



IFFCO-TOKIO GENERAL INSURANCE CO. LTD

Regd. Office: IFFCO Sadan, C-1, Distt. Centre, Saket, New Delhi-110017

OVERSEAS POLICY FOR PRAVASI BHARATIYA

UIN: IFFTIO P22219V012122

Policy Wording

PREAMBLE

This Policy is evidence of the contract between You and Us. The Proposal along with any written statement(s), declaration(s) of Yours for the purpose of this Policy forms part of this contract.

This Policy witnesses that in consideration of Your having paid the premium for the period stated in the Schedule, We will indemnify/pay to You/ Insured person or Your/ his/ her legal representative, as the case may be, in respect of events occurring during the Period of Insurance in the manner and to the extent set-forth in the Policy including endorsements. All the terms, conditions, provisions, and exceptions of this Policy in so far as they relate to anything to be done or complied with by You and/or Insured Person need to be complied with.

The Schedule shall form part of this Policy and the term Policy whenever used shall be read as including the Schedule.

Any word or expression to which a specific meaning has been attached in any part of this Policy or of Schedule shall bear such meaning whenever it may appear.

The Policy is based on the information given to Us about You/ Insured Person pertaining to the risk insured under the Policy and the truth of this information shall be condition precedent to Your or the Insured Person's right to recover under this Policy.

DEFINITION OF WORDS

1. Accident/Accidental: -

It means sudden, unforeseen and involuntary event caused by external, visible and violent means.

2. Any One Illness: -

Any one illness means continuous period of illness and includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment was taken.



3. AYUSH Treatment

It refers to the hospitalization treatments given under 'Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems.

4. AYUSH Hospital:

An AYUSH Hospital is a healthcare facility wherein medical/surgical/para-surgical treatment procedures and interventions are carried out by AYUSH Medical Practitioner(s) comprising of any of the following:

- a. Central or State Government AYUSH Hospital or
- b. Teaching hospital attached to AYUSH College recognized by the Central Government/Central Council of Indian Medicine/Central Council for Homeopathy; or
- c. AYUSH Hospital, standalone or co-located with in-patient healthcare facility of any recognized system of medicine, registered with the local authorities, wherever applicable, and is under the supervision of a qualified registered AYUSH Medical Practitioner and must comply with all the following criterion:
 - i. Having at least 5 in-patient beds;
 - ii. Having qualified AYUSH Medical Practitioner in charge round the clock;
 - iii. Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out;
 - iv. Maintaining daily records of the patients and making them accessible to Our authorized representative.

5. Disease: -

It means a condition affecting the physical wellbeing and health of the body having a defined and recognized pattern of symptoms that first manifest itself in the Period of Insurance and which requires treatment by a Medical Practitioner.

6. Domiciliary Hospitalization: -

It means medical treatment for an illness/disease/injury which in the normal course would require care and treatment at a hospital but is actually taken while confined at home under any of the following circumstances: -

- i) the condition of the patient is such that he/she is not in a condition to be removed to a hospital, or
- ii) the patient takes treatment at home on account of non-availability of room/bed in a hospital.

7. Emigrant: -

It means any citizen of India who intends to emigrate or emigrates or has emigrated but does not include:



- i) a dependent of the Emigrant, whether such dependent accompanies that Emigrant or departs subsequently for the purpose of joining that Emigrant in the country to which that Emigrant has lawfully emigrated
- ii) any person who has resided outside India at any time after attaining the age of eighteen years, for not less than three years, or the spouse or child of that person.

8. Emigrate/Emigration: -

It means the departure out of India of any person with a view to taking up employment with or without assistance of a recruitment agent or employer in any country or place outside India.

9. Employer/Sponsor:-

It means any person or institution or concern, providing or offering to provide employment in any country or place outside India.

10. Finalization of the Insurance Contract: -

It means that

- a) The Insurance Policy must be concluded prior to the trip abroad by means of the Proposal Form provided for this purpose. Insurance Policies that are taken after the commencement of the trip are deemed to be invalid.
- b) The Insurance Policy comes into effect when the Insurance Policy Schedule is issued, which will be done only on acceptance of the Proposal by Us and payment of the full premium by You.

11. Grace Period

It means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue the policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.

12. Hospital/Nursing Home: -

It means any institution (within India or within the country of employment of Insured Person) established for in-patient care and day care treatment of disease/ injuries and which has been registered as a Hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act, 2010 or under the enactments specified under Schedule of Section 56(1) of the said Act, or complies with all minimum criteria as under:

- has Qualified Nursing staff under its employment round the clock.



- has at least ten in-patient beds in those towns having a population of less than ten lakhs and fifteen inpatient beds in all other places.
- has qualified Medical Practitioner(s) in-charge round the clock.
- has fully equipped Operation Theatre of its own where Surgical procedures are carried out.
- maintains daily records of patients and shall make these accessible to Our authorized personnel.

Note: For Hospitalization in India, any make-shift or temporary hospital permitted temporarily by Central/ State Government and allowed by the IRDAI under specific situations shall also be regarded as a hospital.

For hospitalization outside India, the Hospital/ Nursing home has to be registered with the respective local legal/Government authorities and are not required to follow the Act described above.

13. Hospitalization: -

It means admission in a Hospital for a minimum period of 24 (Twenty-four) consecutive “In-patient Care” hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 (Twenty-four) consecutive hours.

14. Injury: -

It means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

15. Insured Person: -

It means the person(s) proposed for insurance coverage with Us by You for whom the appropriate premium has been paid, on the condition that the permanent place of residence of such person(s) is in Republic of India and such persons are named in the Schedule lodged with Us by You.

16. Maternity expenses: -

It means

- a) medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization);
- b) expenses towards lawful medical termination of pregnancy during the policy period.

17. Medical Practitioner: -



It means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of the license. The registered Medical Practitioner should not be the Insured or close family member.

For outside India, the Medical Practitioner has to be registered by appropriate legal authorities of the concerned country and the term Medical Practitioner would include Physician, Surgeon and Specialist.

18. Migration

It means, the right accorded to health insurance policyholders (including all members under family cover and members of group Health insurance policy), to transfer the credit gained for pre-existing conditions and time bound exclusions, with the same insurer.

19. Period of Insurance: -

It means the period from the commencement to the end of the insurance cover and this duration is for a minimum period of two/ three years, as opted by the Insured and shown on the Schedule of the Policy. The Insurance policy is renewable after the end of this policy, and during the period of Insurance contract.

- a) Commencement of the Insurance Cover: The Insurance Cover begins on the inception date as specified in the Policy Schedule, but not before Finalisation of the Insurance Contract and not before the Insured Person first boards the mode of transportation by which it is intended that he/she shall finally leave India for the overseas journey, so long as that is within 14 days of inception date as mentioned in the Schedule.
- b) Validity of the Insurance Cover: The insurance shall remain valid irrespective of change of employer or the Insured's location during the policy period. The insurance shall also remain valid during the visit of Insured to India or any third country during the currency of Insurance policy.
- c) End of the Insurance Cover: The Insurance Cover terminates (i) with the end of the expiry date as specified in the Policy Schedule or (ii) with the end of the employment contract with the Employer for whom he/she had gone abroad. Moreover, if the insured person comes back to India finally, even before the expiry of Contract period with the employer, the coverage of policy will also expire.

