

**OVERSEAS TRAVEL EASE POLICY (BUSINESS & HOLIDAY)**

**POLICY CLAUSE**

**1. PREAMBLE**

This is Your **OVERSEAS TRAVEL EASE POLICY (BUSINESS & HOLIDAY)**, which has been issued by Us, relying on the information disclosed by You in Your Proposal form (and Medical History and Physician's Report and certificate, if any) which shall be the basis of the contract and shall be deemed to be incorporated therein, and having paid the premium for the insurance specified hereinafter for the number of days stated in the Policy Schedule.

The terms and conditions set out in this Policy and its Schedule will be the basis for any claim and/or benefit under this Policy.

**OPERATIVE CLAUSE:**

Any amount payable under the policy shall be subject to the terms of coverage, exclusions, conditions and definitions contained herein. Maximum liability for any claim shall be the limit set out under each coverage in the policy schedule

**2. DEFINITIONS**

We use certain words in this Policy and Policy Schedule, which have a specific meaning and are shown under the heading of Definitions. They have this meaning wherever they appear in the Policy or Policy Schedule. Where the context so permits, references to the singular shall also include references to the plural and references to the male gender shall also include references to the female gender, and vice-versa in both cases.

**STANDARD DEFINITIONS**

- 2.1 ACCIDENT** means a sudden, unforeseen and involuntary event caused by external, visible and violent means.
- 2.2 CASHLESS FACILITY** means a facility extended by Us where the payments, of the costs of treatment undergone by the Insured Person in accordance with the Policy terms and conditions, are directly made to the network provider to the extent of pre-authorization approved.
- 2.3 CONDITION PRECEDENT** means a Policy term or condition upon which Our liability under the Policy is conditional upon.
- 2.4 CO-PAYMENT** is a cost-sharing requirement under a health insurance policy that provides that the Insured Person will bear a specified percentage of the admissible claim amount. A co-payment does not reduce the Sum Insured.

- 2.5 DEDUCTIBLE** is a cost-sharing arrangement under this policy where the insurer will not be liable for a specified amount in case of indemnity cover and for a specified number of days/ hours. A deductible does not reduce the Sum Insured.
- 2.6 DISCLOSURE TO INFORMATION NORM** The policy shall be void and all premium paid and benefits under the policy shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact.
- 2.7 INJURY** shall mean accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner
- 2.8 MEDICAL ADVICE** means any consultation or advice from a Medical Practitioner including the issue of any prescription or follow-up prescription.
- 2.9 REASONABLE AND CUSTOMARY EXPENSES** mean 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 .
- 2.10 SUBROGATION** means Our right to assume the rights of the Insured person to recover expenses paid out under the Policy that may be recovered from any other source.

#### **SPECIFIC DEFINITIONS**

- 2.11 ACT OF TERRORISM** means an act, including but not limited to the use of force or violence and / or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organization(s) or government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public in fear.
- 2.12 AGE** means completed years at the Effective Date
- 2.13 AIR TRAVEL** shall mean travel by an airline/ aircraft, licensed by the competent authority for carriage of passengers. Air travel means being in or on, or boarding an aircraft for the purpose of flying therein or alighting there from following a flight bound outside India as a fare/non fare paying passenger.
- 2.14 ANY ONE ILLNESS:** means continuous period of illness and it included relapse within 30 days from the date of last consultation with the hospital/Nursing home where treatment is taken.
- 2.15 CHECKED-IN BAGGAGE** means all the baggage (other than Valuables herein defined under 2.45) entrusted by the Insured and accepted by an International Airlines / common carrier for transportation in the same mode of conveyance as the Insured Person travels for which a baggage receipt is issued to the Insured by the Common Carrier. This shall exclude all the items that are carried / transported under a contract of affreightment.
- 2.16 COMMON CARRIER** means any civilian land or water conveyance or Scheduled Aircraft in each case operated under a valid license for the transportation of passengers for hire.

- 2.17 COMPANY/INSURER/WE/OUR/US** means The New India Assurance Co. Ltd.
- 2.18 CONTENTS** means and include any and all items other than Valuables (as defined herein at definition no 2.45) contained in the Checked in Baggage.
- 2.19 DENTAL TREATMENT** is a treatment carried out by a qualified practitioner for immediate relief of dental pain only.
- 2.20 FINANCIAL EMERGENCY** shall mean a situation faced by the Insured wherein the Insured Person accidentally loses all his Money (money, traveller's cheque. However the term shall not include debit/credit cards/any pre/post-paid cards) available with him and needed for proceeding with his next schedule of activities and more particularly proceeding with his Trip further.
- 2.21 HAND BAGGAGE** means luggage and personal possessions, whether belonging to and/ or in the lawful custody of the Insured during the Trip.
- 2.22 HAZARDOUS ACTIVITIES** shall mean any sport or activity, which is potentially dangerous to you whether he/she is trained, or not. Such sport/activity includes but not limited to adventure racing, base jumping, big game hunting, black water rafting, BMX stunt / obstacle riding, bobsleighing / using skeletons, bouldering, boxing, canyoning, caving / pot holing, cave tubing, climbing / trekking / walking over 4,000 meters, cycle racing, cyclo cross, drag racing, endurance testing, hang gliding, harness racing, hell skiing, high diving (above 5 meters), hunting, ice hockey, ice speedway, jousting, judo, karate, kendo, luge, manual labour, marathon running, martial arts, micro-lighting, modern pentathlon, motor cycle racing, motor rallying, mountaineering / rock climbing, parachuting, paragliding / parapenting, piloting aircraft, polo, power lifting, power boat racing, quad biking, river boarding, river bugging, rodeo, roller hockey, rugby, ski acrobatics, ski jumping, ski racing, sky diving, small bore target shooting, speed trials / time trials, triathlon, water ski jumping, weight lifting, wrestling and activities of similar nature.
- 2.23 HIJACK** of a Common Carrier means any unlawful seizure or exercise of control, by force or violence or threat of force or violence and with wrongful intent, in which the Insured is traveling.
- 2.24 INCLEMENT WEATHER** means any severe catastrophic weather conditions which delay the scheduled arrival or departure of a common carrier but not including normal, seasonal/climatic weather changes.
- 2.25 INSURED EVENT** means an event, loss or damage for which the Insured shall be compensated under this Policy.
- 2.26 INSURED TRIP** means any journey undertaken within Period of Insurance and which commences when the passenger boards the aircraft for onward overseas journey and terminates when he disembarks on return to India or the Policy Expiration date whichever is earlier.
- 2.27 INSURED / INSURED PERSON / YOU / YOUR** shall mean the individual whose name are specifically appearing as such in the Policy Schedule.
- 2.28 INSURED'S IMMEDIATE FAMILY** means insured's spouse, parents, children and parents in law.

- 2.29 MEDICAL PRACTITIONER/PHYSICIAN** means a person legally qualified to practice in medicine or surgery including other legally qualified medical practitioner duly licensed by their respective jurisdiction and who is not a member of the insured person's family.
- 2.30 MENTAL, NERVOUS, EMOTIONAL DISORDER** means neurosis, psychoneurosis, psychosis or mental or nervous disease or disorder of any kind.
- 2.31 MINOR CHILD(REN)** is/are the child(ren) of the Insured including stepchild / stepchildren of the Insured and child/children legally adopted by the Insured below the age of 18 years.
- 2.32 MISSED FLIGHT** means the failure of the Insured to travel by a flight being part of the Trip as per the Policy Schedule.
- 2.33 MONEY** means and include coins, currency notes, traveller's cheques and shall not include any form of cheques, banker's cheques, credit cards/ debit cards, bank pay orders or demand drafts.
- 2.34 OVERSEAS SERVICE PROVIDER (OSP)** means such entity or person (s) as may be appointed by the Company from time to time to provide assistance to the Insured in terms of this Policy and the one designated in the Policy Schedule.
- 2.35 PANDEMIC CLAUSE:** A Pandemic as declared by WHO and defined as 'An Epidemic occurring worldwide, or over a very wide area, crossing international boundaries and usually affecting a large number of people'.
- 2.36 POLICY PERIOD** This insurance is valid from the First Day of Insurance or date and time of departure from India, whichever is later, subject to General Condition(s) and expires on the last day of the number of days specified in the policy schedule or on return to India whichever is earlier. Extension of the Period of Insurance is automatic for the period not exceeding 7 days, and without extra charge if necessitated by delay of public transport services beyond the control of the Insured person.
- 2.37 POLICY** means Insured's proposal, the Policy Schedule and other parts of the Policy, Company's covering letter to the Insured and any endorsement attaching to or forming part hereof, either at inception or during the Period of Insurance.
- 2.38 POLICYHOLDER** means the person-named in Policy Schedule to this Policy who executed the Policy Schedule and is responsible for payment of premium(s). Any reference to you, your in the policy clause refers to the policy holder.
- 2.39 PRE-EXISTING DISEASE (PED)** means any condition, ailment, Injury or Illness disclosed by you in the proposal form
- that is/are diagnosed by a Medical Practitioner within 48 months prior to the effective date of the policy issued by Us or
  - 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 or its reinstatement.
- 2.40 SUDDEN AND UNEXPECTED SICKNESS** means an Illness or a disease or pathological condition leading to the impairment of normal physiological function which manifests itself during the

