



न्यू इन्डिया एश्योरन्स NEW INDIA ASSURANCE

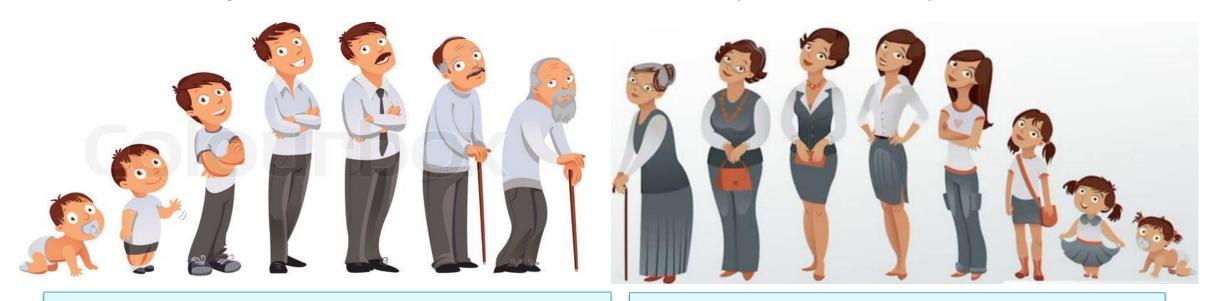
NEW INDIA PREMIER MEDICLAIM





Who can take the policy?

The age should be should be between 18 years and 65 years.



Children between 3 months and 18 yrs are covered provided one or both parents are covered concurrently

18 years to 25 years can be covered provided they are financially dependent on the parents





New Born Baby cover

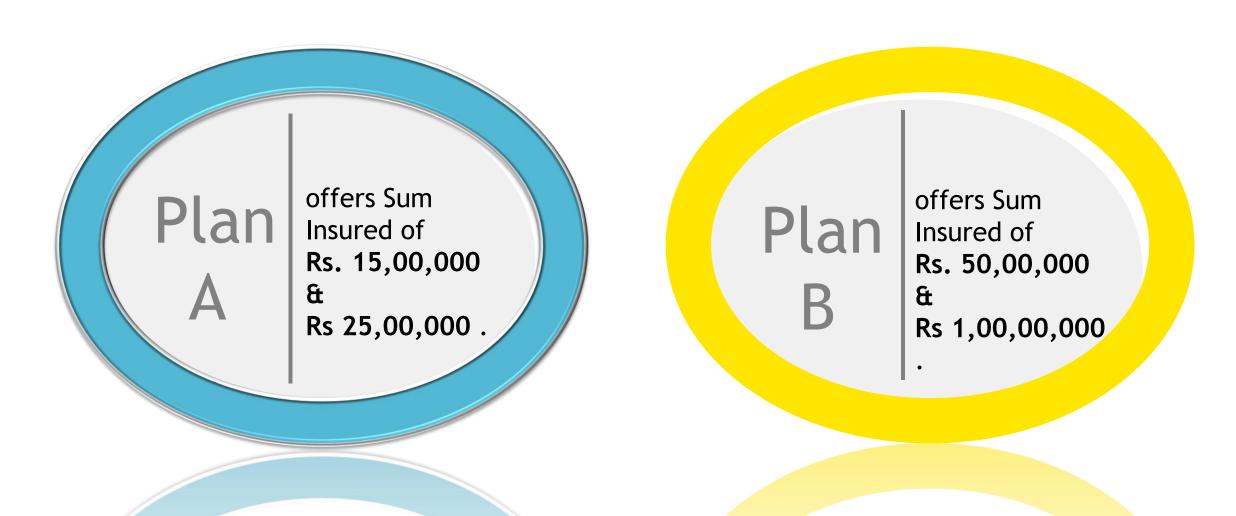
A New Born Baby, born to an Insured mother, will be covered from date of birth till the expiry of the Policy, without any additional Premium.

During subsequent Renewals: Additional premium to be paid.

Who all are covered under the policy?



Plans offered under the policy



Beware.....

Important Notice

Sum Insured once chosen cannot be increased at the time of Renewal, nor is change from Plan A to Plan B permissible.



oFor all the members entering after the age of 50 years (at designated centers)

The cost of this check-up will be borne by the proposer

oBut if the proposal is accepted, then 100% of the cost of this check-up will be reimbursed to the proposer.

