

Thinking about managing hospitalization expenses?



Don't worry, be happy

with

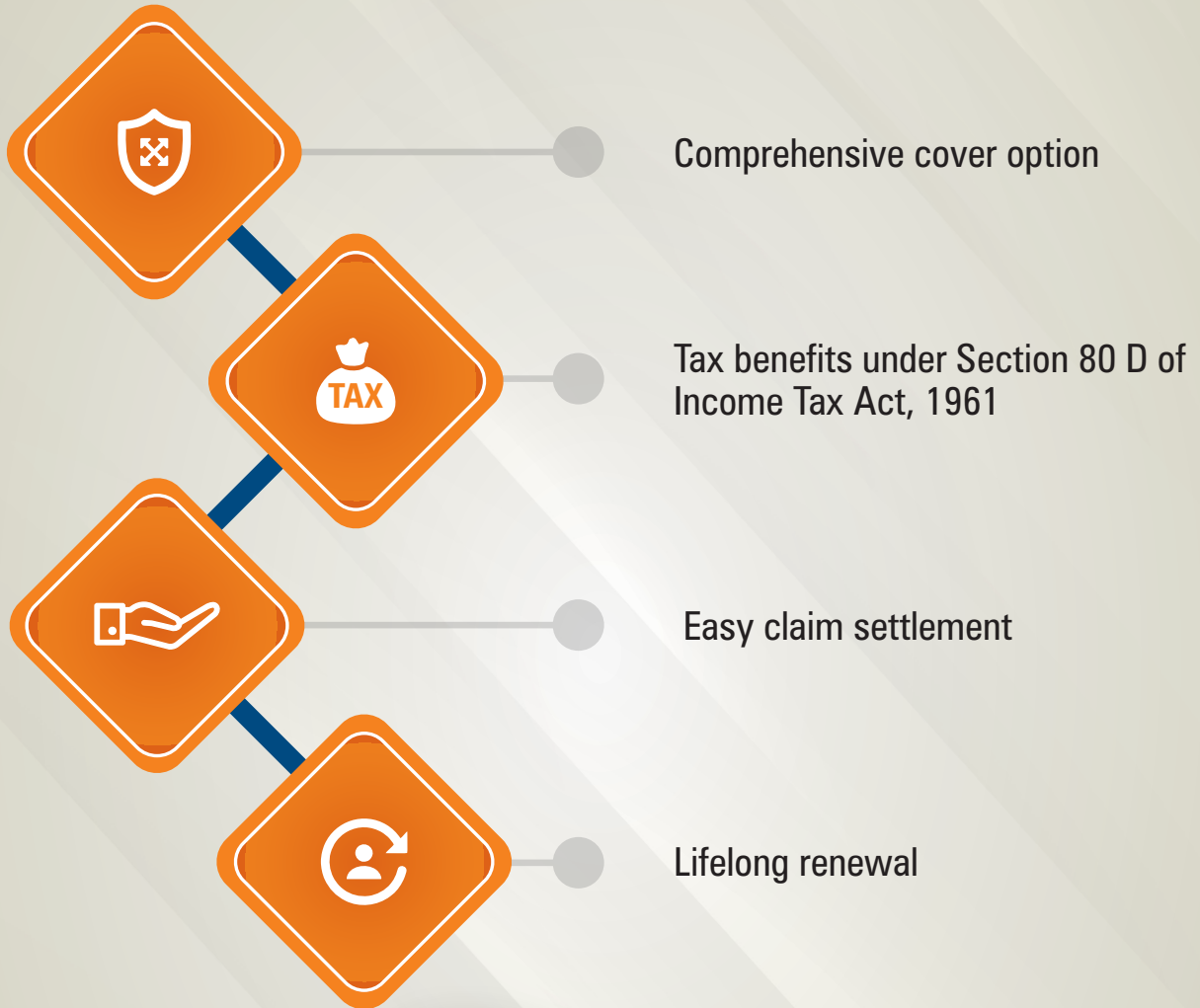
ICICI Lombard
-HOSPIFUND

Introduction

ICICI Lombard's **Hospifund Insurance** is an affordable product specifically designed to cater to incidental expenses which occur at the time of hospitalization. It takes care of the additional expenses incurred by an individual along with other unforeseen expenses which put an unnecessary burden on the insured and their family whether or not they have an indemnity policy in place. As such this product is targeted to act as a cushion to all unanticipated expenses by giving a daily payout in the event of hospitalization over and above the existing health insurance plan