Period Of Insurance and requires emergency medical treatment / Injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the Illness / Injury which leads to full recovery.

- 2.41 SUM INSURED** means the maximum amount of coverage, as specified against each benefit in the Policy Schedule, which represents the maximum liability of the Company for any and all claims made during the policy period under that Benefit.
- 2.42 SURGERY OR SURGICAL PROCEDURE** means manual and/or operative procedure(s) required for treatment of emergency Illness or Injury, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a Hospital by a Medical Practitioner.
- 2.43 TRAVEL AGENT** means an agent, tour operator, or other entity from which the Insured purchases his travel arrangements, and includes all officers, employees, and affiliates of such agent or tour operator.
- 2.44 TRIP** means and includes all journeys abroad undertaken from a port at the Republic of India and return to any first port in Republic of India, except as specifically defined elsewhere under this Policy.
- 2.45 VALUABLES** shall mean and include photographic, audio, video, painting, computer and any other electronic equipment, telecommunications and electrical equipment, telescopes, binoculars, antiques, watches, jewelry and gems, furs and articles made of precious stones and metals.

**3.0 HOW MUCH WE WILL REIMBURSE**

**3.1 MEDICAL EXPENSES**

<b>What is covered</b>	<p>This policy is not a general health insurance policy.</p> <p>Coverage is intended for sudden and unexpected sickness/injury to the insured during his trip abroad within the policy period. The coverages are available upto the limit shown in the schedule. The expenses include consultation charges, hospitalization expenses, pharmacy bills, investigation expenses and local emergency transportation.</p> <p>Provided that the treatment for such Illness and/or Injury shall commence any time during the Policy period immediately after diagnosis of such Illness and/or Injury.</p> <p><b>Medical Evacuation:</b> Expenses for physician ordered emergency medical evacuation, including medically appropriate transportation and reasonably and medically necessary medical care en-route, to the nearest suitable Hospital/location or to hospital in India. This is subject to the following conditions:</p> <ul style="list-style-type: none"> <li>• Insured is critically ill and no medical care is locally available.</li> <li>• Evacuation is necessary as per the advice of the treating physician.</li> </ul>
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<p><b>What is not covered (Exclusions pertaining to this section)</b></p>	<ul style="list-style-type: none"> <li>• Prior approval of the OSP.</li> <li>i. Any claim due to or arising out of Pre-Existing Medical condition/ailment whether declared or not.</li> <li>ii. Treatment of orthopedic, degenerative, oncological (Cancer) diseases unless such treatment pertains to Life Threatening Medical Conditions (as certified by the Medical Practitioner) and/or measures solely taken to relieve acute pain and in any case, excluding chemotherapy or radiotherapy and other adjuvant or supportive treatment expenses.</li> <li>iii. Beauty and/or cosmetic treatment and/or reconstructive plastic surgery in any form or manner.</li> <li>iv. Any treatment related to general debility, convalescence, and rest or recuperation at a spa or health resort, sanatorium, convalescence home or similar institution.</li> <li>v. All expenses relating to pregnancy and childbirth. However, this exclusion does not apply for termination of ectopic pregnancy proved by diagnostic means and is certified to be life threatening by the attending doctor.</li> <li>vi. Routine physical tests and/or examination of any kind not consistent with or incidental to the diagnosis and treatment of any Illness or Injury.</li> <li>vii. Rehabilitation and/or physiotherapy expenses or the cost of prostheses / prosthetics (artificial limbs) or any Services provided by chiropractor.</li> <li>viii. Self-inflicted Illness or Injury or suicidal attempt</li> <li>ix. Participation in hazardous activities—participating in sports activity either as a professional or amateur player.</li> <li>x. Travelling against the advice of a doctor or is receiving or on a waiting list for specified medical treatment.</li> <li>xi. Any travel which is for the purpose of obtaining medical treatment.</li> <li>xii. Claim amount upto the deductible stated in the policy Schedule. The deductible shall apply for each insured event and shall be borne by the Insured Person.</li> <li>xiii. Losses arising from Accidents as a driver on motorized vehicles unless at the time of accident the insured is in possession of a current full international driving license and while riding a two wheeler is wearing a safety crash helmet.</li> <li>xiv. Expenses for treatment, which could reasonably be delayed until the Insured Person's return to Republic of India.</li> <li>xv. Medical treatment and related services obtained within the Republic of India</li> <li>xvi. Medical Expenses incurred after the expiration date of the policy or Your return to India whichever is earlier.</li> <li>xvii. Specific exclusions apart from the above for children below 5 years of age: mumps, chickenpox, measles, German measles, spina bifida, whooping cough, diphtheria, poliomyelitis, meningitis and scarlet fever and for all consequences attributable to the said illnesses</li> </ul>
<p><b>Special conditions (applicable to this section)</b></p>	<ul style="list-style-type: none"> <li>i. Follow up treatment including Medical consultation, pharmacy bills &amp; investigation expenses after discharge from Hospital is payable for a period upto maximum of 30 days, provided the same is prescribed by Medical Practitioner at the time of discharge</li> </ul>

	<ul style="list-style-type: none"> <li>ii. Medical consultation including pharmacy bills &amp; investigation expenses, which does not require hospitalization, is restricted to 10% of the SI for the entire Policy period.</li> <li>iii. Co-Pay of 5% or 10%, as applicable, on the claimed amount if there is no bifurcation of expenses of Hospitalisation as per Annexure I.</li> <li>iv. If the treating physician recommends that continued treatment in India is appropriate, the policy is extended to cover medical expenses incurred in India subject to the following: <ul style="list-style-type: none"> <li>a) Occurrence of accident/injury/diagnosis of the disease/illness is overseas.</li> <li>b) Continuous treatment is valid upto 30 days on return to India or expiry of policy which ever occurs earlier.</li> </ul> </li> </ul>
<p><b>Documents for claims</b></p>	<ul style="list-style-type: none"> <li>i. Medical reports and discharge summary issued by the Hospital furnishing the name of the Insured, period of treatment, details of treatment rendered.</li> <li>ii. Bills/receipts for <ul style="list-style-type: none"> <li>a) Charges paid towards Hospital accommodation and nursing facilities.</li> <li>b) Fees paid to the Medical Practitioner, etc.</li> <li>c) Charges incurred towards test and/or examinations rendered in connection with the treatment.</li> <li>d) Charges incurred towards medicines purchased from outside duly supported by the prescriptions of the Medical Practitioner attending on the Insured.</li> <li>e) All other relevant present and past medical papers as required by the Company for adjudication of this claim.</li> </ul> </li> <li>iii. Documents to be submitted in support of the claim for Medical Evacuation <ul style="list-style-type: none"> <li>a) Medical reports and transportation details issued by the evacuation agency, prescriptions and medical report by the attending Medical Practitioner furnishing the name of the Insured and details of treatment rendered along with the statement confirming the necessity of evacuation.</li> <li>b) Proof for expenses incurred towards medical evacuation.</li> <li>c) Any other document as required by the Company/ OSP on a case-to-case basis.</li> </ul> </li> </ul> <p>In respect of all claims payable hereunder, the Company may effect settlement either in the form of cashless treatment facility wherever there is a tie up facility or by reimbursement of the amount of claim to the Insured.</p> <p>Cashless treatment facility cannot be demanded by the Insured as a matter of right</p>

