

SUPER HEALTH INSURANCE



A photograph of a man and his son sitting on a blue sofa, smiling and talking. The man is wearing a pink shirt and glasses, while the son is in a blue t-shirt. In the background, there's a purple circular graphic containing a blurred image of a person. To the right, the word "PLATINUM" is written vertically in large purple letters. Below the sofa, there's a graphic overlay with text: "REINSURE", "ENHANCED", "CUMULATIVE", "OVER", "HELP", "COMPREHENSIVE", "MATERNITY", and "UP TO".

“Comprehensive
health insurance aur
unmatched **protection** dono

Super Health Insurance – Platinum

SBI General Insurance brings you an all-inclusive health insurance product to cater to all your needs. Our comprehensive plan for ultimate protection.

The SBI General Super Health Insurance, a product for all your healthcare requirements.

Who Can Buy This Policy?

- This Policy can be taken on Individual or Family floater basis as per the below family definitions:

Individual: Self, legally married spouse, son, son-in-law, daughter, daughter-in-law, father, mother, brother, brother-in-law, sister, sister-in-law, mother-in-law, father-in law, grandmother, grandfather, grandson, granddaughter, uncle, aunt, nephew, niece, or any other relationship having an insurable interest.

Family Floater: Self, legally married spouse, dependent children (natural/legally adopted), Parents and/or Parents-in-law.

- Entry age for adults is 18 years & for dependent children 91 days to 30 years.
- Super Health Insurance has no restriction on the maximum limit for the entry age for proposer and his/her family members.

What Are The Key Benefits Of The Policy?



Health Multiplier Benefit



RelInsure Benefit



Claims Shield



Home Health Care



Medical Treatment
Abroad

Claims Shield Protection

What Are the Different Benefit Covers?



Health Multiplier Benefit

When diagnosed with a Serious Illness, no need to worry about the inflated hospital bills, Health Multiplier will multiply your Coverage up to 3 times at no additional cost.



ReInsure Benefit

Unlimited Reinstatement of Sum Insured at no extra premium for additional protection, which becomes payable from the first claim itself, for each and every claim in a policy year.



Claims Shield

Covers the payment of consumables like gloves, masks, cotton, bandages and so on to minimise your out of pocket expenses.



Comprehensive Hospitalisation Coverage

What Does The Policy Cover?

HOSPITALISATION COVERS

- ▶ Covers Medically Necessary Treatment of an Insured Person due to Illness or Injury sustained or contracted during the Policy Period subject to availability of Sum Insured.

Inpatient Hospitalisation

- ▶ Room rent and boarding expenses.
- ▶ Intensive Care Unit Expenses/Intensive Cardiac Care Unit (ICCU) expenses.
- ▶ Nursing Expenses as provided by the Hospital.
- ▶ Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialist Fees.
- ▶ Anaesthesia, blood, oxygen, operation theatre charges, surgical appliances.
- ▶ Consultation fees including Telemedicine by Medical Practitioner.
- ▶ Medicines, drugs, and consumables.
- ▶ Diagnostic procedures.
- ▶ The Cost of prosthetic and other devices or equipment if implanted internally during a Surgical Procedure.

Shared Accommodation Cash Benefit

- ▶ Daily cash amount of ₹500 per day (maximum up to ₹8000) if Hospitalised in shared accommodation in a Network Provider Hospital and the hospitalisation exceeds 48 hours.

Health Multiplier For Serious Illnesses



Health Multiplier for 37 Serious Illnesses

- ▶ If you are diagnosed and hospitalised for the listed 37 serious illnesses, then the Base Sum Insured will be multiplied up to 3 times.



Pre-hospitalisation Medical Expenses

- ▶ Pre-Hospitalisation Medical Expenses for a duration of 60 days immediately prior to the date of Hospitalisation.



Post-hospitalisation Medical Expenses

- ▶ Post-Hospitalisation Medical Expenses for a duration of 90 days from the date of discharge.



Day Care Treatment

- ▶ Medical Expenses incurred under any Day Care Treatment during the Policy Period following an Illness or Injury, up to the Base Sum Insured.



Domiciliary Hospitalisation

- ▶ Medical Expenses incurred for Domiciliary Hospitalisation during the Policy Period following an Illness or Injury, actuals up to Base Sum Insured.



