

## TATA AIG Health Supercharge FAQs

### 1- What are the different plan options available under TATA AIG Health Supercharge?

TATA AIG Supercharge offers 2 plan options:

- i. Value Plan (For members residing across India)
- ii. Geo Plan (For members residing in Zone B/Zone C in India)

Note- For Zone categorization and details, please refer Policy wordings.

### 2- What is the Room eligibility criteria under TATA AIG Health Supercharge?

Plan	Room Category/Limit
Value Plan	Upto ₹5000 per day
Geo Plan	Single Private Room

However, Shared accommodation, as an optional cover, can be opted by the policyholder under the Geo Plan in lieu of premium discount.

### 3- What is Associated Medical Expenses (AME)? Whether AME is applicable under TATA AIG Health Supercharge?

“Associated Medical Expenses” shall include the applicable nursing charges, operation theatre charges, fees of Medical Practitioner including surgeon/ anesthetist/ specialist within the same Hospital where the Insured Person has been admitted. “Associated Medical Expenses” does not include cost of pharmacy & consumables, cost of implants & medical devices and cost of diagnostics.

If the Insured Person is admitted in a room whose category/room rent is higher than the one that is specified in the Policy Schedule, then the Insured Person shall bear a rate able proportion of the Room Rent and the total Associated Medical Expenses, including surcharge or taxes thereon in the proportion of the ‘difference between the Room Rent actually incurred the Room Rent of the entitled room category/room rent limit’ to ‘the Room Rent actually incurred’

Expenses to be borne by Insured Person =  $\{(Associated\ Medical\ Expenses) \times (Incurred\ Room\ Rent - Eligible\ Room\ Rent^*)\} / Incurred\ Room\ Rent$

\*Eligible room rent means Room rent of the Eligible Room Category or Room Rent limit as per the plan opted

AME is applicable under TATA AIG Health Supercharge, If the Insured Person is admitted in a room whose category/room rent is higher than the one that is specified in the Policy Schedule.

Illustration:

Associated Medical Expenses	₹ 6,000
Eligible Room Rent (Value Plan)	₹ 5,000
Incurred Room Rent	₹ 8,000
<b>Expenses to be borne by Insured Person</b>	<b>₹2,250</b>

<b>Expenses to be borne by Insured Person</b>
$= \{(6,000) \times (8,000 - 5,000^*)\} / 8,000$

#### 4- What is Co-payment?

Co-payment means a cost sharing requirement under a health insurance Policy that provides that the policyholder/insured will bear a specified percentage of the admissible claims amount. A co-payment does not reduce the Sum Insured.

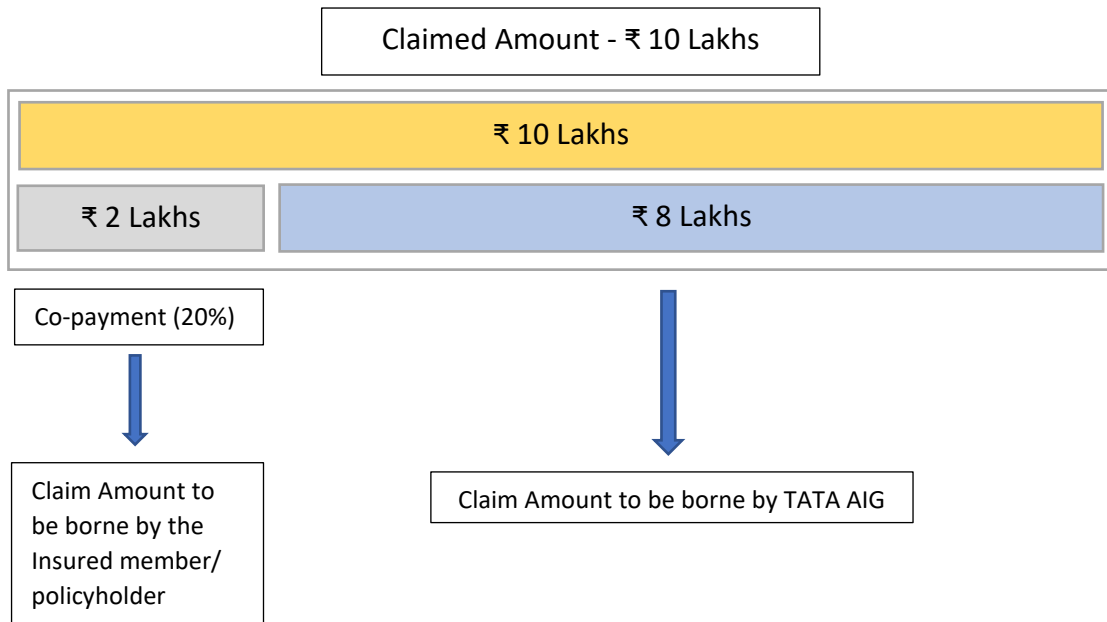
The below Illustration explains the concept of Co-payment. The applicability of Co-payment would be as per the various cost-sharing Co-payment mechanisms offered under TATA AIG Health Supercharge:

##### Year 1:

Insured Members Covered	2
Insured Member 1	28 years
Insured Member 2	39 years
Sum Insured	₹ 10 Lakhs
Co-payment applicable on each claim	20%

##### Claim 1:

Insured Member	Insured Member 1
Claimed Amount	₹ 10 Lakhs
Claim Amount borne by the insured	₹ 2 Lakhs
Claim Amount borne by TATA AIG	₹ 8 Lakhs



**5- Is there any Co-payment applicable under TATA AIG Health Supercharge?**

Yes, there are 3 different types of Co-payment applicable under Tata AIG Supercharge product:

Co-payment	Applicability
Age linked Co-Payment	Value Plan & Geo Plan
Higher Zone Co-Payment	Geo Plan
Out of Our network of Valued Provider – Pan India Co-Payment	Value Plan

**6- What is network of ‘Valued Provider-Pan’ India under TATA AIG Health Supercharge?**

‘Valued Provider - Pan India’ is a specific network of Hospitals, designated as such and mentioned in the Policy Schedule. It consists of a defined list of Hospitals or health care providers enlisted by Us, and/or TPA to provide medical services to an Insured Person by a Cashless Facility. Where the Policyholder has selected Value Plan, the insured member shall be eligible for ‘Valued Provider -Pan India’ wherein Out of Our network of Valued Provider – Pan India Co-Payment shall not be applicable in case the insured member avails treatment in such hospitals.

The updated list of Valued Provider – Pan India is available on Our website ([www.tataaig.com](http://www.tataaig.com))

**7- What is difference between Valued Provider – Pan India and Network Provider under TATA AIG Health Supercharge?**

The “Valued Provider – Pan India” network list is different from Our standard list of “Network Provider”. The standard list of Network Provider shall not be applicable to the Insured Person, if covered under Value Plan. Applicability of the provider is also specified on the Policy Schedule.

Hospital	Applicability
Valued Provider – Pan India	Value Plan
Network Provider	Geo Plan

List of Valued Provider – Pan India will be updated from time to time and will be available on Our website [www.tataaig.com](http://www.tataaig.com)

**8- Can a customer opt for Value Plan and avail treatment outside the network of “Valued Provider-Pan India” under TATA AIG Health Supercharge?**

Yes, a customer opting for Value Plan can avail treatment outside the network of “Valued Provider-Pan India”.

However, If a customer under the Value plan avails treatment outside the network of our “Valued Provider-Pan India “, then a “Out of Our network of Valued Provider – Pan India Co-Payment” will be applicable on each claim resulting from such hospitalization.

**9- What is “Out of Our network of Valued Provider – Pan India Co-Payment” under the Value Plan in TATA AIG Health Supercharge?**

Out of Our network of Valued Provider – Pan India Co-Payment is applicable only in case of Value Plan.

Wherever, Value Plan has been opted and the Insured Person avails treatment outside Our network of “Valued Provider-Pan India”, then a Co-Payment of 30% will be applicable for each such claim resulting from admission of the Insured Person in a Hospital/ Day Care Centre/ AYUSH Hospital.

However, no Co-Payment under this sub section shall be applicable if Hospitalization is for an Injury arising from an Accident.

Illustration (this illustration is specifically to understand Out of Our network of Valued Provider – Pan India Co-Payment applicability) :



Plan Opted	Customer Zone	Zone of Hospitalization	Hospital	Out of Our network of Valued Provider – Pan India Co-Payment Applicable
Value plan	Zone B	Zone A	Valued Provider - Pan India	No
Value plan	Zone C	Zone A	Valued Provider - Pan India	No
Value plan	Zone C	Zone B	Valued Provider - Pan India	No
Value plan	Zone A	Zone A	Network Hospital which is not a part of Valued Provider- Pan India list	30%
Value plan	Zone B	Zone A	Non-Network Hospital	30%

The updated list of Valued Provider – Pan India is available on Our website ([www.tataaig.com](http://www.tataaig.com)).

