



ICICI LOMBARD GENERAL INSURANCE COMPANY LIMITED

We sincerely hope all our valued customers and stakeholders have been taking the right steps and maximum precautions in order to take care of themselves and their families in these pandemic times. We assure you that we have your back in this fight against the pandemic.

In keeping with the demands of the market in view of the COVID-19 pandemic and with our customer centric ideology we are desirous of offering the below mentioned features with the approval of the authority until 31st March 2022.

Sr no	Feature	Description	Feature available for Product	UIN
1	Additional Sum Insured	Additional Sum Insured will not be reduced if the claim is for COVID-19 illness	Health Booster	ICIHLP21516V022021
			ICICI Lombard Complete Health Insurance	ICIHLP21383V052021
2	15 days waiting period	The waiting period of 30 days shall be reduced to 15 days for in patient claims of COVID-19 illness.	Health Booster	ICIHLP21516V022021
			ICICI Lombard Complete Health Insurance	ICIHLP21383V052021
			Health Care Plus Policy	ICIHLP21390V032021
3	Home Healthcare	We will cover the medical expenses incurred by the Insured person on availing treatment at home	Health Booster	ICIHLP21516V022021
			ICICI Lombard Complete Health Insurance	ICIHLP21383V052021
			Health Care Plus Policy	ICIHLP21390V032021
			Group Health Insurance	ICIHLP21380V042021
			Group Health (Floater) Insurance	ICIHLP21381V052021

Additional Sum Insured (Cumulative bonus)

Currently, we provide an additional sum insured (Cumulative Bonus) of 10% for every claim free year maximum up to 50% of annual sum insured. In the event of any Claim (except out-patient treatment claim) during any subsequent Policy year, the accrued Additional Sum Insured is reduced by 10% of the Annual Sum Insured.

As a benefit, the additional sum insured shall not be reduced in case of any claim on hospitalization due to COVID-19.

15 day Waiting Period

Currently, expenses related to the treatment of any illness within 30 days from the first policy commencement date are excluded except claims arising due to an accident

As a benefit, this waiting period of 30 days shall be reduced to 15 days for in patient claims of COVID-19 illness.

Home Healthcare

In this benefit we will cover the medical expenses incurred by the Insured person on availing treatment at home provided that:

- a) The insured person has been advised non-emergency hospitalization by a Medical practitioner and the Insured person out of his own will, opts to undergo treatment at home.
- b) The condition of the Insured Person is expected to improve in a reasonable and foreseeable period of time.
- c) There is a continuous active line of treatment with monitoring of the health status by a medical practitioner for each day through the duration of the home care treatment.
- d) Treatment that can be availed on Outpatient basis will not be qualified to be covered under this clause.
- e) Insured can avail the services as prescribed by the medical practitioner on cashless basis which would be arranged by the Insurer through designated network provider.

However under special circumstances in case the insured intends to avail the services of non-network provider and claims for reimbursement, a prior approval from the Insurer needs to be taken before availing such services. In case insured breach the conditions of approval or fails to take the prior written approval the insurer is not liable to settle any claim under this section.

In case of unavailability of network provider for cashless claims or non-network provider for reimbursement claims, the insured person will have to avail inpatient hospitalization.

In this benefit, the following would be covered if prescribed by the treating medical practitioner and is related to treatment,

- a. Diagnostic tests undergone at home or at diagnostics centre
- b. Medicines prescribed in writing
- c. Consultation charges of the medical practitioner
- d. Nursing charges related to medical staff
- e. Medical procedures limited to parenteral administration of medicines

Any expenses payable during the Policy period shall not in aggregate exceed the maximum Sum Insured and cumulative bonus (if any) as specified in the Policy Schedule against this Benefit.

Subject to other terms, conditions and exclusions of the policy