

Optima **VITAL**



37 COVERING
CRITICAL
ILLNESSES



An orange shield-shaped graphic with a white border, centered on a white background. Inside the shield, there are two lines of white text.

**Lumpsum payout
irrespective of actual cost
of treatment.**

**Benefits provided
in addition to payouts under
any other plan.**

WHY YOU NEED IT

Today we live in a fast paced and progressive world that sometimes takes away more than it gives. Changing lifestyles are making Indians increasingly fall prey to the non-communicable critical illnesses such as cancer, heart stroke, hypertension, diabetes etc. These critical illnesses are always associated with an increased cost of treatment along with a long and expensive recovery process. A basic health insurance policy may not be sufficient to cover all medical costs, especially in case of critical illness or accident which require a long term treatment. This financial burden needs to be supported by a special financial protection plan, Optima Vital is our unique critical illness insurance policy that protects you financially in the event of any of the listed critical illnesses occurring.

KEY BENEFITS

- Optima Vital insurance will pay you a lumpsum amount for the 37 identified critical illness, medical events or surgical procedures.
- This amount is payable on confirmed diagnosis with defined severity of the illness or the date of undergoing specified surgery in respect of that critical illness.
- An e-opinion is also provided, in case required, from Our panel doctor in respect of a critical illness.
- You are eligible to receive the benefit amount in addition to any payment received from another insurance policy.
- The policy offers you lifelong renewal.

(The policy shall terminate on first occurrence of any one of the defined critical illness.)

Sum insured would range from: Rs. 100,000 to Rs. 5,00,000 in multiples of 1 Lac and thereafter till Rs. 50,00,000 in the multiple of 5 lacs. The maximum sum insured available above 55 years of age is restricted upto Rs. 20,00,000.

Critical illnesses covered under the policy

Optima Vital insurance will pay the insured person the sum insured as a lumpsum amount for the identified critical illness, medical events or surgical procedures listed below

(The Insured Person must survive 30 days from the date of confirmed diagnosis and defined severity)

1. Cancer of specified severity
2. Kidney failure requiring regular dialysis
3. Multiple sclerosis with persisting symptoms
4. End stage liver disease of specified severity
5. First heart attack of specified severity
6. COMA of specified severity
7. Major burns
8. Goodpasture's syndrome
9. Apallic syndrome
10. Aplastic anaemia
11. Systemic lupus erythematosus
12. Bacterial meningitis
13. Multiple system atrophy
14. Progressive scleroderma

(Insured person must survive 30 days from the date of actual undergoing of the below procedures)

15. Open chest CABG
16. Major organ/bone marrow transplant
17. Aorta graft surgery
18. Open heart replacement or repair of heart valve
19. Pneumonectomy
20. Pulmonary artery graft surgery

(Insured Person must survive 90 days from the date of confirmed diagnosis of below defined events)

21. Primary parkinson's disease
22. Alzheimer's disease
23. Motor neuron disease with permanent symptoms
24. Stroke resulting in permanent symptoms
25. Permanent paralysis of limbs
26. Primary pulmonary arterial hypertension
27. Benign brain tumour [resulting in permanent neurological symptoms]
28. Cardiomyopathy
29. End stage lung disease
30. Brain surgery
31. Progressive supranuclear palsy
32. Creutzfeldt-jakob disease (CJD)
33. Major head trauma
34. Encephalitis

(Insured person must exhibit permanent impairment for 6 months from the occurrence of the event)

35. Blindness
36. Deafness
37. Total loss of speech

Important Note: Please refer to the policy wording to learn more details regarding the specific definitions and listed conditions required to be fulfilled while accepting a critical illness claim.

ELIGIBILITY

- This policy covers persons in the age group of 18 years onwards. A dependent child can be covered from from 18 years to 25 years provided both parents are covered in a critical illness policy of an Indian Insurer. The maximum age at entry is 65 years.
- There is no cover ceasing age under this policy.
- The policy will be valid for a period of 1 or 2 year(s) as opted. A 7.5% discount is offered on opting for a 2 year policy.
- An individual and/or his family members namely spouse, dependent children, dependent parents are eligible for buying this policy.
- The policy will be issued on individual sum insured basis only.

A maximum of 6 members can be added in a single policy. In an individual 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 and parents.

OTHER BENEFITS

E-opinion : On request of the insured person diagnosed with a critical illness, We will arrange for a second opinion from a medical practitioner selected by the insured person from Our panel. This benefit can be availed once in a policy year.

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.

Tax Benefit : With the critical illness insurance plan you can currently avail tax benefits for the premium amount under Section 80D of the Income Tax Act. (Tax benefits are subject to changes in Tax Laws)

HOW TO AVAIL BENEFIT UNDER THIS POLICY

Critical Illness

- You must intimate us within 14 days of diagnosis of first occurrence of critical illness.
- You must submit a duly filled claim form along with specified documents within 45 days of completion of survival period for the critical illness against which the claim is made.
- Any additional information requested must be submitted within 15 days of our request.

E-opinion

- Please submit duly filled claim form along with the copy of all medical reports including investigation reports and discharge summary (if any) at any of our branch office.
- You need to select our panel doctor from whom you would prefer to take the second opinion. (Please refer our website or call at 24X 7 toll free line to obtain the list of our panel doctors).
- On receipt of the complete set of documents, we will forward the same to the concerned doctor.

EXCLUSIONS

- All illnesses & treatments within the first 90 days of the cover.
- Any pre existing condition will be covered after a waiting period of 48 months.
- Any critical illness in presence of HIV infection and / or any AIDS.
- Congenital internal and external diseases, defects or anomalies.
- Abuse of intoxicant or hallucinogenic substances like intoxicating drugs and alcohol.
- War or an act of war or due to a nuclear, chemical or biological weapon and radiation of any kind.
- Any treatment arising from pregnancy (including voluntary termination), miscarriage, maternity or birth (including caesarean section).

Please refer to the Policy Wording for the complete list of exclusions.

TERMS OF RENEWAL

- Lifelong 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.
- 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 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 Vital policy.
- Renewal Premium – 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 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 as per portability guidelines issued by IRDA.
- Change of Sum Insured - Change in sum insured can be only done at the time of renewal subject to underwriting guidelines. In case of enhancement in the basic sum insured the waiting period will apply afresh in relation to the amount by which the basic sum insured has been enhanced. However the quantum of enhancement shall be at sole discretion of underwriting. In case of a claim during the waiting period on the enhanced sum insured, the basic sum insured would be paid and the policy will cease with no subsequent renewals.
- The sum insured is on yearly basis for both annual and 2 year policy,
- Any insured person in the policy has the option to migrate to similar insurance policy available with us at the time of renewal subject to underwriting with all the accrued continuity benefits such as waiver of waiting period etc. provided the policy has been maintained without a break as per portability guidelines issued by IRDA
- Please note that your premium at renewal may change due to change in your age or changes in the applicable tax rate
- The premium for the policy will remain same for the policy period mentioned in the policy schedule.

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 50% 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.

VALUE ADDED SERVICES

We offer you a range of value-added services to promote your well- being and help you and your family enjoy a stress free life

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.

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.

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