Aditya Birla Health Insurance Co. Ltd.





21-22-3762830-02

P Ramya Sarathy nivas Anna nagar 4th cross main road Tiruchirappalli TAMIL NADU INDIA 620026 8248896059 10/10/2024

Dear P Ramya,

A relationship that stands the test of time only gets fruitful in the future. We're glad that you've chosen to continue your health and wellness journey with us.

By offering you the best insurance advice and the finest health guidance, we will ensure that we keep giving you more and more reasons to renew our relationship year-on-year.

Excited? So are we! Get ready to make the most out of your new insurance plan Activ Health - Platinum - Essential

We hope that you continue to stay healthy throughout your journey with us.

Warm regards,

Marke

Mayank Bathwal Chief Executive Officer

Aditya Birla Health Insurance Co. Limited.



For assistance, connect with us via the following channels:

Empowering people to lead healthier lives

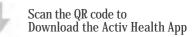
Up to 100% of your Premium as Health Returns*









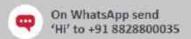


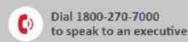


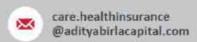


*Not Applicable for Activ Health - Gold Enhanced

^Only Applicable for Activ Health - Platinum Enhanced and Premiere



















Activ Health - Policy Schedule

Policy Issuing Office	Unit no 1101 & 1104 11th floor, Unit no 1501& 1502, 15th floor, G Corp Tech Park, Kasarwadavali, Ghodbunder Road, Thane West-400615	Policy Servicing Office	Unit no 1101 & 1104 11th floor, Unit no 1501 & 1502 ,15th floor, G Corp Tech Park Kasarvadavali Mumbai MAHARASHTRA 400001
Intermediary Name	POLICYBAZAAR INSURANCE BROKERS PRIVATE LIMITED	Intermediary Code	5100357
Intermediary Contact Details	18002585970	Intermediary E-mail ID	adityabirla@policybazaar.com
Toll Free Number	18002707000		

I. Details of Policyholder

Policyholder Name	P Ramya			
Policyholder Address	Sarathy nivas Anna nagar 4th cross main road null Tiruchirappalli, 620026, Tiruchirappalli, TAMIL NADU			
	Mobile Number: 8248896059			
Contact Number	Emergency/Alternate Contact Number: NA			
	WhatsApp No, if different from Mobile Number: 8248896059			
Email ID	raXXXXXXXXX03@gmail.com			

II. Policy Details

Product Name	Activ Health	Plan Name	Platinum - Essential				
Policy Number	21-22-3762830-02	21-22-3762830-02					
First Policy Start date with ABHI	10/10/2022	10/10/2022					
Start Date of Policy & Time	00:00 hrs on 10/10/2024	00:00 hrs on 10/10/2024 Expiry Date & Time of Policy					
Policy Type	Individual	Policy Tenure (in years)	1				
Policy Category	Renewal						
Mode of Premium payment	Single						
Portability	No	Previous Policy Number	21-22-3762830-01				
GSTN Number	NA	GSTN Account Type	NA				

III. Insured Person's Details

Name of the Insured person	Start date of Policy of Insured Person (in case of new member	Relationship with Policyholder	Member ID	Age	Gender	DOB	Pre-existing Diseases (if applicable)	Start Date of First Policy with US (applicable at policy renewal)
S sampoornam	NA	Mother	PT87324742	53	Female	01/11/1970	Thyroid disorder - E07 - 0	10/10/2022

Continued

Applicability of Chronic Management Program (Available for Platinum, Essential ,Enhanced and Premiere Plan only)					Eligible Room Category		Cumulative Bonus	
Chronic Condition	Waiting Period from Start Date of First Policy	Start date of coverage	Sum Insured	Zone Category	Room Type	ICU Charges	%	Amount
No	0	10/10/2024	500000	Zone III	Single Private A/C Room	upto SI	20	100000

(for policies Renewed with Us, the Start date of the first Policy with Us will also be displayed against each Insured Person).

