

**Advanced Top Up Health Insurance Plan** 

Make your health insurance cover much bigger.

Easily and Conveniently.

## Advanced Top Up Health Insurance Plan

Your health is your biggest investment. Conventional health policies offer only the basic cover. But foreseeing the magnitude of health problems is as difficult as predicting a health problem itself. Sometimes ailments and related complications demand much more than what you are prepared for.

A solution for this can be provided by "Advanced Top Up Health Insurance Plan" from Royal Sundaram General Insurance Co. Limited, a Top Up health insurance plan with a deductible on annual aggregate basis which offers wide range of deductible and sum insured options. It comes at a very reasonable cost and helps you make your health insurance cover much bigger.

Advanced Top Up Health Insurance Plan is designed to protect your long term savings because you may be covered upto ₹5 lakhs or ₹10 lakhs by your existing policy but the real worry is the scenario where in the same year there are multiple hospitalizations for multiple family members and also few serious illnesses such as Cancer which is a very non-linear kind of a disease affecting rich and poor both across all economic status of the society and where the expenses could be very high. In these scenarios Top Up health insurance product works well which comes at a very affordable premiums with high sum insured.



## How does Advanced Top Up Health Insurance Plan work?

If you have an existing health insurance cover of ₹5 lakhs, you will find it inadequate in the event of a large claim of more than ₹5 lakhs. In case you have opted for ₹5 lakhs deductible and ₹45 lakhs sum insured, your total sum insured increases to ₹50 lakhs. Expenses up to ₹5 lakhs will be borne by your existing health insurance policy and you will have a cover of ₹45 lakhs under Advanced Top Up Health Insurance Plan Policy and you can be worry free.

## How Aggregate deductible works?

In this plan every policy will have deductible and the deductible will be applied on the aggregate of all admissible claims per annum.

For a Sum Insured of ₹45 lakhs and a deductible of ₹5 lakhs, the deductible will be applied as under

Deductible: ₹5 lakhs

Sum Insured: ₹45 lakhs

Claim Type	Claim Amount (₹)	Deductible exhausted	Payable amount under Advanced Top Up Health Insurance Plan (₹)	Balance Sum Insured under Advanced Top Up Health Insurance Plan (₹)
Accidental Injury	1 lakh	No	Nil	45 lakhs
Heart/Angioplasty-1	5 lakhs	Yes	1 lakh	44 lakhs
Heart/Angioplasty-2	3 lakhs	Yes	3 lakhs	41 lakhs
Breast Cancer (multi claims)	20 lakhs	Yes	20 lakhs	21 lakhs
Covid claim	2 lakhs	Yes	2 lakhs	19 lakhs
Total claim amount paid		26 lakhs		

#### Notes

- 1. This is fundamentally a Top Up plan and is an annual aggregate deductible policy which will pay only on the exhaustion of the deductible.
- 2. The deductible must be exhausted during the policy period of this policy.
- 3. Claims under this plan will be payable as per terms and conditions of this policy and not as per the terms and conditions of any base policy.
- 4. We request full understanding of Health Insurance plan to understand the interlinkage between this top up policy and your health insurance policy.
- 5. Claim under this policy is payable only if the hospitalisation exhausting the deductible happens during the policy period of this policy.



## **Key Benefits**



## **Inpatient Care**

The Company shall indemnify medical expenses incurred for hospitalization of the insured person during the policy year, up to the sum insured specified in the policy schedule for

- Room rent, boarding, nursing expenses as provided by the hospital / nursing home.
- ii. Intensive Care Unit (ICU) / Intensive Cardiac Care Unit (ICCU) expenses.
- iii. Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialist Fees whether paid directly to the treating Doctor / Surgeon or to the hospital.
- iv. Anaesthesia, blood, oxygen, operation theatre charges, surgical appliances, medicines and drugs, costs towards diagnostics, diagnostic imaging modalities and such similar other expenses.



#### **Modern Treatments**

The following procedures will be covered (whichever medically indicated) either as in patient or as part of day care treatment in a hospital up to sum insured, as specified in the policy schedule, during the policy period:

- i. Uterine Artery Embolization and HIFU (High Intensity Focused Ultrasound).
- ii. Balloon Sinuplasty.

- iii. Deep brain stimulation.
- iv. Oral chemotherapy.
- v. Immunotherapy Monoclonal Antibody to be given as injection.
- vi. Intra Vitreal Injection.
- vii. Robotic Surgeries.
- vii. Stereotactic Radio Surgeries.
- ix. Bronchical Thermoplastic.
- Vaporisation of the prostrate (Green laser treatment or holmium laser treatment).
- xi. IONM (Intra Operative Neuro Monitoring).
- xii. Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.



