



WITH YOU ALWAYS

# Because your health deserves 5x more coverage



INTRODUCING

TATA AIG  
Health  
SuperCharge

VALUE PLAN



We understand that your family's welfare is your utmost concern. That's why our newly introduced TATA AIG Health Supercharge policy includes a **5X Supercharge Bonus** cover for your maximum health protection. Also, if all the insured persons are of age 40 years or below at the time of first inception of the policy, you can even enjoy an extra discount of 5%. Don't wait, act now and secure your family's future!

## Key Features



### 5X Supercharge Bonus

Offers bonus of 50% of the base Sum Insured of our expiring Policy, on each Renewal, irrespective of claims in preceding Policy Years. The 5X Supercharge Bonus can get accumulated maximum upto 500% of the base Sum Insured in any Policy Year, provided that the Policy is renewed with Us without a break.



### Medical Devices Cover

Covers expenses incurred by the Insured Person towards renting or purchase of Crutches, Wheel chair, Walker, Walking stick and Lumbo-sacral belt, during the Policy year, if the same is prescribed by the treating Medical Practitioner post Hospitalization.



### Restore Benefit

Automatically reinstates 100% of the Sum Insured, once during the Policy Year, if the balance Sum Insured and accrued 5X Supercharge Bonus is insufficient to pay an admissible claim.



### Wellness Services

Provides below mentioned wellness services:

1 | Teleconsultation – General

2 | Teleconsultation – Specialty

3 | Ambulance Booking Facility

4 | Emergency Help Me Feature

5 | Redeemable Voucher/Discount on Services

6 | Health Condition Management



### Wellness Program

Offers a wellness program designed to promote wellness and fitness amongst the insured persons through:

- i. Health risk assessment
- ii. Reward accumulated through fitness activities can be converted into monetary value which can be utilized towards the payment of services / items under below categories

1 | OPD Consultation / Treatment

2 | Pharmaceuticals

3 | Health Check – ups / Diagnostics

4 | Health Supplements



### Advanced Cover (Optional)

This cover will reduce 'Pre – existing Diseases Waiting Period (Code - Excl 01)' for the following named pre – existing diseases from 48 months to 30 days:

1 | Diabetes Mellitus (Type 2)

2 | Hypertension

3 | Hyperlipidemia

4 | Asthma

## Benefit Table

Plan Name	Value Plan
Availability	Pan India
Sum Insured (in ₹)	5 / 7.5 / 10 / 15 / 20 Lacs
Benefit Name	Coverage Limit
In – Patient Treatment	Upto Sum Insured
Pre – Hospitalization Expenses	Upto 90 Days
Post – Hospitalization Expenses	Upto 90 Days
Day Care Treatment	Upto Sum Insured
Domiciliary Treatment	Upto Sum Insured
Organ Donor	Upto Sum Insured
AYUSH Benefit	Upto ₹50,000 per policy year
Road Ambulance Cover	Upto ₹1,000 per hospitalization
Restore Benefit	Available
Compassionate Travel	Upto ₹10,000 per policy year, over and above base Sum Insured
Prolonged Hospitalization Benefit	₹10,000 per policy year, over and above base Sum Insured, subject to Hospitalization for a continuous period exceeding 10 days at Our Network of Valued Provider - Pan India
Medical Devices Cover	Upto ₹5,000 per policy year as per the list, over and above base Sum Insured
Vaccination Cover	Upto ₹10,000 per policy year as per the list, over and above base Sum Insured
Second Opinion	Available for listed medical conditions
Wellness Services	<ul style="list-style-type: none"> <li>i. Unlimited Teleconsultation – General</li> <li>ii. Unlimited Teleconsultation – Specialist</li> <li>iii. Ambulance Booking Facility</li> <li>iv. Emergency – Help me Feature</li> <li>v. Redeemable Voucher/Discount on Services</li> <li>vi. Health Condition Management</li> </ul>
Wellness Program	Available
5X Supercharge Bonus	50% of the base Sum Insured of our expiring Policy, on each Renewal of the Policy, irrespective of claims in preceding Policy Years, maximum upto 500% of the base Sum Insured in any Policy Year
Room Eligibility	<p>Room Rent upto ₹5,000 per day</p> <p><i>Proportionate deduction of Associated Medical Expenses applicable in case insured person is admitted in a room whose room rent is higher than the eligible room rent.</i></p>

