

## INDIAN BANK AROGYA RAKSHA – UNIVERSAL SOMPO

### TABLE OF BENEFITS

(Details mentioned below are indicative and brief in nature. Please refer to Policy Wordings for complete information on your coverage)

BASE COVER	Coverage Details
Hospitalisation	<ul style="list-style-type: none"> <li>▪ <b>Room Rent, Boarding &amp; Nursing expenses</b> up to Rs. <b>(1.5% of Sum Insured)</b> per day (In case of admission to a room at rates exceeding the aforesaid limits the reimbursement/payment of all associated medical expenses incurred at the Hospital <b>shall be effected in the same proportion as the admissible rate per day bears to the actual rate per day of Room Rent</b>).</li> <li>▪ <b>ICU/ICCU expenses</b> up to Rs. <b>(3% of Sum Insured)</b> per day.</li> <li>▪ Surgeon, Anaesthetist, Specialist Fees, Blood, Oxygen, Operation Theatre Charges, medicines and drugs, diagnostic tests, <i>(For detailed list of covered expenses, please refer to Policy Terms &amp; Conditions)</i>.</li> <li>▪ Hospitalisation expenses (excluding cost of organ) incurred for donor in respect of organ transplant to the Insured Person.</li> <li>▪ Expenses for the following illnesses/surgeries shall be restricted as follows subject to <b>waiting period</b>:               <ul style="list-style-type: none"> <li>○ <b>Cataract</b>: Up to Rs. (10% of Sum Insured) or Rs. 40,000/- for policies purchased on or after 01.07.2021. (12 months waiting period)</li> <li>○ <b>Hernia</b>: Up to Rs. (15% of Sum Insured) or Rs. 50,000/- for policies purchased on or after 01.07.2021. (12 months waiting period)</li> <li>○ <b>Hysterectomy</b>: Up to Rs. (20% of Sum Insured) or Rs. 50,000/- (12 months waiting period)</li> <li>○ <b>Major Surgeries</b>: Up to Rs. (80% of Sum Insured)</li> </ul> </li> </ul>
Day Care Treatment	All medical treatments and/or surgical procedures which fall under the definition of Day Care Treatment, under Section 3 (Definitions) of the Policy Wordings, are covered.
Pre & Post Hospitalisation	We will cover your medical expenses up to 30 days before hospitalisation & up to 60 days after your discharge from hospital, subject to a maximum of Rs. (Not exceeding 10% of Sum Insured under both).
Ayurvedic Treatment	We will cover reasonable & customary medical expenses incurred for inpatient care treatment under Ayurvedic system of medicine in an AYUSH hospital/AYUSH Day Care Centre
Modern Treatment (Applicable for policy purchased on or after 01.10.2020)	<p>The below mentioned advanced medical procedures shall covered up to the following limits:</p> <ul style="list-style-type: none"> <li>▪ Uterine Artery Embolization and HIFU up to Rs. (20% of Sum Insured), subject to a maximum of Rs. 2 Lakhs per Policy Period</li> <li>▪ Balloon Sinuplasty up to Rs. (10% of Sum Insured), subject to a maximum of Rs. 1 Lakh per Policy Period</li> <li>▪ Deep Brain stimulation up to Rs. (70% of Sum Insured) per Policy Period</li> <li>▪ Oral Chemotherapy up to Rs. (20% of Sum Insured) per Policy Period, subject to a maximum of Rs. 2 Lakhs per Policy Period</li> <li>▪ Immunotherapy – Monoclonal Antibody to be given as injection up to Rs. (20% of Sum Insured), subject to a maximum of Rs. 2 Lakhs per Policy Period</li> <li>▪ Intra vitreal injections up to Rs. (10% of Sum Insured), subject to a maximum of Rs. 1 Lakh per Policy Period               <ul style="list-style-type: none"> <li>▪ Robotic Surgeries up to:                   <ul style="list-style-type: none"> <li>Rs. (75% of Sum Insured) per Policy Period for claims involving Robotic Surgeries for (i) the treatment of any disease involving Central Nervous System irrespective of aetiology; (ii) Malignancies. Rs. (50% of Sum Insured) per Policy Period for claims involving Robotic Surgeries for other diseases</li> </ul> </li> </ul> </li> <li>▪ Stereotactic radio surgeries up to Rs. (50% of Sum Insured) per Policy Period</li> <li>▪ Bronchial Thermoplasty up to Rs. (30% of Sum Insured), subject to a maximum of Rs. 3 Lakhs per Policy Period</li> <li>▪ Vaporization of the Prostate up to Rs. (30% of Sum Insured), subject to a maximum of Rs. 2 Lakhs per Policy Period. ▪ IONM (Intra Operative Neuro Monitoring) up to Rs. (15% of Sum Insured), subject to a maximum of Rs. 1 Lakh per Policy Period.</li> </ul>

