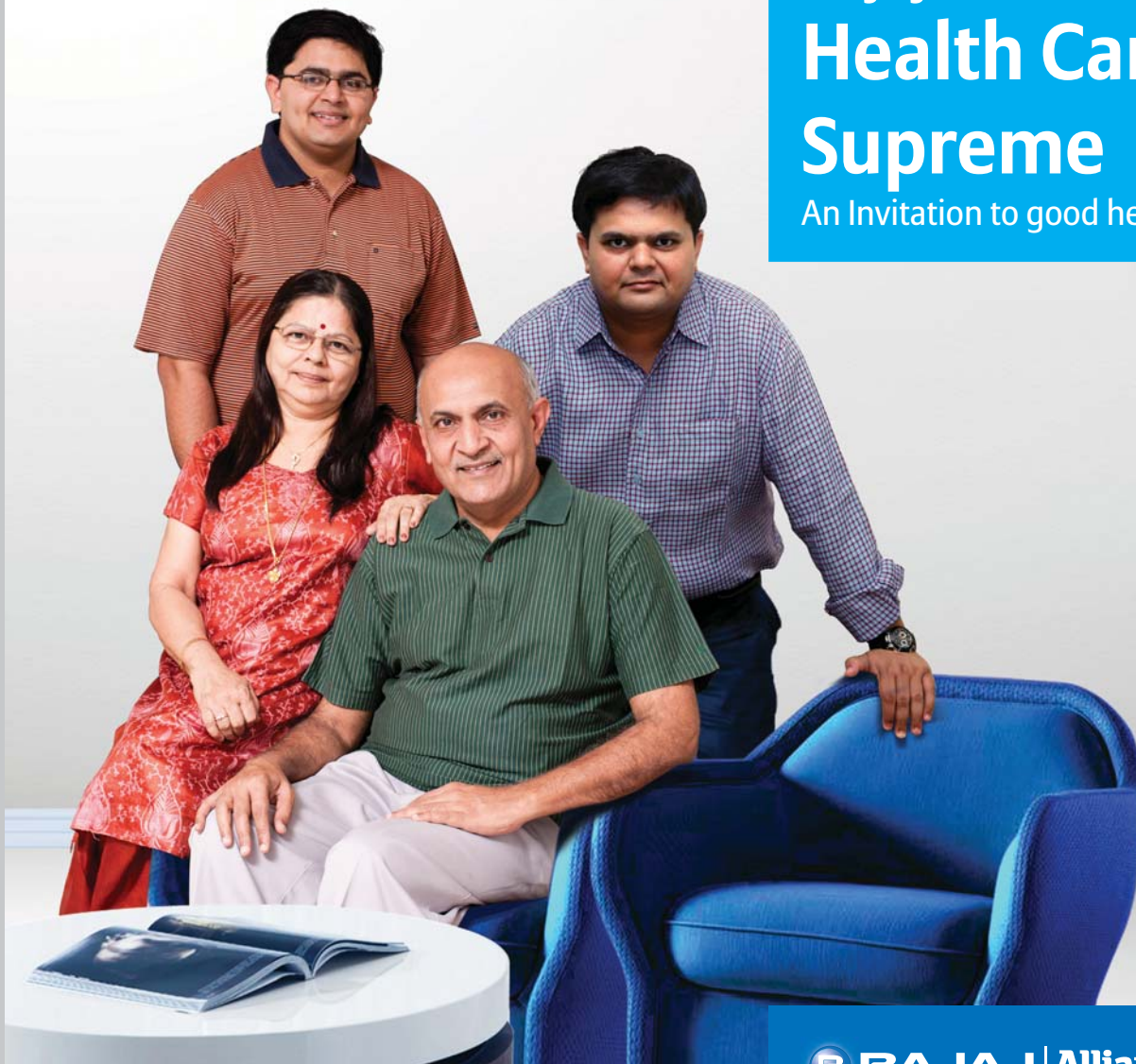


Bajaj Allianz Health Care Supreme

An Invitation to good health



Cover Picture: Mr. Hiren Vora our employee with his family.





Picture: Mr. Ketul Patel our employee with his family.

Bajaj Allianz General Insurance Company Limited is a joint venture between Bajaj Finserv Limited (recently de-merged from Bajaj Auto Limited) and Allianz SE. Both enjoy a reputation of expertise, stability and strength. This joint venture company incorporates global expertise with local experience. The comprehensive, innovative solutions combine the technical expertise and experience of Allianz SE, and in-depth market knowledge and good will of Bajaj brand in India. Competitive pricing and quick honest response have earned the company the customer's trust and market leadership in a very short time.

