

- ii. In case of Our own renewal a grace period of 30 days is permissible and the Policy will be considered as continuous for the purpose of all waiting periods. Any medical expenses incurred as a result of disease condition/ Accident contracted during the break period will not be admissible under the policy.
- iii. For renewals received after completion of 30 days grace period, a fresh application of health insurance should be submitted to Us, it would be processed as per a new business proposal.
- iv. After the completion of maximum renewal age of dependent children, the policy would be renewed for lifetime. However a separate proposal form should be submitted to us at the time of renewal with the insured member as proposer. Suitable credit of Continuity/waiting periods for all the previous policy years would be extended in the new policy, provided the policy has been maintained without a break.
- v. Premium payable on renewal and on subsequent continuation of cover are subject to change with prior approval from IRDA.
- vi. We may cancel this insurance by giving You at least 15 days written notice, and if no claim has been made then We shall refund a pro-rata premium for the unexpired Policy Period. Under normal circumstances, policy will not be cancelled except for reasons of non-disclosure while proposing for insurance and /or lodging any fraudulent claim.
- vii. You may cancel this insurance by giving Us at least 15 days written notice, and if no claim has been made then the We shall refund premium on short term rates for the unexpired Policy Period as per the rates detailed below

Period on Risk	% of Annual Premium Refunded
Upto 1 month	75%
Exceeding 1 month and upto 3 months	50%
Exceeding 3 months and upto 6 months	25%
Exceeding 6 months	Nil

#### Grace period

- In case of our own renewal a grace period of 30 days is permissible and the Policy will be considered as continuous for the purpose of Specific waiting periods under the policy.
- Any medical expenses incurred as a result of disease condition/ Accident contracted during the break period will not be admissible under the policy.

#### When can I Change my Plan?

- Change of plan can be done only at renewals.
- For change of plan, fresh proposal form along with the renewal notice should be submitted

#### Portability Conditions

- As per the Portability Guidelines issued by IRDA, If you are insured under any other health insurance policy of Non life insurer you can transfer to Health Assist Policy with all your accrued benefits after due allowances for waiting periods and enjoy all the available benefits of Health Assist Insurance Policy
- The pre-policy medical examination requirements and provisions for

such cases shall remain similar to non-portable cases

#### Revision/ Modification of the policy:

- There is a possibility of revision/ modification of terms, conditions, coverages and/or premiums of this product at any time in future, with appropriate approval from IRDA. In such an event of revision/modification of the product, intimation shall be set out to all the existing insured members at least 3 months prior to the date of such revision/modification comes into the effect

#### Withdrawal of Policy

There is possibility of withdrawal of this product at any time in future with appropriate approval from IRDA, as We reserve Our right to do so with a intimation of 3 months to all the existing insured members. In such an event of withdrawal of this product, at the time of Your seeking renewal of this Policy, You can choose, among Our available similar and closely similar Health insurance products. Upon Your so choosing Our new product, You will be charged the Premium as per Our Underwriting Policy for such chosen new product, as approved by IRDA.

#### Annual Premium Rates

Plan 1: Health Guard 1Lac + PA 2 Lac + Edu Grant 2Lac					
	upto 25Yrs	26-40-Yrs	41-45Yrs	46-55 Yrs	56-60 Yrs
Self	1700	2044	2534	3652	5430
Self + Spouse	2490	3005	3742	5417	8085
2A + 1Child	2885	3486	4345	6300	9413
2A + 2Child	3280	3967	4949	7183	10740

Plan 1: Health Guard 1Lac + PA 2 Lac + Edu Grant 2Lac				
	61-65Yrs	66-70 Yrs	71 -75 yrs	75 yrs and above
Self	6200	6790	8088	9645
Self + Spouse	9239	10124	12071	14408
2A + 1Child	10759	11792	14063	16789
2A + 2Child	12279	13459	16055	19170

Plan 2: Health Guard 1Lac + PA 5 Lac+ Edu Grant 2Lac					
	upto 25Yrs	26-40-Yrs	41-45Yrs	46-55 Yrs	56-60 Yrs
Self	1960	2304	2794	3912	5690
Self + Spouse	2880	3395	4132	5807	8475
2A + 1Child	3340	3941	4800	6755	9868
2A + 2Child	3800	4487	5469	7703	11260

Plan 2: Health Guard 1Lac + PA 5 Lac+ Edu Grant 2Lac				
	61-65Yrs	66-70 Yrs	71 -75yrs	76Yrs above
Self	6460	7050	8348	9905
Self + Spouse	9629	10514	12461	14798
2A + 1Child	11214	12247	14518	17244
2A + 2Child	12799	13979	16575	19690

