

Get a **win-win** plan to protect your world.

**Life
Cover**

**Health
Cover**



A combi product with both health and life protection benefits to secure you and your family

You strive to provide comfort, happiness, and security to your family and want your and your family's health & future to be secured.

To assist you, ICICI Lombard General Insurance Co. Ltd. & ICICI Prudential Life Insurance Co. Ltd. have come together to bring you iShield, an affordable combi product with dual benefits of health & life insurance which helps provide a safety net for you and your family so that you can lead a comfortable life without any worries.

In the event of life assured's unfortunate demise, the life insurance cover can be given to the nominee in the form of lump sum, income or increasing income, basis the payout option chosen at policy inception. The premiums vary basis the payout option chosen.

Key features

Health insurance

Health insurance benefits offered are:



Cashless Hospitalization at any of our network providers/ hospitals. A list of these hospitals/ providers will be sent to you along with Your Policy.



Guaranteed cumulative bonus⁴ (GCB) for every no claim year



Pre and post hospitalization¹ medical expenses covered



Complimentary Health Check-up⁵: we will cover the cost of health checkup on cashless basis as per plan eligibility



Medical expenses for day care² treatment undertaken as in-patient in a Hospital for continuous period of less than 24 hours.



Claim Service Guarantee⁵



Restore³ Benefit: 100% of the base Sum Insured shall be made available even in case of partial utilization of Sum Insured for hospitalization due to any illness for same person.



Tax* deduction: You can avail tax deduction on premiums paid under Health sections of this Policy, as per provisions of section 80D of the Income Tax Act, 1961 and amendments made thereunder.

& many more.

Terms and Conditions apply.

Life insurance

Life insurance benefits offered are:



Life cover⁶ till the age of 85/99 years of age



Need-based benefit payout: Choose to receive the benefit amount as a lump sum or as monthly income for 10 years or a combination of both



Waiver of future premiums in case of permanent⁷ disability due to an accident



Flexibility to pay premiums once, for a limited period or throughout the policy term



Terminal illness⁸ cover



Tax* benefits may be available on premiums paid and benefits received as per the prevailing tax laws



Special premiums rates for non-tobacco users

Eligibility criteria**

Eligibility criteria	Health insurance	Life insurance	
		Premium Payment Term	Minimum/ Maximum Policy Term
Min. age at entry	Individual: 6 years Floater: 91 days	18 years	
Max. age at entry	Individual: 60 years for adult and 25 years (for dependent children)	60 years	
Policy term	1 year	Equal to policy term	5 years / 85 years less age at entry
			Whole Life (99 years less age at entry)
Mode of premium payment	Single (on a renewable basis)	Yearly	

Eligibility criteria	Health insurance	Life insurance
Min. age at maturity	Lifelong renewable plan	23 years
Max. age at maturity		99 years (Whole life) 85 years (all others)
Min. Sum Assured	₹5,00,000	₹50,00,000
Max. Sum Assured	₹20,00,000	No limit
No. of lives covered	Maximum 5 members can be covered in a single policy^	1

^You can avail a floater cover and get Your immediate family covered for the same sum insured under a single Policy by paying one premium amount. Any individual between 91 days and 5 years of age can be covered under the Policy provided either parent is getting insured under this Policy.

**Eligibility for both Health Insurance Cover and Life Insurance Cover shall be met in order to avail the policy.

Premium calculation (applicable for Health Product):

In a family floater policy, the age of the eldest member will be considered while computing premium for all the members covered under the family floater. Other factors determining premium are addition/deletion of any optional covers, change in policy conditions such as tenure, increase or decrease in sum insured opted for and change in any tax laws by the government and health status of the individual being insured.

