



ICICI PRU Heart/cancer Protect

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ICICI Pru Heart/Cancer Protect is a health Insurance plan which give you cover against specific diseases like heart ailments and cancer. Best part about a plan like ICICI Pru Heart / Cancer Protect is that it gives you the claim amount on first diagnosis irrespective of the actual medical costs.

Why should I buy ICICI Pru Heart / Cancer Protect when I already have a Health Insurance/Mediclaim?

Heart ailments and Cancer are the two most deadly ailments which can put you in deep financial trouble due to the amount of time and specialized care required to recover. ICICI Pru Heart / Cancer Protect is specialized health plan that protects you from expenses related to heart problems, cancer or both. It is a step ahead from other critical illness/health plans as it offers:

» High Cover at low premiums

ICICI Heart/Cancer Protect provides you high covers for relatively low premiums, making heart and cancer protection affordable for everyone. For example, a 35 year old male can get a Rs. 10 lakh cover for both Heart and Cancer for a monthly premium of about Rs. 268*. The premi um further reduces to Rs. 169, if you choose the single pay option. ^



In single pay option, you can pay premium in one go and be protected for 5 years. There is no additional amount to be paid year on year

^ Premium calculated for a 35 Year old Male, non-smoker for the said parameters amount to Rs. 260 per month under the regular pay option. Under single pay, the premium calculated for the same parameters would amount to Rs. 9882 for 5 years.



>> Payout on Diagnosis

As opposed to a mediclaim or any reimbursement plan, ICICI Pru Heart/Cancer Protect provides the insurance amount on the first diagnosis of illness irrespective of actual amount spent on treatment to help you recover without worries. The plan continues even after the first pay-out for a Minor Condition is made, without you having to pay any further premiums, covering you from any future Major expenses.

Discount for the family

Family floaters plans are opted for by customers who want comprehensive coverage for their near and dear. With ICICI Pru Heart/Cancer Protect, you get a 5% discount on the combined premium for the first year if you decide to protect your spouse as well.



You can save 5% on first year premium in case you also want to cover your spouse. Unlike a family floater plan in health insurance companies, your spouse's cover would be independent from yours and is not affected by a claim you make, or vice versa.

» Hospital of your choice

Now you don't need to find a network hospital or file for reimbursement claims as you will receive the cover amount as soon as a diagnosis is made, and you can get treated at a hospital of your choice.

>> Waiver of premium

The plan will pay the rest of your future premiums if you are diagnosed even with a minor condition or are permanently disabled. This means that you enjoy full cover at no cost or zero premiums.

Why should I buy...



- You do not need to pay any additional premium to avail waiver of premium feature on your policy. This is absolutely free and comes with all product variants
- If you choose cover for both Heart ailments and Cancer, all future premiums for both conditions are waived off, in case of any minor condition, be it heart ailment or cancer.

>> Increasing Cover Benefit

This plan will help you tackle the rising medical costs as it increases your Sum Assured by 10% every year. Cover increases upto 200% of the cover chosen at inception, till the time a claim is made. For example, when you choose a health cover of Rs. 30 Lakhs for Cancer for a term of 10 years and choose the Increasing cover benefit, every claim free year adds a 10% to your cover. Hence, by the 5th year your health cover would have increased to Rs. 45 Lakhs. (10% of 30 Lakhs = 3 Lakhs, 3*5 years = 15 Lakhs increase)



Typical health Insurance policies have a maximum no claim bonus of upto 50 percent. ^

>> Substitute for loss of Income

Most Health plans pay you based on your bills. This plan gives you additional benefit of 1% of Sum Assured every month for 5 years, to help your family deal with loss of income, in case due to any major condition, you need to take a break from your work. This monthly payment is over and above lump sum payment on diagnosis of the illness and is paid even after your death to your nominee.



>> No co-payment

Certain Health Insurance plans require you to pay a part of your expense, while the rest is paid by the insurer. There is no co-payment in this plan and the plan provides the claim amount on the first diagnosis of illness irrespective of actual amount spent on treatment.

>> Tax benefits under Section 80D

Save tax up to Rs. 25,000 ^ for premiums paid towards this plan under Section 80D.



Choosing the single pay option (5 years premium) can be used to fulfil your 80D limit of upto Rs. 25,000 for the relevant financial year, while saving upto 30% on your premium.

Click below to buy Heart/Cancer Protect online

BUY NOW

^ Deduction from Taxable Income up to Rs. 25,000 for self, spouse and dependent children(Rs.30,000 if the age of insured is 60 years or more) towards health insurance premium paid u/s 80D. Insurance premium for claiming deduction should be paid in any mode other than Cash. Tax benefits are subject to conditions of section 80D and other provisions of the Income Tax Act, 1961. Tax laws are subject to amendments made thereto from time to time

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How to get the best quote for your policy?

ICICI Pru Heart/Cancer Protect ensures that you save on premium, each step of the way. You can save on your premium, if you:

a) Are an existing customer:

Get 5% off on your first premium, if you are an existing customer.

Or

b) If you want to cover your spouse:

Cover your spouse with an independent cover, and get 5% off on the combined premium.

Plus

c) If you buy online:

You get an additional 2% discount if you buy the policy online.

Plus

d) If you take both Heart and Cancer cover:

If you take a combo cover, you get a 2% discount on the combined premium (For Heart and Cancer)

Discounts at a glance:

Existing Customer Discount`	Self + Spouse (family) Discount`	Online Discount	Combo Cover Discount	Total Discount
5%	N.A.*	2%	2%	9%
N.A.*	5%	2%	2%	9%

Click below to buy Heart/Cancer Protect online

BUY NOW

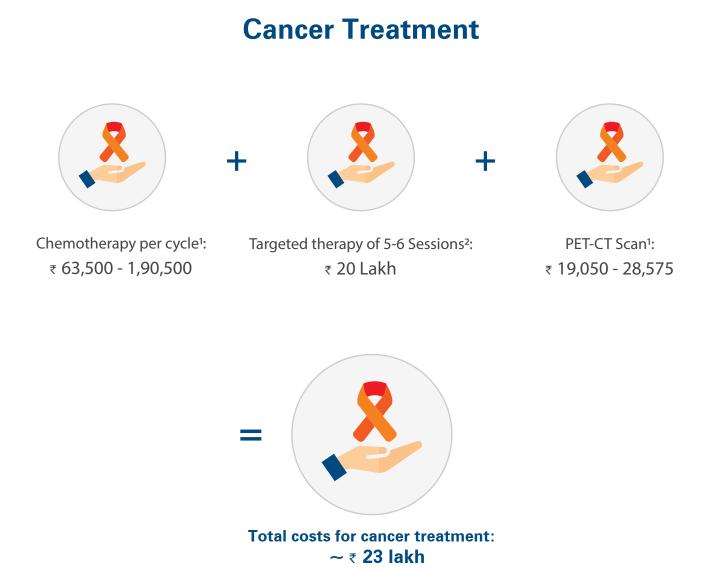
*You can avail either Loyalty benefit or Family benefit but not both together

`These discounts are not available with single pay policies.

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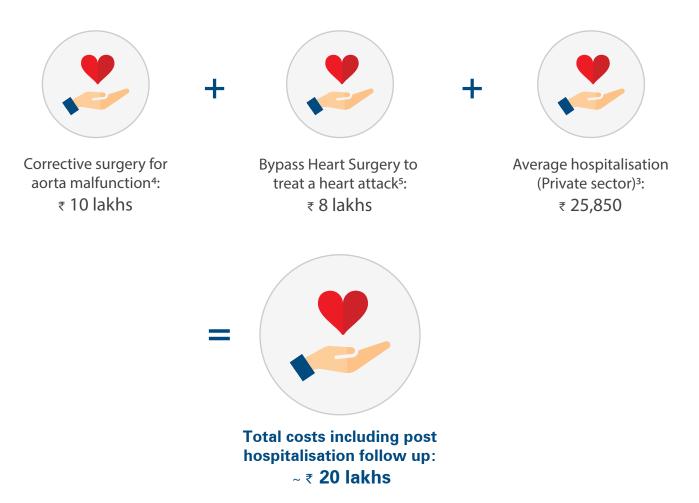
How much Sum Assured is ideal?

Your ideal life cover or Sum Assured amount should be based on future cost of treatments, including recovery, medicines, hospitalisation, additional living expenses and diagnostic tests.





