

A Health Insurance Plan with a host of smart features to give you everything you need in a health cover. It is truly the smarter way to manage your entire family’s health.

Why Health Companion is the right choice for your family

1. Comprehensive protection

- Covers starting from ₹ 3 Lacs to ₹ 1 Crore
- Upto 19 relationships covered in one policy
- All day-care treatments covered
- No room rent capping (except for suite or above room category) in hospitals
- Pre & post hospitalisation as well as domiciliary hospitalisation covered

2. Cashless facility

We process cashless claims within 30 minutes\* across more than 3500 quality hospitals in our network.

3. Hospitalisation expenses

We take care of your medical expenses without any capping on room rent (except for suite and above

room category). Pre and post hospitalisation expenses are covered up to the sum insured, 30 days prior and 60 days post hospitalisation.

4. Refill your existing sum insured

In case you exhaust your Base Sum Insured and No Claim Bonus partially or completely, we will refill the entire insured amount for a subsequent claim in the same policy year, provided it is for an unrelated illness/injury. This benefit is not available under family first.

5. Loyalty benefits

When you renew your policy, you will be entitled to more privileges year on year:

- No Claim Bonus: We will increase your sum insured by 20% of the Base Sum Insured, for each claim-free year. subject to a maximum of 100% of Base Sum Insured. However, if you claim, the accumulated bonus and the base sum does not get reduced.
- Health Check Up: This benefit is available from the second policy year.

6. Alternative treatments

Our policy gives you the added benefit of in-patient treatment under AYUSH, which allows you to opt for Ayurveda, Unani, Siddha and Homeopathy treatments.

7. Discount on two year plan

When you take a policy for two years, you will get a welcome discount of 12.5% on the second year’s premium amount.

WE BELIEVE THAT HEALTH INSURANCE SHOULD GIVE YOU PEACE OF MIND IRRESPECTIVE OF YOUR AGE, PLAN OR ANY OTHER FACTOR. HERE ARE THE KEY REASONS WHY MAX BUPA IS THE RIGHT CHOICE FOR YOU & YOUR FAMILY.

- We process your claim directly and not via third party
- We cover medical expenses for all day-care procedures
- We have no age restriction and can cover your family members from 91 days onwards
- You can be eligible for Tax Saving under Section 80D of the Income Tax Act\*
- We assure you renewability for life without any extra loadings based on your claim
- Medical expenses for an organ donor’s treatment for harvesting of the organ are also covered
- We take care of your medical expenses up to 30 days prior to hospitalisation and even 60 days after discharge from the hospital. This is subject to acceptance of in-patient claims by the company
- We cover costs incurred towards emergency ambulance also

Benefit Table - Health Companion (All limits in ₹ unless defined as percentage)														
Plan Type	Individual / Family Floater (Variant 1)			Individual / Family Floater (Variant 2)				Individual / Family Floater (Variant 3)					Family First	
Base Sum Insured (SI) - in ₹	2 lacs <sup>(5)</sup>	3 lacs	4 lacs	5 lacs	7.5 lacs	10 lacs	12.5 lacs	15 lacs	20 lacs	30 lacs	50 lacs	100 lacs	Base Sum Insured: 1 Lacs, 2 Lacs, 3 Lacs, 4 Lacs, 5 Lacs & 10 Lacs per Insured Person Floater Base Sum Insured - (available on a floating basis over Base Sum Insured): 3 Lacs, 4 Lacs, 5 Lacs, 10 Lacs, 15 Lacs & 20 Lacs	
Benefits														
	Covered up to Sum Insured			Covered up to Sum Insured				Covered up to Sum Insured					Covered up to Sum Insured	
Inpatient Care														
Room rent	Covered up to Sum Insured (except for Suite or above room category)			Covered up to Sum Insured (except for Suite or above room category)				Covered up to Sum Insured (except for Suite or above room category)					Covered up to Sum Insured (except for Suite or above room category)	
Pre-Hospitalisation Medical Expenses (30 days)	Covered up to Sum Insured			Covered up to Sum Insured				Covered up to Sum Insured					Covered up to Sum Insured	
Post-Hospitalisation Medical Expenses (60 days)	Covered up to Sum Insured			Covered up to Sum Insured				Covered up to Sum Insured					Covered up to Sum Insured	
Day Care Treatment	Covered up to Sum Insured			Covered up to Sum Insured				Covered up to Sum Insured					Covered up to Sum Insured	
Living Organ Donor Transplant	Covered up to Sum Insured			Covered up to Sum Insured				Covered up to Sum Insured					Covered up to Sum Insured	
Emergency Ambulance	Up to ₹ 3,000			Up to ₹ 3,000				Up to ₹ 3,000					Up to ₹ 3,000	
No Claim Bonus	In case of no claim, increase of 20% of expiring Base Sum Insured in a Policy Year; maximum up to 100% of Base Sum Insured			In case of no claim, increase of 20% of expiring Base Sum Insured in a Policy Year; maximum up to 100% of Base Sum Insured				In case of no claim, increase of 20% of expiring Base Sum Insured in a Policy Year; maximum up to 100% of Base Sum Insured					In case of no claim, increase of 20% of expiring Base Sum Insured in a Policy Year; maximum up to 100% of Base Sum Insured	
Refill Benefit <sup>(1)</sup>	Up to Base Sum Insured			Up to Base Sum Insured				Up to Base Sum Insured					Not available	
Vaccination for Animal Bite <sup>(2)</sup>	Upto ₹ 2,500			Upto ₹ 5,000				Upto ₹ 7,500					Upto ₹ 5,000	
Alternative Treatments	Covered up to Sum Insured			Covered up to Sum Insured				Covered up to Sum Insured					Covered up to Sum Insured	
Health Check-up	Once in 2 years, as per Annexure			Annual, as per Annexure				Annual, as per Annexure					Annual, as per Annexure	
Domiciliary Hospitalisation	Covered up to Sum Insured			Covered up to Sum Insured				Covered up to Sum Insured					Covered up to Sum Insured	
Optional benefits														
Hospital Cash <sup>(3)</sup>	₹ 1,000/day			₹ 2,000/day				₹ 4,000/day					₹ 1,000/day or ₹ 2,000/day	
Claim cost sharing options														
Annual aggregate Deductible	Deductible of ₹ 1,2,3,4,5 and 10 lacs			Deductible of ₹ 1,2,3,4,5 and 10 lacs				Deductible of ₹ 1,2,3,4,5 and 10 lacs					Deductible of ₹ 1,2,3,4,5 and 10 lacs	
Treatment only in Tiered Network <sup>(4)</sup>	Available only to renewal customers (for life) who opted this cost sharing option in the expiring Policy			Available only to renewal customers (for life) who opted this cost sharing option in the expiring Policy				Available only to renewal customers (for life) who opted this cost sharing option in the expiring Policy					Available only to renewal customers (for life) who opted this cost sharing option in the expiring Policy	

