

Liberty General Insurance Ltd.

Unit 1501&1502, 15th Floor, Tower 2, One International Center,
 Senapati Bapat Marg, Prabhadevi, Mumbai – 400013,
 Phone: +91 226700 1313 Fax: +91 226700 1606
 IRDAI of India Reg. No.150 • CIN:
 U66000MH2010PLC269656



Liberty Secure Travel - Prospectus

Introduction:

The policy is a perfect milieu of covers towards the medical emergencies due to an illness/injury and other travel related contingencies to cater to the needs of domestic travelers.

The policy offers tailor made plans to cater to the requirements of domestic travelers travelling individually or with family. The medical expenses part covers the unexpected medical emergencies due to an illness/injury requiring immediate medical attention, medical evacuation to India or repatriation in case of death of the insured. The other non-medical covers under the policy are towards the impediments like trip delay, trip curtailment, missed connection etc. along with the insurance cover towards the personal liability, hijack allowance etc.

Eligibility:

- | | |
|---|---|
| & Minimum Entry Age : | Single & Onward Trip : 18 Years for Adults and 91 days for Children
Annual Multi Trip: 18 Years |
| & Maximum Entry Age : | Single & Onward Trip: 80 Years for Adults and 18 Years for Children
Annual Multi Trip: 80 Years |
| & Renewability: | Upto 80 years in Annual Multi trip policies. |
| & Policy Tenure: | Single & Onward Trip: minimum 1 day to maximum 180 days which can be extended further upto 180 days on payment of additional premium
Annual Multi Trip: 1 year with a option to select duration per trip i.e. 30days, 60 days or 90days. No capping on number of trips per year. |
| & Relationships covered: | Self, Spouse, Children, Parents, Parents-in-laws, Siblings, Son-in-law, Daughter-in-law, Grand- children Grand- parents. |
| & Premium frequency: | One time at policy inception |
| & Child/children below 18 years of age can be covered provided either of the parents is insured under the policy. | |

Key Features:

Key features enlisted below are available as per your selected plan and optional covers

- & **Single Trip:** The policy period can be from minimum 1 day to maximum 180 days.
- & **Annual Multi Trip:** Option to choose duration per trip i.e. 30days, 60 days or 90days.
- & No capping on number of trips in a year under Annual multi trip.
- & In case of Single Trip & Onward Trip, policy can be extended upto 180 days on payment of additional premium.
- & Covers travel inconveniences like Trip Delay, Loss of Checked in Baggage, Delay of Checked in Baggage, Missed connection, Missed departure etc.

Scope of Cover:

Note: The information provided herein is only indicative, we request you to refer the exhibit of benefits attached for better understanding of the covers, sum insured and deductibles.

1. Emergency Inpatient Hospitalization:

Covers hospitalization expenses due to any illness or accidental Injury towards Room, Boarding expenses, Intensive Care Unit bed charges, Doctor's fees, Nursing Expenses, Surgical Fees, Operation Theatre Charges, Anesthetist, Anesthesia, Blood, Oxygen and their administration, Physical Therapy, Prescribed Drugs and medicines consumed on the premises, Investigation Services such as Laboratory, X-Ray, Diagnostic tests, Dressing, Ordinary splints and plaster casts, Cost of Prosthetic & other devices that are used intra operatively during a Surgical Procedure, if recommended by the attending Medical Practitioner.

2. Emergency Accidental Hospitalization:

Covers hospitalization expenses on account of accidental injury towards Room, Boarding expenses, Intensive Care Unit bed charges, Doctor's fees, Nursing Expenses, Surgical Fees, Operation Theatre Charges, Anesthetist, Anesthesia, Blood, Oxygen and their administration, Physical Therapy, Prescribed Drugs and medicines consumed on the premises, Investigation Services such as Laboratory, X-Ray, Diagnostic tests, Dressing, Ordinary splints and plaster casts, Cost of Prosthetic & other devices that are used intra operatively during a Surgical Procedure, if recommended by the attending Medical Practitioner.

3. Outpatient Treatment for Injury:

Covers outpatient treatment expenses on account of accidental injury towards medicines, pathological investigations & diagnostic tests.

4. Ambulance Cover:

Covers expenses incurred on an ambulance to transfer you to the nearest Hospital on account of illness or accidental injury.

5. Emergency Medical Evacuation:

Covers expenses incurred towards transportation to the nearest hospital with adequate

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emergency facilities for the provision of health services, arising out of accidental bodily injury and/or illness

6. Transportation of the Mortal Remains:

Covers expenses incurred towards transportation of the mortal remains to your place of residence in case of death due to an accident/illness or the equivalent amount for burial or cremation at the location where death has occurred.

7. Accidental Death:

We will pay the sum as mentioned in your policy on lump sum basis to your beneficiary or legal representative, if accidental bodily injury results in death.

