WAQT PAR KIJIYE, BEWAQT AANEWALI MUSEEBATON KI TAYYARI.

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





1800-220-233











We are there for you during the time of distress.

There is a lot on your mind when you are ill – anxieties, uncertainties and even fear. You want the best treatment, be it for yourself or your family. In such a situation, the biggest concern is to be able to afford the treatment. You and your dependents have too much at stake to be left without financial protection. Given the ever rising healthcare costs in India, one ailment is all it takes to wobble your financial health. With Sukshma Hospi-cash, we lessen the burden on the financial front so that you can take care of your health.

What is Sukshma Hospi-Cash?

Sukshma Hospi-Cash provides cash benefit in case you get hospitalised. It is specifically designed to take care of the incidental expenses in case of hospitalisation. This product will be offered on individual Sum Insured basis or on Family Floater basis, covering Self, Spouse, and up to a maximum of three dependent children (up to 25 years). Sukshma Hospi-Cash policy guards you and your family against the trauma you face because of increased financial burden during hospitalisation. It gives you fixed benefit for each day of hospitalisation irrespective of the actual medical cost thus providing you with additional protection at all times.

Your Benefits



- 1. You can claim for each day of hospitalisation as per your plan.
- 2. ICU benefit is available for a maximum period of 10 days for each hospitalisation and a maximum period of 20 days during the policy period (as per plan opted).
- 3. Per day benefit will be doubled when you are hospitalised in an ICU.
- 4. The product is offered from the age of 6 months to 65 years and renewable lifelong.
- 5. Children above the age of 6 months are eligible if the parent(s) are concurrently insured with us

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 years)

- 6. You may make a change in your plan at the time of renewal
- 7. The hospitalisation benefit should be uniform for all the members covered under Family Floater policy and/or Individual policy
- 8. You may get certain optional benefits by paying additional premium, like:
 - a) Maternity Benefit with 9 months waiting period applicable
 - b) Maternity Benefit without 9 months waiting period applicable

Maternity Benefit cover will be available to females within age band of 0-45 years only

- c) Pre-existing Disease Cover
- d) 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 under the Policy

Deductible Options
1 Day
2 Days
3 Days

- Continuity would be offered from similar Hospital Cash Policy with the same per day benefit amount
- 10. Premium paid is exempted under the section 80 D of Income Tax
- Portability can be offered as per the Portability guidelines from a similar Hospital Cash Policy
- 12. There will be no loading on premium for adverse claims experience in our individual Hospi-cash Policy

Free-Look Period



- The Insured will be allowed a period of at least 30 days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable.
- 2. If you haven't made any claim during the free-look period, you will be entitled to
 - A refund of the premium paid less any expenses incurred by you on your medical examination and the stamp duty charges or;
 - ii. Where the risk has already commenced and the option of return of the Policy is exercised by the Policyholder, a deduction towards the proportionate risk premium for period on cover or;
 - iii. Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period

Plan Benefits

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

Benefits	Plans										
Deficition	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 hospitalization and maximum period of 20 days during the policy period)	200	400	600	800	1000	1200	1400	1600	1800	2000	

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

	5 days			10 days		15 days				
Per day Benefit	Up to 45 years (in ₹)	Above 45 years (in ₹)	Per day Benefit	Up to 45 years (in ₹)	Above 45 years (in ₹)	Per day Benefit	Up to 45 years (in ₹)	Above 45 years (in ₹)		
₹100 / day	38	55	₹100 / day	42	59	₹100 / day	46	63		
₹200 / day	73	110	₹200 / day	83	115	₹200 / day	91	125		
₹300 / day	109	165	₹300 / day	123	173	₹300 / day	136	186		
₹400 / day	144	218	₹400 / day	163	230	₹400 / day	181	249		
₹500 / day	180	273	₹500 / day	204	288	₹500 / day	226	310		
₹600 / day	215	328	₹600 / day	246	344	₹600 / day	270	371		
₹700 / day	250	381	₹700 / day	286	400	₹700 / day	315	433		
₹800 / day	286	436	₹800 / day	326	459	₹800 / day	360	496		
₹900 / day	321	491	₹900 / day	367	515	₹900 / day	405	557		
₹1000 / day	359	546	₹1000 / day	407	573	₹1000 / day	450	618		

