) Mandatory Sub limits for Modern Treatment Methods and Advancement in Technologies

The Medical Expenses incurred for the below listed treatments or procedures, as inpatient or as day care treatment (inclusive of pre and post hospitalization), is restricted to 50% of the sum insured opted, per policy period. These Sub limits are applica ble for all Plans under the product.

i. Uterine Artery Embolization and HIFU
ii. Balloon Sinuplasty
iii. Deep Brain stimulation
iv. Oral chemotherapy
v. Immunotherapy- Monoclonal Antibody to be given as injection
vi. Intra vitreal injections
vii. Robotic surgeries
viii. Stereotactic radio surgeries
ix. Bronchical Thermoplasty
x. Vaporisation of the prostrate (Green laser treatment or holmium laser treatment)
xi. IONM - (Intra Operative Neuro Monitoring)
xii. Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered

Co-payments will not be applicable in case there is a claim for the listed procedures mentioned in the Sub-limits Section.

Other features

1. There will be no loading on premium for adverse claims experience
2. Portability can be offered as per the Portability guidelines.
3. Migration can be offered as per the Migration guidelines.
4. Premium paid by any mode other than cash and demand draft is eligible for tax relief as provided under Section 80-D of the Income Tax Act.

If you are suffering from an illness / disease or if you meet with an accident which requires hospitalisation, please contact us on the following:

Claims Department
Future Generali Health (FGH)
Future Generali India Insurance Co. Ltd.,
Office No. 3, 3rd Floor, "A" Building, G-O-Square
S. No. 249 & 250, Aundh Hinjewadi Link Road, Wakad, Pune - 411 057.

Toll Free Number: 1800 103 8889 / 1800 209 1016
Toll Free Fax: 1800 103 9998 / 1800 209 1017
Email: fgh@futuregenerali.in

Premium Table – (Premium and Sum Insured in ₹, without Goods and Services Tax)

a) Individual Premium

Individual Premium									
Age in years	Plan A			Plan B			Plan C		
	2 L	3 L	5 L	2 L	3 L	5 L	2 L	3 L	5 L
0 – 17	1992	2488	3318	1530	1914	2567	1267	1588	2143
18-25	2354	2940	3922	1830	2289	3070	1515	1899	2563
26-30	2799	3496	4664	2137	2673	3586	1805	2262	3053
31-35	3159	3945	5263	2415	3021	4052	2038	2555	3448
36-40	3721	4647	6199	2847	3561	4777	2402	3011	4064
41-45	4574	5713	7622	3503	4382	5877	2955	3704	4999
46-50	5897	7365	9825	4517	5651	7580	3811	4777	6446
51-55	7393	9233	12317	5665	7087	9506	4778	5990	8083
56-60	8995	11234	14987	6895	8626	11570	5815	7290	9837
61-65	10448	13049	17407	8157	10204	13687	6879	8623	11636
66-70	12135	15156	20218	9474	11852	15898	7924	9932	13404
71 years and above	14095	17604	23484	10961	13711	18392	9078	11380	15357

b) Family Floater Premium

Family Floater Premium – 2 Adults									
Age in years	Plan A			Plan B			Plan C		
	2 L	3 L	5 L	2 L	3 L	5 L	2 L	3 L	5 L
18-25	3413	4263	5687	2654	3319	4452	2197	2754	3716
26-30	4059	5069	6763	3099	3876	5200	2617	3280	4427
31-35	4581	5720	7631	3502	4380	5875	2955	3705	5000
36-40	5395	6738	8989	4128	5163	6927	3483	4366	5893
41-45	6632	8284	11052	5079	6354	8522	4285	5371	7249
46-50	8551	10679	14246	6550	8194	10991	5526	6927	9347
51-55	10720	13388	17860	8214	10276	13784	6928	8686	11720
56-60	13043	16289	21731	9998	12508	16777	8432	10571	14264
61-65	15150	18921	25240	11828	14796	19846	9975	12503	16872
66-70	17596	21976	29316	13737	17185	23052	11490	14401	19436
71 years and above	20438	25526	34052	15893	19881	26668	13163	16501	22268

Family Floater Premium – 1 Adult + 1 Child									
Age in years	Plan A			Plan B			Plan C		
	2 L	3 L	5 L	2 L	3 L	5 L	2 L	3 L	5 L
18-25	3413	4263	5687	2654	3319	4452	2197	2754	3716
26-30	3919	4894	6530	2992	3742	5020	2527	3167	4274
31-35	4265	5326	7105	3260	4078	5470	2751	3449	4655
36-40	4837	6041	8059	3701	4629	6210	3123	3914	5283
41-45	5718	7141	9528	4379	5478	7346	3694	4630	6249
46-50	6782	8470	11299	5195	6499	8717	4383	5494	7413
51-55	8132	10156	13549	6232	7796	10457	5256	6589	8891
56-60	9670	12077	16111	7412	9273	12438	6251	7837	10575
61-65	10970	13701	18277	8565	10714	14371	7223	9054	12218
66-70	12742	15914	21229	9948	12445	16693	8320	10429	14074
71 years and above	14800	18484	24658	11509	14397	19312	9532	11949	16125