Maternity Expenses (Applicable only for first two childbirth)	We will cover Medical expenses up to Rs. (5% of Sum Insured) in respect of female Insured Person above 18 years during the Policy Period for the delivery of a child in a Hospital/Nursing home arising from or traceable to Pregnancy childbirth including normal caesarean section during the Policy Period or for medically required and lawful medical termination of pregnancy. The hospitalisation expenses in respect of treatment given to the new-born baby in the Hospital as an inpatient for a maximum period of 90 days from the date of its birth shall be covered within the Mother's Maternity expenses.
Health Check-Up in lieu of No Claim Bonus	We will reimburse expenses incurred towards cost of health check-up up to Rs. (1% of average Sum Insured) of preceding 4 claim-free years for a block of <b>every three claim-free years</b> .
Personal Accident (Death) Cover	<ul style="list-style-type: none"> <li>▪ Account Holder: 100% of Sum Insured (SI)</li> <li>▪ Spouse: 50% of Sum Insured (Total claim should not exceed Sum Insured)</li> <li>▪ Children: 25% of Sum Insured for each child</li> <li>▪ Total Claim should not exceed Sum Insured</li> </ul>
Mental Illness - (Applicable for policy purchased on or after 01.10.2020)	In case of following mental illnesses the actual In-patient Hospitalization expenses will be covered up to 25% of Sum Insured subject to a maximum of Rs. 3,00,000 per policy year; (Schizophrenia, Bipolar Affective Disorders, Depression, Obsessive Compulsive Disorders and Psychosis. For full details please refer policy wordings.

### **KEY EXCLUSIONS:**

Expenses related to the treatment of a **pre-existing disease (PED)** and its direct complications shall be excluded until the expiry of **36 months** of continuous coverage after the date of inception of the first policy of IB Arogya Raksha (now called as IB Arogya Raksha – Universal Somp). Expenses related to the treatment of any illness **within 30 days from the first policy commencement date** shall be excluded except claims arising due to an accident, provided the same are covered. *Dental treatment or dental surgery of any kind unless necessitated by disease or injury and requiring hospitalization.*

Expenses related to the treatment of the listed Conditions, surgeries/treatments as per **Table A and Table B below**, shall be excluded until the expiry of **12 months and 36 months (specific waiting period)** respectively of continuous coverage after the date of inception of the first policy of IB Arogya Raksha (now called as IB Arogya Raksha- Universal Somp). This exclusion shall not be applicable for claims arising due to an accident.

#### **Table A: 12 Months' Specific Waiting Period**

**Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia/Fibromyoma, Hernia of all types, Hydrocele, Piles, Fistula-in-Ano, Sinusitis and related disorders, Gout and Rheumatism, Calculus diseases and Congenital Internal diseases**

#### **Table B: 36 Months' Specific Waiting Period**

**Treatment for joint replacement unless arising from accident, Age-related Macular Degeneration (ARMD), Age-related Osteo-arthritis & Osteoporosis, All Neuro degenerative disorders**

*You will not be covered for the following also:*

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| <ul style="list-style-type: none"> <li>▪ Change of Life Treatments, Refractive Error</li> <li>▪ Cosmetic or Plastic Surgery</li> <li>▪ Rest Cure, Rehabilitation and Respite Care</li> <li>▪ Sterility &amp; Infertility</li> <li>▪ Alcoholism, Drug or Substance Abuse, Breach of law</li> <li>▪ Unproven Treatments, OPD, Domiciliary &amp; less than 24 hours hospitalization</li> </ul> | <ul style="list-style-type: none"> <li>▪ Obesity/Weight Control</li> <li>▪ Nuclear, chemical, or biological attacks, War and war like occurrences</li> <li>▪ Vaccination or Inoculation of any kind</li> <li>▪ Cost of Spectacles, Contact Lenses, Hearing Aids</li> <li>▪ Congenital External diseases or anomalies</li> <li>▪ Hospitalisation not necessary</li> </ul> |
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**(This list is only indicative and not exhaustive. For full list of exclusions, please refer to Policy Wordings)**

## **Wellness Benefits**

The Company covers below listed benefits to help the Insured person(s) maintain his/her health and wellness by offering services and incentivizing with rewards.

### **1. Everyday Care:**

The insured person can avail discounts on outpatient consultation, pharmaceuticals and diagnostics tests through our empaneled Network providers. The list of such network providers will be updated from time to time and can be obtained from Our website, mobile application or by calling our call centre. The Company will assist in scheduling appointments for consultation and diagnostic test as per time convenience of the insured person. Alternatively, the insured person may also schedule his/her own appointment themselves by contacting the Network Provider or through the mobile application. The insured person(s) can avail these facilities as many numbers of time as he/she wishes to avail.

#### **i. OPD Consultation:**

The Company offers family/general physician as well as special consultations at discounted rates from the Network Providers. The insured person(s) can also store the prescription letters and bills in the electronic health portal system provided by the Company.

