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A comprehensive solution to all your healthcare needs.

Paradise is where you live your life in perfect peace and harmony. However, in today's world, your days are often mired with stress, pollution and other lifestyle hazards, the worst victim of which is your health. You may have a number of health requirements, right from regular health issues to serious ailments, leading to hospitalisation and expensive medical treatments. Although none of these are welcome, it is always good to take a health policy and be prepared for such unforeseen events. And won't it be convenient to take just one policy against all such requirements? With Health Total, we give you a comprehensive cover, a near-perfect answer to all your medical needs.

Benefits



Hospitalisation Medical Expenses



Day Care Treatment Expenses



Pre-Hospitalisation Medical Expenses



Post-Hospitalisation Medical Expenses



Restoration of Sum Insured



Maternity Expenses



Organ Donor Expenses



Patient Care



Accident Hospitalisation (Increase in Sum Insured)



Accompanying Person



Road Ambulance Charges



Emergency Medical Evacuation (Applicable for Superior and Premiere plan)



Domiciliary Hospitalisation Expenses



Out-Patient Medical Expenses (Applicable for Superior Plan and Premiere Plan only)



Child Vaccination Benefits (Applicable for Premiere Plan)



New Born Baby (Applicable for Superior and Premiere Plan)



E-opinion in respect of an illness or injury



Alternative Treatment Cover



Medical Treatment Abroad (Applicable for Premiere Plan)



Wellness Care



Cumulative Bonus

In-house cashless settlement! Innovative Covers offered! Quick settlement of claims!

Age eligibility - Cradle to Grave Cover
All plans are available with Individual and Floater option

Family Definition

a. Self b. Spouse

c. Dependent children (unmarried and up to the age of 25 years)

d. Dependent parents

	a. Self	b. Spouse	c. Dependent children (unmarried and up to the age of 25 years)
Superior Plan and Premiere Plan	d. Non-dependent children	e. Dependent parents	f. Non-dependent parents
Tremiere Tian	g. Dependent siblings	h. Daughter-in-law	i. Son-in-law
	j. Parents-in-law	k. Grandparents	I. Grandchildren

Minimum Policy Term	1 Year
Maximum Policy Term	3 Years
Minimum Age at Entry	Day 1
Maximum Age at Entry	Life long
Renewal	Life long

Life Long Renewals

The policy, if renewed continuously without any break, will be renewed life long.

In case an insured enters the policy at the age given in the table, the respective

40%

co-payments will be applicable on each and every admissible claim.

Sum Insured

Ranging from ₹3 lakh to ₹1 crore.

75 years and above

Co-payment Applicability

50-payment Applicabilit

Age	Co-payment
60 years to 64 years	20%
65 years to 69 years	25%
70 years to 74 years	30%

Pre-acceptance Medical Tests

Pre-acceptance medical tests are not required for all proposers up to the age of 50 years for **Vital Plan**, in case of clean proposal form (i.e. without any health declaration). For age 51 years and above, medical tests are mandatory.

Compulsory medical tests are required for **Superior and Premiere Plans** for those who completed 18 years of age and above.

Vital Plan		Superior	Plan	Premiere Plan		
Up to 50 years	Above 50 years	From 18 years to 50 years	Above 50 years	From 18 years to 50 years	Above 50 years	
Not required	Required	Required	Required	Required	Required	

^{*}No tests required for children below 18 years for any plan.

- Insured is eligible for 100% reimbursement of pre-acceptance medical tests charges, subject to policy issuance and 64 VB compliance.
- Pre-acceptance medical tests need to be done at empanelled diagnostic centres only.
- The tests would be considered valid for a period of one month from the date the tests have been conducted.
- Underwriting loading on the standard premium rates will be applicable based on health status of the proposed insured person. It will take into consideration the adverse health conditions declared on the proposal form and findings of medical tests conducted.
- The loading of premium will be applicable on the particular insured's premium only.
- This would be applicable for both Individual and Floater options.

