



Lock away your diabetic complications.

Unlock diabetes management.

Health
Solutions

Diabetes does change life forever. Right from what you eat to what you do, your entire lifestyle takes on a different shape. Further, diabetes if not managed, leads to serious complications like heart disease, kidney failure, adult blindness and foot amputations. It has been proven that about 73% of diabetics suffer from high blood pressure, 60% of lower limb amputations occur in people with diabetes and 65% diabetic deaths occur due to heart disease or stroke*.

These diabetes related complications can seriously impact your finances too. It is estimated that 80-90% of the costs diabetics face are related to the treatment of complications as opposed to the costs for daily medication or insulin®. To compound this situation, most conventional medical insurance policies do not cover a diabetic for all such expenses.

Keeping this in mind, ICICI Prudential Life Insurance presents to you **ICICI Pru Diabetes Care Active**, a long term insurance policy created exclusively for Type II diabetics and pre-diabetics. This policy offers you long term (upto 20 years) control over diabetes through a specially designed Wellness Programme. This includes regular checkups, expert advice and several other tools to help you manage your diabetes better. Further, it aims to encourage, enable & offer you incentives to manage your diabetes by reducing premiums on good management. It also provides you financial support through lump-sum benefit for 7 critical illnesses that may arise due to diabetes.

Key benefits of ICICI Pru Diabetes Care Active

- A comprehensive wellness programme which includes:
 - a) Regular medical testing and doctor consultation as per defined protocol
 - b) Support through online tools
- Reduced premiums if you show good control over your diabetes
- Payment of lumpsum amount on diagnosis of 7 critical illnesses
- Long term coverage upto 65 years of age
- Tax benefits under section 80D of the Income Tax Act, 1961¹¹

Benefits in detail

1. Wellness Programme

Managing your diabetes is the key to staying healthy. To enable you to regularly monitor your health and take necessary care, the policy provides for a wellness programme, which is a package of diagnostics and consultations that helps you manage diabetes. In this, you have to

undergo checkups as per a defined protocol, absolutely FREE. This protocol is described below and would be applicable in each policy year.

Period	Test Description
6th month of every policy year after issue of the policy	HbA1c
	Blood Pressure & Pulse rate
Annual Check up (except in the last policy year) ⁵⁵	HbA1c
	Blood Pressure & Pulse rate
	ECG
	Lipid Profile
	Serum Creatinine
	Routine Urine Analysis
	Consultation with an empanelled doctor

⁵⁵ The annual check-up would however not be provided for in the last policy year as it would coincide with the end of the policy term.

2. Diabetes Coach

Aren't there times when you have wished for someone who could help you lead a healthy life? We present to you-Diabetes Coach!

What does a Diabetes Coach do?

You will be assigned a Diabetes Coach who will facilitate your wellness programme under our policy through:

- Diabetes education
- Goal setting
- Diet and fitness guidelines for goal achievement
- Analysis & interpretation of your Wellness Programme test results
- Progress tracking and reminders through periodic interactions

Diabetes Coach Program Structure		
Module	Frequency	
Diet & Fitness	Every 2 weeks for first 3 months	Every month thereafter
Goal Setting	Once in 6 months	
Reminder for testing	Once in 6 months	
Test Results Analysis	Once in 6 months	

3. Improving health, reducing premiums

With our Diabetes Control Index (DCI), we ensure effective control of your diabetic condition. DCI involves the use of key factors from your regular tests and is an overall indicator of your diabetes control. Therefore, a reduction in DCI ensures a reduction in your base premiums in the following year (refer to table below).

	Age at entry		
	25-35 years	36-50 years	51-60 years
Premium Reduction - Level 1	7.50%	10%	12.50%
Premium Reduction - Level 2	10%	15%	20%

However, if your Diabetes Control Index increases, you may be required to pay a higher premium on your base premium for the following year, as per table alongside.

	Age at entry		
	25-35 years	36-50 years	51-60 years
Higher premium - Level 1	10%	15%	17.50%
Higher premium - Level 2	20%	30%	37.50%

4. Financial Support

We know that when faced with a critical illness, money matters should be the last thing on your mind. ICICI Pru Diabetes Care Active covers you upto 65 years of age with 3 Sum Assured (SA) options - Rs. 3 lakh, Rs. 5 lakh or Rs. 10 lakh.

