

We will provide the insurance cover detailed in the Policy to the Insured Person up to the Sum Insured subject to the receipt of premium in full, any applicable sub-limits and the terms, conditions and exclusions of this Policy.

## Section 1. Basic Benefits

The following Basic Benefits will be available for the Insured Person only if specified to be in force for the Insured Person in the Schedule. Claims made in respect of any of these Basic Benefits will be subject to the availability of the Sum Insured and any applicable sub-limits specified in Section 7 Schedule of Benefits to this Policy for the Basic Benefit claimed.

### 1.1. Surgical Procedure Cash

If the Insured Person is Hospitalised for a Surgical Procedure during the Policy Period solely and directly due to an Illness or an Accident which occurs during the Policy Period, then We will pay the percentage of Sum Insured specified under Annexure I for the Surgical Procedure undertaken.

For the purpose of this Benefit, only the list of Surgical Procedures specified under Annexure I are covered.

This Benefit is payable subject to the following condition:

- i. If more than one Surgical Procedure or Day Care Treatment under Basic Benefit 1.3 below is performed on the Insured Person, through the same incision or by making different incisions, during the same surgical session, We shall only pay for that Surgical Procedure/Day Care Treatment performed in respect of which the largest amount shall become payable.
- ii. We will not pay claim for any listed surgery under this Benefit twice during the same Policy Year.
- iii. Our maximum liability for one or multiple listed surgeries shall be restricted to the benefit Sum Insured as mentioned in the Schedule of Benefits.

### 1.2. Hospital Daily Cash

If the Insured Person suffers an Illness or an Accident during the Policy Period which requires that Insured Person's Hospitalisation, then:

1.2.1. We will pay the amount specified against this Benefit in Section 4 (Schedule of Benefits) to this Policy for each continuous and completed period of 24 hours that the Insured Person is Hospitalised, subject to a maximum of 60 days per Policy Year; and

1.2.2. We will pay twice the amount specified against this Benefit in Section 4 (Schedule of Benefits) to this Policy for each continuous and completed period of 24 hours that the Insured Person is admitted in an Intensive Care Unit, subject to maximum of 15 days per Policy Year. Whenever payment is made under this sub-section, We will not pay the amount specified in 1.2.1 above for the period when the Insured Person is in Intensive Care Unit.

This Benefit is payable subject to the following conditions:

1. If during one continuous period of 24 hours of Hospitalisation (after having completed the first 24 hours), if the said Hospitalisation included admission in an Intensive Care Unit as well as in any other in-patient (non-Intensive Care Unit) ward of the Hospital, We shall pay the amount under this Benefit as if the admission was to the Intensive Care Unit, provided that the period of Hospitalisation in the Intensive Care Unit was at least 4 continuous hours.
2. If the period of Hospitalisation is for less than a continuous period of 7 days, no amount shall be payable under this Benefit for the first 24 hours of Hospitalisation. If the period of Hospitalisation extends beyond a continuous period of 7 days, We will make payment under this Benefit from the first day of Hospitalisation.

### 1.3. Day Care Treatment Cash

If the Insured Person undergoes any of the Day Care Procedure as specified in Annexure II during the Policy Period in a Hospital or a Day Care Centre due an Accident or illness which occurs during the Policy Period then, We will pay the amount specified against this Benefit in Section 7 (Schedule of Benefits) to this Policy, regardless of the actual costs incurred on such Day Care Procedure.

If more than one Day Care Procedure or Surgical Procedure under Basic Benefit 1.1 above is performed on the Insured Person, through the same incision or by making different incisions, during the same surgical session, We shall only pay for that Surgical Procedure/Day Care Procedure performed in respect of which the largest amount shall become payable.

### 1.4. Other Surgeries Cash

If the Insured Person is Hospitalised for a Surgical Procedure which is not listed under Basic Benefit 1.1 (Surgical Procedure Cash) during the Policy Period, solely and directly due to Illness or an Accident which occurs during the Policy Period then, We will pay the amount specified against this Benefit in Section 4 (Schedule of Benefits) to this Policy, regardless of the actual costs incurred on that Surgical Procedure.

### 1.5. Hospitalisation due to Dengue/Malaria/ Chikungunya

If the Insured Person is Hospitalised during the Policy Period for treatment of Dengue, Malaria or Chikungunya, and that Hospitalisation exceeds a continuous period of 3 days, then We will pay the amount specified against this Benefit in Section 4 (Schedule of Benefits) to this Policy.

For the purpose of this Policy:

- 1.5.1. Dengue means a mosquito-borne infection that can lead to a severe flu like illness. It is a viral infection and spread by Aedes mosquito. The symptoms include aching muscles and joints, body rash's, high fever, intense headache, pain behind the eyes, vomiting and feeling nauseous.

The diagnosis for Dengue should be evidenced by all of the following criteria:

- Confirmed diagnosis supported by NS1 antigen or IgM and IgG antibody reports
- Platelet threshold below 80,000/microL

- 1.5.2. Malaria means a mosquito-borne blood disease caused by a Plasmodium parasite. The symptoms include fever and chills, impaired consciousness, deep breathing and respiratory distress, abnormal bleeding, multiple convulsions.

The diagnosis for Malaria should be evidenced by all of the following criteria:

- o Confirmed diagnosis supported by microscopy or malaria rapid diagnostic test (RDT)
- o Fever and chills; and other symptoms like impaired consciousness, deep breathing and respiratory distress, abnormal bleeding, multiple convulsions.

1.5.3. Chikungunya means is a mosquito-borne viral infection, characterized by an abrupt onset of fever frequently accompanied by joint pain, muscle pain, headache, nausea, fatigue and rash.

The diagnosis for Chikungunya should be evidenced by all of the following criteria:

- o Confirmed diagnosis supported by serological test i.e. IgM and IgG antibodies or virological methods depending upon the onset of disease.
- o Fever persisting for more than five days and other symptoms like postural dizziness, cold extremities, decreased urine output, any bleeding under the skin or through any orifice, intractable pain.

Section. 2 Exclusions

Waiting Periods

- a) We shall not be liable to make any payment for any treatment which begins during waiting periods, unless the Insured Person suffers an Accident. All waiting periods shall apply for each Insured Person and claims shall be assessed accordingly.

90 days Waiting Period

- b) A waiting period of 90 days from the Policy Commencement Date shall apply to all claims under the Policy. This waiting period will not apply for any Insured Person that is accepted under Portability or for subsequent and continuous Renewals of the Policy with Us.

Specific Waiting Periods

- c) The Illnesses and treatments listed below will be covered subject to a waiting period of 24 months from the Policy Commencement Date as long as in the third Policy Year the Insured Person has been insured under Alpha Surgery Insurance Policy continuously and without any break:

Organ / Organ System	Surgeries / procedure (irrespective of any illness/diagnosis)
Ear, Nose, Throat (ENT)	<ul style="list-style-type: none"> <li>• Tonsillectomy with adenoidectomy</li> <li>• Tonsillectomy without adenoidectomy</li> <li>• Operations on frontal sinus</li> <li>• Operations on maxillary antrum using sublabial approach</li> <li>• Excision and destruction of a lingual tonsil</li> <li>• Surgery for pilonidal cyst</li> <li>• Surgery for pilonidal sinus</li> </ul>
Gynaecological	<ul style="list-style-type: none"> <li>• Hysterectomy for benign conditions (with/without Pelvic floor repair and with/without Salpingo- Oophorectomy)</li> <li>• Operation on Ovarian Cyst</li> <li>• Operations on the Bartholin's glands(cyst)</li> <li>• Unilateral or bilateral excision of adnexa of uterus</li> <li>• Hysteroscope guided biopsy of uterus</li> </ul>