		Schedule Of Benefits											
			Vital Plan			Superior Plan		Premiere I	Plan				
	Sum Insured (in ₹)	3 lakh	5 lakh	10 lakh	15 lakh	20 lakh	25 lakh	50 lakh	1 crore				
	Minimum age at entry	1 day	1 day	1 day	1 day	1 day	1 day	1 day	1 day				
	Maximum age at entry	None	None	None	None	None	None	None	None				
Eligibility	Maximum renewal age	Life Long	Life Long	Life Long	Life Long	Life Long	Life Long	Life Long	Life Long				
	Individual SI / family floater SI options	Both	Both	Both	Both	Both	Both	Both	Both				
	Family definition	S+Sp+2C+2P (1+5)	S+Sp+2C+2P (1+5)	S+Sp+2C+2P (1+5)	Extended family up to 15 members	Extended family up to 15 members	Extended family up to 15 members	Extended family up to 15 members	Extended family up to 15 members				
	Hospitalisation	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI				
	Day care treatment	J	J	J	J	1	J	1	J				
	Pre-hospitalisation	60 days	60 days	60 days	60 days	60 days	60 days	60 days	60 days				
	Post-hospitalisation	90 days	90 days	90 days	120 days	120 days	120 days	180 days	180 days				
	Restoration of SI	J	J	J	J	1	J	J	J				
Hospitalisation Benefits	Cumulative bonus - 50% for every claim-free year to max 100%	1	1	1	1	1	1	1	J				
	Maternity benefit - normal delivery (in ₹)	15,000	20,000	25,000	30,000	40,000	40,000	50,000	50,000				
	Maternity benefit - LSCS (caesarian) (in ₹)	25,000	35,000	45,000	50,000	60,000	60,000	1,00,000	1,00,000				

^{**}Age in completed years

			Vital Plan		Superior Plan			Premiere Plan	
	Pre-natal hospitalisation (within maternity limits)	×	×	×	90 days	90 days	90 days	90 days	90 days
	Post-natal hospitalisation (within maternity limits)	×	×	×	45 days	45 days	45 days	45 days	45 days
	Organ donor expenses	1	1	1	1	J	1	1	J
	New born baby benefits: Automatic cover within mother's / floater Sum Insured up to expiry date of policy	×	×	×	1	1	1	1	√
	New born baby benefits: Reasonable vaccination benefits up to 1 year of age (in ₹)	×	×	×	Max 3,500	Max 3,500	Max 3,500	Max 5,000	Max 5,00
Hospitalisation Benefits	Patient care (above 60 years) - per day benefit up to max (in ₹)	350/day	350/day	350/day	500/day	500/day	500/day	1,000/day	1,000/da
	Patient care (above 60 year) - maximum	10 days per Hospitalisation and 30 days per policy year							
	Accidental hospitalisation - 25% increase subject to maximum of ₹10 lakh	1	1	1	1	1	1	1	J
	Accompanying person (up to 12 years) ₹500 /day to maximum of 30 days	1	1	1	1	1	1	1	1
	Domiciliary hospitalisation expenses - maximum up to 10% of SI	1	1	1	1	1	1	1	1
	Alternative treatments Ayurveda / Unani / Sidha / Homeopathy - reimbursement	1	1	1	1	1	1	1	1
Medical Treatment	Medical treatment abroad							1	1
Abroad	Medical treatment abroad - waiting period	×	×	×	×	×	×	4 years	4 years
	Road ambulance charges - network hospitals (in ₹)	1,500	1,500	1,500	Actuals	Actuals	Actuals	Actuals	Actuals
Road Ambulance	Road ambulance charges - non network hospitals (reimbursement up to a maximum) (in ₹)	1,500	1,500	1,500	2,000	2,000	2,000	5,000	5,000

			Vital Plan			Superior Plan			Premiere Plan		
Emergency Medical Evacuation	Emergency medical evacuation - 5% of SI (reimbursement up to a maximum)	×	×	×	J	1	1	J	١		
E-Opinion	E-Opinion for illness / injury (maximum 2 per policy year)	1	١	1	J	1	1	1	1		
**Out-patient Medical Expenses	Out-patient consultations and diagnostics (reimbursement up to a maximum (in ₹)	×	×	×	3,000 for Individual option/ 10,000 for floater option	3,000 for Individual option/ 10,000 for floater option	3,000 for Individual option/ 10,000 for floater option	10,000 for Individual option /20,000 for floater	10,000 for Individual option /20,000		
	Prescribed medicines (reimbursement up to a maximum)	×	×	×	×	×	×	option	for floater option		
Child Vaccination Benefits	Child vaccination benefits (reimbursement up to a maximum)	×	×	×	×	×	×	Up to 12 years of age (₹5,000 per annum)	Up to 12 years of age (₹5,000 per annum)		
Wellness Benefits	Wellness including medical tests at designated centres	1	1	1	J	1	1	1	١		
One Time Discount	One time renewal discount-subsequent to death of proposer	10%	10%	10%	10%	10%	10%	10%	10%		
Family Discount	Family Discount 10% (Individual SI Policies)	1	1	J	J	J	J	1	1		
Voluntary Deductible	Discount in lieu of voluntary deductible	1	1	1	J	1	1	1	1		
	Pre-existing disease										
	Compulsory waiting period	2 years	2 years	2 years	2 years	2 years	2 years	2 years	2 years		
	Pre-existing disease - max liability 3rd year onwards	50%	50%	50%	50%	50%	50%	50%	50%		
	Pre-existing disease - 4th Year onwards	100%	100%	100%	100%	100%	100%	100%	100%		
Waiting Periods	General waiting periods:										
000	30-day - fresh proposals excluding accidental hospitalisation	1	1	1	J	1	J	1	1		
	2-year waiting period for listed conditions	1	1	1	J	1	1	1	1		
	4-year waiting period - joint replacement and organ transplant	1	1	1	J	1	1	1	1		