This is a Base cover of the Policy and need to be selected while opting for this Policy.

8. Permanent Total Disablement:

We will the pay the compensation as stated in the disablement benefit table, if accidental bodily injury results in permanent total disability.

9. Permanent Partial Disablement:

We will the pay the compensation as stated in the disablement benefit table, if accidental bodily injury results in permanent Partial disability.

10. Accidental Death (Common Carrier):

We will pay the sum as mentioned in your policy on lump sum basis to your beneficiary or legal representative, if you sustain accidental bodily injury while travelling in common carrier like bus, tram, rail or aircraft which results in death.

11. Permanent Total Disablement (Common Carrier):

We will the pay the compensation as stated in the disablement benefit table, if you sustain Accidental Bodily Injury while travelling in common carrier like bus, tram, rail or aircraft which results in permanent total disability.

12. Trip Delay:

We will reimburse the expenses incurred towards the meals and accommodation, if your journey in an aircraft on which you are booked to travel is delayed than the original schedule time beyond the no. of hours as specified in your policy schedule.

13. Trip Cancellation:

We will compensate towards expenses for travel tickets, hotel booking and planned events including excursions, if your trip needs to be cancelled on account of

- i. Death or Critical illness diagnosis of the Insured or immediate family members.
- ii. Serious damage to your residence from catastrophic conditions.
- iii. Your/spouse/child hospitalization for at least 3 days due to sudden illness or injury.
- iv. Compulsory quarantine or prevention of travel by Government.

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14. Trip Cancellation Extension:

We will reimburse the cost of ticket which was booked to travel by common carrier, if your trip needs to be cancelled prior to commencement from your place of residence or place of origin. OR

We will pay difference in ticket cost booked by you from other Carrier, if scheduled Common Carrier on which you were booked to travel is cancelled by the carrier authorities and was informed to you atleast 1 week before the scheduled date & time of departure.

15. Loss of Checked In Baggage:

We will reimburse the expenses incurred towards the total loss of checked in baggage, subject to deductible and limit specified in the policy schedule, in case your checked in baggage is lost by the common carrier at the destination outside your place of residence.

16. Delay of Checked in Baggage:

We will reimburse the expenses incurred towards the emergency purchase of medicine, toiletries and clothing, subject to deductible and limit specified in the policy schedule, in case your checked in baggage is delayed for more than the duration as specified in the Policy Schedule, by a common carrier at the destination outside your place of residence.

17. Home Contents (Fire and Allied Perils):

We will indemnify up to the sum insured specified in the policy schedule for any loss or damage to the contents at your residence caused due to fire and allied perils during the trip.

18. Home Burglary (Contents):

We will compensate up to the sum insured specified in the policy schedule for any loss or damage to the contents caused by any burglary/theft at your residence during the trip.

19. Adventure Sports: Accident Cover:

We will pay the sum as mentioned in your policy schedule, if accidental bodily injury caused on account of your participation in any of the adventure sports carried out in accordance with the guidelines, codes of good practice and recommendations for safe practices as laid down by a governing body or authority which results in death or permanent total Disability.

20. Adventure Sports: Hospitalization Cover:

We will cover medical expenses incurred towards accidental bodily injury on account of your participation in any of the adventure sports carried out in accordance with the guidelines, codes of good practice and recommendations for safe practices as laid down by a governing body or authority.

21. Trip Curtailment:

We will compensate towards the expenses incurred for travel tickets or hotel booking, if your trip is cut short or you need to return to your city of residence on account of

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- i. Death or Critical illness diagnosis of the Insured or immediate family members.
- ii. Serious damage to your residence from catastrophic conditions.

- iii. You/Your spouse/child hospitalization for at least 3 days due to sudden illness or injury.
- iv. Inclement weather conditions.

22. Emergency Family Visit:

Covers expenses incurred towards the cost of return trip by economy class of transportation of one immediate family member by the most direct route via a common carrier, subject to policy terms and conditions, if you are hospitalized due to accidental injury or illness covered under the policy and your medical condition forbids repatriation.

23. Emergency Family Accommodation:

Covers expenses incurred towards the cost of accommodation (boarding and lodging) of one immediate family member, subject to policy terms and conditions, if you are hospitalized due to accidental injury or illness covered under the policy and your medical condition forbids repatriation.

24. Personal Liability:

Covers reasonable and customary expenses up to Sum Insured specified in the Policy schedule, in respect of any legal liability arising out of accidental bodily injury or accidental property damage caused by you in private capacity to a third party occurring during the trip.

25. Hospital Daily Cash - Accident only:

Pays a Hospital Daily Cash allowance as stated in your Policy Schedule to take care of non-medical expenses incurred for each continuous and completed period of 24 hours of accidental hospitalization for a maximum up to 7 days of continuous hospitalization.