Orthopaedic	<ul style="list-style-type: none"> <li>• Spinal Fusion (arthrodesis of spine with bone graft/internal fixation)</li> <li>• Arthroscopic knee aspiration</li> </ul>
Gastrointestinal	<ul style="list-style-type: none"> <li>• Cholecystectomy for various Gall bladder lesions</li> <li>• Choledochotomy for various Gall bladder lesions</li> <li>• Diaphragmatic/Hiatus Hernia Repair</li> <li>• Surgical treatment of anal fistulas</li> <li>• Surgical treatment of Haemorrhoids.</li> </ul>
Urogenital	<ul style="list-style-type: none"> <li>• Circumcision and other operations on the foreskin (if medically necessitated)</li> <li>• Incision and drainage of the Scrotum and tunica vaginalis testis</li> <li>• Maintenance Heamo Dialysis for Chronic renal failure</li> <li>• Percutaneous excision and destruction of prostate tissue</li> <li>• Surgical treatment of a varicocele and hydrocele of a spermatic cord</li> <li>• Transurethral excision and destruction of prostate tissue</li> <li>• Unilateral orchidectomy</li> <li>• Laminectomy/Discectomy for Spinal nerve root decompression</li> <li>• Kidney pelvic ureteric junction obstruction/Pyloplasty/Ureterocalcycostomy (excluding congenital causes)</li> <li>• Open surgical excision and destruction of prostate tissue</li> <li>• Operations on testicular hydrocele</li> </ul>
Eye	<ul style="list-style-type: none"> <li>• Operations for Pterygium with or without grafting</li> <li>• Operations of canthus and epicanthus when done for adhesions due to chronic infections</li> <li>• Cataract Surgery (ECCE or Phacoemulsification with or without intraocular lens implant)</li> <li>• Operation for glaucoma</li> </ul>
Others	<ul style="list-style-type: none"> <li>• Complete excision of Parathyroid gland</li> <li>• Complete excision of Thyroid gland</li> <li>• Partial excision of Parathyroid gland</li> <li>• Partial excision of Thyroid gland</li> </ul>

d) Pre-existing Waiting Period

Pre-Existing Diseases shall not be covered until the completion of 48 months of continuous coverage, since inception of the first Alpha Surgery Insurance Policy with Us provided that the Pre-existing Disease is declared and/or accepted in the proposal.

Coverage under the Policy for any past Illness/condition or Surgery is subject to the same being declared at the time of the proposal and accepted by Us without any specific exclusion.

Reduction in Waiting Periods

- e) If the proposed Insured Person is presently covered and has been continuously covered without any lapses under:

- i) any health insurance plan with an Indian non-life insurer as per guidelines on Portability, or
  - ii) any other similar health insurance plan from Us,
- Then:
- i) The waiting periods specified in Section 2b), Section 2c) and Section 2d) of the Policy shall stand waived if these waiting periods have been completed under the previous health insurance policy; OR
  - ii) The waiting periods specified in the Section 2b), Section 2c) and Section 2d) shall be reduced by the number of continuous preceding years of coverage of the Insured Person under the previous health insurance policy; and
  - iii) If the proposed Sum Insured for a proposed Insured Person is more than the sum insured applicable under the previous health insurance policy, then the reduced waiting period shall only apply to the extent of the sum insured and any other accrued benefits under the previous health insurance policy.
- f) The reduction in the waiting period specified above shall be applied subject to the following:
- i) We will apply the reduction of the waiting period only if We have received the database and past claim history related information as mandated under Portability guidelines from the previous Indian insurance company (if applicable);
  - ii) We are under no obligation to insure all Insured Persons or to insure all Insured Persons on the proposed terms, or on the same terms as the previous health insurance policy even if You have submitted to Us all documentation and information.
  - iii) We will retain the right to underwrite the proposal.
  - iv) We shall consider only completed years of coverage for waiver of waiting periods. Policy extensions, if any, sought during or for the purpose of porting the insurance policy shall not be considered for waiting period waiver.

#### Permanent Exclusions

- g) We will not make any payment for any claim in respect of the Insured Person directly or indirectly for, caused by, arising from or in any way attributable to any of the following unless expressly stated to the contrary in this Policy:
- a) Non-Medical Exclusions
    - i) War or similar situations: Treatment directly or indirectly arising from or consequent upon war or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, radiation of any kind.
    - ii) Any Insured Person committing or attempting to commit a breach of law with criminal intent.
    - iii) Intentional self-Injury or attempted suicide, while sane or insane.
    - iv) Dangerous acts (including sports): An Insured Person's participation or involvement in any Hazardous Activities or naval, military or air force operation in a professional or semi-professional nature.
  - b) Medical Exclusions
    - i) Treatment of Illness or Injury as a consequence of the use of alcohol, tobacco, narcotic or psychotropic substances.
    - ii) Treatment availed outside India.

- iii) Treatment at a healthcare facility which is not a Hospital, except to the extent covered under Basic Benefit 1.3 (Day Care Treatment Cash).
- iv) Treatment of obesity and any weight control program.
- v) Treatment for correction of eye sight due to refractive error.
- vi) Cosmetic, aesthetic and re-shaping treatments and surgeries:
  - (1) Plastic surgery or cosmetic surgery or treatments to change appearance unless necessary as a part of Medically Necessary Treatment certified in writing by the attending Medical Practitioner for reconstruction following an Accident, cancer or burns.
  - (2) Circumcisions (unless necessitated by Illness or Injury and forming part of medical treatment); aesthetic or change-of-life treatments of any description such as gender reassignment or transformation surgeries
- vii) Types of treatment, defined Illnesses/ conditions/ supplies:
  - (1) Alternative treatment or any other non-allopathic treatment.
  - (2) Conditions for which treatment could have been carried out on an outpatient basis without any Hospitalisation.
  - (3) Unproven/Experimental Treatment.
  - (4) Admission primarily for diagnostic and evaluation purposes only.
  - (5) Any diagnostic expenses which is not related and not incidental to any Illness which is not covered in this Policy.
  - (6) Convalescence, rest cure, sanatorium treatment, rehabilitation measures, respite care, long-term nursing care, custodial care, safe confinement, de-addiction, general debility or exhaustion ("run-down condition").
  - (7) Sleep-apnoea.
  - (8) External Congenital Anomaly.
  - (9) Stem cell therapy or surgery
  - (10) Growth hormone therapy.
  - (11) Any form of hormone replacement therapy (HRT) and or administration of other hormonal medication.
  - (12) Venereal disease, sexually transmitted disease or Illness;
  - (13) 'AIDS' (Acquired Immune Deficiency Syndrome) and/or infection with HIV (Human Immunodeficiency Virus) including but not limited to conditions related to or arising out of HIV/AIDS such as ARC (AIDS Related Complex), Lymphomas in brain, Kaposi's sarcoma, tuberculosis.
  - (14) Any expense attributable directly or indirectly to pregnancy (including voluntary termination), miscarriage (except as a result of an Accident or Illness), maternity or child birth (including caesarean section), except in the case of ectopic pregnancy.
  - (15) Treatment for sterility, infertility (primary or secondary), assisted conception or other related conditions and complications arising out of the same.
  - (16) Birth control, and similar procedures including complications arising out of the same.
  - (17) Admission for administration of intra-articular or intra-lesional injections, monoclonal antibodies such as Rituximab/Infliximab/Trastuzumab and supplementary medications such as Zoledronic acid or Intravenous (IV) immunoglobulin infusion.
  - (18) Dental Treatment of any kind, unless requiring Hospitalisation due to accident.
- viii) Healthcare providers (Hospitals /Medical Practitioners):
  - (1) Use of any healthcare provider such as a Medical Practitioner, Hospital, or any other individual or entity which is not to be used as We have either told You (in writing) at the time of Renewal or at any specific time during the Policy Period, and/or which is specified on Our website ([www.reliancehealthinsurance.com](http://www.reliancehealthinsurance.com), as updated from time to time) unless treatment from such healthcare provider is taken as Emergency Care

and where it is proved to Our satisfaction that under the circumstances in which the Insured Person was placed, it was not possible for You, the Insured Person or any other accompanying person to check whether the same was listed as blacklisted on Our website. In any event, We will pay only a maximum of one claim for such emergency treatment taken at such healthcare provider, and any claims arising from subsequent treatments taken would not be payable under the Policy, and would be rejected.

- (2) Treatment rendered by a Medical Practitioner which is outside his/her discipline or the discipline for which he/she is licensed.
  - (3) Treatments rendered by a Medical Practitioner who is a member of the Insured Person's family or stays with him/her.
- ix) Any treatment or part of a treatment that is not Medically Necessary Treatment.