Why Health Care Supreme?

Staying healthy and leading a Carefree Life !

Your life-style choices can make a difference in your health, Each stage of life brings different health challenges and health care needs.. We have the Health Insurance Plan which will take care of the medical expenses at every stage of your life. Health Care Supreme gives you the protection and peace of mind you need 24 hours a day & 365 days a year

Your Health is our Priority! **Health care supreme** is a Comprehensive plan with, wide range of coverage to fulfill all the healthcare needs of you and your family, at every stage of life.

No matter what stage of life you're at, our policy will take care of your priorities.

Key Features

- Sum Insured options ranging from ₹5 Lacs to ₹50 Lacs on individual and floater Sum insured basis
- Complete package policy with wide range of covers under single policy including maternity, Out Patient Expenses, Sum insured Restoration, recovery benefit etc
- Option of choosing add on covers like Personal Accident, critical Illness to top up your coverage
- No restrictions on maximum entry age, min entry age is 3 months
- Lifetime renewal option under the policy
- Unique coverage like Air ambulance cover, physiotherapy expenses etc
- Free Annual preventive Health Check up regardless of Claims history

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Coverage Highlights

Medical Expenses Section

(Mandatory)

- Hospitalization Expenses
- Pre Hospitalization
- Post Hospitalization
- Road Ambulance
- Air Ambulance
- Day Care Procedures
- Ayurvedic and Homoeopathic treatment hospitalisation expenses
- Out Patient Expenses
- Organ Donor Expenses
- Recovery benefit
- Physiotherapy Expenses
- Sum Insured Reinstatement Benefit
- Maternity Expenses
- New Born Baby Cover
- Free Annual Preventive Health Check Up

Add on Benefits section

(Optional)

- Ancillary Expenses Benefit
- Personal Accident cover
- Critical Illness cover

“A Comprehensive Plan with a wide range of benefits, ensuring a cover for maximum expenses related to Illness and Accidents”



Picture: Mr. Hoshedar Variava our employee with his family.

Coverage Details

Medical Expenses Section: (Mandatory)

1. Hospitalisation Expenses

If You are Hospitalised on the advice of a Doctor because of Illness or Accidental Bodily Injury sustained or contracted during the Policy Period, then We will pay You In-patient Treatment- Medical Expenses for the below listed items up to the Sum Insured as specified under the policy schedule

In-patient Treatment- Medical Expenses for:

- Room rent, boarding expenses
- Nursing
- Intensive care unit
- Consultation fees
- Anesthesia, blood, oxygen, operation theatre charges, surgical appliances
- Medicines, drugs and consumables,
- Diagnostic procedures,
- The Cost of prosthetic and other devices or equipment if implanted internally during a Surgical Procedure.

2. Pre-Hospitalisation

The Medical Expenses incurred during the 60 days immediately before you were Hospitalized, provided that: Such Medical Expenses were incurred for the same illness/injury for which subsequent Hospitalisation was required, and We have accepted an inpatient Hospitalisation claim under Benefit Hospitalisation expense.

3 Post-Hospitalisation

The Medical Expenses incurred during the 90 days immediately after You were discharged post Hospitalisation provided that: Such costs are incurred in respect of the same illness/injury for which the earlier Hospitalisation was required, and We have accepted an inpatient Hospitalisation claim under Benefit Hospitalisation expenses.

4. Road Ambulance

We will reimburse the expenses incurred on an ambulance offered by a healthcare or ambulance service provider for transferring You to the nearest Hospital with adequate emergency facilities for the provision of health services following an Emergency or from the Hospital where you were admitted initially to another hospital with higher medical facilities, provided that: We have accepted an inpatient Hospitalisation claim under Benefit Hospitalisation expenses.

5. Air Ambulance

We will pay for ambulance transportation in an airplane or helicopter for emergency life threatening health conditions which require immediate and rapid ambulance transportation from the site of first occurrence of the illness /accident to the nearest hospital.

Return transportation to the client's home by air ambulance is excluded

6. Day Care Procedures

We will pay you the medical expenses for Day care procedures / Surgeries taken as an inpatient in a hospital or day care centre but not in the outpatient department.

