

GROUP CREDIT PROTECTION POLICY- PROSPECTUS

Introduction:

Credit protection policy can be issued to individuals who are availing /availed loan from any Bank, Non-Banking Financial Institutions (NBFI), Housing Finance Company (HFC) or any other financial/lending institution as recognized by RBI from time to time which would be eligible to disburse various types of loans. Non-credit linked policies can be issued to customers of a financial institution or any group which qualifies the definition as per IRDAI guidelines published from time to time.

Eligibility:

a) Age Limit

- The minimum entry age would be 18 years.
- The maximum Entry age would be 65 years

b) Policy offering

Groups can be classified as

1. Compulsory
2. Voluntary

c) No of Members

- The maximum number of co-applicants in an application would be up to 4 members (i.e. 1 primary applicant and 3 coapplicants).
- In case more than 4 members are covered, any 4 members would be considered.
- Only individuals can be covered. Trust or an entity/Organization cannot be considered as coapplicants.
- In case where members are more than 1, then the sum insured would be apportioned equally amongst the members and claims would be settled accordingly.

d) Sum Insured & Benefits

- As mentioned above, in case of co-applicants, sum insured would be apportioned equally amongst the members.
- Individuals can opt for sum insured as allowed under this product and would be equal to the loan amount.
- Basis of sum insured can either be fixed sum insured, based on loan amount, or reducing sum insured wherein the current outstanding loan balance would be considered.

The basic benefit structure of the product is as follows:

Sl. No.	Benefits covered	Indemnity/ Fixed Benefit	Benefit Amount/ SI
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			limit/ Sub limit	
			Minimum	Maximum
1	Critical Illness: Choice of 9, 18, 25, 41 Cis	Fixed Benefit	25,000	3,00,00,000
2	PA	Fixed Benefit	25,000	5,00,00,000
A	Accidental Death Benefit	Fixed Benefit	25,000	5,00,00,000
B	Accidental Permanent and Total Disability	Fixed Benefit	25,000	5,00,00,000
C	Reimbursement of cost of performance of funeral ceremony	Indemnity	Up to 5,000	
D	Repatriation of mortal remains	Fixed Benefit	500	10,000
1	Double Indemnity PA cover	Fixed Benefit	200% of PA cover	
2	Accidental Permanent Partial Disability	Fixed Benefit	As per PPD table	
3	Accidental Hospitalisation Benefit	Indemnity	500	1,00,000
4	Involuntary Loss of Job	Fixed Benefit	6 EMIs	
5	Education benefit	Fixed Benefit	2,500	5,00,000
6	Hospital Daily Cash benefit	Fixed Benefit	500	10,000
7	Angioplasty	Fixed Benefit	6,250	5,00,000
8	Waiver of Survival period	Fixed Benefit	Waiver of 30 days survival period	

e) Waiting Period

- Survival Period** – 30 Days, this can be waived off with additional premium Loading of 5% incurred with prior approval from UW.
- Waiting Period** - There is a waiting period of 90 days from the policy commencement date. In case the insured event happens during this period, no benefit shall be payable.
- For Angioplasty**- a waiting period of 180 days is applicable.

No benefit will be payable if signs or symptoms, or diagnosis of any conditions covered under this product first occurs or diagnosis is first made within their respective waiting period from policy commencement, whichever is later.

f) Term

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- The term of the policy would be minimum 1 year to Maximum 5 years.
- The duration of master policy would be 1 year whereas for certificates it would be between 1 year to 5 years.

g) Nationality

- Policy can be issued only to Indian nationals.
- For nationality other than Indian, underwriting approval would be required. The policy would be issued basis the legality of case and the decision would on case to case basis.

h) Pre - Policy Check up

- All policyholders with SI above 3 crores
- Policyholder aged between 51 years and 60 years and SI above 20 Lakhs
- All policyholders aged above 60 for all Sum Insured

Under certain circumstances such as declaration(s) in the proposal/ enrolment form or as per the criteria given by underwriter as per the conditions specified under Manual, Insured can be asked to undergo medical check-up to help Company understand Insured's health condition in a better way-

Stage 1 - Pre-Policy medical examination reports are required as per below mentioned grid up to sum assured of INR 3,00,00,000. Medical tests to be conducted at Universal Sampo Insurance Company's approved network labs. It is mandatory in the product to undergo health check-up for following proposers:

Sum Assured (INR)	Entry Age				
	18 - 35	36 - 45	46 - 50	51 - 60	61 - 65
Up to 500,000	Health Form	Health Form	Health Form	Health Form	Health Form + Full Medical Examination + FBS + HBA1c + Lipid profile + LFT + Chest X Ray + Microunalysis + TMT
500,001- 1,000,000	Health Form	Health Form	Health Form	Health Form	Health Form + Full Medical Examination + FBS + HBA1c + Lipid profile + LFT + Chest X Ray + Microunalysis + TMT
1,000,001- 2,000,000	Health Form	Health Form	Health Form	Health Form	Health Form + Full Medical Examination + FBS + HBA1c + Lipid profile + LFT + Chest X Ray + Microunalysis + TMT
2,000,001- 3,500,000	Health Form	Health Form	Health Form	Health Form + Full Medical Examination	Health Form + Full Medical examination + Microunalysis + Lipid Profile + LFT + Chest X Ray + FBS + HBA1c + TMT + RFT + PSA (males only) + PAP Smear (Females only) + CEA + USG
3,500,001- 10,000,000	Health Form	Health Form	Health Form	Health Form + Full Medical Examination + FBS + HBA1c + Lipid profile + LFT + Chest X Ray + Microunalysis	Health Form + Full Medical examination + Microunalysis + Lipid Profile + LFT + Chest X Ray + FBS + HBA1c + TMT + RFT + PSA (males only) + PAP Smear (Females only) + CEA + USG
10,000,001- 30,000,000	Health Form	Health Form	Health Form	Health Form + Full Medical Examination + FBS + HBA1c + Lipid profile + LFT + Chest X Ray + Microunalysis + TMT	Health Form + Full Medical examination + Microunalysis + Lipid Profile + LFT + Chest X Ray + FBS + HBA1c + TMT + RFT + PSA (males only) + PAP Smear (Females only) + CEA + USG

Stage 2 – For proposals with SI above INR 30,000,000 the following Pre-Policy check- up grid to be followed:

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Sum Insured (INR)	Entry Age			
	20 – 35	36 – 45	46 - 55	56 – 65
Above 30,000,000	Health Form + FME + CBC + FBS+ HbA1c+ RFT+ RUA + Chest X-ray + Lipid Profile + LFT + HIV + HBsAg	Health Form + FME + CBC + FBS+ RFT + RUA + Chest X-ray + Lipid Profile + LFT + HbA1c + TMT+ HIV + HBsAg	Health Form + FME + CBC + FBS + RUA + Chest X-ray + Lipid Profile + LFT + HbA1c + TMT + RFT + USG of Abdomen and Pelvis + Tumour Markers + HIV + HBsAg	Health Form + FME + CBC + FBS+ RUA + Chest X-ray + Lipid Profile + LFT + HbA1c + TMT + RFT + USG of Abdomen and Pelvis + Tumour Markers + HIV + HBsAg

Test under RFT (Renal Function Test)

- Serum Creatinine
- Blood Urea Nitrogen
- Serum Uric Acid

Tests under LFT (Liver Function Test)

- Serum Bilirubin (Total, Direct and Indirect)
- SGOT
- SGPT
- GGT
- Alkaline Phosphatase • Serum Albumin Tumor Marker test to be included:

1. Carcinoembryonic antigen (CEA)
2. Prostate-specific antigen (PSA)

In addition to above, following documents would need to be provided –

1. Duly filled in Proposal Form in all respects
2. Details of all existing insurance covers (Life; CI; TPD etc.), as declared in the proposal form.
3. Financial document to justify cover

i. Income Tax Return paper of last 3 years

Bank's Loan Mortgage Offer Letter

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I. Financial Documents –

For any sum assured above INR 30,000,000 financial Document is required.

The maximum total cover allowed is 12 times of average annual income. The income should be verified by asking proof of income as below

- ITRS with computation of income for the Latest 2 financial years or,
- Audited P&L account and Balance sheet for the latest two financial year with the share-holding of the applicant

J. Cancellation:

The Insured may cancel this Policy by giving 7 days' written notice, and in such an event, the Company shall refund premium for the unexpired Policy Period as per the rates detailed below.

a) If no claim has been made during the policy period, a proportionate refund of the premium will be issued based on the number of unexpired days. The date of cancellation request will be considered as expiry date of coverage

b) If the claim has been made in the current policy year, the premium for the remaining policy year(s) will be refunded on cancellation

For Reducing Sum Insured

Policy Tenure	1	2	3	4	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	
Loan Tenure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
1	84%	92%	95%	96%	97%	97%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	98%	
2	70%	85%	90%	92%	94%	95%	95%	96%	96%	96%	96%	96%	96%	96%	96%	96%	96%	97%	97%	97%	97%	97%	97%	97%	97%	97%	97%	97%	97%	
3	57%	77%	85%	89%	91%	92%	93%	94%	94%	94%	94%	94%	94%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	95%	
4	45%	70%	80%	85%	88%	90%	91%	91%	92%	92%	92%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	93%	
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7	18%	51%	66%	75%	80%	83%	84%	85%	86%	86%	87%	87%	87%	87%	87%	88%	88%	88%	88%	88%	88%	88%	88%	88%	88%	88%	88%	88%	88%	
8	11%	46%	62%	71%	77%	80%	82%	83%	84%	84%	85%	85%	85%	86%	86%	86%	86%	86%	86%	86%	86%	86%	86%	86%	86%	86%	86%	87%	87%	
9	6%	40%	58%	68%	74%	78%	80%	81%	82%	83%	83%	83%	84%	84%	84%	84%	84%	84%	84%	84%	85%	85%	85%	85%	85%	85%	85%	85%	85%	