		Vital Plan			Superior Plan			Premiere Plan	
Compulsory Co-pay	20% co-payment where entry age is from 60 year to 64 years	1	1	1	1	1	1	1	1
	25% co-payment where entry age is from 65 year to 69 years	1	1	1	1	1	1	1	1
	30% co-payment where entry age is from 70 year to 74 years	1	1	1	1	1	1	1	1
	40% co-payment where entry age is 75 years and above	1	1	1	J	1	1	1	J

^{**} Out-patient medical expenses. (Applicable for Superior and Premiere Plan)

SI: Sum insured, S: Self, Sp: Spouse, C: Child, P: Parent

Exclusions



- Charges incurred at a hospital primarily for diagnostic, X-ray or laboratory
 examinations not consistent with or incidental to the diagnosis and treatment of the
 positive existence or presence of any illness or injury, for which confinement is
 required at a hospital.
- 2. Cost of an annual health check-up.
- Injury or illness directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, war like operations (whether war is declared or not). Circumcision, unless necessary for treatment of an illness not excluded hereunder or as may be necessitated due to an accident.
- 4. Vaccination/inoculation (except as post-bite treatment) except to the extent covered under Benefits 14 and 15 as mentioned in policy clause.
- 5. Cosmetic treatments (for change of life or cosmetic or aesthetic treatment of any description), plastic surgery other than as may be necessitated due to an accident or as a part of any illness, refractive error corrective procedures, experimental, investigational or unproven/experimental treatment, devices and pharmacological regimens of any description.
- 6. Charges incurred in connection with cost of spectacles and contact lenses, hearing aids, durable medical equipment (including but not limited to cost of instrument used in the treatment of Sleep Apnea Syndrome (C.P.A.P), Continuous Peritoneal Ambulatory Dialysis (C.P.A.D) and oxygen concentrator for asthmatic condition, wheel chair, crutches, artificial limbs, belts, braces, stocking, Glucometer and the like), namely that equipment used externally for the human body which can withstand repeated use; is not designed to be disposable; is used to serve a medical purpose, such cost of all appliances/devices whether for diagnosis or treatment after discharge from the hospital.
- 7. The treatment of obesity (including morbid obesity) and other weight control programmes, services and supplies.
- 8. Expenses incurred towards treatment of illness or injury arising out of alcohol use/misuse or abuse of alcohol, narcotic substance or drugs (whether prescribed or not).

In case of bills for any prescribed drugs/medicines, our liability will be restricted to 80% of admissible bills.

In case of dental consultations and diagnostics, our liability will be restricted to 70% of admissible bills.

^{*} All benefits are given within the base Sum Insured except Accidental Hospitalisation.

Other Benefits



- 1. Subject to no claim, cumulative bonus of 50% on the basic sum insured will be provided up to a maximum of 100% of the sum insured.
- 2. Family discount of 10% is available in case more than one person is covered in the same policy in case of Individual Sum Insured option has been taken.
- 3. Long-term discount will be given in case Policy Term is more than 1 year.

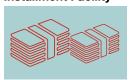
Long-term discount (applicable in case of single payment for more than one year)

Number of years	Discount
1 year	Nil
2 years	7.5%
3 years	10%

Voluntary Deductible Discount

Vital Plan		Superio	or Plan	Premiere Plan		
Deductible	Discounts	Deductible	Discounts	Deductible	Discounts	
₹ 10,000	10%	₹ 50,000	15%	₹ 1,00,000	15%	
₹ 25,000	15%	₹ 75,000	20%	₹ 2,50,000	20%	
₹ 50,000	20%	₹ 1,00,000	25%	₹ 5,00,000	25%	

Installment Facility



In case of policies which are on long-term basis, facility of installment is available. Given below are the loadings applicable on standard premiums in case of installments.