7. Out Patient Expenses

If you consult a specialist consultant / specialist medical Practitioner on Out patient basis for the illness / injury contracted during the policy period, we will pay you Out Patient expenses for,

- Specialist Consultations
- Investigations related to the illness / injury as prescribed by the specialist
- Medicines related to the illness / injury as prescribed by the specialist
- Dental Procedures – Root Canal Treatment, Extractions
- Consultations for Psychiatric disorders

8. Organ Donor Expenses

We will pay the lump sum amount as specified under the policy schedule towards organ donor's treatment for harvesting of the donated organ, provided that,

- i. The organ donor is any person whose organ has been made available in accordance and in compliance with THE TRANSPLANTATION OF HUMAN ORGANS (AMENDMENT) BILL, 2011 and the organ donated is for the use of the Insured Person, and
- ii. We have accepted an inpatient Hospitalisation claim for the insured member under Hospitalisation expenses

9. Recovery benefit

In the event of insured member hospitalised for a disease/illness/injury for a continuous period exceeding 7 days, We will pay a one time lump sum amount per policy period..

This benefit will be triggered provided that the hospitalization claim is accepted under Hospitalisation expenses.

10. Physiotherapy Expenses

We will pay the expenses incurred towards Physiotherapy treatment taken on Out patient Basis for illness/Injury contracted during the policy period, provided that,

- i. The treatment is prescribed by a Specialist consultant for Muskulo- skeletal /Neurological diseases/ Injuries or other Systemic diseases
- ii. The treatment should be carried out in a hospital as defined under the policy
- iii. Total 10 sittings of Physiotherapy sessions would be considered per illness/injury per policy period, maximum up to the specified limit as per the plan opted
- iv. During the first year of Health Care Supreme policy with us, 90 days waiting period would be applicable for all the claims, however the waiting period would not be applied during subsequent renewals.

11. Sum Insured Reinstatement Benefit:

If the Hospitalisation Sum Insured and cumulative benefit (if any) is exhausted due to claims lodged during the Policy period, then it is agreed that 100% of the hospitalization Sum Insured specified under Hospitalisation expenses (section) will be reinstated for the particular Policy period provided that:

Health Care Supreme

- i. The reinstated Sum Insured will be triggered only after the Hospitalisation Sum Insured inclusive of the Cumulative Bonus (If applicable) has been completely exhausted during the policy period;
- ii. The reinstated Sum Insured can be used for claims made by the Insured Person in respect of the benefits stated in Hospitalisation Expenses Section;
- iii. If the claimed amount is higher than the Balance Sum Insured inclusive of the Cumulative Bonus (If applicable) under the policy, then this benefit will not be triggered for such claims
- iv. The reinstated Sum Insured would be triggered only for subsequent claims made by the Insured Person and not arising out of any illness/disease (including its complications) for which a claim has been lodged in the current policy year under Hospitalisation Expenses Section.
- v. This benefit is applicable only once during each policy period & will not be carried forward to the subsequent renewals if the benefit is not utilised.
- vi. Additional premium would not be charged for reinstatement of the Sum Insured.

12. Ayurvedic / Homeopathic treatment Hospitalisation Expenses

If You are Hospitalised for not less than 24 hrs, in an Ayurvedic / Homeopathic Hospital on the advice of a Doctor because of Illness or Accidental Bodily Injury sustained or contracted during the Policy Period then We will pay You:

In-patient Treatment- Medical Expenses for Ayurvedic & Homeopathic treatment:

- Room rent, boarding expenses
- Nursing care
- Consultation fees
- Medicines, drugs and consumables,
- Ayurvedic & Homeopathic treatment procedures

The claim will be admissible under the policy provided that,

- i. The illness/injury requires inpatient admission & the procedure performed on the insured cannot be carried out on Out patient basis
- ii. the treatment has been undergone in a government hospital for Hospital for Ayurvedic & Homeopathic Treatment:

13. Maternity Expenses

We will pay the Medical Expenses for the delivery of a baby (including caesarean section) and/or expenses related to medically recommended and lawful termination of pregnancy, limited to maximum 2 deliveries or termination(s) or either, during the lifetime of the insured person, provided that,