20. Permanent Total Disablement: -



It means the bodily injury, which as its direct consequence immediately and/or in foreseeable future, will permanently, totally and absolutely prevent the Insured Person from engaging in any kind of occupation.

21. Policy: -

It means the Policy wording, the Schedule and any applicable Endorsement or memoranda. The Policy contains details of the extent of cover available to the Insured Person, what is excluded from the cover and the conditions on which the Policy is issued.

22. Portability

It means the right accorded to an individual health insurance policy holder (including all members under family cover), to transfer the credit gained for pre-existing conditions and time bound exclusions, from one insurer to another insurer.

23. Pre-existing Disease: -

It means any condition, ailment, injury or disease

- a) That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement or
- b) For which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement.

24. Proposal: -

It means any signed proposal by filling up the questionnaires and declarations, written statements and any information including the medical history and Physician's Report and Certificate in addition thereto supplied to Us by You.

25. Protector of Emigrants (POE):-

It means a Protector of Emigrants appointed under section 3 and includes a person authorized under section 5 of the Emigration Act, 1983.

26. Qualified Nurse: -

It means a person holding a certificate of a recognised Nursing Council and/or recognised by appropriate legal authorities in India and/or in countries outside India and who is employed on recommendation of the attending Medical Practitioner.

27. Reasonable and Customary Charges: -

It means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.



28. Schedule: -

It means the latest Schedule issued by Us as part of the Policy. It provides details of the Policy, of the Insured Person and the level of cover the Insured Person has.

29. Sum Insured: -

It means the monetary amount of coverage shown against the Insured Person.

30. Surgery or Surgical Procedure: -

It means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.

31. Waiting Period

It means a period from the inception of this Policy during which specified diseases/treatments are not covered. On completion of the period, diseases/treatments shall be covered provided the Policy has been continuously renewed without any break.

32. We /Our /Us: -

It means IFFCO-Tokio General Insurance Company Limited.

33. You /Your: -

It means the Insured named in the Schedule as proposer of this cover.

COVERAGES

Section 1
Personal Accident

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| If following bodily Injury which solely and directly causes Insured Person's death or permanent total disablement leading to loss of employment abroad, We shall pay to You or Your legal representative the sum(s) set forth in the Schedule as per the Table of Benefits, provided that such bodily injury has been sustained during the period of Insured Person's | We will not be liable for payment of compensation in respect of Injury as a consequence of: - I. Whilst engaging in aviation or ballooning or whilst mounting into, dismounting from or traveling in any aircraft other than as passenger (fare paying or otherwise) in any duly licensed standard type of aircraft. |



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| <p>employment abroad as emigrant.</p> <p>However, the Accident leading to injury may take place anywhere in the world.</p> <p>Note: Certification of accidental death or permanent disability, leading to loss in the employment, by Indian Missions and Posts abroad, shall be accepted by Us. Certification of accidental death/ permanent disability, while in third country, leading to loss in the employment by Indian Mission/Post in that country and in India, certification by concerned Protector of Emigrants shall be acceptable.</p> <p>In such cases, intimation about the accident/ physical injury will be sent to Us within 30 days from the date of such accident/ physical injury. Further, claim has to be filed within 90 days from the date of accidental death/ permanent disability. In case of non-submission of claim documents within 90 days, certificate from the Indian Mission/Post stating that the circumstances were beyond the control of the insured, will be accepted by Us. In case of accidental death/permanent disability in India, certificate from Protector of Emigrants will be accepted.</p> | <p>II. Whilst racing on wheels or horseback, hunting, mountaineering, skiing or ice hockey or being engaged in winter sports.</p> <p>III. Pregnancy or childbirth.</p> <p>IV. Venereal disease or insanity.</p> <p>V. Any compensation for death or permanent disability happening after 12 months of Insured Person having sustained the accidental bodily Injury</p> |
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Table of Benefits

| TABLE OF BENEFITS | PERCENTAGE OF CAPITAL SUM INSURED |
|---|-----------------------------------|
| 1. Death | 100 |
| 2. a) Loss of sight (both eyes) | 100 |
| b) Loss of two limbs | 100 |
| c) Loss of one limb and one eye | 100 |
| 3. a) Loss of sight of one eye | 50 |
| b) Loss of one limb | 50 |
| 4. Permanent Total and absolute disablement | 100 |



Section 2
Transportation and Airfare for Attendant

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| <p>In the event of an accidental death of Insured Person whilst in employment outside India:</p> <ol style="list-style-type: none"> 1. We will reimburse the actual cost of transporting the mortal remains of the deceased back home to India. 2. We will reimburse the additional cost of economy class return airfare and incidental expenses incurred on medicines, food and toiletries for one attendant to accompany the mortal remains from the place of death abroad to back home in India. <p>For both the above expenses, the journey has to be completed through the shortest direct route available.</p> | <p>We will not be liable for:</p> <ol style="list-style-type: none"> 1. Any claim of reimbursement filed with Us after 90 days of completion of the journey or transportation. 2. Any legal or other cost involved in transportation of mortal remains. 3. Any reimbursement claimed without proof of original tickets or receipts for means of transport and conveyance. |

Section 3
Hospitalization expenses

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| <p>We will pay the Reasonable and Customary Charges of Hospitalization expenses actually incurred but upto the limits specified in the Policy Schedule for the following:</p> <p><u>Hospitalization expenses:</u> - In case the Insured Person sustains any Injury or contracts any Disease and upon advice of a Medical Practitioner, he/she has to incur Hospitalization expenses in Nursing Home/Hospital in India or in the country of employment.</p> | <p>We will not be liable for:</p> <ol style="list-style-type: none"> 1. Pre-Existing Diseases(Code- Excl01) <ol style="list-style-type: none"> a) Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 48 months of continuous coverage after the date of inception of the first policy with us. b) In case of enhancement of sum insured the exclusion shall apply afresh to the |



The Hospitalization expenses for the purpose of this Section will include the following expenses: -

1. Room, Board and Nursing expenses as provided in any of the Hospital/Nursing Home.
2. Medical Practitioner, Anesthetist, Consultant fees, Specialist Fees (including consultation through telemedicine as per prevailing Telemedicine Practice Guidelines.
3. Expenses on Anesthesia, Blood, Oxygen, Operation Theatre, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and diagnostic imaging modalities, Dialysis, Chemotherapy, Radiotherapy, Cost of Pacemaker, Artificial Limbs, Cost of Organs and similar expenses.

Modern Treatment Methods and Advancement in Technologies:

The following procedures will be covered (wherever medically indicated) either as in patient or as part of Domiciliary Hospitalization_or as part of day care treatment in a hospital upto 50% of Sum Insured, during the policy period:

- A. Uterine Artery Embolization and HIFU (High intensity focused ultrasound)
- B. Balloon Sinuplasty
- C. Deep Brain stimulation
- D. Oral chemotherapy
- E. Immunotherapy- Monoclonal Antibody to be given as injection
- F. Intra vitreal injections
- G. Robotic surgeries
- H. Stereotactic radio surgeries
- I. Bronchial Thermoplasty
- J. Vaporisation of the prostate (Green laser treatment or holmium laser treatment)
- K. IONM - (Intra Operative Neuro Monitoring)

extent of sum insured increase.

