

Comparison of some family health covers

It is high time every retiree Banker is to make a choice for suitable medical health insurance plan for self or family. The important aspects we generally keep in mind are:

- 1) There should be no waiting period for claims may be initial 30 days or few years for Pre-Existing Diseases (PED) or Specified Diseases.
- 2) There should be minimum or no chances of proportionate deduction of other hospital expenses in the claim linked to ceilings on room rent/ICU charges
- 3) How can we maximise the favorable terms of Policy at low costs.

A comparison chart of some of Insurance covers presently available is enclosed for easy reference.

The salient features and limitations of these covers are also summarised, which may help in deciding which cover is more suitable to you.

Comparison of Some Family health Insurance Covers (Group Health Insurance Plans)

S. No.	PARTICULARS	NATIONAL INSURANCE COMPANY (IBA)	NEW INDIA ASSURANCE (KMD)	KMD	KMD + SBI GENERAL INSURANCE
1	Sum Insured – Base + Top up = Total	2+1 = 3 Lacs	3+3 = 6 lacs	4+0 = 4 Lacs	3+3 = 6 Lacs
2	Premium (Self + Spouse)	53613	54100	57717	53603
3	Age Limit	No	No	No	No
4	Pre-hospitalization Expenses	30 Days	30 Days	30 Days	30 Days
5	Post-hospitalization Expenses	90 Days	60 Days	60 Days	60 Days (90 Days SBI)
6	Initial 30 Days Waiting Period	No	No	No	No
7	Pre-existing Diseases Covered (PED)	Yes	Yes	Yes	Yes
8	Room Rent Ceiling Including Nursing Charges and RMO Charges	5000	1% of Sum Insured (Base Policy)	1% of Sum Insured (Base Policy)	1% of Sum Insured (Base Policy) (Non-Deluxe Single AC Room)

					Charges in SBI)
9	ICU Charges Ceiling	7500	2% of Sum Insured (Base Policy)	2% of Sum Insured (Base Policy)	2% of Sum Insured (Base Policy) (Payable on actual basis in SBI)
10	Proportionate Deduction of Other Hospital Expenses if Room Rent / ICU Charges exceeds ceiling	Yes, if exceeds ceiling. Please see remark 2 below.	Yes	Yes	Yes
11	Cash less Facility	Yes	Yes	Yes	Yes
12	Ambulance Charges (per hospitalization)	Non- Cardiac 2500 Cardiac – 5000	2500	2500	2500
13	Day Care Cover	Fully Covered	As per Standard Cover	As per Standard Cover	As per Standard Cover
14	Alternative Medicines Like Ayurvedic, Homeopathy, Unani etc.	Covered	Up to 25% of Sum Insured	Up to 25% of Sum Insured	Up to 25% of Sum Insured (In SBI super top up plan, only Ayush Treatment Covered if Treatment is taken in Government recognized hospitals)
15	Age related Macular Degeneration (ARMD)	Fully Covered	Up to Rs. 30,000	Up to Rs. 30,000	Up to Rs. 30,000
16	Intra Vitreal Injections for eye disorders other than ARMD	Fully Covered	No	No	No
17	Advance Medical Treatments like Laser Surgery, Stem Cell Therapy etc.	Fully Covered	Covered with 50% co-payment	Covered with 50% co-payment	Covered with 50% co-payment (In SBI up to 50% of sum insured)
18	Limits on Diseases	Not mentioned in MOU, please see remark 1 below.	Cataract - 30,000 per eye Angiography - 20,000 Joint Replacement - 1,45,000 per joint	Cataract - 30,000 per eye Angiography - 20,000 Joint Replacement - 1,45,000 per joint	Cataract - 30,000 per eye Angiography - 20,000 Joint Replacement - 1,45,000 per joint
19	Hospitalization arising out of terrorism	Covered	Covered	Covered	Covered

Remarks

- 1) Some ceiling on diseases may always be there in every insurance policy mentioned in the fine prints and not declared in MOU.
- 2) No insurance company pays for luxury in the medical treatment like deluxe room charges etc. proportionate deduction clause applicable if ceiling is exceeded.

