

Arogya Sanjeevani by United India Insurance Co Ltd

KEY FEATURES

The Policy provides cover on an Individual or Family Floater basis. A separate Sum Insured for each

Insured Person is provided under Individual basis while under Family Floater basis, the Sum Insured limit is shared by the whole family of the Insured as specified in the Policy Schedule and our total liability for the family cannot exceed the Sum Insured in a Policy period.

MIGRATION OF POLICY

The Insured Person will have the option to migrate the Policy to other health insurance products/plans offered by the company as per extant Guidelines related to Migration. If such person is presently covered and has been continuously covered without any lapses under any health insurance product/plan offered by the company, as per Guidelines on migration, the proposed Insured Person will get all the accrued continuity benefits in waiting periods as per below:

- i. The waiting periods specified in Section VII.A shall be reduced by the number of continuous preceding years of coverage of the Insured Person under the previous health insurance policy.
- ii. Migration benefit will be offered to the extent of sum of previous sum insured and accrued bonus/multiplier benefit (as part of base sum insured), migration benefit shall not apply to any other additional increased Sum Insured.

For Detailed Guidelines on Migration, kindly refer the link:

https://www.irdai.gov.in/ADMINCMS/cms/frmGuidelines_Layout.aspx?page=PageNo3987

TABLE OF BENEFITS

Name	Arogya Sanjeevani Policy, United India Insurance Company Limited
Product Type	Individual/Floater
Category of Cover	indemnity
Sum Insured	INR 0.5 Lakh to 10 Lakh (going up in multiples of Rs. 50,000) On Individual Basis – SI shall apply to each individual family member On Floater Basis – SI shall apply to the entire family
Policy Period	1 Year
Eligibility	Policy can be availed by persons between the age of 18 years and 65 years, as Proposer. Proposer with higher age can obtain policy for family, without covering self. Policy can be availed for Self and the following family members i. Legally wedded spouse ii. Parents and Parents-in-law iii. Dependent Children (i.e. natural or legally adopted) between the age 3 months to 25 years. If the child above 18 years of age is financially independent, he or she shall be ineligible for coverage in the subsequent renewals
Grace Period	For yearly payment of mode, a fixed period of 30 days is to be allowed as Grace Period and for all other modes of payment a fixed period of 15 days to be allowed as grace period.
Hospitalisation Expenses	Expenses of Hospitalisation for a minimum period of 24 consecutive hours only shall be admissible Time limit of 24 hours shall not apply when treatment is undergone in a Day Care Centre.

Pre Hospitalisation	For 30 days prior to hospitalisation
Post Hospitalisation	For 60 days from the date of discharge from the hospital.
Sub limit for room/doctors fee	1. Room Rent, Boarding, nursing expenses all-inclusive as provided by the Hospital/Nursing Home up to 2% of the sum insured subject to maximum of Rs.5000/- per day. 2. Intensive Care Unit (ICU) charges/Intensive Cardiac Care Unit (ICCU) charges all inclusive as provided by the Hospital/Nursing Home up to 5% of the sum insured subject to a maximum of Rs. 10,000/- per day.
Cataract Treatment	Up to 25% of Sum Insured or Rs. 40,000/-, whichever is lower, per eye, under one policy year.
AYUSH	Expenses incurred for inpatient care treatment under Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems of medicine shall be covered up to sum insured, during each policy year as specified in the policy schedule.
Pre Existing Disease	Only PEDs declared in the Proposal Form and accepted for coverage by the company shall be covered after a waiting period of 4 years.
Cumulative Bonus	Increase in the sum insured by 5% in respect of each claim free year subject to a maximum of 50% of SI. In the event of claim, the cumulative bonus shall be reduced at the same rate.
Co Pay	5% co pay on all claims.