ADITYA BIRLA CAPITAL
HEALTH INSURANCE

Health Enhance
POLICY WORDING

This detailed document outlines the full terms and conditions of the coverage offered under your health insurance policy, including available coverage, benefits, claim and grievance redressal procedures, exclusions, and other related terms and conditions. It serves as a legal contract between You (Policyholder) and Us (the insurer) which mentions rights, responsibilities, coverage details, and exclusions in clear terms.

Section A. Preamble

This Add-on is a contract of insurance issued by ADITYA BIRLA HEALTH INSURANCE COMPANY LIMITED (hereinafter called the 'We/Our/Us/ Insurer/Company') to the proposer mentioned in the Policy Schedule (hereinafter called the 'You/Your/Policyholder') to cover the person(s) named in the Policy Schedule (hereinafter called the 'Insured Person/s). This Add-on is issued on the basis of the Disclosure to Information Norm, relying on the information provided by You in respect of the Insured Person(s) in the proposal form, the statements and declarations made by You therein, and during any welcome or tele-verification calls with the Company's authorized representatives, and forms part of the Add-on.

1. The Add-on provides additional benefits along with your Base Policy. The coverage, conditions and exclusions are detailed below and should be read together with the Base Policy.

2. This Add-on can only be purchased along with applicable Base Policy and it cannot be bought in isolation or as a separate standalone product.

3. The Add-on covers shall not be applicable in case the same is offered as Optional Cover/Base Cover in Base Policy unless specifically mentioned.

4. This Add-on shall be in force only if opted for it and it is specifically mentioned in the Policy Schedule, and is subject to the receipt of the requisite Premium in full in respect of the Insured Person(s), acceptance thereof by Us, and the terms, conditions, and exclusions specified in the Add-on, the Base Policy, and the Product Benefit Table at Annexure I of this Add-on.

5. In case the Base product undergoes revision, the existing Add-on may be replaced with a subsequently revised version of the product.

Section B. Definitions

The terms defined below shall have the meaning attributed to them wherever they appear in this Add-on. All terms defined in the Base Policy and used in this Add-on in defined form shall have the same meaning as in the Base Policy.

1. **Add-on** means "**Health Enhance**" which comprises of four benefits as specified and mentioned below, which can be opted together or independently and the Add-on document, which is attached to and forms a part of the Base Policy.
   1. Maternity Super
   2. Infinity Cover
   3. Super Credit+
   4. FitForward+

2. **Base Policy** referred to Retail Indemnity Health Insurance Product issued by Us and which is as specified in Annexure I to which this Add-on is attached.

3. **Enhanced Sum Insured** means the additional Sum Insured in addition to the Base Sum Insured, as specified in the Policy Schedule, that is provided as you have opted for this addon, applicable to all your base benefits and subject to the terms & conditions of the base policy.

Section C. Benefits

1. **Maternity Super:**
   a. This Add-on can be opted along with a Base Policy issued by Us having a Policy Period of 3 or 4 or 5 consecutive years. Including Xtend+ rider if opted.
   b. This Add-on can only be opted at the inception of such Base Policy and cannot be opted during the Policy Period of the Base Policy or at renewals or if the policy is ported.
   c. This add-on has three options. Option 1 - Maternity cover, Option 2 – New born cover and Option 3 – OPD Cover
   d. Option 1 is mandatory cover under this add-on. Option 2 and/or Option 3 can be opted along with Option 1. Option 2 and 3 can't be opted as standalone cover
   e. Unless stated otherwise in any base cover of the policy wordings, the Geographical Scope of this Add-on is limited to India only
   f. Super Credit, Super reload, Infinity Cover or any future covers which enhance the Sum insured of the base policy, shall not be applicable to maternity Super add-on.

A. Option 1 – Maternity Cover

On availing this option, Insured Person will be indemnified for In-patient Hospitalisation expenses incurred towards Maternity upto the limits as specified in the Policy Schedule / Product Benefit Table.

Conditions:

a. The Maternity Cover may be claimed under the Policy in respect of eligible Insured Person only once during the lifetime of the Policy for the
i. delivery of a child (Normal Delivery / C-Section) or
ii. Medically Necessary and lawful termination of pregnancy up to maximum 1 pregnancy
b. This cover can be opted if the Insured Person is female and is aged between 18 to 45 Years at time of opting this add-on.
c. This cover is available on Family floater and Multi Individual policy type. Not available if the Policy type is Individual only.
d. This cover is available if, the Insured Person and his / her legally married spouse or Live-in partner are covered under the Base Policy. No other relationship is allowed under this cover.
e. The Sum Insured is on Individual Basis irrespective of Policy type.
f. Delivery of twins or triplets is considered as 1 delivery.
g. Once a claim has been made under this Add-on cover, the cover will cease to exist and cannot be opted again upon subsequent renewals.
h. Maximum liability during the lifetime of the Insured Person: 100% of the Sum Insured under this benefit.
I. Waiting Period applicable for Maternity Cover has been specified under Section D1 below.

