

# Because your health deserves a little extra

Introducing  
ACKO Platinum Super Top-up

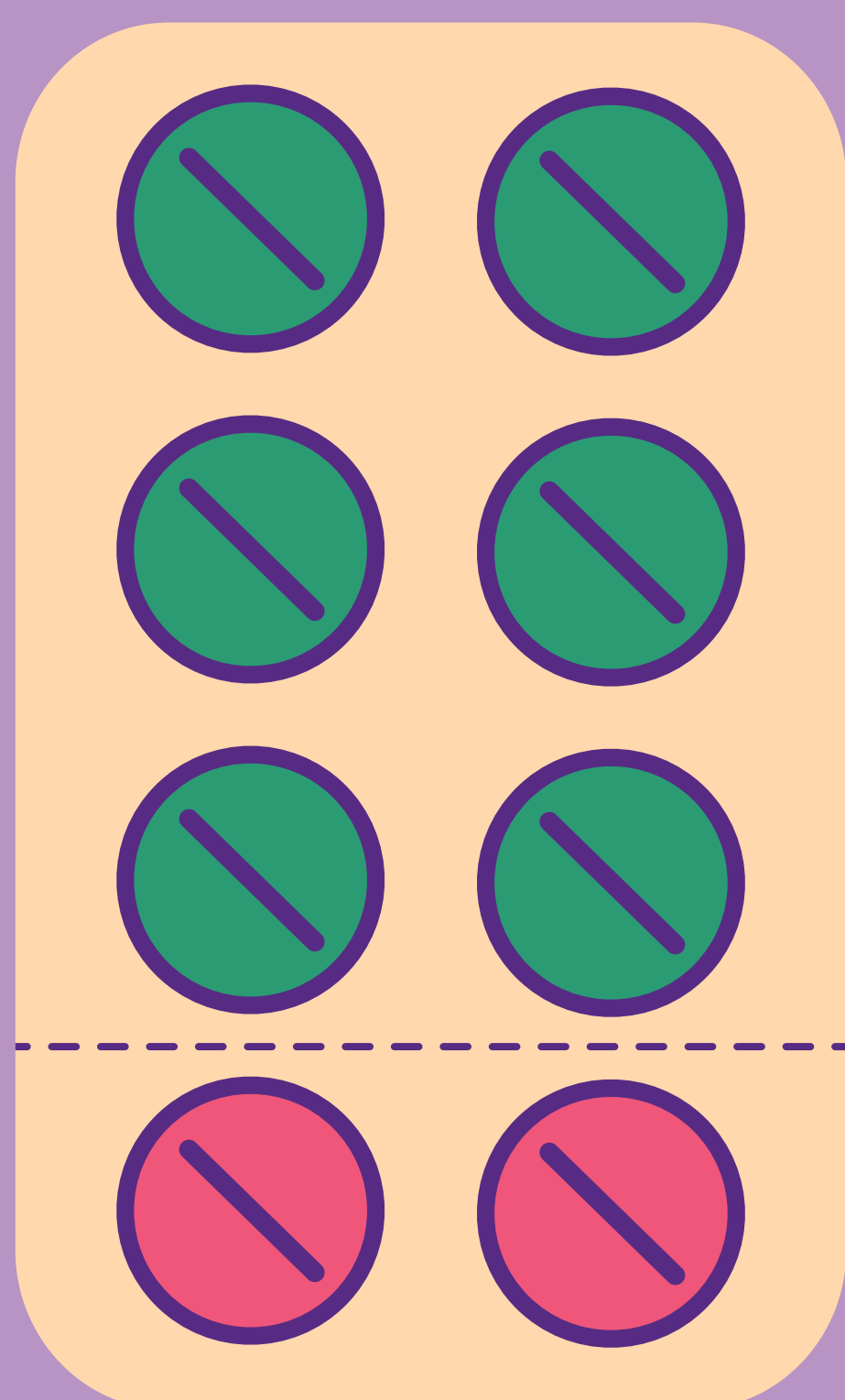


# With ACKO, Welcome A New Era In Healthcare Coverage.

We, at ACKO, believe that maintaining health goals should not come with a limit on health expenses. With an enhanced Sum Insured and comprehensive benefits, the Platinum Super Top-up plan works as an additional safety net and gives you and your family coverage over and above your standard health insurance plan. This means you get a higher cover at a pocket-friendly premium.