**10- Whether “Out of Our network of Valued Provider – Pan India Co-Payment” is applicable under the Geo Plan in TATA AIG Health Supercharge?**

No, “Out of Our network of Valued Provider – Pan India Co-Payment” is not applicable under the Geo Plan in TATA AIG Health Supercharge

**11- What is “Higher Zone Co-Payment” under the Geo Plan in TATA AIG Health Supercharge?**

Higher Zone Co-Payment is applicable only in case of Geo Plan.

Wherever, Geo Plan has been opted and the Insured Person(s) undergoes medical treatment at a Hospital/ Day Care Centre/ AYUSH Hospital in Zone A, then an additional Co-Payment of 20% will be applicable on each such claim.

Higher Zone Co-Payment shall be applicable for all claims except for claims for emergency Hospitalization due to Injury arising from an Accident.

Illustration (this illustration is specifically to understand Higher Zone Co-Payment applicability):

Plan Opted	Customer Zone	Zone of Hospitalization	Higher Zone Co-Payment Applicable
Geo plan	Zone B	Zone A	20%
Geo plan	Zone C	Zone A	20%
Geo plan	Zone C	Zone B	No

Zone categorization for Higher Zone Co-Payment under the Geo Plan will be as per Zone definitions as mentioned in the policy wordings.

**12- Whether ‘Higher Zone Co-Payment’ is applicable under the Value Plan in TATA AIG Health Supercharge?**

No, ‘Higher Zone Co-Payment’ is not applicable under the Value Plan in TATA AIG Health Supercharge

### 13- What is Age linked Co-Payment under TATA AIG Health Supercharge?

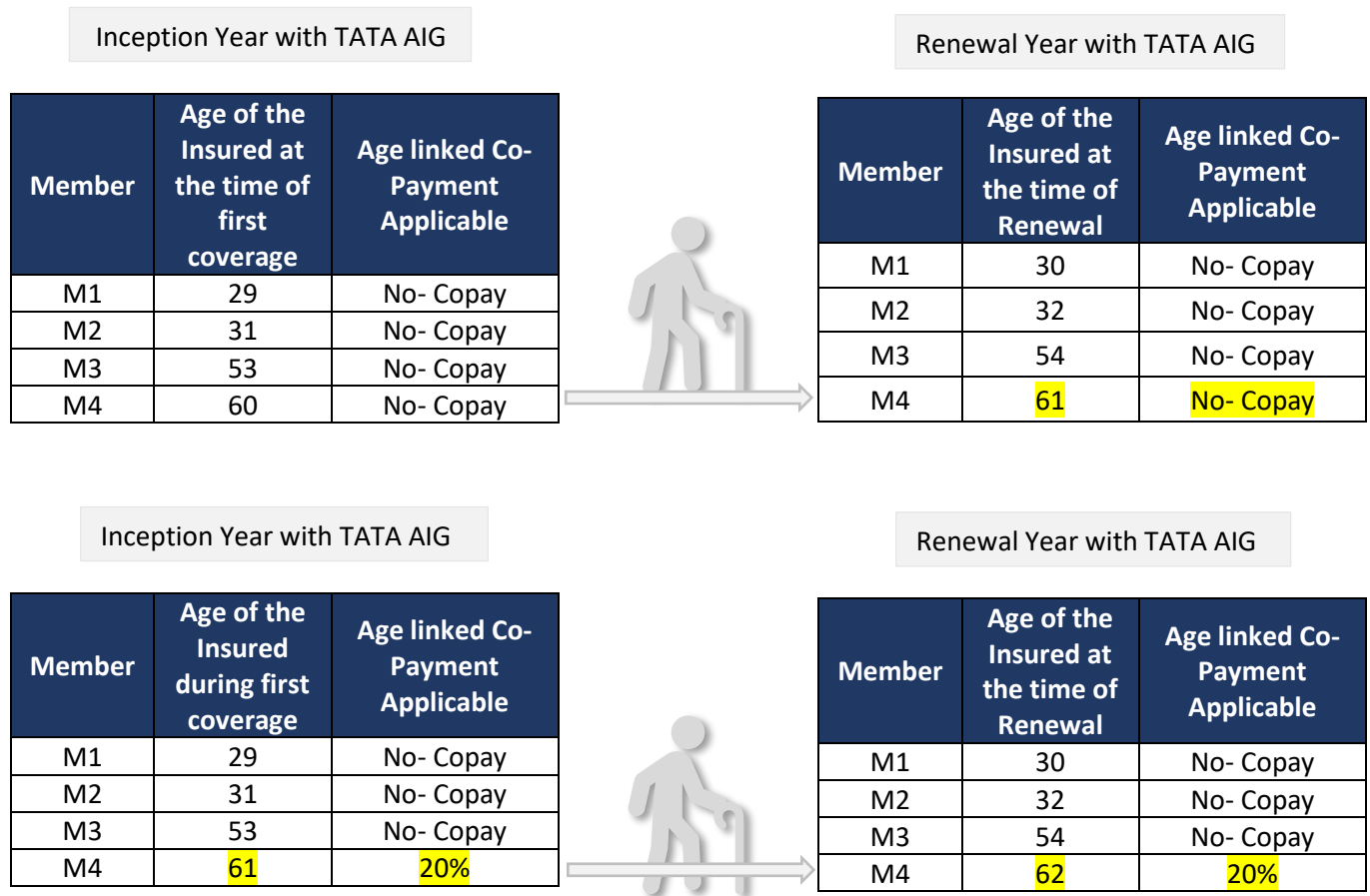
If the entry Age of the Insured Person is 61 years or above at the time of first coverage under this Policy, then such Insured Person shall bear 20% of each admissible claim (over and above any other Co-Payment, if applicable). This shall be applicable even in Portability cases, irrespective of previous coverage.

