

Optima **SUPER**



**THERE'S A BIG
INSURANCE
HIDING INSIDE A
SMALL ONE.**



Firstly, you pay a nominal premium for the top-up that helps you cover higher medical spends.

Secondly, when you retire (or even at the 6th policy anniversary), it gives you an option to shift to a regular plan with nil deductible.

WHAT IS UNIQUE ABOUT IT?

Optima Super is an aggregate top up plan that allows you to enhance your sum insured as per your need at a lower cost. Unlike many top up plans, you do not have to cross the deductible limits at every claims incidence but can aggregate them during a policy period over multiple hospitalizations.

Optima Super comes with the unique benefit where one can choose to convert the top up plan into a regular (nil deductible) health insurance plan. This makes Optima Super best suited for individuals with group cover and low sum insured policies.

Optima Super also offers a life long Renewal Benefit and comes with the added option of availing a single cover for your entire family (family floater).

SWITCH OPTION (WAIVER OF DEDUCTIBLE):

Optima Super gives its customer an unique option of converting into a full-fledged nil deductible plan by using the Waiver of Deductible benefit. It is hassle free with no underwriting or medical tests. This benefit comes with added advantage like:

- Reduction in Waiting Period : You bid goodbye to tiresome waiting periods (whether it's the initial 30 days or 2 years for specific diseases or pre-existing conditions) by the number of years you have completed with us.
- Your deductible is waived off and you are covered from the first rupee.

This option for waiver of Deductible (Switch benefit) can be exercised by you only at the time of renewal between the age of 55 and 60 years or at the beginning of 6th policy year; provided that it has been bought before 50 years of age and has renewed with us continuously and without any interruption

SO WHO'S IT FOR?

The design and benefits of this plan make it the perfect match for you, if

- You are looking to increase your current individual health insurance coverage or add to your current company provided coverage
- You have a company provided cover that may cease due to retirement or change of job. Invest little now and switch when you need.
- You are only looking for coverage over a specified rupee amount.

Sum Insured Options (in Rs.)

500,000	700,000	10,00,000
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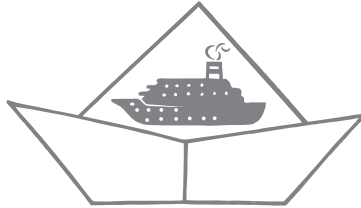
Deductible Options (in Rs.)

100,000	200,000	300,000	400,000
500,000	600,000	700,000	10,00,000

BENEFITS

The policy pays for the benefits mentioned below, exceeding the deductible opted by you.

- a. In-patient Treatment - Hospitalisation expenses due to an illness or accident.
- b. Pre-Hospitalisation - Medical expenses incurred in 60 days immediately before hospitalisation.
- c. Post-Hospitalisation - Medical expenses incurred in 90 days immediately after discharge from hospital.
- d. Day care procedures - Coverage for enlisted 144 day care procedures which do not require 24 hours hospitalization.
- e. Organ Donor - Medical expenses for harvesting of the organ donated to the Insured person.
- f. Ambulance Service - Expenses up to Rs. 2000 per hospitalization.



WHAT IS A DEDUCTIBLE?

“Deductible” means a cost-sharing requirement under a health insurance policy where the insurance company will not be liable for eligible medical expenses up to a specified rupee amount, that incur in a policy year, as opted i.e. it is the amount upto which the insurance company will not pay for all the claims incurred in a policy year under the policy.

- The Deductible will apply on Individual basis in case of Individual Policy and on Family Floater basis in case of Family Floater Policy.
- A Deductible does not reduce the Sum Insured.

i.e. Apollo Munich will only be liable for any payment where the Medical Expenses exceed the Deductible amount selected by you.

Example of Deductible:

Mr. X has policy (Policy Period - 1st Jan 2014 to 31st Dec 2014) with Sum Insured of Rs. 500,000 and with a deductible of Rs. 500,000.

Scenario 1: For multiple claims in a year

- ✓ In May 2014, he is hospitalized and a claim is filed for Rs. 400,000. Claim is not admissible in this scenario since his deductible is Rs. 500,000.
- ✓ In June 2014, he is hospitalized and a claim is filed for Rs. 200,000. As the total claims under the policy for the year is Rs. 6,00,000 (4,00,000 +2,00,000), he is eligible to claim for Rs. 1,00,000 (i.e. Rs. 6,00,000 - Rs. 5,00,000)

Scenario 2: For a single claim

- ✓ In May 2014, he is hospitalised and a claim for Rs. 6,00,000 is filed, in this scenario claim payment will be made for Rs. 100,000 [Rs. 6,00,000-Rs. 5,00,000].

ELIGIBILITY - WHO CAN BE COVERED?

