

# MAKE HEALTHCARE EASY & STRESS-FREE WITH HDFC ERGO.

**Easy Health Individual Plan** 









## Family Health Insurance Plan with attractive benefits

## Staying healthy and saving money are now just a walk away.

Make every step count with "**Stay Active**" benefit and earn up to 8% discount on renewal premium.

With our 'Stay Active' you and your family can now walk your way to healthier and happier life.

With Stay Active and other uncomplicated benefits, the Easy Health Insurance Plan not only helps you stay healthy but also financially protects you in illness. The Easy Health Plan comes in three variants with multiple sum insured options to choose from to suit your requirements.



## **FEATURES & BENEFITS**

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Schedule of benefits of Easy Health product variants are depicted in the chart below:

Benefits	Standard Exclusive Pr						Premium	
Sum Insured per Insured Person per Policy Year (₹ in Lakh)	1.00, 2.00, 3.00, 4.00, 5.00, 7.5, 10, 15	3.00, 4.00, 5.00	7.50, 10.00	15.00, 20.00, 25.00, 50.00	4.00, 5.00	7.50, 10.00	15.00, 20.00, 25.00, 50.00	
1 a) In-patient Treatment	Covered							
1 b) Pre-hospitalisation	Covered							
1 c) Post-hospitalisation	Covered							
1 d) Day Care Procedures	Covered							
1 e) Domiciliary Treatment	Covered							
1 f) Organ Donor	Covered							
1 g) Ambulance Cover	Up to ₹ 2000 per hospitalisation							
1 h) Ayush Benefit	Covered							

