



ENERGY

Synergising Wellness & Insurance
Your Health Insurance partner in a
fight against **DIABETES!**

We understand living with diabetes can sometimes feel lonely and bitter but it does not have to be that way anymore.

We've created a health insurance plan that not just covers your condition and complications, it also partners you in living with diabetes successfully.

***Introducing* India's first health plan that truly understands diabetes.**

ENERGY from Apollo Munich

Synergising Wellness & Insurance.



Active Wellness Program

Wellness program and personalized health coach to help you monitor and manage your health.



Rewards

Stay healthy and earn reward points to avail reduced premiums.



No waiting Period

Get coverage from Day One for all hospitalisation arising out of Diabetes and Hypertension.



Synergising Wellness & Insurance

Your Health Insurance partner in a fight against **DIABETES!**

KNOW THE BASICS

ELIGIBILITY (who can be covered)

The plan covers individuals in the age group of 18 to 65 years at entry, who are currently diagnosed with Type II Diabetes or Pre-Diabetes (*Impaired Fasting Glucose/ Impaired Glucose Tolerance*) or Hypertension.

SUM INSURED (how much is covered)

The plan can be issued to an individual only and can be taken for the sum insureds of Rs. 2,00,000; 3,00,000; 5,00,000 and 10,00,000.

VARIANTS (my options)

- Silver plan: cost for wellness tests is excluded
- Gold plan: cost for wellness tests is included

(Both the variants are available with a co-payment options. You will have to bear 20% of the claim amount payable)

KNOW YOUR PLAN BETTER

I. THE HEALTH COVERAGE (best comprehensive cover)

- Day one coverage for all hospitalisation arising out of Diabetes and Hypertension (No waiting period)
- In-patient hospitalisation
- Pre and post hospitalisation cover of 30 and 60 days respectively
- Day care coverage for 144 day care procedures
- Emergency ambulance coverage
- Organ donor expenses

(please refer policy wordings for detailed coverage)

2. THE WELLNESS PROGRAM

(designed to manage your health)

Wellness Tests:

Two complete medical checks administered during the policy year.

Wellness Test 1: HbA1c, Blood Pressure Monitoring, BMI

Wellness Test 2: HbA1c, FBS, Total Cholesterol, Creatinine, High-Density Lipoprotein (HDL), Low-Density Lipoprotein (LDL), Triglycerides (TG), Total Protein, Serum Albumin, Gamma-Glutamyltransferase (GGT), Serum Glutamic Oxaloacetic Transaminase (SGOT), Serum Glutamic Pyruvic Transaminase (SGPT), Billirubin, Total Cholesterol: HDL Cholesterol, ECG, Blood Pressure Monitoring, BMI, Doctor Consultation

Please note: For Gold Plan we offer wellness test on cashless basis if undergone at our network centers. However, in case you choose to undergo tests at a non network (but approved) center we will reimburse a sum of up to Rs. 2000/- only at the end of policy year. If your go for non-approved center, we will not be able to reimburse the amount or provide you reward points.

Wellness Support:

- Access to a personalized wellness WEB PORTAL that tracks your medical values from various tests, stores all your medical records, helps you monitor your condition and provides you special offers for health products that you may need
- Personalized highly trained HEALTH COACH to guide, remind and create your personal diet and fitness plans
- MONTHLY NEWSLETTERS to provide you with important information on healthcare and management
- Access to a CENTRALIZED HELPLINE to answer any queries that you may have

3. THE REWARD POINTS

(reward for staying healthy)

Based on the results of your medical tests and key health parameters such as BMI, BP, HbA1c and Cholesterol we offer you incentives for staying healthy.

- Renewal premium discounts of up to 25% for management of health conditions.
- Reimbursement up to 25% of renewal premium towards your medical expenses (*like consultation charges, medicines and drugs, diagnostic expenses, dental expenses and other miscellaneous charges not covered under any medical insurance*)

Exclusions

- Any pre-existing condition (other than diabetes or hypertension) will be covered after a waiting period of 3 years
- Expenses arising from HIV or AIDS and related diseases
- Congenital diseases, mental disorder or insanity, cosmetic surgery and weight control treatments
- Abuse of intoxicant or hallucinogenic substances like intoxicating drugs and alcohol
- Hospitalization due to war or an act of war or due to a nuclear, chemical or biological weapon and radiation of any kind
- Pregnancy, dental treatment, external aids and appliances
- 2 years waiting period for specific diseases like cataract, hernia, joint replacement surgeries, surgery of hydrocele etc.
- Items of personal comfort and convenience
- Experimental, investigative and unproven treatment devices and pharmacological regimens

Please refer to the Policy Wording for the complete list of exclusions.