Home Health Care

- ▶ Medical Expenses incurred on availing treatment at Home during the Policy Year for actuals, up to the Base Sum Insured, if prescribed in writing by the treating Medical Practitioner.

ReInsure Cover



Emergency Road Ambulance Cover

- ▶ Cover for expenses incurred up to the limit of ₹5000 per hospitalisation, on Road Ambulance Services.



Air Ambulance Cover (Domestic)

- ▶ Expenses incurred, up to ₹2 lacs, during the Policy Year, towards Ambulance transportation in an airplane or helicopter for Emergency Care.



Organ Donor Expenses

- ▶ Medical Expenses up to Base Sum Insured, towards organ donor's Hospitalisation for harvesting of the donated organ where an Insured Person is the recipient.



ReInsure Benefit (Related and Unrelated Illness Both)

- ▶ Refill of 100% of Sum Insured, unlimited times in a policy year. This benefit is triggered and becomes payable for each and every claim from the first claim itself in a policy year.



Bariatric Surgery Cover

- ▶ Coverage for medical expenses, in case of hospitalisation on the advice of a Medical Practitioner, because of conditions which require Bariatric Surgery.

Modern Treatment Cover



Recovery Benefit

- ▶ In case of hospitalisation exceeding 5 consecutive days, this cover will pay a lump sum amount, maximum of ₹5000 as per the plan opted. This benefit is over and above the Base Sum Insured.



Modern Treatments/Advanced Procedures

- ▶ Medical expenses incurred by the Insured Person for Procedures/Treatments enlisted in the policy schedule either as Inpatient Care treatment or as a part of Day Care treatment.



Enhanced Cumulative Bonus

- ▶ Enhanced Cumulative Bonus (ECB) will be applied by 50% of the Base Sum Insured of immediate preceding Policy Year in respect of each claim free Policy Year.



Claims Shield

- ▶ Expenses related to Listed Non payable items related to Hospitalisation/In-patient claims become payable under this benefit.



AYUSH Treatment

- ▶ Medical Expenses incurred by the Insured Person for Inpatient Care under Ayurveda, Unani, Siddha and Homeopathy systems of medicines during each Policy Year.



E-Opinion

- ▶ The Insured Person may choose E-Opinion and we will facilitate E-Opinion from Our panel of Medical Practitioners under this cover.

Annual Health Check-up



Maternity and Related Expenses Cover (including Pre and Post Natal Check-ups)

- ▶ Medical Expenses incurred up to ₹50,000 for Normal & ₹75,000 for C-Sec, including Pre-natal & Post-natal check-up and medical expenses.



New Born Baby Cover

- ▶ Medical Expenses incurred in respect of a New Born Baby whose claim under Maternity Expenses is admissible. Vaccination cost of up to ₹5000 per year is also covered, up to 12 years of age.



Annual Health Check-up

- ▶ The Insured Person may avail a health check-up, only for preventive purposes, up to ₹5000 (Since Inception) as specified in Policy Schedule.



Medical Treatment Abroad

- ▶ Medical Expenses incurred towards the Insured Person's Inpatient Care outside India during the Policy Period caused solely and directly due to any of the Illnesses or procedures listed in the Policy Schedule.



OPD Cover (Including Diagnostics and Pharmacy Expenses)

- ▶ Medical Expenses incurred up to the per member amount specified for OPD costs.
- ▶ Single Adult – ₹5,000
All other family combinations - Up to ₹10,000/Family.



Out Patient and Prescribed Diagnostic test for Cancer Diagnosed Patients

- ▶ Medical Expenses incurred up to ₹10,000/ policy for the Out Patient and Prescribed Diagnostic test.

Optional Benefits

Optional covers can be opted by the customer as required.



Enhanced ReInsure Benefit

- Refills up to 200% of the Base Sum Insured instead of up to 100% (on complete or partial utilization of your existing Policy Sum Insured, including Enhanced Cumulative Bonus).



Enhanced Cumulative Bonus Safeguard (if claim amount is ₹1 Lac or less)

- Protects the percentage of Enhanced Cumulative Bonus as specified in the Policy Schedule at subsequent renewal.