Heart Ailments



- 1 Source: http://www.indiahealthcaretourism.com/average_cost_of_treatment.php
- 2 Source: http://www.medgurus.org/cost-of-Cancer -treatment-in-india/
- **3 Source**: http://economictimes.indiatimes.com/news/industry/healthcare/biotech/healthcare/economic-survey -2016-treatment-cost-at-private-hospitals-4-times-than-government-ones/articleshow/51156935.cms
- 4 Source: http://www.bigdecisions.com/m/bounceback/critical-illness/the-cost-of-Heart-disease-across-india/
- 5 Source: http://www.medgurus.org/cost-of-heart-surgery-in-india/

Click below to check the premium of Heart/Cancer Protect online

CHECK PREMIUM

How to decide the right policy term?

A heart and cancer plan will help you stay worry-free for a long period. What's more, buying a health plan at a younger age comes at affordable premiums, which stay fixed for up to 3 years but renewability is guaranteed upto the age of 75.

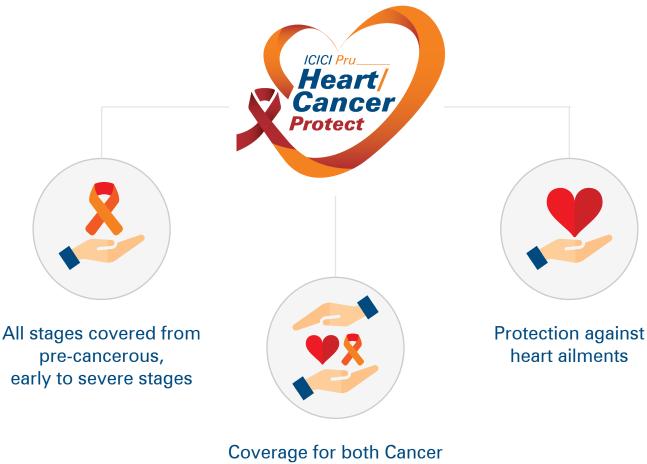
The policy can be renewed upto an age of 75 years, providing you protection in times when it's most needed and without any preconditions.

ICICI Pru Heart / Cancer Protect can be taken when you are 18-65 years old. Minimum policy term you can opt for is 5 years, which comes with lower premiums if you choose the Single Pay option. In case you choose Regular Pay, you can determine your policy term to last from 5-40 years.



Choice of protection:

Choose the cover you need with ICICI Pru Heart / Cancer Protect:



and Heart Problems

Condition-based pay-outs:

On the first diagnosis of any covered illnesses, you will receive a lump sum amount as follows:

Level	Pay-out (As % of Sum Assured)
Minor Condition	25%
Major Condition	100% after deducting earlier Minor Condition claim pay-outs, if any



You can make any number of claims for a Minor Condition within the maximum Sum Assured limit. In case there is a claim for a Major Condition after a claim for a Minor Condition, you will receive the remaining amount after deducting the amount of Minor Condition claim.

Additional- Benefits:

Make sure you are worry-free with add-ons that enhance your protection further.

Hospital Benefit:

Get Rs.5000 EVERY day if you're hospitalized.

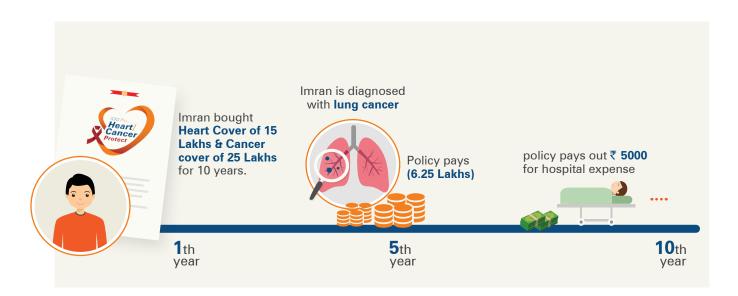
Under this cover, you will receive Rs. 5,000* as daily cash benefit in case you are hospitalised due to a covered ailment. The daily cash is given irrespective of actual hospitalisation costs to help you manage daily expenses.

^{*}Please note, this benefit will be payable subject to a maximum limit of ten days per policy year and thirty days over the policy term for hospitalization of min 24 hours. The yearly limit of number of days of hospitalization cannot be carried forward to next year.

Let's understand the benefit with an example:

Imran is a Business Analyst at an IT firm, aged 28. He bought ICICI Heart/-Cancer Protect with Heart Cover of 15 Lakhs and Cancer cover of 25 Lakhs for a policy term of 10 years. She opted for Hospital Cash Benefit by which he would receive Rs.5000/day of hospitalization, if he's hospitalized with a Heart ailment or a cancer condition.

After 5 years, he is diagnosed with early stage lung cancer and the policy pays out 25% of the Cancer sum assured (6.25 Lakhs). Along with it, whenever Imran is admitted to a hospital for his treatment, the policy pays out Rs. 5000 irrespective of his actual expense at the hospital.



Increasing Cover Benefit:

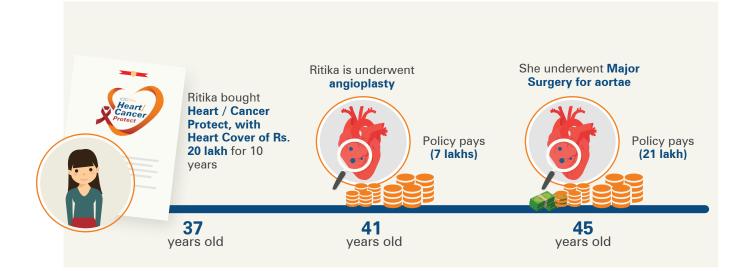
Increase your cover 10% every year till it doubles.

Take care of increasing medical expenses with the Increasing Cover Benefit. It increases your Sum Assured by 10% simple interest every year until the first claim is made. The benefit will increase up to a maximum of 200% Sum Assured opted at inception

Let's understand the benefit with an example:

Ritika is a sales professional aged 37 years. She bought ICICI Pru Heart / Cancer Protect, with Heart Cover of Rs. 20 lakh for 10 years. She opted for Increasing Cover Benefit under which her Sum Assured increased by 10% simple interest every year.

At age of 41, she underwent angioplasty for which she received Rs. 7 lakh (25% of the increased Sum Assured), thereafter the increase in the Sum Assured stopped. The policy continued for Rs. 21 lakh (28-7 lakh) without Ritika having to pay any further premiums. At the age of 45, she underwent Major Surgery for aorta and the remaining Rs. 21 lakh was paid to her.





Income Benefit:

Assured monthly payout as income for 5 years.

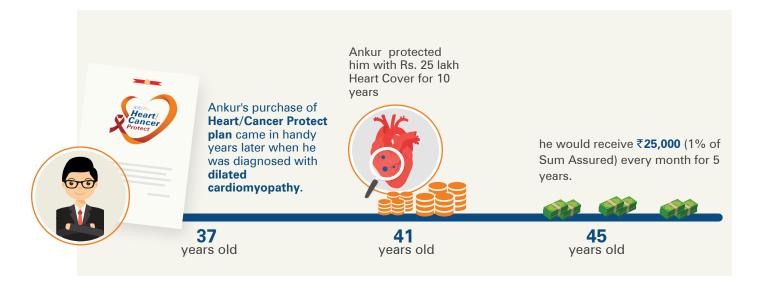
On the diagnosis of any Major Condition, you will receive 1% of the base Sum Assured every month for 5 years under this benefit. You will receive the



An important feature of the Income Benefit is that, the monthly pay-outs continue after major claim. For example, if you are diagnosed with a Major Condition at the 29th policy year, your monthly income will continue for the next 5 years, irrespective of the policy expiring at the end of the 30 years.

Let's understand the benefit with an example:

Ankur's purchase of Heart/Cancer Protect plan came in handy years later when he was diagnosed with dilated cardiomyopathy. He had opted for the Income Benefit knowing that his family was dependent on his income for their livelihood.



Ankur's plan came into action, as his condition was classified as a Major condition. Under the plan which protected him with Rs. 25 lakh Heart Cover for 10 years, he would receive Rs. 25,000 (1% of Sum Assured) every month for 5 years. He also received the Rs. 25 lakh Heart Cover amount, which helped him with surgery and post-hospitalisation expenses.

What are the conditions covered?