Expenses listed below are excluded from this Cover:

a. Expenses incurred in respect of the harvesting and storage of stem cells for any purposes whatsoever
b. Medical Expenses for ectopic pregnancy will be considered under Base cover and not Section (Maternity Cover)
c. Maternity Expenses incurred in connection with the voluntary medical termination of pregnancy during the first 12 weeks from the date of conception
d. All expenses related to a surrogate pregnancy, including the costs of the surrogate mother.
e. Any form of assisted reproduction technology other than the In-vitro Fertilization (IVF) treatment specifically covered under this add-on.
f. Non-medical items, including but not limited to, baby food, diapers, and personal comfort items.
g. Caesarean section performed on maternal request without any underlying medical necessity.

h. Pre-Post hospitalisation expenses

B. Option 2 – New born Cover

On availing this option, In-patient hospitalisation expenses incurred by New born baby towards any illness or Injury will be indemnified upto the limits as specified in the Policy Schedule / Product Benefit Table.

Conditions:

a. **New born** for this benefit means a baby born during the Policy Period and is aged up to 90 days from the date of birth, both days inclusive.
b. Coverage under this benefit is strictly limited to the first ninety (90) days from the date of birth.
c. This benefit is applicable ONLY if the valid delivery claim for the mother under Option 1 – Maternity Cover has been admitted by Us.
d. This benefit ceases on completion of 90 days and any unutilized sum Insured under this benefit will not be carry forwarded.
e. This benefit is applicable on Individual basis irrespective of the Policy type.
f. Coverage beyond ninety (90) days shall require the New born Baby to be endorsed into the Base Policy, subject to the realization of the pro-rata Premium applicable for the remaining Policy Period in case of Family Floater Policy upto the Sum Insured of Base Policy.
g. There is no waiting period applicable for this benefit.
h. New-born benefit will trigger only when the maternity claim is made to the Company. In case, maternity cover is not utilised, new born cover will not get triggered.

Expenses listed below are excluded from this Cover:

a. Any hospitalisation due External Congenital anomaly shall not be covered under this benefit
b. Pre-Post hospitalisation expenses

C. Option 3 – OPD Cover

On availing this option, we will indemnify expenses towards below upto the limits mentioned in the Product Benefit Table / Policy Schedule.

a. Tele consultation (General physician)
b. In-person consultations of Gynaecologist or Paediatrician or both
c. Discounts on scans, in person consultations, pharmacy, diagnostics

Conditions:

a. This cover shall be applicable on Individual basis irrespective of Policy type.
b. The time period allowed for
1. Pre-natal OPD Expenses shall be 9 months (3 trimesters)
2. Post-natal OPD Expenses shall be 90 days post delivery
c. These services can be availed via Our application or through toll free number of Empanelled Service Provider specified in the Policy Schedule on cashless basis in selected cities.
d. Physical outpatient consultations given by a Medical Practitioner either Gynaecologist or Paediatrician on cashless basis only in our network upto the limit mentioned in the Policy Schedule.
e. There is no waiting period applicable for OPD cover. Coverage is available for 12 months from the date of first utilization of the benefit subject to maximum up to Base Policy Tenure.
f. Teleconsultation given by a Medical Practitioner for any telephonic/virtual consultations and recommendations. For this benefit, telephonic/virtual consultation shall mean consultation provided by a Medical Practitioner through various mode of communication like audio, video, online portal, chat or mobile application.
g. Discounts on Pharmacy, Diagnostics, sonography scans, in -person consultations and vaccines all related to maternity only. The discounts will be subject to availability of the service in the respective location where the customer is residing.

What is NOT Covered -

a. Any expenses on consultation, scans, pharmacy and diagnostic which are not related to Gynaecologist or Paediatrician or General Physician or Radiologist are NOT covered
b. Routine Check-ups: Health check-up packages are NOT covered;
c. Any reimbursement facility under OPD cover.

2. Infinity Cover

If this benefit is opted for and specified in the Policy Schedule, an additional layer of Sum Insured, up to Unlimited (Infinity), shall be made available under the Policy

This Unlimited Sum Insured shall become applicable only upon exhaustion of the Base Sum Insured, Super credit / Super credit +, and Super Reload benefits, and shall be subject to the applicable terms, conditions, and waiting periods of the Policy.

Sequence of Utilisation

In the event of a covered claim under the Base Policy, the available covers shall be utilised in the following order:

a. **Base Sum Insured:** The Sum Insured as opted by You under the Base Policy and specified in the Policy Schedule shall be utilised first.
b. **Super Credit:** Upon exhaustion of the Base Sum Insured, any accumulated Super Credit balance, as applicable and available at the time of the claim, shall be utilised next.
c. **Super Credit/Super Credit+:** Upon exhaustion of the Base Sum Insured, any accumulated Super Credit / Super Credit+ balance, as applicable and available at the time of the claim, shall be utilised next.
d. **Infinity Cover:** Upon exhaustion of all of the above, Infinity Cover shall be triggered and claims shall be payable without any upper limit, subject to the terms and conditions of this Policy.