Wellness Benefit

- The Insured Person may avail wellness services as mentioned in the Policy Schedule. The services may include any or all as specified in the Policy Schedule:
 - Health Assistance (A.I. Personal Fitness coaching)
 - Dietician and Nutrition E-consultation
 - Unlimited Gym Membership



Walk Healthy Benefit

- We will offer a discount on Renewal premium if the eligible Insured Person(s) achieves the health points target on the mobile application provided by us.

Optional Benefits



Aggregate Deductible

- ▶ The Insured Person shall bear on his/her own account an amount equal to the opted deductible specified in the Policy Schedule for all admissible claims made by the Insured Person and assessed by the Company in a Policy Year.



Additional Basic Sum Insured for Accident

- ▶ Provides an additional double of Base Sum Insured towards Medical Expenses incurred for In-Patient Hospitalisation Treatment. This cover is applicable only for an Emergency caused solely and directly due to an Accident-causing Injury, of the Insured Person who is Hospitalised for the treatment of such Injury.



Co-payment

- ▶ 10% or 20% Co-Payment as specified in the Policy Schedule, shall be applied on each and every admissible claim after Deductible.



Lifelong Renewability With Multiple Sum Insured Options

How Can You Cover Yourself?



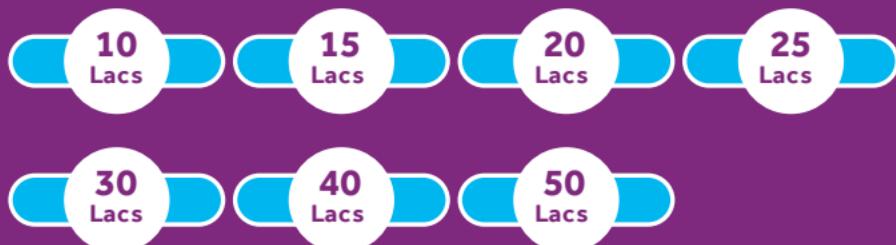
INDIVIDUAL



FAMILY FLOATER BASIS

In a family floater Policy, a maximum of 4 adults and any number of children can be covered.

What Are Sum Insured Options Available?



What Is The Waiting Period?

- 30 days initial waiting period for all illnesses In the first year that is not applicable in subsequent renewals (except for accidental Hospitalization).
- 90 days for Hypertension, Diabetes, Cardiac Condition.
- 12 months for specific illnesses and treatments as mentioned in the Policy Schedule.
- 24 months for Pre-existing Diseases.
- 36 months for Overseas Medical Treatment.
- Maternity Expenses - Single Adult - 48 months and all other family combinations - 24 months.

Product Benefit Table

Benefits - Platinum		
Entry Age (Adult)		Min - 18 years Max - No capping
Entry Age (Child)		91 days to 30 years
Sum Insured (SI)		₹10 Lacs, ₹15 Lacs, ₹20 Lacs, ₹25 Lacs, ₹30 Lacs, ₹40 Lacs, ₹50 Lacs
Base Covers		
 Eligibility	Family Combination	
 In-patient Hospitalization	Inpatient Hospitalization on Treatment	Room Rent Actuals up to Sum Insured
		ICU Charges Actuals up to Sum Insured
		Shared accommodation Cash Benefit 500 per day, maximum ₹8000
		Health Multiplier For SI: ₹10 Lacs – 2X of SI
		Pre-hospitalization Medical Expenses (up to Sum Insured) 60 Days
		Post-hospitalization Medical Expenses (up to Sum Insured) 90 Days
		Day Care Treatment (up to Sum Insured) All day care covered
		Domiciliary Hospitalization Actuals up to Sum Insured
		Home Health Care Actuals up to Sum Insured
		Emergency Road Ambulance Cover (per hospitalization) ₹5000
		Air Ambulance Cover (Domestic) Up to ₹2 Lacs
		Organ Donor Expenses Actuals up to Sum Insured
		Reinsure Benefit (Related and Unrelated illness both) Unlimited up to 100%
		Bariatric Surgery Cover Up to ₹2 Lacs
		Modern Treatments/Advanced Procedures Actuals up to Sum Insured
 Value Added Services	AYUSH (In-patient hospitalization)	Actuals up to Sum Insured
		Recovery Benefit ₹5000
		Claims Shield Non-payable Items (paid up to Sum Insured)
		E-Opinion 4 - Per Member
		Annual Health Check-up Up to ₹5000 (since inception)
 Maternity	Maternity Expenses New Born Baby Cover Child Vaccination (Up to 12 years of age)	Up to ₹50,000 (N) ₹75,000(C-sec) Up to Maternity SI ₹5000 per annum
 Renewal Benefits	Enhanced Cumulative Bonus (reduction is same proportion in case claim is settled)	50% of Base Sum Insured up to 200%
 Global Cover	Medical Treatment abroad (Listed illness, Diagnosis in India)	Actuals up to Sum Insured