### Section. 3 General Conditions

a) Condition Precedent & Premium Payments

The fulfilment of the terms and conditions of this Policy including the payment of premium by the due dates mentioned in the Schedule and the correct disclosures in a complete manner in the proposal form insofar as they relate to anything to be done or complied with by You or any Insured Person shall be Conditions Precedent to Our liability. The premium shall be paid in full at the inception of the Policy as single premium for opted Policy Period. The premium for the Policy will remain the same for the Policy Period. The Policy will be issued for a period of 1 or 2 or 3 year(s) based on the Policy Period selected and specified in the Schedule. The Sum Insured and the benefits under the Policy will be applicable on Policy Year basis.

b) Geography & Currency

This Policy is applicable solely to an Insured Person who is an Indian resident per applicable Indian law. In the event of a change in status other than Indian resident of such Insured Person, the same should be informed to Us and We shall cancel the Policy with refund of premium paid for the remaining Policy Period provided that no claims have been made.

This Policy only covers medical treatment taken within India. All payments under this Policy will only be made in Indian Rupees within India.

c) Insured Person

Only those persons named as Insured Persons in the Schedule will be covered under this Policy. Any person may be added during the Policy Period after his application has been accepted by Us, additional premium has been paid and We have issued an endorsement confirming the addition of such person as an Insured Person.

All health insurance policies are portable. Any Insured Person has the option to migrate to similar indemnity health insurance policy available with Us or any other non-life insurer, at the time of Renewal subject to underwriting with all the accrued continuity benefits such as waiver of waiting period provided the Policy has been maintained without a break as per Portability guidelines.

You should initiate action to approach another insurer to take advantage of Portability well before the renewal date to avoid any break in the policy coverage due to delay in acceptance of the proposal by the other insurer. You may apply for portability at least 45 days before, but

not earlier than 60 days from the premium renewal date of existing policy that is proposed to be ported.

If an Insured Person dies, he will cease to be an Insured Person upon Us receiving all relevant particulars in this regard. We will return a rateable part of the premium received for such person if there are no claims made in respect of that Insured Person under the Policy for that Policy Period.

d) Loadings & Discounts

We may apply a risk loading on the premium payable (based upon the declarations made in the proposal form and the health status of the persons proposed for insurance). The maximum risk loading applicable for an individual will not exceed above 100% per diagnosis / medical condition and an overall risk loading of over 150%. These loadings are applied from Commencement Date including subsequent Renewal(s) with Us or on the receipt of the request for increase in Sum Insured (for the increased Sum Insured).

We will inform You about the applicable risk loading through a counter offer letter. You need to revert to Us with consent and additional premium (if any), within 7 days of the issuance of such counter offer letter. In case, You neither accept the counter offer nor revert to Us within 7 days, We will cancel Your application and refund the premium paid within next 7 days.

Please note that We will issue the Policy only after receiving Your consent and additional premium (if any).

The application of loading does not mean that the Illness/ condition, for which loading has been applied, would be covered from inception. Any waiting periods as mentioned in Section 2b), Section 2c) and Section 2d) above or specifically mentioned on the Schedule shall be applied on the Illness/condition, as applicable.

We will provide the following discounts at inception and Renewal of the Policy:

- i) Prime Discount: A one-time discount of 10% on the Premium is applicable if the Insured Person is a
1. Reliance Group employee (full time employee) / Reliance Group shareholder at the time of enrolment, or
  2. Repeat customer (customers who hold an active individual/retail health insurance policy and or an active individual/retail personal accident policy with Us at the time of enrolment).

Provided that the such Policy is purchased through Our website or Our mobile app and without the involvement of any insurance agent or insurance intermediary or Our Direct Sales Channel – Health Manager. This discount is not available at subsequent renewals.

- ii) Buy Online Discount: The Insured Person is eligible for 10% discount on premium in case of buying or Renewing the Policy online from Our website, Our mobile app, or any duly licensed web aggregator provided that the first Policy with Us was also purchased through Our website, Our mobile app, or such web aggregator, and without the involvement of any other insurance agent or insurance intermediary or Our Direct Sales Channel – Health Manager.

- iii) Policy Tenure Discount: If the Policy Period is more than one year, the Insured Person will be entitled to receive a discount of 10%, if You pay 2 years or 3 years premium in advance as a single premium.



## e) Notification of Claim:

It is a Condition Precedent to Our liability under this Policy that the following procedures must be followed strictly in respect of any treatment for which a claim may be made:

- i) If the treatment requires Hospitalisation, We must be informed immediately and in any event not later than 7 days of the date of admission to the Hospital.
- ii) If the above condition is not fulfilled on the grounds that the claim was intimated to any other insurer covering the Hospitalisation expenses, then We may accept a written confirmation of such intimation from that insurer.

## f) Supporting Documentation &amp; Examination

For all claims under the Policy, We must be provided with all documentation, medical records and information that is required to establish the circumstances of the claim, its quantum or Our liability for the claim within 15 days of the earlier of Our request or the Insured Person's discharge from Hospitalisation or completion of treatment. The necessary information and documentation includes the following:

- i) Our claim form, duly completed and signed for on behalf of the Insured Person, provided that no signatures are required if the same is being completed or populated digitally in Our website.
- ii) Copy of the identification document of the Insured Person such as voter ID card, driving license, passport, PAN card or Aadhaar card.
- iii) All reports, including but not limited to all medical reports, case histories, investigation reports, treatment papers, discharge summaries. We will accept copies of the documents, verified and attested by the Hospital.
- iv) A precise diagnosis of the treatment including first and follow up consultation papers for which a claim is made.
- v) Treating Medical Practitioner's certificate regarding missing information in case histories e.g. circumstance of Injury and alcohol or drug influence at the time of Accident Copy of MLC (medico legal case) records, FIR (First Information Report), Certificate regarding abuse of Alcohol/intoxicating agent, in case of Accidental injury.
- vi) Stickers and invoice of implants used during surgery.
- vii) Original Cancelled Cheque in CTS 2010 format (Printed A/C No. IFSC Code, Printed Name), In case the Name is not printed on the Cheque Leaf, duly attested scanned copy of the first page of the Pass-book or the Authorised Bank statement for NEFT (to enable direct credit of claim amount in bank account) and KYC (recent phot ID/address proof and photograph) requirements.
- viii) Legal heir certificate, in the event of death.
- ix) Regulatory requirements as amended from time to time.

If any claim is not notified/made within the timelines set out above, then We will condone such delay on merits only where the delay has been proved to be for reasons beyond the claimant's control.

The Insured Person will have to undergo medical examination by Our authorised Medical Practitioner, as and when We may reasonably require, to obtain an independent opinion for the purpose of processing any claim. We will bear the cost towards performing such medical examination (at the specified location) of the Insured Person.

## g) Claims Payment

- i) We will be under no obligation to make any payment under this Policy unless We have received all premium payments in full in time and all payments have been realised and We have been provided with the documentation and information We had

requested to establish the circumstances of the claim, its quantum or Our liability for it, and unless the Insured Person has complied with his obligations under this Policy.

