

## **SARAL SURAKSHA BIMA - (MICRO INSURANCE)**

### **PROSPECTUS**

#### **Policy Coverage**

Saral Suraksha Bima (Micro Insurance) undertakes to pay a lump sum amount of as selected by the proposer on happening of an eventuality covered in the policy.

The policy pays one-time payment equal to the Sum Insured on diagnosis of any of the listed five Critical Illnesses, Accidental Death and Permanent Total Disablement resulting from an accident.

#### **Who can be covered under the Policy?**

This Policy can be taken by different types of organisations, who render services to persons falling under the low income segment, such as a NGO, a SHG, a Micro Finance Institution(MFI), RBI regulated NBFC-MFIs, District Co-operative Banks licensed by RBI subject to being eligible as per extant norms of RBI, Regional Rural Banks established under Section (3) of Regional Rural Banks Act, 1976 subject to being eligible as per extant norms of RBI, Urban Co-operative banks licensed by RBI subject to being eligible as per extant norms of RBI, Primary Agricultural Co-operative Societies, Other Co-operative Societies registered under any of the Co-operative Societies Acts and Business Correspondents appointed in accordance to the extant RBI Guidelines with any of the Scheduled Commercial Banks.

#### **What is covered under the Policy?**

The policy shall pay to you on happening of below mentioned contingencies.

#### **Section 1 - Critical Illness**

- a) Stroke resulting in permanent symptoms
- b) Cancer of specified severity
- c) Kidney Failure requiring regular dialysis
- d) Open Chest CABG
- e) Major Organ /Bone Marrow Transplant

#### **Section 2 – Personal Accident**

- Accidental Death:

The nominee gets a one-time payment equal to Capital Sum Insured (CSI) if the insured dies in an accident.

- Permanent Total Disablement

The insured is entitled to receive the percentage of the capital sum insured as per the table of benefit if he suffers a permanent and total loss of limbs, sight in an accident.

TABLE OF BENEFITS	% OF CSI
1. Death	100

2. a) Loss of sight (both eyes)	100
2. b) Physical separation of or loss of ability to use both hands or both feet	100
2. c) Physical separation of or loss of ability to use one hand and/ or any feet	100
2. d) Loss of sight of one eye and physical separation of or loss of ability to use either one hand or one foot	100

3. a) Loss of sight of one eye	50
3. b) physical separation of or use of ability to use one hand or one foot	50
4. Permanent Total and absolute disablement as certified by a qualified medical practitioner	100

### Eligibility

- Entry age for you (the proposer) is 18 years and you can opt for this policy up to the age of 65 years.
- Policy renewals will be for your lifetime.
- Children from 10 years to 25 years can be covered if any one of the Parent is insured under the Policy. Unmarried children can also be covered upto maximum of 25 years of age only. In case child gets married, the child will not be covered on next renewal.

### What is not covered under the policy:-

#### Exclusion specific to Critical Illness

##### 1) 90 days Waiting Period

The Company shall not be liable to make any payment under this Policy in connection with or in respect of any Insured Event, as stated in this Section, arising within the first 90 days of the commencement of the Policy Period. However this exclusion shall not be applicable on continuous renewals.

##### 2) Pre-existing diseases

1. Benefits will not be available for Any condition, whether diagnosed or not, ailment or injury or related condition(s) for which Insured has been diagnosed, received medical treatment, had signs and / or symptoms, prior to inception of Insured's first Policy, until 36 consecutive months have elapsed, after the date of inception of the first Policy with Insurer. It would also mean any direct or indirect complications arising out of pre-existing conditions whether known or unknown to the Insured.
2. This Exclusion shall cease to apply if Insured has maintained the Health Insurance Policy with Insurer for a continuous period of a full 36 months without break from the date of Insured's first Health Insurance Policy with Insurer.