- c) If the Insured Person is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations, then waiting period for the same would be reduced to the extent of prior coverage.
 - d) Coverage under the policy after the expiry of 48 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by us.
2. **First Thirty Days Waiting Period(Code- Excl03)**
- a) Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident, provided the **same** are covered.
 - b) This exclusion shall not, however, apply if the Insured Person has Continuous Coverage for more than twelve months.
 - c) The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently.
3. **Specific Waiting Period: (Code- Excl02)**
- a) Expenses related to the treatment of the following listed conditions, surgeries/treatments shall be excluded until the expiry of 12 months of continuous coverage, as may be the case after the date of inception of the first policy with Us. This exclusion shall not be applicable for claims arising due to an accident.
 - b) In case of enhancement of sum insured the exclusion shall apply afresh to the



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| <p>L. Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.</p> <p>Note</p> <p>1. The expenses that are not covered in this policy are placed under List-I of Annexure-A. The list of expenses that are to be subsumed into room charges, or procedure charges or costs of treatment are placed under List-II, List-III and List-IV of Annexure-A respectively.</p> | <p>extent of sum insured increase.</p> <p>c) If any of the specified disease/procedure falls under the waiting period specified for pre-existing diseases, then the longer of the two waiting periods shall apply.</p> <p>d) The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.</p> <p>e) If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.</p> <p>f) List of specific diseases/procedures</p> <p>12 Months waiting period</p> <p>a) Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia or Fibromyoma</p> <p>b) Hernia, Hydrocele, Congenital Internal Disease.</p> <p>c) Fistula in anus, Piles, Sinusitis</p> <p>d) Choletithiasis and Cholecystectomy</p> <p>4. Any expenses outside the period of actual Hospitalisation as well as incurred outside the Hospital where treatment is taken.</p> <p>5. Circumcision, unless necessary for the treatment of a disease not otherwise excluded or required as a result of accidental bodily Injury, vaccination unless forming part of post-bite treatment and as covered in the Additional Benefit, inoculation.</p> <p>6. Cosmetic or plastic Surgery: Code- Excl08 Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically</p> |
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| | <p>necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.</p> <p>7. Any Maternity Expenses incurred outside India unless the requisite documents are certified by Indian Mission/Post.</p> <p>8. Any Maternity Expenses in respect of more than 2 children.</p> <p>9. Cost of spectacles and contact lens or hearing aids.</p> <p>10. Dental treatment or surgery of any kind, unless requiring Hospitalisation.</p> <p>11. Rest Cure, rehabilitation and respite care- Code- Excl05</p> <p>a) Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:</p> <p>b) Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons.</p> <p>c) Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.</p> <p>12. Treatment of, external congenital Disease or defects or anomalies, venereal Disease or intentional self-Injury.</p> <p>13. Unproven Treatments: Code- Excl16 Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.</p> <p>14. Investigation & Evaluation(Code- Excl04)</p> |
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| | <p>Expenses related to any admission primarily for diagnostics and evaluation purposes. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment.</p> <p>15. Any expense on treatment of Insured Person as outpatient in a Hospital.</p> <p>16. Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons. Code- Excl13</p> <p>17. Hazardous or Adventure sports: Code- Excl09</p> <p>Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.</p> <p>18. Expenses related to any treatment necessitated due to participation as a non-professional in hazardous or adventure sports, including but not limited to, speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports.</p> <p>19. External medical equipment of any kind used at home as post hospitalisation care.</p> <p>20. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a</p> |
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| | <p>medical practitioner as part of hospitalization claim or day care procedure. Code- Excl14</p> <p>21. Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. Code- Excl12.</p> <p>22. Breach of law: Code- Excl10 Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.</p> |
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Section 4
Maternity expenses

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| <p>We will pay the Reasonable and Customary Charges of Hospitalization expenses actually incurred, upto the limit specified in the Policy Schedule for the following:</p> <p><u>Maternity expenses:</u> - In case a woman Insured Person incurs the Hospitalization expenses relating to maternity in Nursing Home/Hospital in India or in the country of employment, arising out of her pregnancy.</p> <p>In case of medical treatment in the country of employment, the maternity benefits would be provided only if the requisite documents are certified by the concerned Indian Mission/Post.</p> | <p>All the exclusions mentioned in Section 3 – Medical Expenses shall be applicable for this Section.</p> |

Section 5



Hospitalization expenses of Insured's Family members in India

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| <p>We will pay the Reasonable and Customary Charges of Hospitalization expenses actually incurred but upto the limits specified in the Policy Schedule for the following:</p> <p><u>Hospitalization expenses of Insured's Family members:</u> - In case a Family member of Insured Person, comprising spouse upto age of 60 years and first two dependent children upto the age of 21 years sustains any injury or contracts any disease, and upon advice of Medical Practitioner, any or all of them have to incur Hospitalization expenses in a Nursing Home/Hospital in India. This benefit is payable provided that a claim has been paid or liability has been admitted by Us under Section 1 of this Policy.</p> <p>The Hospitalization expenses for the purpose of this Section will include the following expenses: -</p> <ol style="list-style-type: none">1. Room, Board and Nursing expenses as provided in any of the Hospital/Nursing Home.2. Medical Practitioner, Anesthetist, Consultant fees, Specialist Fees (including consultation through telemedicine as per prevailing Telemedicine Practice Guidelines.3. Expenses on Anesthesia, Blood, Oxygen, Operation Theatre, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and diagnostic imaging modalities, Dialysis, Chemotherapy, Radiotherapy, Cost of Pacemaker, Artificial Limbs, Cost of Organs and similar expenses. <p>Modern Treatment Methods and Advancement in Technologies:</p> | <p>All the exclusions mentioned in Section 3 – Medical Expenses shall be applicable for this Section.</p> |



The following procedures will be covered (wherever medically indicated) either as in patient or as part of Domiciliary Hospitalization or as part of day care treatment in a hospital upto 50% of Sum Insured, during the policy period:

- A. Uterine Artery Embolization and HIFU (High intensity focused ultrasound)
- B. Balloon Sinuplasty
- C. Deep Brain stimulation
- D. Oral chemotherapy
- E. Immunotherapy- Monoclonal Antibody to be given as injection
- F. Intra vitreal injections
- G. Robotic surgeries
- H. Stereotactic radio surgeries
- I. Bronchial Thermoplasty
- J. Vaporisation of the prostate (Green laser treatment or holmium laser treatment)
- K. IONM - (Intra Operative Neuro Monitoring)
- L. Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.

Note

1. The Hospitalization expenses incurred for treatment of Any One Illness under agreed package charges of the Hospital/Nursing Home will be restricted to 80% of the Sum Insured or actuals, whichever is less.

2. The expenses that are not covered in this policy are placed under List-I of Annexure-A. The list of expenses that are to be subsumed into room charges, or procedure charges or costs of treatment are placed under List-II, List-III and List-IV of Annexure-A respectively.



