



SURAKSHA AUR BHAROSA DONO

SAMPOORNA AROGYA – GROUP

Sampoorna Protection for you and
your family.



Sampoorna Arogya – Group

In these uncertain times, it's a blessing to have a health insurance Policy that is accessible, affordable and comprehensive; a Policy that protects you and your family at all times.

Sampoorna Arogya – Group is all that and more. A comprehensive Health Insurance Policy that goes the extra mile to make the Insured Person's life convenient, it is designed to meet all the needs for today's health problems. So you can opt for the best healthcare without having to worry about the cost.

Who Can Buy This Policy?

Sampoorna Arogya – Group policy can be bought by SBI Bank customers for themselves and their dependent family.

Entry Age: Adult – 18-65 Years, Children- 91 Days onwards

What are the Key Benefits of the Policy?



Hospitalization expenses



Pre and Post Hospitalization



Mental Healthcare



Domiciliary Hospitalization



537 Day Care Procedures



Alternative Treatments



HIV/AIDS



Congenital Diseases



Advanced Treatments

What Does The Policy Cover?

Section I. HOSPITALIZATION COVERS

IA. Base Covers



1. Hospitalization

- Room rent and boarding expenses
- Intensive Care Unit expenses
- Surgeon, Anesthetist, Medical Practitioner, Consultant, Specialist fees
- Anesthesia, blood, oxygen, operation theatre charges, surgical appliances
- Medicines, drugs, and consumables
- Diagnostic procedures
- The cost of prosthetic and other devices or equipment if implanted internally during a surgical procedure



2. Pre and Post-Hospitalization Cover

We will pay medical expenses incurred by you up to the days specified in Policy Schedule immediately before your hospitalization and after the date of your discharge from hospital.



3. Mental Healthcare

Medical expenses due to hospitalization for any mental illness contracted during the Policy Period.



4. Day Care Procedure

Medical expenses on hospitalization of Insured Person in hospital or Day Care centre for any of the listed 537 Day Care treatments.



5. Ambulance Charges

We will pay for Road Ambulance services if required, for admissible claims.



6. Domiciliary Hospitalization

We will pay the medical expenses up to 20% of the Sum Insured subject to maximum of ₹ 50,000/- or ₹ 2,00,000/- as specified in the Policy Schedule / Certificate of Insurance.



7. Alternative Treatment / AYUSH

We will pay medical expenses up to Sum insured on hospitalization of Insured person for the following Alternative Treatments prescribed by medical practitioner.

- Ayurvedic
- Unani
- Siddha
- Homeopathy



8. Organ Donor Expenses

We will pay medical expenses of 50% of the Sum Insured as specified in Policy Schedule / Certificate of Insurance, towards organ donor's hospitalization for harvesting of the donated organ where an Insured Person is the recipient.



9. Reinstatement Benefit

Automatic reinstatement of the Sum Insured immediately upon exhaustion of the limit of coverage, as defined, during the policy period.



10. Genetic Disorder

Medical expenses if you are hospitalized due to any genetic disorder illness.



11. Internal Congenital Anomaly

Medical expenses if you are hospitalized due to any Internal Congenital diseases.



12. HIV / AIDS Cover

If you are diagnosed with HIV during the Policy Period and require hospitalization, we will pay medical expenses related HIV and/or HIV related illness, including AIDS.



13. Advance Procedures

The following procedures will be covered (wherever medically indicated) either as in patient or as part of day care treatment in a hospital up to 25% of Sum Insured as specified in the Policy Schedule /Certificate of Insurance, during the policy period and not limited to the following:

- Uterine Artery Embolization 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
- Stereotactic Radio Surgeries
- Bronchical Thermoplasty
- Vapourisation of the Prostate (Green laser treatment or holmium laser treatment)
- IONM (Intra Operative Neuro Monitoring)
- Stem Cell Therapy (Haematopoietic stem cells for bone marrow transplant for haematological conditions to be covered)

SECTION II. CRITICAL ILLNESS

Medical expenses due to any of the following critical illnesses first diagnosed within the Policy Period, subject to certain conditions.