Policy Tenure - 1 year or 2 year. For 2 year policy 12.5% discount applicable on second year premium .

There is a 48-month waiting period for Variant 1 and 36-month waiting period for Variant 2, Variant 3 and Family First for pre-existing conditions - 2-year waiting period for specific diseases/conditions - a 30-day Initial waiting period from inception.

**Notes:** <sup>(1)</sup>Re-Fill benefit - Reinstate upto Base Sum Insured. Applicable for different illness

<sup>(2)</sup>Vaccination for Animal Bite (Post Bite Treatment) - OPD Benefit upto defined limit as part of overall limit

<sup>(3)</sup>Hospital Cash - Minimum 48 hrs of continuous hospitalisation required. Maximum coverage offered for 30 days/policy year/insured person. Payment made from day one subject to hospitalisation claim being admissible.

<sup>(4)</sup>Tiered Network - By selecting this cost sharing option, customers can avail cashless treatment in Our Network Providers in locations except Delhi (NCR), Mumbai including Suburbs, Chennai, Bengaluru, Hyderabad, Kolkata, Pune, Ahmedabad, Surat. Customers can also avail treatment (reimbursement basis) in Delhi (NCR), Mumbai including Suburbs, Chennai, Bengaluru, Hyderabad, Kolkata, Pune, Ahmedabad, Surat hospitals with 20% co-payment. Customer opting for this option will get a 10% discount.

<sup>(5)</sup>Sum Insured of ₹ 2 Lacs will be available for life to renewal customers who opted this Sum Insured in the expiring Policy.

**Note** - Policy offers both individual and family floater cover options with defined relationships allowed of husband, wife and children. (Upto 4 children are allowed)

**Family First - Policy covers 19 relationships:**

1. Legally married spouse as long as he or she continues to be married to You 2. Son 3. Daughter-in-law 4. Daughter 5. Father 6. Mother 7. Father-in-law as long as Your spouse continues to be married to You 8. Mother-in-law as long as Your spouse continues to be married to You 9. Grandfather 10. Grandmother 11. Grandson 12. Granddaughter 13. Son-in-law 14. Brother 15. Sister 16. Sister-in-law 17. Brother-in-law 18. Nephew 19. Niece

**Annexure - Health Check-up**

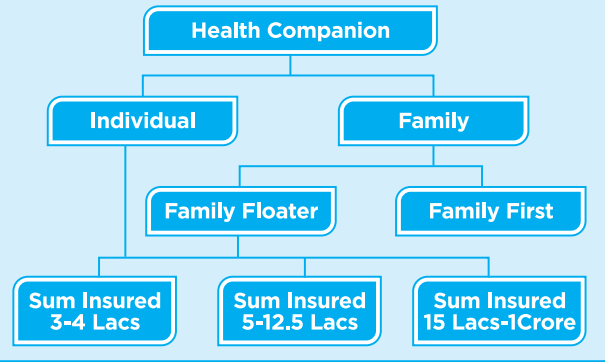
Complete Blood Count, Urine Routine, ESR, HBA1C, S Cholesterol, Sr. HDL, Sr LDL, Urea, Kidney Function Test

Choose your plan

Health Companion has been structured in a way so that you can choose your plan according to your family's needs. The first criteria to choose from is between an Individual and Family cover plan. The Family cover is further available in two options:

Family Floater & Family First.

Under the Individual and Family Floater plans you can choose between three variants (please refer to graph) of cover, based on the sum insured. Here is a tree-plan for a better understanding.



Family Floater plan

This plan is suitable for a nuclear family, but the premium for this plan depends on the age of the eldest insured member. It is available in the following combinations:

- 1 Adult + 1 Child
- 1 Adult + 2 Children
- 1 Adult + 3 Children
- 1 Adult + 4 Children
- 2 Adults
- 2 Adults + 1 Child
- 2 Adults + 2 Children
- 2 Adults + 3 Children
- 2 Adults + 4 Children