Section 6
Employment Contingencies Expenses

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| <p><u>Part A – Employment Contingencies Expenses</u> We will pay to You for actual one way economy class airfare to return back home in India by the shortest direct route available and incidental expenses incurred on medicines, food and toiletries on account of the following circumstances: -</p> <ul style="list-style-type: none">i) Insured Person is/has not been received on behalf of employer, when he/she arrives at his/her workplace or destination abroad i.e. employer refuses the job/employment to the Insured Personii) If there is any substantive change in the job/employment contract/agreement to the disadvantage of the Insured Person.iii) If the employment is prematurely terminated within the Period of Insurance for no fault of the Emigrant (Insured Person) for the reasons other than mentioned in Part B of this Section. <p><u>Note:</u> In such cases where the repatriation is arranged by Indian Mission/Post, We will reimburse the actual transportation expenses to the concerned Indian Mission/Post.</p> <p><u>Part B - Reimbursement of Termination Compensation -</u> We will pay to the sponsored recruiting agent, the cancellation charges of visa by employer and other incidental expenses, subject to the maximum of Rs.2,00,000/-, in the event of Your/ Insured person's termination from the employment within six months from the date of appointment, by the foreign employer, on account of -</p> | <p>We will not be liable for any payment, unless the grounds for repatriation are certified by Indian Mission/Post abroad and original air tickets are submitted.</p> |



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| <ul style="list-style-type: none">• Bodily Injury• Contracting any Disease, <p>and You/ Insured person is compelled to return to India.</p> <p>Note: The Indian Recruiting Agent has to produce valid documents in original pertaining to the termination of the Insured person by the foreign employer with a valid and reasonable cause.</p> <p>The Indian recruiting agent submits the proof of payment to the foreign employer on account of cancellation of visa.</p> <p>All the above claims are valid subject to the condition of having these cases registered under the E migrate portal.</p> | |
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Section 7
Repatriation Expenses

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| <p>We will pay to You for actual one way economy class airfare to return back home in India by the shortest direct route available and incidental expenses incurred on medicines, food and toiletries on account of the following circumstances: -</p> <p>Emigrant (Insured Person) falls sick or is declared medically unfit to commence or continue or resume working and the service contract is terminated by the Employer abroad within the first 12 months of commencement of cover under this Policy.</p> <p>Note:</p> | <p>We will not be liable for any payment, unless the grounds for repatriation are certified by Indian Mission/Post abroad and original air tickets are submitted.</p> |



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| In such cases where the repatriation is arranged by Indian Mission/Post, We will reimburse the actual transportation expenses to the concerned Indian Mission/Post. | |
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Section 8
Legal Costs

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| We will pay to You, upto limits specified, in the Schedule in connection with legal expenses incurred by You, in any litigation relating to Insured Person's employment abroad. | We will not be liable for: <ol style="list-style-type: none">1. Any claim unless the actual expenses incurred are certified by Indian Mission/Post abroad.2. Any claim unless the necessity of filing such case is certified by appropriate Ministry of that country. |

Section 9
Loss of Passport

| WHAT IS COVERED | WHAT IS NOT COVERED |
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| We will pay to You upto the Limit specified in the Schedule, for the actual expenses necessarily and reasonably incurred, in connection with obtaining a duplicate or fresh Passport in the event of it being lost or damaged, due to accident or misfortune in the course of his employment abroad. | We will not be liable for: <ol style="list-style-type: none">1. Any loss due to theft, unless it has been reported to the Police through a written complaint within 24 (twenty-four) hours of Your becoming aware of the loss and a formal Police Report is obtained.2. Any claim unless the actual expenses incurred are certified by Indian Mission/Post abroad.3. Any loss due to the Passport being left unattended or forgotten You in a public place or public transport.4. Any loss due to theft from any unattended vehicle unless the vehicle and all the doors, |



| | |
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| | <p>windows and other openings thereof were securely locked.</p> <ol style="list-style-type: none">5. Any loss due to disappearance from Your place of accommodation during the employment unless force was used to gain entry into the said premises.6. Any incidental transportation cost and time delay in obtaining a duplicate or fresh passport.7. Any unexplained loss or mysterious disappearance.8. Any loss due to confiscation or detention by the customs, police or public authorities |
|--|---|

Section 10
Kidnap, Ransom and Extortion

| WHAT IS COVERED | WHAT IS NOT COVERED |
|---|---|
| <p>We will pay upto limits specified in the Schedule, against actual financial losses suffered for paying the ransom demanded against the Insured person's kidnapping or extortion.</p> | <p>We will not be liable for:</p> <ol style="list-style-type: none">1. Any claim attributable to fraudulent, dishonest or criminal act(s) by the Insured person or authorized representative of the Insured person or Insured person (whether acting alone or in collusion with others).2. Any claim unless the person authorizing the Ransom payment had, prior to payment, made every reasonable attempt to determine that the Ransom demand was genuine.3. Any claim unless the occurrence of such an incident and the ransom paid is certified by Indian Mission/Post/POE abroad. |

Note : All claims shall be settled in Indian Rupees at the exchange rate prevailing on the date of settlement of claim or the date of payment of the ransom, whichever is lower.

Section 11



House Burglary Insurance

| WHAT IS COVERED | WHAT IS NOT COVERED |
|---|---|
| We will pay to You upto the Limit specified in the Schedule for any loss to the contents of Your Home in India, directly caused by theft or attempted theft involving violent and forcible entry into or exit from Your Home (including robbery and dacoity), whilst You are abroad for the purpose of your employment. | We will not be liable for: <ol style="list-style-type: none">1. Any loss caused by theft, attempted theft by You or any member of Your family whether as principal or accessory.2. Any damage of Insured Contents situated outside Your Home, unless such Contents are traditionally kept outside but within the boundaries of the Home (e.g. garden furniture). Our maximum liability for any such damage will be Rs.5,000/-3. Legal liability of any kind.4. Any loss directly or indirectly caused following the use of the key of said premises or any duplicate thereof belonging to You or your family, unless such key has been obtained by assault or violence or any threat thereof.5. Any unexplained loss or mysterious disappearance |

Section 12

Education Grant for Children

| WHAT IS COVERED | WHAT IS NOT COVERED |
|---|--|
| We will make a one time payment upto the Limit specified in the Schedule or three times the current annual tuition fee, whichever is lower, towards Education Fund for dependent children, provided that the claim for death is admissible under Section – 1 Personal Accident. | We will not be liable for: <ol style="list-style-type: none">1. Any claim of education benefit for any child (biological or legally adopted) above 23 years of age.2. Any claim if the child was not enrolled under an educational institution at the time of death of the Insured person. |

Section 13



Cremation Ceremony

| WHAT IS COVERED | WHAT IS NOT COVERED |
|--|---|
| We will pay upto the Limit specified in the Schedule for the actual expenses necessarily and reasonably incurred to perform the cremation/last rites of the Insured Person, provided that the claim for death is admissible under Section – 1 Personal Accident. | We will not be liable for: 1. Any claim if the cremation/last rites are performed outside the Republic of India. |

Section 14

Daily Allowance in Case of Hospitalization

| WHAT IS COVERED | WHAT IS NOT COVERED |
|--|---|
| We will pay Rs 1000/- for each day of hospitalization for a maximum of 5 days in the event of You being hospitalized, provided liability is admissible under Section 3 and Section 4 | We will not be liable for any claim if You have been hospitalized for less than 48 hours. |

