



0 Claim.

80% Gain.



GET **80%** DISCOUNT
ON YOUR NEXT PREMIUM FOR
A CLAIM-FREE YEAR.



WHAT IS HEALTH SUPER SAVER?

Health Super Saver is a health insurance product with a unique benefits of 'Super Saver Discount'!

The production includes 2 plan variants:

HEALTH SUPER SAVER 1X PLAN

HEALTH SUPER SAVER 2X PLAN



WHAT IS SUPER SAVER DISCOUNT?

- It is a discount of 80% on applicable premium, which is offered to the insured in case the initial years of plan tenure is claim free.
- Health Super Saver 1X plan - In case, your first year of plan tenure is claim free, you are eligible for Super Saver discount of 80% in the consecutive year of the plan.
- Health Super Saver 2X plan - In case, your first 2 years of plan tenure is claim free, you are eligible for Super Saver discount of 80% for next consecutive 2 years in the plan or up to first claim.
- In case there is no claim paid for an insured in an individual policy, the Super Saver discount would be applied for that respective individual's premium only.
- In case there is no claim paid for any of the insured covered under the floater policy, the Super Saver discount would be applied on total policy premium. In case of claim paid for any insured under the floater policy, the Super Saver discount will not be applicable.
- For the purpose of the Super Saver discount calculation, paid claim and outstanding claims are considered.



BENEFITS



80% discount on the next premium for a claim free year.



Wider coverage for the whole family.



Sum insured on an individual and floater basis.



Installment option available for premium.

HEALTH SUPER SAVER

A. Eligibility	Sum Insured options (in `)	3 Lacs, 4 Lacs, 5 Lacs, 6 Lacs, 10 Lacs, 15 Lacs, 20 Lacs, 25 Lacs, 50 Lacs
	Entry age of proposer	18 years – 70 years
	Entry age of child	From birth – 25 years
	Maximum renewal age	Lifelong
	Sum insured options	Individual/ Family Floater
	Policy term	Annual basis
	Family definition (Individual/ Family Floater)	Self, spouse/Live-in partner and up to 4 children, 2 dependent parents and /Or 2 dependent parents in law
	Plans	Health Super Saver 1X plan, Health Super Saver 2X plan The plan opted will be common for all members covered under the policy irrespective of individual and floater sum insured options.
B. Coverages	Hospitalisation expenses	Covered
	Pre- Hospitalisation expenses	60 days
	Post-Hospitalisation expenses	90 days
	Day care treatment	Covered
	Maternity expenses	Covered with a waiting period of 9 months, 24 months and 36 months inclusive of pre-natal and post-natal hospitalisation as per the plan opted under the base sub limits
	Alternative treatment	Hospitalisation for Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy
	Organ donor expenses	Hospitalisation expenses are covered (excluding donor screening charges, pre and post hospitalisation)
	Emergency ambulance	Maximum up to Rs.1000 per hospitalisation
	Home health care services	a) Available through our empanelled service provider or our empaneled network on cashless facility basis. b) Pre and post hospitalization expenses (both inclusive) are restricted up to 3% of the admissible claim amount.
C. Waiting Periods	30 days	Applicable, except for accidental hospitalisation
	2 Years	Applicable for listed conditions
	3 Years	Applicable for listed conditions
	Pre-existing diseases	2 Years
D. Discount	Super Saver discount	<p>a) For Health Super Saver 1X plan option, in case, your first year of plan tenure is claim free, you are eligible for Super Saver discount of 80% in the consecutive year.</p> <p>b) For Health Super Saver 2X plan option, in case, your first 2 years of plan tenure are claim free, you are eligible for Super Saver discount of 80% for next consecutive 2 years, or up to first claim, whichever is earlier.</p> <p>c) In case there is no claim paid for an insured in an individual policy, the Super Saver discount would be applied for that respective individual's premium only. In case of claim paid in the first year under 1X plan or in the first 3 years under 2X plan for any insured under the individual policy, the Super Saver discount will not be applicable to the respective insured. However at the time of subsequent renewal year, Insured has an option to start a new plan tenure under 1X Plan or 2X plan. In such case, he/she shall be covered under a separate policy with new plan tenure on individual sum insured basis without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases</p> <p>d) In case there is no claim paid for any of the insureds covered under the floater policy, the Super Saver discount would be applied on total policy premium. In case of claim paid for any insured under the floater policy, the Super Saver discount will not be applicable. However the policy can be renewed with a new plan tenure under 1X Plan or 2X plan without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases.</p>