### **3.2 EMERGENCY DENTAL TREATMENT**

<b>What is covered</b>	<ol style="list-style-type: none"> <li>1. Emergency Dental Treatment means treatment commencing within 24 hours from the sudden and acute onset of dental pain upto the limit shown against the said cover in the policy schedule.</li> <li>2. In case of accidental injury necessitating dental treatment, the Company shall compensate the Insured for the reasonable Medical Expenses during the Trip, undertaken within the Policy period. Provided, such treatment should be provided by a Medical Practitioner qualified in practicing dentistry or dental surgery, and the reimbursement for the Medical Expenses incurred shall not exceed the Sum Insured for the coverage of medical expenses section as mentioned in Policy Schedule.</li> </ol>
<b>What is not covered (Exclusions pertaining to this section)</b>	<p>Expenses incurred by the Insured in connection with or in respect of</p> <ol style="list-style-type: none"> <li>i. Any treatment of a Pre-existing Condition.</li> <li>ii. Cementing or fixation of tooth or teeth bridge/s.</li> <li>iii. Beauty and/or cosmetic treatment and/or reconstructive plastic surgery in any form or manner.</li> </ol>
<b>Documents to be submitted in case of claim</b>	<ol style="list-style-type: none"> <li>i. Relevant Medical documents / Discharge summary issued by the Hospital furnishing the name of the Insured, period of treatment, details of treatment rendered.</li> <li>ii. Bills/ receipts for             <ol style="list-style-type: none"> <li>a) Charges paid towards Hospital accommodation and nursing facilities.</li> <li>b) Fees paid to the Medical Practitioner, etc.</li> <li>c) Charges incurred towards any and all test and/ or examinations rendered in connection with the treatment.</li> <li>d) Charges incurred towards medicines/ drugs purchased from outside duly supported by the prescriptions of the Medical Practitioner attending on the Insured.</li> </ol> </li> </ol>

### **3.3 HOSPITAL CASH FOR CRITICAL ILLNESS (for Hospitalization beyond 48 hours)**

<b>What is covered</b>	<p>In the event of Hospitalisation of the Insured due to Critical Illness, as listed below, sustained or contracted within the Policy period whilst on a Trip, the Company shall pay to the Insured Hospital Cash for number of days as specified in the Policy Schedule, provided that the Hospitalisation is for a period of more than 48 hours.</p> <p><b>List of critical illnesses applicable to this section are as follows:</b></p> <ol style="list-style-type: none"> <li>i. Heart valve replacement due to acute infection</li> <li>ii. Coronary artery diseases requiring a bypass or other surgery</li> <li>iii. Stroke</li> </ol>
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	<ul style="list-style-type: none"> <li>iv. Paralysis or Paraplegia including the complete and permanent loss of one or all of the limbs</li> <li>v. Coma due to Accident</li> <li>vi. Third-degree burns covering at least 20% of the surface area of the body</li> <li>vii. Major head trauma</li> <li>viii. Benign brain Tumor</li> <li>ix. Encephalitis</li> <li>x. Bacterial meningitis due to inflammation of brain membranes or spinal cord</li> </ul>
<b>What is not covered (Exclusions pertaining to this section)</b>	<ul style="list-style-type: none"> <li>i. Any Illness other than the listed Critical Illness in the policy.</li> <li>ii. Any hospitalization less than 48 hours.</li> </ul>
<b>Documents to be submitted in case of claim</b>	The claim under this section shall be processed on the basis of the same set of documents applicable under the Section 3.1 - Medical expenses.

### 3.4 PERSONAL ACCIDENT

<b>What is covered</b>	<p>If at any time during the covered trip, the Insured Person shall sustain any Injury, then the Insured Person or his legal representative/s, as the case may be, will be paid as per the following schedule if such Injury shall, within twelve calendar months of occurrence, be the sole and direct cause of:</p> <p><b>Table of Benefits:</b></p> <table border="1"> <thead> <tr> <th>Loss of</th> <th>% of Sum Insured</th> </tr> </thead> <tbody> <tr> <td>Life</td> <td>100%</td> </tr> <tr> <td>Both hands or both feet</td> <td>100%</td> </tr> <tr> <td>Sight of both eyes</td> <td>100%</td> </tr> <tr> <td>Hearing in both ears</td> <td>50%</td> </tr> <tr> <td>One hand and one foot</td> <td>100%</td> </tr> <tr> <td>Either one hand or one foot</td> <td>50%</td> </tr> <tr> <td>Sight of one eye</td> <td>50%</td> </tr> <tr> <td>Speech and hearing in both ears</td> <td>100%</td> </tr> <tr> <td>Complete speech</td> <td>50%</td> </tr> <tr> <td>Quadriplegia</td> <td>100%</td> </tr> <tr> <td>Hemiplegia</td> <td>50%</td> </tr> <tr> <td>Paraplegia</td> <td>50%</td> </tr> <tr> <td>Uniplegia</td> <td>25%</td> </tr> <tr> <td>Thumb and index finger of same hand</td> <td>25%</td> </tr> </tbody> </table>	Loss of	% of Sum Insured	Life	100%	Both hands or both feet	100%	Sight of both eyes	100%	Hearing in both ears	50%	One hand and one foot	100%	Either one hand or one foot	50%	Sight of one eye	50%	Speech and hearing in both ears	100%	Complete speech	50%	Quadriplegia	100%	Hemiplegia	50%	Paraplegia	50%	Uniplegia	25%	Thumb and index finger of same hand	25%
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<b>Special conditions (applicable to this section)</b>	<ul style="list-style-type: none"> <li>i. Hand or foot means actual severance through or above the wrist or ankle joints respectively.</li> <li>ii. Eye means entire and irrevocable loss of sight.</li> <li>iii. Thumb and index finger means actual severance through or above the joints that meets the hand at the palm.</li> </ul>																														

	<p>iv. Upon happening of any event, which is likely to give rise to a claim under this Benefit, the Insured or his/her representative shall give immediate intimation to the Company or OSP.</p> <p>v. The Insured or his/her representative shall arrange for immediate treatment of the Insured in a Hospital and produce all such records of treatment to the Company in support of the claim</p> <p>vi. If the Insured Person's age is under 18 years, the benefit shall be limited to 75% of sum insured or 2000 USD.</p>
<b>What is not covered (Exclusions pertaining to this section)</b>	<p>i. Compensation under more than one of the categories of Benefits as specified above in respect of the same Accident arising out of one event.</p> <p>ii. Amounts related to Medical Expenses.</p> <p>iii. Payment of compensation in respect of death or disability arising from intentional self-Injury / suicide / attempted suicide.</p> <p>iv. Whilst the Insured is under the influence of intoxicating liquor / drugs.</p> <p>v. Whilst engaging in Hazardous activities.</p> <p>vi. Claim for death or disability under this Policy occurring beyond 12 months from the date of covered accident.</p>
<b>Documents to be submitted in case of claim</b>	<ul style="list-style-type: none"> <li>• Medical reports giving the details of the Accident, nature of Injury and the extent of disability.</li> <li>• Medical Practitioner's certificate in case of Injury (in case of Permanent Partial Disablement / Permanent Total Disablement) stating the reasons and the extent of the Injury.</li> <li>• In case of death of the Insured, death certificate issued by the Medical Practitioner who attended on the Insured.</li> <li>• Post-mortem certificate, wherever applicable, to be produced if required by OSP.</li> <li>• Police report in original</li> <li>• Any other document as may be appropriately applicable for the claims preferred under this section of the Policy and as required by the Company.</li> <li>• To this extent the certificate obtained from the Medical Practitioner should clearly establish the death / disability is due to the covered Accident.</li> </ul>

