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GENERALI**
TOTAL INSURANCE SOLUTIONS

A comprehensive solution to all your healthcare needs.

Paradise is where you live your life in perfect peace and harmony. However, in today's world, your days are often mired with stress, pollution and other lifestyle hazards, the worst victim of which is your health. You may have a number of health requirements, right from regular health issues to serious ailments, leading to hospitalisation and expensive medical treatments. Although none of these are welcome, it is always good to take a health policy and be prepared for such unforeseen events. And won't it be convenient to take just one policy against all such requirements? With Health Total, we give you a comprehensive cover, a near-perfect answer to all your medical needs.

Benefits



Hospitalisation Medical Expenses



Day Care Treatment Expenses



Pre-Hospitalisation Medical Expenses



Post-Hospitalisation Medical Expenses



Restoration of Sum Insured



Maternity Expenses



Organ Donor Expenses



Patient Care



Accidental Hospitalisation (Increase in Sum Insured)



Accompanying Person



Road Ambulance Charges



Emergency Medical Evacuation (Applicable for Superior and Premiere plan)



Domiciliary Hospitalisation Expenses



Out-Patient Medical Expenses (Applicable for Superior Plan and Premiere Plan only)



Child Vaccination Benefits (Applicable for Premiere Plan)



New Born Baby (Applicable for Superior and Premiere Plan)



E-opinion in respect of an illness or injury



Alternative Treatment Cover



Medical Treatment Abroad (Applicable for Premiere Plan)



Wellness Care



Cumulative Bonus

In-house cashless settlement! Innovative Covers offered! Quick settlement of claims!

Age eligibility - Cradle to Grave Cover

All plans are available with Individual and Floater option

Family Definition

Vital Plan	a. Self	b. Spouse
	c. Dependent children (unmarried and up to the age of 25 years)	d. Dependent parents

Superior Plan and Premiere Plan	a. Self	b. Spouse	c. Dependent children (unmarried and up to the age of 25 years)
	d. Non-dependent children	e. Dependent parents	f. Non-dependent parents
	g. Dependent siblings	h. Daughter-in-law	i. Son-in-law
	j. Parents-in-law	k. Grandparents	l. Grandchildren

Minimum Policy Term	1 Year
Maximum Policy Term	3 Years
Minimum Age at Entry	Day 1
Maximum Age at Entry	Life long
Renewal	Life long

Life Long Renewals

The policy, if renewed continuously without any break, will be renewed life long.

Sum Insured

Ranging from ₹3 lakh to ₹1 crore.

Co-payment Applicability



In case an insured enters the policy at the age given in the table, the respective co-payments will be applicable on each and every admissible claim.

Age	Co-payment
60 years to 64 years	20%
65 years to 69 years	25%
70 years to 74 years	30%
75 years and above	40%

Pre-acceptance Medical Tests

Pre-acceptance medical tests are not required for all proposers up to the age of 50 years for **Vital Plan**, in case of clean proposal form (i.e. without any health declaration). For age 51 years and above, medical tests are mandatory.

Compulsory medical tests are required for **Superior and Premiere Plans** for those who completed 18 years of age and above.


Vital Plan		Superior Plan		Premiere Plan	
Up to 50 years	Above 50 years	From 18 years to 50 years	Above 50 years	From 18 years to 50 years	Above 50 years
Not required	Required	Required	Required	Required	Required

*No tests required for children below 18 years for any plan.

**Age in completed years

- Insured is eligible for 100% reimbursement of pre-acceptance medical tests charges, subject to policy issuance and 64 VB compliance.
- Pre-acceptance medical tests need to be done at empanelled diagnostic centres only.
- The tests would be considered valid for a period of one month from the date the tests have been conducted.
- Underwriting loading on the standard premium rates will be applicable based on health status of the proposed insured person. It will take into consideration the adverse health conditions declared on the proposal form and findings of medical tests conducted.
- The loading of premium will be applicable on the particular insured's premium only.
- This would be applicable for both Individual and Floater options.