....Pre acceptance medical check up



If he has an adverse medical history or

if the health condition of the person/s to be Insured is such that the office in-charge feels that he / she be subjected to a medical examination.

Adverse Medical History means a person:

- a) who has undergone more than one Hospitalisation in previous two years,
- b) who is suffering from Critical Illness, Recurring Illness or Chronic Illness.
- c) who has BMI greater than or equal to 32.
- d) who has any Psychiatric and Psychosomatic Disorder.

Expenses covered under the policy

01

Room Rent, including boarding & nursing expenses, actually incurred.

02

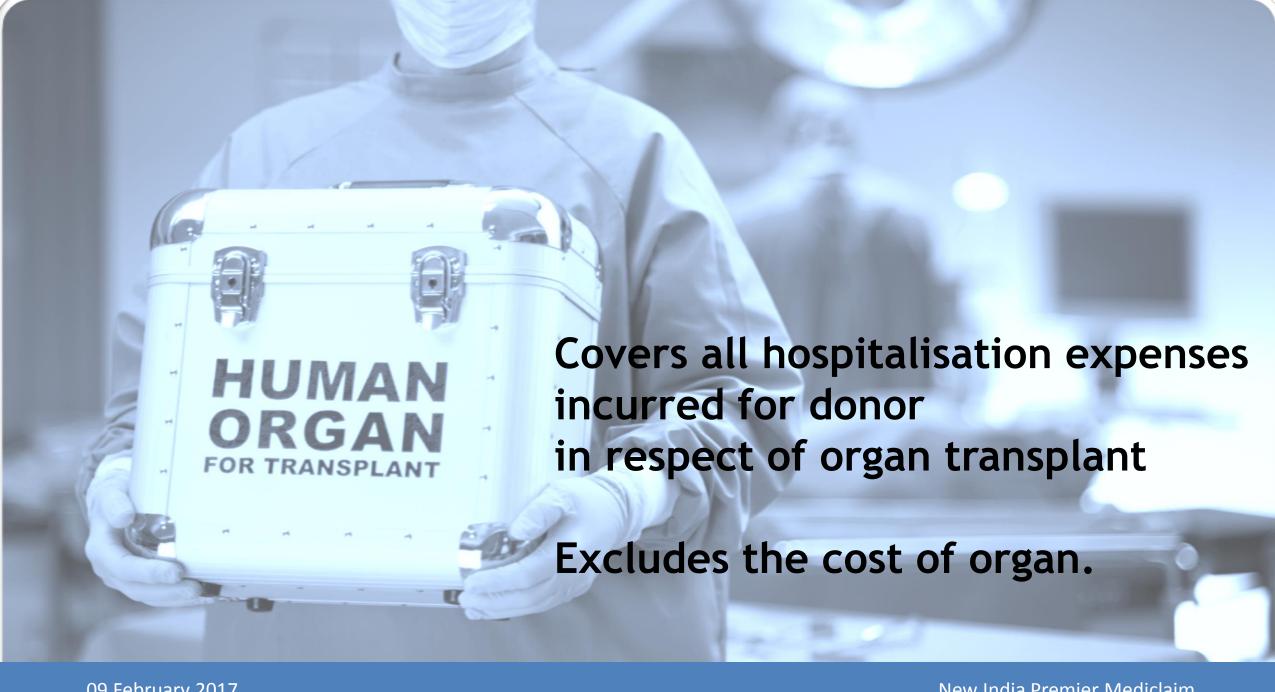
incurred.

03

Surgeon,
Anaesthetist,
Medical
Practitioner,
Consultants'
Specialist fees

04

Anesthesia, Blood, Oxygen, OTC, Surgical Appliances, Medicines & Drugs, Dialysis, Chemotherapy, Radiotherapy, Artificial Limbs, Cost of Prosthetic devices implanted during surgical procedure like pacemaker, Relevant Laboratory/Diagnostic test, X-Ray and other medical expenses related to the treatment.



