HEALTH INSURANCE

Aditya Birla Health Insurance Co. Limited



PROTECTING INVESTING FINANCING ADVISING



11-19-0028620-00

Mr. Pulivarthi Sampath Kumar .
MPHASIS LIMITED
NO Y124 SHIVAJI GARDEN DLF IT PK MOUNT POONAMALLEE RD
Chennai
TAMIL NADU
India
600089
8801712637

30/11/2019

Welcome to the world of Aditya Birla Capital.

We thank you for the trust you have shown by making us your preferred choice for your protecting needs. It is our pleasure to have you as a valued customer.

Aditya Birla Capital's protecting solutions enable you to protect the things you value like the health of you and your family. Your decision to choose Aditya Birla Health Insurance's Activ Health will not only help you protect your health, but also understand it better and inspire you to take the necessary steps to move up the health ladder.

Meeting your life's money needs

Our purpose at Aditya Birla Capital is to make money matters simpler to understand to help you live the life you imagined. Therefore, all the financial services businesses of Aditya Birla Group will now serve India as one brand – Aditya Birla Capital.

One trusted name you can rely on to understand and meet all your money needs throughout your life.

While you have availed our **Protecting** solution through Aditya Birla Health Insurance's Activ Health, Aditya Birla Capital also offers to help you in **Investing** prudently for your future to enable you to live the life you aspire **Financing** your life's immediate desires and fuelling your ambitions without having to wait and in **Advising** the right solutions for your needs throughout your life.

You now have one number you can call for any of your money needs. 1800-270-7000. Or, you may visit our website www.adityabirlacapital.com/healthinsurance.

We look forward to a long lasting relationship with you and assure you of our best services at all times.

Warm Regards,

Mayank Bathwal

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Chief Executive Officer
Aditya Birla Health Insurance Co. Ltd.

Health InsuranceAditya Birla Health Insurance Co. Limited



Activ Health Policy Schedule

Policy Issuing Office	10th Floor,R-Tech Park,Nirlon Compound,Next To HUB Mall,Off Western Express Highway,Goregaon East,Mumbai-400063	Policy Servicing Office	G B Rain Tree Place, ← No-7, MC Nichols Road,← Chetpet, ,CHENNAI,TAMIL NADU,600031
Intermediary Name	HDFC Bank - Dedicated Team - Chennai	Intermediary Code	2101324
Intermediary Contact Details	04461606161	Intermediary E-mail ID	NA
Toll Free Number	18002707000		

I. Details of Proposer	
Policyholder Name	Mr. Pulivarthi Sampath Kumar .
Policyholder Address	MPHASIS LIMITED NO Y124 SHIVAJI GARDEN DLF IT PK MOUNT POONAMALLEE RD Chennai, 600089, Kanchipuram, TAMIL NADU
Contact Number	8801712637
Email Id	SAMPATH090793@GMAIL.COM
Policyholder GSTIN	NA

II . Policy Details			
Product Name	Activ Health	Plan Name	Platinum - Enhanced
Policy Number	11-19-0028620-00		
First Policy Start date	30/11/2019		
Start Date of Policy & Time	00:00 hrs on 30/11/2019	Expiry Date & Time of Policy	23:59 hrs on 29/11/2021
Policy Type	Individual	Policy Tenure (in years)	2
Policy Category	New Business		
Portability	No	Previous Policy Number	NA

III.	Insured Person's Details								
	Name Of Insured person	Start date of Policy of Insured Person (in case of new member additions mid term)	Relationship with Policyholder	Member ID	Age	Gender	DOB	Pre-existing Diseases (if applicable)	Start date of first policy with us (applicable at policy renewal)
М	r Pulivarthi Sampath Kumar	NA	Self	498840011	26	Male	12/06/1993	NA	NA

NA	NA	NA	300000	Zone- II	Single Private Room	NA	NA
Chronic Condition	Waiting Period from Start date of first Policy	Start date of coverage	Sum Insured	Zone Category	Eligible Room Category	%	Amount
Applicability of Chronic Management Progonly)	gram (Available fo	r Platinum Plan		Eligible		Cumula	ative Bonus

