

# Arogya Sanjeevani Policy,

**Raheja QBE General Insurance Company Limited.**

**Wider coverage at affordable premium!**



# ABOUT RAHEJA QBE

Raheja QBE is a joint venture between Rajan Raheja Group and QBE Insurance (Australia). Raheja QBE has been established to help create the most conducive environment for consumers and partners in the insurance sector. While Rajan Raheja Group brings in its extensive knowledge across various business sectors in India, QBE insurance offers global expertise in insurance that together results in innovative insurance solutions for diverse consumers.

## What makes us different in the General Insurance space?

When it comes to insurance, every entity and individual has diverse needs. Raheja QBE collaborates internally and externally for assuring the delivery of highly adaptable insurance solutions that can cater to these multiplicities in requirement.



### Large Cashless Network

Avail the benefit of cashless hospitalization from a wide range of 5000+ network hospitals.



### Hassle-Free Processes, As Easy As 1-2-3

All processes, products and communication are kept as simple as possible.



### Complete Transparency

We respond and resolve issues quickly, ensuring there are no hidden agendas.



### Customer-Oriented Approach

Customer needs are put at the forefront of every transaction to ensure complete satisfaction.

# ABOUT POLICY

Arogya Sanjeevani Policy acts as the inclusive protective cover that is pocket-friendly and aids you with the required financial provision for all sorts of health and medical expenses.

The Policy offers hospitalisation coverage from Rs.50,000 to Rs.10 lakhs. This coverage is available on individual and on family floater sum insured basis.

## Reasons to choose the policy:



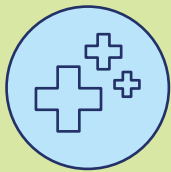
**Hospitalisation** | In patient hospitalisation and day care treatments are covered



**Room rent** | Up to 2% of sum insured, maximum ₹ 5,000 per day. For ICU, up to 5% of sum insured, maximum ₹ 10,000 per day



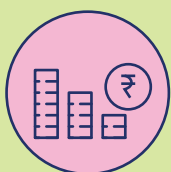
**Pre and Post Hospitalisation** | 30/60 days from the date of hospitalisation



**No Claim Bonus** | 5% increase in Sum Insured every year (maximum up to 50%) Or a discount in renewal premium.



**AYUSH Treatment** | Expenses incurred for Inpatient Care treatment under Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy



**EMI facility** | Option to pay premium half yearly, quarterly and monthly

# COVERAGES

<b>Hospitalisation</b>	Expenses of Hospitalization for a minimum period of 24 consecutive hours only shall be admissible
<b>Day Care Treatment</b>	Day care treatment covered
<b>Room Rent Limit</b>	<p>I. 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.</p> <p>II. 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 maximum of Rs.10,000/-, per day</p>
<b>Pre Hospitalisation</b>	For 30 days prior to the date of hospitalization
<b>Post Hospitalisation</b>	For 60 days from the date of discharge from the hospital
<b>Cataract Treatment</b>	Up to 25% of Sum insured or Rs.40,000/-, whichever is lower, per eye, under one policy year.
<b>AYUSH</b>	Covered
<b>Pre-Existing Disease</b>	Covered after a waiting period of 3 years
<b>Cataract Treatment</b>	Up to 25% of Sum insured or Rs.40,000/-, whichever is lower, per eye, under one policy year.



# COVERAGES

<b>No Claim bonus (NCB)</b>	Increase in the sum insured by 5% in respect of each claim free year subject to a maximum of 50% of SI or a discount in renewal premium. In the event of claim the cumulative bonus shall be reduced at the same rate and discount withdrawn.
<b>Road Ambulance</b>	Covered upto Rs. 2000/- Per Hospitalisation
<b>Co Pay</b>	5% co pay on all claims
<b>Advance Procedure</b>	<p>This policy covers specialized treatments like</p> <ul style="list-style-type: none"><li>• Uterine Artery Embolization and HIFU</li><li>• Balloon Sinuplasty • Deep Brain Stimulation</li><li>• Oral Chemotherapy</li><li>• Immunotherapy - Monoclonal Antibody to be given as injection</li><li>• Intra Vitreal Injections Robotic Surgeries</li><li>• Stereotactic Radio Surgeries</li><li>• Bronchial Thermoplasty</li><li>• Vaporisation of the Prostrate (Green laser treatment or holmium laser treatment)</li><li>• IONM (Intra Operative Neuro Monitoring)</li><li>• Stem Cell Therapy (Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered).</li></ul>



# ELIGIBILITY

## Coverage limits and it's Eligibility

<b>Sum Insured</b>	Minimum Sum Insured INR 1 Lakh
	Maximum Sum Insured INR 5 Lakh, and in the multiple of INR 50,000/-
<b>Age Limit</b>	Entry Age:
	For Adults: Above 18 years
	For Child: From 3 Months to 25 Years
<b>Family Definition</b>	Self
	Spouse
	Dependent Children
	Parents and Parent in Law
<b>Coverage Type</b>	Individual basis - SI shall apply to each individual family member
	Floater basis - SI shall apply to the entire family
<b>Policy Period</b>	1 Year
<b>EMI Facility</b>	Monthly, Quarterly and Half Yearly
<b>Pre-Policy Medical test</b>	No medical test required till age of 55 years



## WAITING PERIOD



- **Pre-Existing Diseases 36 months.**
- **First Thirty-days waiting period**
- **Specific illness Waiting Period for 24 months and 36 Months**

