

Smart Health + Prospectus cum Sales Literature

Policy Design

- Niva Bupa's 'Smart Health +' is a rider that means it can be purchased along with the Base Plan only and cannot be bought in isolation or as a separate product.
- This Rider shall be available only for claims made within India during the Policy Period
- The rider is available only as Individual Plan.
- Any claim under any of the benefits mentioned in this rider Policy will only be admissible when it qualifies according to the terms, conditions and exclusions in the plan.
- Entry age, exit age, cover type, and tenure will be as per the Base Plan.
- The Rider has 5 variants Best Consult, Best Care, Disease Management Gold, Disease Management Platinum, and Complete Care
- Benefits applicable to consumer will be as per the variant of the rider chosen by them

1. Variants & Benefits description

A. Best consult

i. What is covered?

This plan covers 'Acute conditions' ONLY.

ii. What you get

You can avail UNLIMITED tele-consultation with **general medical practitioner, specialists and super specialist consultations** through **OUR PARTNER ONLY**, whenever you need, 24 hours a day 7 days a week, 365 days a year. 366 days if it's a leap year.

What is an acute condition?

Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery

What it means?

These are the conditions that one suffers from every now and then and are unexpected like fever, cough, cold, injury, diarrhea etc. In these conditions, once treated for a few days you get better completely and the condition is 'cured'. No regular treatment, medicines, follow up, or monitoring is required for such conditions.

Example:

- Mr. X is suffering from diabetes and is on regular medication for diabetes. He falls ill and has urinary tract infection. He can consult doctor through our partner to get treatment for the same.
- Mr. Y is a healthy individual. He has fever for which he can consult doctor through our partner.

iii. What is NOT covered?

- Chronic conditions.
- Consultations NOT availed through our partner
- Cost of medicines, investigations, procedures, in-hospital treatment (whether out-patient, in-patient or day care)

What is a chronic condition?

A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:

- it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
- it needs ongoing or long-term control or relief of symptoms
- it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
- it continues indefinitely
- it recurs or is likely to recur

What it means?

Those conditions that are not completely cured by treatment. Regular treatment, medicines, follow ups and monitoring is required to keep these conditions under control. These are conditions like Diabetes, High blood pressure, Asthma, Arthritis etc.

Example:

- Mr. X is suffering from diabetes and take regular medication to control his sugar level. Diabetes is a chronic condition and consultation to manage diabetes is not covered

- Mr. Y is suffering from Psoriasis. He consults his doctor every quarter and takes regular medication to keep the condition under control. Psoriasis is a chronic condition and consultation to manage this is not covered
- Mr. Z falls down at home, goes to nearby Doctor for consultation. Doctor prescribes medication for the injury. This is not covered because i) he has not availed consultation through our partner and ii) cost of medication/investigation is not covered under Best Consult

iv. How it works

Simple!! Call the number we have provided to you. Doctor will receive your call directly.

We recommend you **store the number on your phone, stick it on your refrigerator or a place easily accessible.**

B. Best care

i. What is covered?

This plan covers 'Acute conditions' ONLY.

ii. What you get

- You can avail UNLIMITED tele-consultation with **general practitioner, specialists, and super specialist consultations** through **OUR PARTNER ONLY**, whenever you need, 24 hours a day 7 days a week, 365 days a year. 366 days if it's a leap year.
- Investigations up to Sum Insured **as per your policy schedule per year as prescribed by the general practitioner, specialist or super specialist consulted through OUR PARTNER ONLY**. We can help organize it and we will pay. OR you can do it at centers of your choice and we still will pay. Of course, both instances, up to limit only.
- Medicines up to Sum Insured per your policy schedule year **as prescribed by the general practitioner, specialist or super specialist consulted through OUR PARTNER ONLY**. We can help deliver it at your home and we will pay. OR you can buy it from pharmacy of your choice and we still will pay. Of course, both instances, up to limit only.

What is an acute condition?

Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery

What it means?

These are the conditions that one suffers from every now and then and are unexpected like fever, cough, cold, injury, diarrhea etc. In these conditions, once treated for a few days you get better completely and the condition is 'cured'. No regular treatment, medicines, follow up, or monitoring is required for such conditions.

