



Welcome to the world of **Unlimited Health Insurance.***

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In a world where Wi-Fi knows no bounds, OTT content is endless, and credit card limits are limitless, why settle for limited health insurance?

Experience life without limits, with

Health Unlimited

by your side, a health insurance that goes on and on.

on and on and on and on and on

Why choose **Health Unlimited?**



Unlimited Refills[^]

Up to 100% of sum insured
at no extra cost.



Unlimited Coverage[^]

For any one claim during
the entire policy period.



Inflation Guard[^]

Protection against rising costs.



Premium Payback[^]

Discount on renewal premium in the 5th year,
equivalent to the 1st year base premium.



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Key Benefits

Cumulative Bonus: Shall be increased by 50% in respect of each claim-free policy year. In the event of a claim, the cumulative bonus shall be reduced by 50%, subject to minimum amount of zero.



Complimentary health checkup available every policy year.



Wellness Discount: Rewards equivalent to 20% of the policy premium can be earned through the wellness programme which can be utilised as discount at renewals.



Accidental Hospitalisation: An additional S.I. equivalent to 25% of balance S.I. max. up to ₹10 lakhs shall be available for hospitalisation claims arising out of accidents.



No sublimits for cataract, road ambulance, and LASIK.

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A smiling family of four (mother, father, daughter, and son) posing together, with the children sitting on the parents' shoulders. The image is set against a white background with a faint red geometric line pattern.

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Schedule of Benefits

Base Covers							
Sum Insured	₹7.5 Lakhs	₹10 Lakhs	₹15 Lakhs	₹25 Lakhs	₹50 Lakhs	₹100 Lakhs	₹200 Lakhs
Accidental Hospitalisation	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.
Emergency Road Ambulance	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI
Emergency Medical Evacuation	X	X	X	₹2.5 lakhs	₹2.5 lakhs	₹5 lakhs	₹5 lakhs
Home Healthcare Expenses	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹10 lakhs.	25% of SI; Max. up to ₹ 10 lakhs.	25% of SI; Max. up to ₹10 lakhs.
OPD Treatment	₹5K	₹5K	₹5K	₹7.5K	₹10K	₹10K	₹10K
	Consultations/ Diagnostics are covered. 30% Co-pay applicable. 30 Days / PED Waiting Period applicable.						
Medical Second Opinion (Per Policy Year)	Twice	Twice	Twice	Twice	Twice	Twice	Twice
Medical Treatment Abroad - for 8 major illnesses (Waiting - 36 Months)	X	X	X	X	X	Up to SI	Up to SI
Wellness Benefits	Available	Available	Available	Available	Available	Available	Available
	VAS & Loyalty Benefits						
	Points earned per member per year			Value of points earned			
	185 - 200			20%			
	150 - 184			15%			
	100 - 149			5%			
	15 - 99			2%			

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Other Features



Premium Installment Facility:

Single, Half-yearly, Quarterly, and Monthly in case of long-term policies.



No Loading based on past claims.



Tax Benefit: Premiums paid by any mode other than cash and demand draft are eligible for tax rebate, as provided under Section 80-D of the Income Tax Act.



Free Look Period: You will be allowed a free look period of 30 days from the date of receipt of the policy document.



Cancellation: You may cancel the policy by giving 7 days' written notice.

What is not covered?

1. Injury or illness directly or indirectly caused by or arising from or attributable to war, invasion, act of a foreign enemy, warlike operations (whether war be declared or not).
2. Circumcision, unless necessary for the treatment of an illness or if necessitated due to an accident.
3. Vaccination/Inoculation (except as post-bite treatment)
4. Charges incurred in connection with cost of spectacles and contact lenses, hearing aids, durable medical equipment (including but not limited to cost of instrument used in the treatment of Sleep Apnea Syndrome (C.P.A.P), Continuous Peritoneal Ambulatory Dialysis (C.P.A.D), and oxygen concentrator for asthmatic condition, wheel chair, crutches, artificial limbs, belts, braces, stocking, glucometer and the like), namely that equipment used externally for the human body which can withstand repeated use; is not designed to be disposable; is used to serve a medical purpose, such costs of all appliances/devices whether for diagnosis or treatment after discharge from the hospital.
5. Venereal/Sexually transmitted disease other than HIV/AIDS.
6. External Congenital Anomaly and related illness/defect.
7. Injury or illness directly or indirectly caused by or contributed to by nuclear weapons/materials.
8. Stem cell storage.
9. Non-prescribed drugs, medical supplies, and hormone replacement therapy.
10. Personal comfort and convenience items or services, such as television, telephone, barber, or guest service and similar incidental services and supplies.