## MAJOR EXCLUSIONS

- **Investigation & Evaluation (Code- Excl04)**
- **Rest Cure, rehabilitation and respite care (Code- Excl05)**
- **Obesity/ Weight Control (Code- Excl06)**
- **Cosmetic or plastic Surgery (Code- Excl08)**
- **Unproven Treatments (Code- Excl16)**
- **Maternity Expenses (Code- Excl 18)**
- **Treatment taken outside the geographical limits of India**
- **Any expenses incurred on Domiciliary Hospitalization and OPD treatment**

**Note:** Above list is indicative in nature refer policy wordings for detailed exclusions.

# PREMIUM ILLUSTRATION

Particulars	Premium		
Cover type	1A	2A	2A+1C
Sum insured	5,00,000	5,00,000	5,00,000
Age of insured (highest age)	30	30	30
Age-Band	26-30	26-30	26-30
Premium Rate	3,349	5,343	6,174
Per Day Premium	9.18	14.64	16.92

**Note:** Above Premium rates are Excluding Goods and Service Tax





# GENERAL TERMS AND CONDITIONS

## **Moratorium Period**

After completion of five continuous years under this policy no look back would be applied. This period of five years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of eight continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period no claim under this policy shall be contestable except for proven fraud and permanent exclusions specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments as per the policy.

## **Portability**

The Insured Person will have the option to port the Policy to other insurers as per extant Guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance plan with an Indian General/Health insurer as per Guidelines on portability.

For Detailed Guidelines on Portability, kindly refer the link

<http://www.rahejaqbe.com/health-insurance>

## **Migration**

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.

For Detailed Guidelines on Migration, kindly refer the link

<http://www.rahejaqbe.com/health-insurance>

## **Free look period**

The Free Look Period shall be applicable at the inception of the Policy and not on renewals or at the time of porting the policy.

The insured shall be allowed a period of Thirty days from date of receipt of the Policy to review the terms and conditions of the Policy, and to return the same if not acceptable.

# GENERAL TERMS AND CONDITIONS

If the insured has not made any claim during the Free Look Period, the insured shall be entitled to:

- I. a refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges; or
- II. where the risk has already commenced and the option of return of the Policy is exercised by the insured, a deduction towards the proportionate risk premium for period of cover or
- III. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

## **Cancellation**

a) The Insured may cancel this Policy by giving 7 days' written notice, and in such an event, the Company shall refund premium on prorated basis for the unexpired Policy Period.

Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any benefit has been availed by the Insured person under the Policy.

b) The Company may cancel the Policy at any time on grounds of mis-representation, non-disclosure of material facts, fraud by the Insured Person, by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of mis-representation, non-disclosure of material facts or fraud.

# GENERAL TERMS AND CONDITIONS

## Claims Process:

### Payment of Claim

All claims under the policy shall be payable in Indian currency only.

### Claim Documents to be Submitted

The claim is to be supported with the following documents and submitted within the prescribed time limit.

- Duly Completed claim form.
- Photo Identity proof of the patient.
- Medical practitioner's prescription advising admission.
- Original bills with itemized break-up.
- Payment receipts.
- Discharge summary including complete medical history of the patient along with other details.
- Investigation/ Diagnostic test reports etc. supported by the prescription from attending medical practitioner.
- OT notes or Surgeon's certificate giving details of the operation performed (for surgical cases).
- Sticker/Invoice of the Implants, wherever applicable.
- MLR(Medico Legal Report copy if carried out and FIR (First information report) if registered, where ever applicable.
- NEFT Details (to enable direct credit of claim amount in bank account) and cancelled cheque.
- KYC (Identity proof and address proof) of the proposer as per AML guidelines.
- Legal heir/succession certificate, wherever applicable.
- Any other relevant document required by Company for assessment of the claim.



# TPA CONTACT DETAILS

## **Paramount Health Services & Insurance TPA Pvt. Ltd.**

Plot No.A-442, Road no 28, M.I.D.C. Wagle Estate, Thane (W)

Maharashtra 400604, **Contact Number:** 022 666 20 808 / 022 6834 2424

**Email:** [claim.intimation@paramounttpa.com](mailto:claim.intimation@paramounttpa.com)/ [contact.phs@paramounttpa.com](mailto:contact.phs@paramounttpa.com)

## **Medi Assist Insurance TPA Pvt.**

Ltd. IBC Knowledge Park, Tower D,  
4th Floor, Bannerghatta Main Rd, 4/1,  
Bengaluru, Karnataka 560029

**Toll Free Number: 1800-4259-449**

**Email Address:** [info@mediassistindia.com](mailto:info@mediassistindia.com)

# CONTACT US

## **Raheja QBE General Insurance Ltd.**

Fulcrum, 501 & 502, A wing, 5th Floor, International Airport  
project road, Sahar, Andheri East, Mumbai - 400059.

**Toll Free: 1800-102-7723**

**Timings: Monday - Saturday, 9 AM - 8 PM**

**E-mail -** [customercare@rahejaqbe.com](mailto:customercare@rahejaqbe.com)

**Website -** [www.rahejaqbe.com](http://www.rahejaqbe.com)



### **Section 41 of Insurance Act 1938 (Prohibition of Rebates):**

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of premium shown on the policy, nor shall any person taking out or renewing or continuing a policy acceptance rebate, except such rebate as may be allowed in accordance with the prospectus or tables of the insurers.

2. Any person making default in complying with the provision of this section shall be punishable with fine which may extend to Rupees Ten Lakhs.

**Disclaimer:** The above product details are descriptive only. The actual terms and conditions can be found in the policy document. Insured's are advised to read the policy document completely for a full description of the terms and conditions of coverage and the exclusions relating thereto.

Note: Policy Term and Conditions & Premium rates are subject to change with prior approval from IRDAI.