

WAQT PAR KIJYE, BEWAQT AANEWALI MUSEEBATON KI TAYYARI.

Pesh hai Sukshma Hospi-cash. Hospital mein bharti hone ke baad,
prati din milegi dhanrashi.



1800-220-233



generalicentralinsurance.com

Follow us on:    

What is Sukshma Hospi-Cash Group?

Sukshma Hospi-Cash Group is a cover that provides cash benefit in case an Insured gets hospitalised. It is specifically designed to take care of the incidental expenses in case of hospitalisation. This product will be offered on group basis. Sukshma Hospi-Cash Group policy guards you and your family against the trauma you face because of increased financial burden during hospitalization. Sukshma Hospi-Cash Group provides you with fixed benefit for each day of hospitalisation irrespective of the actual medical cost. Thus, provides you with additional protection at all times.

Salient features of Sukshma Hospi-Cash Group

1. You can claim for each day of hospitalisation as per your plan.
2. ICU benefit available for maximum period of 10 days for each hospitalisation and maximum 20 days during the policy period.
3. Per day benefit will be 2 times when hospitalised in an ICU.
4. The product is offered from 6 months to 65 years and renewable lifelong.

| | |
|-------------------------|--|
| Maximum Policy Term | 1 year |
| Minimum Age at entry | 6 months |
| Maximum Age at entry | 65 years |
| Renewal | Lifelong |
| Policy Coverage Options | a) Individual basis |
| | b) Family Floater basis, covering Self, Spouse, and up to a maximum of three dependent children (up to 25 yrs) |

5. The cover would be uniform across the group.
6. The group should choose either cover on Individual Sum Insured basis or on Family Floater Sum Insured basis for the Insured Member(s)
7. The cover will be available to the members of the group on Individual Sum Insured basis or Family Floater Sum Insured basis.
8. Change in plan can be allowed at the time of renewal

9. No member in the group can be covered for more than one plan.
 10. The optional benefits available by charging additional premium are:

- Maternity Benefit with 9 months waiting period applicable.
- Maternity Benefit without 9 months waiting period applicable.
- Pre-Existing Disease Cover
- Convalescence benefit can be offered for hospitalisation of more than 10 days; payable only once per hospitalisation event.

This benefit will be applicable for plan options of 15 days, 20 days and 25 days, if opted for:

| Per day Benefit | Convalescence Benefit Amount |
|---------------------------|------------------------------|
| ₹100 / day to ₹400 / day | ₹1000 |
| ₹500 / day to ₹700 / day | ₹1500 |
| ₹800 / day to ₹1000 / day | ₹2000 |

e) Deductible: Discount will be available if any of the deductible type is opted by the group

| Deductible Options |
|--------------------|
| 1 Day |
| 2 Days |
| 3 Days |

11. Continuity would be offered from similar Hospital cash policy with the same per day benefit amount from our Group Hospital cash policy to our individual Hospi-cash policy.
 12. Portability can be offered as per the Portability guidelines of IRDAI.

Plan Benefits

Plans A, B, C, D, E, F, G, H, I and J can be offered for different options 5 days/ 10 days/15 days/ 20 days and 25 days.

| Benefits | Plans | | | | | | | | | |
|---|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| | A (in ₹) | B (in ₹) | C (in ₹) | D (in ₹) | E (in ₹) | F (in ₹) | G (in ₹) | H (in ₹) | I (in ₹) | J (in ₹) |
| Daily Hospitalisation benefit due to sickness | 100 | 200 | 300 | 400 | 500 | 600 | 700 | 800 | 900 | 1000 |
| ICU benefit (maximum period of 10 days for each hospitalisation and maximum period of 20 days during the policy period) | 200 | 400 | 600 | 800 | 1000 | 1200 | 1400 | 1600 | 1800 | 2000 |

I. Pricing - Two different rate charts are given below but only one rate chart would be used for each group. In case age bands are made available for underwriting, then Age Band-wise Individual Premium table will be used and in case where age bands are not made available for underwriting, then the Individual Premium Plan-wise will be used based on flat premium for administrative ease.