##### 3) Death within 30 days following the diagnosis of the Critical Illness

##### 4) Any Critical Illness which arises or is caused by any one of the following:

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- a) Drug addiction, alcoholism, smoking of more than 30 cigarettes/cigars or equivalent intake of tobacco in a day and any complication, consequences arising there from.
- b) Any Insured person suffering from Human T.Cell Lymphotropic Virus Type III (HTLV -III) or Lymphadenopathy Associated Viruses (LAV) or the Mutant derivatives or Variations Deficiency Syndrome or any Syndrome or a condition of similar kind referred to as AIDS. The onus shall always be on Insured Person to show any event was not caused by or did not arise through AIDS or HIV.

### **Exclusion specific to Personal Accident**

- 1) Compensation under more than one of the benefits mentioned in Table of Benefits in respect of same period of disablement.
- 2) Any other payment after a claim under one of the benefits 1,2,3 and 4 mentioned in Table of benefits has been admitted and becomes payable
- 3) Any payment in case of more than one claim under this section during any one period of Insurance by which our liability in that period would exceed CSI.
- 4) Payment of compensation in respect of injury as consequence of
  - a) Committing or attempting suicide, intentional self-injury
  - b) Whilst under influence of intoxicating liquor
  - c) Drug addiction or alcoholism
  - d) Whilst engaged in any adventurous sports
  - e) Committing any breach of law with criminal intent

### **General Exclusions under the Policy**

We will not pay for any compensation in respect of death, Illness, Injury or disablement of the Insured Person arising out of:

1. War, , rebellion, revolution, terrorism acts, nuclear weapon induced treatment or taking active part in Riot, Strike, Malicious Acts..
2. Participation in riots, confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any government or local authority.
3. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission.
4. The radioactive, toxic, explosive or the hazardous properties of any nuclear assembly or nuclear component.

### **What are the conditions under the Policy?**

#### **A. Sum Insured & Premium rate**

The minimum sum insured available under each section is Rs.10,000 and maximum sum insured available under each section is Rs.1,00,000. The premium rate for Critical Illness and Personal Accident shall be 0.17% and 0.14% respectively.

\*Applicable GST is subject to change as per change in Tax Laws.

## **B. Policy Term**

The policy can be issued for a period of one year only and premium under the policy shall be payable in advance in a single installment.

## **C. Cancellation**

The policyholder may cancel this policy by giving 7days'written notice and in such an event, the Company shall refund premium for the unexpired policy period as 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

## **D. Terms of Renewal-**

This Policy may be renewed by mutual consent every year and in such event, the renewal premium shall be paid to Company on or before the date of expiry of the Policy or of the subsequent renewal thereof. Also Company may exercise option not to renew the policy on grounds of fraud misrepresentation, or suppression of any material fact either at the time taking the Policy. A Grace Period of 30 days is allowed for renewal of the Policy. This will be counted from the day immediately following the premium due date during which a payment can be made to renew or continue the Micro Insurance Policy in force without loss of continuity benefits such as waiting periods and coverage of Pre-existing condition / Diseases. The continuity of coverage for all the covers under the expiring policy will be subject to receiving appropriate premium for the same. Coverage is not available for the period for which no premium is received and Company has no liability for the claims arising during this period.

## **E. Nomination**

The Policy has provision of nomination, In absence of Your declaring Nomination at the time of Proposal, then all benefits accrued under the Policy if any, shall be given to Your legal heir/ dependents.

## **F. Notices and Claims**

Any notice, direction or instruction given under this Policy shall be in writing, and sent to:

### **Universal Sampo General Insurance Co. Ltd.**

Express IT Park, Plot No. EL - 94, T.T.C. Industrial Area, M.I.D.C., Mahape, Navi Mumbai-400710

Toll Free Numbers: 1800-200-5142

Landline Numbers: +91 22 39635200

E-mail Address: [contactus@universalsampo.com](mailto:contactus@universalsampo.com).

Fax Numbers: 1800-200-9134

**Note:** Please include your policy number for any communication with us.

## **Claims Procedure**

## Claim Intimation

Claim intimation can be done online on our Health Serve Web Portal or by calling at our toll free number 1800 200 4030 or by emailing us at [healthserve@universalsompo.com](mailto:healthserve@universalsompo.com).

- i Within 24 hours from the date of emergency hospitalization required
- ii At least 48 hours prior to admission in Hospital in case of a planned Hospitalization.