What is not covered?

11. Outpatient diagnostic, medical, and surgical procedures or treatments.
12. Dental treatment or surgery of any kind unless requiring hospitalisation as a result of an injury.
13. A medical practitioner's home visit charges during pre- and post-hospitalisation period and attendant nursing charges.
14. Treatment outside India.
15. Intentional self-injury.
16. Any complications arising out of infertility treatment.
17. Any specific exclusion(s) applied by us, specified in the Schedule and accepted by the insured.
18. Specific exclusions for OPD treatment claims: We will not pay for any expenses incurred in respect of any claims made under (OPD treatment), arising out of or howsoever related to any of the following:
 - a. Cost of an annual health check-up.
 - b. Any expenses for consultation, diagnostics, that are not duly supported by medical documents from the medical practitioner mentioning:
 - 1) Diagnosis
 - 2) Referral for a diagnostic test



*The above list is indicative in nature. For complete details, please refer to the policy wordings on <https://www.generalicentralinsurance.com/customer-service/downloads>

Wellness Benefits

- The insured person will be eligible for wellness benefits under the policy. These wellness benefits will include value-added services and wellness reward points. These services would be conducted through our wellness partner and can be accessed via our GC Insure mobile app.
- All insured persons above 18 years are eligible to avail the wellness benefits. The insured person would have to register on the GC Insure mobile app with his/her unique mobile number and the policy number for availing the benefits.
- While availing the wellness benefits, each insured person expressly agrees that:
 - a. All decisions regarding availing the wellness benefit are to be solely made by the insured person.
 - b. We do not provide/assume responsibility for the wellness benefits or make any representation as to the adequacy or accuracy or quality of the same; any actual or alleged errors, omissions or representations whatsoever made by any of our wellness partners or for any consequences of any action taken or not taken in reliance thereon by the insured person or any other person.



DOWNLOAD THE GC INSURE APP TO AVAIL WELLNESS BENEFITS.

- Get access to day-to-day wellness features
- Earn wellness reward points
- Get exciting discounts on health and fitness brands



DOWNLOAD NOW



A. Value-added Services

The insured person is eligible for availing the following benefits via the GC Insure mobile app:



Tele-counselling

Under this benefit, the insured person will have access to two tele-counselling sessions with a clinical psychologist to maintain and improve the quality of his/her life. The bookings for the tele-counselling sessions would be through the GC Insure mobile app.



Health Content

Under this benefit, the insured person will have access to articles and blogs which provide information on physical and mental wellness-related topics.



Webinars

Under this benefit, the insured person will have access to webinars held on the GC Insure mobile app on topics related to physical and mental wellness.



Vouchers (Fitness/Sports Memberships, Wellness Centres, Diagnostic Centres)

Under this benefit, the insured person will have access to discount vouchers as per partner tie-ups which can be utilised for aspects pertaining to a healthy lifestyle, diagnostics, medicines, etc. The voucher details will be displayed on the GC Insure mobile app.



Health Checkup

The insured person will be eligible for a health checkup as per the plan in force under the policy. Everyone from 18 years onwards is eligible for availing the health checkup. The health checkup can be conducted from 1st year of the Health Unlimited policy with us. The health checkup will be provided at our wellness partner empaneled diagnostic centres only. The health checkup would include tests as given below as applicable for respective plans.