Individual Premium Table

Premium rates are exclusive of Goods & Services Tax.

| 5 Days | | 10 Days | |
|-----------------|-------------------|-----------------|-------------------|
| Per Day Benefit | Premium Rate in ₹ | Per day Benefit | Premium Rate in ₹ |
| ₹100/day | 41 | ₹100/day | 44 |
| ₹200/day | 80 | ₹200/day | 88 |
| ₹300/day | 118 | ₹300/day | 131 |
| ₹400/day | 157 | ₹400/day | 175 |
| ₹500/day | 196 | ₹500/day | 218 |
| ₹600/day | 234 | ₹600/day | 262 |
| ₹700/day | 273 | ₹700/day | 305 |
| ₹800/day | 312 | ₹800/day | 349 |
| ₹900/day | 352 | ₹900/day | 392 |
| ₹1000/day | 391 | ₹1000/day | 436 |

| 15 Days | | 20 Days | |
|-----------------|-------------------|-----------------|-------------------|
| Per Day Benefit | Premium Rate in ₹ | Per Day Benefit | Premium Rate in ₹ |
| ₹100/day | 49 | ₹100/day | 52 |
| ₹200/day | 97 | ₹200/day | 104 |
| ₹300/day | 144 | ₹300/day | 155 |
| ₹400/day | 192 | ₹400/day | 207 |
| ₹500/day | 239 | ₹500/day | 259 |
| ₹600/day | 288 | ₹600/day | 310 |
| ₹700/day | 334 | ₹700/day | 362 |
| ₹800/day | 383 | ₹800/day | 413 |
| ₹900/day | 431 | ₹900/day | 465 |
| ₹1000/day | 478 | ₹1000/day | 517 |

| 25 Days | | | |
|-----------------|-------------------|-----------------|-------------------|
| Per Day Benefit | Premium Rate in ₹ | Per Day Benefit | Premium Rate in ₹ |
| ₹100/day | 57 | ₹600/day | 331 |
| ₹200/day | 112 | ₹700/day | 386 |
| ₹300/day | 167 | ₹800/day | 442 |
| ₹400/day | 221 | ₹900/day | 497 |
| ₹500/day | 276 | ₹1000/day | 552 |

Age Band-wise Individual Premium Table

Premium rates are exclusive of Goods & Services Tax.

| 5 Days | | |
|-----------------|----------------------|-----------------------|
| Per Day Benefit | Upto 45 years (in ₹) | Above 45 years (in ₹) |
| ₹100/day | 38 | 55 |
| ₹200/day | 73 | 110 |
| ₹300/day | 109 | 165 |
| ₹400/day | 144 | 218 |
| ₹500/day | 180 | 273 |
| ₹600/day | 215 | 328 |
| ₹700/day | 250 | 381 |
| ₹800/day | 286 | 436 |
| ₹900/day | 321 | 491 |
| ₹1000/day | 359 | 546 |

| 10 Days | | |
|-----------------|----------------------|-----------------------|
| Per Day Benefit | Upto 45 years (in ₹) | Above 45 years (in ₹) |
| ₹100/day | 42 | 59 |
| ₹200/day | 83 | 115 |
| ₹300/day | 123 | 173 |
| ₹400/day | 163 | 230 |
| ₹500/day | 204 | 288 |
| ₹600/day | 246 | 344 |
| ₹700/day | 286 | 400 |
| ₹800/day | 326 | 459 |
| ₹900/day | 367 | 515 |
| ₹1000/day | 407 | 573 |

| 15 Days | | |
|-----------------|----------------------|-----------------------|
| Per Day Benefit | Upto 45 years (in ₹) | Above 45 years (in ₹) |
| ₹100/day | 46 | 63 |
| ₹200/day | 91 | 125 |
| ₹300/day | 136 | 186 |
| ₹400/day | 181 | 249 |
| ₹500/day | 226 | 310 |
| ₹600/day | 270 | 371 |
| ₹700/day | 315 | 433 |
| ₹800/day | 360 | 496 |
| ₹900/day | 405 | 557 |
| ₹1000/day | 450 | 618 |