		e) Increase/ decrease in sum insured, change of sub limit option and/or change of plan is allowed only at the start of plan tenure. Note: For the purpose of the Super Saver discount calculation, paid claim and outstanding claims are considered								
	Family discount	10% discount is applicable in case two or more family members are covered with individual sum insured basis in the same policy. Note : Family discount will not be applicable, if the Insured opts for a new plan under 1X Plan or 2X plan at the time of renewal due to claim reported under previous policy.								
E	Instalment option (monthly, quarterly half yearly) with loading	Loadings on standard premium will be applicable in case instalment facility is opted for premium payment. <table border="1"> <thead> <tr> <th>Instalment frequency</th> <th>Loading on standard premiums</th> </tr> </thead> <tbody> <tr> <td>Monthly</td> <td>5%</td> </tr> <tr> <td>Quarterly</td> <td>4%</td> </tr> <tr> <td>Half-yearly</td> <td>3%</td> </tr> </tbody> </table>	Instalment frequency	Loading on standard premiums	Monthly	5%	Quarterly	4%	Half-yearly	3%
Instalment frequency	Loading on standard premiums									
Monthly	5%									
Quarterly	4%									
Half-yearly	3%									
F	Sublimit for Specified procedures	a) Base sub limits (Standard option/ double option/ Nil sub limits option) b) Mandatory sub limits for modern treatment methods and advancement in technologies c) Optional sub limits – applicable for sum insured from INR 3 lacs up to 10 lacs if the insured has opted for it								
G	Loadings and discount applicable for options under the sub limits	a) Loading applicable for base sub limits options are as given below, loading shall be applicable on respective person's premium <table border="1"> <thead> <tr> <th>Instalment frequency</th> <th>Loading on standard premiums</th> </tr> </thead> <tbody> <tr> <td>Monthly</td> <td>5%</td> </tr> <tr> <td>Quarterly</td> <td>4%</td> </tr> <tr> <td>Half-yearly</td> <td>3%</td> </tr> </tbody> </table>	Instalment frequency	Loading on standard premiums	Monthly	5%	Quarterly	4%	Half-yearly	3%
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Monthly	5%									
Quarterly	4%									
Half-yearly	3%									

Pre-insurance medical examination

Pre-insurance medical examination for any individual is applicable as below:

Age	Sum Insured (in Rs.)	Medical Examination
Up to age 50 years	Up to 20 Lacs	Not required. subject to clean proposal forms (without medical declaration)
	25 Lacs, 50 Lacs	Required
51 years and Above	Any sum insured	Required

- Insured is eligible for 100% reimbursement of pre-insurance medical tests charges, subject to policy issuance and 64VB compliance.
- All pre-insurance medical tests will have to be done at the Future Generali empaneled diagnostic centers only.
- The test reports would be valid for a period of 30 days from the date of test conducted.
- Underwriting loading on the standard premium rates will be applicable based on health status of the proposed insured person.
It will take into consideration the adverse health conditions declared on the proposal form and findings of medical tests conducted.
- Underwriting loading of premium will be applicable on the particular insured's premium in case of individual policy and floater policy.

Free look period

The insured will be allowed a period of at least 30 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.

If the insured has not made any claim during the free look period, the insured shall be entitled to:

- i. A refund of the premium paid minus any expenses incurred by the insurer on medical examination of the insured and the stamp duty charges or;
- ii. Where the risk has already commenced and the option of return of the policy is exercised by the policyholder, a deduction towards the proportionate risk premium for period on cover or;
- iii. Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.

Renewal

The premiums, as per the age slabs/sum insured, are given in the brochure and the same would be charged as per the completed age at every renewal.