		Optional Cov	rers		
Name Of Insured Person	OPD Expenses	Deductible	Maternity Expenses	Hospital Cash Benefit	Waiver of Mandatory Co-payment
	- General Medical		- Maternity Expenses:	A deductible of	
	Practitioner/		Normal delivery – Up to	24 hours shall	
	Specialist medical		Rs 75,000 - C-section	apply under this	
	Practitioner: 10% of		delivery – Up to Rs	Benefit	
	OPD Limit per visit		100,000		
	- Medicine and		- New Born Baby		
	Diagnostic: 50% of		Expenses: Covered up to		
	OPD Limit		maternity Sum Insured		
	- Road Traffic		- Vaccination expenses:		
	Accident Diagnostic		Covered up to maternity		
	(over and above OPD		Sum Insured		
	Limit): Rs. 10,000				
	Cumulative Bonus		- Coverage of Stem cell		
	applicable on Utilized		preservation -		
	OPD Expenses: 5%		Rs.35000, over and		
	increase carry forward		above maternity limit		
	available for 12				
	months from the		Waiting period: 48		
	completion of policy		months		
	year (No reduction on				
	claim)				
Mr Pulivarthi Sampath Kumar	NA	NA	NA	NA	NA

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

Name of the Insured Person	Special condition (if applicable)
Mr Pulivarthi Sampath Kumar	NA NA

NA	NA	NA	NA	
	Previous Year	OPD Expenses	utilization	
Name of the Insured Person	HealthReturns carried forward from	Bonus applicable on unutilized	Total HealthReturnsTM available for	
	HealthReturns ^{TM1} (Applicable for Renewal Policy)			

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

ŀ	RAJA P	Father	8801712637
ſ	Nominee Name	Nominee Relationship with Policyholder	Nominee Contact Number

NA	enrollment NA	NA	NA		Insured + Cumulative Bonus)	NA
Name of Insured Person	Date of first	Previous Insurer	Previous Policy	71	l	Waiting period waived off

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

		Platinum
Basic		Enhanced
Covers	In-patient Hospitalization	Covered up to Any Room (available > Sum Insured > 7 Lacs) Covered up to Single Private Room Covered up to Shared Room (for Sum Insured < 5 Lacs)
	Pre-Existing Disease	36 months
	Pre-hospitalization	60 days
	Post-hospitalization	180 days
	Day Care Treatment	Covered up to full Sum Insured
	Domiciliary	Covered up to full Sum Insured
	Road Ambulance Cover	- Covered up to Actual expenses per event in case of Network Providers - Covered up to Rs 5000 per Hospitalization for Non-Network Providers
	Organ Donor Expenses	Covered up to full Sum Insured
	Reload of Sum Insured	Available once in a Policy Year
	Mandatory Co-payment	Not Applicable
	Co-payment for treatment in a Higher Zone	Zone II to Zone I: 10% Zone III to Zone II: 15% Zone III to Zone I: 25%
	Co-payment for treatment in a Higher room category	a) Shared Room to Single Private Room - 15% b) Shared Room to Any Room - 40% c) Single Private Room to Any Room- 25%
	Benefit for Hospital Room Choice Zone I	a) Single Private Room to Shared Room - 10% b) Any room to Shared Room – 30% c) Any room to Single Private Room – 20%
	Zone II and III	a) Single Private Room to Shared Room –5% b) Any room to take treatment in Shared Room – 25% c) Any room to Single Private Room – 15%
Additional Benefits	Cumulative Bonus	Applicable on Sum Insured: 20% increase, Max up to 100% (up to maximum of 50 Lacs) No reduction on claim
	Health Check-up Program	Available once in a Policy Year to all Insured Persons who have completed 18 years of Age
	Recovery Benefit	Covered up to 1% of the Sum Insured, maximum up to Rs 10,000
	Second E-Opinion on Critical Illnesses	Available
	Worldwide Emergency Assistance Services	Available
	Chronic Management	Available
Value Added Benefits	HealthReturns TM	Available, Earned by way of - Percentage of Premium earned through Healthy Heart Score™ and Active Dayz™ - Benefit for Hospital Room Choice
	Wellness Coach	Available