| 20 Days | | |
|-----------------|----------------------|-----------------------|
| Per Day Benefit | Upto 45 years (in ₹) | Above 45 years (in ₹) |
| ₹100/day | 50 | 67 |
| ₹200/day | 99 | 133 |
| ₹300/day | 147 | 199 |
| ₹400/day | 196 | 263 |
| ₹500/day | 244 | 330 |
| ₹600/day | 292 | 396 |
| ₹700/day | 341 | 460 |
| ₹800/day | 391 | 526 |
| ₹900/day | 439 | 592 |
| ₹1000/day | 488 | 657 |

| 25 Days | | | | | |
|-----------------|----------------------|-----------------------|-----------------|----------------------|-----------------------|
| Per Day Benefit | Upto 45 years (in ₹) | Above 45 years (in ₹) | Per Day Benefit | Upto 45 years (in ₹) | Above 45 years (in ₹) |
| ₹100/day | 54 | 70 | ₹600/day | 315 | 417 |
| ₹200/day | 105 | 139 | ₹700/day | 367 | 486 |
| ₹300/day | 159 | 209 | ₹800/day | 418 | 555 |
| ₹400/day | 210 | 278 | ₹900/day | 471 | 625 |
| ₹500/day | 262 | 347 | ₹1000/day | 523 | 694 |

Family Floater Premium

Note: For Family Floater Policy, the number of the days of hospitalisation, chosen as per the Plan will float over the members of the Floater Policy.

Premium for the Primary Insured remains at actuals from the individual table

For remaining dependant members, discounts applicable as table below (on their respective individual premium)

| Plan Limit | Family Floater Discount | | | |
|------------|-------------------------|------------------------|------------------------|------------------------|
| | 2 nd member | 3 rd member | 4 th member | 5 th member |
| 5 days | 9.00% | 12.50% | 15.50% | 18.25% |
| 10 days | 6.50% | 7.50% | 8.25% | 9.25% |
| 15 days | 5.75% | 6.00% | 6.50% | 6.75% |
| 20 days | 5.40% | 5.60% | 5.80% | 6.00% |
| 25 days | 5.30% | 5.40% | 5.60% | 5.70% |

Primary Member / Proposer will always be the member with highest age. For calculation of family floater premium, the discount is applied in the descending order of age of the persons covered in the family.

An illustration of calculation for Family Floater option

Plan Limit: 15 days

Benefit Amount: 300 per day

Family Floater: Self (Age: 49 years), Spouse (Age: 47 years), 1 Child (Age: 16 years)

Self-Premium: 186

Spouse Premium: $186 \text{ (Individual Premium)} * (5.75\% \text{ discount}) = (186 - 10.70) = 175.31$

Child Premium: $136 \text{ (Individual Premium)} * (6\% \text{ discount}) = (136 - 8.16) = 127.84$

Total Premium = $186 + 175.31 + 127.84 = 489.15$ (exclusive of Goods & Services Tax)

Premium Loading for Optional Coverages

1. Maternity with 9 months waiting period applicable: Loading of 30% on the premium for all the plan limits.
2. Maternity without 9 months waiting period applicable: Loading of 40% on the premium for all the plan limits.
3. Pre-Existing Disease Cover: Loading of 20% on the premium for all the plan limits.
4. Convalescence Benefit: Two different rate charts are given below but only one rate chart would be used for each group. In case age bands are made available for underwriting, then Age Band-wise Individual Premium table will be used and in case where age bands are not made available for underwriting, then the Individual Premium Plan-wise will be used based on flat premium for administrative ease

a) Individual Premium Table: Premium rates are exclusive of Goods & Services Tax.

| Per Day Benefit | Convalescence Benefit Amount | Premium Rate (in ₹) |
|---------------------------|------------------------------|---------------------|
| ₹100 / day to ₹400 / day | ₹1000 | 6 |
| ₹500 / day to ₹700 / day | ₹1500 | 9 |
| ₹800 / day to ₹1000 / day | ₹2000 | 12 |

b) Age Band wise Individual Premium Table: Premium rates are exclusive of Goods & Services Tax.

| Per Day Benefit | Convalescence Benefit Amount | Upto 45 years (in ₹) | Above 45 years (in ₹) |
|---------------------------|------------------------------|----------------------|-----------------------|
| ₹100 / day to ₹400 / day | ₹1000 | 4 | 15 |
| ₹500 / day to ₹700 / day | ₹1500 | 6 | 22 |
| ₹800 / day to ₹1000 / day | ₹2000 | 7 | 29 |