Conditions

a. This benefit can be opted at the time of policy inception, subsequent renewals and portability (subject to underwriting).
b. This benefit can be attached if the Base Product Policy Period is 1 Year / 2 Years / 3 Years / 4 Years and 5 Years.
c. In case of family floater, if opted it is applicable for all Insured persons on floater basis.
d. In case of Individual policy, applicable for the Insured person on individual basis who has chosen the Add-on cover
e. This benefit shall be applicable to Base Policy Plan / Variants / Sum Insured Options as mentioned in Annexure I.
f. Infinity Cover shall apply only to the Base Policy benefits and shall not extend to the below benefits:
   (a) Maternity Cover, whether forming part of the Base Policy or otherwise;
   (b) Global or International Cover, whether forming part of the Base Policy or otherwise; and
   (c) Any other Rider, Add-on, or Optional Benefit, as specified in the Policy Schedule.
g. This Add-on cannot be cancelled mid-term. In the event that You opt out of Infinity Cover on renewal the following shall apply:
   (a) The Infinity Cover layer shall cease to be available with immediate effect from the date of opt-out or from the renewal date, as applicable;
   (b) The Base Sum Insured shall revert to the original Sum Insured as specified in the Base Policy; and
   (c) Any accumulated Super Credit shall be retained and remain available for utilisation in accordance with their respective benefit terms.
h. If this addon is opted for, enhancement of the Base Sum Insured shall not be permitted during the period for which the rider is in force.
i. The Unlimited Sum Insured layer shall be subject to fresh waiting periods, as per the Base Policy, commencing from the date the addon is opted.
j. All other Terms, Conditions, Benefits, and Exclusions of the Base Policy, along with any Riders, Add-ons, and Optional Benefits opted by You, shall remain unaffected and continue to apply.

3. Super Credit+

If this benefit is opted for and specified in the Policy Schedule, we will immediately increase Your Sum Insured by a fixed percentage for the current Policy Year. Furthermore, We will increase Your Sum Insured by a fixed percentage upon every subsequent continuous Renewal with us. This increase applies irrespective of any claims made and paid in the previous Policy Year(s), provided the Policy is renewed with us including grace period without a break. subject to maximum cap as specified in the Policy Schedule against this benefit.
Sequence of Utilization: The Sum Insured for an admissible claim shall be utilised in the following order:

1. Base Sum Insured; followed by

2. Super Credit+ (if applicable under the renewed Policy); followed by
3. Super Reload (if applicable).

Conditions:

a. Individual Policy: In case of an Individual Policy, Super Credit+ shall be added and available individually to each Insured Person (provided credit has accrued).
b. Floater Policy: In case of a Family Floater Policy, Super Credit+ shall be added to the common Sum Insured and available to the family on a floater basis (provided credit has accrued from any family member).
c. Individual to Floater: If Insured Persons covered on an Individual basis (with accumulated Super Credit+) renew their policy on a Floater basis, the Super Credit+ carried forward to the new Policy shall be the lowest one applicable among all the Insured Persons.
d. Floater to Split Policy: If a Floater Policy is split into two or more policies (due to choice or a child attaining maximum age), the accumulated Super Credit+ shall be apportioned to the renewed policies in proportion to the Sum Insured of each renewed Policy.
e. Reduction in Sum Insured: If the Base Sum Insured is reduced at the time of Renewal, the applicable Super Credit+ shall be reduced in the same proportion.
f. Increase in Sum Insured: If the Base Sum Insured is increased at the time of Renewal, the Super Credit+ shall be calculated on the Sum Insured of the last completed Policy Year (i.e., the incremental SI earns credit starting fresh).
g. Waiting Period: A waiting period of 90 days from the effective date of opting for this Add-on shall apply exclusively to the initial 100% enhanced Sum Insured granted in the first year. Coverage for this newly enhanced portion will commence from the 91st day onwards, except for claims arising directly out of an Accident. Subsequent 100% accruals at future renewals will not be subject to this 3-month waiting period. All existing waiting periods applicable to the Base Policy shall continue as normal.
h. Opt-Out and Claw-Back: This Add-on cannot be cancelled mid-term. If You choose to opt-out or remove this Add-on at any subsequent Policy Renewal, the entire accumulated Sum Insured accrued under Super Credit+ shall be instantly clawed back and reduced to zero.
I Maximum Cap: The Maximum Accumulation shall be up to 500% (5X) of the Base Sum Insured.

4. FitForward+

For Base policies where this add-on is attached, the core HealthReturns™ proposition will be enhanced through three additional wellness pillars i.e Move, Eat and Heal. There will be no change in the Base Policy HealthReturn™ i.e Monthly calculation and HealthReturns™ Annual calculation grid.