IBA Policy (National Insurance Company Ltd)

Salient Features

1. It appears hassle-free as we have been used to it for years in submission of claims.
2. Post hospitalization expenses covered up to 90 days.
3. Room rent and ICU charges payable on an actual basis.
4. No proportionate deductions of other hospital expenses.
5. As related Macular Degeneration (ARMD) fully covered.
6. Intra Vitreal Injections for eye disorders other than ARMD are fully covered.
7. Advance medical treatment fully covered.
8. No specific ceiling on specific diseases.

Limitations

1. Sum insured covered only 3 lacs.
2. If one goes for a higher sum insured of Rs. 2+2 lacs or 2+3 lacs, the cost of premium goes up to Rs. 77,373/- and Rs, 84,468/- respectively.

New India Assurance (KMD) – (Base Policy 3 Lacs + top up 3 Lacs / Base Policy 4 Lacs)

Salient Features

1. Pre-existing diseases (PED) and specified diseases covered from day 1.
2. Day Care treatments permitted as per standard cover.
3. Alternative Medicines are permitted up to 25% of sum insured which is sufficient.
4. The total sum insured is Rs. 6 lacs or 4 lacs, little higher than IBA Policy at the similar cost.
5. Room rent ceiling of 1% of base policy appears satisfactory to minimize the chances of proportionate deduction of other hospital expenses.
6. Pre and Post hospitalization expenses 30 and 60 days respectively.

Limitations

1. Ceiling on some of the diseases – Cataract 30,000 per eye, Angiography 20,000, ARMD 30,000
2. 50% copayment in case of Advance Medical Treatments.
3. Proportionate deduction of other hospital expenses if room rent / ICU charges exceed the ceiling limit.

SBI General Super Top up

Super Top up of SBI or New India Assurance or any other super top up plan will trigger only after one has fully availed the base policy amount. Even if one has no base policy and has taken the SBI Super Top Up plan, it will pay the claim only after threshold limit of Rs. 3 Lacs. Means insured person must bear initial cost of treatment up to Rs. 3 lacs

Salient Features

1. No Age limit.
2. No Base Policy required.
3. Premium is competitive.
4. Pre / Post hospitalization expenses of 30 / 90 days allowed.

5. Room rent – No ceiling. Non deluxe single AC room charges payable.
6. No limits on diseases.
7. No Waiting period of initial 30 days.
8. Preexisting diseases covered from day 1.
9. Cashless facility available.
10. Day care – available as per standard cover

Limitations

1. Threshold limit of Rs. 3 lacs - If one has taken a base policy of Rs. 2 lacs and full claim is paid from base policy, the insured person must bear another 1 lac from his pocket and above that only SBI top up will pay.
2. Lock in period of 3 years – SBI Super top up policy is to be continued for minimum 3 years. If one leaves in between, he will be debarred to enter it again for up to 5 years.

Other Aspects:

- 1) A minimum of Rupees 3 to 5 lacs sum insured is needed for self and spouse which may cover the costs of all major ailments.
- 2) Super Top Up covers are available at lower costs. One may add these covers to get a higher sum insured.
- 3) A minimum Base policy to be taken with a NIL waiting period for claims. In addition to it everyone should opt for another Cheaper Base policy with some waiting period for PED and Specified diseases. These policies are a little costlier compared to Super top up policies but very cheap in comparison to IBA or KMD policies. When waiting period is over one may completely shift to these Cheaper policies and leave the costlier IBA or other policies.
- 4) These Cheaper Base policies have entry age limits may be 65, 70, 75 or 79. As one grows older entry bar may be a problem.
- 5) Room rent/ ICU ceiling include Bed or Room charges +Nursing charges + RMO charges.
- 6) There is a rising trend in the premiums of IBA/KMD policies.
- 7) TOP AND SUPER TOP UP POLICIES ARE SAME.

Sum Insured	Premium 2022-23	Premium 2023-24	% Rise
IBA Policy			
3 lacs base	41,334	53,613 (base 2+1 top up)	29.7%
4 lacs base	57,808	77,373 (base 2+2 top up)	33.8%
KMD Policy			
3 lacs base	35,913	44,891	25%
4 lacs base	46,173	57,717	25%

Make the best choice keeping in view your age, health, risk factor and affordability.

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