Cancer Cover includes:

Minor Conditions	Major Conditions
Early stage Cancers	Cancer of Specified Severity
Carcinoma-in-Situ of any organ (except skin)	

Heart Cover includes:

Minor Conditions	Major Conditions
1. Angioplasty	1. Cardiomyopathy
2. Balloon Valvotomy or Valvuloplasty	2. First Heart Attack of Specified Severity (Myocardial Infarction)
3. Carotid Artery Surgery	3. Heart Transplant
4. Implantable Cardioverter Defibrillato	4. Major Surgery of aorta
5. Implantation of Pacemaker of Heart	5. Open Chest CABG
6. Infective Endocarditis	6. Open Heart replacement or Repair of Heart Valve
7. Minimally Invasive Surgery of aorta	7. Primary (Idiopathic) Pulmonary Hypertension
8. Pericardectomy	
9. Surgery for Cardiac Arrhythmia	
10. Minimally Invasive Surgery of aorta	
11. Surgery to Place Ventricular Assist Devices or Total Artificial Hearts	

How to claim your policy

ICICI Prudential has a claim settlement ratio of 96.2% ^, which is one of the best in the industry. ICICI Pru Heart/Cancer Protect pays out the entire claim amount irrespective of your medical expenses, and upon submission of the required medical records.

At ICICI Prudential Life, we believe that every claim represents fulfilment of a promise made to our policyholders. We are committed towards securing the future of your loved ones, in a manner that's quick and efficient.

Claims Process at ICICI Pru Life :

At ICICI Prudential life every claim is a fulfillment of a promise that we have made to our policyholders and we do our best to process the claim in the most transparent and quick manner.

We follow 3 step claims process

Step 1: IntimationStep 2: Claims ProcessingStep 3: Decision & Payout

Intimation

For the ease of raising claims, ICICI prudential has various modes to intimate claims;

- » All ICICI prudential life branches
- » Central claims team at Mumbai
- » Online claim intimation through company's website
- » SMS 'ICLAIM Policy No' to 56767
- » Claim care cell 1860-266- 7766

^ As per IRDAI Annual Report 2015-16

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The Company has always made it a point that the claimant is at ease at a critical milestone like claims, thereby not only offering him/her a physical touch point via branches spread geographically which provide "priority service" with "no queue" facility, but also through the digital platform of intimating claims online at www.iciciprulife.com thereby providing alternate means from the traditional processes

The call center of the Company has a dedicated 24X7X365 helpline for claims which assists in resolving customer query and are able to connect to the claims team directly via a conference call to the claims manager thus "hand holding" and providing customer satisfaction at the earliest. Also the customer can send an SMS and receive call back for quick assistance.

All required documents to be submitted along with intimation for speedy processing. One can refer to our Website, Claim form, Policy document or even contact our branch / call center to know the exact requirements.

Claims Processing:

On the receipt of claim intimation and supporting documents, claim assessor scrutinizes it with reference to completeness of documents and policy terms & conditions. If any further additional documents are required then same are triggered within stipulated turn-around time (TAT) and communicated to the claimants through different communication modes like letter, email and SMS.

If a claims warrants detailed investigation depending upon circumstances of death then it is subjected for field investigation and claimant is kept informed about the same.

During claim processing, dedicated claims manager is provided for each claim who takes responsibility of assisting the claimant at each stage till fair decision is provided on the claim. Claim assessor's contact details are also shared with the claimant.



Decision and Payout:

On receipt of all required documents and completion of field investigation as the case may be, ICICI prudential Life settles and communicates claims decision within defined TAT as mentioned above.

To expedite transfer of claims proceeds to claimants, we aim to process most of our payouts through electronic modes like ECS and NEFT.

Frequently Asked Questions (FAQs)

Q. What are the conditions covered under the policy?

Ans. The policy covers both major and minor conditions of heart diseases and cancer, starting from early stage cancer (For Cancer) and angioplasty or valvuloplasty (For Heart). See the detailed set of conditions covered for both heart diseases and cancer here.

Q. How does the policy pay out?

Ans. The policy pays out on diagnosis of heart ailments or cancer, irrespective of the stage of the disease (Early or late). If it is a minor condition, the policy pays out 25% of the cover amount and continues it's cover till the policy term. If unfortunately, the disease affects the policy holder again in a major way (any major condition), it pays out the rest 75% to the policy holder and the policy terminates. In case of a major condition, the policy pays out 100% of the cover amount as lump sum upon diagnosis.

Q. What are the additional benefits? Do I have to pay separately for those?

Ans. The policy has three additional benefits, Hospital cash benefit, No claim benefit and Income benefit. You can know more about these here. These are additional benefits which you can choose as per your need, and they increase your premium amount proportionate to their benefits. You can calculate your premium amount here, based on the options you take.

Q. How long does it take to get the reimbursement?

Ans. ICICI Pru Heart/Cancer Protect pays out on diagnosis of the disease, and hence do not require you to pay bills to claim. You just have to produce medical records of diagnosis/doctor's certificate of diagnosis, to our claim care centres.

Q. What if a cancer gets treated once and then comes back to affect the person in remission, does the policy cover it again?

Ans. ICICI Pru Heart/Cancer Protect pays out on every stage. If the Cancer was of minor stage to start with, policy pays out 25% of the total cover for treatment and recovery. If, unfortunately, the Cancer comes back from remission to affect the person again at a higher severity (major stage), the policy pays out rest of the cover amount for treatment and recovery.

Q. Does the family get any sum assured upon the policyholder's death?

Ans. The policy does not have a death benefit, as in no absolute amount is paid upon death of the policy holder. But cover under heart and cancer conditions would be paid out irrespective of if death occurs or not, provided the policyholder has been diagnosed with heart illnesses or cancer. But also note that there is a survival period of 7 days for heart diseases. ie, the policy holder has to survive for a period of 7 days from the date of diagnosis to be eligible to receive the cover amount. There is no survival period for Cancer. If you have availed the income benefit, even in case of a policyholder's death, an amount of 1% of health cover is paid out for a period of 5 years, even in the case of policyholder' death (To your nominee)

Q. Can I cover my parents within the same policy?

Ans. But you can cover your spouse under the same policy, availing a 5% discount on the first year's premium. Also, unlike a family floater, the covers of both people would remain independent of each other, with the option to choose different cover amounts for each.

Q. How many network hospitals does the company have tied up with, where I can get treatment?

Ans. The policy pays out a lumpsum amount on diagnosis, and has no bearing on where the treatment is carried out. The policyholder can use the amount to fund his/her treatment at hospital of his/her choice.

Q. Are pre existing conditions covered?

Ans. Pre existing diseases are not covered. Any heart or cancer condition which was diagnosed or for which medical advice/treatment was received within 48 months prior to the policy issuance, would not be covered.

Q. What do you mean by waiting period?

Ans. Waiting period is that time period within which no policy claims are admissible. In case the policyholder is diagnosed during this period for a condition which was claimable, the company refunds all the premiums till date and the policy shall terminate. The waiting period for the policy is 6 months, which is standard across the insurance industry.

Q. What are the facilities covered under hospitalization benefit?

Ans. Hospitalization benefit pays out Rs.5000 per day of hospitalization irrespective of actual expenses incurred, if the policy holder is hospitalized for a period of 24 hours, due to any of the listed conditions under your chosen cover.

Q. Would I get tax exemptions for the premiums towards this policy?

Ans. Yes, you would be eligible for tax exemptions under Section 80D

Application Form



- Note down the 10 digit alphanumeric application number (OB12345678) that is generated on the screen.
- You can resume your online application form in two ways in our App Tracker.
- a. App no. and Date of Birth
- b. Mobile no. Date Of Birth
- Please keep your PAN number and KYC documents handy for easier form filling.
- Please note that Health cover, Date Of Birth, Gender are non editable later in the application process as the Application No. is generated based on these inputs. If you wish to make any changes, start again.

Basic Details:

1) Name:

Enter your name in the fields given.



Please enter your name as per your ID Proof. If you have a middle name for eg: Ram Kripal Yadav. Enter Ram in the First name field and Kripal Yadav in the Last name field

2) Date of birth and Gender:

You cannot edit your date of birth or gender in the application form. If you have entered incorrect DOB/ Gender. Please start your buying journey again.



3) Marital status:

Select your Marital Status from the drop down list.



If you have filed for a divorce and not legally divorced yet, please select married.

4) Education:

1. Select **Post Graduate** if you have completed a degree or diploma after your graduation. **eg: M.Tech / M.B.A.**

2. Select Graduate if you have completed a Bachelor's degree. eg: B.Tech/B.A.

3. Select **Diploma** if you have completed a professional diploma course after Senior Secondary (10+2)

4. Select **10th or 12th** if you have completed Senior Secondary (SSC) or High Secondary (HSC) respectively.

5. Select **Below 10th** if you have completed any standard below High School.

5) Occupational:

1. Select **Salaried** if you are working for an organisation on its payroll and not on contract basis.

2. Select **Agriculturalist** if you belong to any act of soil cultivation (Cultivator, farmer etc)

3. Select **Professional** if you are a certified professional and practice the same profession independently like doctor, CA, Lawyer etc.