FitForward+ further encourages the Insured Person(s) to lead a healthy lifestyle and enhances the earning potential of HealthReturns™ to help You earn up to 100% of Your Premium back*. It allows the Insured Person(s) to earn Bonus Active Dayz and Good Health Boosters by maintaining consistency across three pillars: **MOVE, EAT, and HEAL.**

1. MOVE (Bonus Active Dayz)

We recognize that consistency matters. We reward four (4) Bonus Active Dayz every month for maintaining good health even if the daily target is missed.

Eligibility: The Insured Person shall be rewarded four (4) Bonus Active Dayz in a month if:

- The Monthly Average Number of Steps is between 7,500 and 9,999 (on days where the Insured Person could not earn Active Dayz™); OR
- The Insured Person burnt two hundred and fifty (250) calories or more on an average in one exercise session per day at the end of the month (on days where the Insured Person could not earn Active Dayz™).

Condition: Bonus Active Dayz are added to the Active Dayz™ count to help the Insured Person(s) achieve a higher slab in the Monthly Grid. Bonus Active Dayz™ are credited only where the Insured Person(s) has earned less than twenty-three (23) Active Dayz™ in a month.

2. Good Health Boosters (EAT & HEAL)

The Insured Person can earn additional percentage boosters on the earned monthly HealthReturns™.

A. EAT

A 10% Booster shall be rewarded to the earned monthly HealthReturns™ if the Insured Person logs a minimum of two (2) meals per day for at least twenty-one (21) days in a calendar month on Our mobile application.

NOTE: Food Logging must be done through Smartphone Camera capture only (matching the registered number). Gallery uploads are NOT permitted. Food type and entries may be verified by us from time to time to ensure accuracy.

B. HEAL

Sleep is the body's natural recovery mechanism. Adequate sleep duration is essential for physicalrepair, cognitive function, and maintaining a healthy heart rhythm. 15% Booster shall be rewarded to the earned monthly HealthReturns™ if the Insured Person achieves a minimum of twenty-one (21) Heal Days in a calendar month. A Heal Day is defined as successfully recording daily sleep duration between 7 to 8 hours, based on data captured via a linked wearable or any other suitable device.

Note: Please refer to the list of compatible wearable devices with Our mobile application on Our website for the purpose of this benefit.

General Conditions for FitForward+:

1. Bonus Active Dayz are credited after the last day of the month.
2. Boosters are credited post successful validation of the activity.
3. The Total HealthReturns™ earned in a Policy Year (including Monthly, Annual, and Boosters) shall NOT exceed 100% of the Annual Premium*.
4. Good Health Boosters shall apply on the total HealthReturns™ credited in a month, including any annual HealthReturns™ bonus credited in that month.

We will provide and empower the Insured Person with a holistic Health and Wellness ecosystem that integrates digital health tracking, gamified rewards driven by health outcomes, and specialized medical support to drive physical and mental well-being.

This comprehensive cover is available in three Variants: Basic / Elite / Ultra as specified in the Policy Schedule, and comprises four distinct components:

A. FitForward+ Rewards Program –

We will provide an interactive digital engagement program designed to make wellness rewarding by linking incentives directly to measurable health behaviours.

- Measurable Activities: The Insured Person can participate in dynamic health-related activities through Our mobile application, where progress is tracked against specific health metrics (including but not limited to Fitness / Wellness Challenges, Step Games, Health Quizzes, and Gamified Health Tasks).
- Outcome-Based Rewards: Upon the successful completion of measurable health milestones or winning a health and wellness challenge, the Insured Person shall be eligible to earn health and wellness rewards (including but not limited to fitness tools, wearables, sports gear, wellness subscriptions, or health vouchers) listed on Our mobile application / Empanelled Service Provider Network which may change from time to time.

Note: The nature, value, and validity of these rewards shall be subject to the applicable IRDAI Guidelines on Wellness and Preventive features issued from time to time.

B. Fitness Tool (Wearable Device) -

We will provide a Fitness Tool (Wearable Device) corresponding to the chosen Variant to actively assist the Insured Person in monitoring their health parameters:

- Basic Variant: Standard Fitness Tool
- Elite Variant: Advanced Fitness Tool
- Ultra Variant: Premium Fitness Tool

The Fitness Tool (Wearable Device) serves as the primary mechanism to monitor metrics such as Steps, Calories, Sleep, and Stress Levels, directly linked to Our mobile application to facilitate the accumulation of Active Dayz™and HealthReturns™ with FitForward. Furthermore, in the event of a breach of threshold limits for Stress Levels, the Fitness Tool (Wearable Device) shall prompt the Insured Person to undertake the Activ Mind Assessment (as defined below).