Basic Premium Premium for Optional Covers (If Applicable) Counts (I	8857.80	NA	0.00	664.33	737.41	737.41	NA	NA	9668.00
	Basic Premium	Optional Covers							Total Premium

GST Registration No: 33AANCA4062G1ZU PAN Number :AANCA4062G Category: General Insurance SAC Code: 997133

The stamp duty of Rs.1 paid vide MH000079071201920M dated 02/04/2019, received from Stamp Duty Authorities vide Receipt No./GRASS DEFACE NO 0000314898201920 dated 16/04/2019, payment has been made vide Letter of Authorisation No. CSD/12/2019/1897/19 dated 23/04/2019 from Main Stamp Duty Office.

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

Vanij Prijara

Authorized Signatory

Date: 30/11/2019

Place : Mumbai

Health Insurance





Premium Certificate

We confirm the receipt of premium amount of INR 9668 as per below details paid by Mr Pulivarthi Sampath Kumar . for Self and/or Family and/or Parents:

Policy Number: 11-19-0028620-00 Plan Name: Platinum - Enhanced

Type of Plan: Individual Proposer Name: Mr. Pulivarthi Sampath Kumar .

Policy Start Date: 00:00 hrs on 30/11/2019 Policy End Date: 23:59 hrs on 29/11/2021

Receipt Details:

Receipt	: Number	Receipt Amount	Instrument Number	Dated	Relationship	Payment Mode	Bank Name
R7073	32849	9668.00	ABHI_CC_3011201	30/11/2019	Self	Debit/ Credit	NA

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*
2019-20	4,834.00
2020-21	4,834.00

^{**} 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 VII of Policy schedule

- 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

Date: 30/11/2019

Place: Mumbai

Vany Pryara

Authorized Signatory

Aditya Birla Health Insurance Co. Limited



Toll Free No.: **1800 270 7000**

Website: adityabirlacapital.com Email: care.healthinsurance@adityabirlacapital.com POLICY NO. **11-19-0028620-00**

Name	Membership No.	DOB	Blood Group
Mr. Pulivarthi Sampath Kumar	498840011	12/Jun/1993	

Aditya Birla Health Insurance Co. Limited. RDAI Reg.153. CIN No. U66000MH2015PLC263677. Website: adityabirlahealthinsurance.com Fas: 022 6225 7700 Disclaimer: Trademark/Logo Aditya Birla Capital logo is owned by Aditya Birla Management Corporation Private Limited and is used by Aditya Birla Health Insurance Co. Limited under licensed user agreement(s).