<b>Network Applicable</b>	<p>Valued Provider – Pan India</p> <p><i>‘Valued Provider – Pan India’ is a specific network of Hospitals or health care providers enlisted by Us, and / or TPA to provide medical services to an Insured Person by a Cashless Facility. Under this Plan, You are eligible for ‘Valued Provider – Pan India.</i></p> <p><i>The “Valued Provider – Pan India” network list is different from Our standard list of “Network Provider”. The standard list of Network Provider shall not be applicable to the Insured Person, if covered under Value Plan.</i></p> <p><i>The updated list of Valued Provider – Pan India is available on Our website (www.tataaig.com).</i></p>
<b>Cost Sharing</b>	
<b>Age Linked Co-Payment</b>	If the entry Age of the Insured Person is 61 years or above at the time of first coverage under this Policy, then such Insured Person shall bear 20% of each admissible claim.
<b>Co-payment for treatment availed out of Our Network of Valued Provider – Pan India</b>	Under this plan, if the Insured Person avails treatment outside Our network of “Valued Provider – Pan India”, then a Co – Payment of 30% will be applicable for each such claim resulting from admission of the Insured Person in a Hospital / Day Care Centre / AYUSH Hospital except for Hospitalization for an Injury arising from an Accident.

### Mandatory Sub-Limits

<b>(Ailment / Surgical Procedure)</b>	Annual Sub-limit, as applicable to each Insured Person based on the Sum Insured (in ₹)				
	5 Lacs	7.5 Lacs	10 Lacs	15 Lacs	20 Lacs
Cataract Surgery (per eye)	45,000	60,000	90,000	1,30,000	1,75,000
Balloon Sinuplasty / FESS	30,000	40,000	55,000	85,000	1,10,000
Oral chemotherapy	85,000	1,15,000	1,65,000	2,50,000	3,30,000
Immunotherapy – Monoclonal Antibody all forms	1,40,000	1,95,000	2,75,000	4,15,000	5,50,000
Robotic surgeries	1,40,000	1,95,000	2,75,000	4,15,000	5,50,000
Stem cell therapy for Hematopoietic stem cells for bone marrow transplant for hematological conditions	1,40,000	1,95,000	2,75,000	4,15,000	5,50,000
Total Knee Replacement (per knee)	1,65,000	1,75,000	1,80,000	2,15,000	2,30,000
Any type of Hernia Surgery	70,000	75,000	75,000	95,000	1,00,000
Any type of Hysterectomy	70,000	75,000	75,000	95,000	1,00,000
Benign Prostate Hypertrophy	70,000	75,000	75,000	95,000	1,00,000
Stones of Renal System	70,000	75,000	75,000	95,000	1,00,000

*Note: These are brief summary of coverages / benefits. For further details on benefits, limits, sub - limits, co - payments, terms, conditions, please refer to the policy wordings on our website (www.tataaig.com).*

*TATA AIG Health Supercharge also offers Geo Plan for customers from Zone B & Zone C.*

## Premium Calculation

- The premium will be charged on the completed age of the Insured Person.

- For family floater, premium is calculated by adding the premium of respective individual members and applying family floater discount.

## Discounts on Premium

### A Young Family Discount – 5%

- Provided all the Insured Persons covered are of age of 40 years or below at the time of first inception of the policy.
- This discount will be effective from the first year of the policy and will continue, irrespective of claims.

### B 5% and 10% long term discount in case insured opts policy term of 2 years and 3 years respectively.

### C Family floater discount:

2 members – 20%

3 members – 28%

3+ members – 32%

### D 10% discount to all TATA Group employees\*

*Note: The total of above mentioned discount(s) will be applied on the base premium and shall not exceed 40% under any Policy.*

*\*Subject to Terms & Conditions*

## Exclusions<sup>#</sup>

### Medical Exclusions

- Congenital External Diseases, defects or anomalies
- Alcoholic pancreatitis or Alcoholic liver disease;

### Non - Medical Exclusions

- Intentional self – injury or attempted suicide while sane or insane.
- Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.
- Treatment rendered by a Medical Practitioner which is outside his discipline

*#Please refer to the policy wordings for complete list of benefits, exclusions, limitations, terms and conditions.*

## Waiting Period

- Policy coverage for treatment of any illness starts after 30 days from the first inception of the policy (except accident).
- Listed illnesses / treatments will be covered after a waiting period of 24 months.
- Pre - existing condition will be covered after a waiting period of 48 months.

## Terms and Conditions

- Minimum entry age – 91 Days and Maximum entry age – 65 years. Dependent children between 91 days and 5 years can be insured only when both parents are getting insured.
- Policy Tenure Options – 1 / 2 / 3 Years.
- The policy offers coverage only on family floater basis.
- Relationships covered – Self, spouse and up to 3 dependent children, up to 2 parents and up to 2 parent – in – laws.
- You have a period of 15 days from the date of receipt of the policy document to review the policy terms and conditions. In case of any policy related objections, you have the option to cancel the policy and premium would be refunded as per the free – look cancellation clause mentioned in the policy.
- We may apply risk loading based on individual's health status.
- There will be no premium refund in case of cancellation due to non – disclosure of material facts, mis – representation or fraud.
- Grace period of 30 days from the policy expiry is available. Coverage is not available during the grace period.
- In case you want to port your policy to Us, apply at least 45 days prior to policy renewal date and IRDAI portability guidelines shall apply.