	20 days		25 days					
Per day Benefit	Up to 45 years (in ₹)	Above 45 years (in ₹)	Per day Benefit	Up to 45 years (in ₹)	Above 45 years (in ₹)			
₹100 / day	50	67	₹100 / day	54	70			
₹200 / day	99	133	₹200 / day	105	139			
₹300 / day	147	199	₹300 / day	159	209			
₹400 / day	196	263	₹400 / day	210	278			
₹500 / day	244	330	₹500 / day	262	347			
₹600 / day	292	396	₹600 / day	315	417			
₹700 / day	341	460	₹700 / day	367	486			
₹800 / day	391	526	₹800 / day	418	555			
₹900 / day	439	592	₹900 / day	471	625			
₹1000 / day	488	657	₹1000 / day	523	694			

| Family Floater Discount



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 are as per the table below (on their respective individual premium):

Plan Limit	Family Floater Discount										
Plati Littii	2nd member	3rd member	4th member	5th member							
5 days	9.00%	12.50%	15.50%	18.25%							
10 days	10 days 6.50%		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 the 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 (Individual Premium) * (5.75% discount) =

₹(186-10.70) = ₹175.31

Child Premium: ₹136 (Individual Premium) * (6% discount) = ₹(136-8.16) =

₹127.84

Total Premium=186+175.31+127.84 = ₹489.15 (exclusive of Goods &

Services Tax)

Premium Loading for Optional Coverage



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- 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.

Maternity Benefit loading will be applicable to the corresponding female member only, if opted.

- 3. **Pre-existing disease cover:** Pre-existing disease loading of 20% on the premium will be applicable to the corresponding family member only.
- 4. Convalescence Benefit

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

Per day Benefit	Convalescence Benefit Amount	Up to 45 years	Above 45 years
₹100 / day to ₹400 / day	₹1000	₹4	₹15
₹500 / day to ₹700 / day	₹1500	₹6	₹22
₹800 / day to ₹1000 / day	₹2000	₹7	₹29

5. Deductible: It is a cost-sharing requirement under this product which states that Generali Central will not be liable for a specified number of days in case of hospitalisation which will apply before any benefits that are payable by the company. There are 3 deductible options that we plan to provide - 1 day, 2 days or 3 days. The discount rates will be applicable as per the table mentioned below, in case you have opted for deductible.

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

The policy is renewable lifelong.

How can you make a claim?

We have a simple claims process, which includes submission of following documents – Completed Sukshma Hospi-Cash 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):



- Hospitalisation for cosmetic treatments, plastic surgery, refractive error corrective procedures, experimental, investigational or unproven procedures or treatments
- 2. Hospitalization 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 and exclusions, please contact our nearest office.

Schedule of Benefits

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

	Option – 5 Days												
	Plans												
Sr. No.	Benefits			В	С	D	E	F	G	н	1	J	
1	Daily Hospital Cash (in INR), maximum up to 5 days			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	
				Optio	nal Ber	nefits							
3	Deductible	1 day / 2 days / 3 days as opted											
4	Maternity Benefit	With 9 months waiting period					Op	otional					
-4	4 Expenses Cover	Without 9 months waiting period					Op	otional					
5	Pre-Existing Disease C	Cover					Op	otional					

	Option – 10 Days												
				Plans									
Sr. No.	Benefits			В	С	D	E	F	G	Н	ı	J	
1	Daily Hospital Cash (in to 10 days	INR), maximum up	100	200	300	400	500	600	700	800	900	1000	
2	Daily ICU Cash (in INR) maximum up to 5 days hospitalisation and max during the policy period	for each kimum up to 10 days	200	400	600	800	1000	1200	1400	1600	1800	2000	
			C	ptiona	l Bene	fits							
3	Deductible		1 day	/ 2 days	s / 3 da	ys as op	oted						
	Maternity Benefit	With 9 months waiting period					Ор	otional					
4	Expenses Cover	Without 9 months waiting period	Optional										
5	Pre-Existing Disease Cover Optional												
	Outing 45 Days												
	Option – 15 Days Plans												
Sr.	-												
No.	Benefits		Α	В	С	D	Е	F	G	Н	I	J	
1	Daily Hospital Cash (in to 15 days	INR), maximum up	100	200	300	400	500	600	700	800	900	1000	
2	Daily ICU Cash (in INR) maximum up to 10 day hospitalisation and madays during the policy	ys for each ximum up to 10	200	400	600	800	1000	1200	1400	1600	1800	2000	
			C	ptional	Benet	fits							
3	Deductible		1 day	/ 2 days	s / 3 da	ys as op	oted						
4	Convalescence Benefit, Fixed amount (in INR) beyond 10 consecutive days will be payable once per Hospitalisation event			1000	1000	1000	1500	1500	1500	2000	2000	2000	
5	Maternity Benefit	With 9 months waiting period					Ор	tional					
5	Expenses Cover	Without 9 months waiting period					Ор	tional					
		Optional											