Sample illustration

Let's understand 'iShield' through an illustration

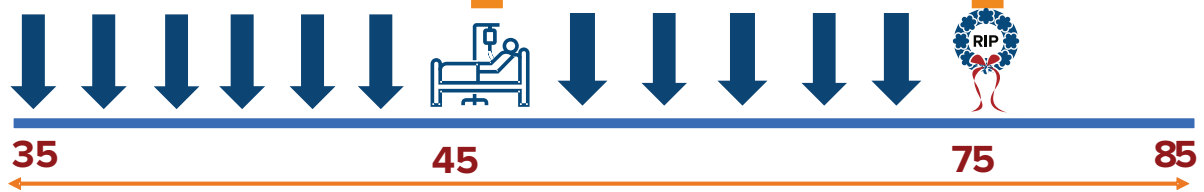
Mr. Amar, 35 year old healthy male chooses iShield with:

- Life cover of ₹1Cr till the age of 85 years
- Health cover of ₹20L

Mr. Amar gets hospitalized due to a sickness. Hospitalization expenses up to 20L are reimbursed.

On his unfortunate demise at the age of 75, his nominee is given ₹1Cr as lump sum.

Pay ₹38,100 per annum regularly



Goal Protection with Life cover & health cover

Premiums are exclusive of taxes.

Hospitalisation expenses up to ₹20 Lakh are covered

Health premiums are renewable every year.

Disclaimers

1. This benefit covers relevant medical expenses incurred during a period up to the number of days as specified in the Schedule of benefits forming part of this Policy, prior to hospitalization or day care treatment for treatment of Disease, Illness contracted or Injury sustained for which the Insured / Insured Person was hospitalized, or after discharge from Hospital / day care treatment for continuous and follow up treatment of the Disease, Illness contracted or Injury sustained for which the Insured/Insured Person was hospitalized, giving rise to an admissible claim under this Policy. This benefit is a part of benefit Section Inpatient hospitalization and is limited to the available Sum Insured under Section Inpatient hospitalization. Pre-hospitalization Medical Expenses & Post-hospitalization Medical Expenses can be claimed as reimbursement only.
2. This benefit covers hospitalization expenses towards medical treatment, and/or day care procedure/ treatment/ surgery incurred by the Insured / Insured Person which is undertaken under General or Local Anesthesia in a Hospital/day care centre (where 24 hours of hospitalization is not required due to technologically advanced treatment) which shall be payable. The benefit under this Section is limited to the available Sum Insured under 'In patient treatment' of this Policy as mentioned in the Schedule to this Policy.

3. In case of a situation where the Sum Insured and Guaranteed Cumulative bonus (GCB) are exhausted due to claims made and paid during the Policy Year, and the Insured/Insured Persons have to, incur any hospitalization expenses due to any Accident/ Disease/ Illness / Injury for which a valid claim is admissible under the Policy, then the Sum Insured shall be regained and called Regained Sum Insured which is equal to 100% of SI for the particular Policy year for all members in the Policy, provided that;

- The Regained Sum Insured will be enforceable only after the first claim during the policy year. The regain benefit will be triggered upon partial or full utilization of Sum Insured. The Regained Sum Insured can be used for claims made by the Insured / Insured Person in respect of the benefits stated in Section 2. Hence making the total Sum Insured available as SI+GCB+Regain – (minus) 1st Claim
- The Regained Sum Insured shall be available for any Accident / Disease / Illness / Injury or any related Accident / Disease / Illness/ Injury for which a Claim has already been admitted partially or fully for that Insured / Insured person during that Policy Year.
- The Regain Sum Insured will only be allowed once during a Policy Year;
- Regain of Sum Insured is not applicable for Optional benefits.

If the Regain Sum Insured is not utilized in a Policy Year, it shall not be carried forward to any subsequent Policy Year.

4. Guaranteed Cumulative Bonus will be provided on the expiring or renewed Policy Sum Insured, whichever is lower, provided that the Policy is renewed continuously. The sub-limits applicable to various benefits will remain the same and shall not increase proportionately with the increase in Guaranteed Cumulative Bonus. Guaranteed Cumulative Bonus will be calculated on the basis of Sum Insured of the last completed Policy Year. This will not affect the Sum Insured of the Policy. Guaranteed Cumulative Bonus will be available only for base cover benefits. Regardless of value of Guaranteed Cumulative Bonus accrued, once accrued Guaranteed Cumulative Bonus shall remain guaranteed for the life (i.e. will not get reduced on subsequent renewals) and shall not get reduced in case of a claim irrespective of value of Guaranteed Cumulative Bonus accrued/ Maximum value of Guaranteed Cumulative Bonus that can be accrued is 100% of expiring or renewed policy sum insured, whichever is lower.
5. The Company will cover the cost of health checkup on cashless basis as per plan eligibility as defined in the Policy schedule. Only Insured / Insured Person who has attained minimum age of 18 years at the time of first policy/Renewal shall be eligible for a health check-up.