Age linked Co-Payment is applicable both in case of Value Plan and Geo Plan.

### 14- Is Age linked Co-Payment applicable when age of the insured becomes 61 years or above during the time of renewal under TATA AIG Health Supercharge?

No, the criteria for Age linked Co-Payment is only on the basis of the age of the insured person at the time of first policy coverage.

Illustration (this illustration is specifically to understand Age linked Co-Payment applicability):



Member addition at the time of Renewal

Inception Year with TATA AIG

Member	Age of the Insured during first coverage	Age linked Co-Payment Applicable
M1	29	No- Copay
M2	31	No- Copay
M3	53	No- Copay



Renewal Year with TATA AIG

Member	Age of the Insured at the time of Renewal	Age linked Co-Payment Applicable
M1	30	No- Copay
M2	32	No- Copay
M3	54	No- Copay
M4 (New member addition)	62	20%

**15- What is a Sub-limit under TATA AIG Health Supercharge?**

Sub-limit means a cost sharing requirement under a health insurance Policy in which the insurance company would not be liable to pay any amount in excess of the pre-defined limit.

**16- Are there any Sub-limits for the Value Plan under TATA AIG Health Supercharge?**

Yes, there are mandatory annual Sub-limits applicable for the Value Plan under TATA AIG Health Supercharge.

The following mandatory sub-limits are applicable for the Value plan for Tata AIG Supercharge:

(Ailment/ Surgical Procedure)	Annual Sub limit, as applicable to each Insured Person based on the Sum Insured				
	5 Lacs	7.5 Lacs	10 Lacs	15 Lacs	20 Lacs
Cataract Surgery (per eye)	45,000	60,000	90,000	130,000	175,000
Balloon Sinuplasty/ FESS	30,000	40,000	55,000	85,000	110,000
Oral chemotherapy	85,000	115,000	165,000	250,000	330,000
Immunotherapy- Monoclonal Antibody all forms	140,000	195,000	275,000	415,000	550,000
Robotic surgeries	140,000	195,000	275,000	415,000	550,000
Stem cell therapy for Hematopoietic stem cells for bone marrow transplant for hematological conditions	140,000	195,000	275,000	415,000	550,000
Total Knee Replacement (per knee)	165,000	175,000	180,000	215,000	230,000
Any type of Hernia surgery	70,000	75,000	75,000	95,000	100,000
Any type of Hysterectomy	70,000	75,000	75,000	95,000	100,000

Benign Prostate Hypertrophy	70,000	75,000	75,000	95,000	100,000
Stones of Renal System	70,000	75,000	75,000	95,000	100,000

These Sub-limits are also mentioned in the policy wordings, please refer Table II:  
Mandatory Sub-Limits applicable for Ailment/Surgical Procedure for Value Plan.