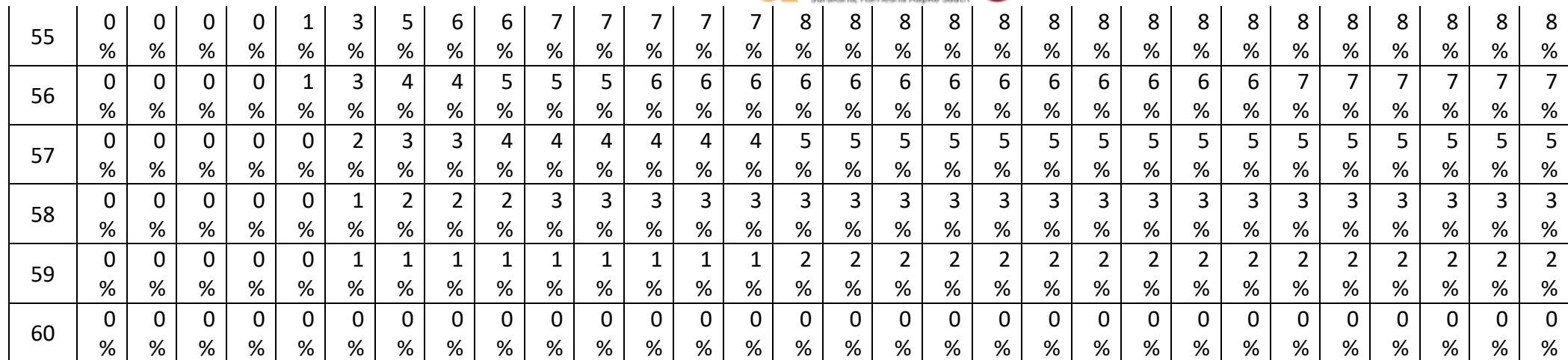
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50	0	0	0	0	3	8	10	12	13	14	14	15	15	15	15	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
51	0	0	0	0	3	7	9	10	11	12	13	13	13	14	14	14	14	14	14	14	14	14	14	15	15	15	15	15	15	15
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
52	0	0	0	0	2	6	8	9	10	11	11	12	12	12	12	12	13	13	13	13	13	13	13	13	13	13	13	13	13	13
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
53	0	0	0	0	2	5	7	8	9	9	10	10	10	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	12	12
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
54	0	0	0	0	1	4	6	7	7	8	8	9	9	9	9	9	9	9	9	10	10	10	10	10	10	10	10	10	10	10
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%



No refunds of premium will be made under the Policy during the last year of the Policy Period.

Upon making any refund of premium under this Policy in accordance with the terms and conditions hereof in respect of the Insured Person, the cover in respect of that Insured Person shall forthwith terminate and the Company shall not be liable hereunder.

Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of the Insured Person where

Free look cancellation: In case the policy is cancelled within the freelook period of 30 days, 100% of the premium shall be refunded as per Free look rule.

UIN: UNIHLGP22074V012122

H. Sum Insured Options

The policyholder will have the option of having Sum Insured for the Critical Illness Cover and Personal Accident Cover which could be either fixed over the policy term or could be reducing during the policy term.

a) Fixed Sum Insured

Under this option, the Sum Insured remains fixed throughout the Policy tenure and is determined at the beginning of the policy basis the loan amount.

b) Reducing Sum Insured

Under this option, in the event of the claim, the Company would pay the insured the Sum Insured that would be equivalent to the amount of the loan that would be outstanding on the account of the insured. This option would be available for all policy terms. Thus, under this option, the sum insured is linked to the repayment schedule of the loan.

Coverage

I. CRITICAL ILLNESS

If during the Policy Period, the insured unfortunately contracts with any of the Major Medical Illnesses or undergoes Surgical Procedures (as mentioned in policy schedule) for the first time during the Period of Insurance, then the full Sum Insured would be paid to the insured, provided that the insured survives a period of at least 30 days after the date of occurrence of Insured Event.

However, for the purpose of the applicability of this section, claim would be admissible only if the Insured event occurs after 90 days of commencement of Period of Insurance. The options for the policyholder ranges from 9, 18, 25 and 41 Major Medical Illnesses or Surgical Procedures and are as given below.