₹500				Exclusive					Premium		
BenefitsStandardaily Cash for hoosing Shared scommodation₹ 500 per day, Maximum Rs.3,000			<b>Exclusive</b> ₹ 500 per day, aximum ₹ 3,000 Maximum ₹ 4,800					00 per day, mum₹3,000	₹800 per day, Maximum₹4,800	₹1000 per day, Maximum ₹.6,000	
Daily Cash for accompanying an Not Covered insured child						300 per day, Maximum ₹24,000	₹300 per day, Maximum₹9,000		₹ 500 per day, Maximum ₹ 15,000	₹800 per day, Maximum ₹24,000	
Not	Covered	Additional Benefit on payment of add			itiona	al premium	Ac	ditional Benef	it on payment of ad	ditional premium	
Not Covered		Not Covered						vered	₹10,000 ( > 10 days of hospitalisation)		
Not	Covered	Not Covered					Not Co <sup>,</sup>		vered	Up to ₹ 2.5 Lacs per hospitalisation	
Not	Covered	₹15,0 Caesa Deliv ₹25,0 (*Includi Post Na of ₹1,50 New Bor ₹2,000)	000* arean /ery 000* ng Pre/ tal limit 00 and n limit of [Waiting	Normal Delivery ₹25,000° Caesarean Delivery ₹40,000° (*Including Pre/ Post Natal limit of ₹2,500 and New Born limit of ₹3,500) [Waiting Period of 6 years]	(*Ir Pos ₹5, E	₹ 30,000* Caesarean Delivery ₹ 50,000* ncluding Pre/ t Natal limit of 000 and New Born limit of ₹ 5,000)	₹ C (*Ino Pos of ₹ New ₹ 2,0	₹15,000*         ₹25,0           Caesarean         Caesa           Delivery         Deliv           ₹25,000*         ₹40,0           ("Including Pre/         Post Natal limit           Post Natal limit of ₹1,500 and         of ₹2,50           New Born limit of ₹2,000) [Waiting         ₹3,500)           Period of         Period		Normal Delivery ₹30,000* Caesarean Delivery ₹50,000* (*Including Pre/ Post Natal limit of ₹5,000 and New Born limit of ₹5,000) [Waiting Period of 4 Years]	
	Stand	ard		Exclusi	ve		Premium				
	Not Cov	vered		Not Cove	ered		Up to 1 % of Sum insured subject to a Maximum of ₹ 5,000		Up to 1% of Sum insured subject to a Maximum of ₹7,500		
ctacles, Contact ses, Hearing Aid Not Co ry Third Year		vered	Not Covered					Up t	Up to ₹ 7500		
Opinion in respect Not Co a Critical Illness		vered	Not Covered					Covered			
Optional, then the Illness Sun 50% or 10 patient Sur subject to		Critical Insured 0% of In- n Insured minimum				Optional, if opted then the Critical Illness Sum Insured 50% or 100% of In-patient Sum Insured up to a maximum of ₹ 10 Lacs		Optional, if opted then the Critical Illness Sum Insured 50% or 100% of In-patient Sum Insured		Optional, if opted then the Critical Illness Sum Insured 50% or 100% of In-patient Sum Insured up to a maximum of ₹10 Lacs	
Insured per insu person up to ₹5, 5 Health Checkup only once at the of a block of ev		r insured o ₹ 5,000, t the end of every four claim	Up to 1% of Sum Insured subject to a Maximum of ₹5,000 per Insured Person, only once at the end of a block of every continuous three policy years					Up to 1% of Sum Insured subject to a Maximum of ₹ a 5,000 per Insured Person, only once at the end of a block of every continuous two policy years			
	Not Not Not	Not Covered         Upto Covered         Up to 1%         Insured per person up to 1%         Insured per per person up to 1%	Not Covered     Maximum       Not Covered     Additi       Not Covered     Image: Standard sta	Not CoveredAdditional BenerNot CoveredNot CoNot CoveredNot CoNot CoveredNormal Delivery ₹ 15,000* Caesarean Delivery ₹ 25,000* ('Including Pre/ Post Natal limit of ₹ 1,500 and New Born limit of ₹ 2,000) [Waiting Period of eyears]Not CoveredStandardNot CoveredNot CoveredNot CoveredOptional, if opted then the Critical Illness Sum Insured 50% or 100% of In- patient Sum Insured subject to minimum of ₹ 100,000Optional llness S of In patient Sum Insured subject to minimum of ₹ 5,000, only once at the end of \$ 5,000, of a block of everyUp to \$ 5,000, of \$ 5,000, of	Not Covered     Maximum ₹ 9,000     Maximum ₹ 15,000       Not Covered     Additional Benefit on payment of add       Not Covered     Not Covered       Not Covered     Not Covered       Not Covered     Not Covered       Not Covered     Normal Delivery ₹ 15,000° Caesarean Delivery ₹ 25,000° ('Including Pre/ Post Natal limit of ₹ 1,500 and New Born limit of ₹ 2,000) [Waiting Period of 6 years]     Normal Delivery ₹ 40,000° ('Including Pre/ Post Natal limit of ₹ 3,500 [Waiting Period of 6 years]       Not Covered     Not Covered     Not Covered       Optional, if opted then the Critical Illness Sum Insured 50% or 100% of In- patient Sum Insured subject to minimum of ₹ 100,000     Optional, if opted then the Critical Illness Sum Insured 50% or 100% of In- patient Sum Insured subject to minimum of ₹ 100,000     Optional, if opted then the Critical Illness Sum Insured 50% or 100% of In- patient Sum Insured subject to minimum of ₹ 100,000     Up to 1% of Sum Insured su ₹ 5,000 per Insured Person, of block of every continuou	Not Covered       Additional Benefit on payment of additional Renefit on Payment of Renefit on Payment on Payment on Payment on Payment on Payment on Payment	Not Covered         K 300 per day, Maximum ₹ 15,000         Maximum ₹ 15,000         Maximum ₹ 15,000           Not Covered         Additional Benefit on payment of additional premium         ₹ 10,000         (> 10 days of hospitalisation)           Not Covered         Not Covered         Up to ₹ 2.5 Lacs per hospitalisation         Up to ₹ 2.5 Lacs per hospitalisation           Not Covered         Normal Delivery ₹ 15,000° Caesarean Delivery ₹ 25,000° ('Including Pre/ Post Natal limit of ₹ 1,500 and New Born limit of ₹ 2,000) [Waiting Period of 6 years]         Normal Delivery ₹ 40,000°         Normal Delivery ₹ 30,000°           Not Covered         Normal Delivery ₹ 25,000°         Normal Delivery ₹ 40,000°         Normal Delivery ₹ 50,000°         Normal Delivery ₹ 50,000°           Not Covered         New Born limit of ₹ 3,500 [Waiting Period of 6 years]         Not Covered         Not Covered         Not Covered           Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered           Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         N	Not Covered     Additional Benefit on payment of additional premium     Additional premium     Additional premium       Not Covered     Not Covered     Not Covered     P10 days of hospitalisation       Not Covered     Not Covered     Up to ₹2.5 Lacs per hospitalisation     Normal Delivery ₹15,000°       Not Covered     Normal Delivery ₹15,000°     Caesarean Delivery ₹25,000°     Roesarean Delivery ₹25,000°     Normal Delivery ₹30,000°     Roesarean Delivery ₹25,000°       Not Covered     ('Including Pre/ Post Natal limit of ₹2,000) (Waiting Pre/ Post Natal limit of ₹2,000) (Waiting Period of 6 years)     Not Covered     Not Covered       Not Covered     Not Covered     Not Covered     Not Covered     Optional, if opted then the Critical lines Sum Insured 50% or 100% of In-patient Sum Insured 50% or 100% of In-patient Sum Insured 50% or 100% of In-patient Sum Insured subject to a Maximum of ₹10 Lacs       Up to 1% of Sum Insured subject to in Minimum     Optional, if opted then the Critical lines Sum Insured 50% or 100% of In-patient Sum	Not Covered         A 300 per day, Maximum ₹ 3,000         Maximum ₹ 15,000         Not Covered         Additional Benefit on payment of additional premium         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Not Covered         Normal Delivery         To Solo and New Born limit of ₹ 2,000 (Waiting Period of § 2,000) (Waiting Period of 6 years]         Not Covered         Not Covered         Not Covered         Up to 1% 0 Solo and New Born limit of \$ 5,000 on the period of 1 years]         Up to 1% 0 Solo and New Born limit of \$ 5,000 on the paice payment additional Benefit on sublect of own of 0, or 1	Not Covered         Action per day, Maximum ₹ 9,000         C 300 per day, ₹ 24,000         Maximum ₹ 9,000 ₹ 24,000         Maximum ₹ 9,000 ₹ 15,000         Maximum ₹ 9,000         Mot Covered         Vot Covered         Vot Covered         Up to ₹ 2.5 Lacs per hospitalisation         Not Covered         Normal Delivery ₹ 15,000         Normal Delivery ₹ 15,000         Normal Delivery ₹ 25,000°         Normal Delivery ₹ 50,000°         Normal Delivery ₹ 50,000         Normal Delivery ₹ 50,000 <tht< td=""></tht<>	