- ii) We will only make payment to or at Your direction. If an Insured Person submits the requisite claim documents and information along with a declaration in a format acceptable to Us of having incurred the expenses, this person will be deemed to be authorised by You to receive the concerned payment. In the event of the death of You or an Insured Person, We will make payment to the Nominee (as named in the Schedule) in India.
  - iii) The assignment of benefits of under the Policy shall be allowed subject to applicable law.
  - iv) We are not obliged to make payment for any claim or that part of any claim that could have been avoided or reduced if the Insured Person had taken reasonable care, or that is brought about or contributed to by the Insured Person failing to follow the directions, advice or guidance provided by a Medical Practitioner.
  - v) We shall make the payment of claim that has been admitted as payable by Us under the Policy terms and conditions within 30 days of submission of all necessary documents / information and any other additional information required for the settlement of the claim. 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 the claim within 45 days from the date of receipt of last necessary document.
  - vi) All claims shall be settled in accordance with the applicable regulatory guidelines, including IRDAI (Protection of Policyholders Regulations), 2017 as amended from time to time. In case of delay in payment of any claim that has been admitted as payable by Us under the Policy terms and conditions, beyond the time period as prescribed under IRDAI (Protection of Policyholders Regulations), 2017, we shall pay interest at a rate which is 2% above the bank rate. For the purpose of this clause, 'bank rate' shall mean the bank rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due.
- h) Non-Disclosure or Misrepresentation:  
This Policy has been issued on the basis of the Disclosure to Information Norm, including the information provided by You in respect of the Insured Persons in the Proposal Form and any other details submitted in relation to the Proposal Form. If at the time of issuance of Policy or during continuation of the Policy, any material fact in the information provided to Us in the Proposal Form or otherwise, by You or the Insured Person, or anyone acting on behalf of You or an Insured Person is found to be incorrect, incomplete, suppressed or not disclosed, wilfully or otherwise, the Policy shall be:
- i) cancelled *ab initio* from the inception date or the renewal date (as the case may be), or the Policy may be modified by Us, at Our sole discretion, upon 30 day's notice by sending an endorsement to Your address shown in the Schedule without refund of premium; and
  - ii) any claim made under such Policy, shall be rejected/repudiated forthwith.
- i) Dishonest or Fraudulent Claims  
If any claim is in any manner dishonest or fraudulent, or is supported by any dishonest or fraudulent means or devices, whether by You or any Insured Person or anyone acting on behalf

of You or an Insured Person, then this Policy will be void and all benefits otherwise payable under it will be forfeited.

j) Endorsements

This Policy constitutes the complete contract of insurance. This Policy cannot be changed or varied by anyone (including an insurance agent or broker) except Us, and any change We make will be evidenced by a written endorsement signed and stamped by Us.

k) Renewal

All applications for Renewal must be received by Us before the end of the Policy Period. Grace Period of 30 days for renewing the policy is provided under this Policy. Any Illness/ condition contracted in the break in period will not be covered and will be treated as a Pre-existing Disease.

This Policy is ordinarily Renewable for life except on grounds of fraud, moral hazard or misrepresentation or non-cooperation by the Insured Person.

We are NOT under any obligation to:

- i) Send Renewal notice or reminders.
- ii) Renew it on same terms or premium as the expiring Policy.

Any change in benefit or premium (other than due to change in Age) will be done with the approval of the Insurance Regulatory and Development Authority of India (IRDAI) and will be intimated to You atleast 3 months in advance.

In the event of this policy being withdrawn in future, We will intimate you about the same 3 months prior to expiry of the Policy. You will have the option to migrate to similar health insurance policy available with Us at the time of Renewal with all the accrued continuity benefits such as waiver of waiting periods provided that the Policy has been maintained without a break as per Portability guidelines.

We will not apply any additional loading on your policy premium at Renewal based on claim experience.

The Sum Insured can be enhanced only at the time of Renewal subject to the underwriting norms and acceptability criteria of the Policy. If You increase the Sum Insured, the case may be subject to health check-up. In case of increase in the Sum Insured, the waiting periods will apply afresh in relation to the amount by which the Sum Insured has been enhanced. The quantum of increase shall be at Our discretion and subject to Our underwriting guidelines. Additional premium if any, shall be charged as per terms and conditions of the Policy.

We shall be entitled to call for any information or documentation before agreeing to renew the Policy. Your Policy terms may be altered based on the information received.

l) Notices

Any notice, direction or instruction under this Policy will be in writing and if it is to:

- i) The Insured Person, then it will be sent to You at Your address specified in the Schedule and You will act for the Insured Person for these purposes.

ii) Us, it will be delivered to Our address specified in the Schedule.

No insurance agents, insurance intermediaries or other person or entity is authorised to receive any notice, direction or instruction on Our behalf.

m) Governing Law & Dispute Resolution Clause

Any and all disputes or differences under or in relation to this Policy will be determined by the Indian Courts and subject to Indian law.

If any administrative or judicial body imposes any condition on this Policy for any reason, We are bound to follow the same which may include suspension of all Benefits and obligations under this Policy.

If Our performance or any of Our obligations are in any way prevented or hindered as a consequence of any act of God or State, strike, lock out, legislation or restriction by any government or any other authority or any other circumstances beyond Our anticipation or control, the performance of this Policy shall be wholly or partially suspended during the continuance of such force majeure. We will resume Our obligations under the Policy, to the extent possible, after the force majeure conditions cease to exist even for the period during which the force majeure conditions existed.

n) Free Look Period

You have a period of 15 days (30 days if the Policy is sold through distance marketing or if the Policy Period is 3 years) from the date of receipt of the Policy document to review the terms and conditions of this Policy. If You have any objections to any of the terms and conditions, You have the option of cancelling the Policy stating the reasons for cancellation and You will be refunded the full premium paid by You. You can cancel Your Policy only if no claims have been made under the Policy. All Your rights under this Policy will immediately stand extinguished on the free look cancellation of the Policy. Free look provision is not applicable and available at the time of Renewal of the Policy.

o) Cancellation (other than Free Look Period)

i. You may terminate this Policy at any time by giving Us written notice, and the Policy will terminate when such written notice is received. If no claim has been made under the Policy, then We will refund premium in accordance with the table below:

Length of time Policy in force	Refund of premium	
	First Policy Period	Renewal
Upto 90 days	100%	Pro-rata
Above 90 days	Pro-rata	Pro-rata

ii. We may at any time terminate this Policy on grounds of misrepresentation, fraud, non-disclosure of material facts or non-cooperation by You or any Insured Person upon 30 days' notice by sending an endorsement to Your address shown in the Schedule without refund of premium.

Section. 4 Schedule of Benefits

The following Benefits are available as per the plan opted and specified against the Insured Person named in the Schedule. Benefits are on a per Insured Person per Policy Year basis.

Sum Insured per Insured Person per Policy Year [All figures in INR]	100,000	200,000	300,000	400,000	500,000	10,00,000
1.1. Surgical Procedure Cash (Upto)	100,000	200,000	300,000	400,000	500,000	10,00,000
1.2. Hospital Daily Cash (Upto 60 Days)	1,000	2,000	3,000	4,000	4,000	4,000
1.3. Hospital Daily Cash ICU [Upto 15 days]	2,000	4,000	6,000	8,000	8,000	8,000
1.4. Day Care Treatment Cash	5,000	10,000	15,000	20,000	25,000	50,000
1.5. Other Surgeries Cash	2,000	4,000	6,000	8,000	10,000	20,000
1.6. Hospitalisation due to Dengue/ Malaria/ Chikungunya	20,000	20,000	20,000	20,000	20,000	20,000

Section. 5 Interpretations & Definitions

The terms defined below have the meanings ascribed to them wherever they appear in this Policy and, where appropriate, references to the singular include references to the plural; references to the male include the female and references to any statutory enactment include subsequent changes to the same:

Def. 1. Accident means a sudden, unforeseen and involuntary event caused by external, visible and violent means.

Def. 2. Age or Aged means "Age as on last birthday" as determined on the date of first Policy issuance or at renewal. In case of change in Age during the proposal stage, then "Age" shall be determined on the date of proposal form submission would be considered for premium calculation.

Def. 3. Condition Precedent means a policy term or condition upon which the Insurer's liability under the Policy is conditional upon.

Def. 4. Congenital Anomaly means a condition which is present since birth, and which is abnormal with reference to form, structure or position.

- i) Internal Congenital Anomaly - Congenital Anomaly which is not in the visible and accessible parts of the body;
- ii) External Congenital Anomaly - Congenital Anomaly which is in the visible and accessible parts of the body.

Def. 5. Day Care Centre means any institution established for Day Care Treatment of Illness and/or Injuries or a medical setup with a Hospital and which has been registered with the local authorities, wherever applicable, and is under supervision of a registered and qualified Medical Practitioner AND must comply with all minimum criterion as under –

- i) has qualified nursing staff under its employment;
- ii) has qualified Medical Practitioner/s in charge;
- iii) has fully equipped operation theatre of its own where Surgical Procedures are carried out;
- iv) maintains daily records of patients and will make these accessible to the insurance company's authorized personnel.

