



5 Things to Look for in Your Health

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5 THINGS TO LOOK FOR IN YOUR HEALTH TOP-UP PLANS

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A health top-up plan provides the financial backup you needed after your base plan is exhausted. For example, if your medical expenses of ₹7 lakhs, and your base plan covers only ₹4 lakhs, the remaining ₹3 lakhs will be covered by your top-up plan.

When opting for enhanced health coverage, consider if you want to opt for a top-up or a super top-up plan. For a cost-benefit analysis of both types of plans, you also need to consider the following factors before opting for a supplementary top-up.

1. Sufficient Benefits

Check whether the benefits in the plan provide sufficient coverage for various types of treatments you foresee. It may point to paying higher premiums if the plan won't cover you enough for the treatments when you need it the most. Benefit is one of the crucial features that will provide enhanced coverage.

2. Deductibles

Deductibles are the most important aspect of any top-up plan. These plans come into effect after the medical expenses follow the rule of 'higher the deductible lower the premium'. However, it doesn't make sense choosing a high deductible. It should be close to the sum insured of your primary health insurance policy (<https://www.icicilombard.com/health-insurance/health-booster>).

Another important thing to look for is the structure of your plan.

Example:

If your single medical claim is for ₹6 lakhs with a ₹3 lakh deductible, you will have to pay the deductible amount. If you have two claims of ₹2 lakhs and ₹3 lakhs in a year, they won't be payable under a standard top-up plan as each of them is below the deductible. A super top-up plan (<https://www.icicilombard.com/health-insurance/health-booster>) is beneficial, as it covers the aggregate claim of ₹5 lakhs from your pocket since the amount is less than the deductible amount. For the second claim, it covers the remaining amount. Therefore, you need to decide whether cumulative deductible (super top-up) or single incident deductible (standard top-up) is better for you.

3. Coverage

You can purchase an individual plan if you don't have any dependents. Family floater plan is ideal for married parents, if they have crossed 60 years of age. It reduces the outgo as floater plans consider the maximum age in also determines the coverage for these plans.

4. Pre-existing Disease Cover

Your base plan might not cover for pre-existing diseases; hence it makes sense if you supplementing top-up certain illness due to family history. It usually has a waiting period, or is dependent on renewal.

5. Sub-limits

Sub-limits can restrict the extent of coverage of your policy. It can limit claim amounts with respect to room rent sub-limits on specific types of surgeries and treatments. Make sure your super top-up plan does not have any

Co-payment is another type of sub-limit in the plans. It is a fixed percentage of bill you will have to pay while c

Be clear about these aspects before purchasing a top-up. Check for words like co-pay, limits and deductible in clarify some of the inclusions and exclusions in the policy.

Additionally, features like Daily Hospital Cash, Domiciliary Expenses, Emergency Ambulance and other benef

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