If you fall under professional and your profession is not mentioned in the drop down. Please select 'others' and describe your profession.

4. Select **Self-employed** if you are a business person.



If you are a business person running a company, select Self employed and further mention the name of your organisation and organisation type.

- 5. Select **Retired** if you have retired from a job and not working anywhere.
- 6. Select **Student** if you are enrolled in a full time course

7. Select **Others** if you do not belong to any of the above occupation and give a brief description of your occupation in the Occupation Description box.

For eg: Supervisor, Commission agent.

6) Organisation Details:

Select the name of your organisation from the drop down



Organisation names are updated periodically. If your organisation name is not mentioned in the drop down, select "others" and enter the name of your organisation along with organisation type.



7) Organization type:

Select appropriate Organisation Type from the drop down

1. Select **Public Limited** if the company is listed in stock exchange like Infosys Ltd

2. Select **Government** if you are in a state or central government run organisations like Indian railways

3. Select **Private Limited** by checking on the company documents for the full name of the organisation, usually private limited companies use abbreviation like Pvt. Ltd. after their names.

4. Select **Proprietor** if the Company is run by a single owner, usually nascent start-ups, and very small organisations.

5. Select **Trust** If you are working for a non-profit organisation, an educational institution, or a non-profit healthcare organisation

6. Select Partnership if it is a partnership firm

7. Select **Society**, if it is a group that is formed for a specific purpose, for example Residents Welfare Society, etc

8. Select **Hindu Undivided Family**: If you belong to or working for Hindu Undivided Family. It is a class business being run on an inherited property by a member of the family.



Please select the above to the best of your knowledge:



Use case 1:

Mr. Suresh Sharma is working in a software company as a softwar engineer. He will fill up his occupation details as follows

Occupation: Salaried Organisation name: Abc software Pvt Ltd. Organisation type: Private Limited

Use case 2:

Mr Kamal Kishore Mishra, works as an accountant in Madhur residential building. He will fill up his details as follows

Occupation: Others Occupation description: Accountant Organisation name: Others Organisation name description: Madhur Cooperative Hsg society Orgnisation type: Society

8) Trade:

1. If you are employed in export, jewellery, real estate, scrap dealing, shipping, stock broking or agriculture, select Yes.

2. If you selected yes for 'Point no. 1' you need to select your activity type from the drop down list.



Select import/export if you or your company is involved in import or exports of goods



9) PAN Number (mandatory):

Provide your alphanumeric PAN number (10 digit) here; for example: AAKVP1938L



10) Aadhar Number:

You may also provide your Adhaar No.(12 digit) although it is not mandatory



Aadhar Card can be used as a valid Age, Identity and Address Proof

11) Age Proof:

Click here to refer eligible age proofs and upload the same



Aadhaar card, Passport and Driving License are commonly used age proofs, which are also used as ID and address proofs

13) Annual income:

For total annual income field, enter the amount the amount that is mentioned in your income proof.

Use case 1:

If you are salaried and you have received a bonus in this financial year, please



enter following amounts

a. Total of annual salary + bonus, if your income proof is salary slips(last 3 months) and Bonus is a part of those slips

b. Total annual salary, if your income proof is salary slips(last 3 months) and bonus is not a part of those salary slips

c. Total annual salary of last year, if your income proof is previous years ITR/ Form 16

Use case 2:

If you have recently got a hike or moved to a different company with a hike, please enter following amounts

d. New annual salary, if your income proof is last 3 months salary slips with the new salary

e. New annual salary, if your income proof is your appointment letter and you are less than 3 months old in the new organisation

Old annual salary, if your income proof does not reflect updated salary

14) Politically exposed:

Select Politically Exposed Person, if you or a member of your family or close relatives hols important positions in political parties, Judicial/ military officials, senior executives of state owned corporations

12) EIA:

Enter Electronic Insurance Account (EIA) if you already have an EIA account.





EIA is a free of cost repository which keeps all your policies in electronic form. If you do not have an EIA: from the drop down select one of the options to apply or select not interested.

Nominee Details:

Enter Nominee name/ gender / relation and date of birth



1. If your nominee is a minor (less than 18 years old), you will have to enter the details of an appointee who will be authorised to act on behalf of the nominee, till your nominee is legally 18 years old. Appointee must be atleast 18 years old.

2. Ensure correct details of the nominee or appointee are entered. This will help in easier claim process.

Previous Policy details:

- 1) Enter details of Non ICICI Prudential Life insurance policies which are inforce/active
- 2) Select Name of the insurer from the drop down and enter the life insurance cover/sum assured
- 3) Click on "Add another Policy" if you have more than one life insurance policies from other life insurers





In case of ULIPs enter the Sum Assured or Life insurance Cover amount and not the fund value/ premium amount.

FATCA and CRS

- If you are a tax resident of any country other than India, please enter each countries name and Tax identification number of which you are tax resident of.
- 2) Select the country of your birth from the drop down if you were not born in India.

Communication Address

- 1) Please enter details as per your address proof
- 2) Enter your permanent address, if it is different than your communication address.
- 3) Please verify your mobile number and email address

Health Details:

- 1) Provide your physical details here
- a) Height: Enter your height (Feet) by typing in the fields given. Height in Cms will automatically appear.
- b) Weight: Enter your weight in KGs





Provide information to the best of your knowledge

2) In the last two years, have you consumed tobacco in the form of cigarette/beedi or chewable tobacco?

3) In the last two years, have you consumed tobacco in the form of cigarette/beedi or chewable tobacco?

For eg: If you have started drinking 5 years back but you drink (mostly beer) only twice in a month, please mention details as below:

Alcohol consumed as: Beer (Bottles)

Quantity per day: 1-2

Since how many years: 5

4) Do you consume or have ever consumed Narcotics?

5) Have you or your spouse ever been tested positive for Sexually transmitted diseases/HIV/AIDS?

6) Has your insurance application or reinstatement application, for life insurance, accident, medical or health related insurance ever been declined, postponed, withdrawn or accepted at extra premium due to health/medical grounds?

7) Have any two or more of your first degree relatives i.e. parents, sisters or brothers suffered from any heart condition like coronary artery disease, heart valve disease, stroke, cardiomyopathy, arrhythmia or sudden death before the age of 50 years?

8) Have you ever suffered or are suffering from any of the following signs or symptoms or taken consultation or been advised to undergo regular medical consultation/investigations or treatment including hospitalization or advised regular treatment for:



- i. High blood pressure or Cholestrol or lipids higher than the normal laboratory ranges, Blood sugar higher than normal lab range, diabetes
- ii. Heaviness or pain or discomfort in chest, palpitations, heart attack or any other disorder of the heart or circulatory system OR undergone angioplasty, bypass surgery, heart surgery, experienced shortness of breath with or without exertion/Swelling of lower limbs
- iii. Congenital Heart Disease, Heart Valve disease, Rheumatic Heart Disease, Heart Failure
- iv. For females:
 - Any complication related to pregnancy. Eg: Gestational diabetes, hypertension, cardiovascular ailment etc.

9) Have you undergone any investigation in the last 2 years, for ailments or symptoms related to Heart condition for eg. ECG/TMT/2 D Echo etc, excluding normal results of Executive/Annual/Regular health check-up.

10) Have any two or more of your first degree relatives, i.e. parents, sisters or brothers suffered from any form of cancer or precancerous condition or sudden death before the age 50 years?

11) Is your occupation associated with hazards like exposure to chemicals (eg:benzene, nickel compounds, vinyl chloride etc.), ionizing radiations, mining, dusts (eg: leather or wood dusts, silica, asbestos etc.), industrial processes (aluminium production, iron and steel founding etc.)

12) Have you ever suffered or are suffering from any of the following signs or symptoms or taken consultation or been advised to undergo regular medical consultation/investigations or treatments including hospitalization or advised regular treatment for:

 a) Recurrent cough, hoarseness of voice or difficulty in swallowing for a continuous period of 15 days, Loss of conscious for more than 15 minutes,Black outs (loss of consciousness), dizziness, Transient Ischemic Attack,stroke, Persistent headache, muscle weakness, paralysis, epileptic fits or sudden loss of vision or a hearing for a continuous period of 15 days.

