

## WHAT IS NOT COVERED

- The company will not be liable for any payment unless the medical expense exceed the deductible\*
- The company will not be liable for any treatment which begins during waiting periods except if any insured person suffers an accident
- A waiting period of 30 days will apply to all claims related to the treatment of any illness the first policy commencement date
- Pre-existing Conditions will not be covered until 48 months of continuous coverage have elapsed, since inception is subject to the same being declared at the time of application and accepted by Insurer.
- 2 year exclusions for specific diseases surgeries / treatments
- War or any act of war, invasion, act of foreign enemy, civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, Nuclear, Chemical or Biological attack or weapons, radiation of any kind.
- Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof
- Any Insured Person's participation or involvement in naval, military or air force operation.
- Any Insured Person committing or attempting to commit intentional self-injury or attempted suicide or suicide
- Congenital external diseases, defects or anomalies
- Treatment taken on Outpatient basis

For a complete list, kindly refer the Policy Wordings

\*Deductible means a cost-sharing requirement under a health insurance policy that provides that We will not be liable for a specified rupee amount in case of indemnity policies and for a specified number of days /hours in case of hospital cash policies which will apply before any benefits are payable by the insurer. A Deductible does not reduce the Sum Insured.

## CLAIM PROCESS

- In case of hospitalization, intimation should be provided to the Company/ TPA immediately and not later than 7 days
- In all other cases, the Company/ TPA must be informed of any event or occurrence that may give rise to a claim under this Policy at least 7 days
- Prior to any consequent treatment, consultation or procedure being taken and the Company/ TPA should pre-authorise such treatment, consultation or procedure
- Any documentation and information requested to establish the circumstances of the claim, its quantum or the Company's liability for the claim, should be submitted within 10 days of our request or discharge from Hospital or completion of treatment, whichever is earlier

## TERMS & CONDITIONS

- Disclaimer:** The above information is only indicative in nature. For details of the coverage and exclusions please refer to the policy wordings.
- Liability of the Company does not commence until the Company has accepted the proposal and full premium has been paid.
- Section 41 of Insurance Act 1938 (Prohibition of Rebates):
  - No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take 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 insurers.
  - Any person making default in complying with the provision of this section shall be punishable with fine which may extend to Ten Lakh

## FREE LOOK

The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the Policy.

The Insured Person shall be allowed free look period of fifteen days from date of receipt of the policy document to review the terms and conditions of the policy, and to return the same if not acceptable.

If the Insured has not made any claim during the Free Look Period, the insured shall be entitled to a refund of the premium paid less any expenses incurred by the Company on medical examination of the Insured Person and the stamp duty charges or where the risk has already commenced and the option of return of the Policy is exercised by the Insured Person, a deduction towards the proportionate risk premium for period of cover or Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