Section 15

Unpaid Salary Coverage

| WHAT IS COVERED | WHAT IS NOT COVERED |
|---|--|
| We will pay upto a maximum of 6 (six) months of unpaid salary, in the event of You not being paid your monthly wages/ salary by the employer during the course of Your employment abroad for any reason beyond your control. For the purpose of this cover, the payable amount shall be calculated based on the following: i. the net take home last drawn salary or ii. minimum wages applicable in the city of employment for your occupation or iii. net take home salary mentioned on the | We will not be liable for: 1. Entire or any part of the claim which is compensated by any other source against the unpaid salary 2. Any consequential loss. 3. Any claim unless the occurrence of such an incident is certified by the Indian Mission/Post/POE abroad. 4. The Salary for overtime. |



| | |
|---|--|
| <p>employment agreement/other such document</p> <p>Whichever is lower of i),ii),iii.</p> <p>A waiting period of 2(two) months will be applicable for payment of claim.</p> <p>Only one claim is payable in the policy period.</p> | |
|---|--|

SPECIAL PROVISIONS

- 1) Limit of liability: - The maximum limit of liability under this Policy will be Sum Insured/Limit mentioned against each Section/ Sub-section/ part of the Section. Any claim will reduce the Sum Insured/Limit by such claim amount for the remaining Period of Insurance.
- 2) Shortest Direct Routes:- The benefit available under this Policy for transportation and journey cost is payable only by shortest direct route, unless in Our opinion the longer route was undertaken due to contingencies involved and warranted.

GENERAL EXCLUSIONS

(WHAT IS NOT COVERED BY THE WHOLE POLICY)

We will not pay:

1. For any claim relating to events occurring before the commencement of the cover and after the expiry of the cover as described in the Period of Insurance.
2. For any claim if the Insured Person –
 - a) Is travelling against the advice of a physician.
 - b) Is receiving or on a waiting list for specified medical treatment declared in a Medical Practitioner’s Report or Certificate.
 - c) Has received terminal prognosis for a medical condition.
 - d) Is taking part in a naval, military or air force operation, whether in the form of military exercises or war games, or actual engagement with the enemy, whether foreign or domestic.
3. Any claim in the event of war or military action occurring against the country or internal conflict including terrorism in the country to which the Insured Person/Emigrant has gone for the work.
4. Any claim arising after expiry date of passport or visa for Insured Person.



5. For any claim arising out of illness or accident that the Insured Person has caused intentionally, including committing or attempting suicide or as a result of drug addiction, alcoholism or whilst under influence of intoxicating liquor.
6. Any claim that are results of war and warlike occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, insurrection, military or usurped power, active participation in riots, confiscation or nationalisation or requisition of or destruction of or damage to property by or under the order of any government or local authority.
7. For any claim arising from damage to any property or any loss or expense whatsoever resulting or arising from or any consequential loss directly or indirectly caused by or contributed to or arising from:
 - a) Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or
 - b) The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
 - c) Asbestosis or any related sickness or disease resulting from the existence, production, handling, processing, manufacture, sale, distribution, deposit or use of asbestos or products thereof.
8. For any claim relating to any consequential loss
9. For any claim arising in respect of travel by the Insured Person to any country against whom the Republic of India has imposed general or specific travel restrictions, or against whom it may impose such restrictions or any country which has imposed or may impose subsequently such restrictions against travel by a citizen of India to such country.
10. For any claim arising out of Insured Person's attempted engagement in any criminal or other unlawful act.

GENERAL CONDITIONS

(APPLICABLE TO THE WHOLE POLICY)

1. Eligibility: - The Policy covers only those Emigrants who have availed this Policy before leaving India and/ or going to overseas countries on employment visa under Emigration Act, 1983. The benefits under the Policy are available after Finalisation of the Insurance Contract but only during the Period of Insurance.

2. Reasonable Precautions: - You/Insured Person shall take all reasonable precautions to prevent injury, illness, disease and damage in order to minimize claims. Failure to do so will prejudice the Insured Person's claim under this Policy.

3. Validity: - The Policy will be valid only if the Insured Person commences the journey within 14 days from the first day of insurance as indicated in the Policy Schedule.



4. Disclosure of Information: - The Policy shall be void and all premium paid by You to Us shall be forfeited to us, in the event of a misrepresentation, mis-description or non-disclosure of any material fact* by you/policyholder.

*Material facts for the purpose of this policy shall mean all relevant information sought by Us in the proposal form and other connected documents to enable Us to take informed decision in the context of underwriting the risk.

5. Notice and Communication: -

- a. Any notice, direction, instruction or any other communication related to the Policy should be made in writing.
- b. Such communication shall be sent to Our address or through any other electronic modes specified in the Policy Schedule.
- c. We shall communicate with You/ Insured person at the address or through any other electronic mode mentioned in the schedule.

6. Changes in Circumstances: - You must inform Us, as soon as reasonably possible, of any change in information You have provided to Us about You/ Insured Person and/or his/her job, country of employment and/or employer which may affect the insurance cover provided. In case of change in the employer or the country of employment and there is a subsequent claim, the documents proving such change and the sequence of events need to be produced by the Insured/ claimant along with the other claim documents.

7. Waiver of conditions: - No waiver of any terms, provision, conditions and endorsements of this Policy shall be valid unless made in writing and signed by Our authorized official

8. Claim Procedure: -

In the event of a claim, Insured person/ claimant shall submit the below documents in addition to the section wise documents as mentioned below:

- Passport copy
- Copy of employment contracts. If there is a change in the employment, copy of all the employment contracts during the currency of the policy.

(A) Procedure in the event of an Accident or Illness: In the event of an accident or sudden illness, You or the Insured Person shall immediately contact Our office stating the details given on the Policy, but not later than 14 days from date of Accident in case of Accident claims and/or within 7 days from the date of Hospitalisation in case of Hospitalisation claims.

i) Accident Claims: -



An event, which might become a claim under the Policy, must be reported to Us as soon as possible.

In case of death, written notice also of death must, unless reasonable cause is shown, be given before internment/cremation.

In the event of Permanent Disability, written notice thereof must also be given within one calendar month after such disability. A written statement of the claim will be required and a Claim Form will be provided for completion.

All certificates, information and evidence from a Medical Practitioner or otherwise as required by Us shall be furnished by You, Your personal representative/assignee in the manner and form as We may prescribe. In such claims, Your legal representative, nominee, beneficiary will allow Our representative to carry out examination and ascertain details if and when We may reasonably require and in the event of death, get the post mortem examination done in respect of body of Insured Person. In the event of claim in respect of Permanent Disability, the Insured Person shall undergo at his/her expense such operations or treatment as We may reasonably deem desirable.

ii) Hospitalisation Claims: -

A written statement of the claim alongwith a completed claim form must be filed within 30 days from the date of discharge from the Hospital or completion of treatment, except in extreme cases of hardship where it is proved to Our satisfaction that under the circumstances in which You/Insured Person or his/her personal representative were placed, it was not possible for any one of You to give notice or file claim within the prescribed time limit.