Conditions for Fitness Tool -

1. Entitlement Cycle: The Fitness Tool (Wearable Device) shall be provided in the first Policy Year of opting for a specific Variant. It may be provided upon continuous Renewals of the same Variant if opted.
2. Variant Change: If the Insured Person changes their Variant at Renewal (e.g., switches from Basic to Ultra), the entitlement cycle resets, and the Fitness Tool (Wearable Device) corresponding to the new Variant shall be provided.
3. Activation: To ensure delivery of services, the Insured Person must strictly follow the required specifications and processes to activate the Fitness Tool.
4. Exclusion Waiver: The provisions of Exclusion Prosthesis and Devices shall NOT apply to the Fitness Tool provided for this benefit.

C. Mindfulness Cover (Mental Wellbeing) -

We will provide a holistic mental wellness service linked to the monitoring capabilities of the Fitness Tool (Wearable Device). Access to the services below is strictly contingent upon the Insured Person taking Activ Mind Assessment (an online Mental Health assessment) on Our mobile application, triggered by the breach of stress levels identified by the Fitness Tool (Wearable Device). The result will categorize risk on a scale of 'Healthy' to 'Extremely Severe' across 3 parameters: Anxiety, Depression, and Stress.

Risk Level	Intervention Required	Entitlement / Service
Moderate	Needs Intervention & Support	1 Screening followed by 2 Virtual Consultations.
Severe to Extremely Severe	Needs Intervention along with Clinical Support	1 Screening followed by 4 Virtual Consultations.

Conditions for Mindfulness Cover:

1. Cashless Basis: All Services under this component must be availed only on a Cashless basis through Our mobile application.
2. Scope of Support: The scope includes support on grief/bereavement counselling, support on mental health issues arising from rape/gender-based violence, HIV, parenting, and interpersonal relationships.
3. Cumulative Eligibility: The eligibility for screening and consultation sessions is in total for all parameters (Anxiety, Depression, Stress) combined and is NOT per individual parameter.
4. No Carry Forward: There is NO option to carry forward unutilized sessions to the next Policy Year.
5. Clinical Exclusion: This Benefit explicitly excludes support for clinically established mental health conditions including Bipolar Disorder, Schizophrenia, Dementia, Alzheimer's disease, and/or any other pre-diagnosed condition.
6. Advisory Disclaimer: It is agreed that the coaches/experts are NOT providing medical advice and shall NOT prescribe medication. We do not offer any medical, legal, or financial advice under this Benefit.

D. AYUSH Teleconsultation Cover

We will provide Virtual Consultations on an out-patient basis through an AYUSH Medical Practitioner up to a maximum of 4 Virtual Consultations per Policy Year on a Cashless basis through Our mobile application. For the services under this Benefit are strictly limited to the following disciplines: Ayurveda, Unani, Siddha, and Homeopathy.

Conditions for AYUSH Teleconsultation Cover:

1. Cashless Basis: All Services under this component must be availed only on a Cashless basis through Our mobile application as per the availability of the Network Provider / Empanelled Service Provider.
2. No Carry Forward: There is NO option to carry forward unutilized sessions to the next Policy Year.

General Conditions for FitForward Premium:

1. Role of Facilitator & Liability

- Facilitator Role: The Services are provided through Empanelled Service Providers. The Company acts solely as a facilitator and does NOT represent, assure, or endorse the accuracy, completeness, reliability, or quality of the actual services provided.
- Voluntary Choice: The decision to avail the services shall be taken by the Insured Person after careful and independent evaluation, at their sole discretion and risk.
- Liability Exclusion: The Company shall NOT be liable for any actual or alleged errors, omissions, or representations of the Service Providers; any deficiency of services; or any direct, indirect, punitive,

incidental, special, or consequential damages/losses incurred by the Insured Person.
- Force Majeure: We and/or the Empanelled Service Provider will NOT be held liable for non-delivery of Services in case of unforeseen circumstances beyond control including strikes, riots, war, acts of terrorism, regulatory actions, or acts of God.

2. Financial and Policy Impact
- Not a Claim: Utilization of this benefit shall NOT be construed as a claim and shall NOT impact the Base Sum Insured, SuperCredit, or Super Reload.
- Tax Deduction: The Premium for this Optional Cover does NOT qualify for tax deduction under Section 80D, as the services fall within the purview of wellness and preventive features.
- Cancellation: In the event of Policy cancellation within the Free Look period, a refund of the Premium for this Cover will be granted ONLY if the services have not been initiated (i.e., Fitness Tool (Wearable Device) has not been dispatched/delivered). If the Fitness Tool (Wearable Device) has been dispatched/ delivered, NO refund shall be applicable.

3. Waiver
- Waiting Periods, Permanent Exclusions and Co-Payments shall NOT apply to this benefit.

The HealthReturns™ Guide: Earn, Boost with FitForward+ & Spend -
Concept: We believe health is not just about physical exercise; it is about how **You EAT**, how **You MOVE**, and how **You HEAL**. This guide is Your **essential roadmap** to unlocking up to **100% of Your Premium** back as rewards using these three pillars.