So, it's recommended to purchase a Platinum Super Top-up policy with a deductible matching your existing corporate/base policy sum insured.

## How Does It Work?



Say, you opt  
for ₹1 crore sum  
insured with  
a ₹5 lakh deductible.

- Your Platinum Super Top-up plan kicks in after you've spent the deductible and covers expenses up to ₹1 crore.
- You can spend the ₹5 lakh deductible either on your own or through an existing health policy.

# What Makes ACKO Unique




## 100% Hospital Bill Payment

We cover the entire expense of hospitalisation, including the cost of consumables for medical or surgical needs, to ensure zero out-of-pocket expenses for you.

## Zero Waiting Period\*

If your family is healthy with no pre-existing health conditions, this plan covers you from day one.

# Why Choose ACKO Platinum Super Top-up?

 <b>Enhanced Sum Insured</b>	This plan offers sum insured options of ₹10 lakh, ₹25 lakh, ₹50 lakh, ₹1 crore, and unlimited.
 <b>Room Rent Without Restriction</b>	Pick any hospital room of your choice and we will cover the entire cost. In the case of ICU admission, no limits are placed on charges or the number of days.
 <b>Tax Benefit Under Section 80D</b>	You can get up to ₹75,000* on tax deductions under Section 80D of the Indian Income Tax Act.

# What Makes ACKO Even Better

Hospitalisation Expenses 	
Medical Expenses	All hospitalisations approved by doctors and medical practitioners, be it an emergency or pre-planned would be covered.
Multiple Ambulance Trips	Every road ambulance trip for emergency care made between your home and the hospital is covered.
Pre And Post-hospitalisation Expenses	Medical expenses preceding hospitalisation for up to 60 days, and follow-up recovery for up to 180 days are covered.
Day-care Treatment	We cover all treatment procedures that require hospitalisation for less than 24 hours and where you are not required to be under observation for a long time.
Domiciliary Treatment	The plan covers treatments for medical conditions that can be provided at home, either due to health conditions or the non-availability of a hospital bed.
COVID-19 Treatment	All treatment and related hospitalisation due to COVID-19 (any variant) is covered.
Vision Care Treatment*	We cover treatment for any damage to the vision that arises from an accident, correction of eyesight in case of refractive error (greater than or equal to +-7.5 dioptries), and all diseases which can impact eyesight and lead to hospitalisation.
Accident-related Dental Treatment	Any dental treatment or procedures arising from an accident are covered.
Organ Donor Expenses	In case of an organ transplantation, all expenses related to the surgery, hospitalisation incurred by the donor are taken care of.



## Non-hospitalisation Expenses



### Second Opinion Consultations

There may be instances when you may seek a second opinion from a doctor/medical practitioner. In such cases, we will take care of the consultation costs for you.

### Domestic Evacuation (On-site Rescue)

If there's a medical emergency and local hospitals can't provide care, we'll cover the cost to transport the insured member to the nearest suitable hospital.

### Free look period

If the policy doesn't meet your expectations, you have a 30-day free look period to cancel it and receive a full refund of your premium.

### External Congenital Illness

Any treatment for conditions that are present since birth in a visible and accessible part of the body is covered.