Example:

- Mr X is suffering from diabetes and is on regular medication for diabetes. He falls ill and has urinary tract infection. He can consult doctor through our partner to get treatment for the same including medicine and investigation prescribed by the doctor
- Mr. Y is a healthy individual. He has fever for which he can consult doctor through our partner to get treatment for the same including medicine and investigation prescribed by the doctor

iii. What is NOT covered?

- Chronic conditions.
- Consultations NOT availed through our partner

What is a chronic condition?

A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:

- it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
- it needs ongoing or long-term control or relief of symptoms
- it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
- it continues indefinitely
- it recurs or is likely to recur

What it means?

Those conditions that are not completely cured by treatment. Regular treatment, medicines, follow ups and monitoring is required to keep the condition under control. These are conditions like Diabetes, High blood pressure, Asthma, Arthritis etc.

Examples of not covered cases:

- Mr. X is suffering from diabetes and take regular medication to keep his sugar level under control. Diabetes is a chronic condition and consultation/medication to manage diabetes is not covered

- Mr. Y is suffering from Psoriasis. He consults his doctor every quarter and takes regular medication to keep the condition under control. Psoriasis is a chronic condition and consultation/medication to manage is not covered.
- Mr. Z falls down at home, goes to nearby Doctor for consultation. Doctor prescribes medication for the injury. This is not covered because he has not availed consultation through our partner

v. How it works

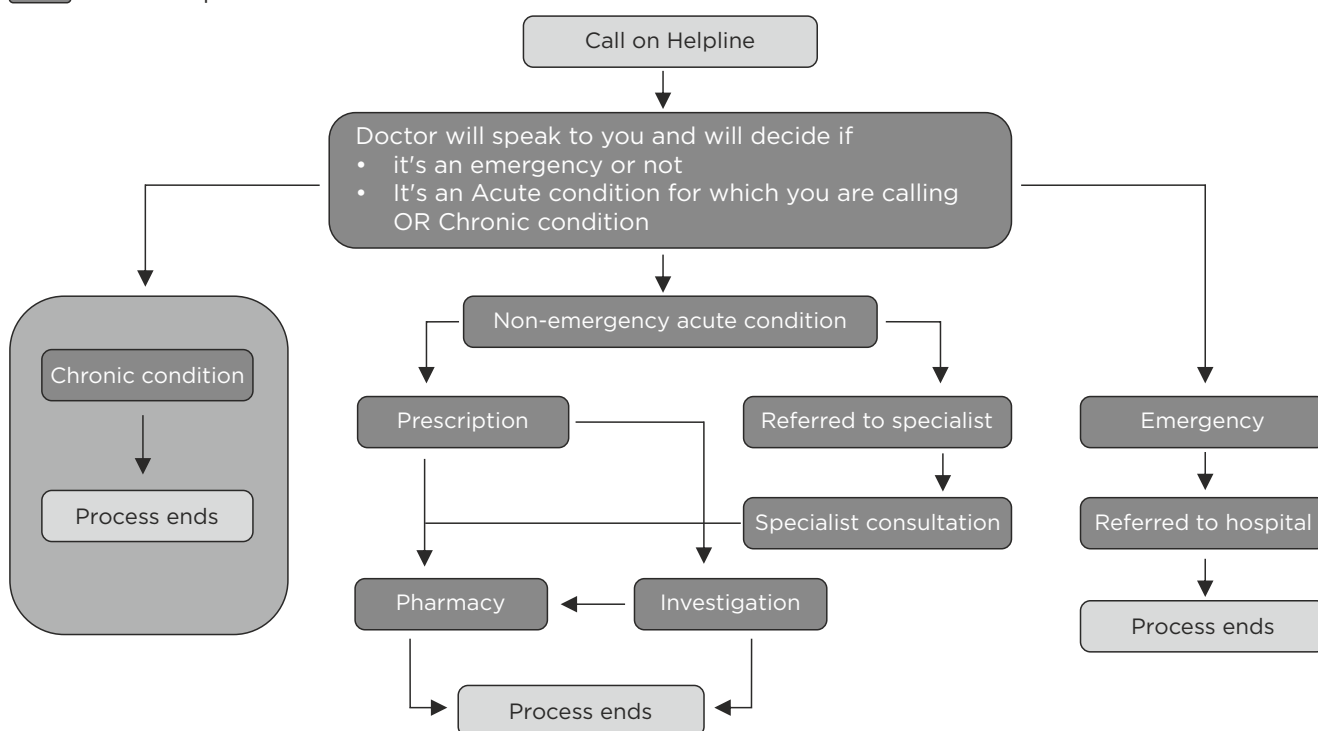
Simple!! Call the number we have provided to you. Doctor will receive your call directly.