Deductible

It is a cost-sharing requirement under this product that provides that the company will not be liable for a specified number of days in case of hospitalisation which will apply before any benefits are payable by the company. There are 3 deductible options which the company plans to provide - 1 day, 2 days or 3 days. The discount rates for each option are calculated on the premium rates with the deductible option.

| Deductible Option | Discount Rate |
|-------------------|---------------|
| 1 Day | 6% |
| 2 Days | 20% |
| 3 Days | 35% |

Direct Sales Discount

An additional discount of 15% will be applicable in case the proposal comes through direct sales channel (without any intermediary)

Renewal Premium

At the time of renewals or for groups with past insurance experience, for larger groups with adequate credible statistical information as per table below the past burning cost with adjustment for exposure will be used for further pricing.

Renewal Premium = $Z * (\text{Burning cost of the group's own experience}) + (1-Z) * (\text{Risk rate or Premium})$

Where Z is the credibility factor given to the Group based on the size of the group as per the table below:

| Size of Group | Credibility Factor | Size of Group | Credibility Factor |
|---------------|--------------------|---------------|--------------------|
| 0-20 | 0% | 101-200 | 35% |
| 21-40 | 10% | 201-400 | 50% |
| 41-50 | 15% | 401-800 | 70% |
| 51-100 | 20% | 801 and above | 100% |

The renewal premium is the risk premium which will be further loaded to arrive at Gross Premium and accordingly will be charged to the policyholder.

Group Discount

The Group Discount rates are as given in the table below

| Group Discount Rates | |
|--|----------------------|
| Number of Insured persons under the Group Policy | Group Discounts in % |
| 101 - 500 | 5% |
| 501 - 1000 | 7.5% |
| 1001 - 10000 | 12.5% |
| Above 10000 | 15% |

Claims Procedure

A simple claims process, which includes submission of following documents – Completed Sukshma Hospi-Cash Group Policy Claim Form, Photocopy of the Discharge Card from the Hospital, Photocopy of Final Hospital Bill / Receipt and any other relevant document as required by the company

General Exclusions (Indicative)

1. Hospitalisation for cosmetic treatments, plastic surgery, refractive error corrective procedures, experimental, investigational or unproven procedures or treatments.
2. Hospitalisation for General debility, 'Run-down' condition or rest cure, sexually transmitted disease other than HIV/ AIDS, intentional self-Injury.
3. Non-Allopathic Treatment / Hospitalisation.
4. Any hospitalisation outside India.

The detailed exclusions would be mentioned in the policy clause.

Disclaimer

The above information is only indicative in nature. For details of the coverage & exclusions please contact our nearest office.

For any claims related enquires please contact us at the following address. Agents / Brokers are not authorised to receive notices and declarations on our behalf.

SCHEDULE OF BENEFITS

Plans A, B, C, D, E, F G, H, I, J can be offered for different options 5 days/ 10 days/ 15 days/ 20 days/ 25 days

Option – 5 Days

| Sr. No. | Benefits | Plans | | | | | | | | | |
|--------------------------|---|---------------------------------|-----|----------|-----|------|------|------|------|------|------|
| | | A | B | C | D | E | F | G | H | I | J |
| 1 | Daily Hospital Cash (in INR), maximum up to 5 days | 100 | 200 | 300 | 400 | 500 | 600 | 700 | 800 | 900 | 1000 |
| 2 | Daily ICU Cash (in INR), subject to maximum up to 5 days for each hospitalization and maximum up to 5 days during the policy period | 200 | 400 | 600 | 800 | 1000 | 1200 | 1400 | 1600 | 1800 | 2000 |
| Optional Benefits | | | | | | | | | | | |
| 3 | Deductible | 1 day/ 2 days/ 3 days as opted | | | | | | | | | |
| 4 | Maternity Benefit Expenses Cover | With 9 months waiting period | | Optional | | | | | | | |
| | | Without 9 months waiting period | | Optional | | | | | | | |
| 5 | Pre-Existing Disease Cover | Optional | | | | | | | | | |