Def. 6. Day Care Treatment means medical treatment, and/or Surgical Procedure which is:

- i) undertaken under General or Local Anaesthesia in a Hospital/Day Care Centre in less than 24 hrs because of technological advancement, and
- ii) which would have otherwise required Hospitalisation of more than 24 hours.

Treatment normally taken on an out-patient basis is not included in the scope of this definition.

- Def. 7. Deductible means a cost-sharing requirement under a health insurance policy that provides that the Insurer will not be liable for a specified rupee amount in case of indemnity policies and for a specified number of days/hours in case of hospital cash policies which will apply before any benefits are payable by the insurer. A deductible does not reduce the Sum Insured, and for the purpose of this Policy, Deductible shall apply on a per claim basis for Hospital Daily Cash Benefit.
- Def. 8. Dental Treatment means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.
- Def. 9. Disclosure to information norm means 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.
- Def. 10. Emergency Care means management for an illness or injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a *medical practitioner* to prevent death or serious long-term impairment of the insured person's health.
- Def. 11. Grace Period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a 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.
- Def. 12. Hazardous Activities means any sport or activity, which is potentially dangerous to the Insured Person whether he is trained or not. Such sport/activity includes stunt activities of any kind, adventure racing, base jumping, biathlon, big game hunting, black water rafting, BMX stunt/ obstacle riding, bobsleighting/ using skeletons, bouldering, boxing, canyoning, caving/ pot holing, cave tubing, rock climbing/ trekking/ mountaineering, cycle racing, cyclo-cross, drag racing, endurance testing, hand gliding, harness racing, hell skiing, high diving (above 5 meters), hunting, ice hockey, ice speedway, jousting, judo, karate, kendo, lugging, risky manual labour, marathon running, martial arts, micro – lighting, modern pentathlon, motor cycle racing, motor rallying, parachuting, paragliding/ parapenting, piloting aircraft, polo, power lifting, power boat racing, quad biking, river boarding, scuba diving, river bugging, rodeo, roller hockey, rugby, ski acrobatics, ski doo, ski jumping, ski racing, sky diving, small bore target shooting, speed trials/ time trials, triathlon, water ski jumping, weight lifting or wrestling of any type.
- Def. 13. Hospital means any institution established for Inpatient Care and Day Care Treatment of Illness and/or Injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) of the said act Or complies with all minimum criteria as under:
- i) has qualified nursing staff under its employment round the clock;
  - ii) has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
  - iii) has qualified Medical Practitioner(s) in charge round the clock;
  - iv) has a fully equipped operation theatre of its own where Surgical Procedures are carried out;

- v) maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.
- Def. 14. Hospitalisation means admission in a Hospital for a minimum period of 24 consecutive 'Inpatient Care' hours except for specified procedures/treatments, where such admission could be for a period of less than 24 consecutive hours.
- Def. 15. Illness means a sickness, or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.
- i) Acute condition - Acute condition is a disease, illness or 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 disease/ illness/ injury which leads to full recovery
- ii) Chronic condition - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
- 1) it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests;
  - 2) it needs ongoing or long-term control or relief of symptoms;
  - 3) it requires rehabilitation for the patient or for the patient to be specially trained to cope with it;
  - 4) it continues indefinitely;
  - 5) it recurs or is likely to recur.
- Def. 16. Injury 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.
- Def. 17. Insured Person means the person named as such in the Schedule.
- Def. 18. Intensive Care Unit means an identified section, ward or wing of a *Hospital*/which is under the constant supervision of a dedicated Medical Practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
- Def. 19. Medical Advise means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription
- Def. 20. Medical Practitioner 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 its scope and jurisdiction of license.
- Def. 21. Medically Necessary Treatment means any treatment, test, medication, or stay in hospital or part of stay in hospital which:
- i) is required for the medical management of the Illness or Injury suffered by the Insured;
  - ii) must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration or intensity;
  - iii) must have been prescribed by a Medical Practitioner;
  - iv) must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

- Def. 22. Notification of Claim means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.
- Def. 23. Portability means right to transfer by an individual health insurance policyholder (including family cover) of the credit gained for Pre-Existing Disease and time-bound exclusions if he/she chooses to switch from one insurer to another or from one plan to another plan of the same insurer.
- Def. 24. Pre-existing Disease means any condition, ailment or Injury or related condition(s) for which there were signs or symptoms, and / or were diagnosed, and / or for which Medical Advice / treatment was received within 48 months prior to the first policy issued by the insurer and renewed continuously thereafter.
- Def. 25. Policy means Your statements in the proposal form (which are the basis of this Policy), this policy wording (including endorsements, if any), Appendices to the Policy and the Schedule (as the same may be amended from time to time).
- Def. 26. Policy Commencement Date means the commencement date of this Policy as specified in the Schedule.
- Def. 27. Policy Decision is the decision made by Us whether to issue the Policy to You or reject the proposal.
- Def. 28. Policy Expiry Date means the end date of this Policy as specified in the Schedule.
- Def. 29. Policy Period means the period between the Commencement Date and the Expiry Date specified in the Schedule.
- Def. 30. Policy Year means a period of 12 consecutive months commencing from the Commencement Date or any anniversary thereof.
- Def. 31. Qualified Nurse is a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India
- Def. 32. Renewal means the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.
- Def. 33. Sum Insured means the sum shown in the Schedule which represents Our maximum, total and cumulative liability for each Insured Person for any and all claims made in respect of that Insured Person during the Policy Period.
- Def. 34. Surgery or Surgical Procedure 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 or prolongation of life, performed in a Hospital or Day Care Centre by a Medical Practitioner.
- Def. 35. Unproven/Experimental treatment means treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.



Def. 36. We/Our/Us/ Company means Reliance Health Insurance Limited.

Def. 37. You/Your/Policyholder means the person named in the Schedule who has concluded this Policy with Us.

Section. 6 Service related Information:

You can reach Us through any of the following methods for any service related issue and assistance:

- Website : [www.reliancehealthinsurance.com](http://www.reliancehealthinsurance.com)
- Email : [reliancehealth.service@relianceada.com](mailto:reliancehealth.service@relianceada.com)
- Helpline : 022-33426868
- Courier : Reliance Health Insurance Limited  
 42/KS/301, 3rd Floor, Krishe Block,  
 Krishe Sapphire, Madhapur,  
 Hyderabad – 500 081

Section. 7 Claim Related Information

For any claim related query, intimation of claim and submission of claim related documents, You can contact Us through:

Please review your Alpha Surgery Insurance and familiarize yourself with the benefits available and the exclusions.

To help us to provide you with fast and efficient service, we kindly ask you to note the following:

1. We recommend that you keep copies of all documents submitted to Reliance Health Insurance
2. Please quote your member ID/policy number in all your correspondences

Intimation & Assistance	<p>Please intimate Us of any event or occurrence that may give rise to a claim under this Policy within 7 days of undergoing the listed surgery and or listed daycare procedure.</p> <p>Reliance Health Insurance can be contacted through:</p> <ul style="list-style-type: none"> <li>Website : <a href="http://www.reliancehealthinsurance.com">www.reliancehealthinsurance.com</a></li> <li>Email : <a href="mailto:reliancehealth.service@relianceada.com">reliancehealth.service@relianceada.com</a></li> <li>Helpline : 022-33426868/ Senior Citizens: 022-33426888</li> <li>Courier : Reliance Health Insurance Limited              42/KS/301, 3rd Floor, Krishe Block,              Krishe Sapphire, Madhapur,              Hyderabad – 500 081</li> </ul> <p>Our customer service team will provide you the required assistance and will send the claim form &amp; explain the complete claim procedure</p>
Claim Procedure	<p>You must submit a duly filled claim form along with specified documents within 45 days undergoing the listed surgery and or listed daycare procedure against which the claim is made.</p> <ul style="list-style-type: none"> <li>• If there is any deficiency in the documents/information submitted by you, We will send the deficiency letter within 10 days of receipt of the claim documents.</li> </ul>