### **3.5 REPATRIATION OR CREMATION OF MORTAL REMAINS**

<b>What is covered under this Benefit</b>	<p>In the unfortunate event of the death of the Insured due to an insured event, whilst abroad during the Period of Insurance, the Company shall, reimburse the nominee, the costs incurred for transporting the remains of the deceased Insured back to Republic of India or, up to an equivalent amount, for a local burial or cremation during the Period of Insurance up to the limits set against the coverage as mentioned in Policy Schedule here to.</p> <p>Covered expenses include, but are not limited to, expenses for: (a) embalming; (b) cremation; (c) coffins; and (d) transportation.</p>
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<b>Special Conditions (applicable to this section)</b>	In event of a contingency resulting in the death of the Insured, his/her representatives shall immediately report the same to OSP and submit the claims form furnishing the complete details of the death of the Insured.
<b>What is not covered (Exclusions pertaining to this section)</b>	The Company shall be under no liability to make payment if the claim is not admissible as per policy terms and conditions or if the cause of death falls under the exclusions stated under Section 3.1 – Medical expenses section & Personal Accident.
<b>Documents to be submitted in case of claim</b>	<ul style="list-style-type: none"> <li>i. Photocopy of the death certificate providing the details of the place, date and time, and the circumstances and cause of the death</li> <li>ii. Photocopy of the post mortem certificate wherever required by OSP, for cases where post mortem is conducted, issued by the appropriate authority where the contingency has arisen.</li> <li>iii. Proof for expenses incurred towards disposal of the mortal remains.</li> <li>iv. In case of transportation of the body of the deceased Insured to Republic of India, the receipt for expenses incurred towards preparation and packing of the mortal remains of the deceased Insured and also for the air transportation of the mortal remains to Republic of India.</li> </ul>

### **3.6 LOSS OF CHECKED BAGGAGE**

<b>What is covered under this Benefit</b>	The Company shall indemnify the Insured for the value of the Checked-In Baggage totally lost whilst in custody of the Common Carrier during the Policy period in relation to Trip covered hereunder. The coverage shall commence from the time the Checked-In Baggage is entrusted to the Common Carrier and a receipt obtained, and shall terminate on delivery by the Common Carrier at the destination port. The cover shall be applicable individually and independently in case of Trip involving multi destinations en-route. The indemnity during the entire policy period will not exceed the limit set against the coverage mentioned in Policy Schedule
<b>Special Conditions applicable to this section.</b>	<ul style="list-style-type: none"> <li>i. Company's liability shall not arise until the liability is admitted by the common carrier.</li> <li>ii. Benefits paid shall be as per the limits set against the coverage in the Policy Schedule. Any Amount received from the Common Carrier shall be deducted from the said limit.</li> </ul> <p>In an event where the lost Checked-In Baggage is subsequently delivered to the Insured, the Insured shall take delivery of the same and refund appropriately the amount paid by the Company.</p>
<b>What is not covered (Exclusions pertaining to this section)</b>	The Company shall not be liable for any loss in connection with the following: <ul style="list-style-type: none"> <li>i. Valuables including but not limited to jewellery, credit or debit cards, cheques, traveller cheques, membership cards, tickets or documents, digital video disc player, compact disc player contact or corneal lens, cash / currency / money, antiques and artificial teeth.</li> <li>ii. Any partial loss of Contents of the Checked-In Baggage.</li> <li>iii. Losses arising from any delay, detention, confiscation by customs officials or other public authorities.</li> </ul>

	<ul style="list-style-type: none"> <li>iv. Loss of baggage sent in advance or souvenirs and articles mailed or shipped separately.</li> <li>v. Perishables and consumables.</li> <li>vi. Animals, motor vehicles including accessories, motor cycles, bicycles, boats, motors, skis and cellular phones.</li> <li>vii. The self-carried baggage is specifically excluded from the policy coverage.</li> <li>viii. Amount paid under the section of delay in checked baggage.</li> </ul>
<b>Documents to be submitted in case of claim</b>	<ul style="list-style-type: none"> <li>i. Statement of claim furnishing the details of items contained in the Checked-In Baggage and the values thereof (excluding Valuables).</li> <li>ii. Values of the items shall represent their market value after allowing for age and usage.</li> <li>iii. Claim Form (to be filled and signed by Insured)</li> <li>iv. Letter from the airlines accepting the liability for loss.</li> <li>v. Property irregularity report issued by the Common Carrier.</li> <li>vi. Voucher of the Common Carrier for the compensation paid for the non-delivery / short delivery of the Checked-In Baggage.</li> <li>vii. Copies of correspondence exchanged, if any, with the Common Carrier in connection with the non-delivery / short delivery of the Checked-In Baggage.</li> <li>viii. In case of items of individual value equal to or more than USD 100 contained within the Checked-In Baggage, proof of ownership in the form of purchase bill (or any other proof to the satisfaction of OSP).</li> <li>ix. Any other document as may be appropriately applicable for the claims preferred under this section of the Policy as required by OSP and/or the Company.</li> <li>x. Passport and Visa copy with Entry Stamp Overseas and exit Stamp from India.</li> <li>xi. NEFT form and cancelled cheque stating insured's / Claimant Indian Bank account details.</li> </ul>

### **3.7 DELAY IN CHECKED BAGGAGE OVER 12 HOURS (OUTBOUND FLIGHTS)**

<b>What is covered under this Benefit</b>	<p>The Company shall pay to the Insured, the sum as specified for the coverage in the Schedule of the Policy in case the Insured shall encounter a delay in receipt of his/her Checked-In Baggage beyond 12 hours from the scheduled / expected time of delivery by the Common Carrier, whilst on a Trip covered hereunder.</p> <p>This Benefit shall be paid by the Company only on delay of Checked-In Baggage relating to the ticket of the Common Carrier issued in favour of the Insured.</p> <p>Provided however that the policy will pay up to the limit shown in the schedule for necessary emergency purchase of necessary items incurred by the Insured due to a Delay of Checked-in Baggage in event if such the delay is for more than 12 hours from the arrival time at destination.</p> <p>The cover shall be available individually and independently in case of Trip involving multi destinations en-route. In case of more than one claim during the policy period the Company's liability in all claims put together</p>
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	<p>will be restricted to the Sum Insured set against the coverage under this section.</p> <p>The Company shall not however be liable in case of any delay in delivery by the Common Carrier of the Checked-In Baggage on return journey to India.</p>
<b>Special Conditions (applicable to this section)</b>	<p>It is a condition precedent to the Company's Liability hereunder that upon discovering the delay in arrival of the Checked Baggage the Insured shall obtain written confirmation from the Common Carrier along with the period of delay, which must be submitted to the Company / OSP in the event of a Claim.</p> <p>In case the checked in baggage is subsequently confirmed to be lost by the common carrier, any amount paid under this section will be set off against the amount payable under section 3.6 - Loss Of Checked Baggage.</p>
<b>What is not covered (Exclusions pertaining to this section)</b>	<ul style="list-style-type: none"> <li>i. Delay less than 12 hours.</li> <li>ii. Delay in delivery of the Checked-In Baggage arising out of and resulting from detention/ confiscation by the Common Carrier/ customs/ government agencies/ other agencies.</li> <li>iii. Delay of Checked-In Baggage due to an-examined delivery by the Common Carrier</li> </ul>
<b>Documents to be submitted in case of claim</b>	<ul style="list-style-type: none"> <li>i. Claim Form (to be filled and signed by Insured) Copies of Boarding Pass / Ticket / Baggage Tags.</li> <li>ii. Copies of correspondence with the Airline authorities / others certifying the delay &amp; actual date and time of delivery of baggage.</li> <li>iii. PIR report (Property Irregularity Report) (to be obtained from the common carrier).</li> <li>iv. Ticket Itinerary</li> <li>v. Passport and Visa copy with Entry Stamp Overseas and exit Stamp from India.</li> <li>vi. Voucher of the Common Carrier for the compensation paid for the delay in delivery of the Checked-In Baggage.</li> <li>vii. Copies of correspondence exchanged, if any, with the Common Carrier in connection with the delay in delivery of the Checked-In Baggage.</li> <li>viii. Any other document as may be appropriately applicable for the claims preferred under this section of the Policy.</li> </ul>