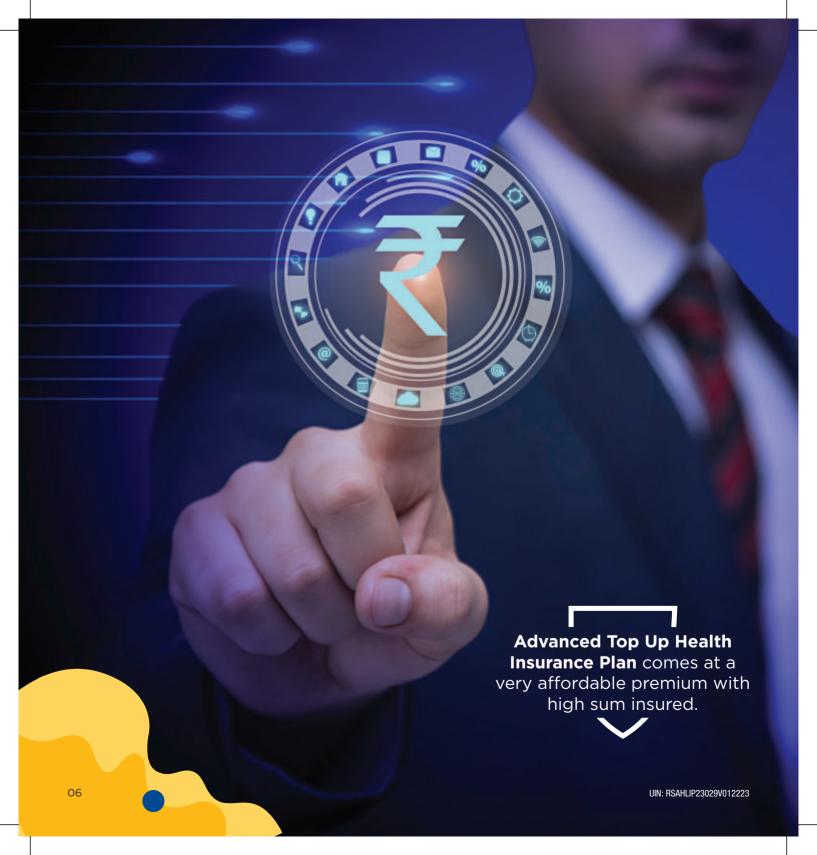
## **Pre-Hospitalization**

The company shall indemnify prehospitalization medical expenses incurred, related to an admissible hospitalization requiring inpatient care, for a fixed period of 60 days prior to the date of admissible hospitalization covered under the policy.



## **Post Hospitalization**

The company shall indemnify Post-hospitalization medical expenses incurred, related to an admissible hospitalization requiring inpatient care, for a fixed period of 90 days from the date of discharge from the hospital, following an admissible hospitalization covered under the policy.



## Key Benefits (continued)



#### **Day Care Treatments**

We will cover medical expenses of an insured person up to sum insured in case of any medically necessary day care treatment or surgery that require less than 24 hours hospitalization due to advancement in technology and which is undertaken in a hospital/day care centre on the recommendation of a medical practitioner. Any OPD treatment undertaken in a hospital/day care centre will not be covered. Pre and Post-hospitalization medical expenses are payable up to 30 days under this benefit.



UIN: RSAHLIP23029V012223

#### **Organ Donor Expenses**

We will cover inpatient care medical expenses towards the donor for the harvesting of the organ donated provided that:

- a) the organ donor is any person in accordance with the Transplantation of Human Organs Act, 1994 and other applicable laws.
- the organ donated is for the use of the insured person who has been asked to undergo an organ transplantation on medical advice.
- c) we have admitted a claim towards inpatient care. Organ donor expenses will be covered within the sum insured for the patient who is insured with us i.e. recipient of the Organ (who is undergoing the transplant).



## **Domiciliary Hospitalisation**

We will cover medical expenses up to sum insured for medical treatment taken at home if this continues for an uninterrupted period of 3 days and the condition for which treatment is taken would otherwise have necessitated hospitalization as long as either.

- the attending medical practitioner confirms that the insured person could not be transferred to a hospital or
- ii) the insured person satisfies us that a hospital bed was unavailable.