The seven critical illnesses covered in the policy are:

- Angioplasty[#]
- Cancer
- Coronary Artery Bypass Graft / Surgery (CABG)
- End stage renal failure
- Heart attack
- Major organ transplant (as a recipient)
- Stroke

The Sum Assured will be paid as per the table shown below:

Time of diagnosis	Applicable benefit amount
First 6 months of policy	Return of premiums paid till date
6-12 months	50% of the Sum Assured (SA) (25% of SA for angioplasty) [§]
After 1 year	100% of the Sum Assured (SA) (50% of SA for angioplasty) [§]

[#]ICICI Pru Diabetes Care Active will pay the full applicable Sum Assured on diagnosis of six critical illnesses and 50% of the applicable Sum Assured on diagnosis of Angioplasty. After Angioplasty claim, 50% of the cover will continue for the remaining critical illnesses.

[§]The claim is payable only on survival for 10 days from the date of diagnosis of the critical illness.

The benefit amount is paid irrespective of your expenses. What's more, we do not ask for any original medical or other bills. This helps you meet the cost of treatment and also to take care of additional expenses arising out of an illness.

5. Rider Options

You can further enhance your cover with optional riders, to enjoy additional protection at a nominal extra cost, as given below:

a. Diabetes Enhanced Benefit Rider (DEBR)

This rider gives you an additional procedure based cover for:

- Limb Amputation due to diabetic complications
- LASER treatment for Diabetic Retinopathy

Time of Diagnosis	Diabetes Enhanced Benefit Rider
First 6 months of policy	Return of the rider premiums paid till date and policy terminates
6-12 months	50% of the rider Sum Assured, which is 5% of the base plan Sum Assured is payable and rider shall terminate thereafter
After 1 year	100% of the rider Sum Assured, which is 10% of the base plan Sum Assured is payable and rider shall terminate thereafter

b. Death Benefit Rider (DBR)

To provide complete protection to your family, we offer you the

optional Death Benefit Rider (DBR) which pays out 100% of the applicable Sum Assured¹⁴.

Good control of your health (as indicated by a reduction in DCI) would entitle you to a reduction in your rider premiums as shown below.

	Reduction in DBR Premium
Premium Reduction - Level 1	20%
Premium Reduction - Level 2	30%

However in case of poor control (as indicated by increase in DCI), you may be charged an additional rider premium as below.

	Increase in DBR Premium
Higher Premium - Level 1	25%
Higher Premium - Level 2	45%

6. Tax Benefit¹¹

The premiums paid under this policy will be eligible for tax benefits under section 80D. Also additional tax benefits can be availed on premium paid for parents. In case you opt for the Death Benefit Rider, this additional rider premium would be eligible for tax benefits under section 80C of the Income Tax Act, 1961.

ICICI Pru Diabetes Care Active at a glance																					
Eligibility Conditions	<ul style="list-style-type: none"> • Type II Diabetes • Pre-Diabetics (Impaired Fasting Glucose - IFG is a condition wherein after overnight fasting the blood glucose values are between 110 & 125 mg/dl. Impaired Glucose Tolerance - IGT is a condition wherein along with IFG, blood glucose values after 2 hours of meals are between 140 & 199 mg/dl.) ^ 																				
Minimum/Maximum Age at Entry	25 - 60 years																				
Policy Term	Lower of 20 years or (65 less age at entry) years																				
Sum Assured Options	Rs. 3 lakhs, Rs. 5 lakhs & Rs. 10 lakhs																				
Maturity Benefit	No maturity benefit at the end of the term																				
Premium Rates	For a Sum Assured of Rs 3 lakhs, the premiums payable for a male are as follows: <table border="1" data-bbox="407 996 1303 1197"> <thead> <tr> <th>Age (Years)</th> <th>Applicable term (Years)</th> <th>Premium (Rs.)</th> <th>Premium with maximum reduction in year 1 (Rs.)</th> </tr> </thead> <tbody> <tr> <td>25</td> <td>20</td> <td>7,236</td> <td>6,513</td> </tr> <tr> <td>35</td> <td>20</td> <td>9,804</td> <td>8,824</td> </tr> <tr> <td>45</td> <td>20</td> <td>14,109</td> <td>11,992</td> </tr> <tr> <td>55</td> <td>10</td> <td>19,231</td> <td>15,385</td> </tr> </tbody> </table>	Age (Years)	Applicable term (Years)	Premium (Rs.)	Premium with maximum reduction in year 1 (Rs.)	25	20	7,236	6,513	35	20	9,804	8,824	45	20	14,109	11,992	55	10	19,231	15,385
Age (Years)	Applicable term (Years)	Premium (Rs.)	Premium with maximum reduction in year 1 (Rs.)																		
25	20	7,236	6,513																		
35	20	9,804	8,824																		
45	20	14,109	11,992																		
55	10	19,231	15,385																		
Premium Payment Modes	Annually, Half yearly, Monthly																				

The premiums shown are exclusive of service tax and education cess¹¹. Premiums are annually reviewable at a portfolio level, after obtaining permission from the authority and giving due notice of the change to the customers .