Increase/ decrease in sum insured, change of sub limit option and/or change of plan is allowed only at the start of plan tenure.

Any change in premium will be done with the approval of the IRDAI.

- Revised premium will be applicable for all new proposals.
- Revised premium will be intimated to renewals starting with new plan tenure at least 3 months in advance.
- The existing rates will continue to be applicable for policyholders till the end of ongoing plan tenure.
- In the likelihood of this policy being withdrawn in future, we will intimate you about the same 3 months prior to expiry of the policy.

Exclusions

- Expenses related to pre-existing disease shall be excluded until the expiry of 24 months.
- Any disease contracted during the first 30 days from the commencement of the policy, except due to accidental injury.
- Joint replacement Surgery due to degenerative conditions, shall be covered after a waiting period of 36 months
- Diseases like Benign Prostatic Hypertrophy, Hernia and Tumours shall be covered after a waiting period of 24 months.
- Change of gender treatments.
- Hazardous or adventure sports.
- All expenses related to Sexually Transmitted Diseases other than HIV/AIDS.

*The above list is indicative in nature, please refer to policy wordings for complete details.

Other features

- There will be no loading on premium for adverse claims experience.
- Portability and migration can be offered as per the guidelines.
- Installment facility – Option for payment of premium on an installment basis is available
- Premium paid by any mode other than cash and demand draft is eligible for tax relief as provided under Section 80-D of the Income Tax Act

Basis of claims payment

- We shall make payment in Indian rupees only.
- The product includes the following sub limits:

1.Base Sub limits

Our maximum liability towards expenses incurred during hospitalisation (inclusive of pre and post hospitalisation) for the specified conditions/ procedures are as per the 3 options given below:

i. Standard Option

The maximum liability for the specified conditions/ procedures will be as per the table below:

All values are in INR									
Procedure/Treatment	Sum Insured								
	300000	400000	500000	600000	1000000	1500000	2000000	2500000	5000000
Listed mental and psychiatric Illness #	60000	80000	100000	120000	200000	300000	400000	500000	1000000
a. F01 Vascular dementia									
b. F20 Schizophrenia									
c. F30 Manic episode									
d. F31 Bipolar affective disorder									
e. F32-33 Depressive disorders									
f. F41 Other anxiety disorders									
g. F50 Eating disorders									
h. F60 Specific personality disorders									
i. F84 Pervasive developmental disorders									
j. F40.9 Phobic anxiety disorder, unspecified									
k. F05 Delirium, not induced by alcohol and other psychoactive substances									
Cataract surgery (per eye)	30000	40000	50000	60000	100000	150000	150000	150000	150000
Maternity* – Normal Delivery	15000	15000	25000	25000	35000	50000	50000	50000	50000
Maternity* – LSCS (Caesarean)	25000	25000	35000	35000	45000	50000	60000	75000	100000

Per policy period

*Maternity limit includes Pre-natal and Post- natal hospitalisation expenses.

ii. Double option

The maximum liability for the specified conditions/ procedures will be as per the table below:

All values are in INR									
Procedure/Treatment	Sum Insured								
	300000	400000	500000	600000	1000000	1500000	2000000	2500000	5000000
Listed Mental and Psychiatric Illness #	120000	160000	200000	240000	400000	600000	800000	1000000	2000000
a. F01 Vascular dementia									
b. F20 Schizophrenia									
c. F30 Manic episode									
d. F31 Bipolar affective disorder									
e. F32-33 Depressive disorders									
f. F41 Other anxiety disorders									
g. F50 Eating disorders									
h. F60 Specific personality disorders									
i. F84 Pervasive developmental disorders									
j. F40.9 Phobic anxiety disorder, unspecified									
k. F05 Delirium, not induced by alcohol and other psychoactive substances									
Cataract surgery (per eye)	60000	80000	100000	120000	200000	300000	300000	300000	300000
Maternity* – Normal delivery	30000	30000	50000	50000	70000	100000	100000	100000	100000
Maternity* – LSCS (Caesarean)	50000	50000	70000	70000	90000	100000	120000	150000	200000