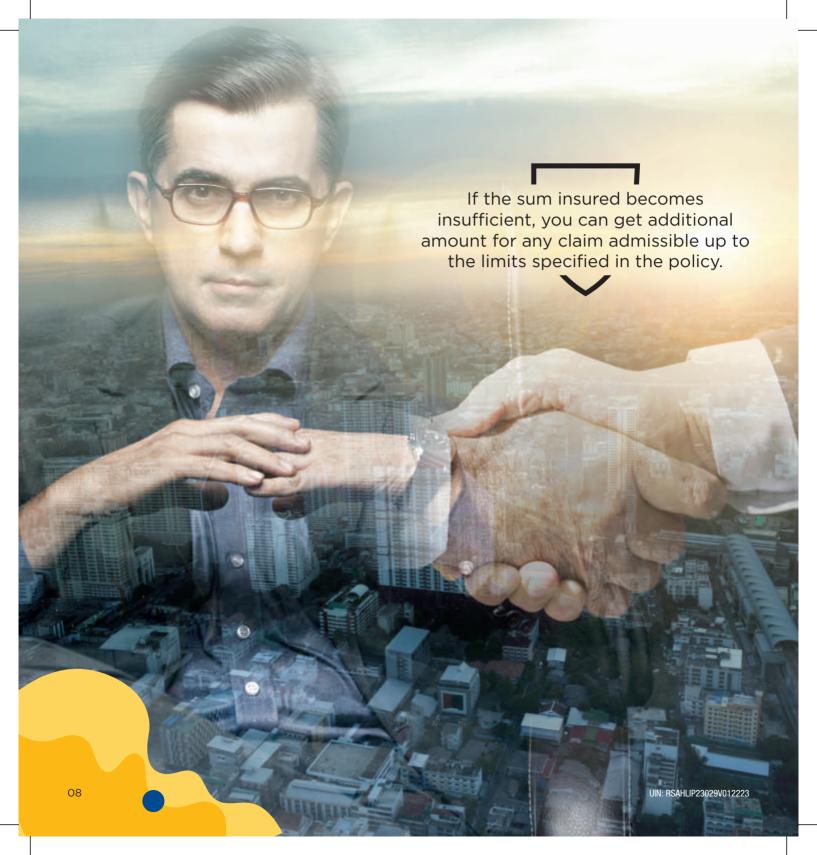
If a claim has been accepted under this benefit, the claims for pre and post-hospitalization medical expenses are payable up to 60 days and 90 days respectively under this benefit.



#### **Ayush Treatment**

The company shall indemnify medical expenses incurred for inpatient care treatment under Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy system of medicines during each policy year up to sum insured in any AYUSH Hospital.





## Key Benefits (continued)



## Ambulance Cover including App-based Cab cover

We will cover reasonable and customary charges for ambulance expenses that are incurred towards transportation of an insured person by surface transport following an emergency to the nearest hospital with adequate facilities.

We will also cover charges for app-based cabs service incurred towards transportation of an insured person at the time of getting admitted to the hospital.



#### **Second Opinion for 22 Critical Illness**

We will provide you a second opinion from medical practitioner, if an insured person is diagnosed with the critical illness during the policy period. the expert opinion would be directly sent to the insured person.



#### **Home Care Treatment**

We shall cover the treatment expenses up to the limits as specified in the Policy Schedule/ Product Benefit Table of this Policy for the insured person's treatment at his/her home in case of pandemic/endemic/ riots/insurgency

Home Care Treatment is limited up to ₹50,000 per event per insured person and ₹1 lakh per policy year per insured person.

Note: Home Care Treatment means treatment availed by the insured person at home which in normal course would require care and treatment at a hospital but is actually taken at home provided that:

- a) the medical practitioner advices the insured person to undergo treatment at home.
- b) there is a continuous active line of treatment with monitoring of the health status by a medical practitioner for each day through the duration of the home care treatment.
- daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained.

## **Claim Conditions**

- i) This benefit can be availed only after prior intimation made to us.
- ii) Requisite pre-authorisation is obtained from us for the said illness/injury.