## Reimbursement Process

Follow below steps to avail reimbursement facility through our In house Health Claims Management:

**Step I:** Visit our Web Portal to register claim or Call our Health Helpline 1800 200 4030 or email us at [healthserve@universalsompo.com](mailto:healthserve@universalsompo.com) and inform about your claim.

**Step II:** Visit hospital and undergo your treatment. Settle your hospitalization bill and collect all the documents after discharge from the hospital.

**Step III:** Fill in Reimbursement Claim Form and submit all original documents to our below mention office for reimbursement.

Universal Sampo General Insurance Company Limited,

Health Claims Management Office,  
1st Floor C-56- A/13,  
Block- C Sector- 62,  
Noida,  
Uttar Pradesh, Pincode: 201309

**Step IV:** On receipt of document your claim will processed as per Terms & Conditions of policy and the same will be communicated over SMS & Email.

**Step V:** Outcome of the claim will be communicated within 15 days from date of Submission of claim

## Document submission check list

For speedy processing for your claim, please ensure the submission of all required documents within specified time.

- I.Claim form duly filled and signed by the Insured
- II.Certificate from attending medical practitioner mentioning the first symptoms and date of occurrence of ailment.
- III.All treatment papers of current ailment including previous treatment papers if any.
- IV.Attested copy of claim documents along with settlement letter from Primary Insurer in case original documents submitted to another Insurer.
- V.Discharge Card from the hospital, Indoor Case Papers.

- VI. All medical Investigation reports (viz. X-ray, ECG, Blood test etc).
- VII. Hospital bill and receipts.
- VIII. Bills of chemist, medical practitioner, medical investigation, etc. supported by the doctor's prescription.
- IX. NEFT details and Personalized cancelled cheque/ Passbook copy in the name of proposer for electronic fund transfer.
- X. Valid Photo ID Proof of the patient.
- XI. For accident Cases: MLC (Medico Legal Certificate) / FIR (First Information report).
- XII. Copy of latest valid address proof of proposer like electricity bill, water bill or telephone bill or updated bank statement along with copy of PAN card & Aadhaar Card as per AML/KYC Norms.

The above list of documents is indicative. In case of any further document requirement, Our Health Serve team will contact you on receipt of your claim documents by us

#### **Critical illness Claims:**

- i. Certificate from the attending Doctor of the Insured confirming,
  - a) Name of the Insured;
  - b) Name, date of occurrence and medical details of the Insured Event
  - c) Confirmation that the Insured Event does not relate to any Pre-Existing Illness or an Illness or Injury which existed within the first 90 days of commencement of Policy Period.
- ii. Duly completed claim form;
- iii. Original Discharge Certificate/ Card from the hospital/ Doctor;
- iv. Original investigation test reports, & indoor case papers if required.

#### **Death Claims:**

- a) Duly filled up claim form
- b) Death Certificate and Original FIR
- c) Original Panchnama
- d) Post mortem report

#### **Permanent Total Disablement Claims:**

- a) Duly filled original Claim Form
- b) Claim Intimation
- c) FIR – Attested or Original
- d) Final Police Report / Original Panchnama
- e) Certificate of from government hospital doctor confirming the nature and degree of disability
- f) Discharge summary of the treating hospital clearly indicating the Hospital Registration No.
- g) Diagnostic reports
- h) Photograph of the injured reflecting disablement

#### **Company's obligations**

- i) The Company shall settle or reject a claim, as the case may be, within 15 days from the date of submission of the claim.
- ii) In the case of delay in the payment of a claim, the Company shall be liable to pay interest from the date of receipt date of receipt of intimation to till the date of payment.
- iii) However, where the circumstances of a claim warrant an investigation in the opinion of the Company, it shall initiate and complete such investigation at the earliest in any case not later than 15 days from the date of submission of claim.
- iv) In case of delay beyond stipulated 15 days the company shall be liable to pay interest at a rate 2% above the bank rate from the date of receipt of intimation to till the date of payment.

