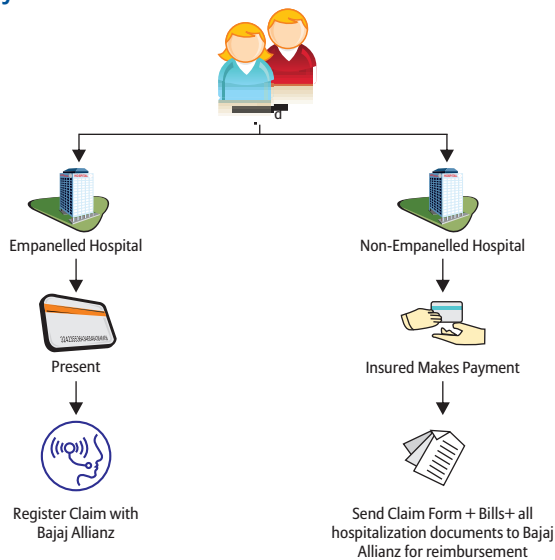


What would be my premium cost?

Sum Insured/ Deductible	Number of members	90 days - 40yrs	41yrs - 60yrs	61yrs - 80yrs
Plan A 1000000/300000	1 MEMBER	2500	3750	5900
	2 MEMBERS	3500	5250	8100
	3 MEMBERS	4025	6038	9255
	4 MEMBERS	4430	6645	10145
	5 MEMBERS	4870	7305	11115
Plan B 1200000/400000	1 MEMBER	4500	5500	7900
	2 MEMBERS	5850	7150	10150
	3 MEMBERS	6435	7865	11125
	4 MEMBERS	7080	8655	12200
	5 MEMBERS	7645	9345	13145
Plan C 1500000/500000	1 MEMBER	4750	5750	8150
	2 MEMBERS	6175	7475	10475
	3 MEMBERS	6795	8225	11485
	4 MEMBERS	7475	9045	12595
	5 MEMBERS	8070	9770	13570

Service tax extra

What would be the process in case of a claim under my Extra Care policy?



- The Claim under cashless and reimbursement would be admissible in excess of the deductible limit, subject to terms, conditions, exclusions & definitions as per the policy wordings.
- The proof of settlement of the deductible amount has to be produced at the time of claim in case of any other existing insurance policy.

**Disclaimer: The above information is indicative in nature and for more details on the coverage, terms and exclusions please get in touch with our nearest office.*



For Claims & other information call us on our toll free no.

1 - 800 - 209 - 5858

(free calls from any mobile / landline)



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Bajaj Allianz General Insurance Company Limited is a joint venture between Bajaj Finserv Limited (recently demerged from Bajaj Auto Limited) and Allianz SE. Both enjoy a reputation of expertise, stability and strength. This joint venture company incorporates global expertise with local experience. The comprehensive, innovative solutions combine the technical expertise and experience of the 110 year old Allianz SE, and indepth market knowledge and good will of Bajaj. Competitive pricing and quick honest response have earned the company the customer's trust and market leadership in a very short time.

How does the Extra Care Policy benefit me?

In the times of rising medical costs Bajaj Allianz's Extra Care Policy is the perfect health protection for you and your family. It takes care of the medical treatment costs incurred during hospitalization due to serious accident or illness. This policy can be taken as add on cover to your existing hospitalization – medical expenses policy. In case of higher expenses due to illness or accidents Extra care policy takes care of the additional expenses.

What are the Special Features of Extra Care policy?

- Floater Policy (sum insured floats over members covered)
- Competitive premium rates
- No Medical tests upto 55 years subject to clean proposal form.
- For all cases where medical tests have been conducted in our empanelled diagnostic centre , and the proposal has been accepted / and premium received the Company would reimburse 50% of the medical test charges.
- Pre-existing diseases covered after 4 years.
- Continuity for waiting periods would be given for any indemnity cover irrespective of Sum Insured in the earlier policy.

What is the eligible age?

- Age of entry for proposer 18years – 70 Years. Renewable upto 80yrs
- Children from 3 Months - 5 years can be covered if both the parents are insured with us
- Children from 6 years to 18 years can be covered if either of the parents are covered with us.
- Children from 18yrs to 25yrs can be covered as self proposer or as dependents.

Who can be covered as dependants under my Extra Care Policy?

- The primary member or the proposer can cover Self, Spouse, and 3 Children under this policy.
- The premium would be calculated as per the highest age of the family member.

Who are eligible to take this policy?

- Members covered under Medical expenses (Hospitalization) policy. This policy covers the medical expenses in excess of the specified deductible amount.
- Members who do not have any Health policy can also opt for this policy; the expenses up to the deductible limit (per hospitalization) have to be borne by the member.

What are the Sum Insured options under this policy?

The limit of indemnity /Sum Insured is the maximum liability above the deductible .

For example - If the Sum Insured is Rs 10 lakhs and deductible is Rs 3 lakhs , our liability for a claim of Rs 13 lakhs would be Rs 10 lakhs (which is over and above the deductible).

Deductible would apply afresh on every claim in a policy period .In case of our own renewals deductible would apply afresh every year (except in case of a relapse within 45 days for which a claim has been made, wherein such relapse shall be deemed to be part of the same claim.)

Sum Insured (Rs)	Deductible per hospitalization (Rs)
1000000	300000
1200000	400000
1500000	500000

What are the details of coverage the policy offers?

- This is a floater policy, single Sum Insured and single premium for the whole family.
- With Extra Care, the member has access to cashless facility in more than 2400 empanelled hospitals across the country subject to terms and exclusions.
- In case the member opts for hospitals other than the empanelled ones the expenses incurred would be reimbursed within 14 days from the date of submission of all documents.
- The policy covers ambulance charges in case of emergency subject to a maximum of Rs. 3000.

What additional benefits do I get?

- Income Tax Benefit under Sec 80 D of the IT Act on the premiums paid for this policy.

Any Exclusions?

- All diseases/illnesses existing prior or at the time of proposing this insurance for a period of 4 years.
- Any diseases contracted during the first 30 days of inception of the policy
- Congenital diseases, disorders.
- Non allopathic treatment
- Joint replacement surgeries other than due to accidents would have a waiting period of 4 years.
- All expenses arising out of AIDS and related diseases
- Cosmetic and Aesthetic treatments
- Use of intoxicating drugs or alcohol.
- Any fertility, sub fertility, impotence or assisted conception operation or sterilization procedure.

How do I buy this policy?

- Discuss the policy benefits, coverage and premium details with your insurance advisor or visit our Web Site for details.
- Actively seek information on the charges and exclusions under the policy.
- Fill the proposal form stating your personal & health profile.
- Ensure that the information given in the form is complete and accurate.
- We will process your proposal. You may be called for a medical check-up on the basis of your age, health declarations.
- Based on the information provided, if the proposal is accepted, policy is issued on the receipt of premium.
- The policy schedule, policy wordings, cashless cards and the Health Guide is sent on the address mentioned on the proposal form