	Schedule Of Benefits								
		Vital Plan			Superior Plan			Premiere Plan	
Eligibility	Sum Insured (in ₹)	3 lakh	5 lakh	10 lakh	15 lakh	20 lakh	25 lakh	50 lakh	1 crore
	Minimum age at entry	1 day	1 day	1 day	1 day	1 day	1 day	1 day	1 day
	Maximum age at entry	None	None	None	None	None	None	None	None
	Maximum renewal age	Life Long	Life Long	Life Long	Life Long	Life Long	Life Long	Life Long	Life Long
	Individual SI / family floater SI options	Both	Both	Both	Both	Both	Both	Both	Both
	Family definition	S+Sp+ 2C+2P (1+5)	S+Sp+ 2C+2P (1+5)	S+Sp+ 2C+2P (1+5)	Extended family up to 15 members	Extended family up to 15 members	Extended family up to 15 members	Extended family up to 15 members	Extended family up to 15 members
Hospitalisation Benefits	Hospitalisation	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI
	Day care treatment	√	√	√	√	√	√	√	√
	Pre-hospitalisation	60 days	60 days	60 days	60 days	60 days	60 days	60 days	60 days
	Post-hospitalisation	90 days	90 days	90 days	120 days	120 days	120 days	180 days	180 days
	Restoration of SI	√	√	√	√	√	√	√	√
	Cumulative bonus - 50% for every claim-free year to max 100%	√	√	√	√	√	√	√	√
	Maternity benefit - normal delivery (in ₹)	15,000	20,000	25,000	30,000	40,000	40,000	50,000	50,000
Maternity benefit - LSCS (caesarian) (in ₹)	25,000	35,000	45,000	50,000	60,000	60,000	1,00,000	1,00,000	

		Vital Plan			Superior Plan			Premiere Plan	
Hospitalisation Benefits	Pre-natal hospitalisation (within maternity limits)	x	x	x	90 days	90 days	90 days	90 days	90 days
	Post-natal hospitalisation (within maternity limits)	x	x	x	45 days	45 days	45 days	45 days	45 days
	Organ donor expenses	√	√	√	√	√	√	√	√
	New born baby benefits: Automatic cover within mother's / floater Sum Insured up to expiry date of policy	x	x	x	√	√	√	√	√
	New born baby benefits: Reasonable vaccination benefits up to 1 year of age (in ₹)	x	x	x	Max 3,500	Max 3,500	Max 3,500	Max 5,000	Max 5,000
	Patient care (above 60 years) - per day benefit up to max (in ₹)	350/day	350/day	350/day	500/day	500/day	500/day	1,000/day	1,000/day
	Patient care (above 60 year) - maximum	10 days per Hospitalisation and 30 days per policy year							
	Accidental hospitalisation - 25% increase subject to maximum of ₹10 lakh	√	√	√	√	√	√	√	√
	Accompanying person (up to 12 years) ₹500 /day to maximum of 30 days	√	√	√	√	√	√	√	√
	Domiciliary hospitalisation expenses - maximum up to 10% of SI	√	√	√	√	√	√	√	√
	Alternative treatments Ayurveda / Unani /Sidha / Homeopathy - reimbursement	√	√	√	√	√	√	√	√
Medical Treatment Abroad	Medical treatment abroad							√	√
	Medical treatment abroad - waiting period	x	x	x	x	x	x	4 years	4 years
 Road Ambulance	Road ambulance charges - network hospitals (in ₹)	1,500	1,500	1,500	Actuals	Actuals	Actuals	Actuals	Actuals
	Road ambulance charges - non network hospitals (reimbursement up to a maximum) (in ₹)	1,500	1,500	1,500	2,000	2,000	2,000	5,000	5,000
Emergency Medical Evacuation	Emergency medical evacuation - 5% of SI (reimbursement up to a maximum)	x	x	x	√	√	√	√	√

		Vital Plan			Superior Plan			Premiere Plan	
Compulsory Co-pay	20% co-payment where entry age is from 60 year to 64 years	√	√	√	√	√	√	√	√
	25% co-payment where entry age is from 65 year to 69 years	√	√	√	√	√	√	√	√
	30% co-payment where entry age is from 70 year to 74 years	√	√	√	√	√	√	√	√
	40% co-payment where entry age is 75 years and above	√	√	√	√	√	√	√	√

** Out-patient medical expenses. (Applicable for Superior and Premiere Plan)

In case of bills for any prescribed drugs/medicines, our liability will be restricted to 80% of admissible bills.

