PRODUCT DETAILS

Plus

- 1. What is the mode of premium payment? You can pay premiums monthly, quarterly, half-yearly or annually.
- 2. How long is the term of the plan? It could range from a minimum of 5 years to a maximum of 30 years.
- 3. Can I obtain the cover for my family? Yes, you can add your spouse and up to 5 dependant children. Get a separate cover for each family member or as a family floater plan (single sum assured for entire family).
- 4. What is the maximum and minimum age at entry?

	Minimum Age at Entry	Maximum Age at Entry	Age of Maturity
C hildren	06 Months	17 Years	25 Years
Adults	18 Years	60 Years	70 Years

- 5. What is the minimum duration of hospitalisation? 24 hours. Less than 24 hours for 142 specified day surgeries.
- 6. What is the waiting period before the benefit is activated? 90 days from the commencement date of the policy. (This period may vary for day care surgeries and specified diseases and ailments).
- 7. How much will I have to pay? (Male Life)

Example: The expected premium you need to pay if you are covered with	Annual Cover	Monthly Premium		
Ceylinco Life Health Support Plus for	Rs. 400,000	Rs. 2,128		
20 years. (Your age: 40yrs).	Rs. 1,000,000	Rs. 4,084		
(1001 0gc. +0y13).	Rs. 5,000,000	Rs. 10,973		

8. How can you purchase this plan?

Call the Ceylinco Life hotline on **0112 461 461** or contact your Sales Consultant to assist you in setting up your personal reimbursement plan.

* This is an information pamphlet only. Applicable terms and conditons will be detailed in the insurance policy document

CEYLINCO LIFE®

A Relationship For Life™



Ceylinco Life Health Support Plus Support you can count on.

Ceylinco Life Health Support Plus ensures that you are financially supported in case you or one of your family members fall sick or meet with an accident and need hospitalisation, giving you more time to focus on what really matters when the unexpected happens.

CEYLINCO LIFE®

A Relationship For Life™

	Benefit Schedule	Limits in LKR													
		PLAN 01	PLAN 02	PLAN 03	PLAN 04	PLAN 05	PLAN 06	PLAN 07	PLAN 08	PLAN 09	PLAN 10	PLAN 11	PLAN 12	PLAN 13	PLAN 14
	Geographical Coverage	Sri Lanka Only			Sri L	Sri Lanka, India, Singapore, Malaysia & Thailand				Worldwide Coverage (excluding USA and Canada)					
	Basic Annual Sum Insured (per policy year)	200,000	400,000	600,000	800,000	1,000,000	2,500,000	5,000,000	7,500,000	10,000,000	15,000,000	20,000,000	30,000,000	40,000,000	50,000,000
_	Room & Nursing Charges (30% of the Annual Sum Insured Limit) Room & Nursing charges per day	4,000 8,000 12,000 15,000 Standard Single Private AC Room. If Insured opts for a higher room category (Deluxe, Super Deluxe, a flat 25% co-payment on the eligible insurance amount would be applicable (ie. The Company will pay only 75% of the total eligible claim amount under all expenses categories)									ble				
spitalisation	Room, Boarding and Nursing Charges per day in the event of treatment in ICU		As per actuals, maximum limit being 30% of the sum insured												
0	Procedure & Professional Charges (70% of the annual Sum Insured Limit) Surgeon, Anaesthetist, Medical Practitioner, Consultant/Specialist fees, Operation Theatre, Anaesthesia, Blood, Oxygen, Medicines and Drugs, Diagnostics and Laboratory Investigations, etc.	140,000	280,000	420,000	560,000	700,000	1,750,000	3,500,000	5,250,000	7,000,000	10,500,000	14,000,000	21,000,000	28,000,000	35,000,000
	142 Day Care Treatments/Surgeries		Covered as In-patient on Day Care basis. Hospitalisation for an in-patient for less than 24 hours.												
	Pre-hospitalisation and Post-hospitalisation Benefits	Payable 30 days prior to the date of hospitalisation and 30 days after the date of discharge from the hospital up to a combined sub limit of 5% of the Sum Insured. Pre and Post-hospitalisation benefits are payable in case of medical expenses are directly linked to the hospitalisation diagnosis.									Sum Insured.				
	Annual Benefit	10,000	20,000	30,000	40,000	50,000	125,000	250,000	375,000	500,000	750,000	1,000,000	1,500,000	2,000,000	2,500,000
	Daily Hospital Cash Benefit in case of hospitalisation in a non-paying Government Hospital	The benefit is limited to 07 days per policy year													
	Per day Benefit Amount		2,500				5,000				5,000				
	Ambulance Benefit	3,000					6,000				6,000				
	Normal Childbirth Maternity Benefit	Not payable				50,000 50,000									
	Caesarean Childbirth	Not payable				100,000 100,000									
	Health Check-ups	Not payable				As per Actuals subject to a maximum of 1% Basic Annual Sum Insured									
					10,000	25,000	50,000	75,000	100,000	150,000	200,000	300,000	400,000	500,000	
	Auto Refill Benefit	In case of complete exhaustion of the Basic Annual Sum Insured and No Claim Benefit (if applicable), 100% of additional Sum Insured is available, in case the reason for hospitalisation is not related to any of the preceding causes of hospitalisation under this plan. Auto refill benefit is available only once in a policy year and the balance sum insured of the auto refill benefit is not carried forward to the next policy year.													
	No Claim Bonus	25% increase per year up to 100% of the sum assured													
	Organ Donor Expenses	Medical Expenses up to 50% of the Sum Insured is available for an organ donor's treatment for the harvesting of the organ donated, subject to the Insurer accepting the in patient hospitalisation claim .													
	Deductible Sum Insured Options	Opt to bear the initial hospitalisation expenses upto Rs. 50,000, Rs. 100,000 & Rs. 150,000 and receive discounts on your premiums .													