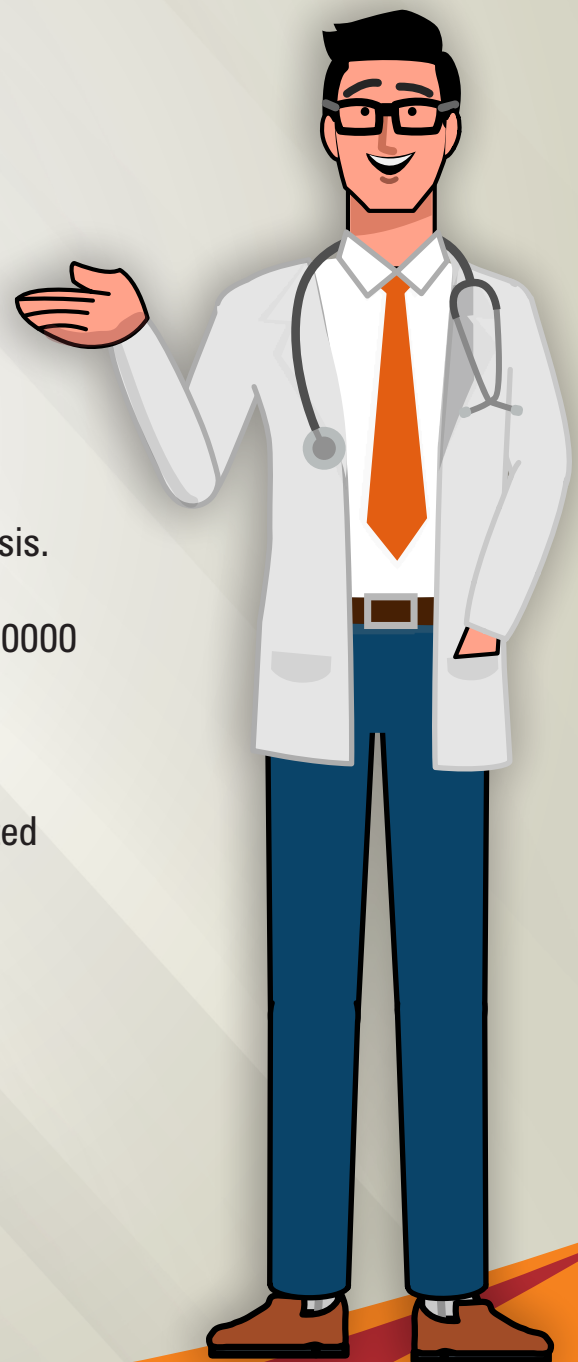


Salient Features



Eligibility and Policy Period

- Proposer should be **18 years** or above
- Minimum entry age:
Child – **91 days**,
Adult - **18 years**
- Maximum entry age - **65 years**
- Mandatory medicals if the customer is suffering from a pre-existing disease/condition
- Mandatory medicals after the age of **55 years***
- Policy offers option of covering on individual basis.
- Per day payout options available (in ₹) - 500 -10000
- Payout period options - 5 - 180 days
- Deductible/Franchise of upto **5 days** can be opted
- Policy period - 1, 2, and 3 years



*Minimum 50% of the expenses incurred on pre-policy Health check-up will be reimbursed by Us. Also, a proposer below the age of 55 Years may be asked to undergo medicals, based on certain underwriting criteria.

Benefits

The product gives an option of selecting from 2 base covers and 12 extension covers. Claim payout is given to the customer in the event of every consecutive 24 hours of hospitalization.

Claim payouts are additive.



Base Benefits

Insured can avail any one or both of the following base benefits. In case both the benefits are chosen, the payout in such case, will be additive of both the base benefits.



1. Hospitalization Cash Benefit

What we cover- Hospitalization due to illness or accidental injury during the policy period

What you get - A per day payout for every completed 24 hours of hospitalization

How many times you can avail the benefit - For the maximum number of days as opted by you in a year



2. Accidental Hospitalization Cash Benefit

What we cover- Hospitalization due to accidental injury during the policy period

What you get - A per day payout for every completed 24 hours of hospitalization

How many times you can avail the benefit - For the maximum number of days as opted by you in a year

Illustration 1 - What benefit will one be eligible for if he opts for ₹500 per day for 30 days for both Hospitalization Cash Benefit and Accidental Hospitalization Cash Benefit?

In the above case, if the customer is hospitalized due to -

i) Illness, he will be eligible for - ₹500 per day for up to 30 days

ii) Accidental injury, he will be eligible for -

₹500 (Base
hospitalization)



₹500 (Accidental
hospitalization)

i.e. ₹1000 per day
for up to 30 days

Extensions to the Base Benefit

Insured can avail any of the following optional benefits by paying extra premium, under this policy. The benefits opted and their payout in the event of claim would be additive.