	<ul style="list-style-type: none"><li>• Any additional information requested must be submitted within 15 days of Our request.</li><li>• On receipt of the complete set of claim documents, We will send the payment for the admissible amount, along with a settlement statement within 30 days.</li></ul>
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#### Section. 8 Grievance Redressal Procedure

If You have a grievance that You wish Us to redress, You may contact Us with the details of Your grievance through:

- Website : [www.reliancehealthinsurance.com](http://www.reliancehealthinsurance.com)
- Email : [reliancehealth.service@relianceada.com](mailto:reliancehealth.service@relianceada.com) (Level 1)  
[reliancehealth.grievance@relianceada.com](mailto:reliancehealth.grievance@relianceada.com) (Level 2)  
[reliancehealth.gro@relianceada.com](mailto:reliancehealth.gro@relianceada.com) (Level 3)
- Helpline : 022-33426868 / 022-33426888 (Senior Citizens)
- Courier : Reliance Health Insurance Limited  
42/KS/301, 3rd Floor, Krishe Block,  
Krishe Sapphire, Madhapur,  
Hyderabad – 500 081

As per guidelines on special provision for Insured Persons who are senior citizens, We will provide a separate channel for addressing grievances of our senior citizen customers. You may avail this service by contacting the above-mentioned Helpline number.

If You are not satisfied with Our redressal of Your grievance through one of the above methods, You may contact Our Head of Customer Service at:

Grievance Redressal Officer  
The Grievance Cell,  
Reliance Health Insurance Limited,  
42/KS/301, 3rd Floor, Krishe Block,  
Krishe Sapphire, Madhapur,  
Hyderabad – 500 081

Grievance Redressal officer email ID: [reliancehealth.gro@relianceada.com](mailto:reliancehealth.gro@relianceada.com)  
Grievance Redressal officer contact number: 022-33031550

In case Your complaint is not fully addressed by Us, You may use the Integrated Grievance Management System (IGMS) for escalating the complaint to IRDAI. Through IGMS, Insured can register the complaint online and track its status. For registration please visit IRDAI website [www.irdaindia.org](http://www.irdaindia.org). If the issue still remains unresolved, You may, subject to vested jurisdiction, approach Insurance Ombudsman for the redressal of the grievance.

If you have a grievance, approach the grievance cell of Insurance Company first. If the complaint is not resolved/ not satisfied/not responded for 30 days, then You can approach The Office of the Insurance Ombudsman (Bimalokpal). The contact details of Ombudsman offices are mentioned below.

Please visit Our website for details to lodge complaint with Ombudsman.

Ombudsman Offices	
Jurisdiction	Office Address
Gujarat, Dadra & Nagar Haveli, Daman and Diu	<b>AHMEDABAD</b> 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@gbic.co.in">bimalokpal.ahmedabad@gbic.co.in</a>
Karnataka	<b>BENGALURU</b> 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@gbic.co.in">bimalokpal.bengaluru@gbic.co.in</a>
Madhya Pradesh Chattisgarh	<b>BHOPAL</b> 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@gbic.co.in">bimalokpal.bhopal@gbic.co.in</a>
Orissa	<b>BHUBANESHWAR</b> Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 / 2596455 Fax: 0674 - 2596429 Email: <a href="mailto:bimalokpal.bhubaneswar@gbic.co.in">bimalokpal.bhubaneswar@gbic.co.in</a>
Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh	<b>CHANDIGARH</b> 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: <a href="mailto:bimalokpal.chandigarh@gbic.co.in">bimalokpal.chandigarh@gbic.co.in</a>
Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry)	<b>CHENNAI</b> 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@gbic.co.in">bimalokpal.chennai@gbic.co.in</a>
Delhi	<b>DELHI</b> Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23239633 / 23237532 Fax: 011 - 23230858

	Email: <a href="mailto:bimalokpal.delhi@gbic.co.in">bimalokpal.delhi@gbic.co.in</a>
Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura	GUWAHATI Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2132204 / 2132205 Fax: 0361 - 2732937 Email: <a href="mailto:bimalokpal.guwahati@gbic.co.in">bimalokpal.guwahati@gbic.co.in</a>
Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.	HYDERABAD 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 - 65504123 / 23312122 Fax: 040 - 23376599 Email: <a href="mailto:bimalokpal.hyderabad@gbic.co.in">bimalokpal.hyderabad@gbic.co.in</a>
Rajasthan	JAIPUR 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@gbic.co.in">bimalokpal.jaipur@gbic.co.in</a>
Kerala, Lakshadweep, Mahe-a part of Pondicherry.	ERNAKULAM 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@gbic.co.in">bimalokpal.ernakulam@gbic.co.in</a>
West Bengal, Sikkim, Andaman & Nicobar Islands.	KOLKATA 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@gbic.co.in">bimalokpal.kolkata@gbic.co.in</a>
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,	LUCKNOW 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@gbic.co.in">bimalokpal.lucknow@gbic.co.in</a>

<p>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          &amp; Thane.</p>	<p>MUMBAI          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@gbic.co.in">bimalokpal.mumbai@gbic.co.in</a></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>NOIDA          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@gbic.co.in">bimalokpal.noida@gbic.co.in</a></p>
<p>Bihar,          Jharkhand.</p>	<p>PATNA          Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade          Building, Bazar Samiti Road, Bahadurpur, Patna 800 006.          Tel.: 0612-2680952          Email: <a href="mailto:bimalokpal.patna@gbic.co.in">bimalokpal.patna@gbic.co.in</a></p>
<p>Maharashtra,          Area of Navi Mumbai          and Thane excluding          Mumbai Metropolitan          Region.</p>	<p>PUNE          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</p>

	Email: bimalokpal.pune@gbic.co.in
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The updated details of Insurance Ombudsman are available on IRDA website: [www.irdaindia.org](http://www.irdaindia.org), on the website of General Insurance Council: [www.generalinsurancecouncil.org.in](http://www.generalinsurancecouncil.org.in), our website [[www.reliancehealthinsurance.com](http://www.reliancehealthinsurance.com)] or can be obtained from any of our offices.

Annexure I – Surgical Procedures covered under Section 1.1

List of Surgical Procedures for the purpose of Surgical Procedure Cash (Section 1.1) Benefit.

#	List of major Surgery	% of Benefit Sum Insured payable
<b>CARDIOVASCULAR SYSTEM</b>		
1	CABG (Coronary Artery Bypass Grafting)	100%
2	Heart Proximal aortic aneurysm, Aortic root transplantation with coronary artery reimplantation	100%
3	Heart Valve Replacement using Mechanical or Bio-Prosthetic valves	100%
4	Major Surgery of Aorta	100%
5	Aortic valve repair (Open Heart Valvuloplasty)	60%
6	Excision of benign mediastinal lesions (evidence of thoracotomy needs to be ascertained)	60%
7	Initial implantation of permanent pacemaker in the heart	60%
8	Mitral valve repair (Open Heart Valvuloplasty)	60%
9	Pericardiotomy / Pericardectomy	60%
10	Pulmonary valve repair (Open Heart Valvuloplasty)	60%
11	Tricuspid valve repair (Open Heart Valvuloplasty)	60%
12	Closed Heart Valvotomy (Aortic, Mitral, Pulmonary, Tricuspid Valves)	40%
13	Coronary Angioplasty with Stent implantation	40%
14	Major vein repair with or without grafting for traumatic & nontraumatic lesions	40%
15	Clipping or repair of Aneurysm	20%
16	Percutaneous (balloon) Valvuloplasty	20%
17	Heart/Heart-Lung Transplant	100%
<b>DIGESTIVE SYSTEM</b>		
18	Subtotal/Partial Pancreatectomy	60%
19	Artificial opening into stomach	20%
20	cholecystectomy/choledochotomy for various Gall bladder lesions	40%
21	Excision of esophagus and stomach	100%
22	Open Surgery for treatment of Peptic Ulcer	40%
23	Partial excision of esophagus	40%
24	Partial Gastrectomy	40%
25	Partial Resection of Liver	60%
26	Radical Pancreaticoduodenectomy (Whipples procedure)	100%
27	Rectum, Various Lesions, Abdominal-Perineal Pull Through Resection with Colo-Anal Anastomosis	100%
28	Resection and Anastomosis of any part of digestive tract	40%
29	Splenectomy	60%
30	Subtotal/Partial Pancreatectomy	60%
31	TIPS procedure for portal Hypertension (trans jugular intrahepatic Porto systemic shunt)	20%
32	Total excision of esophagus	60%
33	Total excision of stomach	60%
34	Total Glossectomy	40%