- i. Our maximum liability per delivery or termination shall be limited to the amount specified in the policy Schedule as per the plan opted.
- ii. We will pay the Medical Expenses of pre-natal and post-natal hospitalization per delivery or termination upto the amount stated in the policy Schedule
- iii. We will cover the Medical Expenses incurred for the medically necessary treatment of the new born baby upto the amount stated in the Schedule of Benefits
- iv. This coverage is limited to Self & a lawfully wedded spouse when both are covered under a single policy for 24 months, either as a family floater or individual Sum Insured policy
- v. Waiting period of 24 months from the date of issuance of the first policy with us, provided that the policy has been renewed continuously renewed with us without break for you & your spouse
- vi. We will not cover Ectopic pregnancy under this benefit (although it shall be covered under section Hospitalisation expenses
- vii. Any complications arising out of or as a consequence of maternity/child birth will be covered within the limit of Sum Insured available under this benefit

14. New Born Baby Cover

Coverage for new born baby will be considered subject to a valid claim being accepted under maternity expenses section. We will pay the following expenses within the limit of the Sum Insured available under the maternity cover

We will pay for,

- i. Medical Expenses towards treatment of your new born baby while you are hospitalised as an inpatient for delivery for the hospitalization,
- ii. Hospitalisation charges incurred on the new born baby during post birth including any complications shall be covered up to a period of 90 days from the date of birth and within limit of the Sum Insured under Maternity Cover without payment of any additional premium

- iii. Mandatory Vaccinations of the new born baby up to 90 days, as recommended by the Indian Pediatric Association will be covered under the Maternity Sum Insured

15. Free Annual Preventive Health Check Up

After each renewal of Health Care Supreme policy with us you will be entitled for a Preventive Health Check up at Our empanelled Diagnostic centers Or empanelled Hospitals, list of tests as specified below. You would have to approach us for the arrangement of the Health Check up. For the avoidance of doubt, We shall not be liable for any other ancillary or peripheral costs or expenses (including but not limited to those for transportation, accommodation or sustenance).

This benefit can be availed by all members under individual Sum Insured Policies.

This benefit can be availed by proposer & spouse only under Floater Sum Insured Policies

Eligible List of tests for Males above 25 years	Eligible List of tests for Females above 25 years	Eligible List of tests for age 5 years – 25 years
Full Medical Report CBC FBS Serum Creatinine ECG Serum Cholesterol Ultra Sonography Abdomen & Pelvis	Full Medical Report CBC FBS Serum Creatinine ECG PAP smear Serum Cholesterol Ultra Sonography Abdomen & Pelvis	Full Medical Report CBC Chest X ray Blood Group Urine Routine

Note: Our maximum liability collectively for Hospitalization expenses, Pre-hospitalization , Post hospitalization, Road ambulance , Day Care expenses, Ayurvedic and Homoeopathic Treatment hospitalisation section would not exceed the hospitalization Sum Insured as specified in the policy schedule. The Sum Insured for other sections is as specified under the respective cover in the policy schedule

Add on covers: (Optional)

1. Ancillary Expenses Benefit:

If You or your family member are Hospitalised on the advice of a Doctor because of Illness or Accidental Bodily Injury sustained or contracted during the Policy Period, then We will pay You

- The Daily Allowance, for each continuous and completed period of 24 hours of Hospitalization
- Coverage for 30 days for Individual Policy and 60 days for Floater Policy
- Two times benefit in case of admission in ICU.
- The claim this section will be admissible provided that we have accepted the claim under Hospitalisation cover

2. Personal Accident cover:

If you or your family member meets with any accidental bodily injury we shall make a payment to you for one or more of the events as below:

- Death due to accident – 100% of Sum Insured
- Permanent Total Disability due to accident - Highest compensation of 200% of Sum Insured
- Permanent Partial Disability due to accident- As per the disability table provided in policy document
- Temporary total disability due to accident- Benefit Ranging from ₹2000 to ₹15000 per week, for max 100 weeks, as per Sum insured opted for
- Transportation of mortal remains up to ₹5000
- Children Education benefit up to ₹ 5000 each for 2 children

3. Critical Illness Cover:

- If you are diagnosed as suffering from any of the below listed 15 critical illnesses, which first occurs or manifests itself during the Policy Period, and fulfills the criteria as defined under the policy we will pay you the lump sum amount as specified under Critical Illness section

1. Cancer of specified severity
2. First heart attack – of specified severity

3. Coma of specified severity
 4. Kidney failure requiring regular dialysis
 5. Stroke resulting in permanent neurological sequelae
 6. Major organ /bone marrow transplant
 7. Multiple sclerosis with persisting symptoms
 8. Aplastic anemia
 9. End stage lung disease
 10. End stage liver failure
 11. Parkinson's disease
 12. Surgery to aorta
 13. Alzheimer's disease
 14. Primary pulmonary hypertension
 15. Major burns
- 30 days survival period not applicable.