Per policy period

*Maternity limit includes Pre-natal and Post- natal hospitalisation expenses.

iii. Nil sublimit option

Under this option, Our maximum liability for the specified conditions/ procedures will be as per the actual expenses or up to the sum insured, whichever is less:

i. Listed mental and psychiatric illness

- a. F01 Vascular dementia
- b. F20 Schizophrenia
- c. F30 Manic episode
- d. F31 Bipolar affective disorder
- e. F41 Other anxiety disorders
- f. F50 Eating disorders
- g. F50 Eating disorders
- h. F60 Specific personality disorders
- i. F84 Pervasive developmental disorders
- j. F40.9 Phobic anxiety disorder, unspecified
- k. F05 Delirium, not induced by alcohol and other psychoactive substances

ii. Cataract surgery (per eye)

iii. Maternity (Normal delivery or Caesarean section)

2. Mandatory sub limits for modern treatment methods and advancement in technologies

The Medical expenses incurred for the below listed treatments or procedures, as inpatient or as day care treatment (inclusive of pre and post hospitalisation), shall be restricted to 50% of the sum insured opted, per policy period.

- i. Uterine Artery Embolization and HIFU
- ii. Balloon Sinuplasty
- iii. Deep brain stimulation
- iv. Oral chemotherapy
- v. Immunotherapy- Monoclonal aAntibody to be given as injection
- vi. Intra vitreal injections
- vii. Robotic surgeries
- viii. Stereotactic radio surgeries
- ix. Bronchial Thermoplasty
- x. Vaporisation of the prostate (Green laser treatment or holmium laser treatment)
- xi. IONM - (Intra Operative Neuro Monitoring)
- xii. Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.t

3. Optional Sub limits

- i. The below sub limits shall be applicable for sum insured from INR 3 Lacs up to 10 Lacs if the Insured has opted for it.
- ii. The Medical Expenses incurred during hospitalisation (inclusive of pre and post Hospitalisation) due to the below listed treatments shall be limited to actual expenses or up to the sub limits (whichever is less).

All values are in INR.					
Procedure/Treatment	300000	400000	500000	600000	1000000
Coronary Artery Bypass Grafting (CABG)	150000	200000	225000	275000	300000
Percutaneous Transluminal Coronary Angioplasty (PTCA)	150000	200000	225000	275000	300000
Total Knee Replacement (per knee)	150000	200000	225000	275000	300000
Total Hip Replacement (per hip)	150000	200000	225000	275000	300000
HIV/ AIDS#	60000	80000	100000	120000	200000

Per policy period

If you are suffering from an illness / disease or if you meet with an accident which requires hospitalisation, please contact us on the following:

Claims Department
Future Generali Health (FGH)
Future Generali India Insurance Co. Ltd.,
Office No. 3, 3rd Floor, "A" Building, G-O-Square
S. No. 249 & 250, Aundh Hinjewadi Link Road, Wakad, Pune - 411 057.

Toll Free Number: 1800 103 8889 / 1800 209 1016

Toll Free Fax: 1800 103 99 98 / 1800 209 1017

Email: fgh@futuregenerali.in





GET **80%** DISCOUNT
ON YOUR NEXT PREMIUM FOR
A CLAIM FREE YEAR.

Plan Option	Policy Period	Status of Claim	Super Saver Discount Applicability	Premium Applicable
Health Super Saver 1X Plan	1	No Claim	Not applicable as plan tenure started	100%
	2	Claim/ No Claim	Applicable	20%
Renewal (New plan tenure) (1x plan opted)	3	Claim	Not applicable as new plan tenure started	100%
Renewal (New plan tenure) (1x plan opted)	4	No Claim	Not applicable as new plan tenure started	100%
	5	Claim	Applicable	20%