Inbuilt Premiere Benefit (Applicable only to Platinum – Premiere Plan)					
Name of the Insured Person	Personal Accident Cover (AD,PTD)	Critical Illness Cover	International Coverage for major illnesses		
S sampoornam	NA	NA	NA		

Optional Covers*								
Name of the	Personal	Critical Illness	International	PPN Discount	Waiver of	Maternity	OPD	Hospital
Insured Person	Accident Cover	Cover	Coverage for major		mandatory	Expenses	Expenses	Cash Benefit
	(AD,PTD)		illnesses (available with base Sum Insured of 10L &		co-payment**			
			above only)					
S sampoornam	NA	NA	No	NA	Yes	No	No	No

^{*} Personal Accident Cover (AD,PTD), Critical Illness Cover, International Coverage for Major Illnesses, Waiver of mandatory co-payment, Maternity

Expenses, OPD Expenses, Hospital Cash Benefit as Optional covers are not applicable for Platinum Premiere Plan.

^{**} Waiver of co-payment is applicable for base benefit and not optional covers except PPN discount, if opted.

Name of the Insured Person	Special condition (if applicable)
S sampoornam	No
Name of the Insured Person	Dro eviating details (if applicable)
Name of the modern reson	Pre existing details (if applicable)

	HealthReturns ^{TM1} (Applicable for Renewal Policy)				
Name of the Insured Person	HealthReturns TM carried forward from Previous Year	Total HealthReturns TM available for utilization			
S sampoornam	NA	0			

¹Trademarks- Health Returns, Healthy Heart Score and Active Dayz are owned by MMI Group Limited and used under license by Aditya Birla Health Insurance Co. Limited.

IV. Nominee Details

Nominee Name	Nominee Relationship with Policyholder	Nominee Contact Number
S sampoornam	Mother	NA

V. Assignment clause

Assignment: This Policy has been assigned to: NA

Relationship with the Assignee: NA Reason for Assignment: NA

VI . Previous Insurer Details (Only applicable for Portability policies)

Name of Insured Person	Date of first enrollment	Previous Insurer	Previous Policy Number	Type of Cover	Total Ported Sum Insured (Sum Insured + Cumulative Bonus)	Waiting period waived off
NA	NA	NA	NA	NA	NA	NA

VII.Benefits under the Policy (shall be displayed as applicable under the Plan in force)

	Product Name	Activ Health
	Product Features /	Platinum
	Product Variants	Essential
	Sum Insured (Rs.)	50,000, 75,000, 1 Lac, 2 Lac, 3 Lac, 4 Lac, 5 Lac, 6 Lac, 7 Lac, 8 Lac, 9 Lac, 10 Lacs, 15 Lac, 20 Lac, 25 Lac, 30 Lac, 40 Lac, 50 Lac, 100 Lac
I. Basic Covers	In-patient Hospitalization	Room Options upto S.I 3 L 1. Shared Room 2. Single Private A/C Room Room Options S.I. 4L and above 1. Shared Room 2. Single Private A/C Room 3. Any Room ICU Charges Upto S.I.
	Pre-hospitalization Medical Expenses	30 days
	Post-hospitalization Medical Expenses	60 days
	Day Care Treatment	Covered up to Sum Insured
	Domiciliary Hospitalization	Covered up to Sum Insured
	Road Ambulance Cover	Covered up to Actual Expenses per event in case of Network Providers Reimbursed up to Rs.3,000 per Hospitalization for Non-Network Providers
	Organ Donor Expenses	Not Available
	Reload of Sum Insured	Not Available
	Super Reload	Not Available
	AYUSH Cover	Covered up to Sum Insured
	Mental Illness Hospitalisation	Sum Insured - Upto 4L:Rs. 50,000 Sum Insured 5L & above:Rs. 1,00,000
	Obesity Treatment	Covered up to Sum Insured
	Home Treatment	S.I. Upto 4L - Rs. 25,000 S.I. 5L and above -Rs. 50,000
	Modern Treatment Methods and Advancement in Technologies	Upto S.I. for listed procedures Co-Payment of 50% for Robotic surgeries
	Domestic Emergency Assistance Services (including Air Ambulance)	Not Available
	International Emergency Assistance Services (including Air Ambulance)	Not Available
	OPD Cover	Not Available
	Post-hospitalisation Physiotherapy cover	Not Available
	Premium Waiver	Not Available

