

Quality healthcare now affordable for all



Crore coverage for surgery or surgical procedures

₹5 lakhs coverage for non-surgery or non-surgical procedures



Annual comprehensive health checkup



Coverage from day 1^a



10% off on OPDs



Quality and Trust of Narayana Health



Why choose Narayana Aditi



High insurance cover, low premium



Immediate coverage, no waiting period[^]



Annual comprehensive health checkup



Consumables are covered (except for robotic surgeries)



Easy cashless claim settlement

Coverage outside Narayana Health network is limited You need to pay ₹2000* of hospitalisation cost per day for non-surgery or non-surgical procedures You and your family need to undergo a medical examination to check eligibility

^No waiting period or as conveyed before policy issuance

*The daily deductible of ₹2,000 shall only be applied on all admissible claims for non-surgery or non-surgical procedures under Plan 2 of the mentioned product.



Eligibility

18 years and above

Family Coverage

Up to 2 adults and 4 children

Includes self, spouse, dependent children (aged 3 months to 25 years), parents and parents-in-law





How does the policy work?

Consider a scenario where the total bill amount for 5 days of hospitalisation is ₹2,00,000.

Plan 1

₹10,317/year

Plan 2

₹10,524/year

E

Surgery or surgical procedures

₹1,90,000

You pay

₹10,000

Non-surgery or non-surgical procedures

₹1,90,000 paid by us

You pay

₹10,000

RECOMMENDED



Surgery or surgical procedures

₹2,00,000*

You pay

Zero

Non-surgery or non-surgical procedures

₹1,90,000

You pay

₹10,000

Mentioned premium is for a family of 4 with the eldest member being aged 40, for the mentioned Sum Insured excluding GST.

Actual premium may vary based on family configuration and underwriting outcome.

Your maximum payout

₹10,000 regardless of bill amount

for 5 days of hospitalisation



Know Your Policy

Sum Insured

(Basis) (Along with amount)

₹1 crore for surgery or surgical procedures ₹5 lakhs for non-surgery or non-surgical procedures

Individual/Multi-Individual/Family floater basis Sum Insured for family floater is shared amongst all

Policy Coverage (What am I covered for?)

COVERAGE AVAILABLE AT NARAYANA HEALTH HOSPITALS IN INDIA

- 1. Coverage in general ward
- 2. Room category modification to semi-private room available
- 3. Expenses incurred for:
 - a. In-patient care
 - b. Listed day care treatments
 - c. Alternative treatments
 - d. Listed modern treatments (Check T&Cs in the policy)
- 4. Pre-hospitalisation expenses: 60 days
- 5. Post-hospitalisation expenses: 90 days
- 6. Living organ donor expenses
- 7. Annual health checkup 'Base Package'
- 8. Road ambulance charges

COVERAGE AVAILABLE AT NON-NETWORK PROVIDERS IN INDIA (for below conditions only)

- 1. Any case of emergency
- Treatment not available at Narayana Health at the time of admission
- Insured persons travelling to a location where Narayana Health Hospital is not available
- Insured person relocating to a location where Narayana Health Hospital is not available
- Coverage in general ward, or as per optional room category selected



| Know Your P | Policy |
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| Know Your Policy | |
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| Exclusions (What the policy does not cover?) | Standard and specific exclusions (refer policy document) Domiciliary hospitalisation and OPD treatments Any claims received outside Narayana Health Hospitals except for scenarios mentioned before |
| Waiting period | I. Initial waiting period: Nil Waiting period for specific illnesses: Nil Waiting period for pre-existing diseases: Nil, unless specified before the inception of the policy |
| Financial limits of coverage: Co-pay & deductible | Zero co-pay at Narayana Health Hospitals in India Please intimate within the stipulated time when you are seeking coverage at a non-network provider for eligible scenarios to avoid 10% co-pay Daily deductible: Plan 1: Daily deductible of ₹2,000 on all admissible claims for non-surgery or non-surgical procedures No daily deductible shall be applicable on day care treatments without surgery or surgical procedures |



Prohibition of Rebates

As per Section 41 of the Insurance Act 1938, as amended, the practice of rebating is prohibited, as follows: 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 policy 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. Violations of Section 41 of the Insurance Act 1938, as amended, shall be punishable with a fine which may extend to ₹10 Lakhs.

Disclaimer

The above is descriptive only: The actual terms and conditions can be found in the policy document. Insured are advised to read the policy document completely for a full description of the terms and conditions of coverage and the exclusions related thereto.

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Quality and Trust of Narayana Health





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Currently available for sale in these districts only