List of Critical Illnesses Covered

1. Cancer of specified severity
2. Open Chest CABG
3. Open Heart Replacement Or Repair OF Heart Valves
4. Myocardial Infarction (First Heart Attack of specific severity)
5. Primary (Idiopathic) Pulmonary Hypertension
6. End Stage Lung Failure
7. Stroke Resulting In Permanent Symptoms
8. Permanent Paralysis of Limbs
9. Multiple Sclerosis With Persisting Symptoms
10. Benign Brain Tumor
11. Motor Neuron Disease with Permanent Symptoms
12. Coma of Specified Severity
13. Major head Trauma
14. Blindness
15. Major Organ / Bone Marrow Transplant
16. Third Degree Burns
17. Deafness
18. Loss of Speech
19. Kidney Failure Requiring Regular Dialysis
20. End Stage Liver Failure
21. Surgery of Aorta
22. Parkinson's Disease
23. Brain Surgery
24. Apallic Syndrome
25. Alzheimer's Disease
26. Aplastic Anaemia
27. Bacterial Meningitis
28. Loss of Independent Existence
29. Encephalitis
30. Fulminant Viral Hepatitis

SECTION III – HOSPITAL DAILY CASH

III.A. Base Cover



1. Sickness Hospital Cash Benefit

Daily Hospital Cash Benefit if the Insured Person is hospitalized during the Policy Period for medically necessary treatment.



2. Accident Hospital Cash Benefit

2 times the Daily Hospital Cash Benefit, if the Insured Person is hospitalized during the Policy Period due to an accident.



3. ICU Cash Benefit

3 times the Daily Hospital Cash Benefit if the Insured Person is hospitalized in an Intensive Care Unit (ICU) during the Policy Period.

Coverage under this benefit is limited to a maximum of 15 days in aggregate per Insured Person per Policy Year.



4. Convalescence Benefit

Lump sum amount of 5 times the Daily Hospital Cash Benefit if the Insured Person is hospitalized during the Policy Period and the continuation of such hospitalization is medically necessary for at least 10 consecutive days.



5. Compassionate Benefit

Lump sum amount of 10 times the Daily Hospital Cash Benefit to the nominee if the Insured Person is hospitalized for more than 24 hours and the Insured Person dies during the course of such hospitalization.



6. Day Care Treatment Benefit

If the Insured Person requires and avails a medically necessary Day Care treatment during the Policy Period, we will pay a lump sum benefit amount which is the lower of either 5 times the Daily Hospital Cash Benefit or ₹10,000/-.

What are the Waiting Periods?

First Thirty-days Period	30 days, except for accidents
Certain Specific Illnesses	1 year / 90 days/ 15 days
Pre-existing Diseases	3 years
Critical Illness	90 days and 28 days survival period

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
- Excluded Providers
- 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 to by nuclear weapons/materials
- Treatment taken outside India
- Circumcision

For complete details, refer to Policy Wordings

What Is SBI General's Renewal Policy?

- Sampoorna Arogya can be renewed every year upon payment of premium before Policy expiry.
- 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 Claims Team Will







Provide assistance in emergency situations



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

AVAILABLE PLANS

Coverage - Description	STANDARD	CLASSIC	SUPER	ULTRA
Sum Insured	₹1 lakh, ₹2 lakhs, ₹3 lakhs, ₹4 lakhs & ₹5 lakhs	₹2 lakhs, ₹3 lakhs, ₹4 lakhs & ₹5 lakhs	₹2 lakhs, ₹3 lakhs, ₹4 lakhs & ₹5 lakhs	₹6 lakhs, ₹7 lakhs, ₹8 lakhs, ₹9 lakhs & ₹10 lakhs
Hospital Daily Cash (on Individual Basis)	₹500 * 30 days	₹1000 * 30 days	₹2000 * 30 days	₹2000 * 30 days
Critical Illness (on Individual Basis - 30 CI)	NA	NA	Equal to Sum Insured	Equal to Sum Insured
Hospitalization Medical Expenses	Y	Y	Y	Y
Room Rent & ICU	2% for Normal Room & 4% for ICU	2% for Normal Room & 4% for ICU	2% for Normal Room & 4% for ICU	2% for Normal Room & 4% for ICU
Pre-hospitalization Medical Expenses	30 days	30 days	30 days	60 days
Post-hospitalization Medical Expenses	60 days	60 days	60 days	90 days
Mental Healthcare	Cover up to Sum Insured (Sub limit - 10% of the SI, max ₹50,000 whichever is lower, applicable for few conditions).	Cover up to Sum Insured (Sub limit - 10% of the SI, max ₹50,000 whichever is lower, applicable for few conditions).	Cover up to Sum Insured (Sub limit - 10% of the SI, max ₹50,000 whichever is lower, applicable for few conditions).	Cover up to Sum Insured (Sub limit - 10% of the SI, max ₹50,000 whichever is lower, applicable for few conditions).
537 Day Care Surgeries/Procedures	Y	Y	Y	Y
Ambulance charges	1% of Sum Insured subject to maximum ₹5,000	1% of Sum Insured subject to maximum ₹5,000	1% of Sum Insured subject to maximum ₹5,000	1% of Sum Insured subject to maximum ₹10,000
Domiciliary Hospitalisation	20% of Sum Insured subject to maximum of ₹50,000/-	20% of Sum Insured subject to maximum of ₹50,000/-	20% of Sum Insured subject to maximum of ₹50,000/-	20% of Sum Insured subject to maximum of ₹50,000/-
Alternative Treatments	Upto Sum Insured	Upto Sum Insured	Upto Sum Insured	Upto Sum Insured
Organ Donor Expenses	N	N	N	Covered up to 50% of Sum Insured
Reinstatement Benefit	N	N	N	Once up to 100% not for same illness within the same year & only if Sum Insured is exhausted
Outpatient expenses	N	N	N	1% of Sum Insured subject to max ₹10,000; Reimbursement only once a year; Deductible - ₹500
HIV/AIDS Cover	Y	Y	Y	Y
Genetic Disorders	Max ₹1 Lakh	Max ₹1 Lakh	Max ₹1 Lakh	Max ₹1 Lakh
Internal Congenital Anomaly	25% of Sum Insured	25% of Sum Insured	25% of Sum Insured	25% of Sum Insured
Internal Congenital Anomaly	25% of Sum Insured	25% of Sum Insured	25% of Sum Insured	25% of Sum Insured