Family Floater Premium – 1 Adult + 2 Children									
Age in years	Plan A			Plan B			Plan C		
	2 L	3 L	5 L	2 L	3 L	5 L	2 L	3 L	5 L
18-25	4473	5586	7452	3477	4349	5833	2879	3608	4870
26-30	5038	6293	8395	3847	4811	6455	3249	4072	5495
31-35	5370	6707	8947	4106	5136	6888	3465	4344	5862
36-40	5954	7435	9918	4555	5698	7643	3843	4818	6502
41-45	6861	8570	11433	5255	6573	8816	4433	5556	7499
46-50	7666	9575	12773	5872	7346	9854	4954	6210	8380
51-55	8872	11080	14780	6798	8504	11407	5734	7188	9700
56-60	10344	12919	17235	7929	9920	13306	6687	8384	11313
61-65	11493	14354	19148	8973	11224	15056	7567	9485	12800
66-70	13349	16672	22240	10421	13037	17488	8716	10925	14744
71 years and above	15505	19364	25832	12057	15082	20231	9986	12518	16893

Family Floater Premium – 1 Adult + 3 Child									
Age in years	Plan A			Plan B			Plan C		
	2 L	3 L	5 L	2 L	3 L	5 L	2 L	3 L	5 L
18-25	5532	6909	9217	4301	5379	7215	3560	4463	6023
26-30	6158	7691	10261	4701	5881	7889	3971	4976	6717
31-35	6476	8087	10789	4951	6193	8307	4178	5238	7068
36-40	7070	8829	11778	5409	6766	9076	4564	5721	7722
41-45	8005	9998	13339	6130	7669	10285	5171	6482	8748
46-50	8551	10679	14246	6550	8194	10991	5526	6927	9347
51-55	11694	12003	16012	7365	9213	12358	6211	7787	10508
56-60	11019	13762	18359	8446	10567	14173	7123	8930	12050
61-65	12015	15006	20018	9381	11735	15740	7911	9916	13381
66-70	13955	17429	23251	10895	13630	18283	9113	11422	15415
71 years and above	16209	20245	27007	12605	15768	21151	10440	13087	17661

Family Floater Premium – 2 Adults + 1 Child									
Age in years	Plan A			Plan B			Plan C		
	2 L	3 L	5 L	2 L	3 L	5 L	2 L	3 L	5 L
18-25	4473	5586	7452	3477	4349	5833	2879	3608	4870
26-30	5178	6468	8628	3953	4945	6634	3339	4185	5648
31-35	5686	7101	9473	4347	5438	7294	3668	4599	6206
36-40	6512	8132	10848	4982	6232	8360	4204	5269	7112
41-45	7776	9712	12957	5955	7449	9991	5024	6297	8498
46-50	9435	11784	15720	7227	9042	12128	6098	7643	10314
51-55	11459	14311	19091	8781	10985	14734	7406	9285	12529
56-60	13717	17132	22855	10515	13155	17644	8868	11117	15001
61-65	15672	19574	26111	12236	15306	20531	10319	12935	17454
66-70	18203	22734	30327	14211	17778	23847	11886	14898	20106
71 years and above	21143	26406	35226	16442	20567	27588	13617	17070	23036

Family Floater Premium – 2 Adults + 2 Children									
Age in years	Plan A			Plan B			Plan C		
	2 L	3 L	5 L	2 L	3 L	5 L	2 L	3 L	5 L
18-25	5532	6909	9217	4301	5379	7215	3560	4463	6023
26-30	6298	7866	10494	4808	6014	8069	4061	5090	6869
31-35	6792	8482	11315	5192	6495	8712	4382	5493	7413
36-40	7628	9526	12708	5836	7300	9793	4924	6173	8331
41-45	8919	11140	14863	6831	8545	11460	5762	7223	9748
46-50	10320	12889	17194	7905	9889	13265	6669	8360	11281
51-55	12198	15234	20323	9347	11694	15685	7884	9884	13337
56-60	14392	17974	23979	11032	13802	18512	9304	11664	15739
61-65	16194	20226	26981	12643	15816	21215	10662	13366	18036
66-70	18809	23492	31338	14685	18371	24642	12282	15395	20776
71 years and above	21847	27286	36400	16990	21252	28508	14071	17639	23803