Installment frequency	Loading on standard premiums
Monthly	5%
Quarterly	4%
Half-yearly	3%

Loading on Claim Experience

There will be no loading on premium for adverse claims experience

Tax Benefit

Premium paid by any mode other than cash and demand draft is eligible for tax relief as provided under Section 80-D of the Income Tax $\rm Act.$

Premium Table – Individual Premium Rates (Premium and Sum Insured in ₹)

	Vital				Superior	Premiere		
Age / Sum Insured	3,00,000	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	1,00,00,000
0-17	4,418	5,061	6,856	8,019	10,400	12,451	37,637	48,628
18-25	4,645	6,213	8,471	10,198	11,923	13,661	39,587	50,572
26-30	4,718	6,718	8,501	10,515	12,034	14,429	40,635	52,037
31-35	4,724	6,739	8,582	10,687	12,523	16,031	45,386	58,388
36-40	4,999	6,752	8,639	10,731	13,942	16,875	48,853	63,237
41-45	5,468	7,227	9,394	12,793	16,858	20,622	56,230	74,117
46-50	8,074	10,033	13,726	17,094	22,453	27,490	69,237	85,353
51-55	11,799	14,866	20,290	25,088	30,870	36,638	85,067	97,038
56-60	15,216	18,311	25,997	31,379	37,228	41,447	99,916	1,13,356
61-65	29,734	34,638	41,816	44,878	48,235	53,934	1,27,456	1,43,324
66-70	37,151	43,613	49,846	53,201	55,518	61,221	1,51,111	1,69,331
71-75	41,096	48,884	56,204	60,241	61,674	67,657	2,13,368	2,37,783
76-80	55,102	64,911	71,342	75,324	78,468	84,246	3,01,946	3,35,176
81-85	65,661	79,968	85,763	89,886	94,353	1,02,736	3,90,351	4,32,376
>85	67,559	81,522	87,236	91,935	1,01,603	1,16,036	4,32,241	4,78,455

^{*}Premiums exclusive of Service Tax
**Age in completed years

Floater Discount

Applicable discount is as per following table:

Age Band	Discount Percentage	Age Band	Discount Percentage
0-17	60%	56-60	35%
18-25	55%	61-65	35%
26-30	50%	66-70	35%
31-35	45%	71-75	35%
36-40	45%	76-80	25%
41-45	40%	81-85	25%
46-50	40%	>85	20%
51-55	40%		

Premium applicable for the primary insured will be the standard individual premiums from the premium table. For remaining dependent members, floater discounts applicable on their respective premium is as per table above.

For example, in case of a family of self, spouse and one child, the premium for floater for Sum Insured ₹10,00,000 would be charged in the following manner:

	Self	Spouse	Child
Age band	36-40	31-35	0-17
Premium as per individual rate table (in ₹)	8639	8582	6856
Applicable premium (in ₹)	8639	4720 (45% discount applied on the respective person's premium)	2742 (60% discount applied on the respective person's premium)
Total premium to be charged (in ₹) Service tax extra	= 8639 + 4720 + 2742 =16101		

Basis of claims payment



- a) We shall make payment in Indian Rupees and in India only.
- b) In respect of surgery for cataracts (after the expiry of the two-year period referred to in Section III (1)(b) of policy clause, liability shall be restricted to 10% of the Sum Insured for each eye, and a maximum of ₹1,00,000 per eye.
- c) If a voluntary deductible has been opted and is in force under the policy, liability would be over and above the voluntary deductible amount for each and every claim made under hospitalisation.
- d) Wherever co-payments are applicable, the same would be applied on the admissible claim amount after the application of voluntary deductible, if any.

^{*} Benefits may vary from plan to plan.

^{**} For further details, please refer to the policy wordings.

If you are suffering from an illness / disease or if you meet with an accident which requires hospitalisation, please contact us on the following:

Claims Department Future Generali Health (FGH)

Future Generali India Insurance Co. Ltd., Office No. 3, 3rd Floor, "A" Building, G-O-Square

S. No. 249 & 250, Aundh Hinjewadi Link Road, Wakad, Pune - 411 057.

Toll Free Number: 1800 103 8889 Toll Free Fax: 1800 103 9998 Email: fgh@futuregenerali.in

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Future Generali India Insurance Company Limited (IRDAI Regn. No.: 132) (CIN: U66030MH2006PLC165287)

Regd. and Corp. Office: Indiabulls Finance Centre, Tower 3, 6th Floor, Senapati Bapat Marg, Elphinstone Road (W), Mumbai - 400013.

Fax: 022-4097 6900 | Email: fgcare@futuregenerali.in.

ARN.: FG-NL/PD/MKTG/EN/HLTHTO-001BRO UIN: IRDAI/HLT/FGII/P-H/V.1/02/15-16 ISO Ref. No.: FGH/UW/RET/85/01



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