

Little things make a big difference.

A comprehensive cover that takes care of the finer details.

Key reasons to choose 'Heart Beat' Health Insurance Plan.



Comprehensive Cover

We provide cover ranging from ₹ 5 lacs to ₹ 1 crore.



Comprehensive Hospitalisation Coverage

Coverage of medical expenses 60 days prior and 90 days post hospitalisation



Cashless Claims Processing

We process cashless claims within 30⁽¹⁾ minutes upon approval at over 8,700+ network hospitals.



Loyalty Benefits⁽²⁾

Increase your sum insured by 10% of existing base Sum Insured each year.



Health Check-up⁽³⁾

Your health is precious so we offer comprehensive health check ups or diagnostic tests.



Cover for Maternity & New Born Child⁽⁴⁾

We cover maternity expenses as well as first year vaccination for a new born baby.



Coverage outside hospital

- Pharmacy & diagnostic services
- Domiciliary treatment coverage as prescribed by a medical practitioner.
- Emergency assistance services like medical referral, air ambulance, medical repatriation, compassionate visit, etc.



Re-Fill Benefit⁽⁵⁾

One time refill of Base Sum Insured. Triggers after 1st claim is paid. Applicable for same illness and insured.



Additional Coverage for Platinum customers

- International treatment for specified illnesses⁽⁶⁾
- Covers OPD treatment
- Covers second medical opinion⁽⁷⁾
- Covers emergency medical evacuation & hospitalisation for medical emergencies (in and outside India)



Alternative Treatments

Coverage of alternative treatments including Ayurveda, Unani, Siddha and Homeopathy.



Freelook Period

In case you are not satisfied with policy terms and conditions you may cancel it within 15 days of receipt of policy, 30 days in case the policy has been sold through distance marketing and is for a term of 3 years or more.



More Reasons to choose Heart Beat

- We process your claim directly and not via third party
- Tax saving under Section 80D of the Income Tax Act⁽⁸⁾
- We assure you renewability for life without any extra loadings based on your claim
- No waiting period for accidental hospitalisation
- No specific waiting period for insured up to 45 years of age
- We cover costs incurred towards Emergency Ambulance