You/Insured Person must give the information and evidences from the attending Medical Practitioner/Hospital/Chemist/Laboratory as required by Us in the manner and form as We may prescribe alongwith the following documents –

- i. Discharge Summary
- ii. Hospital Bill & Receipt (Original Only)
- iii. Investigation Reports with supporting prescriptions, certificates
- iv. Investigation Bills (Original Only)
- v. Pharmacy Bills (Original Only) with supporting prescriptions
- vi. Bills including the relevant stickers for Implants
- vii. All previous treatment papers related to Ailment of last 4 years. (In some cases, we may ask for more than 4 years record if required)

In such claims, Our representative shall be allowed to carry out examination and obtain information on any alleged Injury or Disease or Maternity situation requiring Hospitalisation if and when We may reasonably require.



(B) The following documents are required to be submitted in support of claims under different Sections of the Policy:

(i) Personal Accident claims: -

a) Death: -

- a. Police Report,
- b. Post Mortem Report, if conducted
- c. Death Certificate
- d. Report from Indian Mission/Post abroad

b) Permanent Total Disability: -

- a. Medical Reports of the treatment undergone and disability certificate from the Medical Practitioner.

(ii) Transportation claims: -

- a. Death Certificate of the Insured
- b. All necessary proofs substantiating the reason
- c. Transportation bills of the mortal remains

(iii) Airfare for Attendant claims: -

- a. Original air ticket with Boarding pass of the Attendant
- b. Copy of passport
- c. Bills of incidental expenses

(iv) Hospitalisation Expense claims: - The requirements have already been mentioned above under Item 8(A)(ii)

(v) Employment Contingencies claims: -

- a. Original air ticket/ travel vouchers with Boarding pass of the Attendant
- b. Copy of passport
- c. Bills of incidental expenses
- d. Certificate from Indian Mission/Post abroad mentioning the grounds of termination/repatriation.
- e. Letter or correspondence from Employer along with Service Agreement copy.
- f. Valid documents in original pertaining to the termination of the Insured person by the foreign employer with a valid and reasonable cause.
Proof of payment to the foreign employer on account of cancellation of visa.



(vi) Repatriation claims: -

- a. Original air ticket/ travel vouchers with Boarding pass of the Attendant
- b. Copy of passport
- c. Bills of incidental expenses
- d. Certificate from Indian Mission/Post abroad mentioning the grounds of repatriation.
- e. Letter or correspondence from Employer along with Service Agreement copy.

(vii) Legal Cost claims: -

- a. Certificate from Indian Mission/Post abroad in respect of litigation cost incurred.
- b. Lawyer's Certificate
- c. Certificate from the appropriate Ministry of the country abroad in respect of necessity of filing such case.

(viii) Loss of Passport claims: -

- a. Police report,
- b. Certificate from Indian Mission/Post abroad in respect of lost passport and cost incurred to obtain a fresh/duplicate passport.

(ix) Kidnap, Ransom and Extortion claims: -

- a. Certificate from Indian Mission/Post/POE abroad in respect of occurrence of such an incident of kidnapping or extortion.

(x) House Burglary Insurance claims: -

- a. First Information Report and/or Final Police Report,
- b. An inventory of damaged or stolen property detailing the quantity, age, description and the amount of loss claimed for in respect of each item
- c. Purchase bills

(xi) Education Grant for Children claims: -

- a. Certificate from the Educational Institution where the child was enrolled at the time of death of the Insured person.

(xii) Cremation Ceremony claims: -

- a. Documents establishing the funeral/last rites expenses.

(xiii) Daily Allowance in Case of Hospitalization claims: -



- a. Discharge summary from the hospital where You had been admitted alongwith documents mentioned in above under Item 8(A)(i).

(iv) Unpaid Salary Coverage claims: - Certificate from Indian Mission/Post abroad in respect of non-payment of salary, last three months' salary slip or bank account statement from the date of joining of employment as applicable, employment agreement, employer certificate for continuity of job for the period for which salary is unpaid, termination letter (if terminated and salary not paid) or any document required to prove that the Insured was working and salary is not paid.

9. Fraud: -

If any claim made by the insured person, is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the insured person or anyone acting on his/her behalf to obtain any benefit under this policy, all benefits under this policy and the premium paid shall be forfeited.

Any amount already paid against claims made under this policy but which are found fraudulent later shall be repaid by all recipient(s)/policyholder(s), who has made that particular claim, who shall be jointly and severally liable for such repayment to Us.

For the purpose of this clause, the expression "fraud" means any of the following acts committed by You/the insured person or by your/his agent or the hospital/doctor/any other party acting on behalf of the insured person, with intent to deceive Us or to induce Us to issue an insurance policy:

- a) the suggestion, or a fact which is not true and which You/the insured person do/does not believe to be true;
- b) the active concealment of a fact by the insured person having knowledge or belief of the fact;
- c) any other act fitted to deceive; and
- d) any such act or omission as the law specially declares to be fraudulent

We shall not repudiate the claim and / or forfeit the policy benefits on the ground of Fraud, if the insured person / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such misstatement of or suppression of material fact are within the knowledge of the insurer.

10. **Contribution (Not applicable for Section 1, 3, 4 & 5):** - If, when any claim arises, there is in existence any other Insurance Policy covering the same loss/liability, compensation, costs or expenses, We will pay only Our rateable proportion of the claim.

11. Subrogation: -



- a. You shall do or concur in doing or permit to be done everything necessary for the purpose of enforcing any civil or criminal rights and remedies or obtaining relief or indemnity from other parties to which We shall be or would become entitled or subrogated upon Our paying any claim under this Policy, whether before or after indemnification;
- b. You shall not do or cause to be done anything that may cause any prejudice to Our right of Subrogation;
- c. You agree that any recoveries made shall first be applied in making good any sums paid out by or on behalf of Us for the claim and the costs of recovery.

12. **Cancellation:** - We may cancel this Policy at any time on grounds of mis-representation, non-disclosure of material facts, fraud by the Insured Person by sending 30(thirty) days Notice by Registered Post to Your last known address. There would be no refund of premium on cancellation on grounds of mis-representation, non-disclosure of material facts or fraud.

You may cancel the Policy by sending written Notice to Us under Registered Post. We will then allow a refund on following scale, except in cases where a claim has been preferred on Us under the current Policy:

| <u>Period of Cover upto</u> | <u>Refund of Annual Premium rate(%)</u> |
|--|---|
| Upto 1/4th of the total coverage period | 50% |
| Upto 1/2 nd of the total coverage period | 25% |
| More than 1/2 nd of the total coverage period | NIL |

All cancellations will require the prior approval of the concerned area P.O.E.

13. We will not be bound to take cognizance or be affected by any notice of trust, charge, lien, assignment or other dealings with or relating to this Policy. Your receipt or receipt of Insured Person shall in all cases be an effective discharge to Us.

14. **Arbitration:** -

- i. If any dispute or difference shall arise as to the quantum to be paid by the Policy, (liability being otherwise admitted) such difference shall independently of all other questions, be referred to the decision of a sole arbitrator to be appointed in writing by the parties here to or if they cannot agree upon a single arbitrator within thirty days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted



under and in accordance with the provisions of the Arbitration and Conciliation Act 1996, as amended by Arbitration and Conciliation (Amendment) Act, 2015 (No. 3 of 2016).