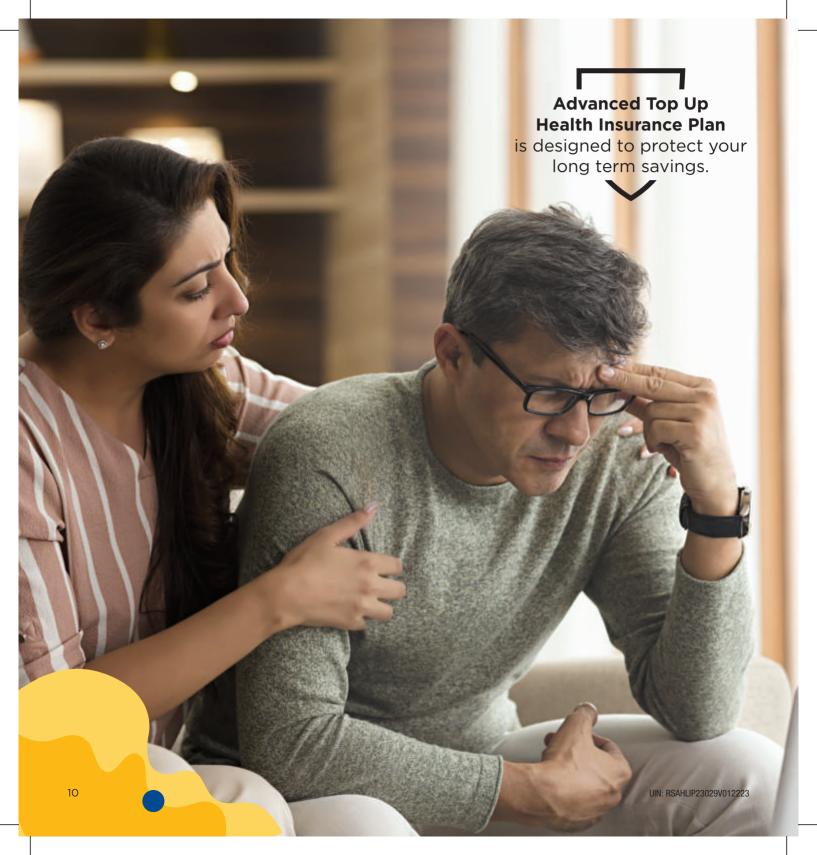
This can be availed only on reimbursement basis subject to prior intimation and approval from us.



#### **Life Protect Benefit**

In the event of life-threatening condition if the sum insured becomes insufficient, we will give additional amount for any claim admissible up to the limits specified in the policy.

- i) This benefit is available only in the event of life-threatening condition.
- ii) Certification by the treating medical practitioner of such life-threatening emergency condition is necessary.
- iii) Our maximum liability will be limited to 10% of sum insured per policy year.



## Eligibility

Policy can be availed for Self and the following family members

- Legally wedded spouse.
- Upto a maximum of 4 dependent Children (i.e. natural or legally adopted) between the age of 91 days to 25 years.

Proposer need not be mandatorily covered in the policy.

Adult: Minimum entry age is 18 years and maximum entry age is 65 years.

Children: The minimum entry age under this policy is between 91 days and 25 years.

The policy can be purchased on an Individual basis or on a Family Floater basis. In case of a family floater policy, one family will share a single sum insured as opted. A floater plan can cover self, spouse and dependent children up to age of 25 years. A floater cover can cover a maximum of 2 adults and 4 dependent children under a single policy. Only one member can be covered under an individual sum insured policy.

## **Policy Period Option**

Customer can buy the policy for one, two or three continuous years at the option of the Insured. 'One Policy Year' shall mean a period of one year from the date of issuance of the policy.

# Sum Insured and Deductible options

Customer has the option to choose from a wide range of Deductible and Sum Insured's available under this plan:

Deductible (₹)	Sum Insured (₹)
5 lakhs	10 lakhs, 15 lakhs, 20 lakhs, 45 lakhs, 70 lakhs, 95 lakhs
10 lakhs	15 lakhs, 40 lakhs, 65 lakhs, 90 lakhs
15 lakhs	10 lakhs, 35 lakhs, 60 lakhs, 85 lakhs
20 lakhs	30 lakhs, 55 lakhs, 80 lakhs
25 lakhs	25 lakhs, 50 lakhs, 75 lakhs
	<u> </u>

Sum insured is on annual basis. Deductible will be applied on the annual aggregate basis per policy year.

## **Premium**

The premium charged on the policy will depend on the sum insured, deductible, age, members covered in the family floater, policy tenure and optional cover opted. Premium payment can be made on annual basis. The premium can be loaded for optional benefit as opted by customers.

## **Discounts**

Customer can avail of the following discounts on the premium of their policy.

Discount on multiyear policy:-

- 6% discount for 2 years policy.
- 9% discount for 3 years policy.