Hospital cash benefit



Plan A: Rs 2000/per day

Plan B: Rs 4000/per day

Max for 10 days of hospitalization &

Payment will reduce sum insured

Critical illness benefit

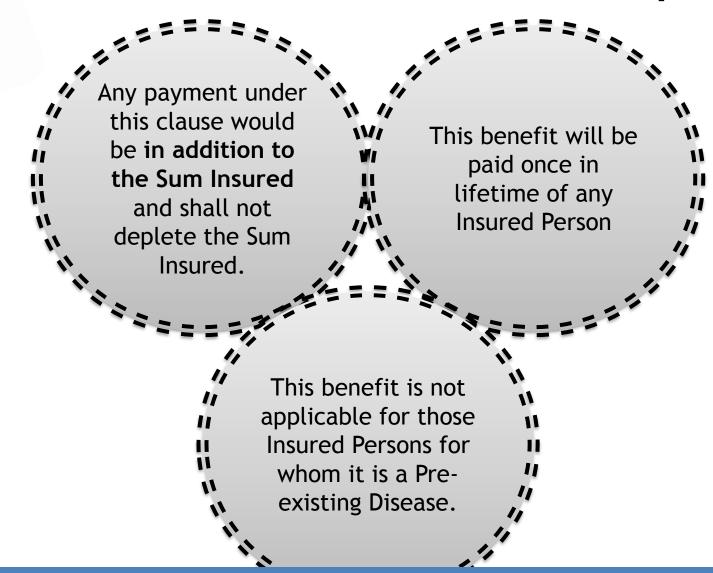
If during the Period of Insurance any Insured Person is diagnosed for the first time to be suffering from any Critical Illness

Additional benefit payable will be:

Rs 2,00,000- For Plan A Rs 5,00,000- For Plan B

- 1. Cancer
- 2. First Heart attack of specified severity
- 3. Open chest CABG
- 4. Open Heart replacement or repair of Heart valves
- 5. Coma of specified severity
- 6. Kidney failure requiring regular dialysis
- 7. Stroke resulting in permanent symptoms
- 8. Major organ / bone marrow transplant
- 9. Permanent paralysis of limbs
- 10. Motor neurone disease with permanent symptoms
- 11. Multiple sclerosis with persisting symptoms

.. Critical illness benefit specialities



Ayurvedic treatment



Liability: 20% of Sum Insured

The treatment is taken in a government Hospital or in any institute recognized by government or accredited by Quality Council Of India or National Accreditation Board on Health, excluding centers for spas, massage and health rejuvenation procedures.

Ambulance charges



1) For shifting any Insured Person to Hospital for admission or from one Hospital to another Hospital for better medical facilities



2) If an Insured Person after the discharge from the Hospital has to be shifted from Hospital to their place of residence in an Ambulance and is not able to travel otherwise



maximum up to Rs. 1,00,000 for any one illness.



up to Rs. 10,000 for any one illness

OPD treatment



The cover can be availed for:

- 1. Dental Treatment.
- 2. Health Check-up.
- 3. Consultation with a Medical Practitioner.
- 4. Drugs and Medicines as prescribed by a Medical Practitioner.
- 5. Investigations as prescribed by a Medical Practitioner.

OPD cover is provided after every block of two continuous Claim Free Years

All the members covered in this Policy are entitled for OPD coverage

PLAN A: Rs 5000/-PLAN B: Rs 10,000/-(for all members together)

The amount will not be carried forward to the next year.

A claim under OPD Treatment clause will also be treated as a claim for determining Claim Free Year.

Maternity cover

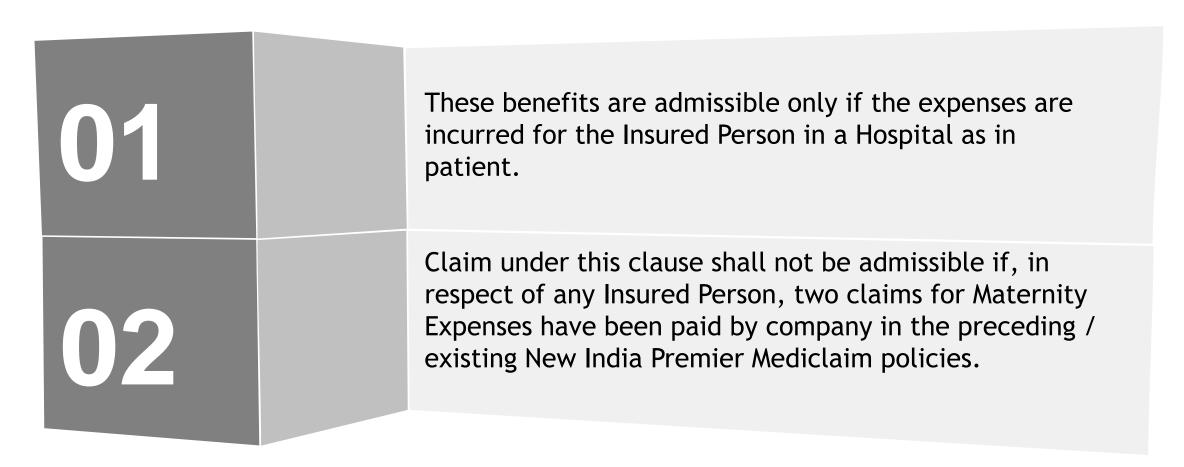
Maternity shall be covered provided the Insured mother has Continuous Coverage of thirty six months in New India Premier Mediclaim Policy.