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A. Value-added Services

Sum Insured(₹)	Tests
7.5L, 10L	Complete Blood Count (CBC), Glycosylated Haemoglobin (HbA1C), Electrocardiogram (ECG reported by an MD Physician), Serum Creatinine, Low Density Lipoproteins (LDL), Serum Triglycerides, High Density Lipoproteins (HDL), Serum Cholesterol, Medical examination report including Blood Pressure and BMI (Body Mass Index), Uric Acid, Total Protein, Pulmonary Function Test.
15L, 25L	Complete Blood Count (CBC), Glycosylated Haemoglobin (HbA1C), Electrocardiogram (ECG reported by an MD Physician), Serum Creatinine, Low Density Lipoproteins (LDL), Serum Triglycerides, High Density Lipoproteins (HDL), Serum Cholesterol, Medical examination report including Blood Pressure and BMI (Body Mass Index), Serum Glutamic Oxaloacetic Transaminase (SGOT), Serum Glutamic Pyruvic Transaminase (SGPT), Serum Calcium, Uric Acid, Total Protein, Pulmonary Function Test, USG (abdomen).
50L,100L, 200L	Complete Blood Count (CBC), Glycosylated Haemoglobin (HbA1C), Electrocardiogram (ECG reported by an MD Physician), Serum Creatinine, Low Density Lipoproteins (LDL), Serum Triglycerides, High Density Lipoproteins (HDL), Serum Cholesterol, Medical examination report including Blood Pressure and BMI (Body Mass Index), Serum Glutamic Oxaloacetic Transaminase (SGOT), Serum Glutamic Pyruvic Transaminase (SGPT), Vitamin D, Thyroid function (T3,T4,TSH), Serum Calcium, Uric Acid, Total Protein, Pulmonary Function Test, USG (abdomen).

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B. Wellness Reward Points

The insured person will be eligible to earn reward points under the policy. This benefit will help the insured person to assess his/her health status and aid in improving their overall well-being. The insured person would have to earn these points by performing an array of wellness activities listed below. These activities done by the insured person will determine the points that can be earned.

Conditions applicable for earning the reward points:

- Age Eligibility - Everyone from 18 years onwards is eligible for earning wellness points.
- There will be no limitation to the number of programs one can enroll, however maximum rewards that one can earn in a single policy year will be limited to 200/insured person.
- Conditions for earning reward points wherever offered, will be the same for all the customers irrespective of plan opted.

Details of reward points that can be accrued are listed below.

Sr. No.	Criteria	Frequency Allowed	Max.Points
1.	Stress and Happiness Index Score	2 times / year	20
2.	Expert Wellness Assessment	Once / year	40
3.	Participation in GCICL organised events (as and when organised) and viewing of GCICL content around wellness	As planned by GCICL	20
4.	Lifestyle Disease Monitor <ul style="list-style-type: none">• Hypertension – Blood Pressure• Obesity - BMI• Diabetes – Hb A1C• Cardiac Health - Sr. Cholesterol, Triglycerides	Once / year	45
5.	Fitness/Healthy Lifestyle Tracking - (any one activity) <ul style="list-style-type: none">• Daily step tracking (monthly average of 10,000 steps/day)• Burning average of 300 calories per day in a month• Submission of monthly gym/yoga membership details• Participation in a marathon, cyclathon, etc.	Monthly	60
6.	Enrolment to Wellness	Once / year	15
	Total Points		200

The points earned in a year will be equal to certain percentage of the applicable insured premium as per the table below.

Points earned per member per year	% value of points earned
185 - 200	20%
150 - 184	15%
100 - 149	5%
15 - 99	2%

Conditions applicable for burning of points:

- The points earned will float among all members of the family irrespective of the persons who have contributed for earning the points.
- Points earned in the first year can be carried forward to 2nd or 3rd year in case of long-term policies.
- The points can be burned for utilisation of following benefits:
 1. Availing discount in premium at the time of renewal of the policy.
 2. Availing out-patient consultations through the wellness partner network clinics.
 3. Diagnostic tests and preventive tests through the wellness partner network clinics.
 4. Purchase of prescribed medicines through online pharmacy having tie up with our wellness partner.
 5. Reimbursement of non-medical expenses in case of claim.



Basis of Claims Payment:

(a) We shall make payment in Indian Rupees only.

Discounts and Other Offers:

a) **Family Discount:**

10% family discount in case of more than 1 insured member is covered under the same policy on Individual Sum Insured basis.

b) **Long-term Discount** (applicable in case of a single payment for policy term of more than one year):

Number of years	Discount
1 year	Nil
2 years	7.5%
3 years	10%

c) **Floater Discount:**

Age Band	Floater Discount	Age Band	Floater Discount
0-17	60%	51-55	40%
18-25	55%	56-60	35%
26-30	50%	61-65	35%
31-35	45%	66-70	35%
36-40	45%	71-75	35%
41-45	40%	76-80	25%
46-50	40%	>=81	25%

Premium applicable for the primary insured will be the standard individual premiums from the premium table.

For remaining dependent members, floater discounts applicable on their respective premium is as per the table above.

d) **Instalment Loading:** Insured has an option to pay premium on instalment basis.
Given below are the loadings applicable on standard premiums in case of instalments.

