



NEW INDIA ASSURANCE

दि न्यू इन्डिया एश्योरन्स कंपनी लिमिटेड
The New India Assurance Co. Ltd



केनरा बैंक
भारत सरकार का उपक्रम



Canara Bank

A Government of India Undertaking

Together We Can

NEW INDIA CAN MEDICLAIM

“Secure your tomorrow to have a peaceful today”

Who can take this policy?

This insurance is available to Family consisting of self, spouse and two dependent children and is on FLOATER basis to Employees and Customers of Canara Bank, provided the minimum age of the proposer is 18 years. Policy remains in force till continuous lifelong renewals.

What is the maximum entry age?

Entry age in the policy is 65 years.

What does this policy cover?

- Eligibility – All Account holders of Canara bank
- Entry Age – up to 65 Years
- Premium – Age Band wise
- Floater Coverage (All members of the family as specified under the plan opted covered under one single sum insured)
- Renewal – Lifelong renewal. No upper age limit if renewals done without break.
- Coverage –Rs. 1 Lakh to Rs. 10 Lakh (Floater)
- Cashless facility
- Income Tax benefit under Section 80D

***Main Features:**

- Room, Boarding Expenses as provided by the hospital including Nursing charges, not exceeding 1% of Sum Insured per day.
- Intensive Care Unit (ICU) / Intensive Cardiac Care Unit (ICCU) expenses, not exceeding 2% of the sum insured per day.
- Pre-hospitalization medical charges up to 30 days period.
- Post-hospitalization medical charges up to 60 days period.
- **CATARACT:** Actual or maximum of Rs. 40,000 (inclusive of all charges, excluding service tax), for each eye, whichever is less.
- **AYUSH:** Expenses incurred for Ayurvedic/Homeopathic/Unani Treatment are admissible up to 25% of the sum insured.
- Ambulance charges: 1% of the SI not exceeding Rs. 1000 for any one illness.
- Cash benefit of Rs. 100 per day up to Rs. 1000 to parent during hospitalization of Children below 12 years of age, only if claim is admissible.
- Free Health Check-up – 1% of avg. sum insured not exceeding Rs. 5000 can be availed after 3 claims free policy periods.
- Maternity benefit up to a limit of 5% of the sum insured.
- Waiting Period for Specific Diseases / Ailments / Condition is only one year in this policy.
- Funeral expenses of RS. 1,000/- will be paid under the policy
- Optional personal accident cover.
- Cash Less Claims settlement in Preferred Provider Network Hospitals.
- More than 10,000 tie-up with hospitals across India.
- 200+ Day care Procedures
- Donor Expenses Covered
- Pre-existing Disease cover after 36 months Continuous Insurance.
- Fast claim settlement.

**** The above features are just highlights. Please refer detailed clauses.***

Plans:

Plan Type A:

Max entry age 65 years. Lifetime renewal if enrolled before 65 years / Insured + Spouse + 2 Dependent Children

Plan Type B:

Max entry age 65 years. Lifetime renewal if enrolled before 65 years.

Insured + Spouse + 2 Dependent Children + Parents or Parents-in-law

*Entry age is the highest age of the family.

Personal Accident Cover:

Sum Insured: Account Holder 100% of Medicaid Sum Insured, Spouse 50%, Children above 5 years 20%, Children below 5 years 10%. No personal accident benefit to Parents/Parents-in-law.

No Medical examination will be required before acceptance of proposal.

Hospitalisation shall cover expenses incurred on the donor during organ transplantation to the insured person. The company's liability towards expenses incurred on the donor and the insured recipient shall not exceed the sum insured, of the insured person receiving the organ.

Preferred Provider Network rates: Rates and procedures available in PPN package shall be applicable in case an insured person goes for treatment under any of the above listed procedures. Even if the person does not take treatment in PPN hospital, claims shall be restricted for these procedures as per the PPN rates fixed.

List of Critical illnesses:

1. Cancer of Specified Severity
2. Myocardial Infarction (First Heart attack of specified severity)
3. Open chest CABG
4. Open Heart replacement or repair of Heart valves
5. Coma of specified severity
6. Kidney failure requiring regular dialysis
7. Stroke resulting in permanent symptoms
8. Major organ / bone marrow transplant
9. Permanent paralysis of limbs
10. Motor neurone disease with permanent symptoms
11. Multiple sclerosis with persisting symptoms
12. Angioplasty
13. Benign Brain Tumor
14. Blindness
15. Deafness
16. End Stage Lung Failure
17. End Stage Liver Failure
18. Loss of Speech
19. Loss of Limbs
20. Major Head Trauma
21. Primary (Idiopathic) Pulmonary Hypertension
22. Third Degree Burns

Permanent Exclusions:

Any medical expenses incurred for or arising out of:

- War invasion, Act of foreign enemy, War like operations, nuclear weapons, ionizing radiation, contamination by radio activity, by any nuclear fuel or nuclear waste or from the combustion of nuclear fuel.
- Circumcision, cosmetic or aesthetic treatment, plastic surgery unless required to treat injury or illness.
- Vaccination & Inoculation.
- Cost of braces, equipment or external prosthetic devices, non-durable implants, eyeglasses, Cost of spectacles and contact lenses, hearing aids including cochlear implants, durable medical equipment.
- All types of Dental treatments except arising out of an accident.
- Convalescence, general debility, 'Run-down' condition or rest cure, obesity treatment and its complications, congenital external disease/defects or anomalies, treatment relating to all psychiatric and psychosomatic disorders, infertility, sterility, use of intoxicating drugs/alcohol, use of tobacco leading to cancer.
- Bodily injury or sickness due to wilful or deliberate exposure to danger (except in an attempt to save human life), intentional self-inflicted injury, , attempted suicide, arising out of non-adherence to medical advice.
- Treatment of any Bodily injury sustained whilst or as a result of active participation in any hazardous sports of any kind.
- Treatment of any bodily injury sustained whilst or as a result of participating in any criminal act.
- Sexually transmitted diseases, any condition directly or indirectly caused due to or associated with Human T-Cell Lymphotropic Virus Type III (HTLB-III) or lymphotrophy Associated Virus (LAV) or the Mutants Derivative or Variation Deficiency syndrome or any syndrome or condition of a similar kind commonly referred to as AIDS.
- Diagnosis, X-Ray or Laboratory examination not consistent with or incidental to the diagnosis of positive existence and treatment of any ailment, sickness or injury, for which confinement is required at a hospital.
- Vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending Medical Practitioner.
- Naturopathy Treatment.
- Domiciliary Hospitalization.
- Treatment taken outside India.
- Experimental Treatment, Unproven treatment.
- Change of treatment from one system to another
- Treatment for Age Related Macular Degeneration (ARMD) , treatments such as Rotational Field Quantum Magnetic Resonance (RFQMR), External Counter Pulsation (ECP), Enhanced External Counter Pulsation (EECP), Hyperbaric Oxygen Therapy.

How to avail cashless claim:

Claims are administered through Third Party Administrators (TPA) whose contact appear on the policy document. Insured can opt for cashless or reimbursement facility for their claims.

It is to be noted that, policy holder will be governed by all the terms and conditions of our policy once he/ she opts for our policy.

NIA-CAN MEDICLAIM REVISED PREMIUM wef 01 JUL 2024

NIA-CAN MEDICLAIM POLICY: REVISED PREMIUM RATES

SUM INSURED		PLAN (A) (1+3) (Self+spouse+2 Dep Children)																						
		PREMIUM UP TO 35 YRS					Premium Above 36 to 50 years					Premium Above 51 to 60 years					Premium Above 61 to 80 years							
		With PA Cover		Without PA Cover			With PA Cover		Without PA Cover			With PA Cover		Without PA Cover			With PA Cover		Without PA Cover					
Premiu m	Add: GST- 18%	Total	Premiu m	Add: GST- 18%	Total	Premiu m	Add: GST- 18%	Total	Premiu m	Add: GST- 18%	Total	Premiu m	Add: GST- 18%	Total	Premiu m	Add: GST- 18%	Total	Premiu m	Add: GST- 18%	Total				
1 Lac	6,435	1,158	7,593	6,370	1,147	7,517	8,888	1,600	10,488	8,823	1,588	10,412	12,140	2,185	14,325	12,075	2,174	14,249	16,040	2,887	18,927	15,975	2,876	18,851
2 Lac	8,878	1,598	10,476	8,769	1,578	10,347	14,359	2,585	16,944	14,250	2,565	16,815	18,145	3,266	21,411	18,036	3,246	21,282	29,238	5,263	34,501	29,129	5,243	34,372
3 Lac	9,630	1,733	11,364	9,447	1,701	11,148	19,468	3,504	22,972	19,285	3,471	22,756	25,184	4,533	29,717	25,001	4,500	29,501	36,643	6,596	43,239	36,460	6,563	43,023
5 Lac	11,949	2,151	14,100	11,676	2,102	13,778	24,147	4,346	28,493	23,874	4,297	28,171	33,188	5,974	39,162	32,915	5,925	38,840	44,177	7,952	52,129	43,904	7,903	51,807
8 Lac	15,860	2,855	18,715	15,073	2,713	17,786	31,096	5,597	36,693	30,309	5,456	35,764	38,115	6,861	44,976	37,328	6,719	44,047	55,823	10,048	65,871	55,036	9,906	64,942
10 Lac	20,278	3,650	23,928	18,736	3,372	22,108	34,863	6,275	41,139	33,321	5,998	39,319	44,861	8,075	52,936	43,319	7,797	51,116	65,232	11,742	76,974	63,690	11,464	75,154



		PLAN (B) (1+5)				
		UP TO 80 YEARS		WITHOUT PA COVER		
		WITH PA COVER		Without PA Cover		
Sum Insured	Premium	Add: GST-18%	Total	Premium	Add: GST-18%	Total
1 Lac	22,416	4,035	26,451	22,351	4,023	26,375
2 Lac	34,381	6,189	40,569	34,272	6,169	40,441
3 Lac	48,381	8,709	57,089	48,198	8,676	56,874
5 Lac	62,110	11,180	73,290	61,837	11,131	72,968
8 Lac	73,800	13,284	87,084	73,013	13,142	86,155
10 Lac	98,694	17,765	1,16,459	97,152	17,487	1,14,639

For above 80 Years, loading of 2.5% is applicable for every year. All T & C as per previous expiring policy