26. Missed Connection:

We will pay the amount specified in the Policy Schedule towards missed connection, if the flight/common carrier booked by you to travel from the city of residence is delayed beyond the specific duration as mentioned in the Policy Schedule than the original scheduled time, for arrival at the destination of the connecting flight, resulting in missing of the connecting flight/common carrier, subject to policy terms and conditions.

27. Missed Departure:

We will pay the amount specified in the Policy Schedule towards the cost of your common carrier actual ticket, if you cannot reach the original departure point of your booked journey, on account of the following reasons:

1. Public transport services fail or
2. The vehicle in which you are travelling is involved in an accident, on the way to catch the common carrier which results in outpatient/inpatient hospitalization.
3. Inclement weather conditions.

28. Loss of Tickets:

We will pay the amount specified in the policy schedule towards the reasonable cost of your economy class actual ticket (common carrier) which is unrecoverable from any other sources, wherein the ticket is lost by you and you are unable to continue your planned travel.

29. Emergency Catastrophe Evacuation:

We will pay the amount specified in the policy schedule towards your immediate evacuation, to avoid any kind of personal injury or illness. We will pay for the cost of your return to city of residence or nearest safe location up to cost of economy class of ticket for the same. In case if the return journey is not possible, then the Company shall pay reasonable expenses towards accommodation as mentioned the Policy schedule.

30. Bounced Hotel/Common Carrier Booking:

We will reimburse the expenses incurred towards the cost for lodging in similar Hotel on account of bouncing due to overbooking of hotel reservation.

Similarly, we will reimburse difference in cost of ticket booked from alternate common carrier in the event of bouncing due to overbooking of common carrier tickets.

The Company's liability under this Benefit shall not exceed the Sum Insured as specified against this Benefit in the Policy Schedule.

31. Substitute Staff to Complete Your Business:

We will pay the amount specified in the Policy Schedule towards the reasonable travel expenses for a substitute person during the Policy Period to complete the original business purposes of the journey on your behalf if:

- a) Injury suffered by you results in emergency hospitalization which prevents you from completing the business purposes of the journey; or
- b) You are hospitalized due to illness and required to return to place of origin or home town on advice of the registered medical practitioner; and
- c) The claim is admissible under Section 1, 2 or 5 (Emergency Inpatient Hospitalization, Emergency Accidental Hospitalization or Emergency Medical Evacuation)

32. Hijack Allowance:

We will pay the amount specified against this section in the Policy Schedule, if the common carrier in which you are travelling is hijacked during the trip.

33. Loss of Credit Card/Debit Card:

We will reimburse expenses incurred towards obtaining a duplicate or fresh Credit card/Debit Card, in the event you loss the Credit card/Debit Card during the trip.

34. Emergency Assistance Services:

The below services would be provided by Us /through our appointed Service provider, with prior intimation and acceptance by Us and can be availed anytime during the policy period and there are no restrictions on the number of times the facility can be utilized.

1. Medical Assistance

- i. **Medical Consultation, Evaluation and Referral-** In case of any emergency situation, We/our Service Provider will evaluate, troubleshoot and make immediate recommendations including referrals to qualified doctors and/or hospitals. We will only arrange for the medical consultant, the consultant fee will be borne by the Policyholder.
- ii. **Medical Monitoring and Case Management-** A team of doctors, nurses, and other medically trained personnel would be in regular communication with the attending physician and hospital, monitors appropriate levels of care and relay necessary and legally permissible information to the members of the Family / Employer.
- iii. **Emergency Medical Evacuation or Repatriation-** If you fall ill or suffer injury in an area where appropriate care is not available, We via Service Provider will intervene and use available transportation equipment by means of air, road or rail transportation and personnel necessary to evacuate you safely to the nearest facility for medical care or repatriate to the home town. Such emergency medical evacuation or repatriation would be done either by ground or air solely as per the board approved underwriting policy of the Company.
- iv. **Assistance in Repatriation of Mortal Remains-** We via Service Provider will assist in making all necessary arrangement for the return of your mortal remains to the home town in case of a death during the your journey.
- v. **Telephone Medical Assistance:** We will provide access to 24X7 alarm centre where you can get basic medical assistance in case of medical emergency.

2. Trip Assistance

- i. **Delayed / Lost / Damaged Baggage Assistance:** We via Service Provider will assist you for delayed/ lost/ damaged baggage while traveling by contacting the local authorities and agencies involved and providing directions for recovery. The assistance will be provided for coordinating with common carriers to locate and recover the lost or stolen baggage, using available tracking systems and establishing, on the your behalf and as appropriate liaison with transportation carriers, airports, ports, hotels, and others.
- ii. **Lost / Expired Travel Documents / Tickets:** To assist you by arranging for emergency tickets, replacements of tickets and arrangement of hotel accommodation when traveling outside the home town or usual Town of residence.
- iii. **Trip Rescheduling:** To assist you in rescheduling the trip by cancelling and making travel and accommodation reservations as per the new schedule.