(^ as per Indian Council of Medical Research guidelines)

Claims process

Our claims process is an easy 3-step process. This will ensure that you get a hassle-free and convenient claims experience.

1. Submit a written notice along with proof of diagnosis of critical illness / surgery, required for the claim.
2. The company verifies the documents and admits the claim.
3. The company pays the entire benefit amount as applicable.

What does ICICI Pru Diabetes Care Active cover	What does ICICI Pru Diabetes Care Active not cover
<p>Financial Cover:</p> <ul style="list-style-type: none">• Lumpsum amount paid on diagnosis of any one of the Critical Illness out of the 7 critical illnesses covered i.e. Heart Attack, Stroke, Bypass Surgery, Major Organ Transplant (as recipient), End Stage Renal Failure, Cancer, and Angioplasty.• Please refer to section, "Description of critical illnesses" for exact coverage.	<p>Financial Cover:</p> <ul style="list-style-type: none">• The policyholder needs to survive beyond 10 days of diagnosis of Critical Illness (CI) to be eligible for a claim payout.• After the lumpsum payout is made for the 1st critical illness, the policy stands terminated (except for angioplasty).
<p>Diagnosis & Testing:</p> <ul style="list-style-type: none">• Regular free testing every 6th month during the policy term.• An annual comprehensive medical checkup will be provided at the end of the each policy year (except in last policy year).• One free consultation with an expert physician every policy year and test results will be available on our website and will also be mailed to you.	<p>Diagnosis & Testing:</p> <ul style="list-style-type: none">• Test results from diagnostic centers or doctors who are not from our empanelled network will not be accepted / will not be reimbursed.• Any additional consultation or tests conducted will not be covered or reimbursed under the plan.• No payment/benefit will be available against tests not done.

Description of Critical Illnesses:

1. Heart Attack

The first occurrence of Heart Attack or Myocardial Infarction which means death of heart muscle, due to inadequate blood supply, that has resulted in all of the following evidence of acute Myocardial Infarction:

- Typical clinical symptoms (for example, characteristic chest pain)
- New characteristic electrocardiographic changes.
- The characteristic rise of cardiac enzymes or Troponins recorded at the following levels or higher;
 - Troponin T > 1.0 ng/ml
 - AccuTnl > 0.5 ng/ml or equivalent threshold with other Troponin I methods.

- The evidence must show a definite acute myocardial infarction.

Exclusions

- Angina
 - Other acute coronary syndromes, for example myocyte necrosis
- Diagnosis must be confirmed by a consultant cardiologist.

2. Stroke

Defined as a cerebrovascular accident or incident producing neurological sequelae of a permanent nature, having lasted not less than three months. Infarction of brain tissue, haemorrhage and embolisation from an extra-cranial source are included. The diagnosis must be based on changes seen in a CT scan or MRI and certified by a neurologist.

Specifically excluded are cerebral symptoms due to transient ischaemic attacks, any reversible ischaemic neurological deficit, vertebrobasilar ischaemia, cerebral symptoms due to migraine, cerebral injury resulting from trauma or hypoxia and vascular disease affecting the eye or optic nerve or vestibular functions.

3. Coronary Artery Bypass Graft/ Surgery (CABG)

The actual undergoing of open heart surgery on the advice of a consultant cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts.

Angiographic evidence to support the necessity of the surgery will be required. Balloon angioplasty, laser or any catheter-based procedures are not covered under CABG.

4. Major Organ Transplant

The receipt of a transplant of

- Human bone marrow using haematopoietic stem cells preceded by total bone marrow ablation; or
- One of the following human organs: heart, lung, liver, kidney, pancreas which resulted from irreversible end stage failure of the relevant organ. Other stem cell transplants are excluded.

5. Kidney/ Renal Failure

End stage renal failure presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis or renal transplant is undertaken. Evidence of end stage kidney disease must be provided and the requirement for dialysis or transplantation must be confirmed by a consultant physician.

6. Cancer

A malignant tumour characterised by the uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis must be histologically confirmed. The term cancer includes leukaemia but the following cancers are excluded

- All tumours which are histologically described as pre-malignant, non-invasive or carcinoma in situ;
- All forms of lymphoma in the presence of any Human Immunodeficiency Virus;
- Kaposi's Sarcoma in the presence of any Human Immunodeficiency Virus;

- Any skin cancer other than invasive malignant melanoma; and
- All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0.
- T1N0M0 Papillary micro-carcinoma of the Thyroid less than 1 cm in diameter.