Sr. No.	Critical Illness condition	Plan 1	Plan 2	Plan 3	Plan 4
1	Cancer of Specified Severity	Yes	Yes	Yes	Yes
2	Myocardial Infarction (First Heart Attack of a specified gravity)	Yes	Yes	Yes	Yes
3	Open Chest CABG	Yes	Yes	Yes	Yes
4	Stroke Resulting in Permanent Symptoms	Yes	Yes	Yes	Yes
5	Kidney Failure Requiring Regular Dialysis	Yes	Yes	Yes	Yes
6	Permanent Paralysis of Limbs	Yes	Yes	Yes	Yes
7	Major Organ / Bone Marrow Transplant	Yes	Yes	Yes	Yes
8	End Stage Liver Failure	Yes	Yes	Yes	Yes

9	Open Heart Replacement or Repair of Heart Valves	Yes	Yes	Yes	Yes
10	Benign Brain Tumor	No	Yes	Yes	Yes
11	Loss of Speech	No	Yes	Yes	Yes
12	Third-Degree Burns	No	Yes	Yes	Yes
13	Coma of Specified Severity	No	Yes	Yes	Yes
14	Multiple Sclerosis with Persisting Symptoms	No	Yes	Yes	Yes
15	Alzheimer's Disease	No	Yes	Yes	Yes
16	Parkinson's Disease	No	Yes	Yes	Yes
17	Aorta Graft Surgery	No	Yes	Yes	Yes
18	Deafness	No	Yes	Yes	Yes
19	Motor Neuron Disease with Permanent Symptoms	No	No	Yes	Yes
20	Loss of Limbs	No	No	Yes	Yes
21	Blindness	No	No	Yes	Yes
22	End Stage Lung Failure	No	No	Yes	Yes
23	Primary (Idiopathic) Pulmonary Hypertension	No	No	Yes	Yes
24	Muscular Dystrophy	No	No	Yes	Yes
25	Major Head Trauma	No	No	Yes	Yes
26	Severe Rheumatoid Arthritis	No	No	No	Yes
27	Severe Ulcerative Colitis	No	No	No	Yes
28	Systemic Lupus Erythematosus with Lupus Nephritis	No	No	No	Yes
29	Pneumonectomy	No	No	No	Yes
30	Medullary Cystic Disease	No	No	No	Yes
31	Cardiomyopathy	No	No	No	Yes
32	Encephalitis	No	No	No	Yes
33	Progressive Supranuclear Palsy	No	No	No	Yes
34	Multiple system atrophy	No	No	No	Yes
35	Fulminant Hepatitis	No	No	No	Yes
36	Other serious Coronary Artery Disease	No	No	No	Yes
37	Apallic Syndrome	No	No	No	Yes
38	Creutzfeldt-Jakob Disease	No	No	No	Yes
39	Aplastic Anaemia	No	No	No	Yes
40	Progressive Scleroderma	No	No	No	Yes
41	Bacterial Meningitis	No	No	No	Yes

Survival period:

Survival period of 30 / NIL days would be applicable from the date of diagnosis of any of the above listed Critical Illnesses to be eligible for this benefit.

EXCLUSIONS

- a) Any Illness, sickness or disease other than those specified as Critical Illnesses under this Policy;
- b) Any claim with respect to any Critical Illness diagnosed prior to Policy start date or arising in the first 90 days of the Policy Period
- c) Any Pre-existing Disease; Injury or any complication arising therefrom.

Pre-existing Disease means any condition, ailment, injury or disease / critical illness / disability:

- a. That is/are diagnosed by a physician within 36 months prior to the effective date of the policy issued by the insurer or its reinstatement; or
- b. For which medical advice or treatment was recommended by, or received from, a Physician within 36 months Prior to the effective date of the policy issued by the insurer or its reinstatement

Coverage under the policy after the expiry of 36 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer.

- d) If the Insured Person does not submit a medical certificate from a doctor evidencing diagnosis of Illness or Injury or occurrence of the medical event or the undergoing of the medical / surgical procedure in relation to the claim of the particular Insured Person.
- e) Any Critical Illness arising out of use, abuse or consequence or influence of any substance, intoxicant, drug, alcohol or hallucinogen unless administered by / prescribed on the advice of a physician / Medical Practitioner;
- f) Narcotics used by the Insured Person unless taken as prescribed by a registered Medical Practitioner,
- g) Any Critical Illness caused due to intentional self-injury, suicide or attempted suicide;
- h) Any Critical Illness, caused by or arising from or attributable to a foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), civil war, public defense, rebellion, revolution, insurrection, military or usurped power;
- i) Any Critical Illness caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.
- j) Working in underground mines, tunneling or involving electrical installations with high tension supply, or as jockeys or circus personnel;
- k) Insured Persons whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation;
- l) External Congenital Anomalies or disease or defects or any complications or conditions arising therefrom including any developmental conditions of the Insured;
- m) Participation by the Insured Person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
- n) Any Critical Illness based on certification/diagnosis/treatment from persons not registered as Medical Practitioners, or from a Medical

Practitioner who is practicing outside the discipline that he is licensed for.;