- b) Any persistent loss of blood or unusual discharge or pus from any body opening like nose, mouth, gums, rectum etc. or blood in stools, urine, sputum or any persistent blood disorder, abnormal blood count.
- c) Any form of malignant/benign tumor or growth, blood cancer, sarcoma, precancerous conditions or non healing ulcers of mouth, stomach/intestines, any other non-healing ulcer, abnormal growth, tumor, nodes, cyst or lump in any part of the body
- d) Hepatitis B, Hepatitis C, Liver disease due to alcohol/any other reason
- e) For Females

 i) Menstrual abnormalities, endometriosis, fibroids, recurrent miscarriage, any spotting or unusual bleeding or have you ever received any consultation or treatment for painful vaginal bleeding or discharge etc.

13) Have you undergone any investigations in the last 2 years, for ailments or symptoms related to Cancer or pre-cancerous conditions eg:
Endoscopy/Ultrasound/CT scan/Mammography/PAP smear/Biopsy etc excluding normal results of Executive/Annual/Regular health check-up.

OTP:

Verify with one time password that is sent to your mobile number given in the application



OTP verification is mandatory for Policy issuance as per IRDAI.
 If you skip this here, it comes two more times in your buying journey



Review:

1. You can review the entire application form and edit application details if required.

2. Tick on the declaration mentioned at the end of the review to continue with payment



Please review and edit details here, you will not be able edit information if you move to the payment page

Set Payout Details:

Verify with one time password that is sent to your mobile number given in the application



- Enter the details of the bank account where you want the cover amount to be deposited in case of a claim. Please make sure that it is an active account.
- Enter the IFSC code of your bank account and the system would pick up the MICR Code and Branch details automatically. You don't have to enter these details yourself.



Premium Payment:

SOURCE OF FUNDS: Select source of funds as applicable



• If you do not fall in any of the options mentioned in the drop down. Select others and give a description.

For eg: If you are a freelance writer, select others and mention freelance writing remuneration.

- If you fall in more than one category, select the ones as per your income proof.
- If the payer is other than the policy holder, please keep a third party declaration in the format mentioned ready and also submit payers KYC. You can choose to pay from various available options
 a. Credit Card | b. Debit card | c. Net banking | d. Wallet
- 1 .In case of Credit card, tick on the set up standing instructions options. This will ensure that your premiums are paid on time and your policy stays inforce/active.
- Wallet option for payment is not available for monthly premium payment.

List of conditions covered under Heart Cover

Minor conditions for Heart cover:

1) Angioplasty

- a) Coronary Angioplasty is defined as percutaneous coronary intervention by way of balloon angioplasty with or without stenting for treatment of the narrowing or blockage of minimum 50 % of one or more major coronary arteries. The intervention must be determined to be medically necessary by a cardiologist and supported by a coronary angiogram (CAG).
- b) Coronary arteries herein refer to left main stem, left anterior descending, circumflex and right coronary artery.
- c) Diagnostic angiography or investigation procedures without angioplasty/stent insertion are excluded.

2) Balloon Valvotomy or Valvuloplasty

The actual undergoing of Valvotomy or Valvuloplasty necessitated by damage of the heart valve as confirmed by a specialist in the relevant field where the procedure is performed totally via intravascular catheter based techniques.

The diagnosis of heart valve abnormality must be supported by cardiac catheterization or Echocardiogram and the procedure must be considered medically necessary by a consultant cardiologis The following are excluded:

Procedures done for treatment of Congenital Heart Disease

3) Carotid Artery Surgery

The actual undergoing of surgery to the Carotid Artery to treat carotid artery stenosis of fifty percent (50%) and above, as proven by angiographic evidence, of one (1) or more carotid arteries. Both criteria (a) and (b) below must be met:

a) Either:

- i) Actual undergoing of endarterectomy to alleviate the symptoms; or
- ii) Actual undergoing of an endovascular intervention such as angioplasty and/or stenting or atherectomy to alleviate the symptoms; and

b) The Diagnosis and medical necessity of the treatment must be confirmed by a Registered Medical Practitioner who is a specialist in the **relevant field**.

4) Implantable Cardioverter Defibrillator

Actual undergoing of insertion of an implantable cardiac defibrillator to correct serious cardiac arrhythmia which cannot be treated via other methods or the insertion of permanent cardiac defibrillator to correct sudden loss of heart function with cessation of blood circulation around the body resulting in unconsciousness

Insertion of Cardiac Defibrillator means surgical implantation of either Implantable Cardioverter Defibrillator (ICD), or Cardiac Resynchronization Therapy with Defibrillator (CRT-D)

The insertion of a permanent Cardioverter-Defibrillator (ICD) must be certified to be absolutely necessary by a specialist in the relevant field.

Cardiac arrest secondary to alcohol or drug misuse will be excluded.

5) Implantation of Pacemaker of Heart

Actual undergoing of Insertion of a permanent cardiac pacemaker to correct serious cardiac arrhythmia which cannot be treated via other means. The insertion of the cardiac pacemaker must be certified to be medically necessary by a specialist in the relevant field.

Cardiac arrest secondary to alcohol or drug misuse will be excluded.

6) Infective Endocarditis

Inflammation of the inner lining of the heart caused by infectious organisms, where all of the following criteria are met:

- Positive result of the blood culture proving presence of the infectious organism(s)
- Presence of at least moderate heart valve incompetence (meaning regurgitate fraction of twenty percent (20%) or above) or moderate heart valve stenosis (resulting in heart valve area of thirty percent (30%) or less of normal value) attributable to Infective Endocarditis; and
- Infective Endocarditis and the severity of valvular impairment are confirmed by a consultant cardiologist.

7) Minimally Invasive Surgery of Aorta

The actual undergoing of minimally invasive surgical repair (i.e. via percutaneous intra-arterial route) of a diseased portion of an aorta to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta with a graft. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches. Procedures done for treatment of Congenital heart disease are excluded.

8) Pericardectomy

The undergoing of a pericardectomy performed by open heart surgery or keyhole techniques as a result of pericardial disease. The surgical procedures must be certified to be medically necessary by a consultant cardiologist. Other procedures on the pericardium including pericardial biopsies, and pericardial drainage procedures by needle aspiration are excluded.

The actual undergoing of pericardiectomy secondary to chronic constrictive pericarditis.

The following are specifically excluded:

- » Chronic constrictive pericarditis related to alcohol or drug abuse or HIV
- » Acute pericarditis due to any reason

9) Pulmonary Thromboembolism

Acute Pulmonary Thromboembolism: means the blockage of an artery in the lung by a clot or other tissue from another part of the body. The Pulmonary Embolus must be unequivocally diagnosed by a specialist on either a V/Q scan (the isotope investigation which shows the ventilation and perfusion of the lungs), angiography or echocardiography, with evidence of right ventricular dysfunction and requiring medical or surgical treatment on an inpatient basis.

10) Surgery for Cardiac Arrhythmia

Ablative Procedure is defined as catheter ablation procedures using radiofrequency or cryothermal energy for treatment of a recurrent or persistent symptomatic arrhythmia refractory to antiarrhythmic drug therapy. Ablation procedures should immediately follow the diagnostic electorphysiology study. The ablative procedure must be certified to be absolutely necessary by a consultant cardiologist (electrophysiologist).

Preprocedural evaluation prior to ablation procedures and ablation procedures as below should be completely documented:

- » Strips from ambulatory Holter monitoring in documenting the arrhythmia.
- >> Electrocardiographic and electrophysiologic recording, cardiac mapping and localization of the arrhythmia during the ablative procedure.

11) Surgery to Place Ventricular Assist Devices or Total Artificial Hearts

This is an open chest procedure for implantation of Left Ventricular Assist Device/Ventricular Assist Device as bridges to cardiac transplantation or destination therapy for long term use for the Refractory Heart Failure with reduced ejection fraction as defined below: NYHA Class IV symptoms who failed to respond to optimal medical management for >= 45 of the past 60 days, or have been intra-aortic balloon pump dependent for 7 days, or IV inotrope dependent for14 days.

The following are excluded:

Ventricular dysfunction or Heart failure directly related to alcohol or drug abuse is excluded.