#### POINTS TO REMEMBER

- Easy Health Insurance Plan will offer cover to persons from the age of 5 years onwards. A dependent child can be covered from the 91 day if either parent is covered under this policy and the maximum age at entry is 65 years. There is no maximum cover ceasing age in this policy.
- The cover will be valid for a period of 1 or 2 year(s) as opted. An additional 7.5% discount is offered on premium for opting a 2 year policy.
- An individual and/or his family members namely spouse, dependent children, dependent parents, parent-in-law, grandparents and grandchildren are eligible for buying this cover.
- Please note that your premium at renewal may change due to a change in your age, location or changes in the applicable tax rate.
- A maximum of 6 members can be added in a single policy. In a family floater policy, a maximum of 2 adults and a
  maximum of 5 children can be included in a single policy. The 2 adults can be a combination of Self, Spouse and either
  set of Parents or Grandparents or Parents in law.

#### OTHER BENEFITS

**Pre-hospitalisation:** The medical expenses that you incur due to illness during the 60 days immediately before you are hospitalised.



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Post-hospitalisation: The medical expenses you incur in the 90 days immediately after you are discharged from hospital.

**Day Care procedures:** The medical expenses for all day-care procedures, which do not require 24 hours hospitalisation due to technological advancement, are covered.

AYUSH benefit: The Medical expenses for for only in-patient care treatment taken under Ayurveda, Unani, Sidha Homeopathy, Yoga & Naturopathy.

**Cumulative bonus:** You get a Cumulative Bonus (CB) of 10% for every claim-free year accumulating up to 100% (in the event of a claim, CB will be reduced by 10% of SI on the next renewal).

**Portability:** If you are insured with some other company's health insurance and you want to shift to us on renewal, you can. Our Portability Policy is customer friendly and aims to achieve the transfer of most of the accrued benefits and makes due allowances for waiting periods, etc.