- o) Any Critical Illness caused due to any treatment, including surgical management, to change characteristics of the body to those of opposite sex.
- p) Any Critical Illness caused due to cosmetic or plastic surgery or any treatment to change the appearance unless for reconstruction following an Accident, Burn(s), or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.
- q) Any Critical Illness caused due to surgical treatment of obesity that does not fulfil all the below conditions:
 - a. Surgery to be conducted is upon the advice of the Doctor
 - b. The Surgery / Procedure conducted should be supported by clinical protocols
 - c. The member has to be 18 years of age or older and
 - d. Body Mass Index (BMI):
 - greater than or equal to 40 or
 - greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
 - i. Obesity related cardiomyopathy
 - ii. Coronary heart disease
 - iii. Severe Sleep Apnea
 - iv. Uncontrolled Type 2 Diabetes
- r) Any Critical Illness arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor or civil commotion with criminal intent;
- s) In the event of the death of the Insured Person within the stipulated survival period as set out above.
- t) Any Critical Illness caused by Medical treatment traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy. Any Critical Illness caused due to miscarriages (unless due to an accident) and lawful medical termination of pregnancy during the policy period.
- u) Any Critical Illness caused by sterility and infertility. This includes:
 - Any type of contraception, sterilization
 - Assisted Reproductive services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
 - Gestational Surrogacy
 - Reversal of sterilization
- v) Any Critical Illness caused due to treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reason.
- w) Any Critical Illness caused by any unproven/ experimental treatment, service and supplies for or in connection with any treatment. Unproven/ experimental treatments are treatments,

procedures or supplies that lack significant medical documentation to support their effectiveness.

II. PERSONAL ACCIDENT

Insured Event: For the purposes of this Section and the determination of the Company's liability under it, the Insured Event in relation to any Insured Person, shall mean Injury sustained during the Policy Period which shall be the sole and direct cause of a) Death or b) Permanent Total Disablement or c) Permanent Partial Disability, as applicable, as described hereunder.

1. Accidental Death

If an Insured Person suffers on account of an injury arising out of an Accident, during the Policy Period and this is the sole and direct cause of the Insured Person's death within 12 months of such Injury sustained, then We will pay the Sum Insured as specified in the Schedule.

2. Permanent Total Disability

If an Insured Person suffers on account of an injury arising out of an Accident during the Policy Period and this is the sole and direct cause of his Permanent Total Disability in one of the ways detailed in the table below, within 12 months of occurrence such Injury sustained, then We will pay 100% of the Sum Insured for the benefits listed below.

The Disablement	Compensation Expressed as a Percentage of Sum Insured
1) Permanent Total Loss of Limbs (both hands or both feet or one hand and one foot)	100%
2) Complete and Irrecoverable loss of sight of both eyes	100%
3) Permanent Total Loss of one Eye and one Limb	100%

Provided that, such Permanent Total Disability shall as a direct consequence thereof permanently disable the Insured Person from resuming his normal occupation.

3. Reimbursement of Cost of Performance of Funeral Ceremony

In the event of We making payment for a claim for Accidental Death, We will indemnify the expenses incurred for preparation for burial or cremation service of mortal remains of the Insured Person, subject to the following:

- Our liability to make payment under this benefit will be as per the amount, subject to the maximum amount of INR 5,000/during the Policy Period as specified in the Schedule.
- The geographical scope for this benefit will be worldwide; however the claims shall be settled in India in Indian rupees.

4. Repatriation of Mortal Remains

In the event of We making payment for a claim for Accidental Death of Insured as a result of an Accident, We will, in addition to the Accidental Death Benefit, We will pay towards transportation

of mortal remains of the Insured Person from the place of death to the residence of the Insured Person or to a cremation/ burial ground, lower of up to 2% of the Base Sum Insured payable under the Accidental Death Benefit or INR 10,000/-

5. Double Indemnity Benefit: (OPTIONAL BENEFITS UNDER PERSONAL ACCIDENT)

Accidental Death while Travelling on Common Carriers - In case of death of the Insured Person due to an Accident whilst the Insured Person is travelling as a fare paying passenger in any of the listed Public Carriers i.e. bus; ferry; hovercraft; ship; taxi; train; underground train; commercial helicopter or aircraft and provided that this additional benefit is chosen and specified in the Schedule, We will pay 200% of the Sum Insured with respect to Personal Accident benefit.

6. Accidental Dismemberment / Permanent Partial Disablement Benefit –(OPTIONAL BENEFITS UNDER PERSONAL ACCIDENT)

In case of Permanent Partial Disability or dismemberment of Insured Person due to an injury arising out of an Accident sustained during the Policy Period resulting in Permanent Partial Disability / Dismemberment within 12 months of occurrence of such injury, as described below, We will pay the percentage of Sum Insured, as specified below:

Accidental Dismemberment/Permanent Partial Disablement	Percentage of Sum Insured
Loss of the sight of one eye or the actual loss by physical separation of one entire hand or one entire foot.	50%
Use of a hand or a foot without physical separation	50%
Loss of speech	50%
Loss of toes – all	20%
Loss of toes great – both phalanges	5%
Loss of toes great – one phalanx	2%
Loss of toes other than great, if more than one toe lost: each	2%
Loss of hearing – both ears	75%
Loss of hearing – one ear	30%
Loss of four fingers and thumb of one hand	50%
Loss of four fingers of one hand	40%
Loss of thumb – both phalanges	25%
Loss of thumb – one phalanx	10%
Loss of index finger – three phalanges	15%
Loss of index finger – two phalanges	10%
Loss of index finger – one phalanx	5%
Loss of middle finger or ring finger or little finger – three phalanges	10%

Loss of middle finger or ring finger or little finger – two phalanges	7%
Loss of middle finger or ring finger or little finger – one phalanx	3%
Loss of metacarpals – first or second or third, fourth or fifth (additional)	3%

Provided that, such disablement shall as a direct consequence thereof permanently disable the Insured person from resuming his normal occupation.