- ii. It is clearly agreed and understood that no difference or dispute shall be preferable to arbitration as herein before provided, if the Company has disputed or not accepted liability under or in respect of the policy.
- iii. It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon the policy that award by such arbitrator/arbitrators of the amount of expenses shall be first obtained.

15. **Disclaimer Clause:** - If We shall disclaim Our liability for any claim under this Policy and such claim shall not have been made the subject matter of suit in a Court of Law within 12(twelve) months from date of disclaimer, then the claim shall for all purpose be deemed to have been abandoned and shall not thereafter be recoverable under this Policy.

16. **Claim Settlement (provision for Penal Interest):** -

- i. We shall settle or reject a claim, as the case may be, within 30 days from the date of receipt of last necessary document.
- ii. In the case of delay in the payment of a claim, We shall be liable to pay interest to You/the policyholder from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate**
- iii. However, where the circumstances of a claim warrant an investigation in Our opinion, We shall initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document- In such cases, We shall settle or reject the claim within 45 days from the date of receipt of last necessary document.
- iv. In case of delay beyond stipulated 45 days, We shall be liable to pay interest to the policyholder at a rate 2% above the bank rate** from the date of receipt of last necessary document to the date of payment of claim.

***"Bank rate" shall mean the rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due)

Note : This Clause shall always correspond with the amendment(s), if any, to the relevant provisions of Protection of Policyholder's Interests Regulations, 2017.

17. All claims shall be payable in Indian currency.

18. The provisions of this Policy shall be governed by laws of India for the time being in force. The parties hereto unconditionally submit to the jurisdiction of the Courts of India.

19. **Renewal of Policy**



The policy shall ordinarily be renewable subject to the proof of employment except on grounds of fraud, misrepresentation by You/the insured person.

- i. At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without break in policy. Coverage is not available during the grace period.

20. Withdrawal of Policy

The policy terms

- i. In the likelihood of this product being withdrawn in future, We will intimate You/the insured person about the same 90 days prior to expiry of the policy.
- ii. You/ Insured Person will have the option to migrate to similar health insurance product available with Us at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period as per IRDAI guidelines, provided the policy has been maintained without a break.

21. Moratorium Period (Applicable for Section 3 & 5)

After completion of eight continuous years under the policy no look back to be applied. This period of eight years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of 8 continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period, no health insurance claim shall be contestable except for proven fraud and permanent exclusions specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments, deductibles as per the policy contract.

22. Possibility of Revision of Terms of the Policy Including the Premium Rates

We, with prior approval of IRDAI, may revise or modify the terms of the policy including the premium rates. You shall be notified three months before the changes are affected.

23. Nomination

The policyholder is required at the inception of the policy to make a nomination for the purpose of payment of claims under the policy in the event of death of the policyholder. Any change of nomination shall be communicated to Us in writing and such change shall be effective only when an endorsement on the policy is made. In the event of death of the policyholder, We will pay the nominee {as named in the Policy Schedule/Policy Certificate/Endorsement (if any)} and in case there is no subsisting nominee, to the legal heirs or legal representatives of the policyholder whose discharge shall be treated as full and final discharge of its liability under the policy.

24. Provision for Senior Citizens



Separate channel to address the related claims and grievances of senior citizen are mentioned below:

Claims/ Grievance: seniorcitizengrievance@iffcotokio.co.in

Courier: Chief Grievance Officer
IFFCO-Tokio General Insurance Co Ltd
IFFCO Tower, Plot no. 3
Sector -29, Gurgaon - 122001

25. Redressal Of Grievance

In case of any grievance, the insured person may contact Us through:

Website: <https://www.iffcotokio.co.in/customer-services/grievance-redressal>

Toll free: 1800-103-5499

E-mail: support@iffcotokio.co.in

Courier : Chief Grievance Officer
IFFCO-Tokio General Insurance Co Ltd
IFFCO Tower, Plot no. 3
Sector -29, Gurgaon - 122001

Insured person may also approach the grievance cell at any of Our branches with the details of grievance. The list of branches with addresses are available at <https://www.iffcotokio.co.in/contact-us>

If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at chiefgrievanceofficer@iffcotokio.co.in

For updated details of grievance officer, kindly refer the link <https://www.iffcotokio.co.in/customer-services/grievance-redressal>

If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017. The contact details of the Insurance Ombudsman offices have been provided as below

Grievance may also be lodged at IRDAI Integrated Grievance Management System
- <https://igms.irda.gov.in/>

| Office Details | Jurisdiction of Office Union Territory, District) |
|---|--|
| AHMEDABAD - Shri Kuldip Singh Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, | Gujarat, Dadra & Nagar Haveli, Daman and Diu. |

| Office Details | Jurisdiction of Office Union Territory, District) |
|--|--|
| <p>Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@ecoi.co.in</p> <p>BENGALURU - Smt. Neerja Shah Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@ecoi.co.in</p> | Karnataka. |
| <p>BHOPAL - Shri Guru Saran Shrivastava Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@ecoi.co.in</p> | Madhya Pradesh Chattisgarh. |
| <p>BHUBANESHWAR - Shri Suresh Chandra Panda Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in</p> | Orissa. |
| <p>CHANDIGARH - Dr. Dinesh Kumar Verma Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@ecoi.co.in</p> | Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh. |
| <p>CHENNAI - Shri M. Vasantha Krishna Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284</p> | Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry). |

| Office Details | Jurisdiction of Office Union Territory, District) |
|--|---|
| Fax: 044 - 24333664 Email: bimalokpal.chennai@ecoi.co.in | |
| DELHI - Shri Sudhir Krishna Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@ecoi.co.in | Delhi. |
| GUWAHATI - Shri Kiriti .B. Saha Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@ecoi.co.in | Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura. |
| HYDERABAD - Shri I. Suresh Babu Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 67504123 / 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@ecoi.co.in | Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry. |
| JAIPUR - Smt. Sandhya Baliga Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: Bimalokpal.jaipur@ecoi.co.in | Rajasthan. |
| ERNAKULAM - Ms. Poonam Bodra Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@ecoi.co.in | Kerala, Lakshadweep, Mahe-a part of Pondicherry. |
| KOLKATA - Shri P. K. Rath | West Bengal, |

| Office Details | Jurisdiction of Office Union Territory, District) |
|---|--|
| <p>Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@ecoi.co.in</p> | <p>Sikkim, Andaman & Nicobar Islands.</p> |
| <p>LUCKNOW -Shri Justice Anil Kumar Srivastava Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@ecoi.co.in</p> <p>MUMBAI - Shri Milind A. Kharat Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@ecoi.co.in</p> <p>NOIDA - Shri Chandra Shekhar Prasad Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P.-201301. Tel.: 0120-2514250 / 2514252 / 2514253 Email: bimalokpal.noida@ecoi.co.in</p> | <p>Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.</p> <p>Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.</p> <p>State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.</p> |
| <p>PATNA - Shri N. K. Singh Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building,, Bazar Samiti Road,</p> | <p>Bihar, Jharkhand.</p> |



| Office Details | Jurisdiction of Office (Union Territory, District) |
|--|---|
| <p>Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@ecoi.co.in</p> <p>PUNE - Shri Vinay Sah Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@ecoi.co.in</p> | <p>Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.</p> |

