

**HOME  
CREDIT**

**HDFC  
ERGO**

*Take it easy!*



**Your health is just as  
important for us, too.**

**Group Mediclaim Insurance Policy**



# LIFE IS VERY UNPREDICTABLE.

Insure it with Group Medclaim Insurance Policy that equips you to manage Finances during such uncertain times

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## PRODUCT HIGHLIGHTS

Sum Insured available  
@ Rs.3 Lacs<sup>^^</sup>

Indemnify treatment expenses incurred during Hospitalization

Entry age for Adults:  
18 years to 65 years<sup>^</sup>

In-house claim processing with 90% of the pre-authorization happening within 20 minutes<sup>#</sup>

Wide Network of over 10,000+ Hospitals

Under Section 80D of the Income Tax (Amendment) Act, 1986 you can avail Tax benefit\* on the premium paid by you

\*Subject to change in Tax Law.

<sup>#</sup>Based on the data from October 2019 to May 2020, the average time taken for approval of our cashless health claims is less than 20 minutes. Subject to satisfactory submission of all relevant documents and information(s) to the Company. TAT for approval of pre-authorization requests is 60 minutes. Cashless hospitalization available only in HDFC ERGO network hospitals. Visit [www.hdfcergo.com](http://www.hdfcergo.com) for your nearest network hospital.

<sup>^</sup>The policy covers persons from the age group 91 days onwards upto 65 years of age except when the company at its sole discretion, accepts anyone over 65 years old, for whom premium has been paid and who is identified in the Schedule as an Insured Person. For age above 55 years, prospective Insured Member would need to undergo Medicals. Acceptance of the Proposal would dependent upon the Medical UW practices of the company.

<sup>^^</sup>Maximum sum insured available is upto 10 lakhs as per filed document.



## WHO CAN BE COVERED

- Loan Account Holders of Home Credit

## WHAT IS COVERED

- Inpatient-Hospitalization covered up to Sum Insured of 3 Lacs<sup>^^</sup>
- New born baby<sup>@</sup> can be covered from Day 1 within Family Floater Sum Insured
- Pre & Post Hospitalization expenses are covered for 30 & 60 days respectively
- Domiciliary Hospitalization is covered
- Daycare procedures are covered

<sup>@</sup>For optional cover additional premium will be charged.

<sup>^^</sup>Maximum sum insured available is upto 10 lakhs as per filed document.

## WHAT IS NOT COVERED

- **All DISEASES or INJURIES** which are in a **PRE-EXISTING CONDITION** when the cover incepts for the first time. For the purpose of applying this condition, the date of inception of the initial mediclaim policy taken from any of the Indian Insurance Companies shall be taken provided the renewals have been continuous and without any break
- Any **DISEASE** contracted by the **INSURED PERSON** during the first thirty (30) days from the commencement date of the policy except for Accident
- During the first year of the operation of the insurance cover, the expenses for treatment of **DISEASES** such as cataract, benign prostatic hyperthrophy, hysterectomy for menorrhagia or fibromyoma, hernia, hydrocele, congenital internal **DISEASE / defects**, fistula in anus, piles, Sinusitis and related disorders are not payable. If these **DISEASES** (other than congenital internal **DISEASE / defects**) are in a **PRE-EXISTING CONDITION** at the time of proposal, they will not be covered even during subsequent period of renewal. If the **INSURED PERSON** is aware for the existence of congenital internal **DISEASE / defects** before inception of policy, the same will be treated as a **PRE-EXISTING CONDITION**
- Claims arising from, as a consequence of or involving investigations, operations or treatment of a purely cosmetic nature; or for obesity; or undertaken to facilitate pregnancy or to cure impotence or to improve potency
- **INJURY** or **DISEASE** directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, Warlike operations (whether war be declared or not)
- Circumcision unless necessary for treatment of a **DISEASE** not excluded hereunder or as may be necessitated due to an **ACCIDENT**, vaccination or inoculation or change of life; or cosmetic or aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an **ACCIDENT** or as a part of any illness
- The cost of spectacles and contact lenses, hearing aids, dental treatment or surgery of any kind unless requiring hospitalization



## WHAT IS NOT COVERED

- Convalescence, general debility, run-down condition or rest cure; congenital external DISEASE or congenital internal defects or anomalies for example Congenital heart anomalies like ASD, VSD, Tetralogy of Fallot etc.; sterility, venereal DISEASE, intentional self INJURY and use of intoxicating drugs/alcohol
- All expenses arising out of any condition directly or indirectly caused to or associated with Human T-cell Lymphographic Virus Type 111 (HTLB-111) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS
- Charges incurred at HOSPITAL primarily for diagnostic, x-ray or laboratory examinations or other diagnostic studies not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any DISEASE or INJURY, for which confinement is required at a Hospital or at Home under Domiciliary Hospitalization as defined
- Expenses on vitamins and tonics unless forming part of treatment for INJURY or DISEASES as certified by the attending MEDICAL PRACTITIONER
- INJURY or DISEASE directly or indirectly caused by or contributed to by nuclear weapons/materials
- Loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any act of terrorism
- Treatment arising from or traceable to pregnancy and childbirth (including voluntary termination of pregnancy) and childbirth, (including caesarean section) unless included as an add-on cover for which additional premium shall have to be paid
- Voluntary termination of pregnancy
- Naturopathy treatment



## PREMIUM DETAILS

SELF ONLY - 3 Lacs						
Age Band	18-35	36-45	46-50	51-55	56-60	61-65
Premium before GST	2,681	3,157	4,894	5,874	7,047	9,866
Add : GST	483	568	881	1,057	1,268	1,776
<b>Total Premium</b>	<b>3,164</b>	<b>3,725</b>	<b>5,775</b>	<b>6,931</b>	<b>8,315</b>	<b>11,642</b>
SELF + SPOUSE + 2 CHILDREN ONLY - 3 Lacs (Inclusive of New Born Baby Optional Cover)						
Age Band	18-35	36-45	46-50	51-55	56-60	61-65
Premium before GST	6,986	8,406	13,032	15,639	18,763	26,270
Add : GST	1,257	1,513	2,346	2,815	3,377	4,729
<b>Total Premium</b>	<b>8,243</b>	<b>9,919</b>	<b>15,378</b>	<b>18,454</b>	<b>22,140</b>	<b>30,999</b>

### ANTI REBATE WARNING

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 Rs.10 Lakhs.

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