I. The Process: 3 Steps to Start Earning HealthReturns™
To unlock rewards, you must first establish Your **Healthy Heart Score™ (HHS).** You can take a Health Assessment on a **Digital** or **Physical** basis.

<u>Step 1: Establish Your Healthy Heart Score™ (HHS)</u>
Option A: Digital Health Assessment (DHA) [Recommended]

You can complete this simple assessment from the comfort of Your home:

1. **Download & Login:** Download the **Activ Health Mobile App** or register on the ABHI Website.
2. **Navigate:** Once logged in, go to the "Health" tab and select **"Book Digital Health Assessment"**.
3. **Answer:** Reply to simple questions related to Your lifestyle and medical history.
4. **Face Scan Setup:** Submit Your responses and proceed to the **Face Scan**. You will need to allow camera access on Your device.
5. **Calibration:** Start the scan and maintain a steady posture. Ensure Your face is placed inside the circle shown on the screen.
6. **The Scan:** Once calibration is complete, **hold the position for at least 30-40 seconds**. This technology determines Your body vitals. Tip: Ensure the surrounding light is bright and consistent.
7. **Results:** Visit the reports section of the App/Website to view Your assessment immediately.
8. **Your Score:** Your **Healthy Heart Score™ (HHS)** (Green, Amber, or Red) will be generated within an hour and remains valid for one year.

Option B: Physical Health Assessment (HA)
If You prefer a medical check-up, you can visit our Network Provider / Empanelled Service Provider:

1. **Book:** Schedule an appointment by contacting Us or via the App/Website.
2. **Visit:** Undergo the MER (Medical Examination Report) tests (BP, BMI, Blood Sugar, Smoking Status, Cholesterol, etc.).
3. **Results:** Your score will be updated once the lab results are processed.

Understanding Your Score: Your assessment generates a color-coded score valid for one year.

HHS	Risk Level	Earning Potential
Green	Low Risk	**High** (Unlocks Maximum Potential)
Amber	Moderate Risk	**Medium** (Unlocks Medium Potential)
Red	High Risk	**Low** (Unlocks Lower Potential)

Tip: If you are not satisfied with your HHS, you may contact Us for another Health Assessment.

Step 2: Earn Active Dayz™
Log Your activity daily to earn **Active Dayz™**. You typically need **13+ Active Dayz™** in a month for the highest rewards as HealthReturns™.

How to earn Active Dayz™:

- **Steps:** Record **10,000 steps** or more in a day.
- **Calories:** Burn **300 calories** or more in one exercise session.
- **Gym/Yoga:** Workout for a minimum of **30 minutes** at **Our** panel of Fitness or yoga centers.
- **Events:** Participate in a recognized marathon, walkathon, or cyclothon (with completion certificate).

Step 3: Boost HealthReturns™ with FitForward
If You miss daily targets, **FitForward** helps You catch up by rewarding consistency.

- **MOVE (+4 Bonus Days):** Maintain a Monthly Average of 7,500 steps (or 250 cal/exercise session) on the days when did you did not earn Active Dayz™.
- **EAT (+10% Booster):** Log 2 healthy meals/day for at least 21 days in a month.
- **HEAL (+15% Booster):** Record 7-8 hours' sleep per day for at least 21 days in a month.

II. Illustration: HealthReturns™ Without FitForward
This section demonstrates the earning potential based purely on physical activity, in case of Individual and Family Floater.

II.A The Basic Warm-Up: Standard Monthly Earning

Illustrative only.
Actual rewards depend upon Policy terms and conditions.

Meet Arjun (Age 29):

- **Healthy Heart Score: Green** (Low Risk)
- **Monthly Premium:** ₹1,000 (Annually ₹12,000)

The Scenario: Arjun is consistent with his workouts. He records his activity daily through his wearable device and synced with Our mobile application.

Arjun's Month with HealthReturns™:

Component	Arjun's Activity	Reward Grid Logic	Resulting Payout
Activity	Recorded 13 Active Dayz™ (10k steps/day).	13+ Active Dayz™ + HHS Green **= 30% Slab**	30% of ₹1,000

II.B. The "Pro" Way: How Arjun Earns 100% HealthReturns™

- **Consistency:** Maintains the above routine for 12 months.
- **Annual Goal:** Unlocking Annual Milestones.

The Scenario: Arjun hits **13+ Active Dayz™** every single month. By the end of the year, he has accumulated a total of **325 Active Dayz™**.

