

Co-Payment

35% Co-pay if the insured person undergoes medical treatment in Zone A Cities/Towns

Zone A Cities

Greater Mumbai, Delhi, Kolkata, Chennai, Bangalore, Hyderabad, Ahmedabad, Pune, Surat, Jaipur, Kanpur, Lucknow, Nagpur, Ghaziabad, Indore, Coimbatore, Kochi, Patna, Kozhikode, Bhopal, Thrissur, Vadodara, Agra, Visakhapatnam, Malappuram, Thiruvananthapuram, Kannur, Ludhiana, Nashik, Varanasi, Madurai, Meerut, Vijaywada, Faridabad, Rajkot, Jamshedpur, Jabalpur, Srinagar, Asansol, Vasai-Virar, Dhanbad, Allahabad, Aurangabad, Amritsar, Jodhpur, Ranchi, Raipur, Kollam, Gwalior, Durg-Bhilainagar, Chandigarh, Tiruchirapalli, Secunderabad, Gurgaon, Noida, Greater Noida and Kota

Premium

The premium starts with ₹ 216/- per month for a family (02 adults + 02 children) and Sum Insured of ₹ 1 Lac

Discounts

- 1) 10% discount in policy premium for customers holding any active insurance policy of IFFCO-TOKIO.
- 2) 10% discount in policy premium for all customers who buy policy directly through IFFCO-TOKIO website.

Note: All the above discounts are on cumulative basis.

Disclaimer: This brochure provides only the salient features and for details kindly refer to the complete Policy wordings. For enquires, kindly contact our nearest Bima Kendra, SBU or dial Toll Free No. 1800-103-5499 or visit our website www.iffcotokio.co.in

Statutory Warning: Prohibition of rebates (under section 41 of Insurance Act 1938): 1. No person shall allow or offer to allow either directly or indirectly as an inducement to any person to take 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. Provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by 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.



SWASTHYA RAKSHA BIMA

An affordable and comprehensive protection cover
for you and your family

UIN: IFFHLIP20068V011920

For further information, contact:

Toll Free: 1800 103 5499
www.iffcotokio.co.in | SMS 'CLAIM' to 56161
Email: info@iffcotokio.co.in

Important Disclaimers:

- a. For more details on risk factors, terms and conditions, please read sales brochures carefully before concluding a sale |
- b. Insurance is the subject matter of solicitation |
- c. Terms and conditions apply



IFFCO-TOKIO General Insurance Company Limited

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GURUGRAM (HARYANA) - 122001
Phone: +91-124-2850100, Fax: +91-124-2577923/24

UAN: ITGI/19-20/InsAdvt/Health-03
IRDAI Regd. No.: 106 | CIN: U74899DL2000PLC107621



IFFCO-TOKIO now brings to you an affordable and comprehensive health insurance policy that will protect you and your entire family from any financial worries related to your health & well being. Swasthya Raksha Bima provides medical cover for the entire family, at no additional cost, with a single sum insured on floater basis. With Swasthya Raksha Bima from IFFCO-TOKIO, enjoy comprehensive cover and complete happiness !!! Muskurate Raho.

Salient Features

- **Sum Insured option** : ₹1L-5L in multiple of ₹1L
- **Policy Type** : Family Floater
- **Income Tax benefits** under section 80D* (*Subject to change in tax laws)
- **Cashless claim facility** available at over more than 5000 network hospitals across India
- **Quick and fair** inhouse settlement of claims
- **Portability** : You can switch from any other similar policy of any other insurer to our policy and protect your continuity benefit as per IRDAI Guidelines
- **Life Long renewal**

Who Can Be Covered Under This Policy?

- Maximum of 5 family members can be covered under the policy. Family means:
 - Self
 - Spouse
 - Dependent children (up to the age of 23 years)
- **Age group : 18-65 yrs.** Dependent children above 3 months can be covered under the policy.

Exclusions

- Any condition(s) defined as pre-existing disease in the policy, until 48 months of continuous coverage.

- Diseases contracted during the first 30 days of policy.
- During the first year of the policy, the expenses on the treatment of diseases such as Tonsillitis/Adenoids, Gastric or Duodenal Ulcer, any type of cyst/Nodules/Polyps, any type of Breast Lumps.
- During the first two continuous years of the insurance with us, the expenses on the treatment of diseases such as Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia or Fibromyoma, Hernia, Hydrocele, Fistula in anus, Piles, Sinusitis, Cholelithiasis and Cholecystectomy, Inter-vertebral disc prolapse (Other than Caused by an Accident), Osteoarthritis, Varicose Veins/ Varicose Ulcers etc.
- Cosmetic or aesthetic treatment, general debility, use of drugs, intentional self injury, Spondylosis / Spondylitis – any type.
- Naturopathy, acupuncture, magnetic treatment, alternative medicines, etc.

For complete list of exclusions, kindly refer the policy wordings.

Free Lookup Period (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.

(Refund shall be the premium paid less any expenses incurred by us)

Scope of Cover

- Room, Boarding and Nursing Expense as provided in the Hospital/Nursing Home subject to following limits
 - a) Normal Room expenses: 1% of the Sum Insured per day
 - b) Sub limit per day for ICU : 2.0% of the Sum Insured per day
- Daily Hospitalization Allowance: ₹ 150/- per day
- Ambulance charges maximum to ₹ 750/- for each admissible claim

- AYUSH hospitalization expenses including Pre- Hospitalization and Post-Hospitalization expenses
- Pre-Hospitalization and Post-Hospitalization expenses for 30 days
- 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 of Pacemaker, Artificial Limbs, Cost of Transplantation and similar expenses
- Pre-existing diseases after 4 continuous policy years with us
- Prosthetic devices like Pacemaker, Artificial Limbs etc.
- Transplants including donor's treatment and organs transplantation cost
- Dental surgery and treatment following an accident
- Defined day care surgeries
- Vitamins and tonics consistent with illness

Disease Wise Cappings

Serial No	Treatment List	Expense Limit Per Claim
A	Cataract	5% of the Sum Insured subject to maximum of ₹ 15,000/-
B	Piles, Fistula, Fissure, Tonsillitis, Sinusitis	8% of the Sum Insured subject to maximum of ₹ 25,000/-
C	Benign Prostatic Hypertrophy, Hernia	8% of the Sum Insured subject to maximum of ₹ 30,000/-
D	Knee/Hip Joint Replacement, Cancer, Renal Failure	30% of the Sum Insured subject to maximum of ₹ 1,00,000/-
E	Appendicitis, Gall Bladder Stones and Hysterectomy	10% of the Sum Insured subject to maximum of ₹ 25,000/-