KNOW YOUR PREMIUM

Silver Plan

With No Co-payment					With 20% Co-payment				
Age (in Yrs)	2 Lacs	3 Lacs	5 Lacs	10 Lacs	Age (in Yrs)	2 Lacs	3 Lacs	5 Lacs	10 Lacs
18-35	8,060	9,962	13,853	17,114	18-35	6,567	8,045	11,121	13,700
36-45	9,618	11,707	17,578	21,714	36-45	7,887	9,493	14,138	17,391
46-50	14,717	17,318	24,176	29,865	46-50	12,123	14,085	19,475	23,930
51-55	17,871	21,517	31,238	38,589	51-55	14,770	17,542	25,196	30,932
56-60	23,071	27,420	36,671	45,301	56-60	19,118	22,397	29,609	36,323
61-65	31,661	38,426	52,138	64,407	61-65	26,294	31,438	42,136	51,660
66-70	42,421	51,755	70,695	87,332	66-70	35,297	42,400	57,179	70,066
71-75	50,477	62,097	85,941	1,06,166	71-75	42,068	50,935	69,559	85,196
76-80	65,551	80,640	1,11,818	1,38,132	76-80	54,709	66,217	90,562	1,10,874
>80	79,370	97,641	1,35,710	1,67,647	>80	66,328	80,254	1,09,975	1,34,595

Gold Plan

With No Co-payment					With 20% Co-payment				
Age (in Yrs)	2 Lacs	3 Lacs	5 Lacs	10 Lacs	Age (in Yrs)	2 Lacs	3 Lacs	5 Lacs	10 Lacs
18-35	12,766	14,668	18,559	21,820	18-35	11,273	12,751	15,827	18,406
36-45	14,324	16,413	22,284	26,420	36-45	12,593	14,199	18,844	22,097
46-50	19,423	22,024	28,882	34,571	46-50	16,829	18,791	24,181	28,636
51-55	22,577	26,223	35,944	43,295	51-55	19,476	22,248	29,902	35,638
56-60	27,777	32,126	41,377	50,007	56-60	23,824	27,103	34,315	41,029
61-65	36,367	43,132	56,844	69,113	61-65	31,000	36,144	46,842	56,366
66-70	47,127	56,460	75,401	92,038	66-70	40,003	47,106	61,885	74,772
71-75	55,183	66,803	90,647	1,10,872	71-75	46,774	55,641	74,265	89,902
76-80	70,257	85,346	1,16,524	1,42,838	76-80	59,415	70,923	95,268	1,15,580
>80	84,076	1,02,347	1,40,416	1,72,353	>80	71,034	84,960	1,14,681	1,39,301

Note: All premium rates are exclusive of service tax and applicable cess.

Buying Procedure

- Fill the application form stating your personal information and health profile. Ensure that the information given in the form is complete and accurate.
- Handover the application form and the premium amount in your preferred mode of payment along with necessary documents to the company representative.
- Pre policy check will be organized, at a network center near you on cashless basis. In case your proposal is declined the cost of pre policy check will be deducted from the refundable premium.
- Based on the details, we may accept or revise our offer to give you an optimal plan as per your profile. This will be done with your consent. In case we do not accept your policy we will inform you with a proper reason. In case of acceptance, the final policy document and kit will be sent to you.

Terms of Renewal

Life-long coverage: We offer life-long renewal unless the insured person or one acting on behalf of an insured person has acted in an improper, dishonest or fraudulent manner.

Grace Period: A grace period of 30 days for renewing the policy is provided under this policy.

Waiting Period: The waiting periods mentioned in the policy wording will get reduced by 1 year on every continuous renewal of your Energy insurance Policy.

Renewal Premium: Renewal premium other than due to change in age are subject to change with prior approval from IRDAI.

Free look cancellation: We offer a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy. In case of any objections, you have the option of cancel the Policy and you shall be refunded the premium paid by you after adjusting the amounts spent on any medical check-up, stamp duty charges and proportionate risk premium.

Tax benefit - 80 D: The premium amount paid under this policy qualifies for deduction U/S 80D of the Income Tax Act (Tax benefits are subject to changes in Tax Laws).

Sum Insured Enhancement: Sum insured can be enhanced only at the time of renewal; subject to no claim having been lodged/ paid under the policy. If you increase the sum insured by one grid, no fresh medical tests shall be required. In cases where the sum insured increase is more than one grid, the case shall be subject to medical test. In case of increase in the sum insured; waiting period will apply afresh for the amount by which the sum insured has been enhanced. However the quantum of increase shall be at the discretion of the company.

Portability: Any insured person in the policy has the option to migrate to a similar indemnity health insurance policy available with us at the time of renewal; subject to underwriting with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period etc provided the policy has been maintained without a break as per the portability guidelines issued by IRDAI.

Regulatory norms In the likelihood of this policy being withdrawn in future, intimation will be sent to the insured person 3 months prior to expiry of the policy. Insured person will have the option to migrate to similar indemnity health insurance policy available with us at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period etc provided the policy has been maintained without a break as per portability guidelines issued by .

Disclaimer This is only a summary of the product features. The actual benefits available are as described in the policy, and will be subject to the policy terms, conditions and exclusions. Please seek the advice of your insurance advisor if you require any further information or clarification.

Section 41 of Insurance Act 1938 as amended by Insurance Laws Amendment Act, 2015 *(Prohibition of Rebates)*

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 insurers. Any person making default in complying with the provision of this section shall be liable for a penalty which may extend to ten lakh rupees.



The Apollo Hospitals Group, Asia's largest healthcare provider and Munich Health, world leaders in health insurance, come together to make quality healthcare easy and accessible. Simple language, clear policies, transparent procedures and innovative products, making health insurance the way it ought to be.

We know healthcare. We know insurance.

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