The Math to 100% HealthReturns™:

Component	Arjun's Achievement	Calculation Logic	Reward Value

Monthly Earnings	Maxed out 30% slab for 12 months.	30% x 12 Months	30% of Annual Premium
Annual Milestone 1	Crossed 275 Active Dayz™.	Milestone Bonus	+ 20% Annual Bonus
Annual Milestone 2	Crossed 325 Active Dayz™.	Milestone Bonus	+ 50% Annual Bonus
TOTAL REWARD	**Consistency + Milestones**	**100% Return**	**100% of Premium**

Insight: By hitting **325 Active Dayz™**, Arjun effectively earns back his entire premium to use for future health expenses or for a Premium discount on Renewal.

II.C The Family Logic (Floater Policy)

Meet The Family:

- **Rohan (Husband):** Green Healthy Heart Score™ | Very Active.
- **Sneha (Wife):** Green Healthy Heart Score™ | Active.
- **Aryan (Child, 5 Yrs):** Not Eligible for **HealthReturns™**.

The Scenario: In a Family Floater, the Total Premium is allocated **only to the adults** (Weightage 1:1). The child has **Zero Weightage**, meaning the adults must perform to earn rewards on the child's portion of the premium.

Premium Allocation:

- **Rohan's Share:** ₹1,500 (50% of Total).
- **Sneha's Share:** ₹1,500 (50% of Total).

Family's Month with HealthReturns™:

Insured Person	Activity Level	Reward Grid Logic	Earnings
Rohan	13+ Active Dayz™	**13 Days + HHS Green = 30% (Max Slab).** (30% of his ₹1,500 share)	₹ 450
Sneha	10 Active Dayz™	**10 Days + HHS Green = 18% Slab.** (18% of her ₹1,500 share)	₹ 270
FAMILY TOTAL	**Combined Performance**	**24% Effective Return**	**₹ 720**

III. Illustration: HealthReturns™ With FitForward

FitForward acts as a safety net. It allows You to maintain Your reward level even if You cannot exercise consistently, by rewarding consistency in **Activity (MOVE)**, **Nutrition (EAT)**, and **Sleep (HEAL)**.

III.A Optimizing Rewards: Bridging the Gap

Meet Priya (Age 34):

- **Healthy Heart Score: Green**
- **Monthly Premium:** ₹1,000 (Annually ₹12,000)

The Scenario: Priya has a busy month at work. She only records **10,000 steps** on **10 days**. Normally, this drops her to the lower **18% Slab**. However, she uses **FitForward** to restore her status and boost her earnings.

Priya's month with FitForward:

Component	Priya's Action	FitForward Logic	Resulting Payout
1. Activity	10 Active Dayz™ recorded.	Standard Grid (10 Days).	18% Slab (Risk of lower payout)

2. MOVE	Maintained 8,500 steps average on other days.	**+4 Bonus Active Dayz™**	**Restored to 30% Slab**
		(Total: 14 Active Dayz™)	₹ 300
3. EAT	Logged healthy meals for 21 days.	**10% of HealthReturns™ Earned**	**3%**
		(10% of 30% = 3%)	(+ ₹30)
4. HEAL	Slept for 7.5 hours daily for 21 days	**15% of HealthReturns™ Earned**	**4.50%**
		(15% of 30% = 4.5%)	(+ ₹45)
TOTAL	**Full Ecosystem Usage**	**30% + 3% + 4.5%**	**37.5% HealthReturns™**
			₹ 375

Insight: Instead of earning just **18%** (₹180), Priya utilized FitForward to more than double her earning to **37.5%** (₹375).

III.B The Real Power: 50% HealthReturns™ + Eat & Heal Boosters

Meet Rahul (Age 30):

- **Healthy Heart Score™:** Green
- **Annual Premium:** ₹12,000

The Scenario: Rahul is consistent (19 Active Dayz™/month) and uses the full ecosystem (Move, Eat, Heal).

Rahul's path to 50% HealthReturns™ with Eat / Heal Boosters:

Component	Rahul's Action	Calculation Logic	Resulting Payout (Annualized)
1. Activity	19 Active Dayz™ / month.	Base Monthly Effort (30%).	30% Return
			₹ 3600
2. MOVE	Earns +4 Bonus Active Dayz™.	**Total: 23 Days x 12 = 276 Days.**	**+20% Annual Bonus**
		Unlocks Annual Bonus.	(+ ₹2,400)
(Sub-Total)	(Activity Only)	(30% Monthly + 20% Annual)	**50% HealthReturns™**
			₹ 6000
3. EAT	Logged healthy meals for 21 days for 12 months	**10% of HealthReturns™ Earned**	**5%**
		(10% of 50% = 5%)	(+ ₹600)
4. HEAL	Slept for 7 hours daily for 21 days for 12 months	**15% of HealthReturns™ Earned**	**7.50%**
		(15% of 50% = 7.5%)	(+ ₹900)
TOTAL	Full Ecosystem Usage	**50% + 5% + 7.5%**	**62.5% HealthReturns™**
			₹ 7,500

Insight: By consistently using **MOVE** (to hit the Annual Milestone) and **EAT/HEAL** (to boost his HealthReturns™), Rahul earns back **62.5%** of his premium.

