SBI general INSURANCE

SURAKSHA AUR BHAROSA DONO

AROGYA SUPREME

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PLUS

Arogya Supreme

Imagine having a Health Insurance Policy that takes care of all your needs! A Policy that protects you in times of need.

Arogya Supreme is a solution for all you healthcare needs. It covers 20 basic covers and 8 optional covers* so you don't have to worry about medical treatments and expenses.

Who Can Buy This Policy?

- Any Individual can take this Policy for himself/herself and/or his/her family
- 'Family' means the spouse, dependent children, parents and parents-in-law
- Entry age for adults is 18 years to 65 years & for dependent children is 91 days to 25 years

What are the Key Benefits of the Policy?

- Sum Insured Refill
- E-Opinion
- Domestic Emergency Assistance Services (including Air Ambulance)
- Recovery Benefit

MAJOR COVERAGES

What Does The Policy Cover?

A. Hospitalization Covers

1. In-patient Hospitalization

Room Rent and Boarding Expenses

- Single Private AC Room (upgrade option available)

What Does The Policy Cover?

A. Hospitalization Covers

1. In-patient Hospitalization

Intensive Care Unit Expenses

- As per actual ICU/ICCU expenses provided by Hospital

Nursing Expenses

Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees

Anesthesia, Blood, Oxygen, Operation theatre charges, Surgical appliances

Consultation Fees including Telemedicine by Medical Practitioner

Medicines, Drugs and Consumables

Diagnostic Procedures

The Cost of Prosthetic and other devices or equipment if implanted internally during a Surgical Procedure

2.Mental Healthcare

Medical expenses due to hospitalization for any Mental Illness contracted during the Policy Period up to Sum Insured

3. HIV / AIDS Cover

If you are diagnosed with HIV during the Policy Period and require hospitalization, we will pay medical expenses up to Sum Insured, related HIV and/or HIV related Illness, including AIDS

What Does The Policy Cover?

A. Hospitalization Covers

4. Genetic Disorder

If you are hospitalized due to any genetic disorder illness, we will pay Medical Expenses up to ₹ 1 Lakh

5. Internal Congenital Anomaly

If you are hospitalized due to any internal congenital diseases, we will pay Medical Expenses up to 25% of Sum Insured

6. Bariatric Surgery Cover

- If you are hospitalized on the advice of a Medical Practitioner because of conditions mentioned below that require you to undergo Bariatric Surgery during the Policy Period, then we will pay Medical Expenses up to Sum Insured
- For adults aged 18 years or older, presence of severe documented in contemporaneous clinical records, deemed as any of the following:Body Mass Index(BMI); greater than or equal to 40 or greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:

  i. Obesity-related Cardiomyopathy

  ii. Coronary Heart Disease

  iii. Severe Sleep Apnea

  iv. Uncontrolled Type 2 Diabetes

7. Advance Procedures

We will pay medically necessary expenses either as In-Patient hospitalization or as part of Day Care Treatment up to 25% of Sum Insured incurred in Advance Procedures and not limited to the following:

- Uterine Artery Emobalization and HIFU
- Balloon Sinuplasty
- Deep Brain Stimulation
- Oral Chemotherapy (covered as OPD also)
- Immunotherapy - Monoclonal Antibody to be given as injection
- Intra Vitreal Injections
- Robotic Surgeries

What Does The Policy Cover?

A. Hospitalization Covers

7. Advance Procedures

- Stereotactic Radio Surgeries
- Bronchical Thermoplasty
- Vaporisation of the Prostrate (Green laser treatment or holmium laser treatment)
- IONM (Intra Operative Neuro Monitoring)
- Stem Cell Therapy (Hematopoietic stem cells for bone marrow transplant for hematological conditions to be covered)

8. Cataract Treatment

We will pay Medical Expenses up to ₹ 1,00,000 per eye incurred for treatment of Cataract as defined in Policy Schedule

9. Pre-Hospitalization Cover

We will pay Medical Expenses incurred by you up to the days specified in Policy Schedule immediately before your hospitalization (60)

10. Post-Hospitalization Cover

We will pay Medical Expenses incurred by you up to the days specified in Policy Schedule from the date of your discharge from Hospital (90)

11. Domiciliary Hospitalization

We will pay the Medical Expenses up to the Sum Insured as specified in the Policy Schedule, incurred on Domiciliary hospitalization as per Policy Schedule

12. Day Care Treatment

- We will pay for the Medical Expenses on hospitalization of Insured Person in Hospital or Day Care Center for Day Care Treatment but not in the Outpatient department
- 537 Day Care procedures covered up to Sum Insured as per indicative Day Care list

What Does The Policy Cover?