Plan A: Rs 50,000/-

Plan B: Rs 1,00,000/-



Special conditions applicable to Maternity and Child Care Benefit:



New India baby cover

A New Born Baby is covered for any Illness or Injury from the date of birth till the expiry of this Policy

No additional premium required

Congenital External Anomaly of the New Born Baby is **not covered** under the Policy.

Any expenses incurred towards preterm or pre-mature care or expenses incurred in connection with delivery of such New Born Baby are **not covered**



No coverage for the New Born Baby would be available during subsequent renewals unless the child is declared for Insurance

Infertility treatment



Cover expenses necessarily incurred for treatment of Infertility, including outpatient treatment

Any payment under this clause shall be paid after the Insured Person has Continuous Coverage of **thirty six months** under New India Premier Mediclaim Policy.

Plan A: Rs 1,00,000/-

Plan B: Rs 2,00,000/-



Plan A: Rs 2,00,000/-

Plan B: Rs 5,00,000/-

OPD case

Plan A: Rs 20,000/-

Plan B: Rs 50,000/-

Policy <u>covers treatment for Sexually Transmitted Diseases</u>, any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus Type III (HTLB - III) or lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variation Deficiency Syndrome or any syndrome or condition of a similar kind commonly referred to as AIDS. (3yrs waiting period applicable)

Other specialities.....

Cataract Treatment

Plan A:

Max Rs **75,000/Eye**

Plan B:

Max Rs 1,00,000/Eye

Psychiatric and psychosomatic disorders

Available only for Plan B

Covered up to 5% of Sum Insured

Insured needs to be admitted as Inpatient

Obesity treatment

Cover will be available only for Plan B.

BMI>35

Up to Rs. 5,00,000

3 yrs waiting period

Dietician Counseling

This benefit is applicable for Plan B.

Counselling session available all year

Total payment for all members: Max Rs 5000/-

Second opinion for major surgeries:

The expenses incurred towards consultation with another medical practitioner to seek advice on the surgery shall be payable

plan A: Rs 5000/-

plan B: Rs 8000/-



Concierge service

The services provided will be:

- a. Facilitation of cashless arrangement by the representative of TPA.
- b. Facilitation at the time of discharge by the representative of TPA.
- c. Pick and drop service for all the claim documents, including Pre and Post Hospitalisation bills, by the representative of TPA.



If the TPA fails to provide the service, company will pay the Insured upto Rs. 5000 for such omission. The amount so paid shall be recovered from the fee payable to TPA.