Benefits - Platinum

 Out Patient Cover	Out-Patient (OPD) Cover	Single Adult – ₹5,000 All other family combinations - Up to ₹10,000/Family
	Out-Patient and Prescribed Diagnostic test (Cancer Diagnosed Patients)	₹10000/Policy
Optional Covers		
 Base Cover Modifiers	Enhanced Reinsure Benefit	Unlimited up to 200%
	Enhanced Cumulative Bonus Safeguard (if claim amount is ₹1Lac or less, No reduction in Enhanced Cumulative Bonus)	Covered
	Co-payment	10%/20%
	Aggregate Deductible	₹3 Lacs / ₹5 Lacs
	Domestic help/staff Indemnity [Room Rent - 2%, ICU - 4%, Bariatric - ₹50,000, (Day Care Treatment, AYUSH, Modern Treatment-up to Sum Insured), Emergency Road Ambulance - ₹3000/Hospitalization] [Min - 18 years/Max - 65 years]	Up to ₹50,000/ ₹1 Lac
	Additional Basic Sum Insured (for Accident related hospitalization)	2x
 Wellness	Health Assistance (A.I. Personal Fitness coaching)	Covered
	Dietician and Nutrition E-consultation	Covered
	Walk Healthy Benefit (Collect health benefits by taking steps counted on our App and get discount up to 30% on renewal premium)	Covered
	Unlimited Gym Membership	Covered (6+6 option)
Waiting Period		
 Waiting Period	Pre-Existing Waiting Period	2 years
	Specific Disease waiting period	1 year
	Initial Waiting Period (Excluding Accidental Hospitalization)	30 days
	Maternity Expenses	Single Adult – 48 Month All other Family Combination - 24 Months
	Medical Treatment Abroad	36 Months
	Hypertension, Diabetes, Cardiac Condition	90 Days

Other Terms & Conditions

- ◆ Free Look Period - The insured person shall be allowed free look period of 30 days from date of receipt of the policy document to review the terms and conditions of the policy, and to return the same if not acceptable.
- ◆ Migration of Policy - The Insured will have the option to migrate the Policy to other health insurance products/plans offered by the company by applying for migration of the policy at least 30 days before the policy renewal date.
- ◆ Portability - The Insured will have the option to port the policy to other insurers by applying at least 45 days before, but not earlier than 60 days from the policy renewal date.
- ◆ Standard Exclusions:
 - Investigation and evaluation purposes
 - Obesity/Weight control
 - Cosmetic surgery
 - Hazardous/Adventure Sports
 - Breach of Law
 - Alcoholism, drug or substance abuse
 - Unproven treatments
 - Sterility and infertility

Seamless Claim Process

What Is The Claim Procedure?

Our dedicated and experienced claims team aim to deliver you superlative customer service with a fast, fair, convenient and transparent claims process so your claim is settled without any hassle.

Our Claims Team Will:



Provide assistance in emergency situations



Keep you informed of the progress of your claim

How Do You Make A Claim?

📞 1800 210 3366 / 1800 210 6366

✉️ sbig.health@sbigeneral.in

⌚ "HEALTHCLAIM" to 561612

🌐 www.sbigeneral.in

Prohibition of Rebates

Section 41 in The Insurance Act, 1938 as amended by Insurance Law (Amendment) Act, 2015:

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out 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 the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.



SBI General Insurance Company Limited
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Andheri(East), Mumbai 400099

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Contact Us

⌚1800 102 1111 | 🌐 www.sbigeneral.in