A. Hospitalization Covers

13. Road Ambulance

We will pay for Road Ambulance Services if required, for admissible claims ₹5,000 per hospitalization

14. Organ Donor Expenses

We will pay Medical Expenses up to the Sum Insured towards organ donor's hospitalization for harvesting of the donated organ where an Insured Person is the recipient, subject to certain conditions

15. Alternative Treatment / AYUSH

We will pay Medical Expenses up to the Sum Insured on your hospitalization in Hospital or AYUSH Hospital or AYUSH Day Care Centre for any of the following Alternative Treatments prescribed by Medical Practitioner

- Ayurvedic
- Yoga and Naturopathy
- Unani
- Siddha
- Homeopathy

16. Recovery Benefit

We will pay Recovery Benefit up to the limit specified in policy schedule if hospitalization exceeds 10 consecutive and continuous days ₹10,000 per hospitalization

17. Sum Insured Refill

We will refill 100% Basic Sum Insured on complete or partial utilization of your existing Policy Sum Insured in a Policy Year, including Cumulative Bonus or Enhanced Cumulative Bonus

18. E-Opinion

We will facilitate 4 E-Opinions from Our Panel of Medical Practitioners under this cover

What Does The Policy Cover?

A. Hospitalization Covers

19. Domestic Emergency Assistance Services (including Air Ambulance)

We will provide Emergency Medical Assistance as below when you are traveling within India 150 kms or more from your residential address mentioned in the Policy Schedule for domestic services up to Sum Insured of ₹ 5 Lakh

- Emergency Medical Evacuation when an adequate medical facility is not available in the proximity of the Insured Person
- Medical Repatriation (Transportation) when medically necessary

20. Compassionate Visit

In the event of hospitalization exceeding 5 days, the cost of economy class air ticket up to 1% of Sum Insured or maximum up to ₹20,000/- whichever is lower incurred by the Insured Persons 'immediate family member' while traveling to place of hospitalization from the place of origin / residence and back will be reimbursed

B. Renewal Benefit

1. Preventive Health Check-Up:

You will be eligible for a preventive health check-up every year from 1st renewal year

2. Cumulative Bonus

On Renewal of the Policy with us, we will pay 15% up to a maximum of 100% of Basic Sum Insured provided there has been no claim under the expiring Policy Year under Section C of Policy wordings

or

3. No Claim Discount

On claim free renewal, a discount of 2% will be provided for each completed and continuous policy year

C. Optional Covers (Add-ons)*

Hospital Cash Benefit

- ₹500 ; ₹1000 ; ₹2500 ; ₹5000 for 5/10/15/45 days

What Does The Policy Cover?

C. Optional Covers (Add-ons)*

Major Illness Benefit

- Cover up to 100% of Sum Insured or maximum up to ₹25 Lakhs whichever is lower

Additional Sum Insured for Accidental Hospitalization

- 1.5x or 2x of base Sum Insured

Enhanced Cumulative Bonus

- 50% up to a maximum of 200%

No Claim Bonus Protector

- NCB Protector (if claim less than ₹50,000)

Co-Payment

- 10% / 20% Co-payment available

Any Room Upgrade

- Covered Upgrade to any room excluding suite & above

Deductible

- ₹10,000
- ₹25,000

PLUS

What are the Waiting Periods?

First Thirty-days period	30 days, except for Accidents
Certain Specific Illnesses	2 Years
Pre-existing Diseases	3 Years
Hypertension, Diabetes, Cardiac Condition	90 days, except if these diseases are pre-existing and disclosed at the time of Policy
Major Illness-Benefit	90 Days
COVID 19	15 Days

What Is Not Covered In The Policy?

- Admission primarily for investigation & evaluation
- Rest cure, rehabilitation and respite care
- Surgical treatment of obesity that does not fulfill certain conditions
- Change-of-Gender treatments
- Cosmetic or Plastic Surgery
- Any treatment necessitated due to participation in hazardous or adventure sports
- Breach of Law
- Treatment for alcoholism, drug or substance abuse or any addictive condition and consequences thereof
- OTC Dietary Supplements and Substances
- Refractive Error
- Unproven Treatments
- Sterility and Infertility
- Maternity
- War and war-like situations
- Injury or disease caused by or contributed by nuclear weapons / materials
- Treatment taken outside India
- Circumcision

PLUS

MULTIPLE TENURE OPTIONS

What Are The Tenure Options?

- Policy can be issued for 1, 2 or 3 years

What Is SBI General's Renewal Policy?

- Arogya Supreme can be renewed every year upon payment of premium before Policy expiry
- Lifelong Renewability
- A grace period of 30 days is allowed for renewal of the Policy This will be counted from the day immediately after the premium due date

Our Claim Promise

- Provide assistance in keeping you informed of the emergency situations progress of your claim
- Keep you informed of the progress of your claim

How Do You Make A Claim?

1800 210 3366 / 1800 210 6366

sbig.health@sbigeneral.in

"HEALTHCLAIM" to 561612

www.sbigeneral.in

DISCOUNT OPTIONS

Multiple Discount options like

- Family Discount
- Loyalty Discount
- Long Term Policy Discount

Prohibition of Rebates

Section 41 of the Insurance Act, 1938, as maybe amended from time to time:

1) 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, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.

2) If any person shall fail to comply with sub regulation (1) mentioned above, he shall be liable to payment of fine which may extend to rupees ten lakhs.

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Contact Us

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