Health InsuranceAditya Birla Health Insurance Co. Limited



Activ Health - HDFC Transcript

Section	Transcript	Customer Response				
Α	Introduction					
	Greetings Sir / Madam, Am I speaking to Mr. Pulivarthi Sampath Kumar . ? This is ANISHA BEGUM M calling from HDFC BANK LTD. For the purpose of authentication, you may note that my employee code is M29847 and certificate no. is AV00104562. We are happy to inform you that HDFC Bank and Aditya Birla Health Insurance Company have partnered together to promote Aditya Birla's Health Insurance products. Our telephone banking executive has informed us of your interest in the Activ Health Platinum Enhanced cover. I seek your consent for continuing the call					
	Sir/Madam, would like to inform you that this call is recorded for quality and training purposes. You are entitled to a voice copy of the conversation for future reference in case you purchase the policy.	ок				
	We understand that you or your family members is not looking for porting your existing policy. Kindly confirm.	Yes				
	Does any of the proposed insured person's occupation fall under Armed forces, circus personnel, stunt pilots, mountaineers, professionals in car/bike racing, Jockeys, Wrestlers, Explosive handlers etc?	No				
В	Product Features					
	The Activ Health Platinum Enhanced cover is an annual/2 yr./3 yr. cover You enjoy a 7.5% discount on Premium for a two year term and 10% discount on a 3 year term	ок				
	This policy provides coverage against hospitalization and also offers an array of benefits such as cover for day care expenses, chronic diseases, pre and post hospitalization expenses for 60 and 180 days respectively, bonus in case of no claims during a policy year. The policy also offers a unique benefit which can help you earn up to 30% of your monthly premium back in the form of HealthReturns TM	ок				
	Sum Insured Rs [3/4/5/6/7/8/9/10/15/20/25/30/40/50/100/150/200] lacs on individual basis and/or family basis is calculated basis your age/family members age, which gives you cashless mediclaim facility in network hospitals all over India. Updated network hospital list is available on our company's website: www.adityabirlacapital.com\healthinsurance.com. If the treatment is undertaken in a non-network hospital, you get reimbursement of your hospitalization expenses after submission of all documents as per the T&C of the policy	ок				
	[Applicable if Deductible is opted] - The company would be liable for payment of the hospitalization expenses under this policy once the expenses exceed the agreed deductible(25K or 50K or 100K or 200K or 300K or 400K or 500K)					
	This policy has a waiting period for 2 years for medical conditions like Hernia, Cataract, Piles, gall bladder stones & kidney stones. You can get an exhaustive list of such medical conditions by calling our toll free no 1800 270 7000 or visiting our website www.adityabirlacapital.com\healthinsurance.com.	ок				
	Also kindly note that the policy will not cover any medical hospitalization for first 30 days, however Accidental hospitalization will be covered from day one.	ОК				
	A minimum 24 hours of hospitalization is required for all inpatient treatment	ОК				
	The policy will cover any pre-existing diseases post a waiting period of 36 months	ОК				
	There is an eligibility of single private room for In-patient hospitalisation which covers medical expenses for a disease, illness or injury. In case of taking treatment in a room higher than single private room, there is a co-pay applicable. However if you get treated in a lower room category than opted, a pre-defined percentage of payable claims is provided back to you.	ок				
	HealthReturns TM - Our policy rewards you for staying active and healthy. You can earn these rewards by walking 10,000 steps or burning 300 calories or spending 30 minutes in the gym. Earning HealthReturns TM criteria - Basis the health assessment and the activity level of the adult insured member, you can earn HealthReturns TM on your premium HealthReturns TM redemption - You can use the accumulated HealthReturns TM to buy medicines, pay for diagnostic tests or to pay your next policy premium.	ок				
	Chronic management program – We will help you medically manage your chronic condition of diabetes, hypertension, high cholesterol and asthma through consultations, diagnostic tests and pharmacy benefits. Our team of specialists and doctors have designed this program to help you control these conditions. We will also provide for the listed medicines, diagnostic procedures and doctor's visits to manage these conditions.	ок				
	Reload of Sum Insured – In case the sum insured with cumulative bonus is insufficient as a result of claims in that policy year, you get a reload of the sum insured for your health cover needs	ОК				
	As per the policy you can add a newly wedded spouse or a new born baby during the mid-term of policy period or at renewal.	ОК				
	Kindly note: For an exhaustive list and benefits/product features please call our Toll free no. 1800 270 7000	ОК				

С	C Proposer / Insured Details				
Proposer Detai	ils	Cover : Individual			
	Name	Date of Birth			
	Mr. Pulivarthi Sampath Kumar .	12/06/1993			

Nominee Details	
Name	Relationship with Proposer
RAJA P	Father

Insured Details					
Name	Sum Insured	Date of Birth	Relationship with Proposer	Height (cm)	Weight (kg)
Mr. Pulivarthi Sampath Kumar	300000	12/06/1993	Self	170	70