### Claim Intimation

In the event, please intimate IMMEDIATELY to our customer care at Toll Free Numbers on 1800-200-5142 or on chargeable numbers at +91 22 39635200 or email at [contactus@universalsompo.com](mailto:contactus@universalsompo.com).

### Redressal of Grievance

If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, you can address Your grievance as follows:

#### Step 1: Contact us

##### Write us at:

**Customer Service Universal Sampo General Insurance Co. Ltd.**  
Unit No. 601 & 602, 6<sup>th</sup> Floor, Reliable  
Tech Park, Thane- Belapur Road, Airoli,  
Navi Mumbai, Maharashtra – 400708

##### E- mail Address

[contactus@universalsompo.com](mailto:contactus@universalsompo.com)

##### For more details:

[www.universalsompo.com](http://www.universalsompo.com)

**Toll Free Numbers: 1800-22-4030 or  
1800-200-4030**

**Senior Citizen toll free number: 1800-267-  
403**

#### Step 2: Grievance Cell

If the resolution you received, does not meet your expectations, you can directly write to our Grievance Id. After examining the matter, the final response would be conveyed within two weeks from the date of receipt of your complaint on this email id.

**Customer Service Universal Sampo General Insurance Co. Ltd.**

Unit No. 601 & 602, 6<sup>th</sup> Floor, Reliable  
Tech Park, Thane- Belapur Road, Airoli,  
Navi Mumbai, Maharashtra – 400708

##### E- mail Address:

[grievance@universalsompo.com](mailto:grievance@universalsompo.com)

##### For more details:

[www.universalsompo.com](http://www.universalsompo.com)

**Visit Branch Grievance Redressal Officer (GRO) -** Walk into any of our nearest branches and request to meet the GRO.

- We will acknowledge receipt of your concern Immediately
- Seek and obtain further details, if any, from the complainant (permitted only once) Within one week
- Within 2 weeks of receiving your grievance, we will respond to you with the best solution.
- We shall regard the complaint as closed in case on non-receipt of reply from the complainant Within 8 weeks from the date of registration of the grievance

### Step 3: Chief Grievance Redressal Officer

In case, you are not satisfied with the decision/resolution of the above office or have not received any response within 15 working days, you may write or email to:

**Customer Service Universal Sampo General Insurance Co. Ltd.**

**Unit No. 601 & 602, 6<sup>th</sup> Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra – 400708**

**E- mail Address:**

[gro@universalsompo.com](mailto:gro@universalsompo.com)

**For more details:**

[www.universalsompo.com](http://www.universalsompo.com)

For updated details of grievance officer, kindly refer the link <https://www.universalsompo.com/resource-grievance-redressal>

### Step 4: Insurance Ombudsman

Bima Bharosa Portal link: <https://bimabharosa.irdai.gov.in/>

You can approach the Insurance Ombudsman depending on the nature of grievance and financial implication, if any.

Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at [www.irdai.gov.in](http://www.irdai.gov.in), or of the General Insurance Council at <https://www.gicouncil.in/>, the Consumer Education Website of the IRDAI at <http://www.policyholder.gov.in>, or from any of Our Offices.

The updated contact details of the Insurance Ombudsman offices can be referred by clicking on the Insurance ombudsman official site: <https://www.cioins.co.in/Ombudsman>.

**Note:** Grievance may also be lodged at IRDAI- <https://bimabharosa.irdai.gov.in/>.

**INSURANCE ACT 1938, SECTION 41 – PROHIBITION OF REBATES:** No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole part of the commission payable or any rebate of the premium shown on the policy nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebates as may be allowed in accordance with the published prospectuses or tables of the Insurer.

Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to Ten Lakh Rupees

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Registered & Corp Office: Universal Sampo General Insurance Company Ltd. 8th Floor & 9th Floor (South Side),  
Commerz International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon East,  
Mumbai 400063, Toll free no: 1800-22-4030/1800-200-4030, IRDAI Reg no: 134, CIN#  
U66010MH2007PLC166770 E-mail: [contactus@universalsampo.com](mailto:contactus@universalsampo.com), website link [www.universalsampo.com](http://www.universalsampo.com)

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