35	Unilateral or Bilateral sympathectomy	40%
ENDOCRINE SYSTEM		
36	Complete excision of adrenal glands	60%
37	Complete excision of Parathyroid gland	60%
38	Complete excision of Thyroid gland	60%
39	Partial excision of adrenal glands	40%
40	Partial excision of Parathyroid gland	40%
41	Partial excision of Thyroid gland	40%
ENT		
42	Labyrinthomy for various lesions	40%
43	Operations on frontal sinus	40%
44	Operations on maxillary antrum using sublabial approach	20%
45	Total ear amputation with reconstruction	60%
46	Total Nasal Reconstruction due to Traumatic lesions	60%
47	Trans mastoid removal cholesteatoma with extended Mastoidectomy	60%
48	Corneal or Retinal Repair for Traumatic eye injuries	20%
49	Orbit Tumor Exenteration /Flap reconstruction	40%
50	Penetrating injuries of the eye or repair of ruptured globe	20%
KIDNEY/URINARY TRACT/REPRODUCTIVE SYSTEM		
51	Bilateral excision of adnexa of uterus	40%
52	Excision of vagina	40%
53	Excision of vulva	20%
54	Extirpation of lesion of vulva	20%
55	Hysterectomy for malignant conditions	60%
56	Unilateral or Bilateral excision of adnexa of uterus	40%
57	Amputation of penis	40%
58	Excision of ureter	40%
59	Kidney injury repair	40%
60	Kidney Pelvic ureteric junction obstruction/Pyloplasty/Ureterocalcycostomy (Excluding congenital causes)	40%
61	Open extirpation of lesion of kidney	40%
62	Open surgical excision and destruction of prostate tissue	20%
63	Other operations on Scrotum and tunica vaginalis testis	20%
64	Partial excision of bladder	20%
65	Partial excision of kidney	40%
66	Microvascular reattachment of penis following traumatic amputation	60%
67	Radical prostatovesiculectomy	60%
68	Reconstruction of the testis	20%
69	Reimplantation of ureter	20%
70	Therapeutic ureteroscopic operations on ureter	20%
71	Total excision of bladder	40%
72	Total or Partial nephrectomy due to medical advice (not as a transplant donor)	40%
73	Unilateral or Bilateral excision of testes	20%
74	Urinary diversion	20%
75	Renal transplant (recipient)	100%
MUSCULOSKELETAL SYSTEM (due to accident only)		
76	Amputation of arm	40%



77	Amputation of foot	20%
78	Amputation of hand	20%
79	Amputation of leg	40%
80	Excision reconstruction of joint	40%
81	Finger Trauma replantation	20%
82	Implantation of prosthesis for limb	40%
83	Open Reduction and Internal fixation of fracture Long bone (Humerus, Radius, ulna, Femur, Tibia, Fibula), with or without Bone grafting	20%
84	Osteomyelitis - Surgical Drainage and Curettage	20%
85	Other interposition reconstruction of joint	40%
86	Other prosthetic replacement of articulation of other bone	40%
87	Other prosthetic replacement of head of femur	40%
88	Other prosthetic replacement of head of humerus	40%
89	Other reconstruction of joint	40%
90	Other total prosthetic replacement of hip joint	40%
91	Other total prosthetic replacement of knee joint	40%
92	Other total prosthetic replacement of other joint	40%
93	Prosthetic interposition reconstruction of joint	40%
94	Prosthetic replacement of head of femur not using cement	40%
95	Prosthetic replacement of head of femur using cement	40%
96	Prosthetic replacement of head of humerus not using cement	40%
97	Prosthetic replacement of head of humerus using cement	40%
98	Prosthetic replacement/articulation/other bone not using cement	40%
99	Prosthetic replacement/articulation/other bone using cement	40%
100	Replantation of lower limb	60%
101	Replantation of upper limb	60%
102	Spinal Fusion (arthrodesis of spine with bone graft/internal fixation)	40%
103	Therapeutic endoscopic operations on cavity of knee joint	20%
104	Therapeutic endoscopic operations on cavity of Shoulder joint	20%
105	Total prosthetic replacement of hip joint not using cement	40%
106	Total prosthetic replacement of hip joint using cement	40%
107	Total prosthetic replacement of knee joint not using cement	40%
108	Total prosthetic replacement of knee joint using cement	40%
109	Total prosthetic replacement of other joint not using cement	40%
110	Zygoma, fracture, elevation, exploration and fixation	40%
111	Total prosthetic replacement of other joint using cement	40%
NERVOUS SYSTEM		
112	Bur-hole Drainage of Extradural, subdural or intracerebral space	20%
113	Craniotomy for non-malignant space occupying lesions	100%
114	Craniotomy for Drainage of Extradural, subdural or intracerebral space	40%
115	Craniotomy for malignant Brain tumors	100%
116	Decompression surgery for Entrapment Syndrome	40%
117	Embolectomy / Thrombectomy/ Endarterectomy with or without Graft	40%
118	Excision of deep seated peripheral nerve tumor	40%
119	Excision of pineal gland	100%
120	Fixation of fracture of spine	40%
121	Free Fascia Graft for Facial Nerve Paralysis	40%
122	Intracranial transection of Cranial nerve	60%
123	Laminectomy/Discectomy for Spinal nerve root decompression	20%

124	Microvascular decompression of cranial nerves/nervectomy	60%
125	Multiple Microsurgical Repair of digital nerve	40%
126	Operations on Subarachnoid space of brain	60%
127	Other operations on the meninges of the Brain	60%
128	Peripheral nerve Graft	40%
129	Repair of Cerebral or Spinal Arterio- Venous Malformations or aneurysms	100%
130	Total or Partial Excision of the pituitary gland - Any approach (Transforntal or Trans Sphenoid)	40%
ORO-MAXILLOFACIAL SURGERY		
131	Major reconstructive oro-maxillafacial surgery due to trauma or burns and not for cosmetic purpose	60%
132	Osteotomy including segmental resection with bone grafting for Mandibular and maxillary lesions	60%
133	Excision of Retroperitoneal Tumor	40%
134	Incisional Hernia Repair with or without Graft or Prosthesis.	20%
135	Radical Excision of malignant tumor in bones	20%
136	Major Excision and grafting of Lymphoedema	60%
RESPIRATORY SYSTEM		
137	Complete [total] laryngectomy with Radical neck dissection (with thyroidectomy and tracheostomy)	60%
138	Lung Transplantation	100%
139	Diaphragmatic/Hiatus Hernia Repair	60%
140	Excision of Diaphragmatic tumors	60%
141	Hemi or Partial Laryngectomy	40%
142	Open Lobectomy of Lung	60%
143	Partial Extirpation of Bronchus	60%
144	Partial or Total Pharyngectomy	60%
145	Pleurectomy or Pleural decortication	40%
146	Thoracoplasty	60%
147	Tracheal reconstruction for various lesion	40%
148	Unilateral Pneumonectomy	60%
ORAL		
149	Wide excision and Major reconstruction of malignant Oro-pharyngeal tumors	60%
150	Wide local Excision for oral leukoplakia	20%
HAEMIC AND LYMPHATIC SYSTEM		
151	Bone Marrow transplant (as recipient)	100%
LIVER, GALL BLADDER & PANCREAS		
152	Liver Transplantation	100%
OTHERS		
153	Malignant soft tissue tumor excision and reconstruction	40%
154	Radical Mastectomy	60%
155	Excision and Major Flap Repair of skin and Subcutaneous tissue due to Major Burns	40%
156	Total excision of breast/ Simple Mastectomy	20%

- Our maximum liability for one or multiple listed surgeries shall be restricted to the benefit Sum Insured mentioned in the Schedule of Benefits.