***We provide You Claim Service Guarantee as follows**

a) For Reimbursement Claims: We shall make the payment

of admissible claim (as per terms & conditions of Policy) OR communicate non admissibility of claim within 14 days after You submit complete set of documents & information in respect of the claim. In case We fail to make the payment of admissible claim or to communicate non admissibility of claim within this time period, We shall pay 2% interest over and above the rate defined as per IRDAI (Protection of Policyholder's Interest) Regulations 2017.

b) For Cashless Claims: If You notify pre authorization request for cashless facility through any of Our empanelled network hospitals along with complete set of documents & information, We will respond within 2 hours of the actual receipt of such pre authorization request with:

1. Approval, or
2. Rejection, or
3. Query seeking further information

In case the request is for enhancement, i.e. request for increase in the amount already authorized, We will respond to it within 2 hours.

In case of delay in response by Us beyond the time period as stated above for cashless claims, We shall be liable to pay ₹1,000 to You. Our maximum liability in respect of a single Hospitalisation shall, at no time exceed ₹1,000. If You are not eligible for 'Claim Service Guarantee' for the reasons stated in the policy conditions, We should inform the same to You, within the 14 days for a) and within 2 hours for b) as specified above.

*Tax deduction under the policy are subject to prevailing conditions and provisions of the Income Tax Act, 1961. Tax laws are subject to amendments made thereto from time to time. Goods and Services Tax and Cesses, if any will be charged extra as per prevailing rates. Please consult your tax advisor for details, before acting on above.

6. Life cover is the benefit payable on death of the Life Assured during the policy term.
7. **Permanent Disability:** On diagnosis of Permanent Disability (PD) due to an accident, the future premiums under your policy for all benefits are waived. To know more about definitions, terms & conditions applicable for permanent disability due to accident, kindly refer sales brochure of ICICI Pru iProtect Smart.
8. **Terminal Illness:** A Life Assured shall be regarded as Terminally Ill only if that Life Assured is diagnosed as suffering from a condition which, in the opinion of two independent medical practitioners' specializing in treatment of such illness, is highly likely to lead to death within 6 months. The terminal illness must be diagnosed and confirmed by medical practitioners' registered with the Indian Medical Association and approved by the Company. The Company reserves the right for independent assessment.



This advertisement is designed for Combi Product named: iShield, UIN: ICIHLP24028V012324. The product is jointly offered by "ICICI Lombard General Insurance Company Limited" and "ICICI Prudential Life Insurance Company Limited" which offers the combination of a Life Insurance cover offered by ICICI Prudential Life Insurance Company Limited and a Health Insurance cover offered by ICICI Lombard General Insurance Company Limited. The risks of this 'Combi Product' are distinct and are assumed / accepted by respective insurance companies. The liability to settle the claim vests with respective insurers, i.e., for health insurance benefits "ICICI Lombard General Insurance Company Limited" and for life insurance benefits "ICICI Prudential Life Insurance Company Limited. ICICI Prudential Life Insurance Co. Ltd. All rights reserved. Registered with Insurance Regulatory & Development Authority of India (IRDAI) as Life Insurance Company. Regn. No. 105. CIN: L66010MH2000PLC127837. Reg. Off.: ICICI PruLife Towers, 1089 Appasaheb Marathe Marg, Prabhadevi, Mumbai 400025. Tel.: 40391600. Customer helpline number - 1860 266 7766. Timings – 10:00 A.M. to 7:00 P.M., Monday to Saturday (except national holidays). Member of the Life Insurance Council. For more details on the risk factors, term and conditions please read the product brochure/policy wording carefully before concluding the sale. Trade Logo displayed above belongs to ICICI Bank Ltd & Prudential IP services Ltd and used by ICICI Prudential Life Insurance Company Ltd under license.

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IRDAI is not involved in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.