7. Angioplasty and other Invasive Treatment for Coronary Artery Disease

Means the actual undergoing for the first time of Coronary Artery Balloon Angioplasty, Atherectomy, LASER treatment or the insertion of a stent to correct a narrowing of minimum 60% stenosis, of one or more major Coronary arteries as shown by Angiographic evidence. The re-vascularisation must be considered medically necessary by a consultant Cardiologist. Coronary arteries herein refer only to Left Main Stem, Left Anterior Descending, Circumflex and Right Coronary Artery. Intra Arterial investigative procedures and Diagnostic Angiography are not included.

Medical evidence shall include all of the following (in addition to other standard requirements for a claim):

- Coronary Angiography Report - Pre and post Angioplasty or Other Invasive Treatment as defined above
- Discharge Card of the hospital where the procedure was done

8. Diabetes Enhanced Benefit Rider

- LASER Treatment for Diabetic Retinopathy: The benefit shall be payable on the actual undergoing of LASER treatment for Diabetic Retinopathy. The need to undergo LASER treatment must be established by Fluorescent Fundus Angiography (FFA) report and the certificate from the treating ophthalmologist.
- Limb Amputation due to diabetic complication: The benefit shall be payable on actual amputation of a limb or a part of the limb of the Life Assured as a result of complications of diabetes. The diagnosis, need and treatment, must be confirmed by the treating surgeon with supportive hospital records. The Life Assured shall also be required to submit a post amputation X-ray of the affected limb.
- Exclusions: Any amputation due to accident is not entitled for the above benefit

Terms & Conditions:

1. Written Notice must be given to the company within 60 days of diagnosis / under going surgery.
2. The admission of any claim shall be subject to satisfactory proof that the Life Assured is diagnosed to be suffering from any critical illness /has undergone any treatment specifically stated under the event based pay out , as the company may reasonably require.
3. In the event of any doubt regarding the appropriateness or correctness of the diagnosis, the company shall have the right to call for an examination of the Life Assured on the evidence used in arriving at such diagnosis, by a Medical Specialist appointed by the company and the opinion of such Specialist as to such diagnosis shall be considered binding on both the Life Assured and the company.
4. If due to any reason the application under ICICI Pru Diabetes care Active does not get converted into policy, then the cost of medical tests done shall be borne by the company.
5. There will be no restriction on travel within India. However for travel outside India, prior approval of the company should be sought to avail the benefit of wellness programme.
6. Reinstatement: The policy can be revived upto 1 year from the date of lapsation either by giving a simple declaration of health or by undergoing the applicable medical test, if required, and by paying the applicable interest and arrears. No waiting period will be applicable after revival of the policy.
7. Free Look period: A period of 15 days is available to review the policy. If the terms and conditions of the policy are not acceptable to the Life Assured, the Life Assured should return the policy. The company will then return the premiums paid by the Policyholder after deduction of proportionate premium for the period of cover, insurance stamp duty on policy and any expenses borne by the company on the medicals.
8. Modal rebate: There will be an annual rebate of 2% on annual premium payment mode. In case of monthly mode of payment, 5% extra will be charged.
9. Section 41: In accordance to the Section 41 of the Insurance Act,1938, No person shall allow or offer to allow, directly or indirectly, as an inducement to any person to take out 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 orrenewing 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 and, any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.
10. In accordance to the Section 45 of the Insurance Act,1938, no policy of life insurance shall after the expiry of two years from the date on which it was effected, be called in question by an insurer on the ground that a statement made in the proposal of insurance or any report of a medical officer, or a referee, or friend of the insured, or in any other document leading to the issue of the policy, was inaccurate or false, unless the insurer shows that such statements was on material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the policyholder and that the policyholder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose.
11. Tax benefits under the policy are subject to conditions under Section 80D of the Income Tax Act, 1961, including premium payment in any mode other than cash on the health of self, spouse, dependent children and parents out of income chargeable to tax. Service tax and education cess will be charged extra as per applicable rates. The tax laws are subject to amendments from time to time.
12. On lapsation / surrender of this policy, no benefit is applicable.
13. In case of Angioplasty claim under base ICICI Pru Diabetes care Active, the rider will continue for the 50% of the sum assured for the death benefit and future premiums will reduce proportionately from the next policy anniversary. The policyholder will continue to be eligible for the complete wellness programme and reduced premiums/higher premiums as applicable. However, subsequent premium reductions / increase will apply to this reduced premium.
14. The Sum Assured will be payable on death any time during the policy term before a Critical Illness payment. There is no Waiting period for death. The levels of premium reduction/ higher premium as explained above are annually reviewable subject to IRDA approval. The company will give notice in writing about the change to the policyholder. The policy shall lapse if the policyholder does not accept such changes.
15. A grace period of not more than 30 days where the mode of payment of premium is other than monthly and not more than 15 days in case of monthly mode is allowed.