	Co-payment for treatment in a Higher Zone	For SI 3 Lac and below Zone II to Zone I: 10% Zone III to Zone II: 15% Zone III to Zone I: 25% For S.I. 4L and above — Not Applicable		
	Mandatory Co-payment	20% for all S.I options		
II. Additional Benefits	Cumulative Bonus /No Claim Discount	Applicable on Sum Insured 10% increase, Max up to 100% (up to maximum of 50 Lacs)/ No Claim Discount -Applicable on the premium of the expiring policy year provided no claim under the policy		
	Dental Consultation & Investigations	Not Available		
	Health Check- up Program	Available, Once in a policy year		
	Second E-Opinion for Major Illnesses	Available		
	Recovery Benefit	Not Available		
III. Value Added	Chronic Management Program (OPD)	Available, As per Annexure 1		
Benefit	Health Assessment TM	Available		
	HealthReturns TM	Available, upto 50% of Premium		
	Expert Health Coach	Available - Medical, Nutritional, Mental & Fitness.		
IV. Inbuilt Premiere Benefit	International Coverage for major illnesses	Not Available		
(Applicable only to Platinum – Premiere	Personal Accident Cover (AD, PTD)	Not Available		
Plan)	Critical Illness Cover	Not Available		
V. Optional Covers	Personal Accident Cover (AD, PTD)	S.I 5L,10L,15L,20L,30L		
	Critical Illness Cover	S.I 3L,5L,10L,15L,20L Survival Period - 15 days		
	International Coverage for major illnesses	S.I 3 Cr/6 Cr, available with base S.I. of 10L & above only		
	Preferred Provider Network (PPN) Discount	10% discount available		
	Waiver of mandatory co-payment	Available for all S.I. options		
	Maternity Expenses	Available		
	i Maternity Expenses	Normal delivery — Rs. 75,000 C section delivery Rs. 1,00,000		
	ii New Born Baby Expenses	Covered upto Maternity Sum Insured		
	iii Vaccination Expenses	Covered upto Maternity Sum Insured		

	iv	Stem Cell Preservation	Rs. 35,000, over and above Maternity Sum Insured
OPD Expenses		D Expenses	OPD Limit: Rs. 5,000 to Rs. 20,000, in multiples of Rs. 1,000 General Medical Practitioner/ Specialist Medical Practitioner: 10% of OPD Limit per visit, Medicine and Diagnostic: 50% of OPD Limit Road Traffic Accident Diagnostic (over and above OPD Limit):Rs. 10,000 Cumulative Bonus applicable on Unutilized OPD Expenses*: 5% increase carry forward available for 12 months from the completion of policy year, up to No limit, No reduction on claim.*Not applicable for OPD limit for Road Traffic Accident diagnostics
Hospital Cash Benefit		spital Cash Benefit	Rs. 500 to Rs. 5,000 in multiples of Rs. 500 A deductible of 24 hours shall apply under this Benefit.