							Р	lans							
Sr. No.	Benefits		Α	В	С	D	E	F	G	Н	1	J			
1	Daily Hospital Cash (in INI 20 days	R), maximum up to	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			400	600	800	1000	1200	1400	1600	1800	2000			
			0	ptional	Benef	fits									
3	Deductible					1 day /	2 days	/ 3 days	s as opt	ed					
4	Convalescence Benefit, Fixed amount (in INR) beyond 10 consecutive days will be payable once per Hospitalisation event			1000	1000	1000	1500	1500	1500	2000	2000	2000			
5	Maternity Benefit	With 9 months waiting period					Ор	otional							
5	Expenses Cover	Without 9 months waiting period					Ор	otional							
6	Pre-Existing Disease Cove	er					Op	tional							
			0	ption -	- 25 Da	IVS									
						,-	Р	lans							
Sr. No.	Benefits		Α	В	С	D	E	F	G	Н	1	J			
1	Daily Hospital Cash (in INR 25 days		100	200	300	400	500	600	700	800	900	1000			
2	Daily ICU Cash (in INR), su up to 10 days for each ho maximum up to 20 days of period	spitalization and	200	400	600	800	1000	1200	1400	1600	1800	2000			
			0	ptional	Benef	fits									
3	Deductible					1 day /	2 days	/ 3 days	s as opt	ed					
4	Convalescence Benefit, Fixed amount (in INR) beyond 10 consecutive days will be payable once per Hospitalisation event			1000	1000	1000	1500	1500	1500	2000	2000	2000			
5	Maternity Benefit	With 9 months waiting period					Ор	tional							
	Expenses Cover	Without 9 months waiting period					Ор	tional							
6	Pre-Existing Disease Cove	er					Op	tional							

Option - 20 Days

- 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



Premium Benefit Illustration in respect of Polices offered on individual and floater basis

Age of the members insured	Coverage opted on individual basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum insured is available for each member of the family)				Coverage opted on family floater basis with overall Sum insured (Only one sum insured is available for the entire family)			
	Premium (₹)	Sum insured (₹)	Premium (₹)	Discount, if any	Premium after discount (₹)	Sum insured (₹)	Premium or consolidated premium for all members of family (₹)	Floater discount, if any	Premium after discount (₹)	Sum insured (₹)
45 years	288	Daily Hospital cash of ₹ 500/ day for 10 days	288	NA	288	Daily Hospital cash of ₹ 500/ day for 10 days	288		288	Daily Hospital cash of ₹ 500/ day for 10 days
37 years	204	Daily Hospital cash of ₹ 500/ day for 10 days	204	NA	204	Daily Hospital cash of ₹ 500/ day for 10 days	204	13	191	
12 years	204	Daily Hospital cash of ₹ 500/ day for 10 days	204	NA	204	Daily Hospital cash of ₹ 500/ day for 10 days	204	15	189	
10 years	204	Daily Hospital cash of ₹ 500/ day for 10 days	204	NA	204	Daily Hospital cash of ₹ 500/ day for 10 days	204	17	187	
8 years	204	Daily Hospital cash of ₹ 500/ day for 10 days	204	NA	204	Daily Hospital cash of ₹ 500/ day for 10 days	204	19	185	
Total Premium for all members of the family is ₹ 1,104/-, when each member is covered separately.			Total Premium for all members of the family is ₹ 1,104/-, when they are covered under a single policy.				Total Premium when policy is opted on floater basis is ₹ 1,040/			
Sum insured available for each individual is Daily Hospital cash of ₹ 500/day for 10 days			Sum insured available for each family member is Daily Hospital cash of ₹ 500/day for 10 days.				Sum insured available for the entire family is Daily Hospital cash of ₹ 500/day for 10 days.			

Note

- This is just an illustration of premium calculation.
- Premiums may vary with respect to Plan and Sum Insured opted by the insured.
- Premium rates specified in the above illustration are the standard premium rates without considering any loading and/or discounts like Online (Website)
 Sales discount etc.
- In case premium is paid on instalment basis, the loading will be applicable accordingly.
- Premium rates are exclusive of Goods and Services Tax applicable.

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. *T&C apply.

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

Sukshma Hospi-Cash (Micro-Insurance Product), UIN: GCIHMIP22106V032122

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