### **3.8 LOSS OF PASSPORT**

<b>What is covered under this section</b>	<p>In the event of the Insured Person losing his/her Passport during the Period of Insurance, this insurance will pay up to the limit of cover shown in the Schedule for the reimbursement of actual expenses necessarily and reasonably incurred by the Insured Person for obtaining emergency travel documents or duplicate / fresh Passport in lieu of lost passport outside India.</p>
<b>Special Conditions (applicable to this section)</b>	<p>Insured shall produce the official receipt of the fee paid for the issue of <b>emergency travel documents or duplicate / fresh Passport.</b></p>
<b>What is not covered (Exclusions)</b>	<ul style="list-style-type: none"> <li>i. Loss to the Insured's passport as a result of the confiscation or detention by customs, police or any other authority.</li> </ul>

<b>pertaining to this section</b>	<ul style="list-style-type: none"> <li>ii. Loss which is not reported to the appropriate police authority within 24 hours of the discovery of the loss, and in respect of which an official report has not been obtained.</li> <li>iii. Loss caused by the Insured's failure to take reasonable steps to guard against the loss of the passport.</li> <li>iv. Loss or theft of passport left unattended by the Insured Person unless located in a locked hotel room or apartment and an appropriate sized safety deposit box was not available for use by the Insured Person.</li> </ul>
<b>Documents to be submitted in case of claim</b>	<ul style="list-style-type: none"> <li>i. Duly signed claim form stating exact circumstances of loss.</li> <li>ii. Copy of FIR (first information report) / Police Report.</li> <li>iii. Receipts related to expenses incurred to obtain a new passport.</li> <li>iv. NEFT form and cancelled cheque stating Insured's / Claimant Indian Bank account details.</li> <li>v. New passport copy or certificate of travel issued.</li> <li>vi. Details of the attempts made to trace the passport.</li> <li>vii. Statement of claim for the expenses incurred.</li> <li>viii. Any other document as may be appropriately applicable for the claims preferred under this section of the Policy.</li> </ul>

### **3.9 PERSONAL LIABILITY**

<b>What is covered under this section</b>	<p>This insurance will pay up to the limit of cover shown in the schedule if the insured person in his or her private capacity becomes legally liable to pay for accidental bodily injuries to third parties or accidental damage to third party properties, arising from an incident and reported during the covered trip.</p> <p>Reporting period for claim shall be 60 days from date of expiry of the insurance or date of occurrence whichever is earlier.</p> <p>The Company shall also indemnify the Insured towards the cost of defense incurred with the consent of the Company, provided that the Company's overall liability, including the cost of defense for all claims during the Period of Insurance shall not exceed the limit specified against this benefit in the Schedule of the Policy.</p>
<b>Special Conditions (applicable to this section)</b>	<ul style="list-style-type: none"> <li>i. The Company's liability to indemnify the Insured under this Section shall be to the extent finally determined by a court of law.</li> <li>ii. In the event that legal action is taken against the Insured within India, it is a condition precedent to the Company's liability hereunder that the Insured shall: <ul style="list-style-type: none"> <li>a) Give immediate written notice to the Company to the address specified in the Schedule, and</li> <li>b) Not incur any defense costs or expenses, admit liability for or settle or attempt to settle, make any admission or offer any payment or otherwise assume any contractual obligation with respect to any claim or claimant without the prior written consent of the Company, which shall be entitled (but in no case obligated) at any time to take over and conduct in the name of the Insured the defense and/or settlement of any</li> </ul> </li> </ul>

	<p>action or claim and shall be entitled at all times to receive the Insured's cooperation and assistance and to appoint lawyers on the Insured's behalf.</p> <p>iii. The Company shall have the right to defend the case or enter into compromise or take such steps as may be required to bring the claim to a close, provided however that such steps taken by the Company shall not affect the Insured's right of claim under the policy.</p> <p>iv. Any and all costs and expenses incurred by the Company or the lawyers appointed by the Company shall be included in the Sum Insured.</p> <p>v. The Company shall not settle any claim without the express consent of the Insured, but if the Insured refuses an available settlement recommended by the Company then the Company's liability shall thereafter be restricted to the amount by which the claim could have been settled.</p>
<p><b>What is not covered (Exclusions pertaining to this section)</b></p>	<p>i. Any Deductible amount as mentioned against this Benefit in the Policy Schedule.</p> <p>ii. Legal liability of the Insured in relation to any professional services rendered by him/her.</p> <p>iii. Liability for Injury or damage of any kind whilst the Insured is engaged in his/her business activities or in course of business activities by the Insured.</p> <p>iv. Liability assumed by the Insured by an agreement / contract which would not have attached in the absence of such agreement / contract.</p> <p>v. Liability arising out of any Acts of God, earthquake, earth-tremor, volcanic eruption, flood, storm, tempest, typhoon, hurricane, tornado, cyclone or other similar acts or convulsions of nature and atmospheric disturbances.</p> <p>vi. Liability arising from intentional or willful acts of the Insured or illegal acts or resulting from the Insured committing any breach of law with criminal intent.</p> <p>vii. Fines / penalties / punitive / exemplary damages of any kind.</p> <p>viii. Liability arising from the use of any motor vehicle, aircrafts, water crafts and other vehicles.</p> <p>ix. Any liability, which is the subject matter of specific insurance elsewhere.</p> <p>x. Liability arising through personnel engaged by the Insured for either business / personal purposes of any kind.</p> <p>xi. Any Personal liability of the Insured towards his/ her Family, relations and Traveling Companions, whether personal or official.</p> <p>xii. Liability resulting from transmission of an Illness by the Insured.</p> <p>xiii. Liability arising out of all personal Injury such as libel, slander, false arrest, wrongful eviction, wrongful detention, defamation, etc., and mental Injury, anguish, or shock resulting therefrom.</p> <p>xiv. Liability arising out of any infringement of intellectual property rights such as copyright, patent, trademark, registered designs and trade secrets.</p>

	<ul style="list-style-type: none"> <li>xv. Liability arising from the possession of animals, birds, reptiles, insects, etc. and their by-products like skin, hair, feathers, horns, fur, ivory, bones, eggs, etc.</li> <li>xvi. Liability arising from the ownership or possession of vehicles, aircrafts, water crafts, or activities of the Insured involving parachuting, hang-gliding, hot air ballooning or use of firearms.</li> <li>xvii. Liability arising from insanity, the use of any alcohol / drugs (except as medically prescribed) or drug addiction.</li> <li>xviii. Liability arising from any supply of goods or services on the part of the Insured.</li> <li>xix. Liability arising from any ownership or occupation of land or buildings other than the occupation of any temporary residence.</li> <li>xx. Any liability arising from a contingency occurring anywhere in Republic of India.</li> </ul>
<b>Documents to be submitted in case of claim</b>	<ul style="list-style-type: none"> <li>i. Claim form duly filled in with statement of claim furnishing particulars of the event leading to the liability.</li> <li>ii. Photocopy of the police report wherever reported.</li> <li>iii. Any other document as may be appropriately applicable for the claims preferred under this section of the Policy.</li> <li>iv. Court order or any judicial order received against the compensation</li> <li>v. Invoices / Bills supporting the claim amount.</li> <li>vi. Original Paid receipts if paid (hardcopy) in case of reimbursement claim.</li> <li>vii. NEFT Form and Cancelled cheque stating insured's / Claimant Indian Bank account details.</li> <li>viii. Passport and Visa copy with Entry Stamp Overseas and exit Stamp from Republic of India.</li> </ul>

### **3.10 EMERGENCY FINANCIAL ASSISTANCE**

<b>What is covered under this section</b>	The Company shall provide cash assistance when the Insured Person requires emergency cash, following loss of money due to incidents of theft / burglary or hold up whilst on a trip covered hereunder. The OSP will provide emergency cash assistance for the actual money lost but not exceeding the limit specified in the Policy Schedule.
<b>Special Conditions (applicable to this section)</b>	<ul style="list-style-type: none"> <li>i. As soon as the theft or burglary of money occurs, Insured should first register FIR with the local police authority (immediately, but not later than 24 hours of occurrence).</li> <li>ii. Insured Person may then intimate the OSP on Email or contact on telephone number indicated in the policy schedule.</li> <li>iii. The OSP shall verify the details of the Insured and pay admissible amount under this section as per policy terms &amp; conditions in an appropriate and feasible manner.</li> </ul>
<b>What is not covered (Exclusions pertaining to this section)</b>	<ul style="list-style-type: none"> <li>i. Claim unless supported by a documentary evidence for complaint lodged with the police authorities (within the time limit specified above)</li> <li>ii. Claim for need arising after return of the Insured to Republic of India.</li> </ul>