Special Conditions:

In the event of permanent disablement, the Insured will be under obligation to:

- Have himself/herself examined by the Panel Doctors appointed by the Company and the Company will pay the costs involved thereof;
- Authorize doctors providing treatment or giving expert opinion and any other authority to supply the Company any information that may be required on the condition of the Insured.
- The disablement / death must occur within 12 months of the accident.
- The disablement must be confirmed prior to the expiry of a period of 3 months since occurrence of the disablement.

If the above obligation is not met with due to whatsoever reason, the Company shall be relieved of its liability to compensate under this benefit.

7. Accidental Hospitalization Benefit – (OPTIONAL BENEFITS UNDER PERSONAL ACCIDENT)

In case the Insured Person sustains Injury due to an Accident during the Policy Period, then in addition to any amount payable under other benefits under this Section, We will pay for the Medical Expenses incurred towards Hospitalization within 7 days from the date of occurrence of the Accident that results in injury causing an hospitalization on reimbursement basis upto 2% of the Sum Insured, subject to maximum benefit amount payable of INR 1,00,000/- whichever is lower. For the purpose of this benefit, Medical Expenses shall include -

- Room rent, boarding, nursing expenses,
- Intensive care unit,
- Consultation fees,
- Anesthesia, blood, oxygen, operation theatre charges,
- Medicines, drugs and consumables,
- Diagnostic procedures,
- The cost of prosthetic and other devices or equipment if implanted internally during a Surgical Procedure,
- Physiotherapy expenses as recommended by the treating Medical Practitioner.

EXCLUSIONS

- (i) No claim shall be payable under this section in case of any PTD arising out of accident for which medical care, treatment or advice was recommended by or received from a Doctor or from which the Insured suffered disability and diagnosed before the commencement of the Policy Period.
- (ii) Any Pre-existing condition or Disability arising out of a Pre-existing Diseases or any complication arising therefrom. Pre-existing Disease means any condition, ailment, injury or disease / critical illness / disability:
 - a. That is/are diagnosed by a physician within 36 months prior to the effective date of the policy issued by the insurer or its reinstatement; or
 - b. For which medical advice or treatment was recommended by, or received from, a Physician within 36 months Prior to the effective date of the policy issued by the insurer or its reinstatement

Coverage under the policy after the expiry of 36 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer. (iii) Any payment in case of more than one claim under the Policy during any one Policy Period by which our maximum liability in that period would exceed the Sum Insured. This would not apply to payments made under Involuntary Loss of Job, Reimbursement of cost of Performance of Funeral Ceremony, Repatriation of Mortal Remains Benefit, Child Education Benefit fund or any other Ad – on pertaining to Personal Accident of the Policy.

(iv) Suicide or attempted suicide, intentional self-inflicted injury or acts of self-destruction. (v) Certification by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's Family. (vi) Death or disablement arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air- force operation, civil war, public defense, rebellion, revolution, insurrection, military or usurped power.

- (vii) Benefit under Accidental Death, Permanent Total Disablement, Permanent Partial Disablement arising from Bacterial infections (except pyogenic infection which occurs through an Accidental cut or wound).
- (viii) Benefit under Accidental Death, Permanent Total Disablement, Permanent Partial Disablement arising from medical or surgical treatment except as necessary solely and directly as a result of an Accident.
- (ix) Any change of profession after inception of the Policy which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Schedule.
- (x) Death or disablement arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor or civil commotion with criminal intent.
- (xi) Death or disablement arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen unless administered by / prescribed on the advice of a physician / Medical Practitioner.
- (xii) Death or disablement caused by participation of the Insured Person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.

- (xiii) Insured Persons whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation and is specifically specified in the Schedule.
- (xiv) Working in underground mines, tunneling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities. (xv) Death or disablement arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.
 - a. Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any Illness, incapacitating disablement or death.
 - b. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any Illness, incapacitating disablement or death.
- (xvi) In respect of Insured Event which occurs whilst the Insured Person is operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft, or Scheduled Airlines or is engaging in aviation or ballooning, or whilst the Insured person is mounting into, or dismounting from or traveling in any balloon or aircraft other than as a passenger (fare-paying or otherwise) in any Scheduled Airline anywhere in the world; (xvii) In respect of death, injury or disablement of Insured Person (a) from engaging in or participation in adventure sports including but not limited to winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters, participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sport for which the Insured Person is untrained, unless specifically covered under the Policy (b) caused by venereal disease or insanity;
- (xviii) Congenital external diseases, defects or anomalies or in consequence thereof
- (xix) Any Physical, medical condition or treatment or service that is specifically excluded in this policy.

