- Any expense during first 30 days of commencement of this cover.
- 24 Months waiting period on treatment on the specified diseases.
- Circumcision, vaccination (other than post bite), inoculation, cosmetic or aesthetic treatment, plastic surgery
- Psychiatric or psychological disorders, convalescence, general debility, run down condition, congenital anomaly, venereal disease, intentional self injury and treatment arising from use of intoxicating drugs/alcohols and treatment resulting from any criminal act.
- Any expense on treatment related to HIV, Acquired Immune Deficiency Syndrome (AIDS), and all related medical conditions.
- Genetic disorders and stem cell implantation/ surgery.

Free Look Period (applicable only in case of fresh policies)

You will be allowed a period of at least 15 (fifteen) days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable, stating the reasons therein for doing so, provided there is no claim.

Renewal

- Lifelong guaranteed renewal (except in case of Fraud or mis-description etc)
- Renewal premium as per rating chart, based on Age & Sum Insured
- Sum Insured can be enhanced or Deductible can be reduced at the time of renewal for which fresh proposal form and medical reports will be required to be submitted. However the waiting periods will apply afresh for the enhanced sum insured / reduced deductible

Discounts

Family discount for non-floater policy:

- 2 Members 5%
- 3 Members and more 10%



Disclaimer: This is an abridged prospectus and illustrative only. For detailed prospectus and complete policy wordings please visit our website (www.iffcotokio.co.in) or nearest office. For all purposes policy wording shall hold good.

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 as may be allowed in accordance with the published prospectus 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.

For further information, contact:

Toll free: 1800 103 5499 | Call us : 0124-4285499 www.iffcotokio.co.in | SMS 'CLAIM' to 56161



IFFCO-TOKIO General Insurance Co. Ltd.

IFFCO TOWER – II, Plot No. 3, Sector-29, Gurgaon, Haryana – 122 001

Phone: 91-124-2850100, Fax: 91-124-2577923, 2577924

CIN: U74899DL2000PLC107621 IRDA Regn. No. 106



HEALTH PROTECTOR PLUS

A Top Up Health Insurance Policy





nsurance is the subject matter of solicitation

How does the Health Protector Plus benefit you?

The policy provides coverage to you and your family in the eventuality of high treatment costs due to hospitalization for any injury or disease related contingencies over and above the deductible* opted by you.

*Deductible: The amount of Hospitalization expenses that you need to bear, before the policy starts paying. You can opt for a limit that suits you from 8 plans.

Salient Features

- Complete Freedom: Choose the way you want:
 - Top up or Super Top up: Chose whether you want the deductible to be applied per claim or on aggregate of all claims in a year.
 - Family Floater or Individual Sum Insured
 - Sum Insured Options 8 plans to offer you the widest possible range
- Lifelong renewal (if renewed without break)

Plan	A	В	C	D	E	F	G	Н
Sum Insured	200000	400000	500000	500000	750000	1000000	1500000	2500000
Deductible*	100000	200000	200000	300000	300000	500000	500000	500000

*Deductible means the amount stated in the schedule which shall be borne by the insured



- High coverage at low premium.
- Policy can be purchased without any other basic health policy.
- Waiver of Deductible in case of change/loss of job at a small additional premium.
- Option to buy standard health policy with continuity of benefits after 4 years.
- Income Tax benefits under Section 80D.
- Cashless claim facility available at over 4000 network hospitals across India.
- Directly serviced by IFFCO TOKIO without any Third Party Administrator
- Emergency Assistance Services at no additional cost
- Portability: You can switch from any other similar policy of any other insurer to our Health Protector Plus policy and protect your continuity benefits as per IRDA Guidelines.

Who are eligible to take this policy?

- Entry Age under the policy: 18 to 65 years. Dependent Children above 3 months can be covered when one of the parents is also covered.
- Renewable Age: Policy shall ordinarily be renewable without any age restriction, (except on grounds of fraud, moral hazard or misrepresentation or non-cooperation by the insured), if it is renewed without any break

Who all can be covered under this Policy?

- **Under floater policy:** Self, Spouse, dependent children up to the age of 25 years
- **Under Individual policy:** Self, Spouse, dependent children up to the age of 25 years, parents

What is covered under the policy?

The policy covers hospitalization expenses in excess of the deductible incurred by insured due to any Disease or Injury due to any accident (including any act of terrorism) up to the limit of sum insured. Hospitalization should be for a minimum period of 24 Hours except for specified procedures.

 Room, Board & Nursing Expenses as provided by the hospital/nursing home. Medical Practitioner/ Anesthetist, Consultant fees, Expenses on Anesthesia, Blood, Oxygen, Operation Theatre, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and X-ray, Dialysis, Chemotherapy, Radiotherapy, Cost Pacemaker, Artificial Limbs, Cost of transplantation of Organs and similar expenses.

 60 days Pre-hospitalisation expenses and 90 days Posthospitalisation expenses.

 Ayurvedic/ Homeopathic/Unani hospitalization expenses incurred in Government recognized hospitals.

 Ambulance Charges are covered as per actual subject to maximum of Rs.3000/- per claim.

 Daily Allowance amount equivalent to 0.1% of the Sum Insured

 Domiciliary Hospitalisation up to a maximum aggregate sub-limit of 20% of the Sum Insured.

 Hospitalization expenses of person donating an organ during the course of organ transplant

What are the major exclusions and waiting period in the policy

 Pre-existing Disease in the Policy, until 48 (Forty eight) months of continuous coverage have elapsed, since inception of the first Policy with us.