<b>Documents to be submitted in case of claim</b>	<ul style="list-style-type: none"> <li>i. Claim Form (to be filled and signed by Insured)</li> <li>ii. Covering Letter detailing full statement of the facts of the incident.</li> <li>iii. Copy of FIR / relevant documents filed with the local police authorities.</li> <li>iv. Passport and Visa copy with Entry Stamp Overseas and exit Stamp from Republic of India.</li> </ul>
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### **3.11 HIJACK ALLOWANCE – OVER 12 HOURS**

<b>What is covered under this section</b>	<p>The Company shall compensate the Insured at the rate per day as specified in the Policy Schedule, in case the Common Carrier in which the Insured is traveling as a passenger during Trip within the Period of Insurance shall be subject of Hijack, and that the Common Carrier is held captive by the hijackers. Compensation shall be payable under this Benefit provided that the Hijack is for more than 12 hours.</p> <p>Provided that the cover shall only attach in case of travel by Common Carrier as the main mode of travel being part of the Trip and shall not attach for any incidental travels by any other mode of transportation.</p> <p>The Company's liability shall be restricted for the period for which the Common Carrier is held captive in excess of 12 hours and in no case shall exceed the maximum number of days specified in the Policy Schedule.</p> <p>Should the Insured be released by the hijackers in advance of the total release of the Common Carrier and all the passengers therein, the Company's liability shall not extend beyond the date and time of release of the Insured by the hijackers.</p>
<b>Special Conditions (applicable to this section)</b>	Should death of the Insured occurs due to an Injury caused during his captivity by hijackers, the death benefit as stated in the Personal Accident section shall become payable. This benefit is in addition to Personal Accident Benefit.
<b>What is not covered (Exclusions pertaining to this section)</b>	The Company shall not be liable for any claim under this Policy if the Insured shall be involved as either principal or accessory in the Hijack.
<b>Documents to be submitted in case of claim</b>	<ul style="list-style-type: none"> <li>i. Claim Form (to be filled and signed by Insured)</li> <li>ii. NEFT Form and Cancelled cheque stating Insured's / Claimant Indian Bank account details.</li> <li>iii. Passport and Visa copy exit Stamp from India.</li> <li>iv. All relevant documents from the Airport / Appropriate Authority as proof of Hijack</li> </ul>

### **3.12 TRIP CANCELLATION / INTERRUPTION**

<b>What is covered under this section</b>	The Company shall reimburse to the Insured the non-refundable portion of the pre-paid lodging cost and/or the ticket charges (up to the maximum amount specified in the schedule) if the Trip is cancelled and the Insured
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	<p>Person is unable to undertake the Trip (whether wholly or in part) and solely attributable to and/or arising out of:</p> <ol style="list-style-type: none"> <li>i. Earthquake</li> <li>ii. Storm, Flood, inundation, cyclone, tempest</li> <li>iii. Terrorism - provided that the named perils herein above shall take place at and in the vicinity of any port involved in the Insured's Trip;</li> <li>iv. Personal contingencies like death or emergency Hospitalisation treatment requiring minimum 3 days duration necessitated to the Insured or Insured's Immediate Family Member due to an unforeseen Illness or Injury.</li> <li>v. Unexpected Riot Strike or civil commotion beyond the control of the Insured.</li> <li>vi. Global Pandemic.</li> </ol> <p>Subject to the maximum liability of the Company as stated for this benefit under the policy Schedule, the Company shall pay to the Insured:</p> <ol style="list-style-type: none"> <li>i. Official cancellation charges including those of stay and travel, if any.</li> <li>ii. Actual additional transportation expenses incurred to return to Republic of India, provided that, the additional expenses are for alternative travel arrangement of the same class and/or type and by the most direct route.</li> </ol>
<p><b>Special Conditions applicable to this section.</b></p>	<p>If the trip cancellation / interruption has occurred because of hijack, the amount payable will be higher of the two sections and not under both sections.</p>
<p><b>What is not covered (Exclusions pertaining to this section</b></p>	<p>The Company shall not be liable for any loss caused by and/or attributable to the following</p> <ol style="list-style-type: none"> <li>i. Cancellation of the Trip either wholly or in part done by the common carrier or due to the negligence of the Travel Agent.</li> <li>ii. Cancellations of the Trip either wholly or in part done at the instance of the air transport authority or the government.</li> <li>iii. Any circumstances other than those, that are directly attributable to the perils as stated above</li> <li>iv. General exclusions applicable as specified in the policy.</li> <li>v. Negligence of the insured.</li> </ol>
<p><b>Documents to be submitted in case of claim</b></p>	<p>In case of cancellation of the Trip either in Republic of India or any other intermediate place forming part of the Trip by the Common Carrier solely resulting from contingencies namely Earthquake, Storm, Flood, inundation, cyclone, tempest, Global Pandemic &amp; Terrorism, duly completed claims form to be accompanied by:</p> <ol style="list-style-type: none"> <li>i. Confirmation of cancellation of the Trip from the Common Carrier detailing the circumstances of cancellation.</li> <li>ii. Original travel ticket indicating the fare and the refund from the Common Carrier towards the cancelled portion of the Trip.</li> <li>iii. Original bill and receipt / letter obtained from the hotel or guest house or any other paid residential accommodation (available for fee) indicating the amount paid for the accommodation, the refund given and the cancellation charges retained.</li> <li>iv. Used air ticket in original for return journey from the place of cancellation to destination, which indicate the cost of the tickets, together with the</li> </ol>

	<p>receipts for the refunds obtained towards the unfulfilled portion of the Trip.</p> <p>In case the cancellation of the Trip shall result because of personal contingencies covered hereunder the duly completed claims form to be accompanied by:</p> <ul style="list-style-type: none"> <li>v. A declaration from the Insured furnishing the circumstances that compelled him/her to cancel the Trip.</li> <li>vi. Medical evidence as may be required by OSP in case of the cancellation of the Trip arising out of personal contingencies of the Insured or his/her Immediate Family Member Travelling with them.</li> <li>vii. Receipt for the refund of the fare of the Common Carrier towards the cancelled portion of the Trip indicating the cancellation charges retained.</li> <li>viii. Receipt / letter obtained from the for the hotel and/or guest house and/or any other residential accommodation (available for a fee) indicating the cancellation charges retained, wherever such accommodation has be arranged at the place of cancellation of the Trip.</li> <li>ix. Used air ticket or boarding pass in original for return journey from the place of cancellation to the destination together with the receipts for the refunds obtained towards the unfulfilled portion of the Trip.</li> <li>x. In case the cancellation charges either for the Trip or part of it or in relation to the accommodation in a hotel / guest house / other residential accommodation is waived to the advantage of the Insured subsequent to any settlement of claim under this Benefit, the Insured shall forthwith return the sum paid by the Company to the extent of such waiver.</li> <li>xi. Any other document as may be appropriately applicable for the claims preferred under this section of the Policy.</li> <li>xii. NEFT Form and Cancelled cheque stating insured's / Claimant Indian Bank account details.</li> </ul>
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### **3.13 MISSED CONNECTION**