PERMANENT EXCLUSION (APPLICABLE TO ACCIDENTAL HOSPITALISATION BENEFIT):

In addition to the General Exclusions listed in this Policy this coverage section shall not cover:

1. Outpatient treatment expenses;
2. Treatment of any disease, sickness or illness;
3. Services, supplies, or treatment, including any period of Hospital confinement, which were not recommended, approved, and certified as Medically Necessary by a Medical practitioner;
4. Elective, cosmetic, or plastic surgery, except as a result of an Injury caused by a covered Accident while Our Policy is in force;
5. Dental care, except as a result of Injury caused by a covered Accident to sound natural teeth while this Policy is in force;
6. Medical Expenses incurred as a result of influence of over usage / abuse of alcohol and/or drug addiction or overdose i.e., over and above the dosage as prescribed by / administered on advice of a Physician / Registered Medical Practitioner;
7. Maternity Expenses, treatment arising from or traceable to pregnancy except miscarriage and pre-mature birth as a result of an Accident.
8. Medical Expenses incurred outside the Republic of India except emergency treatment to stabilize the Insured Person.
9. Any non-allopathic treatment.

OPTIONAL COVER

1. INVOLUNTARY LOSS OF JOB

The Company hereby agrees, subject to the terms, conditions and exclusions applicable to this Section and the terms, conditions stated in the Policy and on payment of additional premium as applicable, to pay once during the Policy Period on occurrence of the Insured Event as stated below under this Section, in relation to the Insured Person's, EMI Amount(s) falling due in respect of the Loan (Loan account number as stated in Schedule to this Policy) after the commencement of the Insured Event till the reinstatement of employment with the same employer or new employer or expiry of Policy Period, whichever is earlier, subject to payment of a maximum of up to six (6) EMIs as stated under Schedule to this Policy for the Insured Person.

Insured Event: For the purposes of this Section and the determination of the Company's liability under it, Insured Event in relation to Insured Person shall mean involuntary termination from employment of the Insured Person or his/her permanent dismissal, temporary suspension or retrenchment or lay off from employment imposed on him/her by the employer during the Policy Period due to any of the following:

- a) First time diagnosis of any of the covered Critical Illness for which a claim is admissible and payable under Critical Illness benefit, during the Policy Period, or
- b) Permanent Total Disability occurring due to an Accident during the Policy Period for which a claim is admissible and payable under Permanent Total Disability benefit.

as per the employer's rules /regulations or executed/implemented by the employer in compliance of any laws for the time being in force or any directives by any Public Authority

EXCLUSIONS

No benefit shall be payable under this benefit in the event of termination, lay-off, dismissal, temporary suspension or retrenchment from employment of the Insured Person being attributed to any dishonesty or fraud or poor performance on the part of the Insured Person or non-compliance of any company or organization's internal rules/ guidelines or his willful violation of any rules of the employer or laws for the time being in force or any disciplinary action against the Insured Person by the employer.

1. The Company shall not be liable to make any payment under this Policy in connection with or in respect of:
 - a) Self-employed persons;
 - b) Any claim relating to unemployment from a job which is casual, temporary, seasonal or contractual in nature or any claim relating to an employee not on the direct rolls of the employer;
 - c) Any voluntary unemployment;
 - d) Unemployment at the time of inception of the Policy Period or arising within the first 90 days of inception of the Policy Period.
2. Any unemployment from a job under which no salary or any remuneration is provided to the Insured Person.
3. Any suspension from employment on account of any pending enquiry being conducted by the employer/ Public Authority.
4. Any unemployment due to resignation, retirement whether voluntary or otherwise.
5. Any unemployment due to non-confirmation of employment after or during such period under which the Insured Person was under probation.

2. HOSPITAL DAILY CASH BENEFIT

The Company hereby agrees, subject to the terms, conditions and exclusions applicable to this Section and the terms, conditions, general exclusions stated in the Policy and on payment of additional premium as applicable, to pay the fixed amount specified in the Schedule in respect of the Insured Person for each continuous and completed period of 24 hours that the Insured Person is Hospitalized due to an Injury or Illness first diagnosed during the Policy Period, for up to 30 days in a Policy Period. In the case of Hospitalization within the Intensive Care Unit (ICU), the Company will pay twice the benefit payable under this Section for a period not exceeding 15 days in a Policy Period.

Insured Event: For the purposes of this Section and the determination of the Company's liability under it, Insured Event in relation to Insured Person shall mean each continuous and completed period of 24 hours of Hospitalization due to an Injury or Illness diagnosed during the Policy Period.