For your family's health insurance

Call: 1860-500-8888

visit www.nivabupa.com

Product Benefit Table for Heart Beat

	Individual and Family Floater											Family First		
Plan Details	Gold Plan							Platinum Plan				Silver Plan	Gold Plan	Platinum Plan
Base Sum Insured (in Rs)	5 lacs	7.5 lacs	10 lacs	15 lacs	20 lacs	30 lacs	50 lacs	15 lacs	20 lacs	50 lacs	1 Cr	Base Sum Insured (per Insured Person): 1Lacs, 2Lacs, 3Lacs, 4Lacs & 5Lacs	Base Sum Insured (per Insured Person): 1Lacs, 2Lacs, 3Lacs, 4Lacs, 5Lacs, 10Lacs & 15Lacs	Base Sum Insured (per Insured Person): 5Lacs, 10 Lacs & 15 Lacs
												Floater Sum Insured – (available on a floating basis over Base Sum Insured): 3Lacs, 4Lacs, 5Lacs, 10Lacs &15Lacs	Floater Sum Insured – (available on a floating basis over Base Sum Insured): 3Lacs, 4Lacs, 5Lacs, 10Lacs, 15Lacs, 20Lacs, 30Lacs & 50Lacs	Floater Sum Insured – (available on a floating basis over Base Sum Insured): 15Lacs, 20 Lacs, 30 Lacs & 50 Lacs
Benefits														
Inpatient care								Covered up to Sum Insured						
Room rent	Covered up to Sum Insured (except for Suite or above room category)							Covered up to Sum Insured				Rs 3,000 per day or Shared Room	Covered up to Sum Insured (except for Suite or above room category)	Covered up to Sum Insured
Pre-Hospitalization Medical Expenses (60 days)								Covered up to Sum Insured						
Post-Hospitalization Medical Expenses (90 days)								Covered up to Sum Insured						
Alternative Treatment								Covered up to Sum Insured						
Day Care Treatment								Covered up to Sum Insured						
Domiciliary Hospitalization								Covered up to Sum Insured						
Maternity Benefit ⁽⁴⁾	Covered up to ₹ 40,000	Covered up to ₹ 60,000	Covered up to ₹ 70,000	Covered up to ₹ 75,000	Covered up to ₹ 80,000	Covered up to ₹ 1,00,000	Covered up to ₹ 1,00,000	Covered up to ₹ 120,000	Covered up to ₹ 160,000	Covered up to ₹ 200,000	Covered up to ₹ 200,000	Covered up to ₹ 35,000	Covered up to ₹ 50,000	Covered up to ₹ 100,000
New Born Baby (covered uptill the end of Policy Year) ⁽⁴⁾								Covered up to Sum Insured						
Vaccination of the new born baby								Covered until new born baby completes one year, vaccinations as per defined list						
Living Organ Donor Transplant								Covered up to Sum Insured						
Emergency Ambulance								Network Hospital: Covered up to Sum Insured Non-network Hospital: Covered up to ₹ 2,000 per event						
Re-fill benefit	Reinstate up to base Sum Insured. Applicable for same & different illness as well											Not Applicable		
Pharmacy and diagnostic services								Available through our empanelled service provider						
HIV / AIDS								covered up to ₹ 50,000						
Emergency assistance services (only within India)								covered up to Sum Insured						
Mental disorder treatment								Covered up to Sum Insured (sub-limit of ₹ 50,000 applicable on few conditions)						
Loyalty Additions	Increase of 10% of expiring Base Sum Insured in a Policy Year; maximum up to 100% of Base Sum Insured											Increase of 10% of expiring Base Sum Insured in a Policy Year; maximum up to 50% of Base Sum Insured	Increase of 10% of expiring Base Sum Insured in a Policy Year; maximum up to 100% of Base Sum Insured	
Health Check-up (per Insured Person) ⁽⁵⁾	Annual, Tests covered up to worth ₹ 1,250	Annual, Tests covered up to worth ₹ 1,875	Annual, Tests covered up to worth ₹ 2,500					Annual, tests covered up to worth ₹ 3750	Annual, tests covered up to worth Rs 5,000			Once in two years, tests as per defined list	Annual, Tests covered up to worth ₹ 2,500	Annual, tests covered up to worth ₹ 5,000
OPD Treatment and Diagnostic Services								Covered up to ₹ 15,000	Covered up to ₹ 20,000	Covered up to ₹ 35,000	Covered up to ₹ 50,000	Not Applicable		Covered up to ₹ 35,000
Child Care Benefits (Vaccinations for children up to 12 years including one consultation for nutrition and growth during the visit for vaccination)								Covered up to Sum Insured (As per defined list)			Covered up to Sum Insured (As per defined list)			
Emergency Medical Evacuation	Not Applicable							Covered up to Sum Insured (for worldwide excluding USA, Canada & India)			Covered up to Sum Insured (for world-wide excluding USA, Canada & India)			
Emergency Hospitalization								Covered, One opinion per Insured Person per Specified Illness / planned Surgery / Surgical Procedure			Covered, One opinion per Insured Person per Specified Illness / planned Surgery / Surgical Procedure			
Specified Illness Cover ⁽⁵⁾														
Second Medical Opinion														
Modern Treatments								Covered up to Sum Insured (sub-limit applicable on few conditions)						
Optional Benefits														
Hospital Cash ⁽⁹⁾	₹ 3,000/day							₹ 6,000/day				₹ 1,500/day	₹ 3,000/day	₹ 6,000/day
Personal Accident cover (for insured aged 18 years & above on individual basis)								Personal Accident cover will be equal to 5 times of base Sum Insured; subject to maximum of 50 lacs						
Critical illness cover (for insured 18 years & above on individual basis)								Critical illness cover will be equal to base Sum Insured; subject to maximum of 10 lacs						
e-consultation								Unlimited tele / online consultations						
Premium Waiver								One time premium waiver if the Policyholder (who is also an Insured Person) dies or suffers from specified illness						
Enhanced Geographical Scope for International coverage	Not Applicable							USA & Canada included for 'Emergency Medical Evacuation', 'Emergency Hospitalization' & 'Specified illness cover'				Not Applicable		USA & Canada included for 'Emergency Medical Evacuation', 'Emergency Hospitalization' & 'Specified illness cover'
Claim cost sharing options														
Co-payment	a. If you select Zone 2, then 20% co-payment will apply for treatment in Mumbai (including Navi Mumbai & Thane), Delhi NCR, Kolkata & Gujarat State b. Options of 10% and 20% co-payment							Options of 10% and 20% co-payment				a. If you select Zone 2, then 20% co-payment will apply for treatment in Mumbai (including Navi Mumbai & Thane), Delhi NCR, Kolkata & Gujarat State b. Options of 10% and 20% co-payment		Options of 10% and 20% co-payment

(1) Niva Bupa processes pre-authorization within 30 minutes for all active policies, subject to receiving all documents and information(s) upto Niva Bupa's satisfaction. The above commitment does not include pre-authorization settlement at the time of discharge or system outage. (2) Refer Loyalty Additions in product benefit table for details. (3) If the Policy is Renewed with Us without a break or if the Policy continues to be in force for the 2nd Policy Year in the 2 year Policy Period (if applicable). (4) subject to a continuous coverage of 24 months of that Insured Person since the inception of the first Policy which offers Maternity benefit with Us. New Born child cover is provided only where maternity claim is payable. Available under Family Floater & Family First plan. (5) Refill benefit – Applicable for same/different illness and on complete/partial exhaustion of sum insured. Not Available for family first plans. (6) Covered for 9 specific illnesses for treatment abroad as per plan. (7) for specific illnesses & planned surgeries. (8) Tax benefits are subject to changes in tax law. Please consult your tax advisor for more details. (9) Hospital Cash - Minimum 48 hrs of continuous hospitalisation required. Maximum coverage offered for 30 days/policy year/insured person. Payment made from day one subject to hospitalization claim being admissible.

Statutory Disclaimer: This is only a summary of the product features and is for reference purpose only. The details of benefits available shall be as described in the prospectus, and will be subject to the policy terms, conditions and exclusions. Please call our customer service if you require any further information or clarification.

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