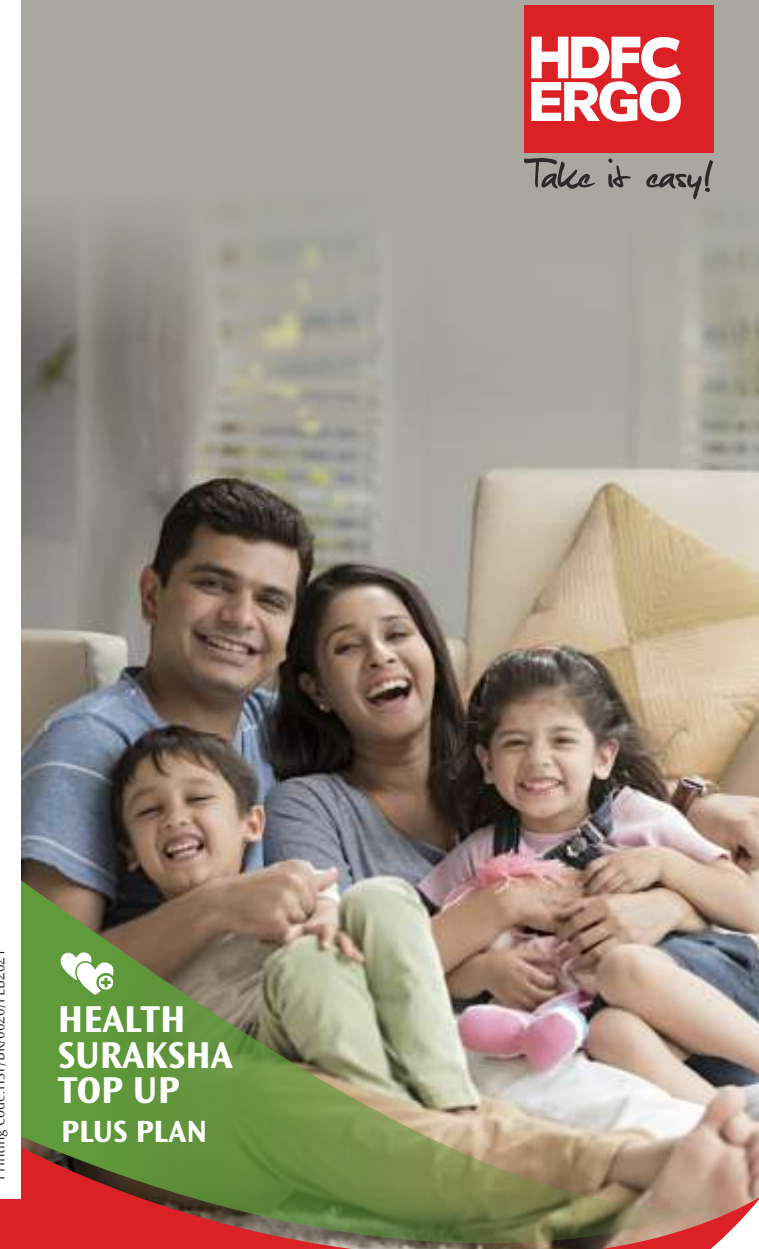
### Example



### POLICY PERIOD

At Inception SI 5L & D 2L	Approved Claim Amount	Deductible Exhaustion	Balance Deductible	Available SI in Top Up Policy	Benefit in existing Plan	Benefit in Top Up Plan
Claim 1	70,000	70,000	130,000	500,000	70,000	0
Claim 2	50,000	50,000	80,000	500,000	50,000	0
Claim 3	80,000	80,000	0	500,000	80,000	0
Claim 4	150,000	0	0	350,000	0	150,000

Exclusive Plan progression of a Top Up PLUS plan (SI 5L / D 2L) with a primary policy of 2 Lac



**HEALTH SURAKSHA TOP UP PLUS PLAN**

Printing Code:HST/BR/0020/FEB2021

## HDFC ERGO General Insurance Company Limited

022 6242 6242 (Buy)

[hdfcergo.com](http://hdfcergo.com)

HDFC ERGO Mobile App

Ensuring happiness for your family

Sum insured options available are Rs. 2 lacs; Rs. 3 lacs; Rs. 4 lacs; Rs. 5 lacs; Rs. 7.50 lacs and Rs. 10 Lacs. HDFC ERGO General Insurance Company Limited. IRDAI Reg. No.146. CIN: U66030MH2007PLC177117. Registered & Corporate Office: 1st Floor, HDFC House, 165-166 Backbay Reclamation, H. T. Parekh Marg, Churchgate, Mumbai – 400 020. For more details on the risk factors, terms and conditions, please read the policy document carefully before concluding a sale. Trade Logo displayed above belongs to HDFC Ltd and ERGO International AG and used by the Company under license. UIN: Health Suraksha Top - Up- HDFHLIP21467V022021. UID No. 7435.

BR/Ver -1 FEB2021

**HDFC ERGO**







Take it easy!

**HDFC ERGO Health Suraksha Top-Up** Plus plan is designed to help you deal with different kinds of medical emergencies over a period of time. This plan is crafted to provide additional coverage in the event of prolonged illness or a major accident, thus keeping you protected under all circumstances. Under this plan risk initiates when the exhaustion of deductible\* happens as multiple claims consuming the deductible amount in multiple hospitalizations/ conditions/ claims etc.

## ELIGIBILITY

- Policy covers persons in the age group of 5 - 65 years
- There will be no exit-age for ceasing of the cover
- Children covered from 91 days onwards if both parents are covered under same policy
- The policy offers option of covering on individual / family floater basis
- The family includes self, spouse, dependent children and dependent parents
- Dependent parents have to be covered under separate family floater policy
- Parents shall include your (policyholder) dependant parents








## PRODUCT HIGHLIGHTS

-  Supplementary Coverage
-  No Sub-limits on any disease, room rent, hospital charges & doctor fees
-  No medical tests upto the age of 55 years  
\*\* subject to no medical history
-  Avail a family discount of 10%. If 3 or more members of a family are covered under the same policy on Individual sum insured basis
-  Tax Benefit under section 80D (Subject to change in Tax Laws)
-  Offers 1 year and 2 years policy coverage period

\*If pre-policy check up would be conducted in our empanelled diagnostic centre, 50% of the standard medical tests charges would be reimbursed, subject to acceptance of proposal and policy issuance.