Eligibility Criteria

Minimum Entry Age	3 months for dependent children 18 Yrs for Proposer/ spouse/ parents
Maximum Entry Age	Lifetime entry under medical expenses section*
Entry age for Dependent children	3 months to 25 Years, further renewal up to 35 years
Renewal	Policy is renewable up to lifetime
Policy Type	- Individual Health Care supreme policy - Family Floater Health Care Supreme policy - Group Health Care Supreme policy
Family coverage	- Self, Spouse, Dependent children for Floater policy - Separate family floater policy can be taken for dependent parents - Self, Spouse, Dependent children dependent parents, for Individual Policy
Sum Insured Enhancement	Only at the time of renewals

*Entry age for add on sections will be restricted to 65 yrs

Pre policy medical tests criteria

Age of the person to be insured	Sum insured	Medical examination
Up to 45 years	All Sum Insured options	No Medical Tests* Subject to no adverse health conditions
46 years and above	All Sum Insured options	Medical Tests required as listed below: Full Medical Report, CBC, Urine R, ECG, Lipid profile, Fasting BSL, HbA1c, SGOT, SGPT,GGTP, Sr Creatinine
100% Tests charges would be reimbursed in case of acceptance of proposal		

Loadings

The loading would be applicable for the proposals with adverse health conditions given below: Hypertension, Diabetes, Obesity, Cholesterol Disorder, Cardiovascular diseases, or multiple risk factors.

Condition	Loading on premium	Condition	Loading on premium
Diabetes	10%	Obesity	10%
Hypertension	10%	Cardiovascular diseases	10%
Cholesterol Disorder	10%		

Minimum 10% to maximum 50% loading on the standard premium rates would be applicable based on the parameters of the medical reports



Picture: Mr. Piyush Jain our employee with his family.



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Additional Benefits

- Cumulative Bonus of 10% of Sum insured for each claim free year, max up to 50% of Sum Insured on Hospitalisation section
- 15 Days Free Look in Period for new policies
- 30 days Grace period for renewal of the policy
- Cashless facility in around 3700 network hospitals across India, for claims under Hospitalisation Section
- Hassel free and efficient in house claim settlement
- Income tax benefit Under 80 D section of IT act

Discounts

Discounts	Individual Healthcare Supreme policies		Family Floater Healthcare Supreme policies		Group Healthcare Supreme policies	
	New Policy	Renewal	New Policy	Renewal	New Policy	Renewal
Add On cover Discount	5%	5%	5%	5%	5%	5%
Family Discount	5%	5%	NA	NA	NA	NA
Claim Free Renewal Discount	NA	5%	NA	5%	NA	NA
Group Discount	NA	NA	NA	NA	5% to 30%*	5% to 30%*
Total Maximum Discount	10%	15%	5%	10%	35%	35%

1. **Add on Cover Discount:** 5% discount applicable, if along with the basic cover all add on covers are opted
2. **Family Discount:** 5% family discount applicable, If 2 or more family members are covered under a single policy
3. **Claim Free Renewal Discount:** 5% discount applicable, if the policy is claim free at the time of renewal
4. **Group Discount:** Discount of 5% to 30% will be applicable for Group policies based on the Size of the Group

Note: 10% additional discount will be offered for online policies.

Major Exclusions

Hospitalisation Cover and Hospital Cash Daily Allowance Cover

We shall not be liable to make any payment for any claim directly or indirectly caused by, based on, arising out of or attributable to any of the following:

- Circumcision unless required for the treatment of Illness or Accidental bodily injury, cosmetic or aesthetic treatments of any description, treatment or surgery for change of life/gender.
- War or act of war, nuclear, chemical or biological weapon and radiation of any kind.
- Any form of plastic surgery unless necessary for the treatment of cancer, burns or accidental Bodily Injury
- Convalescence, general debility, rest cure, congenital external diseases or defects or anomalies, genetic disorders, stem cell implantation or surgery, or growth hormone therapy.
- Intentional self-injury
- Ailments requiring treatment due to use or abuse of any substance, drug or alcohol and treatment for de-addiction
- Medical Expenses relating to any hospitalisation primarily and specifically for diagnostic, X-ray or laboratory examinations and investigations
- Vitamins, tonics, nutritional supplements unless forming part of the treatment for injury or disease as certified by the attending Doctor
- Treatment for any other system other than modern medicine (also known as Allopathy). This exclusion is not applicable for Ayurvedic & Homeopathic Medicine Expenses
- fertility, sub fertility, impotence, assisted conception operation or sterilization procedure
- Weight management services and treatment related to weight reduction programs

