



Comprehensive Cover

We provide cover ranging from ₹ 5 lacs to ₹ 1 crore.



Comprehensive Hospitalisation Coverage

Coverage of medical expenses 60 days prior and 90 days post hospitalisation



Cashless Claims Processing

We process cashless claims within $30^{(1)}$ minutes upon approval at over 7600 network hospitals.



Loyalty Benefits(2)

Increase your sum insured by 10% of existing base Sum Insured each year.



Health Check-up⁽³⁾

Your health is precious so we offer comprehensive health check ups or diagnostic tests.



Cover for Maternity & New Born Child(4)

We cover maternity expenses as well as first year vaccination for a new born baby under family floater & family first plans.



Coverage outside hospital

- Pharmacy & diagnostic services
- Domiciliary treatment coverage as prescribed by a medical practitioner.
- Emergency assistance services like medical referral, air ambulance, medical repatriation, compassionate visit, etc.



Inpatient Treatment for HIV/AIDS

We indemnify the expenses incurred by the Insured Person for Inpatient treatment for HIV / AIDS and mental illness.



Additional Coverage for Platinum customers

- International treatment for specified illnesses(5)
- Covers OPD treatment
- Covers second medical opinion(6)
- Covers emergency medical evacuation & hospitalisation for medical emergencies (in and outside India)



Alternative Treatments

Coverage of alternative treatments including homeopathy and ayurveda



Freelook Period

In case you are not satisfied with policy terms and conditions you may cancel it within 15 days of receipt of policy, 30 days in case the policy has been sold through distance marketing and is for a term of 3 years or more.



More Reasons to choose Heartbeat

- We process your claim directly and not via third party
- Tax saving under Section 80D of the Income Tax Act⁽⁷⁾
- We assure you renewability for life without any extra loadings based on your claim
- No waiting period for accident hospitalisation
- No specific waiting period for insured up to 45 years of age
- We cover costs incurred towards Emergency Ambulance