Option – 10 Days

| Sr. No. | Benefits | Plans | | | | | | | | | |
|--------------------------|--|---------------------------------|-----|----------|-----|------|------|------|------|------|------|
| | | A | B | C | D | E | F | G | H | I | J |
| 1 | Daily Hospital Cash (in INR), maximum up to 10 days | 100 | 200 | 300 | 400 | 500 | 600 | 700 | 800 | 900 | 1000 |
| 2 | Daily ICU Cash (in INR), subject to maximum up to 5 days for each hospitalisation and maximum up to 10 days during the policy period | 200 | 400 | 600 | 800 | 1000 | 1200 | 1400 | 1600 | 1800 | 2000 |
| Optional Benefits | | | | | | | | | | | |
| 3 | Deductible | 1 day/ 2 days/ 3 days as opted | | | | | | | | | |
| 4 | Maternity Benefit Expenses Cover | With 9 months waiting period | | Optional | | | | | | | |
| | | Without 9 months waiting period | | Optional | | | | | | | |
| 5 | Pre-Existing Disease Cover | Optional | | | | | | | | | |

| Option – 15 Days | | | | | | | | | | | | |
|--------------------------|---|---------------------------------|--------------------------------|------|------|------|------|------|------|------|------|------|
| Sr. No. | Benefits | | Plans | | | | | | | | | |
| | | | A | B | C | D | E | F | G | H | I | J |
| 1 | Daily Hospital Cash (in INR), maximum up to 15 days | | 100 | 200 | 300 | 400 | 500 | 600 | 700 | 800 | 900 | 1000 |
| 2 | Daily ICU Cash (in INR), subject to maximum up to 10 days for each hospitalisation and maximum up to 10 days during the policy period | | 200 | 400 | 600 | 800 | 1000 | 1200 | 1400 | 1600 | 1800 | 2000 |
| Optional Benefits | | | | | | | | | | | | |
| 3 | Deductible | | 1 day/ 2 days/ 3 days as opted | | | | | | | | | |
| 4 | Convalescence Benefit, Fixed amount (in INR) more than 10 consecutive days will be payable once per Hospitalisation event | | 1000 | 1000 | 1000 | 1000 | 1500 | 1500 | 1500 | 2000 | 2000 | 2000 |
| 5 | Maternity Benefit Expenses Cover | With 9 months waiting period | Optional | | | | | | | | | |
| | | Without 9 months waiting period | Optional | | | | | | | | | |
| 6 | Pre-Existing Disease Cover | | Optional | | | | | | | | | |

| Option – 20 Days | | | | | | | | | | | | |
|--------------------------|---|---------------------------------|--------------------------------|------|------|------|------|------|------|------|------|------|
| Sr. No. | Benefits | | Plans | | | | | | | | | |
| | | | A | B | C | D | E | F | G | H | I | J |
| 1 | Daily Hospital Cash (in INR), maximum up to 20 days | | 100 | 200 | 300 | 400 | 500 | 600 | 700 | 800 | 900 | 1000 |
| 2 | Daily ICU Cash (in INR), subject to maximum up to 10 days for each hospitalisation and maximum up to 20 days during the policy period | | 200 | 400 | 600 | 800 | 1000 | 1200 | 1400 | 1600 | 1800 | 2000 |
| Optional Benefits | | | | | | | | | | | | |
| 3 | Deductible | | 1 day/ 2 days/ 3 days as opted | | | | | | | | | |
| 4 | Convalescence Benefit, Fixed amount (in INR) more than 10 consecutive days will be payable once per Hospitalisation event | | 1000 | 1000 | 1000 | 1000 | 1500 | 1500 | 1500 | 2000 | 2000 | 2000 |
| 5 | Maternity Benefit Expenses Cover | With 9 months waiting period | Optional | | | | | | | | | |
| | | Without 9 months waiting period | Optional | | | | | | | | | |
| 6 | Pre-Existing Disease Cover | | Optional | | | | | | | | | |