Instalment Frequency	Loading of Standard Premiums
Monthly	5%
Quarterly	4%
Semi-annually	3%

e) **Voluntary Deductible:** Insured has an option to opt for Voluntary Deductible and avail discounts on the premium.
The deductible will be applicable on an aggregate basis.

f) **Zone Classification:**

Zone Classification	Areas Covered
Zone 1	Pune, Mumbai, Bangalore, New Delhi, Chennai, Hyderabad, Gurgaon, Kolkata, Thane, Ahmedabad, Indore, Vadodara, Noida, Secunderabad, Panvel, Navi Mumbai, Surat, Gandhi Nagar.
Zone 2	Rest of India

*Please note the Cities/Towns that fall under respective Zones shall be identified as per the updated/ latest Jurisdiction defined by Government.

Zonal Co-payment

If the treatment is in higher zone than the policyholder’s selected zone (for which policy holder has paid the premium), co-payment will be applicable as per below:

- If you select Zone 1, then no co-payment will apply for treatment in Zone 1.
- If You select Zone 2, then 15% Co-payment will apply for treatment in Zone 1.

Premium Table

1) Zone 1

Age Band/SI (₹)	750,000	1,000,000	1,500,000	2,500,000	5,000,000	10,000,000	20,000,000
0-25	10,731	11,631	13,865	16,071	19,059	23,702	33,183
26-30	11,999	13,006	15,503	17,970	21,311	26,504	37,105
31-35	12,819	13,895	16,563	19,198	22,768	28,314	39,640
36-40	13,729	14,921	17,845	20,624	24,537	30,557	42,780
41-45	16,234	17,673	21,181	24,351	29,025	36,172	50,640
46-50	20,521	22,388	26,901	31,029	37,076	46,258	64,762
51-55	27,952	30,553	36,801	42,585	51,004	63,699	89,179
56-60	37,460	41,027	49,532	56,813	68,211	85,263	1,19,368
61-65	50,522	55,430	67,066	76,876	92,525	1,15,737	1,62,032
66-70	66,926	73,434	88,845	1,03,566	1,24,787	1,55,913	2,18,278
71-75	85,510	93,996	1,13,966	1,33,262	1,61,003	2,01,307	2,81,829
76-80	1,06,726	1,17,495	1,42,695	1,67,314	2,02,658	2,53,469	3,54,857
>81	1,25,914	1,38,644	1,68,432	1,97,487	2,39,125	2,99,130	4,18,782

2) Zone 2 – Discount of 5% on Zone 1 premium.

3) Optional Covers:

(a) Voluntary Deductible

S.I. (in rupees)	Deductible						
	10,000	25,000	50,000	75,000	100,000	300,000	500,000
750,000	8%	15%	20%	NA	NA	NA	NA
1,000,000	8%	15%	20%	NA	NA	NA	NA
1,500,000	NA	NA	15%	20%	25%	NA	NA
2,500,000	NA	NA	15%	20%	25%	NA	NA
5,000,000	NA	NA	NA	NA	15%	20%	25%
10,000,000	NA	NA	NA	NA	15%	20%	25%
20,000,000	NA	NA	NA	NA	15%	20%	25%

(b) Consumables / Non-medical Expenses Cover

S.I. (in rupees)	Office Premium (in rupees)
750,000	927
1,000,000	1,071
1,500,000	1,433
2,500,000	1,813
5,000,000	2,659
10,000,000	4,487
20,000,000	5,000

(c) Waiver of mandatory co-pay for age above 60 years - Loading of 20% of Base Premium

Notes:

- Premiums exclusive of Goods & Services Tax.
- Age in completed years.

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: gcicare@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. ^Unlimited Refills (Restoration Benefit) - Triggers from the 2nd claim onwards to restore S.I. up to base S.I. for unlimited times for same and different illnesses. ^Unlimited Coverage - Once in the lifetime of the policy and for any one claim, this benefit shall cover the claim for actual admissible amount. ^Inflation Guard - Additional S.I. at each renewal which can be accumulated up to a maximum of 100% of policy sum insured. ^Premium payback - Discount on renewal premium in the 5th year, equivalent to the 1st year base premium, if there's no OPD/IPD hospitalization claim in the preceding 4 consecutive policy years. *T&C apply.

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