# What Is Not Covered

<b>Maternity</b>	The cost of hospitalisation related to childbirth is not covered. However, treatment for ectopic pregnancy is covered in case of miscarriage due to an accident.
<b>OPD Doctor Consultations</b>	OPD visits to the doctor, without hospitalisation, are not covered.
<b>Worldwide Emergency Hospitalisation</b>	Medical services for any unexpected medical emergency which happens while you are travelling outside India are not covered in the plan.
<b>Infertility</b>	The cost of procedures undertaken to treat infertility are not covered
<b>Bariatric Surgery</b>	Expenses incurred on treating weight gain through bariatric surgery and procedures are not covered. However, we provide coverage for life-threatening cases.
<b>Cosmetics Procedures</b>	The cost of plastic surgery or cosmetic procedures that are not seen as life-threatening or medically necessary are not covered.

# Why 14 lakh customers love ACKO



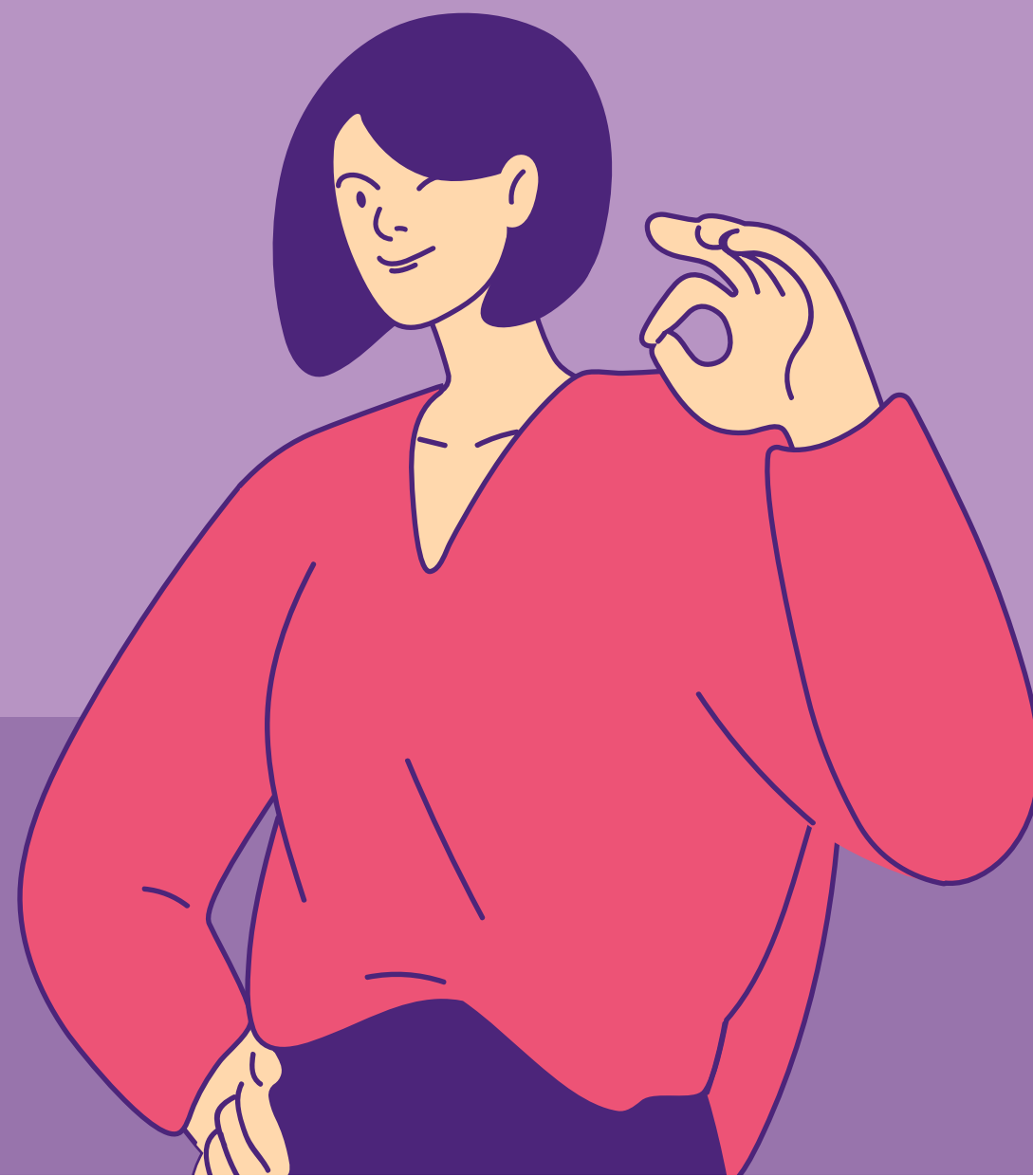
Access To 11,500+ Network Hospitals

We have partnered with over 11,500+ hospitals across the country. You can be at ease and access cashless medical treatment in any of these network hospitals. And we will follow up on the insurance claims and settle the bills directly with the hospital.



96% Claims Settlement Ratio\*

In case of hospitalisation, we ensure that you can concentrate on getting better, and leave all the claim-related worries to us. Our Claim Settlement Ratio is the result of our super-easy, stress-free, and quick claim processes.





# How To File Your Claim

## Cashless Claim

You can make a cashless claim in any of the ACKO network hospitals. Use the ACKO app to locate a network hospital in your area.

Here are a few things to remember when making a cashless claim on the Platinum Super Top-up plan:

- If you spent the deductible through an existing health insurance policy, submit the claim settlement letter, payment receipts, or discharge summary with final bills for previous claims in the policy year.
- If you spent the deductible out of pocket, submit the payment receipts or the discharge summary with final hospital bills.

## Simple steps to raise a cashless claim

- Visit the TPA/ Insurance/ Billing department of the network hospital and inform them about the cashless claim
- Show your ACKO ecard at the TPA desk
- The TPA desk will give you a Cashless Request Form to fill
- Provide the filled form and any necessary documents as requested by TPA desk
