

HEALTH IS WEALTH. ENSURE ITS COMPLETE CARE.



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**FUTURE
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 |  | Emergency medical evacuation (Applicable for Superior and Premiere plan) |
|  | Day care treatment expenses |  | Domiciliary hospitalisation expenses |
|  | Pre-Hospitalisation medical expenses |  | Out-Patient medical expenses (Applicable for Superior Plan and Premiere Plan only) |
|  | Post-Hospitalisation medical expenses |  | Child vaccination Benefits (Applicable for Premiere Plan) |
|  | Restoration of Sum Insured |  | New born baby (Applicable for Superior and Premiere Plan) |
|  | Maternity expenses |  | E-opinion in respect of an illness or injury |
|  | Organ donor expenses |  | Alternative treatment cover |
|  | Patient care |  | Medical treatment abroad (Applicable for Premiere Plan) |
|  | Accidental hospitalisation (Increase in Sum Insured) |  | Wellness care |
|  | Accompanying person |  | Cumulative Bonus |
|  | Road ambulance charges | | |

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/Live-in partner
	c. Dependent children (unmarried and up to the age of 25 years)	d. Dependent parents

Superior Plan and Premier Plan	a. Self	b. Spouse/Live-in partner	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
Minimum Policy Term	3 Years
Minimum Age at Entry Term	Day 1
Minimum Age at Entry Term	Life long
Renewals	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

Health Total									
Eligibility		Vital Plan			Superior Plan			Premiere Plan	
	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/LP + 2C+2P (1+5)	S+Sp/LP + 2C+2P (1+5)	S+Sp/LP + 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	✓	✓	✓	✓	✓	✓	✓	✓	
	Automatic cover within new born baby benefits: 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) -per day benefit up to (in ₹)	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/Yoga and Naturopathy/Unani/Sidha/ Homeopathy	✓	✓	✓	✓	✓	✓	✓	✓	
Medical Treatment Abroad	Medical treatment abroad							✓	✓	
	Medical treatment abroad - waiting period	x	x	x	x	x	x	3 years	3 years	
Road Ambulance	Road ambulance charges - network hospitals (in ₹) v	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) (in ₹)	x	x	x	✓	✓	✓	✓	✓	

** 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.

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

SI : Sum insured, S: Self, Sp: Spouse / Lp: Live-in partner, C: Child, P: Parent

Exclusions

1. 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.
2. Cost of an annual health check-up.
3. Injury or illness directly or indirectly caused by or arising from or attributable to war, circumcision, unless necessary for treatment of an illness not excluded hereunder or as may be necessitated due to an accident.
4. Vaccination/inoculation (except as post-bite treatment) except to the extent covered under benefits 14 and 15 as mentioned in policy clause.
5. 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.
6. 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, 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 consistent 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 ₹)

Age / Sum Insured	Vital			Superior			Premiere	
	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	5,503	7,006	9,113	10,319	10,816	11,805	18,429	25,307
18-25	7,320	9,352	12,180	15,076	15,787	17,092	25,984	35,055
26-30	8,068	10,312	13,436	16,355	17,137	18,581	28,246	38,285
31-35	8,356	10,683	13,922	16,849	17,658	19,156	29,121	39,534
36-40	8,900	11,380	14,834	17,778	18,637	20,236	30,763	41,880
41-45	9,716	12,428	16,206	19,174	20,108	21,861	33,232	45,408
46-50	13,554	17,352	22,654	25,736	27,030	29,497	44,840	61,987
51-55	21,427	27,045	34,915	37,289	39,142	42,839	64,489	90,185
56-60	28,503	36,127	46,807	49,396	51,909	56,926	85,901	120,770
61-65	41,913	53,339	69,343	72,337	76,105	83,624	126,477	178,733
66-70	59,359	75,732	98,665	102,189	107,585	118,360	179,271	254,150
71-75	75,413	96,335	125,642	129,653	136,551	150,319	227,846	323,536
76-80	89,749	114,734	149,734	154,176	162,413	178,855	271,219	385,493
>81	93,295	119,285	155,692	160,246	168,814	185,918	281,958	400,829

*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 /Live-in partner and one child, the premium for floater for Sum Insured ₹10,00,000 would be charged in the following manner:

	Self	Spouse /Live-in partner	Child
Age band	36-40	31-35	0-17
Premium as per individual rate table (in Rs.)	14834	13922	9113
Applicable premium (in Rs.)	14834	7657 (45% discount applied on the respective person's premium)	3645 (60% discount applied on the respective person's premium)
Total premium to be charged (in Rs.)	= 14834+7657+3645		
Goods & Services Tax extra	= 26136		

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 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	17,352	500,000	17,352	1735	15,617	500,000	17,352	6941	10,411	500,000
42 years	12,428	500,000	12,428	1243	11,185	500,000	12,428	4971	7,457	
17 years	7,006	500,000	7,006	701	6,305	500,000	7,006	4204	2,802	
20 years	9,352	500,000	9,352	935	8,417	500,000	9,352	5144	4,208	
27 years	10,312	500,000	10,312	1031	9,281	500,000	10,312	5156	5,156	
27 years	10,312	500,000	10,312	1031	9,281	500,000	10,312	5156	5,156	
32 years	10,683	500,000	10,683	1068	9,615	500,000	10,683	4807	5,876	
35 years	10,683	500,000	10,683	1068	9,615	500,000	10,683	4807	5,876	
36 years	11,380	500,000	11,380	1138	10,242	500,000	11,380	5121	6,259	
40 years	11,380	500,000	11,380	1138	10,242	500,000	11,380	5121	6,259	
52 years	27,045	500,000	27,045	2705	24,341	500,000	27,045	10818	16,227	
57 years	36,127	500,000	36,127	3613	32,514	500,000	36,127	12644	23,483	
65 years	53,339	500,000	53,339	5334	48,005	500,000	53,339	18669	34,670	
65 years	53,339	500,000	53,339	5334	48,005	500,000	53,339	18669	34,670	
70 years	75,732	500,000	75,732	7573	68,159	500,000	75,732	0	75,732	
Total Premium for all members of the family is ₹3,56,470/-, when each member is covered separately. Sum insured available for each individual is ₹500000.			Total Premium for all members of the family is ₹ 3,20,823/-, when they are covered under a single policy. Sum insured available for each family member is ₹500000.				Total Premium when policy is opted on floater basis is ₹2,44,242/-. 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

* Benefits may vary from plan to plan.

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

- 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 DII. (iii) of policy clause, liability shall be restricted to 10% of the Sum 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 to claim amount after the application of voluntary deductible, if any.



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-0-Square

S.No. 249 & 250, Aundh Hinjewadi Link Road, Wakad, Pune-411 057.

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