We will use your email address registered in the Bank's record to dispatch a copy of the Policy document, if issued	ок
Family Discounts- In an Individual Policy, you enjoy a 5% discount on premium in case two members of the family are	ок
covered under the policy, and 10% in case three or more members	UK

D	Pre Existing Diseases / Lifestyle	
	Have you or any of the proposed insured members ever been diagnosed with /advised / taken treatment or undergone any investigation or consulted a doctor or undergone or advised surgery for any diseases, ailments, medical conditions or illnesses, accidents or injury, whether Asthma, Blood pressure, High Cholesterol, Diabetes, or complications in pregnancy or any other illness or had any claim in any health policies?	No
	Was any proposal for life, health insurance declined, deferred, withdrawn or accepted with modified terms?	No
	Does any person proposed to be insured, smoke or consume tobacco in any form, or alcohol? If yes, please give details of quantity & years of consumption	No

	Smoking		Tobacco		Alcohol	
Name	Cigarettes per day	No. of Years	Amount per Day	No. of Years	Units per week	No. of Years
Mr. Pulivarthi Sampath Kumar	0		0		0	

Sir / Madam hope all the above information is true to the best of your knowledge, since any misrepresentation of facts can	ок
lead to rejection at the time of claims.	UK

E	Authorization	
	Dear Sir/Madam, to assess and underwrite the risk, the Company requires certain personal information and health details. Such information shall be retained by the Company and disseminated on need to know basis to its service provider(s) for the purposes of insurance and other related services. Kindly provide your consent.	Yes
	The premium amount including the loading premium(if any) for your insurance policy is Rs.9668.00 for 2 years. Kindly provide your consent for debiting this amount on your Credit Card / Bank account and process the proposal.	Yes
	Please note that the premium will be blocked from your HDFC Credit Card/Bank account. We will make 3 attempts to debit the premium from your card account. Should we debit this amount on your Credit Card and issue the policy?	Yes
	Thank you for your consent towards the cover. Kindly note that your HDFC Bank Credit Card would be debited towards the premium amount of Rs. 9668.00 only.	ок
	Premiums are based on the age of the insured person and the Sum Insured requested. In case of a family floater, the premium is as per the eldest insured person of the policy. Any change in the premium will be as per the premium tables approved by IRDAI for the Product. We will use your email address registered in the bank's records to dispatch a copy of the Policy Document, if issued	ок
	There will not be any refund of premium amount post expiry of the cover. Kindly note, in case of cancellation request during the policy period, the termination clause mentioned in the policy wordings shall be applicable, and premium shall be refunded on a short period basis if eligible	ок
	You will be entitled for a Free Look period of 15 days from the date of receipt of the policy to review its terms and conditions. In case you disagree with or object to any terms or conditions of the Policy, you have an option to request for cancellation of the policy stating the reasons for cancellation. The premium paid by you will be refunded after deducting the expenses incurred by us on medical check - up, stamp duty charges and proportionate risk premium.	ок
	Please note that your cover starts from the date when premium amount is received by Aditya Birla Health Insurance Company from the card account/bank account and fulfilment of all requirements. It is an annual/2 yr/3 yr policy and has to be renewed after expiry of every term to continue your Health cover.	ок
	Sir/Madam, for more details on benefits, features, terms and conditions, deductibles, exclusions etc. please refer our website on www.adityabirlacapital.com/healthinsurance before concluding the sale	ок
	Thank you Sir/Madam, we will process your policy and the premium will reflect in your HDFC Bank Credit Card statement. Request you to please maintain the Credit Card limit upto premium of Rs.9668.00 in your HDFC Bank Credit Card amount so that your request can be processed.	ок

F	Closure	
	Thank you very much for confirming the details. This is ANISHA BEGUM M and M29847 calling from HDFC BANK LTD. Please note my name and employee id for any future reference. We will send a copy of your policy and details confirmed by you on this call on email id registered with the Bank.	ок
	May I confirm the last 4 digits of your Credit card Number?	4504
	Thank you very much for confirming the details. As a protocol, you will also receive a call from the Insurer as part of their quality check process.	ок