- iv. **Compassionate Visit:** When you are hospitalized, We via Service Provider will assist by making travel reservation for a family member or a personal friend to travel to visit you.
- v. **Assistance with Emergency Family Member Accommodation:** We will assist your family member by making accommodation booking to / in the place where you are hospitalized.
- vi. **Assistance of Return of Travelling Companions and Children:** We will assist your travelling companion or children to return to their place or origin or home town by making travel reservation and other related arrangements when you are hospitalized and there is no one to take care of the travelling companions and children. We will arrange for escorts, if required, to accompany children during the travel.
- vii. **Emergency Travel Services:** We will assist you by making travel reservations and accommodation booking in times of emergencies like missed flight connection, cancellation of flights, bounced bookings.
- viii. **Hotel Accommodation Referral & Arrangement:** We will assist you by referring and making reservation of hotel accommodation across India.
- ix. **Assistance in Emergency Catastrophe Evacuation:** We will assist you by providing necessary information on the situation and available options of being transported to a nearby safe location or to return to home town. If required, we will also make necessary arrangements like making the booking flight / rail / road / taxi for transportation in case of emergency catastrophe condition.

3. Personal Assistance

- i. **Emergency Cash Advance:** If unexpected events result in need for emergency cash by you, We will assist in obtaining the funds from an immediate family member and make it available at the location as requested by you, subject to maximum of Rs. 20000/-
- ii. **Lost Credit Card/Debit Card Assistance:** In the event of a lost Debit card or credit card, we will assist the Insured Person by providing directions on reporting the loss and requesting for replacement.
- iii. **Legal Referral & Assistance:** If you are arrested or are in danger of being arrested as the result of any non-criminal action resulting from responsibilities attributed to You, We will, if required, provide you with the name and address of an attorney who can represent You in any necessary legal matters.
- iv. **Car Rental and Sight-seeing Assistance:** We will assist you in obtaining a car on hire by referring and arranging for the same. We will also assist you by providing information on

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sight- seeing options and make reservations, wherever possible and requested.

- v. **Pet Boarding Assistance:** We will assist you by referring to Pet boarding agencies as per the options available locally and arrange for the same in case there is no one to take care of your pet whilst you are on your trip.

Disclaimer of Liability:

In all cases the medical professional or any attorney suggested by us shall act in a medical or legal capacity on behalf of you only. We assume no responsibility for any medical advice or legal counsel given by the medical professional or attorney. You shall not have any recourse to the us by reason of its suggestion of a medical professional or attorney or due to any legal or other determination resulting therefrom.

You are responsible for the cost of services arranged by us on behalf of you or a covered Immediate Family member. We will access this Policy and/or other insurance Policy benefits to which you may be entitled, and/or your credit cards or other forms of financial guarantees provided by you, in order to facilitate payment for such services.

Section wise Exclusions applicable in the policy:

Exclusions applicable to Section 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11 & 25

The Company shall be under no liability to make payment in respect of,

- 1) Any medical condition or complication arising from condition for which medical advice, diagnosis, care, or treatment (includes receiving services and supplies, consultations, diagnostic tests or prescription medicines) was recommended or received before the commencement of the Policy Period, or condition that had manifested itself in such a manner that would have caused a reasonably prudent person to seek medical advice, diagnosis, care, or treatment (includes receiving services and supplies, consultations, diagnostic tests or prescription medicines), or injury, illness, sickness, disease, or other physical, medical, mental, or nervous conditions, known disorder or ailment that, with reasonable medical certainty, existed at the time of application for the insurance herein.
- 2) In case of any routine health checkup/ investigations without any objective existence of impairment of normal health.
- 3) For any medical expenses beyond the policy period specified in the schedule.
- 4) Medical treatment if the same is the sole reason or one of the reasons for travel.
- 5) In respect of claims arising out of or attributable to travel undertaken against medical advice, or if the Insured is under treatment for illness declared in medical report or medical certificate provided by the Insured with the proposal form.
- 6) Suicide, attempted suicide (whether sane or insane) or intentionally self-inflicted Injury or Illness, or sexually transmitted conditions, mental or nervous disorder, anxiety, stress or depression, Acquired Immune Deficiency Syndrome (AIDS), Human Immune deficiency Virus (HIV) infection, venereal disease, alcoholism, drunkenness or abuse of drugs.
- 7) Participation of the Insured as driver/co-driver or rider/pillion rider in races and rallies. Losses on account of Accidental injuries arising out of driving vehicle without having valid driving License and/or not following all safety norms of the jurisdiction (e.g. Wearing helmet whilst driving, driving within specified speed limits etc.).