Major conditions

12) Cardiomyopathy

- An impaired function of the heart muscle, unequivocally diagnosed as Cardiomyopathy by a Registered Medical Practitioner who is a cardiologist, and which results in permanent physical impairment to the degree of New York Heart Association classification Class III or Class IV, or its equivalent, based on the following classification criteria:
- Class III Marked functional limitation. Affected patients are comfortable at rest but performing activities involving less than ordinary exertion will lead to symptoms of congestive cardiac failure.
- Class IV Inability to carry out any activity without discomfort. Symptoms of congestive cardiac failure are present even at rest. With any increase in physical activity, discomfort will be experienced. The Diagnosis of Cardiomyopathy has to be supported by echographic findings of compromised ventricular performance. Irrespective of the above, Cardiomyopathy directly related to alcohol or drug abuse is excluded.

13) First Heart Attack of Specified Severity (Myocardial Infarction)

The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:

A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)

New characteristic electrocardiogram changes

Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

- » Other acute Coronary Syndromes
- » Any type of angina pectoris
- A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

14) Heart Transplant

The actual undergoing of a transplant of heart that resulted from irreversible end-stage failure of the heart. The undergoing of a heart transplant has to be confirmed by a specialist medical practitioner (cardiologist).

Stem cell Transplants are excluded.

15) Major Surgery of aorta

The actual undergoing of major surgery to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta through surgical opening of the chest or abdomen with a graft. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches.

The following are excluded:

- Surgery performed using only minimally invasive or intra-arterial techniques are excluded.
- Angioplasty and/or any other intra-arterial procedures, catheter based techniques, "keyhole" or laser procedures are excluded.
- » Procedures done for treatment of Congenital heart disease are excluded.

16) Open Chest CABG

The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.

The following are excluded:

i. Angioplasty and/or any other intra-arterial procedures

17) Open Heart replacement or Repair of Heart Valve

The actual undergoing of open-heart valve surgery is to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner. Catheter based techniques including but not limited to, balloon valvotomy/valvuloplasty are excluded

18) Primary (Idiopathic) Pulmonary Hypertension

 a) An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Cauterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification of cardiac impairment.

List of Conditions covered under Heart...

- b) The NYHA Classification of Cardiac Impairment are as follows:
 - i) Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
 - ii) Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

III) Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.

List of conditions covered under Cancer cover

Minor conditions for Cancer Cover:

19) Carcinoma-in-Situ of any organ (except skin)

- a) Carcinoma in situ (CIS) means the focal autonomous new growth of carcinomatous cells confined to the cells in which it originated and has not yet resulted in the invasion and/or destruction of surrounding tissues.
 'Invasion' means an infiltration and/or active destruction of normal tissue beyond the basement membrane.
- b) The diagnosis of the Carcinoma in situ must always be supported by a histopathological report.
- c) Furthermore, the diagnosis of Carcinoma in situ must always be positively diagnosed upon the basis of a microscopic examination of the fixed tissue, supported by a biopsy result. Clinical diagnosis does not meet this standard.
- d) In the case of the cervix uteri, Pap smear alone is not acceptable and should be accompanied with cone biopsy or colposcopy with the cervical biopsy report clearly indicating presence of CIS.
- e) Clinical diagnosis or Cervical Intraepithelial Neoplasia (CIN) classification which reports CIN I, and CIN II (where there is severe dysplasia without carcinoma in situ) does not meet the required definition and are specifically excluded.
- f) All CIS of the skin are specifically excluded.
- g) This coverage is available to the first occurrence of CIS of same organ.
 Multiple claims from same organ will not be admissible.

Early stage Cancers

Early Stage Cancer shall mean first ever diagnosis with the presence of one of the following malignant conditions:

- a) Any malignant tumor of the thyroid, positively diagnosed with histological confirmation and characterised by the uncontrolled growth of malignant cells and invasion of tissue, which is histologically classified as T1N0M0 according to the TNM classification system, or another equivalent classification
- b) Prostate tumor should be histologically described as TNM Classification T1a or T1b or T1c are of another equivalent classification.
- c) Chronic lymphocytic leukaemia classified as RAI Stage I or II;.
- d) Hodgkin's lymphoma Stage I by the Cotswold's classification staging system.
- e) All tumors of the urinary bladder histologically classified as T1N0M0 (TNM Classification)

The Diagnosis must be based on histopathological features and confirmed by a Pathologist.

Pre-malignant lesions and conditions, unless listed above, are excluded.

Major condition

20) Cancer of Specified Severity

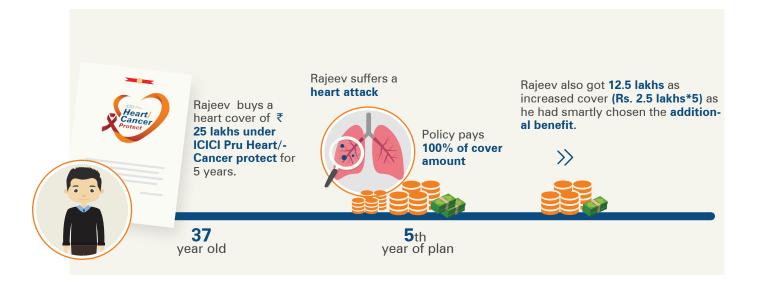
A malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma. The following are excluded –

- a) All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 and CIN-3
- b) Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- c) Malignant melanoma that has not caused invasion beyond the epidermis;
- d) All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- e) All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- f) Chronic lymphocytic leukaemia less than RAI stage 3.g) Chronic lymphocytic leukaemia less than RAI stage 3
- g) Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- h) All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;
- i) All tumors in the presence of HIV infection.

Detailed benefits of Heart/Cancer Protect

Increasing Cover Benefit:

Rajeev is a civil engineer aged 37. He buys a heart cover of Rs. 25 lakhs under ICICI Pru Heart/Cancer protect for 5 years. He also opts for the Increasing cover benefit. In the final year of the policy, Rajeev suffers a heart attack and is in need of an immediate surgery. ICICI Pru Heart/Cancer protect pays out 100% of the sum assured opted at inception along with + 12.5 lakhs as increased cover (Rs. 2.5 lakhs*5) as he had smartly chosen the additional benefit.



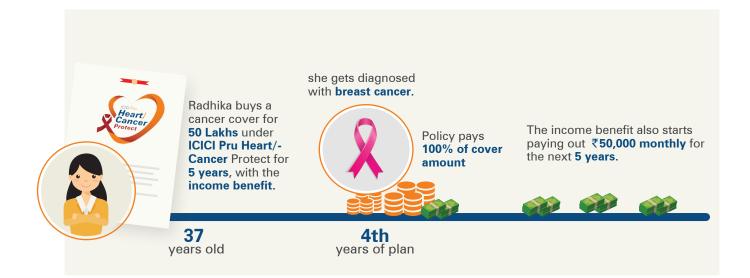
Click below to check the premium of Heart/Cancer Protect online

CHECK PREMIUM



Income Benefit:

Radhika is a media professional aged 35. She buys a cancer cover for 50 Lakhs under ICICI Pru Heart/Cancer Protect for 5 years, with the income benefit. In the fourth year, she gets diagnosed with breast cancer. The plan comes into action as soon as she is diagnosed and pays out 100% of the cover amount. The income benefit also starts paying out Rs. 50,000 monthly for the next 5 years,

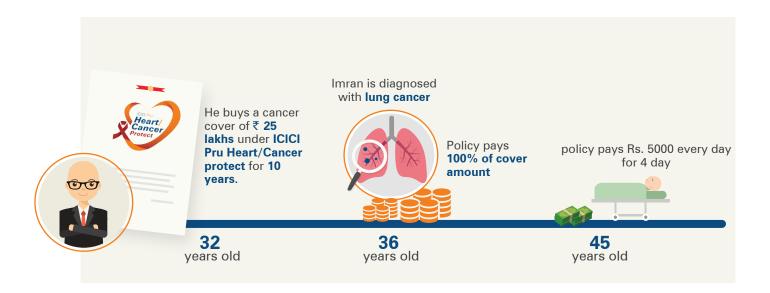


Click below to check the premium of Heart/Cancer Protect online

CHECK PREMIUM

Hospitalization Benefit:

Salman works in a logistics company and is aged 32. He buys a cancer cover of Rs. 25 lakhs under ICICI Pru Heart/Cancer protect for 10 years. He decides to include the Hospitalization benefit with the purchase. He is diagnosed with Lung Cancer at the age of 36. His policy pays out 100% cover amount immediately. At same time he was admitted to the hospital for 5 days cancer treatment, for his hospitalization, he is also paid Rs. 5000 every day for 4 day of hospitalization which helps him meet the additional expenses of hospitalization.



Click below to check the premium of Heart/Cancer Protect online

CHECK PREMIUM



Tax Benefit (Section 80D of the Income Tax Act, 1961)

With ICICI Pru Heart/Cancer Protect, you save upto Rs. 25,000` under section 80D for payment towards health insurance premium.