Plan 3: Health Guard 1.5Lac + PA 10 Lac+ Edu Grant 2Lac					
	upto 25Yrs	26-40-Yrs	41-45Yrs	46-55 Yrs	56-60 Yrs
Self	2882	3532	4272	6028	8696
Self + Spouse	4263	5238	6349	8982	12983
2A + 1Child	4954	6091	7387	10459	15127
2A + 2Child	5644	6944	8425	11936	17271

Plan 3: Health Guard 1.5Lac + PA 10 Lac+ Edu Grant 2Lac				
	61-65Yrs	66-70 Yrs	71 -75yrs	76Yrs above
Self	9849	11176	13211	15654
Self + Spouse	14713	16704	19757	23420
2A + 1Child	17145	19468	23030	27304
2A + 2Child	19578	22232	26303	31187

Note : This product is specially designed for customers of South Indian Bank of India. In the event of this product being discontinued we will offer continuity for health insurance if the insured person opts for any health insurance policy with us ( for a similar type of Health cover ) provided there is no break in the coverage. The premiums applicable would be as per the product opted.



*Jiyo Befikar*

**Get yourself and your family covered by Star Package policy today and sleep easy.**

- Cashless facility offered through network hospitals of Bajaj Allianz only.
- Cashless facility at 3300+ Network hospitals PAN India.
- Special discounts and offers through our value added providers.\*

To know more visit our website, Website: www.bajajallianz.com or get in touch with Email: wellness.HAT@bajajallianz.co.in ; 24\*7 helpline number: 1800-103-2529 (toll free) / 020-30305858

Network Hospital & Value Added service Provider list is provisional & subject to change based on the review of the providers

Disclaimer: The above information is only indicative in nature. For details of the coverage & exclusions please contact our nearest office.

#### Contact Details

Bajaj Allianz General Insurance Company Limited,  
G.E. Plaza, Airport Road, Yerawada, Pune - 411 006.  
Tel: (020) 6602 6666. Fax: (020) 6602 6667.  
www.bajajallianz.com

For any queries please contact:

BSNL/MTNL (Toll Free)	Bharati Mobile & Landline (Toll Free)	Other (Chargeble)
1800 22 5858	1800 102 5858	<Prefix City Code> 3030 5858

Email: info@bajajallianz.co.in

SIB Health Assist/ V001/ w.e.f 1st Oct 2013  
Insurance is the subject matter of the solicitation

\*Cashless facility is available only under Health Guard Section.

Bajaj Allianz

**Health Assist**



*Jiyo Befikar*

ADCODE

UIN: IRDA/ NL- HLT/ BAGI/ P-H/ V.I/ 408/13-14

## ■ BajajAllianz

Bajaj Allianz General Insurance Company Limited is a joint venture between Bajaj Finserv Limited (recently demerged from Bajaj Auto Limited) and Allianz SE. Both enjoy a reputation of expertise, stability and strength. This joint venture company incorporates global expertise with local experience. The comprehensive, innovative solutions combine the technical expertise and experience of more than 110 year old Allianz SE, and indepth market knowledge and good will of Bajaj. Competitive pricing and quick honest response have earned the company the customer's trust and market leadership in a very short time.

## ■ The BajajAllianz Advantage



## ■ How does the Health Assist Policy benefit me?

We understand the needs of people & so we are here to provide a perfect blend of cover of Health guard & Personal accident under this product. Thus Bajaj Allianz assists the family to cope up the financial stress during the bad times of life. The unwarranted financial losses are covered under cashless hospitalization under the Health Guard section while death, permanent total disability & Education Grant is also covered under this product.

## ■ What are the Sections under the Health Assist policy?

1. Health Guard
2. Personal Accident
3. Education Grant

## ■ Section 1: Health Guard

Health Assist Policy is the perfect Health protection for you and your family. It takes care of the expensive medical treatment incurred during hospitalization resulting from serious accident or illness.

## ■ What are the coverages under Health Guard Section?

- Medical expenses incurred during hospitalisation
- Pre and post hospitalisation expenses for 60 and 90 days respectively
- Ambulance charges Rs 1000/- per hospitalisation
- 130 daycare procedures are covered subject to terms & conditions
- 10% Cumulative bonus for every claim free year maximum up to 50%
- This is a floater section where in spouse and children can be covered

## ■ Special Conditions under Health Guard section

- 10% co-payment of applicable for all claims from a non network hospital. Waiver of the co-payment clause is available on payment of 10% of loading on standard premium.
- 20% Co-payment applicable, If the policy is opted for the first time for

insured person aged 56 years and above. This Co payment would continue to apply for subsequent renewals also. The above Co payment is not applicable for our renewals if the policy is opted for the first time prior to the age of 56 years.