Critical Illness cover

We shall not be liable to make any payment for any claim directly or indirectly caused by, based on, arising out of or attributable to any of the following:

- Any critical Illness which is pre existing to the Policy
- Any Critical Illness diagnosed within the first 90 days of the date of commencement of the Policy

- Expenses arising from Any sexually transmitted diseases or HIV (Human Immunodeficiency Virus) and/or any HIV related illness including AIDS
- Consequential losses of any kind or Your actual or alleged legal liability
- Treatment arising from or traceable to pregnancy and related complications

Personal Accident cover

We shall not be liable to make any payment for any claim directly or indirectly caused by, based on, arising out of or attributable to any of the following:

- Through suicide, attempted suicide or self-inflicted injury
- Arising or resulting from You committing any breach of law with criminal intent
- Whilst engaging in hazardous Sports activities
- Consequential losses of any kind or Your actual or alleged legal liability
- War (whether declared or not), civil war, invasion, act of foreign enemies, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrest, restraint or detention, confiscation or nationalization or requisition of or damage by or under the order of any government or public local authority

Disclaimer: The above exclusions are indicative in nature, for detail exclusions please refer the policy wordings

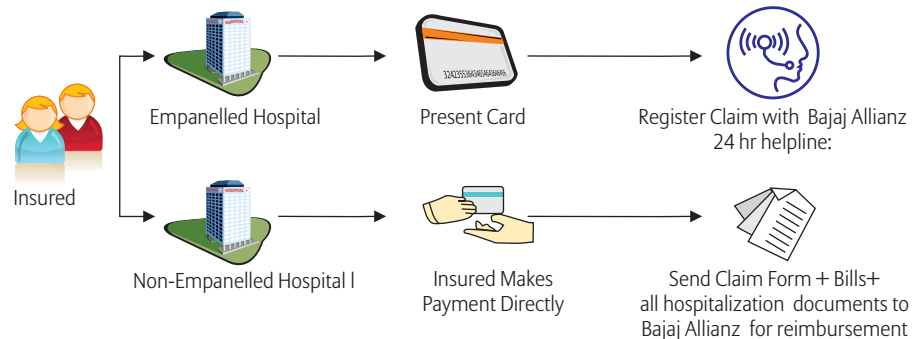


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Waiting Periods

Waiting periods	30 days	90 days	1 year	2 years
Hospitalisation Section	Applicable	Not Applicable	Applicable for listed diseases like hysterectomy, cataract etc	Applicable for pre-existing diseases, joint replacement surgeries, internal congenital diseases, etc
Pre/Post Hospitalisation				
Road Ambulance Expenses				
Road Ambulance				
Air Ambulance				
Day Care Expenses				
Recovery Benefits				
Sum Insured Reinstatement				
Ayurvedic and homoeopathic treatment hospitalisation expenses				
Physiotherapy Expenses	Applicable			
Outpatient expenses	Applicable	Not Applicable	Not Applicable	
Maternity Benefit/ New Born Baby cover	Applicable			
Ancillary Expenses Benefit Section	Applicable	Not Applicable	Applicable for listed diseases like hysterectomy, cataract etc	Applicable for pre-existing diseases joint replacement surgeries, internal congenital diseases etc
Critical Illness Benefit Section	Applicable		Not Applicable	
Personal Accident Section	Not Applicable			

How to claim?



Disclaimer: Cashless facility available for claims under Hospitalisation section only.

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Bajaj Allianz General Insurance Co. Ltd.



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G.E. Plaza, Airport Road, Yerawada, Pune - 411006. IRDA Reg No.: 113.



For Any Query (toll Free)

1800-209-0144 / 1800-209-5858



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SMS HCS TO 56070



For Claim Status - SMS **CSTATUS** <space> **ID Card No** and sent it to **9773500500**

DISCLAIMER: The above mentioned information is only indicative in nature. For detail terms and conditions, please refer to the policy wordings.

Insurance is the subject matter of the solicitation

BJAZ-B-0117/27-May-14

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