<p><b>What is covered under this section</b></p>	<p>The Company shall pay a fixed amount to the Insured as mentioned in Policy Schedule per day or part thereof in case of failure of the Insured to access the Connecting flight as per schedule, any time during the Trip within the Period of Insurance, arising out of below mentioned conditions which is beyond the control of the insured and solely attributable to and/or arising out of:</p> <ul style="list-style-type: none"> <li>i. Inclement weather</li> <li>ii. Strike or other job action by employees of a common carrier scheduled to be used by the Insured Person</li> <li>iii. Equipment failure/Mechanical snag of the Common Carrier in which the Insured Person was to travel.</li> <li>iv. The Aircraft which you boarded was hijacked.</li> </ul> <p>The Company shall pay the following:</p> <ul style="list-style-type: none"> <li>i. Cancellation charges if any</li> <li>ii. Additional cost shall be for the ticket of the same class of the scheduled journey.</li> </ul>
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	<p>iii. The cost will be for the original scheduled destination</p> <p>The Company's overall liability for claims of all occurrences of missing flight during the Period of Insurance shall not exceed the limits specified in the Policy Schedule.</p>
<b>Special Conditions applicable to this section.</b>	<p>i. The Insured shall endeavor to take all timely steps to ensure avoidance of missing a flight even in case of delays of the arrival of the earlier flight.</p> <p>ii. In case of missing flight, when Insured shall look for alternative flights for undertaking the scheduled journey, he/she shall ensure minimum additional cost and earliest departure in selecting the alternative flight. While submitting the claim the Insured shall also furnish the Company of the efforts taken by him in choosing the alternative.</p> <p>iii. In order to minimize the claim under this Policy, the Insured shall also take all efforts to see that the cancellation charges are either waived or reduced to the minimum level by the Common Carrier and/or the authorities of the hotel / guest house / any other residential accommodation.</p> <p>iv. While preferring the claim, the Insured shall declare that he/she has not been compensated by the Common Carrier or any other agency concerned in connection with delay of the flight that led to the situation of missing flight.</p>
<b>What is not covered (Exclusions pertaining to this section)</b>	<p>i. If the time gap between the scheduled arrival of the previous flight and the scheduled departure of the next flight (Missed Flight) shall be less than 3 hours.</p> <p>ii. If the missing of the flight is the result of any deviation from the originally scheduled route done at the instance of the Insured for reasons whatsoever.</p> <p>iii. Claims not supported by a Written report from the appropriate authorities.</p> <p>iv. Any advance intimation given to the Insured of a possible delay of the flight that might lead to missing of connecting flights.</p> <p>v. Any circumstances other than the listed perils.</p>
<b>Documents to be submitted in case of claim</b>	<p>i. The confirmation from the flight operator of the delayed flight as to the expected time of arrival and the actual time of arrival at the port of delay together with the reasons for delay.</p> <p>ii. Unused ticket for the ongoing flight (Missed Flight) with an endorsement of the Common Carrier of cancellation of the same.</p> <p>iii. Certificate from the flight operator of the Missed Flight that the fare for the part of the Trip covered by the Missed Flight is forfeited in full or in part together with the amount of forfeiture.</p> <p>iv. Original used ticket obtained afresh towards the alternative flight for the part of the Trip covered by the Missed Flight indicating the amount paid as fare.</p> <p>v. And any other document as may be appropriately applicable for the claims preferred under this section of the Policy. In the event of the forfeited amount by the Common Carrier for the Missed Flight being refunded / returned to the Insured, subsequent to any payment under this Benefit, the Insured shall return the amount so refunded in full.</p> <p>vi. Duly filled in claim form.</p> <p>vii. NEFT Form and Cancelled cheque stating insured's / Claimant Indian Bank account details.</p>

## 4.0 GENERAL TERMS AND CLAUSES

The conditions below apply throughout this Insurance to all the sections. Failure to comply with them may be prejudicial to a claim.

- 4.1 Basis of Insurance:** This Policy is issued on the basis of the truth and accuracy of statements in the Proposal. If there is any misrepresentation or non-disclosure, we will be entitled to treat the Policy as void.
- 4.2 Pandemic Clause:** In case of declaration of a Pandemic by WHO, the following conditions shall apply.
- i. Insured Person who has already left the country before pandemic declaration will be covered upto end date of policy.
  - ii. Policy can be extended due only to unavoidable circumstances like unavailability of transport or government regulations.
  - iii. Once the transport resumes, no further extension will be given.
  - iv. Any policy issued after declaration of pandemic will not cover any expenses related to pandemic.
- 4.3** The policy will be valid only if the premium is realized and the Insured journey commences within 14 days of the first day of Insurance as indicated in the policy schedule.
- 4.4 Cancellation** of the policy may be done ONLY in cases where a journey is not undertaken and ONLY on production of the Insured person's PASSPORT as a proof that the journey has not been undertaken. Any request for cancellation will be entertained not less than 14 days after the First Day of Insurance as indicated in the policy schedule. Such cancellation will be subject to deduction of cancellation charges by the underwriters as applicable.
- 4.5 Early completion of trip:** Partial refund in premium is permitted on trip band basis provided cover is for a minimum period of 60 days and unexpired period is not less than 14 days subject to there being no claim under the policy.
- 4.6 Notice of claim:**
- i. It is a condition precedent to liability hereunder that in the event of any occurrence likely to give rise to a claim under this Insurance, that the Insured Person, or his representative, must notify OSP immediately but not later than 72 hours or earlier as mentioned in the special conditions applicable to the respective sections. The Insured Person or his representative should quote OSP as much information concerning the Illness, Accident or occurrence as is available, including the name of the treating Medical Practitioner, name and telephone number of the Hospital, the OMP policy number and its date of issue.
  - ii. Such Document stated in (i), together with invoices, travel documents and any other relevant details must be sent to OSP, clearly stating under which section of this policy a claim is being made. Please note that if medical treatment has been received, relevant medical documents showing the nature of the Injury or Illness together with all bills, and receipts if already paid, should be forwarded to OSP or Indian Service Provider. In no event should a claim be notified to OSP later than 30 days after the end of an insured trip.
- 4.7 Subrogation:** We shall be fully and completely subrogated to the rights of the Insured Person against parties who may be liable to provide indemnity or make a contribution in respect of any matter (excluding personal accident section) which is the subject of a claim under this insurance.

The Insured Person further agrees to co-operate fully with Us in seeking such indemnity or contribution including where appropriate, insurers instituting proceedings at their own expense against such parties in the name of the Insured Person.

**4.8** We may approach any appropriate authority in respect of the claim made by the insured and the insured person must co-operate in this regard.

**4.9** Extension of policy period shall be subject to following conditions:

- i. Extension of the policy shall, if required, be granted at the sole discretion of the Company, provided that the period of extension in no case exceed 180 days. Further, no, extension of the policy beyond the initial period shall be considered in respect of those benefits under which claims have been reported by the insured during the initial policy period.
- ii. Request for the extension of cover in writing duly completed with complete particulars of claims if any reported by the insured or pending report by the insured for contingencies occurring during the initial period of insurance, shall be a condition precedent to consideration by the Company of the extension of insurance beyond the initial period.
- iii. The request for extension and payment of appropriate premium in advance.

**4.10** Change of Travel Itinerary to Worldwide Including USA/CANADA shall be subject to following conditions:

- i. Request for the Change of Travel Itinerary to Worldwide shall be given by Insured in writing duly completed with complete particulars of claims if any reported by the insured or pending report by the insured for contingencies occurring during the initial period of insurance, shall be a condition precedent to consideration by the Company for the request of change of travel itinerary.
- ii. The request for Change of Travel Itinerary to Worldwide shall be given only receiving of appropriate premium in advance.

**4.11** This insurance does not operate beyond a maximum period of 180 days of continuous absence from the Republic of India unless specifically agreed and extended by way of an endorsement by Insurers.

**4.12** This policy and the Policy Schedule shall be read together as one contract and any wording or expression to which a specific meaning has been attached in any part of this Policy and Schedule shall bear such specific meaning wherever it may appear.

**4.13** If at any time during the period of Insurance the Visa status of the Insured Person changes, the Insured Person must notify the Insurer or Claims Administrator in writing within 14 days.

**4.14** The special conditions mentioned against the respective sections shall be applicable in addition to the above conditions.

**4.15 Redressal Of Grievance:** In case of any grievance the insured person may contact the company through

- i. **Website:** <https://www.newindia.co.in/portal/readMore/Grievances>
- ii. **Toll free:** 1800-209-1415
- iii. **E-mail, Fax and Courier:** As mentioned in the above address

Senior Citizens may write to [seniorcitizencare.ho@newindia.co.in](mailto:seniorcitizencare.ho@newindia.co.in)

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance.