The following conditions would be applicable for all the base benefits and extensions therein:

- i. The period of cover for each individual extension benefit cannot be more than the maximum period of cover for base benefit(s),
- ii. The sum insured under any of the extension benefits cannot be more than five times of the sum insured opted under any individual base benefit(s)
- iii. The sum insured under any extension opted, cannot be more than the overall maximum sum insured available under the base benefit(s)



1. Intensive Care Cash Benefit

What we cover - Hospitalization in ICU due to illness or accidental injury during the policy period

What you get - Per day payout for every completed 24 hours of hospitalization in ICU

How many times you can avail the benefit - For the maximum number of days as opted by you in a year

Extensions to the Base Benefit



2. Cancer Hospitalization Cash Benefit

What we cover - Hospitalization due to "Cancer of Specified Severity" as defined in our policy wordings

What you get - Per day payout for every completed 24 hours of hospitalization due to "Cancer of Specified Severity"

How many times you can avail the benefit - For the maximum number of days as opted by you in a year

Illustration 2 - Customer A opts for the following coverage and payouts:

Name of cover	Per day payout	Number of days
Hospitalization Cash Benefit	₹1000	30 days
Intensive Care Cash Benefit		
Cancer Hospitalization Cash Benefit		

- If Customer A is hospitalized in an ICU for 5 days, he will get

$$\begin{array}{ccc} \boxed{1000 \text{ (Base hospitalization)}} & + & \boxed{1000 \text{ (ICU hospitalization)}} \\ & & \text{i.e. ₹2000 per day for 5 days} \end{array}$$

- If the Customer A is first hospitalized for 5 days, then in ICU due to cancer for 2 days, he will get -

- For the first 5 days - ₹1000 per day
- For the next 2 days

$$\begin{array}{ccc} \boxed{1000 \text{ (Base hospitalization)}} & + & \boxed{1000 \text{ (ICU hospitalization)}} & + & \boxed{1000 \text{ (Cancer hospitalization)}} \end{array}$$

i.e. ₹3000 per day

Extensions to the Base Benefit



3. Brain & Stroke Hospitalization Cash Benefit

What we cover - Any of the brain ailment & stroke listed and defined in our policy wordings of “Benign Brain Tumor”, “Stroke resulting in Permanent Symptoms”, “Permanent Paralysis of Limbs”, “Motor Neuron Disease with Permanent Symptoms”, “Multiple Sclerosis with Persisting Symptoms”, “Major Head Trauma”

What you get - Per day payout for every completed 24 hours of hospitalization due to the defined “Brain Ailment & Stroke”

How many times you can avail the benefit - For the maximum number of days as opted by you in a year

Illustration 3 - Customer B opts for the following coverage:

Name of cover	Per day payout	Number of days
Accidental Hospitalization Cash Benefit	₹10,000	60 days
Cancer Hospitalization Cash Benefit		

Now, if the customer B suffers from an accident during the policy period which leads to a spinal cord Injury and him being hospitalized for a period of 15 days and if he claims for “Major Head Trauma” included in the “Brain Ailment and Stroke”, he will get -

₹1000 (accidental hospitalization) per day for 15 days only

Since, spinal cord injury is not in the scope of “Major Head Trauma” as defined in the policy wordings, he will not be eligible for the payout of Brain & Stroke Hospitalization Cash Benefit.

Extensions to the Base Benefit



4. Organ Transplant Hospitalization Cash Benefit

What we cover - Hospitalization due to "Organ Transplant" as defined in the policy wordings during the policy period

What you get - Per day payout for every completed 24 hours of hospitalization due to "Organ Transplant"

How many times you can avail the benefit - For the maximum number of days as opted by you in a year



5. Heart Ailment Hospitalization Cash Benefit

What we cover - Hospitalization due to "Heart Ailments" as defined in the policy wordings during the policy period

What you get - Per day payout for every completed 24 hours of hospitalization due to "Heart Ailments"

How many times you can avail the benefit - For the maximum number of days as opted by you in a year



6. Fracture & Burns Cash Benefit

What we cover - Hospitalization due to "Fracture" or "Second Degree Burns" or "Third Degree Burns" as defined in the policy wordings, during the policy period

What you get - Per day payout for every completed 24 hours of hospitalization due to "Fracture" or "Second Degree Burns" or "Third Degree Burns" as defined in the policy wordings

How many times you can avail the benefit - For the maximum number of days as opted by you in a year

Extensions to the Base Benefit



7. Day Care Treatment Cash Benefit

What we cover - Hospitalization due to any “Day Care Treatment” as defined in the policy wordings, during the policy period