Contact Us

- 1. Click here
- 2. Visit our website www.iciciprulife.com
- 3. Email us at buyonline@iciciprulife.com
- 4. Call our national service 18602667766

`Deduction from Taxable Income up to Rs. 25,000 for self, spouse and dependent children(Rs.30,000 if the age of insured is 60 years or more) towards health insurance premium paid u/s 80D. Insurance premium for claiming deduction should be paid in any mode other than Cash. Tax benefits are subject to conditions of section 80D and other provisions of the Income Tax Act, 1961. Tax laws are subject to amendments made thereto from time to time

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Terms & Conditions

- 1) Hospitalisation should be on recommendation of a registered medical practitioner to seek medical intervention due to any of the listed conditions.
- 2) This benefit is payable on admissible claim of any of the listed conditions and where Life Assured is hospitalised for the same condition.
- 3) Hospitalisation prior to diagnosis of listed condition under the chosen cover is excluded.
- 4) Hospitalisation for any condition other than the ones listed under the policy is excluded from the scope of the benefit.
- 5) Subsequent hospitalisation arising due to further complication or follow-up of the already covered condition shall only be covered subject to the maximum limit mentioned above.
- 6) If Cancer cover and Heart cover are taken together then all the above conditions are applicable to listed conditions under Cancer cover separately and Heart cover separately.
 - a) In case of claim under Hospital Benefit due to listed conditions of any one cover, the pay-out will be made for that cover, and the Hospital Benefit due to listed conditions under another cover remains unaffected/ unutilised.
 - b) The allowance of number of days of hospitalisation for under each cover cannot be clubbed and availed for any one cover.



Conditions for Permanent Disability (PD) due to accident

- 1)The benefit because of Permanent Disability (PD) due to an accident will be applicable if the Life Assured is unable to perform 3 out of the 6 following Activities of Daily Work:
- 2) Mobility: The ability to walk a distance of 200 meters on flat ground.
- 3) Bending: The ability to bend or kneel to touch the floor and straighten up again and the ability to get into a standard saloon car, and out again.
- 4) Climbing: The ability to climb up a flight of 12 stairs and down again, using the handrail if needed.
- 5) Lifting: The ability to pick up an object weighing 2kg at table height and hold for 60 seconds before replacing the object on the table.
- 6) Writing: The manual dexterity to write legibly using a pen or pencil, or type using a desktop personal computer keyboard.
- 7) Blindness permanent and irreversible Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

For the purpose of PD, the following conditions shall apply:

The disability should have lasted for at least 180 days without interruption from the date of disability and must be deemed permanent by a Company empanelled medical practitioner.

PD due to accident should not be caused by the following:

Attempted suicide or self-inflicted injuries while sane or insane, or whilst the Life Assured is under the influence of any narcotic substance or drug or intoxicating liquor except under the direction of a medical practitioner; or

Engaging in aerial flights (including parachuting and skydiving) other than as a fare paying passenger or crew on a licensed passenger-carrying



commercial aircraft operating on a regular scheduled route; or

The Life Assured with criminal intent, committing any breach of law; or

Due to war, whether declared or not or civil commotion; or

Engaging in hazardous sports or pastimes, e.g. taking part in (or practicing for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport.

PD only due to accident is covered. The accident resulting in PD be sudden, unforeseen and involuntary event caused by external, visible and violent means.

The accident shall result in bodily injury or injuries to the Life Assured independently of any other means. Such injury or injuries shall, within 180 days of the occurrence of the accident, directly and independently of any other means cause the PD of the Life Assured. In the event of PD of the Life Assured after 180 days of the occurrence of the accident, the Company shall not be liable to pay this benefit.

The policy must be in-force at the time of accident

The Company shall not be liable to pay this benefit in case PD of the Life Assured occurs after the date of termination of the policy.

Terms and conditions

- Claim will be admissible only if the Life Assured is diagnosed for the first ever occurrence of any of the listed conditions and policy is in force at the time of diagnosis. The total payout in the policy cannot exceed 100% of the sum assured of the cover selected.
- 2) Claim under one type of cover does not impact the sum assured of the other cover.
- 3) Under a particular cover, either Cancer or Heart, for the multiple Minor conditions claims to be admissible, there needs to be a period of at least 6 months between the date of diagnosis of a Minor condition claim and date of diagnosis of subsequent Minor condition claim. However this requirement of 6 months is not applicable in case of diagnosis of a major condition claim following a minor condition claim.
- 4) Under Cancer cover, multiple Minor condition claims from the same organ will not be admissible. For the purpose of claim under Cancer cover, each group of the following sites are treated as one organ.
 - a) Basal cell and squamous skin cancer
 - b) Corpus uteri, vagina, fallopian tubes, cervix uteri, ovary
 - c) Colon and rectum
 - d) Penis, testis
 - e) Stomach and esophagus

5) Where Cancer cover and Heart cover are chosen together, all future premiums for the Life Assured will be waived off on any of the following conditions:

a) A Minor/Major condition claim under either Cancer cover or Heart cover; or Upon the diagnosis of Permanent Disability of the Life Assured due to an accident.



Waiver of premium:

In case the policy has been purchased for you and your spouse, waiver of future premiums will be applicable only for that Life Assured who has been diagnosed with the following conditions

- » A Minor condition; or
- » Permanent Disability due to accident; or

A Minor/Major condition where Cancer cover and Heart cover are chosen together

6) Income Benefit:

- a) The Income Benefit will be paid as and when due irrespective of the expiry of the policy term, provided Major condition has been diagnosed within the policy term.
- b) In case of death of Policyholder during income benefit payout period, the benefit will be paid to the Claimant.
- c) If 100% of the sum assured has already been paid under the policy on account of multiple Minor condition claims, then on a claim under listed Major conditions, only Income Benefit will be paid and there will not be any lump sum benefit payment.
- d) Where the Cancer cover and Heart cover are taken together, pay out under Income Benefit will be triggered for only that cover for which a claim of Major condition is registered and all Benefits through other cover remains unaffected.

7) Increasing Cover Benefit:

a) Increase in sum assured will stop on occurrence of first claim under the cover.

b) Where Cancer cover and Heart cover are taken together, in case of occurrence of first claim under any one type of cover, the increase in sum assured will stop for that cover type and Increasing Cover Benefit will continue for the other type of cover, for which no claim has occurred.

8) Special Benefits

- 8.1) Family Benefit:
- Family benefit will have to be chosen at the inception of the policy only, spouse cannot be added once the policy is issued. The policy benefits of both the Life's Assured shall be independent of each other

This discount is not applicable on Single pay policy.

- 8.2) Loyalty Benefit: This discount is not applicable on Single Pay policy.
- 8.3) You can avail either Family Benefit or Loyalty Benefit.

9) Waiting Period

- a) The benefit shall not apply or be payable in respect of any listed conditions of which the symptoms have occurred or for which care, treatment, or advice was recommended by or received from a Physician, or which first manifested itself or was contracted during the first six months from the Risk commencement date or three months from the policy revival date where the policy has lapsed for more than three months.
- b) In the event of occurrence of any of the scenarios mentioned above, where it is established that the Life Assured was diagnosed to have any one of the listed conditions during the waiting period for which a claim could have been made, the Company will refund the premiums from risk commencement date of the policy or from the date of revival as applicable and the policy will terminate with immediate

effect. For policies with Family Benefit, this Life Assured will be removed and the policy will continue for the other Life Assured with the reduced premium from the next premium due date.

- c) Cancer cover and Heart cover are taken together, premiums corresponding to the cover and its additional benefits (if any), under which the claim is made will be refunded from risk commencement date of the policy or from the date of revival as applicable for that Life Assured. The cover and its additional benefits for which the premiums have been refunded will cease with immediate effect. The policy will continue with the other cover and its additional benefits (if any), and all future premiums will be payable only for this cover and its additional benefits.
- d) No waiting period applies if any of the listed conditions occur due to accident.

10) Survival Period

- a) Benefits under Heart cover will be payable only if the Life Assured survives for a period of 7 days from the date of diagnosis of any of the listed conditions under Heart cover.
- b) There is no survival period for Cancer cover.