## **Exclusions**

The Company shall not be liable to make any payment under the policy in connection with or in respect of following expenses till the expiry of waiting period mentioned below:

#### Pre-Existing Diseases (Code-Excl01)

Expenses related to the treatment of a Pre Existing Disease (PED) and its direct complications shall be excluded until the expiry of 36 months of continuous coverage after the date of inception of the first policy with us.

## 30 Days Waiting Period (Code-Excl03)

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, provided the same are covered.

## Specific Waiting Period (Code-Excl02)

Expenses related to the treatment of the following listed conditions, surgeries/treatments shall be excluded until the expiry of 24 months of continuous coverage, as may be the case after the date of inception of the first policy with the insurer. The exclusion shall not be applicable for claims arising due to an accident.

#### List of specific diseases/procedures is as under:

1) Cataract 2) Stones in biliary and urinary systems 3) Hernia / Hydrocele 4) Hysterectomy for any benign disorder 5) Lumps / cysts / nodules / polyps / internal tumours 6) Gastric and Duodenal Ulcers 7) Surgery on tonsils / adenoids 8) Osteoarthrosis / Arthritis / Gout / Rheumatism / Spondylosis / Spondylitis / Intervertebral Disc Prolapse 9) Fissure / Fistula / Haemorrhoid 10) Sinusitis / Deviated Nasal Septum / Tympanoplasty / Chronic Suppurative Otitis Media 11) Benign Prostatic Hypertrophy 12) Knee/Hip Joint replacement 13) Dilatation and Curettage 14) Varicose veins 15) Dysfunctional Uterine Bleeding / Fibroids / Prolapse Uterus / Endometriosis 16) Chronic Renal Failure or end stage Renal Failure or Chronic Liver Failure.

#### **Permanent Exclusions**

- Investigation and Evaluation: (Code-ExclO4)
- Rest Cure, rehabilitation and respite care: (Code- Excl05)
- Obesity/Weight Control: (Code-Excl06)
- Change-of-Gender treatments: (Code-Excl07)
- Cosmetic or Plastic Surgery: (Code-Excl08)
- Hazardous or Adventure Sports: (Code-Excl09)
- Breach of law: (Code-Excl10)
- Excluded Providers: (Code-Excl11)
- Treatment for, alcoholism, drug or substance abuse or any addictive condition and consequences thereof: (Code-Excl12)
- Treatments received in health hydro's, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons: (Code-Excl13)
- Dietary supplements and substances that can be purchased without prescription, i.e vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure: (Code-Excl14)
- Refractive Error: (Code-Excll5)
- Unproven Treatments: (Code-Exc116)
- Sterility and Infertility: (Code-Excll7)
- Maternity Expenses: (Code Excl18)

The above is an indicative list. For the complete list of exclusions, please refer to the detailed policy terms and conditions.

## Product Benefits - Advanced Top Up Health Insurance Plan

Deductible	Sum Insured (SI) ₹
5 lakhs	10 lakhs, 15 lakhs, 20 lakhs, 45 lakhs, 70 lakhs, 95 lakhs
10 lakhs	15 lakhs, 40 lakhs, 65 lakhs, 90 lakhs
15 lakhs	10 lakhs, 35 lakhs, 60 lakhs, 85 lakhs
20 lakhs	30 lakhs, 55 lakhs, 80 lakhs
25 lakhs	25 lakhs, 50 lakhs, 75 lakhs
Product Feature	Scope of Benefits
Inpatient Care	Covered upto sum insured
Modern treatments	Covered upto sum insured
Life Protect Benefit <sup>s</sup>	10% of sum insured per policy year

Pre and post hospitalization expenses

Day care procedures

Home Care treatment

Organ Donor Expenses

Domiciliary Hospitalization

**Ayush Treatment** 

Ambulance Cover including App-based Cab cover#

Second Opinion for 22 specified Critical Illness

Upto ₹50,000 per event per insured person and ₹1 lakh per policy year per insured person

60/90 days, covered upto sum insured

Covered up to sum insured (All Day Care Treatments), Pre and post-hospitalization medical expenses are Payable up to 30 days under day care procedures.

Covered upto sum insured

Covered upto sum insured, Pre and Post-hospitalization medical expenses are payable up to 60 days and 90 days respectively under domiciliary hospitalization

Covered upto sum insured

Covered upto ₹3000 per hospitalization.