- 8) If the Insured is exposed to any hazardous occupation like but not limited to working with fireworks, trainer or instructor for trekking, mountaineering, scuba diving, winter sports, etc. (except in life saving attempt), any criminal or illegal act, serving in any branch of the Military or Armed Forces of any country, whether in peace or War. In case of such service in Military or Armed Force, We, upon written notification by You, shall return the pro rata premium for any such period of service during the Trip.
- 9) Claims arising out of any participation of the Insured unless under supervision of a trained professional in winter sports, mountaineering (where ropes or guides are customarily used), bungee jumping, rafting, underwater diving, 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, hunting or equestrian, skin diving or canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), professional sports or any other hazardous or potentially dangerous sport.
- 10) For any loss arising out of War, civil war, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power, terrorism.
- 11) For elective cosmetic/plastic surgery except as a result of accidental bodily injury during the policy period.
- 12) For Dental care except as a result of accidental bodily injury to the sound natural teeth, during the Policy Period.
- 13) Any claims arising directly or indirectly out of external congenital anomalies.
- 14) Any claims arising directly or indirectly out of internal congenital anomalies for a waiting period of one year from the date of commencement of the first Policy.
- 15) Pregnancy resulting in childbirth or complication arising out of any of the foregoing, expenses related to treatment of infertility or birth control measures except ectopic pregnancy and miscarriage or abortion where the proximate cause is an Accident happening during the Trip.
- 16) Routine pre-natal care, childbirth, care of newborns, post-natal care, birth control, artificial insemination, infertility, impotency or sexual dysfunction, sterilization or reversal thereof.
- 17) Treatment of all forms of cancer/neoplasm.
- 18) Treatment incurred as a result of exposure to non-medical nuclear radiation and/or radioactive material(s).
- 19) Any costs incurred in connection with rest or recuperation at a spa or health resort, sanatorium convalescence home or similar institution.
- 20) Expenses towards immunizations and treatment towards obesity, its causes and complications.
- 21) Experimental, unproven or non-standard treatment.
- 22) Medicines, investigations and treatment not supported by prescription by the physician.
- 23) Treatment by any other system other than modern medicine (also known as Allopathy).
- 24) The cost of spectacles, contact lenses, and hearing aids, crutches, artificial dentures, crowns and all other external appliances and/or devices whether for diagnosis or treatment.
- 25) All those exclusions listed under General Exclusions.

Exclusions applicable to Section 12 - Trip Delay:

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- 1) The Insured or accompanying passenger(s) has not checked in as per airlines/common carrier's requirement.
- 2) Anything listed in General Exclusions

Exclusions applicable to Section 13 - Trip Cancellation:

- 1) The earlier bookings (which were booked prior to travel from Insured's place of residence) are not cancelled and rescheduled by You within 48 hours of the occurrence of the event.
- 2) Any claim incurred on account of any foreseeable reason by You, prior to policy inception with a high degree of probability.
- 3) Insured Person or immediate family member had received advice, medication or treatment for any serious or terminal, chronic or recurring illness, injury or disease in the last 12 months, or were aware of the need for in-patient treatment for any diagnosed or undiagnosed condition, resulting into Trip cancellation, unless the condition was disclosed to and accepted by us.
- 4) Anything listed in General Exclusions.

Exclusions applicable to Section 15 - Loss of Checked-in Baggage:

- 1) Valuables, money, securities and tickets/passes or any other item not declared to or agreed upon by the Company.
- 2) Any partial loss of items contained in the checked-in baggage.
- 3) The same baggage being insured under any other insurance will be considered for ratable proportion of the cover.
- 4) Loss due to confiscation or detention by order of any government or Public Authority.
- 5) Self-carried baggage
- 6) Anything listed in General Exclusions.

Exclusions applicable to Section 16 - Delay of Checked in Baggage:

- 1) Any actual or alleged delay arising from detention, confiscation or distribution by customs, police or other public authorities.
- 2) Any delay of checked-in baggage on the return to the Insured Person's usual place of residence.
- 3) Any delay due to a strike or industrial action existing or announced before the start of the journey.
- 4) Anything listed in General Exclusions.

Exclusions applicable to Section 17 - Home Contents (Fire and Allied Perils):

1. Loss, destruction or Damage caused by war, invasion, act of foreign enemy hostilities or war like operations(whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.
2. Loss, destruction or Damage directly or indirectly caused to the property Insured by Ionizing radiations or contaminations by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
3. ~~Loss, destruction or Damage caused to the Insured property by Pollution or contamination~~

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excluding

- a) Pollution or contamination which itself results from a peril hereby Insured against.