- Payment of claims for Cataract shall be restricted to lower of 10% of the sum insured subject to a minimum of Rs 12000 (or the actual incurred amount whichever is lower) and maximum of Rs 35000/- per claim per policy period, subject to policy terms and conditions.

## ■ Exclusion:

- Benefits will not be available for Any Pre-existing condition, ailment or injury, until 48 months of continuous coverage have elapsed, after the date of inception of the first Health Assist policy.
- First 2 years waiting period applicable for below diseases:

1. Any types of gastric or duodenal ulcers,	9. Cataracts,
2. Benign prostatic hypertrophy	10. Hernia of all types and Hydrocele
3. All types of sinuses	11. Fistulae,
4. Haemorrhoids	12. Fissure in ano
5. Dysfunctional uterine bleeding	13. Fibromyoma
6. Endometriosis	14. Hysterectomy
7. Stones in the urinary and biliary systems	15. Surgery for any skin ailment
8. Surgery on ears / tonsils / adenoids / paranasal sinuses	16. Surgery on all internal or external tumours/ cysts/ nodules / polyps of any kind including breast lumps with exception of Malignant tumor or growth.

- 4 years waiting period applicable for below ailments:
  - Joint replacement surgery,
  - Surgery for prolapsed inter vertebral disc (unless necessitated due to an accident)
  - Surgery to correct deviated nasal septum
  - Hypertrophied turbinate
  - Congenital internal diseases or anomalies
  - Laser treatment for correction of eye sight due to refractive error.
- 30 days waiting period is applicable from date of first policy inception for any illness/ disease except for Accidental Bodily Injury.
- War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion, unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition of or damage by or under the order of any government or public local authority and claims due to nuclear weapons and/or materials.
- Circumcision, cosmetic or aesthetic treatments, surgery for change of life/gender.
- Plastic surgery unless necessary for the treatment of cancer, burns or accidental Bodily Injury
- The cost of spectacles, contact lenses, hearing aids, crutches, artificial limbs, dentures, artificial teeth and all other external medical equipments or devices

- Dental treatment or surgery of any kind unless as a result of Accidental Bodily Injury to natural teeth and also requiring hospitalization.
- Convalescence, general debility, rest cure, congenital external diseases or defects or anomalies, genetic disorders, stem cell implantation or surgery, or growth hormone therapy.
- Intentional self-injury (including but not limited to the use or misuse of any intoxicating drugs or alcohol) and treatment due to use or abuse of any substance, drug or alcohol and treatment for de-addiction.
- Human Immunodeficiency Virus or Variant/mutant viruses and AIDS, Venereal disease or any sexually transmitted disease.
- Hospitalisation primarily and specifically for diagnostic, X-ray or laboratory examinations and investigations.
- Medical expenses where hospitalisation is not warranted.
- Treatment arising from or traceable to pregnancy and childbirth and related complications. (Ectopic pregnancy is covered under the policy)
- Vaccination or inoculation unless forming a part of post bite treatment.
- Any fertility, sub fertility, impotence, assisted conception operation or sterilization procedure.
- Vitamins, tonics, nutritional supplements unless forming part of the treatment
- Treatment for any other system other than modern medicine (also known as Allopathy), Experimental, unproven or non-standard treatment.
- Expenses related to donor screening, treatment, including surgery to remove organs from a donor in the case of transplant surgery
- Weight management services and treatment related to weight reduction programmes including treatment of obesity.
- Treatment for any mental illness or psychiatric illness, Parkinson's and Alzheimer's disease.

## ■ Section 2: Personal Accident

The death or injury of breadwinner can create serious financial problems for any family. The section provides coverage for death, Permanent Total Disability (PTD) to the insured person.

## ■ What is covered under Personal Accident Section?

- In case of Death due to accidental bodily injury of the proposer, 100% of Sum Insured would be paid to the Nominee
- In case of Permanent Total Disability due to accidental bodily Injury, 125% of Sum Insured is payable for the proposer
- However in case of spouse and children we will pay 50 % and 25 % of the sum insured respectively under Death and PTD cover.
- Expenses for Transportation of mortal remains up to Sum Insured.
- Children Education benefit upto Rs 5000/- each max upto 2 children.