| Option – 25 Days | | | | | | | | | | | | |
|--------------------------|---|---------------------------------|--------------------------------|------|------|------|------|------|------|------|------|------|
| Sr. No. | Benefits | | Plans | | | | | | | | | |
| | | | A | B | C | D | E | F | G | H | I | J |
| 1 | Daily Hospital Cash (in INR), maximum up to 25 days | | 100 | 200 | 300 | 400 | 500 | 600 | 700 | 800 | 900 | 1000 |
| 2 | Daily ICU Cash (in INR), subject to maximum up to 10 days for each hospitalisation and maximum up to 20 days during the policy period | | 200 | 400 | 600 | 800 | 1000 | 1200 | 1400 | 1600 | 1800 | 2000 |
| Optional Benefits | | | | | | | | | | | | |
| 3 | Deductible | | 1 day/ 2 days/ 3 days as opted | | | | | | | | | |
| 4 | Convalescence Benefit, Fixed amount (in INR) more than 10 consecutive days will be payable once per Hospitalisation event | | 1000 | 1000 | 1000 | 1000 | 1500 | 1500 | 1500 | 2000 | 2000 | 2000 |
| 5 | Maternity Benefit Expenses Cover | With 9 months waiting period | Optional | | | | | | | | | |
| | | Without 9 months waiting period | Optional | | | | | | | | | |
| 6 | Pre-Existing Disease Cover | | Optional | | | | | | | | | |

a) In case of Sec I (Daily Hospital Cash) and II (Daily ICU Cash) the maximum benefits would however be restricted to 5 days / 10 days / 15 days / 20 days / 25 days as per the plan opted for each Hospitalisation or all Hospitalisations during the Policy period.

b) In case the Hospitalisation exceeds the maximum stipulated under Sec I (Daily Hospital Cash) as per the selected plan while adjudicating any claim the benefits under ICU would have precedence over non-ICU Hospitalisation.

c) In case the Hospitalisation in ICU exceeds the per Hospitalisation maximum limit of 5 days/ 10 days (as per the plan opted) or the per Policy period limit of 5 days/ 10 days/ 20 days (as per the plan opted), the remaining period of Hospitalisation in ICU will be paid as per non-ICU Hospitalisation benefits subject to the overall Policy maximum of 5 days / 10 days / 15 days / 20 days / 25 days.

d) For Family Floater cover:

- The maximum number of days of Hospitalisation as mentioned in the Schedule would float over all members of each Family under the Policy
- In the event of more than one Family member being hospitalised at the same time, the number of days each member has been hospitalised would be added, and the maximum allowable for the whole Family would be restricted to the number of days as mentioned in the Schedule (maximum number of days would float over the Family) under the Policy.

If you are suffering from an illness/ disease or if you meet with an accident which requires hospitalisation, please contact us on the following:

Claims Department

Generali Central Health (GCH)

Qubix Business Park, Building No. Block IT – 1,
Ground Floor, Plot No. 2, Blueridge Township,
Near Rajiv Gandhi Infotech Park, Phase – 1,
Village Hinjawadi, Taluka Mulshi, Pune, Maharashtra - 411057

Call us at 1800 220 233 / 1860 500 3333 / 022 6783 7800

Toll Free Fax: 1800 103 9998 / 1800 209 1017

Email: gch@generalicentral.com

Generali Central Insurance Company Limited (Formerly known as Future Generali India Insurance Company Limited) | Registered Office: Unit No. 801 & 802, 8th Floor, Tower C, Embassy 247 Park, LBS Marg, Vikhroli (West), Mumbai – 400083 | IRDAI Regn. No.: 132 | CIN: U66030MH2006PLC165287 | Website: www.generalicentralinsurance.com | Email ID: gicare@generalicentral.com | Call us at 1800 220 233 / 1860 500 3333/ 022 6783 7800 | Trade Logo displayed above belongs to M/S Assicurazioni Generali - Societa Per Azioni and Central Bank of India, respectively, and is used by Generali Central Insurance Co. Ltd. under license. For detailed information on risk factors, terms and conditions, etc., please refer to the product brochure and policy wordings, consult your advisor or visit our website before concluding a sale. This product is eligible for claiming deduction under section 80D of the Income Tax Act, 1961. | Tax benefits are subject to change due to change in tax laws. *T&C apply.

ARN: GC-NL/PD/MKTG/EN/SukshmaHospi-CashGroup-Aug2025-BRO

Sukshma Hospi-Cash Group (Micro-Insurance Product), UIN: GCIHMGP22107V032122

ISO Ref. No.: GCH/HP/SHG/BRH/001