- b) Any peril hereby Insured against which itself results from Pollution or contamination
4. Loss, destruction or Damage to bullion or unset precious stones, curios or works of art for an amount exceeding Rs.10,000/- , manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the Policy.
 5. Loss, destruction or Damage to any articles of consumable nature and motor vehicles.
 6. Loss, destruction or Damage to any electrical and/or electronic machine, apparatus, fixture or fitting (excluding fans and electrical wiring in dwellings) arising from or occasioned by over- turning, excessive pressure, short circuiting, arcing, self-heating, or leakage of electricity, from whatever cause (lighting included).
 7. Expenses necessarily incurred on (i) Architects, Surveyors and Consulting Engineer's Fees and(ii) Debris removal necessarily incurred by the Insured following a loss, destruction or Damage to the Property Insured by an Insured peril in excess of 3% and 1% of the claim amount respectively.
 8. Loss by theft during or after occurrence of any Insured peril except as provided under Riot, Strike and Malicious Damage cover.

Terrorism Damage Exclusion Warranty

This Policy excludes loss, Damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

For the purpose of this exclusion warranty, an act of terrorism means an act or series of acts, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or Government(s), or unlawful associations, recognized under Unlawful Activities(Prevention Act, 2008 or any other related and applicable national or state legislation formulated to combat unlawful and terrorist activities in the nation for the time being in force, committed for political, religious, ideological or similar purposes including the intention to influence any Government and/or to put the public o any section of the public in fear for such purposes.

This exclusion also includes loss, Damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to the above.

If the Company alleges that by reason of this exclusion, any loss, Damage, cost or expenses is not covered by this insurance the burden of proving the contrary shall be upon You.

In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

Exclusions applicable to Section 18 - Home Burglary (Contents):

1) If the Loss or Damage is caused by Burglary and/or theft and where any member of Your

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family member/domestic staff is concerned as principal or accessory.

- 2) For any Loss or Damage to Motor Vehicles, Pedal Cycles, Money, Jewellery and Valuables, work or art, paintings, curios, manuscripts, stamps, collection of stamps, bonds, cheques, securities, medals, documents, portable electronic equipment, livestock, credit and debit cards(unless previously specifically declared to and accepted by Us).
- 3) For any Loss or Damage of an item perishable and/or consumable in nature.
- 4) For any Loss or Damage caused by use of the key to the Insured Home or any duplicate thereof belonging to the Insured, unless such key has been obtained from You, by assault or violence or any threat thereof.
- 5) For any Loss or Damage directly or indirectly, proximately or remotely occasioned by or which arises out of or in connection with riot and strike, civil commotion, terrorist activities.
- 6) For any Loss or Damage to any part of the property or item occupied illegally in any manner.
- 7) Anything listed in General Exclusions.

Exclusions applicable to Section 21 - Trip Curtailment:

- 1) The earlier (those bookings of return journey, which were booked prior to travel from city of residence) bookings are not cancelled and rescheduled by You within 48 hours of the occurrence of the event.
- 2) Any claim incurred on account of any foreseeable reason by You, prior to policy inception with a high degree of probability.
- 3) Anything listed in General Exclusions.

Exclusions applicable to Section 24 - Personal Liability:

- 1) Insured's liability to any employee/employer (under contract for services)
- 2) Third party property damage or bodily injury to Insured's family, co-worker or travelling companion.
- 3) Professional liability arising out of Insured's profession/activities.
- 4) Livestock belonging to Insured or is in custody of Insured.
- 5) The ownership, possession or use of vehicles, aircrafts or watercrafts, rented to or by You.
- 6) Any dangerous or hazardous activity, use of firearms, willful, criminal or unlawful act, terrorism.
- 7) Mental illness, Alcoholism, drug addiction or drugs (except medically prescribed medicines)
- 8) Any supply of goods or services.
- 9) Any form of ownership or occupation of land or buildings, rental or holding any part of premises on rental basis.
- 10) Liability under any agreement or contract.
- 11) Sexual molestation, corporal punishment, or physical or mental abuse
- 12) Transmission of any communicable disease by You
- 13) Property damage to property rented to, occupied, or used by or in the care of You.
- 14) Anything listed in General Exclusions.

Exclusions applicable to Section 29 - Emergency Catastrophe Evacuation:

- 1) Insured violating the laws or regulations of the region from which he is to be evacuated.
- 2) ~~Failure to produce or maintain permits or other documentation wherever applicable~~

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- 3) Failure to honor any contractual obligation or bond or to obey any conditions in a license.

- 4) Insured being a resident of the city from which he is to be evacuated.
- 5) Circumstances that resulted in the Insured's evacuation being in existence prior to the Insured entering the city/region or their occurrence being foreseeable to a reasonable person before the Insured entered the city/region.