## ■ Section 3: Education Grant

(Payable in case of Accidental Death and Permanent Total Disability)

## ■ What is covered under Education Grant Section?

- In case of an accidental death or Permanent Total Disability of the insured person (only in case Proposer), the 2 Lacs of sum insured would be payable towards the continuing education of the deceased's child/children.

- The claim would be payable to the nominee under the policy.

## ■ Exclusion under Personal Accident and Education Grant sections

- Suicide, attempted suicide or self inflicted injury or illness
- Whilst under the influence of intoxicating liquor or drugs
- Any deliberate or intentional, unlawful or criminal act, error, or omission of the Insured.
- War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion, unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition of or damage by or under the order of any government or public local authority and claims due to nuclear weapons and/or materials.
- Any consequential losses of any kind, and/or any actual or alleged legal liability of the Insured.
- Whilst engaging in aviation or ballooning, whilst mounting into, dismounting from or traveling in any balloon or aircraft other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world.
- Any loss suffered by the Insured on account of his participation as the driver, co-driver or passenger of a motor vehicle during motor racing or trial runs.
- Any loss caused either directly or indirectly by nuclear energy, radiation.
- Curative treatments or interventions that the Insured performs or has had performed on his body.
- Venereal or sexually transmitted disease, HIV (Human Immunodeficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or mutant derivatives or variations thereof however caused.
- Pregnancy, resulting childbirth, miscarriage, abortion, or complication arising out of any of the foregoing.
- The Insured's participation in any naval, military or air force operations whether in the form of military exercises or war games or actual engagement with the enemy, whether foreign or domestic.

## ■ What is the entry age under the policy?

- Entry age for proposer/ spouse is 18 yrs – 65yrs.
- Children from 3 Months to 25 years can be covered as dependents under this policy

## ■ What will be the renewal age?

- Under normal circumstances, lifetime renewal benefit is available under the policy except on the grounds of fraud, misrepresentation or moral hazard

## ■ What is the policy period?

- This is an annual policy

## ■ Who can be covered under the policy?

Self, spouse and dependent children (maximum upto 2) can be covered under the policy.

## ■ What are the plans available under the policy

Coverages	PA (Death +PTD )	Health Guard	Education Grant
Plan 1	100000	100000	200000
Plan 2	500000	150000	200000
Plan 3	1000000	100000	200000

## ■ What are the additional benefits under Health Plus policy?

- **Free Health Check-up (Applicable under Section 1: Health Guard)** At the end of block of every continuous 4 claim free years, free medical checkup at our network Diagnostic Centre. List of tests given for reference: Physician Consultation, ECG, Complete Blood Count, Fasting Blood Sugar, Lipid Profile, Serum Creatinine, SGOT, SGPT and Urine Routine.
- **Income tax benefit** on the premium paid as per section 80-D of the Income Tax Act on the premium paid for Health Guard Section
- **Cashless facility:** You have access to cashless facility (subject to terms and conditions of policy) at about 3300 Bajaj Allianz network hospitals and nursing homes across the country. In case you opt for a hospital other than the empanelled ones, the admissible expenses borne by you shall be reimbursed within 14 working days from the submission of all documents.

## ■ Pre policy medical checkup criteria

- Waiver of medical tests up to 45 years subject to no adverse medical history,
- Medical Tests are mandatory for age 46 years and above (list of medical tests required is as per table below).
- The pre-policy check up would be arranged at our network diagnostic centers.
- The validity of the test reports would be 30 days from date of medical examination.
- If pre-policy check up would be conducted in our network diagnostic centre, 50% of the standard medical tests charges would be reimbursed, subject to acceptance of proposal and policy issuance.

Age of the person to be insured	Sum Insured	Medical Examination
Up to 45 years	All Sum Insured options	No Medical Tests*
46 and above	All Sum Insured options	Medical Tests required as listed below: Full Medical Report, CBC, Urine R, ECG, Lipid profile, Fasting BSL, HbA1c, SGOT, SGPT, Sr Creatinine, GGTP

\*Subject to no adverse medical history

## ■ Free Look Period

If you are not satisfied with policy coverage, terms and conditions, You have the option of canceling the policy within 15 days of receipt of the first policy documents, provided there has been no claim. Free Look Period is not applicable for renewal policies.

## ■ Renewal & Cancellation

- Under normal circumstances, renewal will not be refused except on the grounds of Your moral hazard, misrepresentation or fraud