

**HD
FC
ERGO**



**BIG
COVERAGE,
SMALL
PRICES**





INTRODUCTION

With the rising medical bills, one thing we have learnt is to be prepared in advance so that hospital expenses don't add to your crisis period. And, that begins with buying the right policy for yourself.

Bad times won't knock and come, so insure what matters the most – your health – with HDFC ERGO's my:health Koti Suraksha, a policy that gives you a cover of Rs. 1 Cr in low premiums.

So, make the right choice today to reap benefits tomorrow!

SECTION A - HEALTH

1. HOSPITALISATION EXPENSES



Medical Expenses

Medically necessary hospitalisation of the insured due to illness or injury sustained or contracted during the policy period, room rent & boarding charges, ICU, consultation fees & nursing charges, medicines, and diagnostic procedures.

Special Conditions:

The Claims Under Medical Expenses Are Subject To –

- i. Room Rent: Insured is eligible for room rent category of up to Single Standard AC Room.
- ii. Procedure Sub-limits: For each illness & procedure like Cataract, Surgeries For – Benign – Tumours/Cysts/Nodule/Polyp, Stone in Urinary System, Hernia Related, Appendectomy, Hysterectomy, Fissures/Piles/Fistulas, Cellulites/Abcess the sub limit would be of Rs. 75,000.

Mental Illness

The Coverage for mental illness is applicable if done in a mental health establishment and is subject to the provisions contained in the Mental Health Care Act, 2017.



Home Healthcare

Hospitalisation at home under Home Healthcare for medically-necessary treatment of illnesses, availed through cashless facility only.



Domiciliary Hospitalisation

Pays for expenses incurred for medical treatment taken at home, on the advice of a physician.



Pre and Post Hospitalisation

Pays for medical expenses incurred due to an illness & injury, up to 60 days immediately before hospitalisation & 180 days after discharge from hospital.



Day Care Procedures

Medical expenses for hospitalisation of insured in hospital or day care centre for day care treatment.



Road Ambulance

Pays for the expenses incurred on Road Ambulance services in case of any emergency.



Organ Donor Expenses

Pays for Medical Expenses towards organ donors hospitalisation for harvesting of the donated organ where the insured person is the recipient.



Alternative Treatments

Medical expenses only for Inpatient care treatment of insured in an Ayush Hospital up to the limits specified in the policy schedule for Ayurvedic, Unani, Siddha, Homeopathy, Yoga & Naturopathy.

Value Added Services

➤ Health Coach:

Access to health coaching services in areas like disease management, activity and fitness, nutrition as well as weight management.

These services will be available through HDFC ERGO Mobile App as a chat service or as a call back facility.

➤ Wellness Services:

- Discounts: On OPD, pharmaceuticals, pharmacy, and diagnostic centers
- Customer Engagement: Monthly newsletters, diet consultation, and health tips
- Specialized programs: Stress management, pregnancy care, and work life balance management

2. my:health ACTIVE



Preventive Health Check-Up**

Insured will be entitled for the below list of tests after completion of each policy year/renewal at our network provider for- Chest X-Ray, 2D echo/stress test, PSA for males, PAP smear for females, Medical Examination Report, Complete Blood Count Urine R, Fasting Blood Sugar, Fasting Blood Sugar, Lipid Profile & Electro Cardio Gram



Fitness Discount @ Renewal

Insured Person can avail Fitness discount of upto 10% at each renewal by recording minimum 50,000 steps in a week, subject to maximum 15,000 steps per day or burning total of 900 calories, up to maximum of 300 calories in one exercise session per day tracked by your wearable device linked to our HDFC ERGO Mobile App and your policy number.



Health Incentives

Upto 50% reduction in Medical Underwriting Loading applied on first inception of the policy, provided the Insured undergoes medical tests and/or BMI check-up as listed in the policy wordings - minimum 3 months prior to expiry of Policy Year and the test parameters are within normal limits.



Cumulative Bonus

On each continuous claim-free renewal of the policy with us, we will apply 10% of the basic sum insured under expiring policy each year, up to a maximum of 100% of basic sum insured. This benefit is not applicable if aggregate deductible is opted under Section A of the policy.

**This benefit will not be carried forward if not utilized within 60 days of policy anniversary date.

The HDFC ERGO Mobile App and Wellness services intention is not to provide specific medical advice but rather to provide users with information to better understand their health and diagnosed disorders.