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 <https://www.newindia.co.in/portal/readMore/Grievances> For updated details of grievance officer, kindly refer the link <https://www.newindia.co.in/portal/readMore/Grievances>

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. Please refer to Annexure II.

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

**4.16 Protection Of Policy Holders' Interest:** This policy is subject to IRDAI (Protection of Policyholders' Interests) Regulation, 2017.

#### **4.17 Disclosure Of Information**

The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis description or non-disclosure of any material fact by the policyholder.

(Explanation: "Material facts" for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk).

#### **4.18 Complete Discharge**

Any payment to the policyholder, insured person or his/ her nominees or his/ her legal representative or assignee or to the Hospital, as the case may be, for any benefit under the policy shall be a valid discharge towards payment of claim by the Company to the extent of that amount for the particular claim.

## **5.0 GENERAL EXCLUSIONS:**

This entire Policy consisting of its various sections does not provide benefits for any loss resulting in whole or in part from, or expenses incurred, in respect of:

- 5.1** Where the Insured Person is travelling against the advice of a Medical Practitioner; or receiving or on a waiting list for receiving specified medical treatment; or is travelling for the purpose of obtaining treatment for Injury or Illness; or has received a terminal prognosis for a medical condition.
- 5.2** Any Pre-existing Condition or any complication arising from it.
- 5.3** Suicide, attempted suicide (whether sane or insane) or intentionally self-inflicted Injury or Illness, anxiety, stress or depression.
- 5.4** Serving in any branch of the Military or Armed Forces of any country, whether in peace or War, and in such an event We, upon written notification by You, shall return the pro rata premium for any such period of service during the Trip.
- 5.5** Being under the influence of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Medical Practitioner and taken as prescribed.

- 5.6 Participation in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion.
- 5.7 Operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft or Scheduled Airline.
- 5.8 Any loss arising out of War, civil war, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power.
- 5.9 Any loss, damage cost or expense of whatsoever nature caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss. The warranty also excludes loss, damage, cost or expenses of whatsoever nature caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism. If the Company alleges that by reason of this Exclusion, any loss, damage, cost or expenses is not covered by this insurance the burden of proving the contrary shall be upon the Insured.
- 5.10 Any loss arising out of the intentional use of military force to intercept, prevent, or mitigate any known or suspected Act of Terrorism.
- 5.11 The use, release or escape of nuclear materials that results in nuclear reaction or radiation or radioactive contamination; The dispersal or application of pathogenic or poisonous biological or chemical materials; The release of pathogenic or poisonous biological or chemical materials, (However, the above only applies if 50 or more persons sustain death within 90 Days of the date of the incident).
- 5.12 Radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of that equipment.
- 5.13 Congenital anomalies or any complications or conditions arising therefrom.
- 5.14 Osteoporosis (porosity and brittleness of the bones due to loss of protein from the bones matrix) or pathological fracture (any fracture in an area where pre-existing Disease has caused the weakening of the bone).
- 5.15 Participation in Hazardous Activities.
- 5.16 Pregnancy and all related conditions, including services and supplies related to the diagnosis or treatment of infertility or other problems related to inability to conceive a child; birth control, including surgical procedures and devices; This however does not include ectopic pregnancy proved by diagnostic means and is certified to be life threatening by the Physician.
- 5.17 Any loss of which a contributing cause was Your actual or attempted commission of, or willful participation in, an illegal act or any violation or attempted violation of the law or Your resistance to arrest.
- 5.18 Routine physical tests and/or examination of any kind not consistent with or incidental to the diagnosis and treatment of any illness or injury either in a hospital or as an outpatient and any type of vaccination or inoculation.
- 5.19 Expenses in respect of medical treatment and related services obtained within the Republic of India except as stated.
- 5.20 Liability arising out of the loss or destruction or damage to any property whatsoever or any loss or expenses whatsoever resulting or arising there from or any consequential loss caused by or contributed to by or arising from
  - i. ionising radiation or contamination by radioactivity from any nuclear waste from the combustion of nuclear fuel; or

- ii. radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

**Annexure I**

<b>Health condition</b>	<b>Completed age of insured/underwriting guidelines</b>	
	<b>Entry age Up to 60 years</b>	<b>Entry age beyond 61 years &amp; above</b>
With PED (Pre-Existing Diseases) of Any Kind	All claims arising out of PED shall be excluded.	All claims arising out of PED shall be excluded.
	Expenses incurred towards such PED shall be deducted from the total admissible claim amount if bifurcation of expenses is available	Expenses incurred towards such PED shall be deducted from the total admissible claim amount if bifurcation of expenses is available.
	If bifurcation of expenses are not available, then a co-pay of 5% on the total admissible claim.	If bifurcation of expenses are not available, then a co-pay of 10% on the total admissible claim.

**Underwriting Guidelines for insureds above 71 Years & above.**

<b>Age of insured</b>	<b>Sum insured offered in USD</b>	<b>Limit for Any one Incident in USD</b>
71 to 80 years	Up to Maximum of USD 250,000	USD 50,000
81 Year & above	Up to Maximum of USD 50,000	USD 20,000

The contact details of the Insurance Ombudsman offices are as below-

<p>AHMEDABAD - Shri Kuldip Singh Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: <a href="mailto:bimalokpal.ahmedabad@ecoi.co.in">bimalokpal.ahmedabad@ecoi.co.in</a></p>	<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: <a href="mailto:bimalokpal.bhopal@ecoi.co.in">bimalokpal.bhopal@ecoi.co.in</a></p>
<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: <a href="mailto:bimalokpal.bhubaneswar@ecoi.co.in">bimalokpal.bhubaneswar@ecoi.co.in</a></p>	<p>CHANDIGARH - Dr. Dinesh Kumar Verma Office of the Insurance Ombudsman, S.C.O. No. 101, 102 &amp; 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: <a href="mailto:bimalokpal.chandigarh@ecoi.co.in">bimalokpal.chandigarh@ecoi.co.in</a></p>
<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 Fax: 044 - 24333664 ,Email: <a href="mailto:bimalokpal.chennai@ecoi.co.in">bimalokpal.chennai@ecoi.co.in</a></p>	<p>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: <a href="mailto:bimalokpal.delhi@ecoi.co.in">bimalokpal.delhi@ecoi.co.in</a></p>
<p>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: <a href="mailto:bimalokpal.guwahati@ecoi.co.in">bimalokpal.guwahati@ecoi.co.in</a></p>	<p>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: <a href="mailto:bimalokpal.hyderabad@ecoi.co.in">bimalokpal.hyderabad@ecoi.co.in</a></p>
<p>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: <a href="mailto:bimalokpal.ernakulam@ecoi.co.in">bimalokpal.ernakulam@ecoi.co.in</a></p>	<p>KOLKATA - Shri P. K. Rath 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: <a href="mailto:bimalokpal.kolkata@ecoi.co.in">bimalokpal.kolkata@ecoi.co.in</a></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: <a href="mailto:bimalokpal.lucknow@ecoi.co.in">bimalokpal.lucknow@ecoi.co.in</a></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: <a href="mailto:bimalokpal.mumbai@ecoi.co.in">bimalokpal.mumbai@ecoi.co.in</a></p>
<p>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: <a href="mailto:bimalokpal.jaipur@ecoi.co.in">bimalokpal.jaipur@ecoi.co.in</a></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: <a href="mailto:bimalokpal.pune@ecoi.co.in">bimalokpal.pune@ecoi.co.in</a></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: <a href="mailto:bimalokpal.bengaluru@ecoi.co.in">bimalokpal.bengaluru@ecoi.co.in</a></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: <a href="mailto:bimalokpal.noida@ecoi.co.in">bimalokpal.noida@ecoi.co.in</a></p>
<p>PATNA - Shri N. K. Singh Office of the Insurance Ombudsman, 1st Floor,Kalpna Arcade Building,, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: <a href="mailto:bimalokpal.patna@ecoi.co.in">bimalokpal.patna@ecoi.co.in</a></p>	