For your family's health insurance Call: 1860-500-8888 visit www.nivabupa.com



Product Benefit Table for Heartbeat

Since Since Since Since Since Solutos Since Solutos Since Solutos Since Since Since Solutos Since Since Since Solutos Since Si						Individu	Individual and Family Floater	ater						Family First	
Particularies Particularie	Plan Details				Gold Plan					Platinum	. Plan		Silver Plan	Gold Plan	Platinum Plan
													Base Sum insured (per insured Person): 1Lacs, 2Lacs, 3Lacs, 4Lacs & 5Lacs	Base Sum Insured (per Insured Person): ILacs, 2Lacs, 3Lacs, 4Lacs, 5Lacs, 10Lacs & 15Lacs	Base Sum Insured (per Insured Person): 5Lacs, 10 Lacs & 15 Lacs
Particular Par	Base Sum Insured (in Rs)	5 lacs	7.5 lacs	10 lacs	15 lacs	20 lacs	30 lacs	50 lacs	15 lacs	20 lacs	50 lacs	_	Floater Sum Insured – (available on a floating basis over Base Sum nsured): 3Lacs, 4Lacs, 5Lacs, 10Lacs &15Lacs	Floater Sum Insured – (available on a floating basis over Base Sum Insured): 3Lacs, 4Lacs, 5Lacs, 10Lacs, 15Lacs, 20Lacs, 3OLacs & 50Lacs	Floater Sum Insured – (available on a floating basis over Base Sum Insured): 15Lacs, 20 Lacs, 30 Lacs & 50 Lacs
Control to Secretary	Benefits Inpatient care									Covered up to 5	um Insured				
	Room rent		Covered	up to Sum Insured	(except for Suite	or above room cate	gory)			Covered up to S	um Insured		Rs 3,000 per day or Shared Room	Covered up to Sum Insured (except for Suite or above room category)	Covered up to Sum Insured
Protection Pro	Pre-Hospitalization Medical Expenses (60 days)									Covered up to 5	um Insured			(Cons.)	
	Post-Hospitalization Medical Expenses (90 days)									Covered up to	Sum Insured				
	Alternative Treatment									Covered up to	Sum Insured				
	Day Care Treatment									Covered up to	Sum Insured				
Market of the control of the contr	Materials y nospitalization				Covered up to				Covered up to	_	9	vered up to	COC TY # of an beautiful		
Second Continue Con	Maternity Benefit (4)				₹75,000				₹120,000			200,000	Covered up to ₹ 55,000	Covered up to ₹50,000	Covered up to ₹ 100,000
Interposition	New Born Baby (covered uptill the end of Policy Year) (4)							2010	and med litera be	Covered up to	Sum Insured	il bouilob aou oc	1		
Particle	Vaccination of the flew boll baby							ia constant	ed until new bolin	Covered up to 5	ile yeal, vacciliations	as her nermieum	10		
Published and protections Published and protection of 2000 for east Published and Publishe	Fmergency Ambrilance								Netwo	ork Hospital:Covere	ed up to Sum Insured				
Function of the control of the con	Fine gency Ambalance								Non-netwo	rk Hospital: Covere	ed up to ₹ 2,000 per	event			
Particul Computation Secretary Control of the Con	Re-fill benefit				Reinstate up 1	o base Sum Insured	d. Applicable for sa	ame & different illr	ness as well					Not Applicable	
A control to the co	Pharmacy and diagnostic services								Available	through our emp	anelled service provi	der			
Control District State Control District St	HIV / AIUS									covered up to	1 50,000				
Amail leas Ama	Mental disorder treatment							Cover	ed up to Sum Insu	red (sub-limit of ₹	50.000 applicable c	in few conditions	6		
Part									2		a deb		ncrease of 10% of expiring Base Sum		:
Annual Test Tes	Loyalty Additions			Increase	of 10% of expiring	Base Sum Insured	in a Policy Year, n	naximum up to 100	0% of Base Sum Ir	sured			nsured in a Policy Year, maximum up to 50% of Base Sum Insured	Increase of 10% of expiring Base Sum Ir 100% of Base	isured in a Policy Year; maximum up to Sum Insured
Covered by Discovered by Dis	Health Check-up (per Insured Person) ⁽³⁾		Annual, Tests covered up to worth ₹ 1,875		Annual, Tests	covered up to wor	th ₹ 2,500		Annual, tests covered up to worth ₹ 3750	Annual, tests c	overed up to worth f	S 5,000	Once in two years, tests as per defined list	Annual, Tests covered up to worth ₹ 2,500	Annual, tests covered up to worth ₹5,000
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Exemption the west from the we	Child Care Benefits (Vaccinations for children up to 12 years including one consultation for nutrition and growth								Covered	1 up to Sum Insure	d (As per defined list				Covered up to Sum Insured (As per
Emergency Modified Beautiston Financial	during the visit for vaccination)										è				defined list)
Specified lines Coveral Coverat Cove	Emergency Medical Evacuation Emergency Hocnitalization				Not Applicable				Covered up to Su	m Insured (for wo	ridwide excluding U.	SA, Canada	Not App	olicable	Covered up to Sum Insured (for world-
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Modern Treatments Covered up to Sum Insured (such image) Covered up to Sum Insured (such image) Covered up to Sum Insured (sub-imit applicable on few conditions) 7 5,000/day	Second Medical Opinion								Covered, One o	pinion per Insured anned Surgery / Su	Person per Specifier Irgical Procedure	1 Illness /			Covered, One opinion per Insured Person per Specified Illness / planned Surgery / Surgical Procedure
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Personal Accident cover will be equal to 5 times of base Sum insured; subject to maximum of 50 lacs above on individual basis) Critical liness cover will be equal to base Sum Insured; subject to maximum of 10 lacs individual basis) Critical liness cover will be equal to base Sum Insured; subject to maximum of 10 lacs individual basis) Critical liness cover will be equal to base Sum Insured; subject to maximum of 10 lacs Critical liness cover will be equal to base Sum Insured; subject to maximum of 10 lacs Critical liness cover will be equal to base Sum Insured; subject to maximum of 10 lacs Critical liness cover will be equal to base Sum Insured; subject to maximum of 10 lacs Critical liness cover will be equal to base Sum Insured Person dides or suffers from specified illness Consultations UsA & Canada included for "Energency Medical Evacuation", "Emergency Medical Evacua	Hospital Cash ®				₹ 3,000/day					€ 6,000	/day		₹1,500/day	₹ 3,000/day	₹ 6,000/day
Critical illness cover will be equal to base Sum Insured; subject to maximum of 10 lacs Critical illness cover will be equal to base Sum Insured; subject to maximum of 10 lacs Premium Waiver Permium Waiv	Personal Accident cover (for insured aged 18 years & above on inclivitual basis)							Personal Accide	nt cover will be ec	ual to 5 times of b	ase Sum Insured; sui	oject to maximur			
Permium Waiver Permiu	Critical illness cover (for insured 18 years & above on individual basis)							Critical ii	liness cover will be	equal to base Sur	n Insured; subject to	maximum of 10	lacs		
Enhanced Geographical Scope for International coverage Gain cost satisfied tillness cover* A If you select Zone 2, then 20% co-payment will apply for treatment in Mumbai & Thane). Delhi Co-payment Co-paymen	e-consultation								- C	nlimited tele / onli	ne consultations				
Enhanced Geographical Scope for International coverage Claim cost statement of Specified Scope for International coverage Claim cost statement in Munical State Copayment Co	Premium waiver						STO CIE	time premium wa	aiver if the Policyr	older (who is also	an Insured Person) o	les or surrers rro	n specified liness		Sample of populari charge & ASI
Co-payment will apply for treatment in Mumbai (Including Navi Mumbai & Thane). Delhi Co-payment Co-payment will apply for treatment in Mumbai & Thane). Delhi Co-payment (Including Navi Mumbai & Thane). Delhi NCR, Kolkata & Gujarat State Co-payment b. Options of 10% and 20% co-payment b. Options of 10% co-payment b. Options of 10% co-payment b	Enhanced Geographical Scope for International coverage				Not Applicable				USA & Canada in gency F	cluded for 'Emerge Iospitalization' & ''	ency Medical Evacuat Specified illness cove	ion', 'Emer- r'	Not App	olicable	Medical Evacuation', 'Emergency Hospitalization' & 'Specified illness cover'
b. Options of 10% and 20% co-payment	Co-payment	a. If you select Zor	ne 2, then 20% cc	7-payment will ap	ply for treatment	n Mumbai (includin tate		Thane), Delhi	Ö	tions of 10% and 2	0% co-payment	.0	. If you select Zone 2, then 20% co-payr (including Navi Mumbai & Thane).	ment will apply for treatment in Mumbai Delhi NCR. Kolkata & Gujarat State	Options of 10% and 20% co-payment
				b. Options o	of 10% and 20% co	-payment							b. Options of 10% ar	nd 20% co-payment	

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