#### **ii. Diagnostic Services:**

The Company offers diagnostic facilities at discounted rates from the Network Providers. The insured person(s) can also store these medical test reports and bills in the electronic health portal system provided by the Company.

#### **iii. Pharmacies:**

If the insured person(s) wants to obtain medicines and consumables prescribed by a medical practitioner, he/she can avail the same at discounted rates subject to a valid prescription from the Network providers. The medicines can be also ordered through the Mobile App or our Web portal.

### **2. Complete Wellness & Healthcare:**

The Company offers a comprehensive program to maintain the health and overall wellbeing of the insured person. The insured person is provided with an individual access to web based Health portal at Company's website and/or a Wellness mobile application by the Company where he/she can perform various healthcare activities as listed below.

#### **i. Health Risk Assessment (HRA):**

HRA is process of health risk assessment with the help of a questionnaire, by collecting the information from the insured in a systematic manner and evaluate their health risks. The Health Risk Assessment generates a statistical estimate of insured person's overall health risk status and quality of lifestyle. The HRA shall be self-performed by the insured person. We will aid the insured person to complete the HRA whenever required.

#### **ii. Electronic Health Records:**

The Insured person can store the medical test reports, prescriptions and other consultation papers in the personalized portal which gets digitized to help create a complete health profile of the insured person. The medical test reports along with HRA as specified above will provide a health score to depict the health status of the insured person.

### **iii. Health Screening:**

Basis the health score of the insured person, the insured person shall be categorized as Healthy, in which case there will be no trigger for medical screening. If the score depicts unhealthy status, medical screening is advised to the insured person along with a “Health Goal” which is identified post identification of risk factors for improving insured person’s overall well-being.

“Health Goal”, which basically takes a deep dive in the identified risk areas to establish the focus points in that particular risk area.

### **3. Health Coach:**

The insured person will be assigned a dedicated Health Coach who will take care of the complete wellbeing of the Insured Person(s). The service will offer immediate and complete assistance to the Insured Person looking after his/her day-to-day health care. Post the complete health profile building of the Insured Person, Health Coach will interact with the Insured Person as per Health requirement.

## **Emergency Assistance Service**

*The Company* arrange for following Travel Assistance Services for an eligible Domestic Participant and Global Participant. The services include:

**a. Medical Consultation, Evaluation and Referral:**

The eligible participants will have access to operations centre staffed 24 hours a day, every day of the year, with multilingual personnel for medical referral.

**b. Medical Monitoring and Case Management:**

A team of doctors, nurses, and other medically trained personnel would be in regular communication with the attending physician and hospital, monitors appropriate levels of care and relay necessary and legally permissible information to the members of the Family / employer.

**c. Emergency Medical Evacuation:**

If the Insured / Insured member/s becomes ill or injured in an area where appropriate care is not available, the Company /via Service Provider will intervene and use available transportation, equipment and personnel necessary to evacuate the Individual safely to the nearest facility for medical care. This shall also include Air Ambulance services if required.

**d. Medical Repatriation (Transportation):**

We will arrange for transportation under medical supervision to the eligible participant's residence or to a medical or rehabilitation facility near the Eligible Participant's residence.

**e. Compassionate Visit:**

When an Insured Person/s is/are hospitalized for more than seven (7) consecutive days, The Company/ Service Provider will arrange for a family member or a personal friend to travel to visit the Insured **Person/s**, by providing an appropriate means of transportation.

**f. Cost of Minor Child (ren)**

One-way economy common carrier transportation with attendants, if required, will be provided to the place of residence of minor child(ren) when they are left unattended as a result of medical emergency or death of an eligible participant.

**g. Return of Mortal Remains**

In case of an Eligible Participant's death, we will arrange and pay for the return of Mortal Remains to an authorized funeral home proximate to the Eligible Participant's legal residence.

**h. Foreign Hospital Admission Assistance**

We shall assist in either issuing a prompt financial guarantee to facilitate admittance to a foreign medical facility and/ or validate Eligible Participant's medical Insurance; provided that the eligible medical participant commits in writing to repay all funds within 45 days.

**i. Prescription Assistance**

If an eligible participant needs replacement prescription medicine while travelling, we shall help with replacing the prescription when possible and legally permissible.

**j. Interpreter & Legal Referrals**

Upon request provide referrals to interpreters, counsellors or legal personnel.

**k. Lost Luggage & Document Assistance**

Helps eligible participant locate lost luggage, document, personal belongings or assist with the replacement of travel tickets.

**l. Pre-trip Information**

Helps Eligible Participants web-based and app-based country profiles that include visa requirements, immunization and inoculation recommendations, embassy, and consulate information, country specific details and security advisories as well as other patient information for travel destinations.

**m. Mobile App Services**

Offers Mobile App services including embassy and consulate locator, tap to call feature, service descriptions, electronic identification cards and Assist alerts.

**Note: Services – h,I,j,l are applicable for only global cover**