- a. This policy covers persons in the age group 91 days to 65 years. The maximum age at entry is upto 65 years.
- b. Dependent children between 91 days to 5 years can be covered if either parent is covered under the same policy.
- c. There is no maximum cover ceasing age on renewals.
- d. This policy can be issued to an individual and/or family.
- e. The family includes self, spouse, dependent children and dependent parents.
- f. In a family floater policy, a maximum of 2 adults and a maximum of 2 children can be included in a single policy. The 2 adults can be a combination of Self, Spouse, Father or Mother.
- g. In a family floater the age of the eldest member will be considered while computing premium for the family.
- h. In an individual policy, a maximum of 6 members can be added in a single policy, a maximum of 4 adults and a maximum of 5 children can be included in a single policy. The 4 adults can be a combination of Self, Spouse, Father or Mother.

VALUE ADDED SERVICES

We offer you a range of value-added services to promote your well-being, prevent illnesses as well as make hospitalization stress-free for you and your family.

Healthline - Just ring us and quote your customer ID to reach our experts and avail their help in primary consultation, health-related counseling, individual referrals, health information, nutrition and diet. The services on the Healthline would be available at no extra cost to the customers. They will be constantly augmented to cover further areas of health and wellbeing to include personalized health and wellness solutions.

Cashless Hospitalisation - In addition to reimbursement of claims at all hospitals, the Optima Super Plan is valid on a cashless basis in over 4000 hospitals listed in the guide book to be sent along with the policy and updated periodically on our website www.apollomunichinsurance.com. You need to obtain a pre-authorization for all planned admissions at least 48 hours prior to actual admission or regularize any 'emergency' admission within 24 hours post the admission. The details of the process and the documentation requirements are given in the guide-book sent along with the policy.

Health Risk Assessment - Every Apollo Munich Health Insurance customer will be provided with an access to a health risk assessment tool, which helps to profile each member's health status through our website. Upon assessment, members will be offered personalized wellness recommendations on diet, lifestyle and nutrition regimen.

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 4 years
- Expenses arising from HIV or AIDS and related diseases
- Congenital diseases, mental disorder or insanity, cosmetic surgery and weight control treatments
- Abuse of intoxicant or hallucinogenic substances like intoxicating drugs and alcohol
- Hospitalization 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
- 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.

POLICY PERIOD

The policy will be issued for 1 year/2 years period after which it needs renewal.

DISCOUNT

- a. Family Discount of 10% if 2 or more family members are covered under Optima Super Individual Sum Insured plan.
- b. An additional discount of 7.5% is offered on premium if you choose a 2 year policy and pay 2 years premium in advance as single premium.

TAX BENEFIT

The premium amount paid under this policy qualifies for deduction under Section 80D of the Income Tax Act. Consult your Tax Advisor for applicable benefits. Tax benefits are subject to changes in Tax Laws.

TERMS OF RENEWAL



- We offer life-long renewal unless the Insured Person or any one acting on behalf of an Insured Person has acted in an improper, dishonest or fraudulent manner or any misrepresentation under or in relation to this policy or the Policy poses a moral hazard then the Policy shall be cancelled ab-initio from the inception date or the renewal date (as the case may be), or We may modify the Policy In case a claim is made under such Policy, it shall be rejected/repudiated and all benefits payable under such Policy shall be forfeited with respect to such claim.
- 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 Optima Super Insurance Policy.
- Renewal premium are subject to change with prior approval from IRDA. 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 atleast 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 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.

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 upto 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.

PORTABILITY

If you are insured continuously and without interruption under a health insurance plan issued by an Indian non life insurer and you want to shift to us on renewal Optima Super policy offers you transfer of accrued benefits and make due allowances for waiting periods, provided the policy has been maintained without a break as per portability guidelines.

FREE LOOK CANCELLATION

We offer a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy. If case of any objections, you have the option to cancel the Policy and you shall be refunded the premium paid by you after adjusting the amounts spent on any medical check-up, stamp duty charges and proportionate risk premium.

REACH US

Apollo Munich Health Insurance Co. Ltd.

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The Apollo Hospitals Group, Asia's largest healthcare provider and Munich Health, world leaders in health insurance, come together to make quality healthcare easy and accessible. Simple language, clear policies, transparent procedures and innovative products, making health insurance the way it ought to be. **We know healthcare. We know insurance.**

We also offer Travel and Personal Accident Insurance.

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 >

Prohibition Of Rebates (under section 41 of Insurance Act, 1938): 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 punished with fine, which may extend to five hundred rupees.

Insurance is the subject matter of solicitation. For more details on risk factors, terms and conditions please read sales brochure carefully before concluding a sale. • IRDA Registration Number - 131

• Corporate Identity Number: U66030AP2006PLC051760