Plan Option	Policy Period	Status of Claim	Super Saver Discount Applicability	Premium Applicable
Health Super Saver 1X Plan	1	No Claim	Not applicable as plan tenure started	100%
2 nd year of plan tenure	2	No Claim	Not applicable	100%
3 rd year of plan tenure	3	No Claim	Applicable	20%
4 th year of plan tenure	4	No Claim	Applicable	20%
Renewal (New plan tenure)	5	No Claim	Not applicable as new plan tenure started	100%
2 nd year of plan tenure	6	No Claim	Not applicable	100%
3 rd year of plan tenure	7	Claim	Applicable	20%
Renewal (New plan tenure)	8	No Claim	Not applicable as new plan tenure started	100%
2 nd year of plan tenure	9	No Claim	Not applicable	100%
3 rd year of plan tenure	10	No Claim	Applicable	20%
4 th year of plan tenure	11	No Claim	Applicable	20%

Note: For the purpose of the Super Saver discount calculation, paid claim and outstanding claims are considered.

Premium Tables (exclusive of Goods and Services Tax) A. Individual Premium

Health Super Saver 1X Plan

Age Bands/SI	3 lakhs	4 lakhs	5 lakhs	6 lakhs	10 lakhs	15 lakhs	20 lakhs	25 lakhs	50 lakhs
0-17	5,385	6,262	6,735	7,381	9,108	9,988	10,553	12,579	15,197
18-25	8,721	10,068	11,059	12,050	14,965	16,514	17,572	20,421	24,900
26-30	9,534	11,020	12,085	13,178	16,366	18,080	19,225	22,230	27,116
31-35	9,840	11,379	12,471	13,603	16,893	18,923	20,101	23,165	28,203
36-40	10,450	12,093	13,240	14,450	17,944	20,077	21,321	24,502	29,845
41-45	11,555	13,389	14,636	15,985	19,850	22,170	23,532	26,926	32,822
46-50	16,167	18,802	20,447	22,385	27,790	30,879	32,725	35,987	45,170
51-55	23,850	27,722	29,772	32,621	40,196	44,313	46,753	51,102	62,436
56-60	31,817	37,057	39,831	43,685	53,934	59,398	62,696	68,579	83,897
61-65	43,181	50,372	54,177	59,466	73,529	80,915	85,438	93,507	114,511
66-70	57,938	67,661	72,807	79,958	98,973	108,856	114,970	125,878	154,264
71-75	69,498	81,205	87,401	96,012	118,905	130,744	138,103	151,235	185,404
>=76	78,074	91,254	98,228	107,921	133,692	146,981	155,263	170,046	208,505

Health Super Saver 2X Plan

Age Bands/SI	3 lakhs	4 lakhs	5 lakhs	6 lakhs	10 lakhs	15 lakhs	20 lakhs	25 lakhs	50 lakhs
0-17	5,607	6,517	7,021	7,690	9,495	10,417	11,013	13,090	15,828
18-25	8,906	10,283	11,293	12,306	15,283	16,864	17,943	20,829	25,402
26-30	9,685	11,196	12,276	13,388	16,626	18,418	19,581	22,617	27,580
31-35	10,051	11,625	12,738	13,896	17,257	19,327	20,529	23,635	28,781
36-40	10,699	12,384	13,556	14,795	18,373	20,553	21,824	25,055	30,525
41-45	12,451	14,437	15,767	17,228	21,393	23,868	25,328	28,896	35,241
46-50	17,525	20,410	22,142	24,263	30,112	33,416	35,386	39,879	48,708
51-55	25,549	29,712	31,916	34,979	43,123	47,531	50,154	54,830	67,012
56-60	34,271	39,932	42,928	47,091	58,163	64,046	67,609	73,963	90,508
61-65	46,614	54,392	58,510	64,231	79,444	87,416	92,308	101,037	123,757
66-70	61,202	71,485	76,927	84,489	104,598	115,039	121,503	133,039	163,056
71-75	72,775	85,044	91,537	100,560	124,551	136,950	144,662	158,424	194,230
>=76	80,239	93,788	100,958	110,923	137,418	151,080	159,595	174,793	214,332

B. Floater Discount: Applicable as per following table

Age Bands/SI	Floater Discount
0-17	60%
18-25	55%
26-30	50%
31-35	45%
36-40	45%
41-45	40%
46-50	40%

Age Bands/SI	Floater Discount
51-55	40%
56-60	35%
61-65	35%
66-70	35%
71-75	35%
>=76	25%

*Premiums exclusive of Goods & Services Tax.