## Possibility of Revision of Terms of the Policy Including the Premium Rates

The Company, as per IRDAI process, may revise or modify the terms of the Policy including the premium rates. The Policyholder shall be notified three months before the changes are effected.

## Pre – Policy Medical Check – Up

- Pre – Policy Check – up at our network is required. The medical reports are valid for a period of 90 days from the date of Pre – Policy Check – up.
- The Company may conduct Tele MER / Video MER / Pre – Policy Check – up based on age / Sum Insured medical declaration or any other underwriting criteria.
- In case of adverse medical declaration, we may call for additional medical tests. We may conduct medical tests at diagnostic centre based on medical disclosure wherever applicable.
- At least 50% of pre – policy medical checkup cost would be borne by TATA AIG in case Pre – Policy Check – Up (PPC) is conducted and proposal is accepted.

## Premium Chart

PER PERSON ANNUAL PERMIUM IN ₹ (EXCLUSIVE OF GST)

Value Plan					
Age (in years) / Sum Insured	5 Lacs	7.5 Lacs	10 Lacs	15 Lacs	20 Lacs
91 Days - 17	5,136	5,385	5,422	6,145	6,636
18 - 35	8,067	8,463	8,523	9,676	10,458
36 - 40	9,537	10,005	10,075	11,440	12,367
41 - 45	10,156	10,656	10,730	12,187	13,176
46 - 50	13,973	14,657	14,753	16,761	18,126
51 - 55	18,483	19,388	19,514	22,174	23,982
56 - 60	22,621	23,729	23,884	27,145	29,362
61 - 65	31,739	33,223	33,394	37,910	40,993
66 - 70 <sup>^</sup>	43,909	45,965	46,208	52,480	56,761
71+ <sup>^</sup>	61,467	64,322	64,650	73,431	79,425

<sup>^</sup>Premium rates for age above 65 is for renewal.

## Advanced Cover (Optional)

Age (in Years) / Sum Insured	5 Lacs	More than 5 Lacs
Upto 45	50%	40%
46 and above	60%	50%

Above mentioned loading rates to be applied on member level as a percentage of base premium.

Advanced Cover can be availed by the insured persons only at Inception of first policy/coverage.

## Tax Benefit

The premium amount paid under this policy qualifies for deduction under Section 80D of Income Tax Act further amendments. This benefit is applicable for premium paid through modes as approved by relevant regulatory body. Tax benefits are subject to changes in Income Tax Law.

## Claim Procedure

Every claim needs to be notified to Us either in writing or email or through a call to Our tollfree number within the stipulated timelines. Timely intimation of claim is a pre - condition for admission of liability.

**Intimation & Assistance:** Please contact our designated TPA / Us atleast 48 hours prior to an event which might give rise to a claim. For any emergency situations, kindly contact our TPA / Us within 24 hours of the event.

**Claim related information:** For any claim related query, intimation of claim and submission of claim related documents, the Policyholder / Insured Person can contact us through:

- **Name of Claims Administrator** : TAGIC Health Claims
- **Website** : [www.tataaig.com](http://www.tataaig.com)
- **Email** : [general.claims@tataaig.com](mailto:general.claims@tataaig.com)
- **Toll Free** : 1800 266 7780  
: 1800 22 9966 (for Senior Citizens)
- **Submit Claim** : A&H Claims Department,  
TATA AIG General Insurance Co. Ltd.,  
5th and 6th Floor, Imperial Towers, H.No 7 - 1 - 6 - 617 / A,  
No - GHMC 615,616, Ameerpet, Hyderabad - 500016,  
Telangana,  
Phone - 040 - 66864900

## Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015

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

## Section 64 VB of the Insurance Act, 1938

Commencement of risk cover under the policy is subject to receipt of premium by TATA AIG General Insurance Company Limited.



# Grievance Redressal Procedure

As per regulation 17 of IRDA of India (Protection of Policyholders' Interests) Regulation, 2017.





**WITH YOU ALWAYS**

# Trusted Naam, Fantastic Kaam!

**Disclaimer:** Insurance is a subject matter of solicitation. For more details on plan options, benefits, optional covers, co-payments, exclusions, limitations, terms and conditions, please read policy wordings carefully available on our website [www.tataaig.com](http://www.tataaig.com) before concluding a sale.

## **TATA AIG General Insurance Company Limited**

Registered Office: Peninsula Business Park, Tower A, 15th Floor, G.K. Marg, Lower Parel, Mumbai – 400013 | 24x7 Toll Free No: 1800 266 7780 or 1800 229966 (For Senior Citizens) | Email: [customersupport@tataaig.com](mailto:customersupport@tataaig.com) | Website: [www.tataaig.com](http://www.tataaig.com) | IRDA of India Registration No: 108  
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