



Let's Uncomplicate Diabetes

Get covered for type 1 & 2 diabetes from day 1 and uncomplicate your life with the Energy plan.

Energy

 **ApolloMunich**
HEALTH INSURANCE

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.

A health plan that truly understands diabetes.

Uncomplicating Diabetes with **Energy**



Active Wellness Program

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

No waiting Period

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



Rewards

Stay healthy and earn reward points to avail reduced premiums.

Synergising Wellness & Insurance



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 I Diabetes or 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; 10,00,000; 15,00,000; 20,00,000; 25,00,000 and 50,00,000.

Variants

(my options)

- Silver plan: cost for wellness tests is excluded
 - a. Without Co-pay
 - b. With 20% Co-pay*
- Gold plan: cost for wellness tests is included
 - a. Without Co-pay
 - b. With 20% Co-pay*

(* For more details please refer Policy Wordings.)



Know your plan better

1. 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
- 182 day care procedures
- Emergency ambulance coverage
- Organ donor expenses
- Shared Accommodation benefit
- HbA1C Checkup benefit

Other Benefits:

- Restore Benefit
- Cumulative Bonus

(Please refer policy wordings for detailed explanation)

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, HighDensity 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 2 years.
- Expenses arising from HIV or AIDS and related diseases.
- External 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 (Base Module)

No Copayment Applicable								
Age (in Yrs)	2 Lacs	3 Lacs	5 Lacs	10 Lacs	15 Lacs	20 Lacs	25 Lacs	50 Lacs
18-35	5,642	6,973	9,697	11,980	14,360	17,312	18,789	24,157
36-45	6,733	8,195	12,305	15,200	18,220	21,965	23,838	30,648
46-50	10,302	12,123	16,923	20,906	25,057	30,210	32,785	42,152
51-55	12,510	15,062	21,867	27,012	32,376	39,034	42,363	54,465
56-60	16,150	19,194	25,670	31,711	38,008	45,823	49,731	63,941
61-65	22,163	26,898	36,497	45,085	54,039	65,150	70,704	90,906
66-70	29,695	36,229	49,487	61,132	73,274	88,340	95,874	123,266
71-75	35,334	43,468	60,159	74,316	89,076	107,391	116,549	149,848
76-80	45,886	56,448	78,273	96,692	115,896	139,725	151,639	194,964
>80	55,559	68,349	94,997	117,353	140,660	169,581	184,041	236,625

20% Copayment Applicable								
Age (in Yrs)	2 Lacs	3 Lacs	5 Lacs	10 Lacs	15 Lacs	20 Lacs	25 Lacs	50 Lacs
18-35	4,597	5,632	7,785	9,590	11,495	13,858	15,041	19,338
36-45	5,521	6,645	9,897	12,174	14,592	17,592	19,092	24,547
46-50	8,486	9,860	13,633	16,751	20,078	24,206	26,270	33,775
51-55	10,339	12,279	17,637	21,652	25,952	31,289	33,957	43,658
56-60	13,383	15,678	20,726	25,426	30,475	36,742	39,875	51,269
61-65	18,406	22,007	29,495	36,162	43,344	52,256	56,711	72,915
66-70	24,708	29,680	40,025	49,046	58,787	70,874	76,919	98,895
71-75	29,448	35,655	48,691	59,637	71,482	86,179	93,528	120,250
76-80	38,296	46,352	63,393	77,612	93,026	112,153	121,716	156,491
>80	46,430	56,178	76,983	94,217	112,928	136,148	147,757	189,974

Gold Plan (Base Module)

No Copayment Applicable								
Age (in Yrs)	2 Lacs	3 Lacs	5 Lacs	10 Lacs	15 Lacs	20 Lacs	25 Lacs	50 Lacs
18-35	10,642	11,973	14,697	16,980	19,360	22,312	23,789	29,157
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>80	51,430	61,178	81,983	99,217	117,928	141,148	152,757	194,974

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 to 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 - 80D: 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 IRDAI.

ABOUT APOLLO MUNICH

We have been 'Making India Health Confident' with our innovative and award-winning health, personal accident, and travel insurance plans. Our insurance plans cater to individuals, families, and corporates with state-of-the-art infrastructure and uncomplicated services delivered by engaged employees. We also cater to large and small corporate groups with customized Group Health Insurance Plans.

We have received several positive reviews and ratings for our health insurance plans and policies that have been ranked as the best plans in the health insurance industry by several of India's most popular publications. We offer our products through a network of more than 150 offices, well-trained sales partners, and also directly through our call center, website and in-house sales force.

Since our inception, our vision has always been to be a trusted leader in the health insurance sector by providing innovative solutions to the Indian population. Innovation has been in our DNA since inception. We were the first health insurance company to offer benefits like lifelong renewal, no sub-limits, maternity and multiplier benefits etc. The success of our innovative products made us the leader on several insurance product ranking tables and winning several accolades on both domestic and international level.

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 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 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 prospectus 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

IRDA REGULATION NO 12: This policy is subject to regulation 12 of IRDAI (Protection of Policyholders' Interests) Regulations, 2017.

Note: Policy Term and Conditions & Premium rates are subject to change with prior approval from IRDA

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.



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Apollo Munich Health Insurance Co. Ltd. Central Processing Center, 2nd & 3rd Floor, iLABS Centre, Plot No. 404-405, Udyog Vihar, Phase-III, Gurgaon-122016, Haryana • **Corp. Off.** 1st Floor, SCF-19, Sector-14, Gurgaon-122001, Haryana • **Reg. Off.** Apollo Hospitals Complex, 8-2-293/82/J III/DH/900 Jubilee Hills, Hyderabad, Telangana - 500033, India. • For more details on risk factors, terms and conditions, please read sales brochure carefully before concluding a sale • **IRDAI Registration Number** - 131 • **CIN:** U66030TG2006PLC051760 • **UIN:** APOHLIPI8126V031718 • AMHI/CM/C18/001