ILLUSTRATIVE PREMIUM TABLE (Inclusive of 18% GST)

Standard Plan - 1 Adult				
Age Band	Sum Insured ₹1 Lakh	Sum Insured ₹2 Lakhs	Sum Insured ₹3 Lakhs	Sum Insured ₹5 Lakhs
18-35	1805	2784	3538	4395
36-45	2375	3703	4732	5888
46-55	3025	4760	6117	7617
56-60	4651	7358	9491	11817
61-65	6068	9629	12444	15495
Classic Plan - 1 Adult				
Age Band	Sum Insured ₹2 Lakhs	Sum Insured ₹3 Lakhs	Sum Insured ₹4 Lakhs	Sum Insured ₹5 Lakhs
18-35	2931	3685	4163	4542
36-45	3867	4896	5543	6053
46-55	4962	6319	7161	7819
56-60	7689	9821	11132	12147
61-65	10061	12876	14597	15927
Super Plan - 1 Adult				
Age Band	Sum Insured ₹2 Lakhs	Sum Insured ₹3 Lakhs	Sum Insured ₹4 Lakhs	Sum Insured ₹5 Lakhs
18-35	4222	5284	6008	6611
36-45	6024	7731	8970	10041
46-55	8815	11602	13760	15692
56-60	14620	19434	23243	26691
61-65	19941	26675	32073	36993
Ultra Plan - 1 Adult				
Age Band	Sum Insured ₹6 Lakhs	Sum Insured ₹7 Lakhs	Sum Insured ₹9 Lakhs	Sum Insured ₹10 Lakhs
18-35	8723	9643	10882	11364
36-45	11999	13308	15188	15952
46-55	16314	18159	21039	22272
56-60	24634	27394	32516	34569
61-65	32136	35740	42477	45288

Prohibition of Rebates

Section 41 in The Insurance Act, 1938 as amended by Insurance Law (Amendment) Act, 2015:

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 prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

For More Details Contact



SURAKSHA AUR BHAROSA DONO

Disclaimer: SBI General Insurance Company Limited | Corporate & Registered Office: Fulcrum Building, 9th Floor, A & B Wing, Sahar Road, Andheri (East), Mumbai - 400099. | The information in the advertisement is indicative in nature. For more details on the risk factor, terms and conditions, please refer to the Sales Brochure and Policy Wordings carefully before concluding a sale. | Optional covers are subject to payment of additional premium. | For SBI General Insurance Company Limited IRDAI Reg. No. 144 dated 15/12/2009 | CIN: U66000MH2009PLC190546 | SBI Logo displayed belongs to State Bank of India and used by SBI General Insurance Company Limited under license. | Website : Website: www.sbigeneral.in, Tollfree: 18001021111 | Sampoorna Arogya - Group, UIN: SBIHLGP21605V012021 | Advt No: ADBRO/AUG/2024-25/1353 | SBI General Insurance and SBI are separate legal entities and SBI is working as Corporate Agent of the company for sourcing of insurance products.

Contact Us

📞 1800 102 1111 | 🌐 www.sbigeneral.in