IV. Utilization: Spending Your Health Currency
Your accumulated **HealthReturns™** can be utilized as Health Currency for a wide range of Health and Wellness expenses.

1. **Immediate Health Expenses ("Fund My Health")**
    - **Hospitalization Expenses:** If Your Base Sum Insured, SuperCredit, and SuperReload are exhausted.
    - **Non-Medical Expenses:** Items generally excluded from claims (e.g., gloves, masks, consumables).
    - **Deductible:** Pay the deductible amount (if You have opted for it).
    - **Preventive & Wellness:** Gym memberships, yoga classes, and other wellness activities.

- **AYUSH Treatments:** Expenses incurred more than the limits specified in Your Policy Schedule.
- **Health Wearables:** Purchase of fitness tracking devices to help monitor Your steps and sleep.

2. **Premium Benefits ("Fund My Future")**

- **Renewal Discount:** Avail a **Discount** on Your Renewal Premium.
- **Buy New Insurance:** Purchase another Retail Insurance Policy from the **Company**.

Section D. Waiting Period and Permanent Exclusions

D1. Waiting Periods

Add-on – Maternity Super:

Option 1 - Maternity Cover	0 Month / 3 months / 6 months / 9 months / 12 months / 24 Months
Option 2 – New born Cover	There is no waiting period applicable for this option
Option 3 - OPD Cover	There is no waiting period applicable for this option. Coverage is available for 12 months from the date of first utilisation of the benefit subject to maximum upto Base Policy Tenure.
PED waiting period and Specific disease waiting period	Not Applicable

Add-on 2 – Infinity cover
All waiting period as applicable in the Base Policy.

Add-on 3 – Super Credit+
A waiting period of 90 days from the effective date of opting for this Add-on shall apply exclusively to the initial 100% enhanced Sum Insured granted in the first year. Coverage for this newly enhanced portion will commence from the 91st day onwards, except for claims arising directly out of an Accident. Subsequent 100% accruals at future renewals will not be subject to this 3-month waiting period. All existing waiting periods applicable to the Base Policy shall continue as normal.

Add-on 4 – FitForward+ -
There is no waiting period applicable for FitForward+.

D2. Permanent Exclusions:
The Add-on covers under this Policy shall follow exclusions mentioned in the Base Policy unless otherwise stated and covered in Section C of this policy terms and conditions

Section E. General Terms and Conditions

1. **Cancellation:**

a. The terms and conditions pertaining to the cancellation, as applicable to the Base Policy, shall apply to this Add-on

b. Cancellation of Maternity Super Add-on
The Maternity Super Rider may be cancelled at the request of the Policyholder during the Policy Period. Upon such cancellation, the add-on shall stand cancelled in its entirety, and all optional covers selected under the Add-on shall also stand cancelled.

II. A proportionate refund of the add-on premium, including the premium paid for all optional covers under the add-on, shall be payable only if no claim has been admitted and no service or benefit has been availed under any component of the Maternity Super Add-on from the inception of the add-on until the date of

iii. If any claim has been admitted, or any service or benefit has been availed under any component or optional cover of the Maternity Super Rider, no refund of the Rider premium or the premium pertaining to any optional cover shall be payable upon cancellation of the Rider.

c. Cancellation of Infinity Cover and Super Credit+

This Add-on cannot be cancelled during the Policy period

d. Cancellation of Fitforward+:

In the event of Policy cancellation within the Free Look period, a refund of the Premium for this Cover will be granted ONLY if the services have not been initiated (i.e., Fitness Tool (Wearable Device) has not been dispatched/delivered). If the Fitness Tool (Wearable Device) has been dispatched/ delivered, NO refund shall be applicable.

Section F. claims Process

The process related to claims and grievances will be undertaken as per respective Base Policy except for

Maternity Super – Option 3 OPD Cover which is as specified below

Maternity Super – Option 3 OPD Cover can be availed through the Activ Health App as per the process below:

Step 1: Download and log in to the *Activ Health App* using your registered mobile number.

Step 2: On the home screen, select the *'OPD'* tab.

Step 3: Select *'Maternity Services'* and choose the required service from the available options.

Step 4: Select a convenient *time slot* and preferred *service center/clinic* as listed on the App.

Step 5: Confirm and *book the service*. You will receive a booking confirmation on the App and via SMS.

Important Conditions:

1. Free Consultations: Each member is entitled to "2" complimentary in-person consultations with a Gynecologist or Pediatrician under OPD Maternity benefit.
2. Post Free Limit: Post utilization of 2 free consultations, all subsequent consultations and services will be available at discounted rates as mentioned in the App.
3. Network: Services are available only at Empaneled service centers listed on the Activ Health App on CASHLESS BASIS ONLY.

For any queries or grievances related to above mentioned benefit, please contact our Customer Care.

Toll-Free: 1800-270-7000

Email: care@adityabirlahealth.com