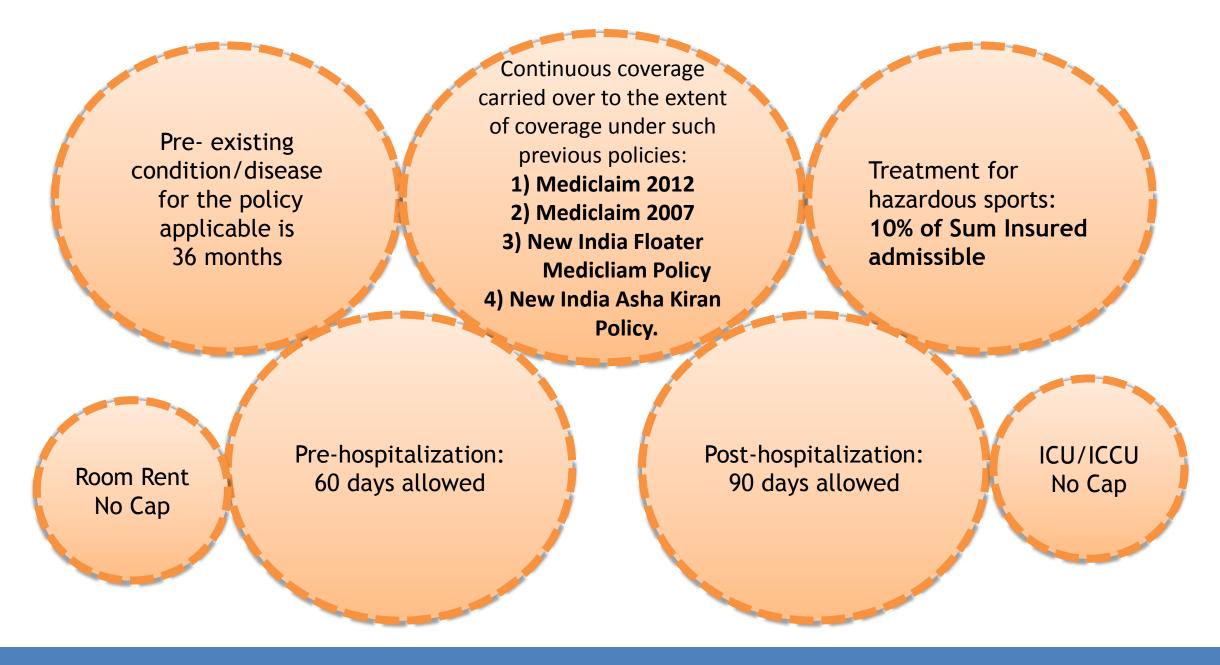
Conditions: The benefits under this clause shall be applicable only where the Insured Person provides advance notice to TPA at least seventy two hours prior to date of Hospitalisation.

Congenital internal and external diseases

Congenital Internal Disease or Defects or anomalies shall be covered upto Sum Insured after twenty four months of Continuous Coverage

Congenital External Disease
Covered on 3Yrs of Continuous Coverage

Claim limited to: 10% of the average Sum Insured in preceding thirty six months



Primary chart

PRIMARY / INDIVIDUAL MEMBER						
	15 L	25L	50L	100L		
<20	₹ 12,519	₹ 15,399	₹ 27,953	₹ 35,243		
21-25	₹ 15,958	₹ 20,107	₹ 35,022	₹ 45,521		
26-30	₹ 16,171	₹ 20,396	₹ 35,464	₹ 46,154		
31-35	₹ 17,767	₹ 22,540	₹ 38,773	₹ 50,852		
36-40	₹ 21,985	₹ 28,204	₹ 47,527	₹ 63,264		
41-45	₹ 25,890	₹ 32,971	₹ 56,219	₹ 74,139		
46-50	₹ 33,803	₹ 43,308	₹ 72,114	₹ 96,168		
51-55	₹ 46,867	₹ 60,199	₹ 98,232	₹ 1,31,971		
56-60	₹ 63,906	₹ 82,176	₹ 1,32,047	₹ 1,78,281		
61-65	₹ 86,147	₹ 1,10,321	₹ 1,76,701	₹ 2,37,877		
65-70	₹ 1,13,908	₹ 1,47,546	₹ 2,34,348	₹ 3,19,475		

Additional member premium

SECONDARY MEMBER						
	15 L	25L	50L	100L		
<20	₹ 9,309	₹ 11,451	₹ 20,786	₹ 26,206		
21-25	₹ 11,866	₹ 14,951	₹ 26,042	₹ 33,849		
26-30	₹ 12,025	₹ 15,166	₹ 26,370	₹ 34,320		
31-35	₹ 13,211	₹ 16,761	₹ 28,831	₹ 37,813		
36-40	₹ 16,348	₹ 20,972	₹ 35,341	₹ 47,043		
41-45	₹ 19,252	₹ 24,517	₹ 41,804	₹ 55,129		
46-50	₹ 25,135	₹ 32,203	₹ 53,623	₹ 71,510		
51-55	₹ 34,850	₹ 44,763	₹ 73,045	₹ 98,132		
56-60	₹ 47,520	₹ 61,105	₹ 98,189	₹ 1,32,568		
61-65	₹ 64,058	₹ 82,034	₹ 1,31,393	₹ 1,76,883		
65-70	₹ 84,701	₹ 1,09,714	₹ 1,74,259	₹ 2,37,558		