We recommend you store the number on your phone, stick it on your refrigerator or a place easily accessible.

The following diagram will give a simple step wise view of how it works, what to expect

What you do

What our partners' doctors do



C. Disease Management "Gold"

What do you get?

- Day 0 Coverage for inpatient hospitalization or day-care treatment for any complications arising out of diabetes or hypertension from the date of this policy inception
- Up to 20% discount on renewal premium of base product and rider. The discount will be calculated as per the grid in Annexure 1

Getting renewal premium discount is easy, here is how:

- You get discount for undergoing health check-up. Just undergo the complete set of tests mentioned under Health Check-up in Annexure 1, and you can get up to 4% discount
- You get discount for results you get in these tests. Submit the test reports to us and get discounts as per test report
- Take the tests up to 4 times a year and get the discount for every time you get the test done
- Just ensure that there is a gap of at least 60 days between 2 set of tests
- And remember, you must submit the report to us at least 75 days prior to the policy renewal date

D. Disease Management "Platinum"

What do you get?

- Day 0 Coverage for inpatient hospitalization or day-care treatment for any complications arising out of diabetes or hypertension from the date of this policy inception
- Up to 20% discount on renewal premium of base product and rider. The discount will be calculated as per the grid in Annexure 1

- We will cover the cost of tests mentioned in Annexure 1. You can get them done through us, in our network, on cashless basis. Or you can get them done at the center of your choice. We will still pay for the tests, on reimbursement basis, up to Rs. 3,000 for all the tests in a policy year.

Getting renewal premium discount is easy, here is how:

- You get discount for undergoing health check-up. Just undergo the complete set of tests mentioned under Health Check-up in Annexure 1, and you can get up to 4% discount
- If you are getting the tests done on cashless basis, no need to do anything further. Just sit back, relax, and we will take care of the rest
- If you are getting them done on reimbursement basis, you will need to submit the report to us and follow the steps below:
 - ☞ You get discount for results you get in these tests. Submit the test reports to us and get discounts as per test report
 - ☞ Take the tests up to 4 times a year and get the discount for every time you get the test done
 - ☞ Just ensure that there is a gap of at least 60 days between 2 set of tests
 - ☞ And remember, you must submit the report to us at least 75 days prior to the policy renewal date

E. Complete Care

Combination of either of Disease Management "Gold" or Disease Management "Platinum" plan with Best Consult or Best Care Plan

Annexure 1

Health Check-up tests:

- BMI
- Lipid Profile
- HbA1C

The applicable discount would be aggregate of discount accrued for undergoing health check-up, and reported value of the individual components of the health check-up (HbA1C Check-up, Lipid Profile, and BMI outcomes) as per the below grid:

Check-up Discount

Health Check-up Done	Discount/Quarter (%)	Total Discount/Annum (%)
Yes	1	4
No	0	0

HbA1C

Reading	Discount/Quarter (%)	Total Discount/Annum (%)
<6.50	2.5	10
6.51 -7.00	2	8
7.01-8.00	1	4
>8.00	0	0

Lipid Profile

Total Cholesterol: HDL Cholesterol ratio

Reading	Discount/Quarter (%)	Total Discount/Annum (%)
<4.00	1	4
4.01-5.00	0.5	2
>5.00	0	0

BMI

Reading	Discount/Quarter (%)	Total Discount/Annum (%)
<18.5	0	0
18.5 - 24.9	0.5	2
>24.9	0	0

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