Family Floater Premium – 2 Adults + 3 Children									
Age in years	Plan A			Plan B			Plan C		
	2 L	3 L	5 L	2 L	3 L	5 L	2 L	3 L	5 L
18-25	6591	8232	10982	5124	6409	8596	4242	5317	7176
26-30	7417	9264	12360	5663	7083	9503	4783	5994	8090
31-35	7898	9863	13158	6038	7553	10130	5095	6388	8620
36-40	8744	10920	14568	6690	8368	11226	5645	7076	9550
41-45	10063	12569	16768	7707	9640	12929	6501	8149	10998
46-50	11204	13994	18668	8582	10737	14402	7241	9076	12247
51-55	12938	16158	21555	9914	12402	16636	8362	10483	14145
56-60	15067	18817	25103	11549	14449	19380	9740	12211	16477
61-65	16717	20878	27851	13051	16326	21899	11006	13797	18618
66-70	19416	24250	32349	15158	18963	25437	12678	15891	21446
71 years and above	22552	28166	37574	17538	21938	29427	14525	18208	24571

* Plan A – with mandatory co-payment of 10%
Plan B – with mandatory co-payment of 10% and additional co-payment of 20%
Plan C – with mandatory co-payment of 10% and additional co-payment of 30%

**Age in completed years
*** In case of Floater policy, Premium would applicable as per the age of the eldest member in the family.
**** The premiums above are subject to revision as and when approved by the regulator. However such revised premiums would be applicable only from subsequent renewals and with due notice whenever implemented.

Premium Illustration in respect of policies offered on individual and family floater basis

Age of the members insured	Coverage opted on individual basis covering each member of the family separately a (single point in time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum insured is a vailable for each member of the family)				Coverage opted on family floater basis with overall Sum insured (Only one sum insured is a vailable for the entire family)			
	Premium (₹)	Sum insured (₹)	Premium (₹)	Discount, if any	Premium after discount (₹)	Sum insured (₹)	Premium or consolidated premium for all members of family (₹)	Floater discount, if any	Premium after discount (₹)	Sum insured (₹)
41 years	7,622	500000	7,622	381	7,241	500000				
46 years	9,825	500000	9,825	491	9,334	500000				
17 years	3,318	500000	3,318	166	3,152	500000	28,005	9,337	18,668	500000
20 years	3,922	500000	3,922	196	3,726	500000				
14 years	3,318	500000	3,318	166	3,152	500000				
Total Premium for all members of the family is ₹ 28,005/-, when each member is covered separately. Sum insured a vailable for each individual is ₹ 500000.			Total Premium for all members of the family is ₹ 26,605/-, when they are covered under a single policy. Sum insured a vailable for each family member is ₹ 500000.				Total Premium when policy y is opted on floater basis is ₹ 18,668/-. Sum insured of ₹ 500000 is available for the entire family			

Note

This is just an illustration of premium calculation.

Premiums may vary with respect to Plan and Sum Insured opted by the insured.

Premium rates specified in the above illustration are the standard premium rates without considering any loading and/or discounts like – Online (Website)

Sales discount etc.

In case premium is paid on instalment basis, the loading will be applicable accordingly.

Premium rates are exclusive of Goods and Services Tax applicable

Disclaimer: For detailed information on this product, terms and conditions etc., please refer to the product policy clause, consult your advisor or visit our website before concluding a sale. Tax Benefits are subject to change due to change in tax laws. Insurance is the subject matter of solicitation.

If you are suffering from an illness/ disease or if you meet with an accident which requires hospitalisation, please contact us on the following:

Claims Department
Future Generali India Health (FGH)
Office No. 3, 3rd Floor, “A” Building, G-O-Square
S.No. 249 & 250, Aundh Hinjewadi Link Road, Wakad, Pune-411 057.
Toll Free Number: 1800 103 8889 / 1800 209 1016
Toll Free Fax: 1800 103 9998 / 1800 209 1017
Email: fgcare@futuregenerali.in

Future Generali India Insurance Company Limited (IRDAI Regn. No.: 132), (CIN: U66030MH2006PLC165287) Regd. and Corp. Office: Unit No. 801 and 802, 8th Floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai – 400083. Fax: 022-4097 6900 I Email: fgcare@futuregenerali.in I Call us at: 1800-220-233 I1860-500-3333 I 022-67837800 I Website: https://general.futuregenerali.in I For detailed information on the product including risk factors, terms and conditions, etc., please refer to the product policy clause, consult your advisor or visit our website before concluding a sale. Health products are eligible for deduction under Section 80D of the Income Tax Act. Tax benefits are subject to change due to change in tax laws. Trade Logo displayed above belongs to M/S Assicurazioni Generali - Societa Per Azioni and used by Future Generali India Insurance Co. Ltd. under license.

ARN: FG-NL/PD/MKTG/ENG/AAROGYABIMA-22MAY2024-BRO
Future Arogya Bima, UIN: FGIHLIP23052V032223
ISO Ref. No.: FGH/UW/RET/211/07
Version No: VER-AGYBIMA-BRO-2.0-22MAY24

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