## WHAT IS COVERED

Claims under this policy shall be payable only if the aggregate of covered medical expenses (in respect to hospitalizations) of insured person exceeds the deductible applicable on per policy year basis.

-  **In-patient Treatment:** Covers medical expenses for hospitalization due to an illness or accident. We will pay for the medical expenses for room rent, boarding expenses, nursing, intensive care unit, medical practitioner(s), etc.
-  **Pre-Hospitalisation:** The Pre-Hospitalization Medical expenses incurred due to an illness in 60 days immediately before the insured person was hospitalized
-  **Post-Hospitalisation:** The Post-Hospitalization Medical expenses incurred in 90 days immediately after the insured person was discharged post hospitalization
-  **Day care procedures:** The medical expenses for day care procedures which do not require 24 hours hospitalization due to technological advancement in medical science
-  **Domiciliary Treatment:** The medical expenses incurred by an Insured Person for availing medical treatment at his home which would otherwise have required hospitalization
-  **Organ Donor:** The medical expenses on harvesting the organ from the donor
-  **Emergency Ambulance:** Expenses up to ₹2000 per hospital for utilizing ambulance service for transporting insured person to hospital

## 1 year (All Premiums are Excluding GST)

Family Type	Sum Insured - ₹10 Lacs																				
	1A				1A + 1C				2A				2A + 1C				2A + 2C				
Age Band	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹5 Lacs	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹5 Lacs	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹5 Lacs	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹5 Lacs	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹5 Lacs	
0-17	4,635	4,320	3,985	3,725																	
18-35	6,410	5,955	5,460	5,135	8,950	8,320	7,635	7,175	9,615	8,930	8,190	7,705	12,155	11,295	10,365	9,745	14,425	13,400	12,285	11,555	
36-45	7,570	7,140	6,575	6,190	10,110	9,505	8,750	8,230	11,350	10,710	9,860	9,285	13,890	13,075	12,035	11,325	17,030	16,065	14,790	13,930	
46-50	13,645	12,810	11,795	11,110	16,185	15,175	13,970	13,150	21,835	20,495	18,870	17,780	24,375	22,860	21,045	19,820	27,295	25,620	23,590	22,220	
51-55	14,330	13,455	12,390	11,660	16,870	15,820	14,565	13,700	22,930	21,530	19,825	18,655	25,470	23,895	22,000	20,695	28,660	26,910	24,780	23,320	
56-60	15,325	14,635	13,735	12,310	17,865	17,000	15,910	14,350	24,515	23,415	21,975	19,695	27,055	25,780	24,150	21,735	30,895	29,280	26,135	23,700	
61-65	22,130	20,220	16,780	13,485	24,670	22,585	18,955	15,525	35,410	32,350	26,850	21,580	37,950	34,715	29,025	23,620	39,840	36,390	30,205	24,275	
66-70	29,825	27,255	22,620	18,185	32,365	29,620	24,795	20,225	47,720	43,605	36,195	29,095	50,260	45,970	38,370	31,135	53,690	49,055	40,720	32,730	
>70	42,740	39,050	32,410	26,055	45,280	41,415	34,585	28,095	68,385	62,480	51,860	41,685	70,925	64,845	54,035	43,725	76,935	70,290	58,340	46,895	