- If more than one Surgery/Day Care procedure is performed on the Insured, through the same incision or by making different incisions, during the same surgical session, we shall only pay for that Surgery/Day Care Procedure performed in respect of which the largest amount shall become payable.

## Annexure II –

List of Day Care Procedures for the purpose of Day Care Treatment Cash (Section 1.3) Benefit.

S.No.	List of Day Care Procedures
#	CARDIOVASCULAR SYSTEM
1	Carotid angioplasty
2	Coronary angiography
3	Insertion of filter in Inferior Vena cava
4	Insertion of gel foam in artery or vein
5	Pericardiocentesis
6	Renal angioplasty
7	Sclerotherapy
8	Varicose vein stripping or ligation
	DIGESTIVE SYSTEM
9	Dilation of digestive tract strictures
10	Division of the anal sphincter (sphincterotomy)
11	Endoscopic decompression of colon
12	Endoscopic drainage of pseudo pancreatic cyst
13	Endoscopic gastrostomy
14	Endoscopic placement /removal of stents
15	Endoscopic Polypectomy
16	Endoscopic Retrograde Cholangiopancreatography (ERCP) with or without insertion of Stent into Bile duct
17	Excision of a diseased tissue of salivary glands and Salivary ducts
18	Incision and excision of tissue in the perianal region
19	Incision and lancing of salivary glands and Salivary ducts
20	Open Sialolithotomy
21	Other operations of the anus
22	Reconstruction of a salivary gland and salivary duct
23	Resection of a salivary gland with or without salivary duct
24	Surgical treatment of anal fistulas
25	Surgical treatment of Haemorrhoids
26	Ultrasound guided aspiration of deep seated rectal abscess
	ENT
27	Benign Tumour removal from the external ear
28	Closure of Mastoid fistula
29	Dacryocystorhinostomy
30	Drainage of tonsillar abscess/quinsy
31	Excision and destruction of a lingual tonsil
32	Excision and destruction of diseased tissue of the nose
33	Excision biopsy and/or destruction of diseased structures from the oropharynx.
34	Excision of the diseased hard and soft palate
35	Fenestration of the inner ear
36	Functional Endoscopic Sinus Surgery
37	Incision, excision and destruction of Diseased tissue of the tongue.
38	Incision of the mastoid process and Middle ear
39	Myringoplasty (Type-I Tympanoplasty)
40	Myringotomy with grommet insertion
41	Operation on Nasal Turbinate's

42	Other excisions of the middle and inner ear
43	Other microsurgical operations on the Middle Ear
44	Other operations in the mouth
45	Other operations on the auditory Ossicles
46	Other Operations on the Middle and Internal Ear
47	Petrous Apicectomy
48	Reconstruction of the middle ear
49	Revision of fenestration of the inner ear
50	Revision of a Tympano Plasty
51	Revision of Stapedectomy
52	Septoplasty (medically necessitated)
53	Simple Mastoidectomy
54	Stapedectomy
55	Stapedotomy
56	Tonsillectomy with adenoidectomy
57	Tonsillectomy without adenoidectomy
58	Tracheostomy
59	Trans oral incision and drainage of a pharyngeal abscess
60	Tympano Plasty (Closure of Eardrum Perforation / reconstruction of the Auditory Ossicles)
	EYE
61	Cataract Surgery ( ECCE or Phacoemulsification with or without intraocular lens implant)
62	Corrective surgery for blepharoptosis
63	Corrective surgery of ectropion
64	Corrective surgery of entropion
65	Excision of lacrimal sac and passage
66	Excision of the diseased tissue of the eyelid
67	Operation for glaucoma
68	Operations for Pterygium with or without grafting
69	Operations of canthus and epicanthus when done for adhesions due to chronic infections
70	Other Operations for tear gland/ duct lesions
71	Other operations on the cornea
72	Removal of a deep or embedded foreign body from cornea
73	Removal of a foreign body from orbit and eyeball
74	Removal of a foreign body from posterior chamber of the eye
75	Removal of a foreign body from the lens of the eye
76	Repair of corneal laceration or wound with conjunctival flap
77	Tarsorrhaphy
	GYNECOLOGY
78	Conisation of the uterine cervix
79	Culdotomy
80	Dilatation of the cervical canal
81	Hymenectomy
82	Hysterectomy for benign conditions (with/without Pelvic floor repair and with/without Salpingo- Oophorectomy)
83	Hysteroscope guided biopsy of uterus
84	Incision and drainage of the Vulva
85	Incision of the Uterus (Hysterotomy) not done as a part of MTP
86	Local excision and destruction of diseased tissue of the vagina and the pouch of Douglas
87	Operation On Ovarian Cyst
88	Operations on the Bartholin's glands (cyst)

89	Other operations on the Fallopian tubes
90	Therapeutic / diagnostic dilatation and curettage ( not done as part of MTP)
	MUSCULOSKELETAL SYSTEM
91	Amputation of toe/fingers
92	Arthroscopic knee aspiration
93	Closed reduction of fracture, sub-luxation or epiphyseolysis with osteosynthesis
94	Reduction of dislocation under GA
	ORAL
95	Other Operations on the tongue
96	Palatoplasty
97	Partial glossectomy
98	Reconstruction of the tongue
	ORO-MAXILLOFACIAL SURGERY
99	External incision and drainage in the region of the mouth, jaw and face
	OTHERS
100	Carpal tunnel Decompression
101	Excision of dupuytren's contracture
102	Incision and Drainage of breast abscess
103	Incision and Drainage of the bone for septic and aseptic conditions
104	Operations on the nipple except congenitally inverted nipples
106	Suture and other Operations on tendons and tendon sheath
107	Tumor embolization
	RADIOTHERAPY
108	Radio Therapeutic procedures (Cobalt 60, Linear accelerator, Brachytherapy and Intensity Modulated Radiotherapy for total of 5 such sessions)
	RENAL/GENITO URINARY SYSTEM
109	Arterio -Venous Fistula for renal Dialysis
110	Circumcision and other Operations on the foreskin (if medically necessitated)
111	Cystoscopy removal of stones
112	Drainage of Prostatic abscess
113	Epididymectomy
114	Excision of epididymal cyst
115	Excision of seminal vesicle
116	Excision or destruction of testicular lesion
117	Excision or Eversion of Hydrocele
118	Incision and excision of periprostatic tissue
119	Incision and Drainage of the Scrotum and tunica vaginalis testis
120	Incision and drainage of the testis
121	Lithotripsy
122	Local excision and destruction of diseased tissue of the penis
123	Maintenance Hemo Dialysis for Chronic renal failure (for total of 5 such sessions)
124	Peritoneal dialysis or Hemo Dialysis for Acute Renal Failure
125	Operations on testicular hydrocele
126	Other operations on the penis
127	Other operations on the spermatic cord, epididymis and ductus deferens (other than vasectomy)
128	Other operations on the testis
129	PCNL(percutaneous nephro lithotomy)
130	PCNS (Percutaneous nephrostomy)
131	Percutaneous excision and destruction of prostate tissue

132	Release of Urethral stricture
133	Renal Biopsy
134	Suprapubic cystostomy
135	Surgical treatment of a varicocele and hydrocele of a spermatic cord
136	Transurethral excision and destruction of prostate tissue
137	Unilateral orchidectomy
	RESPIRATORY SYSTEM
138	Broncho alveolar lavage and biopsy
139	Bronchoscopic treatment of bleeding lesion
140	Bronchoscopic treatment of fistula/stenting
	SKIN
141	Chemosurgery for skin cancer
142	Free skin transplantation , donor site
143	Free skin transplantation , recipient site
144	Local excision or destruction of diseased tissue of skin and subcutaneous tissues under anesthesia
145	Revision of skin plasty
146	Surgery for pilonidal cyst
147	Surgery for pilonidal sinus
148	Surgical wound toilet (Wound debridement) and removal of diseased tissue of the skin and subcutaneous tissues under anesthesia
149	Nail bed deformity/resection and reconstruction

Document Reference Number: Reliance Health/PD/0002/0003/I/V1/102018

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