OPTIONAL COVERS UNDER SECTION A

These Covers are optional and applicable only if opted for and up to the sum insured or limits mentioned on the Schedule of Coverage in the Policy Schedule.

Non-Medical Expenses Cover

Non-medical expenses up to the limit of 5% of admissible claim amount for claims admissible under Section A. Hospitalisation cover.

Aggregate Deductible

Insured shall bear an amount equal to the aggregate deductible as opted for all admissible claims made in a policy year. The liability of the company to pay the admissible claim will commence only once aggregate deductible has been exhausted.

Emergency Worldwide Coverage

Pays medical expenses on medically necessary hospitalisation of an insured person outside India due to life threatening situation where such treatment cannot be postponed until the Insured has returned to India.

Overseas Treatment

Pays for Medical Expenses incurred outside India for treatment of Major Illnesses listed below:

Major Illnesses – Overseas Treatment Applicable	
Cancer of specified severity	Open Chest CABG
Kidney failure requiring regular dialysis	Stroke resulting in permanent symptoms
Major organ/bone marrow transplant	Permanent paralysis of limbs
Multiple Sclerosis with persisting symptoms	Open heart replacement or repair of heart valves
Myocardial Infarction (First Heart Attack of specified severity)	

Waiver of Disease Capping

On availing this option, procedure sub-limits listed under Section A.I.1.a, medical expenses shall stand deleted under the policy.



Waiver of Room Rent

On availing this option, the limits specified with respect to room rent/boarding charges under Section A shall stand deleted.



Waiting Period Modification Option

On availing this option, waiting periods listed under hospitalisation section shall stand modified as waiting period for pre-existing conditions – 36 Months.



Medical Evacuation

Air ambulance transportation in an airplane or helicopter for emergency care which requires immediate and rapid ambulance, from the site of first occurrence of the illness/accident to the nearest hospital that ground transportation cannot provide. Maximum up to Rs. 5 lacs.



Sum Insured Rebound

Adds to the sum insured, an amount equivalent to the claim amount paid under Basic Sum Insured, subject to maximum of basic sum insured, on subsequent hospitalisation of the insured person during a policy year[#].

- i. Subject to the condition that a single claim in a policy year cannot exceed the sum of basic sum insured and the cumulative bonus earned.
- ii. In case of treatment for Chemotherapy and Dialysis, Sum Insured Rebound will be applicable only once in lifetime of Policy.
- iii. This Cover is not applicable if Optional Cover 2, aggregate deductible is opted under Section A of the policy.



Waiver of Co-Payment

On availing this option, applicable Co-Payment stands waived under the Policy.



Cumulative Bonus – Booster

Cumulative bonus of 50% of basic sum insured under expiring policy for each continuous claim free renewal of the Policy with us up to a maximum of 100% of basic sum insured.

[#]Any un-utilized amount of Sum Insured rebound cannot be carried over to next policy year or renewal policy. Sum Insured rebound can be utilized for claims under Hospitalisation cover only.

WHAT IS NOT COVERED – SECTION A



Co-Payment & Waiting Periods

Claims under the policy are covered subject to co-payment & waiting period as specified below:-

1. Co-payment - Only applicable to Section A. Health
2. 20% for all lives with PED at inception of policy will be applicable only during waiting period applicable to pre-existing diseases.
3. 20% for age at entry above 60 years.

➤ Pre-Existing Diseases

Pre-existing disease (PED) and its direct complications shall be excluded until the expiry of 48 months of continuous coverage after the date of inception of the first policy, subject to the same being declared at the time of application and accepted by Insurer.

➤ Specified Disease/Procedure Waiting Period

24 months waiting period applicable for specific illnesses and surgical procedures.

Please refer to the policy wordings for complete list.



Illnesses

30-day waiting period - Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident.



PERMANENT EXCLUSIONS

We will not make any payment for any claim in respect of any insured person caused by, arising from or attributable to any of the following, unless expressly stated to the contrary in this policy:

1. Expenses related to any admission primarily for diagnostic and evaluation purposes only
2. Rest cure, rehabilitation and respite care
3. Expenses related to the surgical treatment of obesity
4. Change-of-gender treatments
5. Cosmetic or plastic surgery
6. Dietary supplements and substances that can be purchased without prescription
7. Unproven treatments
8. Sterility and infertility
9. Maternity-medical treatment expenses traceable to childbirth
10. War or any act of war, invasion, act of foreign enemy
11. Aggregate deductible – for claims/claim amount falling within aggregate deductible limit if opted and as mentioned on the Schedule of Coverage in the Policy Schedule.