What you get - Per event payout for every completed event of “Day Care Treatment” as defined in the policy wordings

How many times you can avail the benefit - For the maximum number of events as opted by you in a year

Illustration 4 - Customer A opts for the following coverage and payouts:

Name of cover	Per day payout	Number of days
Hospitalization Cash Benefit	₹1000	30 days
Day Care Treatment Cash Benefit	₹1000	5 events

Customer B opts for the following coverage and payouts

Name of cover	Per day payout	Number of days
Hospitalization Cash Benefit	₹1000	30 days

If the customer suffers from a minor accident that requires him to get stitches (surgical sutures) on a wound, the customer can go to the medical facility and get them done in 1-2 hours. This procedure generally does not require the patient to be hospitalized and hence, the base condition of being hospitalized for 24 hours is not met. In such cases, the customer can claim under ‘Day Care Treatment Cash Benefit’.

Extensions to the Base Benefit

Now, in the above scenario, in such cases, Customer A will be eligible for a claim under 'Day Care Treatment Cash Benefit' and Customer B will not be eligible for any claim since the base condition of being hospitalized for 24 hours is not met.



8. Convalescence Benefit

What do we cover - Convalescence due to illness/injury, during the policy period

What do you get - Lump sum amount on completion of continuous 10 days of hospitalization

How many times can you avail the benefit - For the maximum number of events as opted by you in a year

Illustration 5 - Customer M opts for the following covers and payout:

Name of cover	Per day payout	Number of days
Hospitalization Cash Benefit	₹1000	30 days
Convalescence Benefit	₹10,000	1 events

If the customer suffers from a disease that requires him to be hospitalized for 12 continuous days, the customer can claim under 'Convalescence Benefit' for the 10 days of continuous hospitalization and avail a lumpsum benefit of ₹10000 along with the Hospitalization Cash Benefit. Since the customer opted for only 1 event of convalescence benefit, if the customer undergoes another hospitalisation of 10 or more days, he will only be eligible for hospitalisation cash benefit during that period

Extensions to the Base Benefit



9. Ambulance Cover Benefit

What we cover - Usage of ambulance in case of movement to hospital or from one hospital to another

What you get - Per event payout in case ambulance service is availed

How many times you can avail the benefit - For the maximum number of events as opted by you in a year



10. Child Care Cash Benefit

What we cover - Compensation to take care of “Dependent Child/Children” due to insured's hospitalization due to illness or accidental injury during the policy period

What you get - Per day payout for every completed 24 hours of hospitalization

How many times you can avail the benefit - For the maximum number of days as opted by you in a year



11. Hospital Attendant Cash Benefit

What we cover - Compensation for hospitalization that requires “Medical Attendant” to be present

What you get - Per day payout for every completed 24 hours of hospitalization

How many times you can avail the benefit - For the maximum number of days as opted by you in a year

Extensions to the Base Benefit



12. Compassionate Visit Cash Benefit

What we cover - Compensation for travel expenses incurred by immediate family member when insured is hospitalized outside city of residence, for more than 3 continuous days

What you get - Per event payout on completion of 3 days of hospitalization for every hospitalization event

How many times you can avail the benefit - For the maximum number of events as opted by you in a year



Claims Procedure

What documents would you require

- Completed claims form (claim form can be downloaded from the website)
- Discharge summary and bank account details (example cancelled cheque)
- If required, our claims team may ask you to submit additional documents

Where should you send these documents - IL Health Care, ICICI Lombard Healthcare ICICI Bank Tower, Plot No.12, Financial District, Nanakram Guda, Gachibowli, Hyderabad, Andhra Pradesh Pin Code: 500032

Do we provide any other ways of claim intimation?

Yes, we do. You can call us on our toll free number 1800 2666 or you can intimate the claim on our website www.icicilombard.com or any such web-link provided by us.



Claims Procedure

WHAT WILL WE NOT PAY FOR ?