Exclusions

- a) Individuals suffering from Type I Diabetes are excluded
- b) For critical illness payout no benefits shall be paid for the following services, conditions / tests / treatments
 1. Pre-existing illnesses unless stated in the proposal form and accepted by the company, where a "Pre-existing Illness" means a condition for which prior to the receipt of proposal for this policy or prior to the date of reinstatement of this Policy, the Life Assured had signs or symptoms of an illness or bodily injury which would have caused any ordinary prudent person to seek treatment, diagnosis or care or medical advice or treatment was recommended by or received from a Physician or the Life Assured has undergone medical tests or investigations. Any such condition or any illness, complication or ailment arising out of or connected to the condition other than Type 2 Diabetes Mellitus or IFG or IGT, shall be considered part of the Pre-existing Illness.
 2. Existence of Acquired Immune Deficiency Syndrome (AIDS) or the presence of any Human Immuno-deficiency Virus (HIV), self inflicted injury, use of intoxicating drugs / alcohol abuse or dependence, failure to follow medical advice, war-whether

declared or not, civil commotion, pregnancy, breach of law.

3. Treatment for injury or illness caused by professional sports, racing of any kind, scuba diving, aerial sports, activities such as hand-gliding, ballooning, deliberate exposure to exceptional danger.
4. Aviation other than as a fare paying passenger in a commercial licensed aircraft (being a multi-engined aircraft).
5. Any treatment of a donor for the replacement of an organ;
6. Ayurvedic, homeopathy, unani, naturopathy, reflexology, acupuncture, bone-setting, herbalist treatment, hypnotism, rolfing, massage therapy, aroma therapy or any other treatments other than allopathy / western medicines.

No benefit is payable on survival of the Assured to the maturity date shown in the policy certificate.
- c) Death Benefit: Applicable in case the customer has opted for the Death Benefit Rider - The death benefit shall not be payable in case the Life Assured whether sane or insane commits suicide within a year from the issue date of the policy. The Premiums paid under this policy will be refunded after deducting the expenses incurred by the company towards the issuance of this policy.

About ICICI Prudential Life Insurance

ICICI Prudential Life Insurance Company Limited, a joint venture between ICICI Bank and Prudential plc. was one of the first companies to commence operations when the insurance industry was opened in year 2000. Since inception, it has written over 7 million policies and has a network of over 1,969 offices, 2,90,000 advisors and 21 bank partners. It is also the only life insurer in India to be assigned AAA (ind) credit rating by Fitch Ratings. The company entered the health insurance business in early 2006 and has since then introduced seven innovative health insurance products.



Have Diabetes? Call our **DIABETES HOTLINE 1800 - 419 - 1000**

(Monday to Friday 10:00 A.M. to 7:00 P.M.)

A dedicated helpline for all your diabetes related queries

Diabetes Hotline and Diabetes Coach are value added initiatives by ICICI Prudential Life Insurance Company Limited. These initiatives are purely voluntary and free of charge. ICICI Prudential Life Insurance Company Limited does not purport to provide advice of any nature. Only general guidelines will be suggested in order to facilitate you to maintain good health. We urge you to consult your family doctor for any medical needs as these guidelines are not medical advice.

Registered Office: ICICI Prudential Life Insurance Company Limited. ICICI PruLife Towers, 1089, Appasaheb Marathe Marg, Prabhadevi, Mumbai 400 025.

To call our Customer Service Toll Free Number 1800-22-2020 from your MTNL or BSNL line. You can Visit us at www.iciciprulife.com

This product brochure is indicative of terms, conditions, warranties and exceptions contained in the insurance policy. For further information please refer to the policy document. Insurance is the subject matter of the solicitation. ©2008, ICICI Prudential Life Insurance Company Limited. Regn No.:105 Diabetes Care Active UIN No.: 105N078V01; DEBR UIN: 105B023V01; DBR UIN: 105B022V01; Form No.: T17; Advt. No.: L/IC/203/2008-09.

Ver No.2 /Diabetes Care Active/JAS/UINK/w.e.f. 1 July 2008.