For complete list refer the policy wordings

GENERAL CONDITIONS

1. General Conditions

A. Entry Age

Base Cover & Optional Cover

Proposer	Adult Dependent	Child/Children
Minimum Entry Age – 18 Years	Minimum Entry Age – 18 Years	Minimum Entry Age – 91 Days
Maximum Entry Age – 65 Years	Maximum Entry Age – 65 Years	Maximum Entry Age – 25 Years

➤ Add On Covers

my: health Critical Illness

Proposer	Adult Dependent
Minimum Entry Age – 18 Years	Minimum Entry Age – 18 Years
Maximum Entry Age – Life Time Entry	Maximum Entry Age – Life Time Entry

my: health Hospital Cash Benefit Add on

Proposer	Adult Dependent	Child/Children
Minimum Entry Age – 18 Years	Minimum Entry Age – 18 Years	Minimum Entry Age – 91 Days
Maximum Entry Age – Life Time Entry	Maximum Entry Age – Life Time Entry	Maximum Entry Age – 25 Years

B. Type of Policy

Individual Sum Insured

- Section A – Health Cover
- Add-on Cover – my:health Critical Illness Add On

Floater Sum Insured

- Section A – Health Cover
- Add-on Cover - my:health Hospital Cash Benefit Add-on

C. Coverage For Dependents

Individual Sum Insured Option

Proposer	Spouse
Dependent Children	Dependant Parents/In-Laws
Grand Mother	Grand Father
Grand Son	Grand Daughter
Daughter-In-Law	Son-In-Law
Sister	Brother
Sister-In-Law	Nephew
Niece	Brother-In-Law

- Floater Sum Insured Option: Self, spouse, dependent children* and dependent parents/parents-in-law can be covered under floater option.

*Dependent children: A child is considered a dependent for insurance purposes until his 25th birthday (even if not enrolled in an educational institution) provided he is financially dependent, on the proposer.

Policy period

- This policy can be issued for 1 year/2 years/3 years.

D. Co-Payment – Mandatory

20% co-payment for all lives with PED at inception (if applicable), and lives with age at entry above 60 years (if applicable)

E. Sum Insured – Add-on Covers

my:health Critical Illness Add on	₹ 1 Lac to 5 Cr in multiples of 1 Lac	
	Per day benefit	
➤ my:health Daily Cash Benefit Add-on	Rs. 500	Rs. 1,000
	Rs. 1,500	Rs. 2,000
	Rs. 2,500	Rs. 3,000
	Rs. 5,000	Rs. 7,500
	Rs. 10,000	

F. Discount

Family Discount	A discount of 10% on the premium shall be offered if 2 or more of any of the eligible family members are covered under an Individual sum insured policy with the company.
Online Policy Discount	A discount of 5% on the premium shall be offered for all policies purchased online, through our website directly from the company.
Employee Discount	10% discount will be offered on the premium, to employees of HDFC and ERGO Group companies in case the policies are bought through direct channels of the company.
Loyalty Discount	If insured has purchased policies for more than 1 product from us, a discount of 5% is offered on premium of my:health Koti Suraksha product, subject to maximum of INR 250.
Long Term Policy Discount	A discount of 7.5% and 10% shall be offered on premium, in case a policy is purchased for 2-year and 3-year tenure respectively with annual premium payment option.

Maximum cap on family, online, loyalty and employee discounts combined is 20%.

G. Premium Tier (Applicable to Section A Only)

For the purpose of policy issuance, the premium will be computed basis the city of residence provided by the insured person in the proposal form. Classification of cities would be as under:

- Tier 1a: Delhi and NCR region
- Tier 1b: Mumbai, Mumbai Suburban and Navi Mumbai, Pune, Surat, Ahmedabad, Vadodara
- Tier 2: Rest of India

Please refer to the policy wordings for more details.

HOW TO REACH US FOR CLAIMS



Call us on
022 6234 6234 / 0120 6234 6234



DIA -
24X7 Chat Assistance



Email us at
care@hdfcergo.com



HDFC ERGO Mobile App
on Play Store and iOS



Visit '**Self Help**'
Section on website
www.hdfcergo.com