In case of dental consultations and diagnostics, our liability will be restricted to 70% of admissible bills.

* All benefits are given within the base Sum Insured except Accidental Hospitalisation.

SI : Sum insured, S: Self, Sp: Spouse, C: Child, P: Parent

Exclusions



- Charges incurred at a hospital primarily for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any illness or injury, for which confinement is required at a hospital.
- Cost of an annual health check-up.
- Injury or illness directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, war like operations (whether war is declared or not), Circumcision, unless necessary for treatment of an illness not excluded hereunder or as may be necessitated due to an accident.
- Vaccination/inoculation (except as post-bite treatment) except to the extent covered under Benefits 14 and 15 as mentioned in policy clause.
- Cosmetic treatments (for change of life or cosmetic or aesthetic treatment of any description), plastic surgery other than as may be necessitated due to an accident or as a part of any illness, refractive error corrective procedures, experimental, investigational or unproven/experimental treatment, devices and pharmacological regimens of any description.
- Charges incurred in connection with cost of spectacles and contact lenses, hearing aids, durable medical equipment (including but not limited to cost of instrument used in the treatment of Sleep Apnea Syndrome (C.P.A.P), Continuous Peritoneal Ambulatory Dialysis (C.P.A.D) and oxygen concentrator for asthmatic condition, wheel chair, crutches, artificial limbs, belts, braces, stocking, Glucometer and the like), namely that equipment used externally for the human body which can withstand repeated use; is not designed to be disposable; is used to serve a medical purpose, such cost of all appliances/devices whether for diagnosis or treatment after discharge from the hospital.
- 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).

Other Benefits



1. Subject to no claim, cumulative bonus of 50% on the basic sum insured will be provided up to a maximum of 100% of the sum insured.
2. Family discount of 10% is available in case more than one person is covered in the same policy in case of Individual Sum Insured option has been taken.
3. Long-term discount will be given in case Policy Term is more than 1 year.

Long-term discount (applicable in case of single payment for more than one year)

Number of years	Discount
1 year	Nil
2 years	7.5%
3 years	10%

Voluntary Deductible Discount

Vital Plan		Superior Plan		Premiere Plan	
Deductible	Discounts	Deductible	Discounts	Deductible	Discounts
₹ 10,000	10%	₹ 50,000	15%	₹ 1,00,000	15%
₹ 25,000	15%	₹ 75,000	20%	₹ 2,50,000	20%
₹ 50,000	20%	₹ 1,00,000	25%	₹ 5,00,000	25%

Installment Facility



In case of policies which are on long-term basis, facility of installment is available. Given below are the loadings applicable on standard premiums in case of installments.

Installment frequency	Loading on standard premiums
Monthly	5%
Quarterly	4%
Half-yearly	3%

Loading on Claim Experience

There will be no loading on premium for adverse claims experience

Tax Benefit

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.

Premium Table – Individual Premium Rates (Premium and Sum Insured in ₹)

	Vital			Superior			Premiere	
Age / Sum Insured	3,00,000	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	1,00,00,000
0-17	4,418	5,061	6,856	8,019	10,400	12,451	18,054	21,304
18-25	4,645	6,213	8,471	10,198	11,923	13,661	19,808	23,374
26-30	4,718	6,718	8,501	10,515	12,034	14,429	20,922	24,688
31-35	4,724	6,739	8,582	10,687	12,523	16,031	23,245	27,429
36-40	4,999	6,752	8,639	10,731	13,942	16,875	24,469	28,873
41-45	5,468	7,227	9,394	12,793	16,858	20,622	29,902	35,284
46-50	8,074	10,033	13,726	17,094	22,453	27,490	39,861	47,035
51-55	11,799	14,866	20,290	25,088	30,870	36,638	53,125	62,688
56-60	15,216	18,311	25,997	31,379	37,228	41,447	60,098	70,916
61-65	29,734	34,638	41,816	44,878	48,235	53,934	78,204	92,281
66-70	37,151	43,613	49,846	53,201	55,518	61,221	88,770	1,04,749
71-75	41,096	48,884	56,204	60,241	61,674	67,657	98,103	1,15,761
76-80	55,102	64,911	71,342	75,324	78,468	84,246	1,22,157	1,44,145
81-85	65,661	79,968	85,763	89,886	94,353	1,02,736	1,48,967	1,75,781
>85	67,559	81,522	87,236	91,935	1,01,603	1,16,036	1,68,252	1,98,538