11) Exclusions for listed conditions:

In addition to the condition specific exclusions mentioned in the definition of listed conditions, the following exclusions shall apply to the listed conditions of Cancer cover and Heart cover:



- a) Pre-Existing Diseases are not covered. Pre-Existing Disease means any Heart or Cancer condition (primary or metastatic); pre-cancerous condition or related condition(s) for which the insured had signs or symptoms, and/or was diagnosed, and/or for which medical advice / treatment was received within 48 months prior to the first policy issued by the insurer and renewed continuously thereafter.
- b) Any investigation or treatment for any Illness, disorder, complication or ailment arising out of or connected with the pre-existing Illness shall be considered part of that pre-existing illness.
- c) No benefits will be payable for any condition(s) which is a direct or indirect result of any pre-existing conditions unless Life Assured has disclosed the same at the time of proposal or date of revival whichever is later and the Company has accepted the same.
- d) Any covered event or its signs or symptoms having occurred within the waiting period.
- e) Existence of any Sexually transmitted diseases, Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS) and its related complications.
- f) Self-inflicted injuries, suicide, insanity, and deliberate participation of the Life Assured in an illegal or criminal act with criminal intent.
- g) Use of intoxicating drugs / alcohol / solvent, taking of drugs except under the direction of a medical practitioner.
- h) Radioactive contamination due to nuclear accident.
- i) Any illness due to a congenital defect or disease which has manifested or was diagnosed before the Insured attains aged 17.



12) Exclusion for Hospital Benefit:

In addition to the exclusions of listed conditions mentioned above, following exclusions will be applicable to Hospital Benefit:

- a) Any treatment of a donor for the replacement of an organ.
- b) Ayurvedic, Homeopathy, Unani, Yoga and naturopathy, Siddha, reflexology, acupuncture, bone-setting, herbalist treatment, hypnotism, rolfing, massage therapy, aroma therapy or any other treatments other than Allopathy / western medicines.

13) Free look period: If you are not satisfied with the terms and conditions of the policy, please return the policy document to the Company for cancellation within

- >> 15 days from the date you received it, if your policy is not purchased through Distance marketing
- 30 days from the date you received it, if your policy is purchased through Distance marketing.

On cancellation of the policy during the free look period, we will return the premium subject to the deduction of:

- a) Stamp duty under the policy,
- b) Expenses borne by the Company on medical examination, if any

c) Proportionate risk premium for the period of cover.

The policy shall terminate on payment of this amount and all rights, benefits and interests under this policy will stand extinguished.



14) Tax benefits:

Tax benefits under the policy are subject to conditions u/s 80D of the Income Tax Act, 1961. Indirect taxes and applicable cesses will be charged extra over the premium amount as per the applicable rates. Tax laws are subject to amendments from time to time.

15) Grace period:

A grace period for payment of premium of 15 days applies for monthly premium payment mode and 30 days for other modes of premium payment. If the premium is not paid within the grace period, the policy shall lapse and cover will cease.

16) Premium discontinuance:

If the premium is not paid either on the premium due date or within the grace period, all benefits under this policy will cease.

17) Policy revival: A policy, which has lapsed for non-payment of premium may be revived subject to the following conditions:

- No benefit is payable for an event which occurred or symptoms of which first occurred or were first diagnosed during the period when policy was in lapsed condition.
- The application for revival is made within 2 years from the due date of the first unpaid premium and before the termination date of the policy. Revival will be based on the prevailing Board approved underwriting policy.
- A waiting period of 3 months will be applicable for any revivals after 3 months from the due date of the first unpaid premium.

- » No waiting period will be applicable for any revival within 3 months of the due date of the first unpaid premium.
- The policyholder furnishes, at his own expense, satisfactory evidence of health of the Life Assured as required by the prevailing Board approved underwriting policy.
- The arrears of premiums together with interest at such rate as the Company may charge for late payment of premiums are paid.

The revival of the policy may be on terms different from those applicable to the policy before premiums were discontinued.

The Company reserves the right to refuse to re-instate the policy. The revival will take effect only if it is specifically communicated by the Company to the Policyholder.

Any change in revival conditions will be subject to prior approval from IRDAI and will be disclosed to policyholders.

18) The Company will not provide loans under this policy.

19) Premium Guarantee:

The premiums are guaranteed for a block of three (3) years after which it can be revised with prior approval of IRDAI. Premiums, if and when revised, will be guaranteed for a subsequent block of three (3) years. We will inform you about the premium revision, if any, at least 3 months in advance.

The revision in premiums, shall not be based on any individual policy claim experience.

For Single Pay policies, the premium is guaranteed for the entire policy term.



20) Modal loadings:

Loadings for various modes of premium payment are given below

Mode of Premium Payment	Loading (as a % of Premium)
Monthly	6.0%
Semi-Annual	3.5%
Annual	NA

21) Nomination:

Nomination in the Policy will be governed by Section 39 of the Insurance Act, 1938, as amended from time to time. For more details on this section, please refer to our website.

22) Assignment:

Assignment in the policy will be governed by Section 38 of the Insurance Act, 1938, as amended from time to time. For more details on this section, please refer to our website.

23) Section 41:

In accordance with Section 41 of the Insurance Act, 1938, as amended from time to time, 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 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 prospectuses or tables of the insurer.

Provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.

Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

24) We shall terminate the policy for Non-Disclosure or Misrepresentation or Dishonest or Fraudulent claims, without refunding the premiums.

25) For further details, please refer to the policy document and the benefit illustration.

Disclaimers:

Non-medical limits are applicable on a total sum assured of Rupees 25lakh under the Heart Cover and Rupees 50lakh under the Cancer Cover as per the Company's underwriting policy

The premium amounts mentioned for SP option is inclusive of all charges and taxes, the customer is not required to pay anything over and above the premium amounts mentioned above

A lump sum is paid out on diagnosis of any of the listed conditions. This payout is based on the level of the condition. In any case, the total payout in the policy cannot exceed 100% of the Sum Assured of the cover selected. Please refer to the sales brochure to know about the payouts at different level of condition.

Under the Income Benefit, the Sum Assured has to be chosen at inception of the plan. An amount equal to 1% of the Sum Assured chosen at inception will be paid to the policyholder each month, for a period of 5 years upon a valid claim under any of the listed Major conditions. Where the Cancer cover and Heart cover are taken together, pay out under Income Benefit will be triggered for only that cover for which a claim of Major condition is registered and all Benefits through other cover remains unaffected.

In the Increasing Cover Benefit, the Sum Assured chosen at inception increases by 10% simple interest on each policy anniversary, for every claim free year. The maximum Sum Assured under the cover will be capped at 200% of the Sum Assured chosen at inception. This increase in Sum Assured will stop on occurrence of first claim under the cover. Where Cancer cover and Heart cover are chosen together, the Sums Assured for both the covers increase by 10% simple interest on each policy anniversary, for every claim free year. The maximum sum assured will be capped at 200% of the Sum Assured chosen at inception for each type of cover. In case of occurrence of first claim under any one type of cover, the increase in Sum Assured will stop for that cover type and Increasing Cover Benefit will continue for the other type of cover, for which no claim has occurred

Tax benefits under the policy are subject to conditions u/s 80D of the Income Tax Act, 1961. Goods and Services Tax and Cesses, if any, will be charged extra as per prevailing rates.

Tax laws are subject to amendments from time to time ICICI Pru Heart/Cancer Protect: UIN 105N154V01.

ICICI Prudential Life Insurance Company Limited. IRDAI Regn No. 105. CIN:

L66010MH2000PLC127837

ICICI Prudential Life Insurance Company Limited. Registered Address:- ICICI PruLife Towers, 1089, Appasaheb Marathe Marg, Prabhadevi, Mumbai-400025.

For more details on the risk factors, terms and conditions, please read the sales brochure carefully before concluding a sale. Call us on 1-860-266-7766 (10am-7pm, Monday to Saturday, except national holidays and valid only for calls made from India). For enquires related to new policies purchased online, please call us on 1-860-266-7766 and select option 4 on our Interactive Voice System. Trade Logo displayed above belongs to ICICI Bank Ltd & Prudential IP services Ltd and used by ICICI Prudential Life Insurance Company Ltd under license. Tax benefits under the policy are subject to conditions under Sec. 80C, 80D and Sec 10(10D) of the Income Tax Act, 1961. Service tax and applicable Cesses will be charged extra as per prevailing rates. Tax laws are subject to amendments from time to time.

Advt. No.: OTH/II/0066/2017-18

Beware of spurious phone calls and fictitious/ fraudulent offers

IRDAI clarifies to public that

IRDAI or its officials do not involve in activities like sale of any kind of insurance or financial products nor invest premiums.

IRDAI does not announce any bonus. Public receiving such phone calls are requested to lodge a police complaint along with details of phone call, number.