Insurance is the subject matter of solicitation

Annexure - A

List I – List of non-payable Items

| Sl. No | Item |
|--------|---|
| 1 | BABY FOOD |
| 2 | BABY UTILITIES CHARGES |
| 3 | BEAUTY SERVICES |
| 4 | BELTS/ BRACES |
| 5 | BUDS |
| 6 | COLD PACK/HOT PACK |
| 7 | CARRY BAGS |
| 8 | EMAIL / INTERNET CHARGES |
| 9 | FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL) |
| 10 | LEGGINGS |
| 11 | LAUNDRY CHARGES |
| 12 | MINERAL WATER |
| 13 | SANITARY PAD |
| 14 | TELEPHONE CHARGES |
| 15 | GUEST SERVICES |
| 16 | CREPE BANDAGE |
| 17 | DIAPER OF ANY TYPE |
| 18 | EYELET COLLAR |
| 19 | SLINGS |
| 20 | BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES |
| 21 | SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED |
| 22 | Television Charges |



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|----|--|
| 23 | SURCHARGES |
| 24 | ATTENDANT CHARGES |
| 25 | EXTRA DIET OF PATIENT (OTHER THAN THAT WHICH FORMS PART OF BED CHARGE) |
| 26 | BIRTH CERTIFICATE |
| 27 | CERTIFICATE CHARGES |
| 28 | COURIER CHARGES |
| 29 | CONVEYANCE CHARGES |
| 30 | MEDICAL CERTIFICATE |
| 31 | MEDICAL RECORDS |
| 32 | PHOTOCOPIES CHARGES |
| 33 | MORTUARY CHARGES |
| 34 | WALKING AIDS CHARGES |
| 35 | OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL) |
| 36 | SPACER |
| 37 | SPIROMETRE |
| 38 | NEBULIZER KIT |
| 39 | STEAM INHALER |
| 40 | ARMSLING |
| 41 | THERMOMETER |
| 42 | CERVICAL COLLAR |
| 43 | SPLINT |
| 44 | DIABETIC FOOT WEAR |
| 45 | KNEE BRACES (LONG/ SHORT/ HINGED) |
| 46 | KNEE IMMOBILIZER/SHOULDER IMMOBILIZER |
| 47 | LUMBO SACRAL BELT |
| 48 | NIMBUS BED OR WATER OR AIR BED CHARGES |
| 49 | AMBULANCE COLLAR |
| 50 | AMBULANCE EQUIPMENT |
| 51 | ABDOMINAL BINDER |
| 52 | PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES |
| 53 | SUGAR FREE Tablets |
| 54 | CREAMS POWDERS LOTIONS (Toiletries are not payable, only prescribed medical pharmaceuticals payable) |
| 55 | ECG ELECTRODES |
| 56 | GLOVES |
| 57 | NEBULISATION KIT |
| 58 | ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC] |
| 59 | KIDNEY TRAY |
| 60 | MASK |
| 61 | OUNCE GLASS |
| 62 | OXYGEN MASK |
| 63 | PELVIC TRACTION BELT |
| 64 | PAN CAN |
| 65 | TROLLY COVER |
| 66 | UROMETER, URINE JUG |
| 67 | AMBULANCE |



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| 68 | VASOFIX SAFETY |
|----|----------------|

List II – Items that are to be subsumed into Room Charges

| SI No. | Item |
|--------|---|
| 1 | BABY CHARGES (UNLESS SPECIFIED/INDICATED) |
| 2 | HAND WASH |
| 3 | SHOE COVER |
| 4 | CAPS |
| 5 | CRADLE CHARGES |
| 6 | COMB |
| 7 | EAU-DE-COLOGNE / ROOM FRESHNERS |
| 8 | FOOT COVER |
| 9 | GOWN |
| 10 | SLIPPERS |
| 11 | TISSUE PAPER |
| 12 | TOOTH PASTE |
| 13 | TOOTH BRUSH |
| 14 | BED PAN |
| 15 | FACE MASK |
| 16 | FLEXI MASK |
| 17 | HAND HOLDER |
| 18 | SPUTUM CUP |
| 19 | DISINFECTANT LOTIONS |
| 20 | LUXURY TAX |
| 21 | HVAC |
| 22 | HOUSE KEEPING CHARGES |
| 23 | AIR CONDITIONER CHARGES |
| 24 | IM IV INJECTION CHARGES |
| 25 | CLEAN SHEET |
| 26 | BLANKET/WARMER BLANKET |
| 27 | ADMISSION KIT |
| 28 | DIABETIC CHART CHARGES |
| 29 | DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES |
| 30 | DISCHARGE PROCEDURE CHARGES |
| 31 | DAILY CHART CHARGES |
| 32 | ENTRANCE PASS / VISITORS PASS CHARGES |
| 33 | EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE |
| 34 | FILE OPENING CHARGES |
| 35 | INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED) |
| 36 | PATIENT IDENTIFICATION BAND / NAME TAG |
| 37 | PULSEOXYMETER CHARGES |

List III – Items that are to be subsumed into Procedure Charges

| SI No. | Item |
|--------|------|
|--------|------|



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| 1 | HAIR REMOVAL CREAM |
| 2 | DISPOSABLES RAZORS CHARGES (for site preparations) |
| 3 | EYE PAD |
| 4 | EYE SHEILD |
| 5 | CAMERA COVER |
| 6 | DVD, CD CHARGES |
| 7 | GAUSE SOFT |
| 8 | GAUZE |
| 9 | WARD AND THEATRE BOOKING CHARGES |
| 10 | ARTHROSCOPY AND ENDOSCOPY INSTRUMENTS |
| 11 | MICROSCOPE COVER |
| 12 | SURGICAL BLADES, HARMONICSCALPEL,SHAVER |
| 13 | SURGICAL DRILL |
| 14 | EYE KIT |
| 15 | EYE DRAPE |
| 16 | X-RAY FILM |
| 17 | BOYLES APPARATUS CHARGES |
| 18 | COTTON |
| 19 | COTTON BANDAGE |
| 20 | SURGICAL TAPE |
| 21 | APRON |
| 22 | TORNIQUET |
| 23 | ORTHOBUNDLE, GYNAEC BUNDLE |

List IV – Items that are to be subsumed into costs of treatment

| SI No. | Item |
|--------|--|
| 1 | ADMISSION/REGISTRATION CHARGES |
| 2 | HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE |
| 3 | URINE CONTAINER |
| 4 | BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES |
| 5 | BIPAP MACHINE |
| 6 | CPAP/ CAPD EQUIPMENTS |
| 7 | INFUSION PUMP- COST |
| 8 | HYDROGEN PEROXIDE\SPIRIT\ DISINFECTANTS ETC |
| 9 | NUTRITION PLANNING CHARGES - DIETICIAN CHARGES- DIET CHARGES |
| 10 | HIV KIT |
| 11 | ANTISEPTIC MOUTHWASH |
| 12 | LOZENGES |
| 13 | MOUTH PAINT |
| 14 | VACCINATION CHARGES |
| 15 | ALCOHOL SWABES |
| 16 | SCRUB SOLUTION/STERILLIUM |
| 17 | Glucometer & Strips |



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|----|-----------|
| 18 | URINE BAG |
|----|-----------|