

**Bajaj Allianz General Insurance Company Limited**

Corporate Identity Number: U66010PN2000PLC015329. IRDA Registration No.113

Regd. Office &amp; Head Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411 006

**ACCIDENTAL MEDICAL EXPENSES COVER****Add on Cover under Private Car Policy -Bundled***ENDORSEMENT WORDINGS*

UIN: IRDAN113RP0007V01201819/A0018V01201819

**A. Endorsement Wordings**

In consideration of payment of additional premium, it is hereby agreed and declared that if You/Your family members (named in the Schedule) are Hospitalized on advice of a Doctor because of an Accidental Bodily Injury sustained during the Policy Period while travelling in the Insured Vehicle, then We will reimburse You, the reasonable and customary medical expenses incurred up to a maximum Sum Insured as shown in the Schedule for this Cover aggregate in any one Policy Period. The medical expenses reimbursable would include:

- i) the reasonable charges that You/Your family members (named in the Schedule) necessarily incur on the advice of a Doctor for In-patient Care in a Hospital for accommodation; nursing care; the attention of medically qualified staff; undergoing medically necessary procedures and medical consumables.
- ii) Ambulance charges for carrying You/Your family members (named in the Schedule) from the site of accident to the nearest hospital, subject to a limit of Rs. 1000 per claim.

**B. Conditions**

1. Claims made by You against Us under 'Accidental Medical Expenses Cover' are subject to the conditions set forth under the Motor Insurance Policy
2. In case of transfer of ownership of the Insured Vehicle, the cover under 'Accidental Medical Expenses Cover' shall expire

**C. Exclusions**

In addition to the exclusions mentioned under Motor Insurance Policy, We will not be liable to indemnify You for the following events:

1. Where the Own Damage Claim made by You against Us under the Motor Insurance Policy is not payable
2. Accidental Bodily Injury that You/Your family members (named in the Schedule) meet with:
  - a) Through suicide, attempted suicide or self inflicted injury or illness
  - b) While under the influence of liquor or drugs
  - c) Arising or resulting from You/Your family members (named in the Schedule) committing any breach of law with criminal intent
  - d) Whilst engaging in aviation or ballooning, whilst mounting into, dismounting from or travelling in any balloon or aircraft other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world.
  - e) Whilst participating as the driver, co-driver or passenger of a motor vehicle during motor racing or trial runs
  - f) As a result of any curative treatments or interventions that You/Your family members (named in the Schedule) carry out or have carried out on your body
  - g) Arising out of participation in any naval, military or air force operations whether in the form of military exercises or war games or actual engagement with the enemy, whether foreign or domestic
3. Consequential losses of any kind, be they by way of loss of profit, loss of opportunity, loss of gain, business interruption, market loss or otherwise, or any claims arising out of loss of a pure financial nature such as loss of goodwill or any legal liability of any kind whatsoever
4. Any injury/disablement/death directly or indirectly arising out of or contributed to any pre-existing condition
5. Venereal or sexually transmitted diseases
6. HIV (Human Immunodeficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or mutant derivatives or variations thereof however caused
7. Pregnancy, resulting childbirth, miscarriage, abortion, or complications arising out of any of these
8. War (whether declared or not), civil war, invasion, act of foreign enemies, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrest, restraint or detainment, confiscation or nationalisation or requisition of or damage by or under the order of any government or public local authority
9. Nuclear energy, radiation

If You do not agree whether any of these exclusions apply to Your claim, You agree to accept the burden of proving that they do not apply.

#### D. Claims Process

##### 1) Making a Claim

If You/Your family members (named in the Schedule) meet with any Accidental Bodily Injury that may result in a claim, then as a condition precedent to Our liability:

- a) You or someone claiming on behalf must inform Us in writing immediately and in any event within 30 days
- b) You must immediately consult a Doctor and follow the advice and treatment that he recommends
- c) You must take reasonable steps to lessen the consequence of Bodily injury
- d) You must have Yourself examined by Our medical advisors if We ask for this
- e) You or some one claiming on behalf must promptly give Us documentation and other information We ask for to verify the claim or Our obligation to make payment for it
- f) In the event of Your/Your family members (named in the Schedule) death, someone claiming on deceased's behalf must inform Us in writing immediately and send Us a copy of the post- mortem report within 30 days

**Note:** Waiver of conditions (a) and (f) may be considered in extreme cases of hardship where it is proved to Our satisfaction that under the circumstances in which You/Your family members (named in the Schedule) were placed, it was not possible for You or any other person to give notice or file claim within the prescribed time limit.

##### 2) Claim Settlement

- a) You agree that We need only make payment when You or someone claiming on behalf has provided a claim to Our satisfaction
- b) We will make payment to You or to Your Nominee. If there is no Nominee, We will pay to Your legal heir, executor or validly appointed legal representative as per succession certificate and any payment We make in this way will be a complete and final discharge of Our liability to make payment

#### E. Definitions

The words and phrases listed have special meanings. Please note that references to the singular or to the masculine also include references to the plural or to the female the context permits and if appropriate.

1. **Accident, Accidental:** means sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Bodily Injury:** 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
3. **Doctor / Medical Practitioner :** Doctor/ 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.
4. **Hospital:** A hospital means any institution established for *in-patient care* and *day care treatment* of illness and/or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) and 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;
5. **Hospitalization** means admission in a Hospital for a minimum period of 24 consecutive '*In-patient Care*' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.
6. **In-patient Care:** Inpatient care means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.
7. **Insured Vehicle:** The vehicle insured by Us under the Motor Insurance Policy
8. **Nominee: Nominee** means the person(s) nominated by the Insured to receive the insurance benefits under this Policy payable on the death of the Insured.

9. **Own Damage Claim:** The claims raised by You against Us for loss or damage to the Insured Vehicle due to the perils mentioned under Section 1 of Motor Insurance Policy
10. **Policy/Motor Insurance Policy:** Private Car Policy- Bundled issued by **Us** to which this cover is extended
11. **Policy Period:** The period between and including the commencement date and expiry date as shown in the Motor Insurance Policy Schedule
12. **Schedule:** The Schedule and any Annexure or Endorsement to it which sets out **Your** personal details, the type of insurance cover in force and the Sum Insured
13. **Sum Insured:** The amount stated in the Schedule, which is the maximum amount We will pay for claims made by You irrespective of the number of claims You make in respect of Yourself/Your family members (named in the Schedule)
14. **You, Your, Yourself:** The person or persons We insure as set out in the Schedule
15. **We, Our, Us:** Bajaj Allianz General Insurance Company Limited