- The TPA desk forwards the Cashless Request Form to our service partner
- Once we receive all documents, our service partner will process the form and respond back to the hospital within 60 minutes.
- Once the treatment is over, we will settle the bill directly with the hospital.
- Pay any remaining charges (if applicable) that are not covered to get a quick discharge





## Reimbursement Claim

Filing a reimbursement claim is simple. You can raise a claim for procedures carried out in any hospital, even those outside ACKO network hospitals, as long as they are registered with government bodies. We ensure that your claim is processed within 5 days.

### Reimbursement claims can be raised using the ACKO app

- Open the ACKO app and click on 'Register claim'
- Click on the 'You & your family' option to select your health policy
- Click on 'Reimbursement' option
- Enter the required details of the hospitalisation
- Upload the required documents and fill in the account details (bank account number, IFSC code) for payment transfer
- Submit the claim
- You can track the claim status in the app
- We will review the claim and keep you updated regarding any additional information/documents required
- Once we have assessed all the documents, we will make the appropriate payment to the beneficiary account within 5 days

### Documents required for a reimbursement claim

- Scanned copy of the original consolidated final bill with the breakup of costs
- Scanned copy of original pharmacy bill
- Scanned copy of original hospital discharge summary
- Scanned copy of original payment receipts
- Diagnostic reports, investigation reports, consultation papers, and prescriptions
- Scanned copy of KYC documents

The advertisement contains only an indication of the covers offered. Benefits may vary according to the plan opted for. For more details on Risk Factors and exclusions, please read the [policy wording](#) carefully before concluding a sale. 96% claim settlement ratio is for health insurance business for FY:2024-25. 2 Year specific disease waiting period waived off, except for a 2-year waiting period applicable to cataract and arthropathies only for member age >50 years. Tax deductions under Section 80D are as per applicable provision of the Act (including any amendments thereto) and are subject to changes in the tax laws.

Have a question as you go? We've got team members standing by to help. Call us at 1800 266 2256.

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