

## Introduction

Now your insurance cover just got bigger with Healthcare Plus. A health Insurance cover, that takes care of excess payment that may arise due to the amount paid for illness over & above existing cover. What's more, even if you don't have a cover you can still opt for this policy and get covered for the Sum Insured.



## Features of the policy

- Individual Cover for each member of the family  
Example: Mr. Badhwar, his wife and their son were covered under a health insurance with a sum insured of Rs. 2 lacs. He opts for Healthcare Plus policy for his son. This policy has sum insured of Rs. 5 lacs with deductible of Rs. 2 lacs. In case of hospitalization where the bill of his son amounted to Rs. 6 lacs. The health policy covers Rs 2 lacs while the rest of the amount got claimed under Healthcare Plus.
- Single premium across different age groups
- Flexible Sum insured & Deductibles

	Sum insured	Deductibles
Plan 1	Rs. 5 lacs	Rs. 2 lacs
Plan 3	Rs. 8 lacs	Rs. 3 lacs
Plan 5	Rs. 10 lacs	Rs. 4 lacs

- Tenure : Healthcare Plus is available in one year/two year option.

## The benefits of the policy

The above mentioned features comes with following benefits:

- No sub-limits
  - On Room –Rent
  - Hospitalization Expenses
  - Diagnostic tests/ Doctors fees
- Pre-Existing diseases can be covered after four continuous years of coverage with the company.
- No Co-payment
- Free Health Check for any one insured member in the plan upon policy renewal
- Income Tax benefit under section 80D\*
- Value-added Services through ICICI Lombard Health Care
- Policy becomes effective when the claim amount in single incidence/ hospitalization is beyond the Deductible

\* Tax benefits are subject to change in tax laws

## Eligibility

- Enrollment age for the members proposed for this insurance is from 5 years to 65 years.
- Proposer needs to be aged 18 years or above.
- Individual(s) proposed for Insurance whose age is 46 years & above have to undergo medical tests at ICICI Lombard designated diagnostic centers.

## What is Deductible?

This Healthcare Plus policy has two main components; the Sum Insured & Deductible.

Sum Insured is the part that defines the maximum amount that can be claimed under this policy.

Deductible is the amount after which any claim becomes admissible under this policy.

Example 1: Mr Sharma has opted for a Healthcare Plus policy with deductible amount of Rs. 2 lacs and the sum Insured of Rs. 5 lacs.

- His claim would be payable in a scenario if a single claim amount is > (more than) Rs. 2 lacs.
- If he has multiple claims in the policy period, which amounts to Rs. 4 lacs altogether and none of the claims is more than Rs. 2 lacs, in such a scenario this policy will not be effective and no claim would be payable.

## How to Claim my Insurance?

The claims for Healthcare Plus are serviced by ICICI Lombard Health Care, our very own claims processing portal. It has always been our endeavour to provide the best of the policy and services to our valued customers, ICICI Lombard Health Care is our initiative towards this commitment.

In case of emergency or planned hospitalization, just use your health ID card at ICICI Lombard Health Care network hospitals and avail of cashless services.

Call 24-hours-toll-free number 1800-2666 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\*

## 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.

*Disclaimer : Cashless Approval is subject to pre-authorization by the company.*

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

## Main Exclusions

- Any illness/ disease/ injury existing before the inception of the policy for the first 4 years.
- Non-allopathic treatment, Pregnancy & Childbirth-related disease, Cosmetic aesthetic & 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.
- Any medical expenses incurred during the first 30 days of inception of the policy, except those arising out of accidents. This exclusion doesn't apply for subsequent renewals with company without a break.
- War, riot, strike, nuclear weapons induced hospitalization.

## Exclusions-First Two Year

There are certain ailments which will be excluded from treatment for the first two years from the inception date of policy.

- Cataract
- Benign prostatic hypertrophy

- Myomectomy, Endometriosis, Hysterectomy unless because of malignancy
- All types of Hernia, Hydrocele
- Fissures &/or Fistula in anus, Haemorrhoids/Piles
- Arthritis, Gout, Rheumatism and spinal disorders
- Joint replacements unless due to Accident
- Sinusitis and related disorders
- Stones in the urinary and biliary systems
- Dilatation and curettages
- All types of Skin and internal tumours/cysts/nodules/polyps of any kind including breast lumps unless malignant
- Dialysis required for chronic renal failure
- Surgery on Tonsils, Adenoids and Sinuses
- Gastric and Duodenal ulcers
- Deviated nasal septum

## Terms of Renewability

- The policy can be renewed under the prevailing Healthcare Plus plan or its nearest substitute approved by IRDA in the event, that the plan has been discontinued.
- Renewal Premium - Premium payable on renewal and on subsequent continuation of cover are subject to change with prior approval from IRDA.
- Maximum Entry Age – The maximum entry age under this policy is 65 years.
- Maximum Renewal Age – This policy can be renewed up to a maximum age of 70 years.
- 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. However, the Company shall not be liable to any claim for the period for which premium is not received by the Company.
- Sum Insured Enhancement – Sum Insured can be enhanced only upon renewal, subject to underwriter's approval.

g. Inclusion / Exclusion of Insured – This policy allows to include or exclude a member in the plan only at the time of renewal.

## Premium Table (Rs.)

	Tenure - 1 yr	Number of Individuals			
		Age - 5 yr to 65 Yr	1	2	3
Plan 1	Sum Insured Rs. 5 lacs; Deductible Rs. 2 lacs	4,412	7,500	10,589	13,236
Plan 3	Sum Insured Rs. 8 lacs; Deductible Rs. 3 lacs	3,033	5,157	7,280	9,100
Plan 5	Sum Insured Rs. 10 lacs; Deductible Rs. 4 lacs	2,206	3,750	5,294	6,618

	Tenure - 2 yr	Number of Individuals			
		Age - 5 yr to 65 Yr	1	2	3
Plan 1	Sum Insured Rs. 5 lacs; Deductible Rs. 2 lacs	8,383	14,251	20,119	25,148
Plan 3	Sum Insured Rs. 8 lacs; Deductible Rs. 3 lacs	5,763	9,797	13,832	17,290
Plan 5	Sum Insured Rs. 10 lacs;	4,191	7,125	10,059	12,574

Premium inclusion of tax & cess

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# Healthcare Plus



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