EXCLUSIONS UNDER HOSPITAL CASH BENEFIT

1. Any condition, ailment or injury or related condition(s) for which You had and / or were diagnosed, and / or received medical advice / treatment within 36 months prior to the first policy issued by Us.

2. Routine eye tests, dental treatment or other examination and/or tests not incidental to the treatment or diagnosis of an injury, sickness or disease,
3. Sleep disorder, Parkinson and Alzheimer's disease, external congenital diseases defects or anomalies, general debility, or exhaustion ("run-down condition"); stem cell implantation or surgery, or growth hormone therapy.
4. Sterility, treatment whether to effect or to treat infertility, any fertility, sub-fertility or assisted conception procedure, surrogate or vicarious pregnancy, birth control, contraceptive supplies or services including complications arising due to supplying services.
5. Dental treatment or other examination and/or tests not incidental to the treatment or diagnosis of an injury, sickness or disease.
6. Circumcisions unless required as a part of treatment of an illness or injury; laser treatment for correction of eye due to refractive error; aesthetic or change-of-life treatments of any description such as sex transformation operations, treatments to do or undo changes in appearance or carried out in childhood or at any other times driven by cultural habits, fashion or the like or any procedures which improve physical appearance.
7. Prostheses, cosmetic surgery or reconstructive surgery unless as a result of an accidental injury,
8. Custodial care, bed rest, convenience care, convalescence, general debility, rest cure,
9. Any treatment relating to obesity, weight reduction, weight improvement,
10. Self-inflicted injuries or attempted suicide,
11. 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 defense, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, radiation of any kind, any epidemics recognized by government or WHO.
12. Any injury, sickness or disease received as a result of the insured person committing any breach of law,
13. Any injury, sickness or disease received as a result of the insured person being under the influence of alcohol or drugs other than in accordance with the directions of a registered medical practitioner,
14. Any injury, sickness or disease received as a result of the insured person taking part in any naval, military or air force operation,
15. Any injury, sickness or disease received as a result of the insured person participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition,
16. Any injury, sickness or disease received as a result of aviation, gliding or any form of aerial flight other than on a scheduled commercial airline as a bona fide passenger (whether fare paying or not), pilot or crew member

17. Experimental, investigational or unproven treatment devices and pharmacological regimens.
18. Any procedure primarily for diagnostic or preventive purposes, which are not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any Illness for which confinement is required at a Hospital.
19. Any non-allopathic treatment.
20. Any treatment or part of a treatment that is not medically necessary.

3. CHILD EDUCATION BENEFIT

If the Insured Person/s is diagnosed with any of the covered Critical Illness or suffers Personal Accident - Death or Permanent Total Disablement during the Policy Period for which a valid claim has been admitted under the Policy, We will pay, on receipt of additional premium, towards this child education benefit of the Insured Person(s)' Dependent Child / children up to 10% of the Sum Insured, subject to maximum
INR 500,000/-

In case of one child, the benefit payable would be the maximum Sum Insured specified under this option and in the case of more than one child, the benefit will be equally divided subject to maximum of 2 dependent children covered under this benefit.

Note:

The cover under this Policy, for the specific Insured Person, shall terminate in the event of claim in respect of that Insured Person becoming admissible and accepted by the Company under diagnosis of any of the covered Critical Illness or Death or Permanent Total Disablement.

GENERAL EXCLUSIONS APPLICABLE TO ALL THE SECTIONS
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The Company shall not be liable for any loss or damage under this Policy:

1. Arising or resulting from the Insured Person committing any breach of the law with criminal intent.
2. due to, or arising out of or connected with or traceable to, War, invasion, act of foreign enemy, hostilities (whether war be declared or not) Civil War, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detainment of all Heads of State and citizens of whatever nation and of all kinds and acts of Terrorism, Riots, Strike, Malicious Acts etc.
3. Caused by or contributed to by or arising from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self- sustaining process of nuclear fission.
4. Caused by or contributed to by or arising from nuclear weapon materials.
5. Arising out of or as a result of any act of self-destruction or self-inflicted Injury, attempted suicide or suicide.
6. Arising out of or resulting while serving in any branch of the Military or Armed Forces of any country during War or warlike operations.

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7. Arising out of or resulting o r caused by, resulting from or in connection with any act of terrorism/sabotage regardless of any other cause or event contributing concurrently or in any other sequence to the loss. The Policy 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/sabotage.
8. Any Claim of the Insured Person while driving any vehicle without a valid Driving License.

DISCLAIMER: THE ABOVE IS DESCRIPTIVE ONLY. THE ACTUAL TERMS AND CONDITIONS CAN BE FOUND IN THE POLICY DOCUMENT. INSURED'S ARE ADVISED TO READ THE POLICY DOCUMENT COMPLETELY FOR A FULL DESCRIPTION OF THE TERMS AND CONDITIONS OF COVERAGE AND THE EXCLUSIONS RELATING THERETO.