Exclusions applicable to Section 31 - Substitute Staff to Complete Your Business:

- 1) All exclusions under Section 1, 2, 3, 4, 5, 6, 7, 8, 9, 10 & 11
- 2) Anything listed in General Exclusions

Exclusions applicable to Section 32 - Hijack

Allowance:

- 1) The Insured is suspected to be either principal or accessory in the hijacking.
- 2) Anything listed in General Exclusions.

Exclusions applicable to Section 33 - Loss of Credit Card/Debit Card:

- 1) Any loss not reported to the local overseas police and written copy of the same not obtained within 24 hours of the occurrence of the event.
- 2) Loss on account of confiscation or detention by customs, police or public authorities.
- 3) Theft of the credit card/debit card unless reported to the police within 24 hours and the copy of the complaint submitted to Us.
- 4) Loss or theft from private vehicle hired for travelling or private place of accommodation unless the same was kept in locked hotel room or apartment and was stolen with violent and forcible entry.
- 5) Loss due to unattendance and ignorance in safeguarding the credit card/debit card.
- 6) Anything listed in General Exclusions

General Exclusions applicable to all the

Sections:

The Company shall bear no liability to make the payment in respect of claims arising directly or indirectly out of or attributable or traceable to any of the following:

1. Any consequential losses causing damage to any property arising directly or indirectly from:
 - 1.1- Any radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component.
 - 1.2- Contamination by radioactivity from any nuclear waste from combustion of nuclear fuel.
 - 1.3- Any sickness or disease related to and arising out of existence, production, handling, manufacture, sale, distribution, deposit or use of asbestos or product thereof, e.g. Asbestosis.
2. Any loss or damage arising from insured person committing any breach of law with criminal intent.
3. Insured travelling in India unless as a fare paying passenger.
4. Any and all consequential losses.
5. Insured's participation in any naval, military or air forces operations whether in the form of

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- military exercises, war games or actual engagement with domestic or foreign enemies.
6. For any loss arising out of War, civil war, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power, terrorism.
 7. Self-inflicted injury, willful or deliberate exposure to danger, suicide or attempt threat.

8. Insured being under the influence of alcohol, drugs or intoxicating substances during and insured event.
9. Participation of the Insured in any sports events as a professional or for gain or rewards thereof.
10. Driving any vehicle without valid driving license and all precautionary measures following traffic rules and regulations.
11. Any pathological fractures.
12. Pregnancy except ectopic pregnancy resulting in childbirth, or complication arising out of any of the foregoing and expenses related to treatment of infertility or birth control measures unless the medical assistance provided involves unforeseen emergency measures to save the Insured's or the child's life in event of acute complications, provided that the Insured has not completed the age of 38 years and 30th week of pregnancy.
13. Routine pre-natal care, childbirth, care of newborns, post-natal care, birth control, artificial insemination, infertility, impotency or sexual dysfunction, sterilization or reversal thereof.
14. Any Pre-existing conditions and complications arising out of the same.
15. Any claim lodged being fraudulent in any respect or false declaration made or use of support documents or devices by You or anyone acting on Your behalf to obtain benefit out of the policy by wrongful means or willful act.
16. Travel against medical advice, receiving or waiting to receive any medical treatment, ~~received any terminal prognosis for medical condition~~

Sub limits:

Loss of Checked in Baggage:- In case of one bag is checked in and are lost or more than one bag is checked in and are lost, then the maximum limit of Indemnity per bag would be restricted to 100% or 50% respectively and per item will be limited to 10% of the applicable sum Insured or actuals whichever is less

Bounced Hotel/Common Carrier Booking:- The Company will reimburse to the extent of 80% of expenses incurred towards reasonable cost of transportation expenses to the alternative hotel in same location and difference in cost of lodging in similar Hotel.

Discounts:

Group Discount

No. of Persons Insured under the Group Policy	Group Discounts %
Up to 1000 persons	0%
1001 Persons - 2000 Persons	2.50%
2001 Persons - 5000 Persons	5%
5001 Persons – 10000 Persons	7.50%
10001 Persons - 25000 Persons	10%
25001 Persons - 50000 Persons	12.5%
Above 50001 Persons	15%

Renewal:

1. Annual Multi-Trip Policy shall be renewable upto to age of 80 years
2. Grace Period of 30 days for renewing the Policy is provided under this Policy
3. Sum insured can be enhanced only at the time of renewal subject to no claim have been lodged/ paid under the policy and approval by the Company
4. Change in Plan can be done at Renewal subject to acceptance by the Company.

Any revision or modification in a Policy which is approved by the Authority shall be notified to each policy holder at least three months prior to the date when such revision or modification comes into effect.

Extension applicable to Single Trip & Onward Trip:

Policy Extension- The policy period can be from minimum 1 day to maximum 180 days which can be extended further for 180 days on payment of additional premium.