**Age in completed years

*** For family floater, premiums applicable for the primary insured will be the standard individual premiums.

For the remaining dependent members, floater discounts will be applicable on their respective premiums.

**** The premiums above are subject to revision as and when approved by the regulator.

However, such revised premiums would be applicable only from subsequent renewals and with due notice whenever implemented.

Premium illustration in respect of policies offered on individual and family floater basis

Health Super Saver 1X Plan

Age of the members insured	Coverage opted on individual basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under a single policy (sum insured is available for each member of the family)				Coverage opted on family floater basis with overall sum insured (only one sum insured is available for the entire family)			
		Sum insured (Rs.)	Sum premium (Rs.)	Discount (if any)	Premium after discount (Rs.)	Sum insured (Rs.)	Premium or consolidated premium for all members of the family (Rs.)	Floater discount (if any)	Premium after discount (Rs.)	Sum premium (Rs.)
38 years	13,240	500000	13,240	1324	11,916	500000	13,240	5296	7,944	500000
36 years	13,240	500000	13,240	1324	11,916	500000	13,240	5296	7,944	
18 years	11,059	500000	11,059	1106	9,953	500000	11,059	6635	4,424	
14 years	6,735	500000	6,735	674	6,062	500000	6,735	3704	3,031	
12 years	6,735	500000	6,735	674	6,062	500000	6,735	3368	3,368	
12 years	6,735	500000	6,735	674	6,062	500000	6,735	3368	3,368	
66 years	72,807	500000	72,807	7281	65,526	500000	72,807	32763	40,044	
63 years	54,177	500000	54,177	5418	48,759	500000	54,177	24380	29,797	
61 years	54,177	500000	54,177	5418	48,759	500000	54,177	24380	29,797	
58 years	39,831	500000	39,831	3983	35,848	500000	39,831	17924	21,907	
Total premium for all members of the family is ₹278,736/-, when each member is covered separately. Sum insured available for each member is covered separately. Sum insured available for each individual is ₹5,00,000.			Total premium for all members of the family is ₹250,862/-, when they are covered under a single policy. Sum insured available for each family member is ₹5,00,000.				Total premium when policy is opted on floater basis is ₹156,919. Sum insured of ₹5,00,000 is available for the entire family.			

Note:

1. This is just an illustration of premium calculation.
2. Premiums may vary with respect to plan and Sum Insured opted by the insured.
3. Premium rates specified in the above illustration are the standard premium rates without considering any loading and/or discounts like – online (website) sales discount etc.
4. In case premium is paid on instalment basis, the loading will be applicable accordingly.
5. Premium rates are exclusive of Goods and Services Tax applicable.



1800-200-233



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Follow us on



If you are suffering from an illness/ disease or if you meet with an accident which requires hospitalisation, please contact us on the following:

Claims Department

Future Generali India Health (FGH)

Office No. 3, 3rd Floor, "A" Building, G-0-Square

S.No. 249 & 250, Aundh Hinjewadi Link Road, Wakad, Pune-411 057.

Toll Free Number: 1800 103 8889 / 1800 209 1016

Toll Free Fax: 1800 103 9998 / 1800 209 1017

Email: fgcare@futuregenerali.in

Future Generali India Insurance Company Limited (IRDAI Regn. No.: 132), (CIN: U66030MH2006PLC165287) Regd. and Corp. Office: Unit No. 801 and 802, 8th Floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai – 400083. Fax: 022-4097 6900 | Email: fgcare@futuregenerali.in | Call us at: 1800-220-233 | 1860-500-3333 | 022-67837800 | Website: <https://general.futuregenerali.in> | For detailed information on the product including risk factors, terms and conditions, etc., please refer to the product policy clause, consult your advisor or visit our website before concluding a sale. Health products are eligible for deduction under Section 80D of the Income Tax Act. Tax benefits are subject to change due to change in tax laws. Trade Logo displayed above belongs to M/S Assicurazioni Generali - Societa Per Azioni and used by Future Generali India Insurance Co. Ltd. under license.

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