**17- Are there any Sub-limits for the Geo Plan for TATA AIG Health Supercharge?**

Yes, there are mandatory annual Sub-limits applicable for the Geo Plan under TATA AIG Health Supercharge.

The following mandatory sub-limits are applicable for the Geo plan for Tata AIG Supercharge:

(Ailment/Surgical Procedure)	Annual Sub limit, as applicable to each Insured Person based on the Sum Insured				
	5 Lacs	7.5 Lacs	10 Lacs	15 Lacs	20 Lacs
Cataract Surgery (per eye)	40,000	56,000	80,000	120,000	160,000
Balloon Sinuplasty/ FESS	25,000	35,000	50,000	75,000	100,000
Oral chemotherapy	75,000	105,000	150,000	225,000	300,000
Immunotherapy- Monoclonal Antibody all forms	125,000	175,000	250,000	375,000	500,000
Robotic surgeries	125,000	175,000	250,000	375,000	500,000
Stem cell therapy for Hematopoietic stem cells for bone marrow transplant for hematological conditions	125,000	175,000	250,000	375,000	500,000

These Sub-limits are also mentioned in the policy wordings, please refer Table I :  
Mandatory Sub-Limits applicable for Ailment/Surgical Procedure for Geo Plan.

**18- What are Voluntary Sub-limits under TATA AIG Health Supercharge?**

In lieu of premium discount opted by the policyholder, the following annual Sub-Limits shall be applicable in addition to the Mandatory Sub-Limits. Our liability for any and all claims related to Hospitalization/ Day Care Treatment (including their associated Pre & Post Hospitalization expenses) arising out of following ailments/Surgical Procedures shall be restricted to the following Sub-Limits subject to availability of Sum Insured and other terms and conditions of the Policy.

The following Voluntary sub-limits are available for the **Geo plan** for TATA AIG Supercharge:

(Ailment/ Surgical Procedure)	Annual Sub limit, as applicable to each Insured Person based on the Sum Insured				
	5 Lacs	7.5 Lacs	10 Lacs	15 Lacs	20 Lacs





Total Knee Replacement (per knee)	150,000	157,500	165,000	195,000	210,000
Any type of Hernia surgery	65,000	68,000	70,000	85,000	90,000
Any type of Hysterectomy	65,000	68,000	70,000	85,000	90,000
Benign Prostate Hypertrophy	65,000	68,000	70,000	85,000	90,000
Stones of Renal System	65,000	68,000	70,000	85,000	90,000
Cerebrovascular & Cardiovascular	250,000	275,000	300,000	325,000	350,000
Cancer	250,000	275,000	300,000	325,000	350,000
Renal Complications & Disorders (excluding Stones of Renal System)	250,000	275,000	300,000	325,000	350,000
Breakage of Bones requiring surgery under general anesthesia	250,000	275,000	300,000	325,000	350,000

The following Voluntary sub-limits are available for the **Value plan** for Tata AIG Supercharge:

(Ailment/ Surgical Procedure)	Annual Sub limit, as applicable to each Insured Person based on the Sum Insured				
	5 Lacs	7.5 Lacs	10 Lacs	15 Lacs	20 Lacs
Cerebrovascular & Cardiovascular	275,000	300,000	330,000	360,000	385,000
Cancer	275,000	300,000	330,000	360,000	385,000
Renal Complications & Disorders (excluding Stones of Renal System)	275,000	300,000	330,000	360,000	385,000
Breakage of Bones requiring surgery under general anesthesia	275,000	300,000	330,000	360,000	385,000

This voluntary Sub-Limit cover, if opted, shall continue for all the subsequent Renewals of the Policy, provided the Policy is renewed with Us without any break.

**19- How is a claim assessed in a scenario where more than one Sub-Limits are applicable under TATA AIG Health Supercharge?**

In case more than one Sub-Limit is applicable to an ailment/ procedure, covered under the Policy, then the highest of applicable Sub-Limits, shall be considered.

**20- What is Aggregate Deductible?**

Aggregate Deductible is an irrevocable cost sharing requirement under this Policy which provides that We will not be liable for a specified amount in aggregate for all claims during the Policy Year.