Available once during policy year for 22 specified critical illnesses

continued

## Product Benefits - Advanced Top Up Health Insurance Plan

## Waiting Periods

Initial Waiting Period	30 days	
Pre-Existing Diseases waiting period	36 months	
Specific waiting period*	24 months	

## **Optional Benefit**

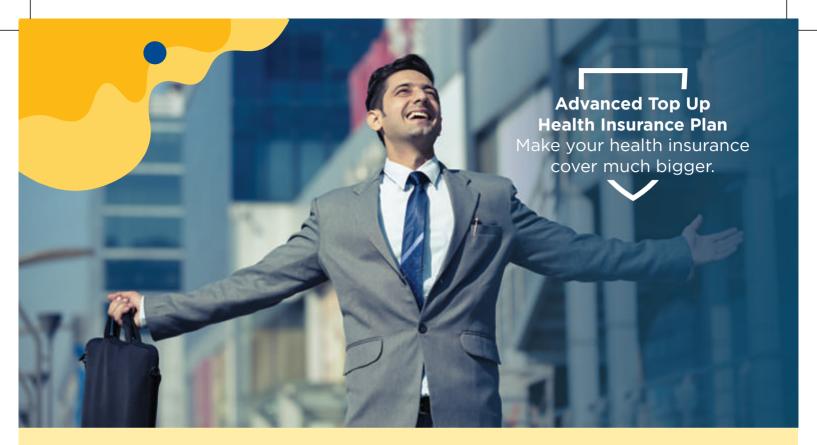
Reduction in Pre-Existing Diseases waiting period	Reduction in PED waiting period from	
	36 months to 24 months.	

#### Notes

- \* 24 months waiting period for the following illnesses:
  - a) Cataract
  - b) Stones in biliary and urinary systems
  - c) Hernia/Hydrocele
  - d) Hysterectomy for any benign disorder
  - e) Lumps/cysts/nodules/polyps/internal tumours
  - f) Gastric and Duodenal Ulcers
  - g) Surgery on tonsils / adenoids
  - h) Osteoarthrosis / Arthritis / Gout / Rheumatism / Spondylosis / Spondylitis / Intervertebral Disc Prolapse

- I) Fissure / Fistula / Haemorrhoid
- i) Sinusitis / Deviated Nasal Septum / Tympanoplasty / Chronic Suppurative Otitis Media
- k) Benign Prostatic Hypertrophy
- I) Knee/Hip Joint replacement
- m) Dilatation and Curettage
- n) Varicose veins
- o) Dysfunctional Uterine Bleeding / Fibroids / Prolapse Uterus / Endometriosis
- p) Chronic Renal Failure or end stage Renal Failure or Chronic liver failure
- \$ This can be used in case of Life Threatening Conditions only and once in a policy year. This is an additional benefit over & above Sum Insured.
- # To and fro hospital Cab Fare on producing the app-based Cab Bill up to the limit specified. Not applicable for day care procedures.

- ·· -			
Policy Tenure	1/2/3 years		
Cover Type	Individual/ Family Floater covering 2 adults and up to 4 children		
	(Proposer need not to be covered in the same policy)		
Entry age	Adult: 18 years to 65 years		
	Dependent Children: 91 days to 25 years (After 25 years, dependent children		
	will be covered as adults in a separate policy)		
Room Rent	No room rent capping		
Discount on	6% discount for 2 years policy		
Multiyear policy	9% discount for 3 years policy		



#### Disclaimer

Advanced Top Up Health Insurance Plan is an IRDAI approved product with UIN-RSAHLIP23029V012223, which is underwritten and serviced by Royal Sundaram General Insurance Co. Limited. This brochure is not a contract of Insurance. Please refer policy document for exact terms and conditions and specific details applicable to this Insurance. Your participation in this insurance product is purely on a voluntary basis. We advise you to take your own professional advice before you participate.

Section 41 of the Insurance Act, 1938 - Prohibition of rebates

- 1) 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 prospectus or tables of the insurer.
- 2) Any person making default in complying with the provisions of this section shall be liable for penalty which may extend to ten lakh rupees.

Royal Sundaram IRDAI Reg. No.102 CIN: U67200TN2000PLC045611

## Call **1860 425 0000**

Visit www.royalsundaram.in

Royal Sundaram General Insurance Co. Limited Corporate Office: Vishranthi Melaram Towers, No. 2 / 319, Rajiv Gandhi Salai (OMR), Karapakkam, Chennai - 600097.

Registered Office: 21, Patullos Road, Chennai - 600 002.