*Premiums exclusive of Service Tax

**Age in completed years

Floater Discount

Applicable discount is as per following table:

Age Band	Discount Percentage	Age Band	Discount Percentage
0-17	60%	56-60	35%
18-25	55%	61-65	35%
26-30	50%	66-70	35%
31-35	45%	71-75	35%
36-40	45%	76-80	25%
41-45	40%	81-85	25%
46-50	40%	>85	20%
51-55	40%		

Premium applicable for the primary insured will be the standard individual premiums from the premium table. For remaining dependent members, floater discounts applicable on their respective premium is as per table above.

For example, in case of a family of self, spouse and one child, the premium for floater for Sum Insured ₹10,00,000 would be charged in the following manner:

	Self	Spouse	Child
Age band	36-40	31-35	0-17
Premium as per individual rate table (in ₹)	8639	8582	6856
Applicable premium (in ₹)	8639	4720 (45% discount applied on the respective person's premium)	2742 (60% discount applied on the respective person's premium)
Total premium to be charged (in ₹) Service tax extra	= 8639 + 4720 + 2742 =16101		

Premium Illustration in respect of policies offered on individual and family floater basis Plan Vital, Sum Insured ₹ 500000

Age of the members insured	Coverage opted on individual basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum insured is available for each member of the family)				Coverage opted on family floater basis with overall Sum insured (Only one sum insured is available 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 (₹)
50 years	10,033	500000	10,033	1,003	9,030	500000	10,033	-	10,033	500000
42 years	7,227	500000	7,227	723	6,504	500000	7,227	2,891	4,336	
17 years	5,061	500000	5,061	506	4,555	500000	5,061	3,037	2,024	
20 years	6,213	500000	6,213	621	5,592	500000	6,213	3,417	2,796	
27 years	6,718	500000	6,718	672	6,046	500000	6,718	3,359	3,359	
27 years	6,718	500000	6,718	672	6,046	500000	6,718	3,359	3,359	
32 years	6,739	500000	6,739	674	6,065	500000	6,739	3,033	3,706	
35 years	6,739	500000	6,739	674	6,065	500000	6,739	3,033	3,706	
36 years	6,752	500000	6,752	675	6,077	500000	6,752	3,038	3,714	
40 years	6,752	500000	6,752	675	6,077	500000	6,752	3,038	3,714	
52 years	14,866	500000	14,866	1,487	13,379	500000	14,866	5,946	8,920	
57 years	18,311	500000	18,311	1,831	16,480	500000	18,311	6,409	11,902	
65 years	34,638	500000	34,638	3,464	31,174	500000	34,638	12,123	22,515	
65 years	34,638	500000	34,638	3,464	31,174	500000	34,638	12,123	22,515	
70 years	43,613	500000	43,613	4,361	39,252	500000	43,613	15,265	28,348	
Total Premium for all members of the family is ₹ 2,15,018/-, when each member is covered separately.			Total Premium for all members of the family is ₹ 1,93,516/-, when they are covered under a single policy.				Total Premium when policy is opted on floater basis is ₹ 1,34,947/-.			
Sum insured available for each individual is ₹ 500000.			Sum insured available for each family member is ₹ 500000.				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.

Basis of claims payment



- a) We shall make payment in Indian Rupees and in India only.
- b) In respect of surgery for cataracts (after the expiry of the two-year period referred to in Section D II. (iii) of policy clause, liability shall be restricted to 10% of the Sum Insured for each eye, and a maximum of ₹1,00,000 per eye.
- c) If a voluntary deductible has been opted and is in force under the policy, liability would be over and above the voluntary deductible amount for each and every claim made under hospitalisation.
- d) Wherever co-payments are applicable, the same would be applied on the admissible claim amount after the application of voluntary deductible, if any.

* Benefits may vary from plan to plan.

** For further details, please refer to the policy wordings.

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)

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