VIII.Premium Details (Rs)

Premium for Base and Related Covers	Premium for Other Optional Covers (If Opted)	Loading (if applicable)	Discounts (if applicable)	CGST (9%)	SGST/UTGST (9%)	IGST (18%)	Other taxes/Cess (1%))	Total Premium
7473.2	1494.64	0	0	NA	NA	1614.21	NA	10582.00

GST Registration No: 27AANCA4062G1ZN PAN Number :AANCA4062G Category: General Insurance SAC Code: 997133+

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Consolidated Stamp Duty paid vide E-challan GRN no. MH015093118202324E dated 05/02/2024

For and on behalf of Aditya Birla Health Insurance Co. Limited

Date: 10/10/2024

Place : Mumbai Authorized Signatory



Premium Certificate

We confirm the receipt of premium amount of INR 10582.00 as per below details paid by Ms. P Ramya for Self and/or Family and/or Parents:

Policy Number:	21-22-3762830-02	Plan Name:	Platinum - Essential
Type of Plan:	Individual	Proposer Name:	P Ramya
Policy Start Date:	00:00 hrs on 10/10/2024	Policy End Date:	23:59 hrs on 09/10/2025

Receipt Details:

Receipt Number	Receipt Amount	Instrument Number	Dated	Relationship	Payment Mode	Bank Name
RR-24-25-045388 8	10582.00	PB105473332	11-10-2024	Self	Online Payment	NA

Mode of Premium payment	Single	

Year wise breakup of premium for the purpose of claiming Income Tax deduction u/s 80D (subject provisions of Income Tax Act) is provided as under:

Financial Year	Year wise proportionate Premium amount*			
2024-25	10,582.00			

^{&#}x27;* Premium paid in cash and premium paid towards Personal Accident, Wellness Coach do not qualify for deduction u/s 80D. Further premium paid for person other than family member & parents (as defined under Income Tax Act) also don't qualify for deduction under section 80D.

Amount is rounded off to nearest rupee and is inclusive of all taxes and cesses as applicable. For exact premium, please refer to Section VIII of Policy schedule

Note:

- 1. The year wise deductions as mentioned above are as per provision of Section 80D and this would be subjected to the specified annual limits and other provisions as applicable for respective years as per applicable provisions of Income Tax Act.
- 2. Deduction under section 80D of the Act is allowed to the person who pays premium out of his/her income chargeable to tax.
- 3. Deduction under section 80D of the Act is available on realization of premium paid by Policyholder.
- 4. Tax laws are subject to change and any such change could have a retrospective effect. This letter should not be construed as tax, legal or investment opinion from us. For specific suitability, you are requested to consult your tax advisor.
- 5. This receipt must be surrendered to the company, in case of cancellation of this policy. In event of incorrect representation of this declaration the liability shall be upon the policy holder.

For and on behalf of Aditya Birla Health Insurance Co. Limited

 ${\tt Date}: 10/10/2024$

Place : Mumbai

Authorized Signatory

You can connect with us through the following modes



Call us at 16962707900 from registered phone number



write to us at care bealthinsurance and adityabirlacapital.com from registered email 10

Aditya Birla Health Insurance Co. Limited

1800-270-7000 | care, healthersuners.elf-edityelselscigniss (care) www.authyelselselselsthinsunesce.com.
Trademark/Logo Astice Betta Capital is owned by Asitya Birla Management Corporation Private Limital and Trademark/Logo
Freett-Hattary, Healthy Healt Score and Astice Day are served by Admirestant Metropolitals. Lamitad (Framerly Insent as MMI
Group Carebod). These trademark/Logos are being used by Aditye Birla Health Insurance Co. Limitad Inside Incerbed user

Registered Office:

9th Floor, Tower1, One World Centre, Jupiter Mills Compound, 841, Senapati Bapat Marg, Elphinatone Road, Mumbai 400013 CNL988000MH2015PLC283677 ISBA Revisitorion No. 153 Addition Birds Health Insurance Co. Limited.:



WITH THE WITHOUT PRINTED MINISTER

Toll Free No. 1800 270 7000

Website: adityabirlacapital.com Email: care.healthinsurance@adityabirlacapital.com

POLICY NO. 21-22-3762830-02

Name	Membership No.	DOB
S sampoornam	PT87324742	01/Nov/1970

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