Additional cover for critical illness (optional): You can opt for an additional cover for Critical Illness which covers for Cancer of specified severity, Open Chest CABG, Myocardial Infarction (First heart attack of specific severity), Kidney failure requiring regular dialysis, Major organ/bone marrow transplant, Multiple sclerosis with persisting symptoms, Permanent paralysis of limbs and Stroke resulting in permanent symptoms. This is an optional benefit and can be opted as per your need. The sum insured for Critical Illness can be either 50% or 100% of your basic sum insured subject to a minimum of Rs 1 Lac and maximum of Rs. 10 Lacs.

**Cashless Hospitalisation:** Easy Health enables to you get treated on a cashless basis across 13,000+ healthcare providers\* all over India.

Quick turnaround time: You don't have to worry about pre-authorization with us.

Quick claim payment: When it comes to claim settlement we honor every genuine claim.

**Easy upgrade:** This health plan comes with an easy upgrade option. You can upgrade your cover to the next slab at the time of your policy renewal.

**Tax benefits:** With the Easy Health Individual Health Insurance Plan you can presently avail tax benefits for the premium amount under Section 80D of the Income Tax Act. (Tax benefits are subject to changes in Tax Laws)

**Modern treatment methods:** Our customer deserves the best and the latest medical treatment. Now we cover modern treatment methods like robotic surgeries, stem cell therapy, oral chemotherapy etc. Refer Annexure I for modern treatment methods being covered (if taken as in-patient or domiciliary hospitalisation or day care treatment basis)

**Extended coverage:** We would now be covering treatment of genetic disorders, injury or illness associated with hazardous activities, neurodegenerative disorders like parkinson, alzheimer, peritoneal dialysis.

Refer Annexure II for conditions or treatments which will be covered now.



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- 1) Family Discount of 5% if 2 members are covered and 10% if 3 or more family members are covered under Easy Health Individual Health Insurance Plan.
- 2) 7.5% Discount on premium if Insured Person is paying premium of 2 years in advance as a single premium.
- 3) Stay Active We will offer a discount at each renewal if the insured member achieves the average step count target on the mobile application provided by us. In an individual policy, the average step count would be calculated per adult member and in a floater policy it would be an average of all adult members covered. Dependent children covered either in individual or floater plan will not be considered for calculation of average steps.

In individual policies the discount percentage (%) would be applied on premium applicable per insured member (Dependent Children are not eligible for this stay active discount in an individual policy) and in a floater policy it would be applied on premium applicable on policy.

Average Step Count	Renewal Discount
5,000 or below	0%
5,001 to 8,000	2%
8,001 to 10,000	5%
Above 10,000	8%

The mobile app must be downloaded within 30 days of the policy risk start date to avail this benefit. The average step count completed by an Insured member would be tracked on this mobile application.

We reserve the right to remove or reduce any count of steps if found to be achieved in unfair manner by manipulation.

## EXCLUSIONS

- All treatments within the first 30 days of cover except any accidental injury
- Any preexisting condition will be covered after a waiting period of 3 years
- Congenital external diseases, cosmetic surgery
- Abuse of intoxicant or hallucinogenic substances like intoxicating drugs and alcohol
- Hospitalisation due to war or an act of war or due to a nuclear, chemical or biological weapon and radiation of any kind
- Pregnancy, dental treatment, external aids and appliances unless covered under the specific Easy Health Individual Insurance Plan
- 2 years waiting period for specific diseases like cataract, hernia, joint replacement surgeries, surgery of hydrocele etc
- Items of personal comfort and convenience
- Experimental, investigative and unproven treatment devices and pharmacological regimens.
- Please refer to the Policy Wording for the complete list of exclusions





## TERMS OF RENEWAL

The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the insured person.