Family Type	Sum Insured - ₹7.5 Lacs														
	1A			1A + 1C			2A			2A + 1C			2A + 2C		
Age Band	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹2 Lacs	₹3 Lacs	₹4 Lacs	₹2 Lacs	₹3 Lacs	₹4 Lacs
0-17	3,335	3,195	2,505												
18-35	4,535	4,390	3,915	6,355	6,135	5,345	6,805	6,580	5,875	8,625	8,325	7,305	10,205	9,870	8,810
36-45	5,455	5,245	4,695	7,275	6,990	6,125	8,185	7,865	7,040	10,005	9,610	8,470	12,275	11,795	10,560
46-50	9,790	9,475	8,425	11,610	11,220	9,855	15,665	15,160	13,480	17,485	16,905	14,910	19,580	18,950	16,850
51-55	10,280	9,950	8,845	12,100	11,695	10,275	16,450	15,915	14,150	18,270	17,660	15,580	20,560	19,895	17,690
56-60	11,900	10,705	9,290	13,720	12,450	10,720	19,045	17,125	14,865	20,865	18,870	16,295	23,815	22,260	19,575
61-65	15,945	14,335	12,445	17,765	16,080	13,875	25,510	22,940	19,910	27,330	24,685	21,340	28,695	25,805	22,400
66-70	21,485	19,325	16,775	23,305	21,070	18,205	34,380	30,920	26,840	36,200	32,665	28,270	38,675	34,785	30,195
>70	30,790	27,690	24,035	32,610	29,435	25,465	49,260	44,300	38,460	51,080	46,045	39,890	55,420	49,840	43,265

Family Type	Sum Insured - ₹5 Lacs									
	1A		1A + 1C		2A		2A + 1C		2A + 2C	
Age Band	₹2 Lacs	₹3 Lacs	₹2 Lacs	₹3 Lacs	₹2 Lacs	₹3 Lacs	₹2 Lacs	₹3 Lacs	₹2 Lacs	₹3 Lacs
0-17	1,970	1,790								
18-35	2,705	2,460	3,780	3,440	4,060	3,690	5,135	4,670	6,090	5,535
36-45	3,255	2,915	4,330	3,895	4,885	4,375	5,960	5,355	7,325	6,565
46-50	5,845	5,300	6,920	6,280	8,770	7,950	9,845	8,930	11,690	10,600
51-55	6,510	6,010	7,585	6,990	9,765	9,015	10,840	9,995	13,020	12,020
56-60	7,530	6,975	8,605	7,955	11,295	10,465	12,370	11,445	13,555	12,555
61-65	12,005	11,405	13,080	12,385	18,005	17,105	19,080	18,085	21,610	20,530
66-70	16,510	15,685	17,585	16,665	24,765	23,525	25,840	24,505	29,720	28,230
>70	19,060	18,110	20,135	19,090	28,590	27,165	29,665	28,145	34,310	32,600

Family Type	Sum Insured - ₹4 Lacs									
	1A		1A + 1C		2A		2A + 1C		2A + 2C	
Age Band	₹2 Lacs	₹3 Lacs	₹2 Lacs	₹3 Lacs	₹2 Lacs	₹3 Lacs	₹2 Lacs	₹3 Lacs	₹2 Lacs	₹3 Lacs
0-17	1,530	1,315								
18-35	2,100	1,805	2,935	2,525	3,145	2,705	3,980	3,425	4,720	4,060
36-45	2,525	2,170	3,360	2,890	4,420	3,795	5,255	4,515	5,680	4,880
46-50	4,795	4,530	5,630	5,250	7,670	7,250	8,505	7,970	9,590	9,060
51-55	5,610	5,395	6,445	6,115	8,975	8,630	9,810	9,350	11,220	10,790
56-60	6,520	6,290	7,355	7,010	10,430	10,065	11,265	10,785	11,735	11,320
61-65	10,655	10,290	11,490	11,010	17,050	16,465	17,885	17,185	19,180	18,520
66-70	14,655	14,155	15,490	14,875	23,450	22,650	24,285	23,370	26,380	25,480
>70	17,255	16,665	18,090	17,385	27,610	26,665	28,445	27,385	31,060	29,995

Family Type	Sum Insured - ₹3 Lacs				
	1A	1A + 1C	2A	2A + 2C	2A + 2C
Age Band	₹2 Lacs	₹2 Lacs	₹2 Lacs	₹2 Lacs	₹2 Lacs
0-17	1,100				
18-35	1,625	2,240	2,845	3,460	3,655
36-45	2,075	2,690	3,630	4,245	4,670
46-50	3,690	4,305	5,905	6,520	7,380
51-55	4,770	5,385	7,630	8,245	9,540
56-60	5,540	6,155	8,865	9,480	9,970
61-65	9,060	9,675	14,495	15,110	16,310
66-70	12,460	13,075	19,935	20,550	22,430
>70	15,170	15,785	24,270	24,885	27,305

\*Taxes will be applicable.