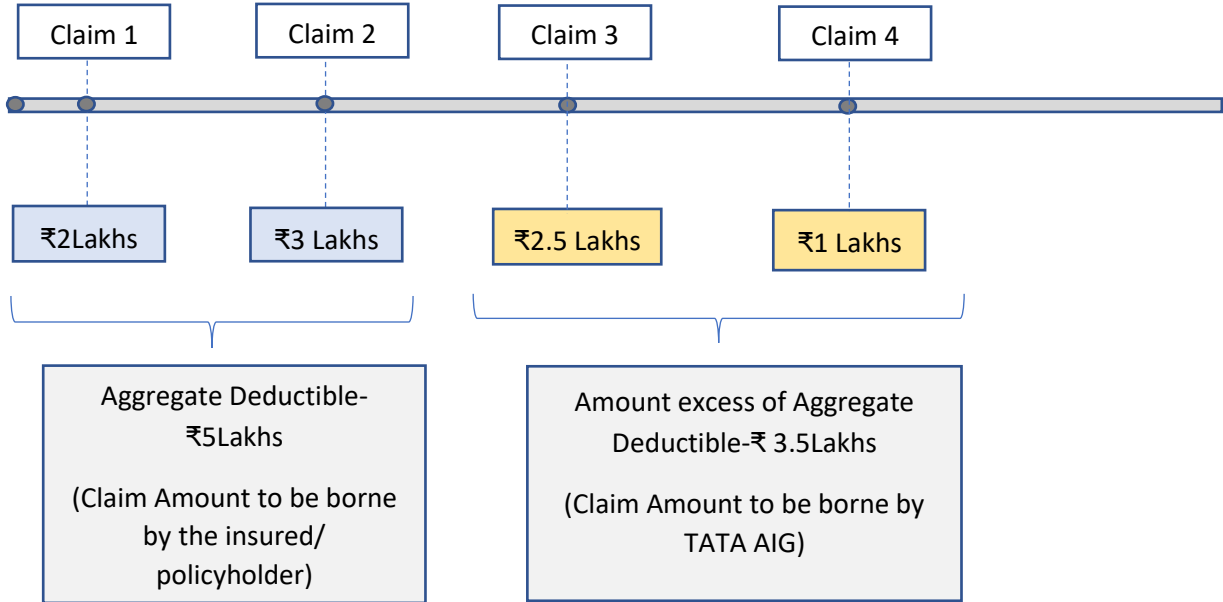
Illustration:

Members Covered	2
Insured Member 1	28 years
Insured Member 2	39 years
Sum Insured	₹ 10 Lakhs



Aggregate Deductible	₹ 5 Lakhs
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**Scenario 1:**



Note- Claim admissibility is subject to TATA AIG Health Supercharge policy terms and conditions.

**21- Is there any Aggregate Deductible available under TATA AIG Health Supercharge?**

Yes, Aggregate Deductible as an optional cover is available under TATA AIG Health Supercharge.

In lieu of premium discount opted by the policyholder, Our liability under this Policy shall be subject to application of Aggregate Deductible as mentioned in the Policy Schedule.

Sum Insured (in ₹)	Deductible Options (5% or 10% of Sum Insured) (in ₹)
5 Lakhs	25000/ 50000
7.5 Lakhs	37500/ 75000
10 Lakhs	50000/ 100000
15 Lakhs	75000/ 150000
20 Lakhs	100000/ 200000

(Subject to the terms and conditions and exclusions as stated in the Policy wordings)

The Aggregate Deductible amount as specified in the Policy Schedule shall be first deducted from the aggregate of Final Assessed Amount (s) for all claims, during the

Policy Year and Our liability shall be restricted to the balance amount, subject to availability of Sum Insured and applicability of Sub-Limits.

In case of multi-year Policy (i.e. tenure more than 1 year), such Aggregate Deductible would be applicable on annual basis.

**22- Where can the policyholder find the updated list of Blacklisted hospitals under TATA AIG Health supercharge?**

The policyholder can find the updated list of Blacklisted hospitals under TATA AIG Health supercharge on TATA AIG website ([www.tataaig.com](http://www.tataaig.com)).

The same is also available in TATA AIG Customer mobile application.

**Disclaimer:** Insurance is a subject matter of solicitation. For more details on plan options, benefits, optional covers, co-payments, exclusions, limitations, terms and conditions.

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