- The Company shall endeavour to give notice for Renewal. However, the Company is not under obligation to give any notice for Renewal.
- Renewal shall not be denied on the ground that the Insured Person had made a claim or claims in the preceding policy years.
- Request for Renewal along with requisite premium shall be received by the Company before the end of the policy period.
- At the end of the policy period, the Policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without Break in Policy. Coverage is not available during the Grace Period.
- No loading shall apply on renewals based on individual claims experience.
- Grace Period Grace Period of 30 days for renewing the Policy is provided under this Policy.
- Maximum Age There is no maximum cover ceasing age on renewal in this policy.
- Waiting Period The Waiting Periods mentioned in the policy wording will get reduced by 1 year on every continuous renewal of your Easy Health Insurance Policy.
- Renewal premium are subject to change with prior approval from IRDAI. Any change in benefits or premium (other than due to change in Age) will be done with the approval of the Insurance Regulatory and Development Authority and will be intimated at least 3 months in advance.
- In the likelihood of this policy being withdrawn in future, intimation will be sent to insured
  person about the same 3 months prior to expiry of the policy. Insured Person will have the
  option to migrate to similar indemnity health insurance policy available with us at the time of
  renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting
  period etc; provided the policy has been maintained without a break.
- Sum Insured Enhancement Sum Insured can be enhanced only at the time of renewal subject to no claim have been lodged/ paid under the policy. If the insured increases the sum insured one grid up, no fresh medicals shall be required.
- In cases where the sum insured increase is more than one grid up, the case shall be subject to medicals. In case of increase in the Sum Insured waiting period will apply afresh in relation to the amount by which the Sum Insured has been enhanced. However the quantum of increase shall be at the discretion of the company.
- Any Insured Person in the policy has the option to migrate to similar indemnity health insurance policy available with us at the time of renewal subject to underwriting with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period etc; provided the policy has been maintained without a break as per portability/migration guidelines issued by IRDAI.



## **BUYING PROCEDURE**

- Fill the application form stating your personal information and health profile. Ensure that the information given in the form is complete and accurate.
- Handover the application form and the premium amount in your preferred mode of payment along with necessary documents to the company representative.
- Pre-policy check, if applicable due to age, health declaration and cover opted will be organized at a network center near you.
   On acceptance of your policy we would reimburse up to 100% of cost incurred by you to conduct these tests. In case your proposal is declined, no reimbursement will be provided.
- Based on the details, we may accept or revise our offer to give you an optimal plan as per your profile. This will be done with your consent. In case we do not accept your policy we will inform you with a proper reason. In case of acceptance, the final policy document and kit will be sent to you.

S.No	Additional Procedures covered
1	Oral chemotherapy
2	Stem cell therapy
3	Deep Brain stimulation
4	Uterine Artery Embolization & HIFU
5	Immunotherapy- Monoclonal Antibody to be given as injection
6	Stereotactic radio surgeries
7	Robotic surgeries
8	Intra vitreal injections
9	Bronchical Thermoplasty
10	Vaporisation of the prostrate (Green laser treatment or holmium laser treatment)
11	IONM - (Intra Operative Monitoring) Neuro
12	Balloon Sinuplasty

#### ANNEXURE I: Modern Treatment Methods covered now

#### **ANNEXURE II: Conditions and Treatments covered now**

S.No.	Additional treatments/conditions covered
1	Injury or illness due to participation in hazardous activities pursued for adventure purposes
2	Treatment for correction of eye sight due to refractive error beyond +/- 7.5 dioptres
3	Genetic diseases or disorders
4	Neurodegenerative disorders like Parkinson's, Alzheimer's
5	Any mental illness, stress or psychological disorders
6	Peritoneal dialysis
7	Expenses related to any admission primarily for enteral feedings
8	Obesity/Weight control treatment (if specified conditions are met)
9	Post Hospitalisation expenses for Domiciliary treat- ment
10	Age Related Macular Degeneration (ARMD)
11	Expenses on Artificial life maintenance (including life support machine use) up to the vegetative state, irrespective of whether such treatment results in recovery of restoration of previous state of health or not

#### DISCLAIMER >

This is only a summary of the product features. The actual benefits available are as described in the policy, and will be subject to the policy terms, conditions and exclusions. Please seek the advice of your insurance advisor if you require any further information or clarification.

#### STATUTORY WARNING >

Section 41 of Insurance Act 1938 as amended by Insurance Laws Amendment Act, 2015 (Prohibition of Rebates): No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurers. Any person making default in complying with the provision of this section shall be liable for a penalty which may extend to 10 lakh rupees.



Terms and conditions apply. \*Figure as on 29<sup>th</sup> February 2024. HDFC ERGO General Insurance Company Limited. IRDAI Reg. No. 146. CIN: U66030MH2007PLC177117. Registered & Corporate Office: 1st Floor, HDFC House, 165-166 Backbay Reclamation, H. T. Parekh Marg, Churchgate, Mumbai – 400 020. For more details on the risk factors, terms and conditions, please read the policy document carefully before concluding a sale. Trade Logo displayed above belongs to HDFC Bank Ltd and ERGO International AG and used by the Company under license. UIN: Easy Health - HDFHLIP23024V072223. UID: 14796.