(Some* exclusions and limitations under the policy)

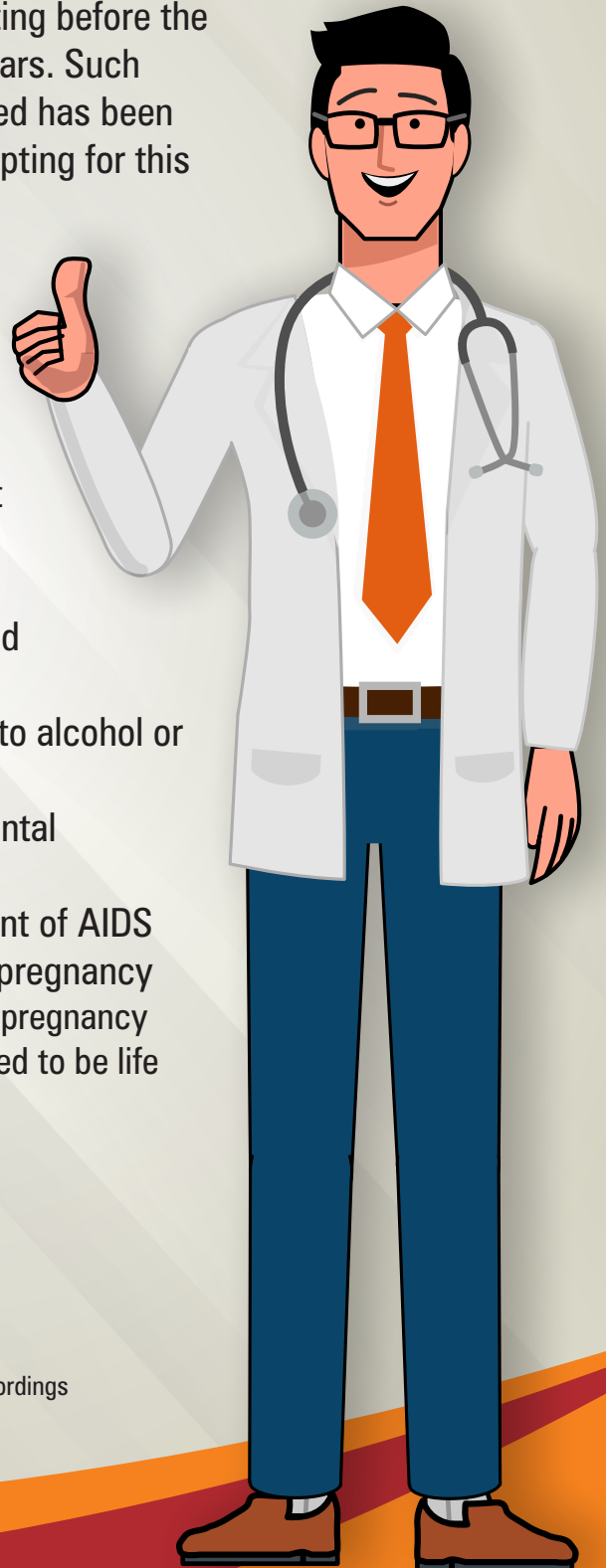
- Any pre - existing condition(s) until 24 months of your continuous coverage has elapsed, since period of insurance start date
- Any illness contracted within 30 days of period of insurance start date, except those incurred as a result of injury
- Any hospitalization due to following illnesses within the first two (2) consecutive years of period of insurance start date:
 - Cataract
 - All types of hernia, hydrocele
 - Arthritis, gout, rheumatism and spinal disorders
 - Surgery on tonsils, adenoids and sinuses
 - Dilatation and curettage, endometriosis
 - Gastric and duodenal erosions and ulcers
 - Varicose veins / varicose ulcers
 - Benign prostatic hypertrophy
 - Joint replacements unless due to accident
 - Sinusitis and related disorders
 - Stones in the urinary and billiary systems
 - Dialysis required for chronic renal failure
 - Deviated nasal septum
 - Fissures / fistula in anus, hemorrhoids / piles
 - All types of internal congenital anomalies / illness / defects
 - Myomectomy, hysterectomy unless because of malignancy
 - All types of skin and internal tumors / cysts / nodules / polyps of any kind including breast lumps unless malignant

*For detailed list of exclusions and limitations, kindly refer to the policy wordings

Claims Procedure

Major** Permanent Exclusions

- Any illness / disease / injury pre - existing before the inception of the policy for the first 2 years. Such waiting period shall reduce if the insured has been covered under a similar policy before opting for this policy, subject however to portability regulations
- Hospitalization incurred during the first 30 days of inception of the policy, except those arising out of accidents. This exclusion does not apply for subsequent renewals without a break
- Expenses attributable to self - inflicted injury (resulting from suicide, attempted suicide)
- Expenses arising out of or attributable to alcohol or drug use / misuse / abuse
- Cost of spectacles / contact lenses, dental treatment
- Medical expenses incurred for treatment of AIDS
- Treatment arising from or traceable to pregnancy (This exclusion does not apply to ectopic pregnancy proved by diagnostic means and is certified to be life threatening by the medical practitioner)



**For detailed permanent exclusions, kindly refer to the policy wordings

ICICI Lombard -HOSPIFUND



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