Travel policy Extension beyond seven days can be granted on all travel plans up to the age of 80 years subject to following,

- i. No claims being incurred under the original policy.
- ii. Declaration from the insured that the person is in good health and there are no claims reported/occurred during original policy period.
- iii. Request should be received by the company at least 7 days prior to expiry of the earlier policy period in order to ensure that there is no break in insurance between the original policy period and requested extension period.
- iv. Grace period of 7 days with exclusions for the break period will be acceptable and allowed. However all such proposals need to be referred to and approved by the Company.

Cancellation/Termination:

This Policy will terminate at the expiration of the period for which premium has been paid or on the Expiration Date shown in Policy Schedule.

Cancellation by Insurer:

The Policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any material fact in the Proposal Form, statement, declaration, claim form and connected documents or any material information having been withheld or a Claim being fraudulent or any fraudulent means or devices being used by Insured to gain benefit under the Policy. In such event of policy cancellation no premium shall be refunded to the Insured.

The Company may, in the event of non-cooperation of the Insured/Insured person/s cancel this Policy, by giving 15 days notice in writing by Registered Post Acknowledgment due to the Insured/ Insured Person/s at his / their last known address in which case the Company shall be liable to repay a rateable proportion of the premium for the unexpired term from the date of the cancellation subject to there being no claim made/ reported under the Policy.

Cancellation by Insured/Insured Person:

No cancellation of the policy by the insured will be allowed in case the insured has reported and received payment for a claim under any of the covers of this Policy prior to the date of notice of cancellation.

- i. This Policy may be cancelled by the Insured within 10 days from the policy period end date, by intimation in writing to the Company as long as the Insured is able to establish to the Company's satisfaction that the Insured Journey has not commenced. Upon cancellation, the Company shall be entitled to deduct 10% of the premium amount received as administration charges and refund the balance amount.
- ii. There will be no refund of premium if the cancellation is made after 10 days from the policy period end date and/or the Insured Journey has commenced and/or any claim reported and received payment for a claim under any of the covers of this Policy.
- iii. In the event You cancel the Annual Multi Trip Policy, the premium shall be computed in accordance with Our short rate table as mentioned below for the period the Policy has been in force, provided no claim has occurred and/or no Trip has happened up to the date of cancellation. In the event a claim has occurred and/or Trip has happened in such case there shall be no return of premium.

Short Rate Table

Risk Period	% of Premium Refund
Above 50% of Policy Period	0
Above 40% to 50% of Policy Period	20
Above 30% to 40% of Policy Period	25
Above 20% to 30% of Policy Period	40
Up to 20% of Policy Period	50

Withdrawal of the Product:

In case the product is found to be financially unviable or is deficient in any manner, the Company shall, in terms of Insurance Regulatory & Development Authority (Health Insurance) Regulations 2016, have the option to withdraw this product from the market subject to prior approval of such withdrawal from the Regulatory Authority. Any withdrawal of the product would be duly intimated to existing customers, who on expiry of the existing Policy, will have an option to obtain renewal under similar product/s available with Us. The Company shall allow the continuity benefits in all such cases.

Pre-Policy Health Check up (PPC):

Insured age is above 70 years of age and / or with adverse medical history as revealed in the Proposal form need to undergo below listed medicals if in case opted 'Section I- Emergency Inpatient Hospitalization' cover as mentioned in the Policy.

1. ECG
2. Blood Sugar: Fasting and Post Prandial
3. Hemogram
4. Urine Routine
5. FMR(Full Medical Report)

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6. Blood Pressure reading (As certified by physician)
7. HbA1C
8. Total Cholesterol



This grid may be subject to change based on the company policy in future or basis the adverse medical history as declared in the Proposal form. The result of these tests will be valid for a period of 3 months from the date of tests. The Pre-Policy Check Up will be carried out at our Network Providers as available on our website.

The Company reserves its right to require any individual to undergo such medical tests or any further additional tests, as per the board approved underwriting policy of the Company to determine the acceptance of a Proposal.

If the proposal is accepted we shall refund 50% of the health check-up cost (on our pre agreed rates with the network provider).

Claim process and management

A. Notification of Claims

Upon the happening of any event giving rise or likely to give rise to a claim under this Policy, the Insured/Insured Person(s) shall give immediate notice to the Us/ Claims Administrator by calling toll-free number or in writing to the address as shown in the Schedule with Particulars below:

- i. Policy Number/ Certificate No.
- ii. Name of the Insured / Insured Person availing treatment
- iii. Type of claim
- iv. Details of the disease/illness/injury
- v. Name and address of the Hospital
- vi. Any other relevant information

Intimation must be given atleast 48 hours prior to planned hospitalization and within 24 hours of hospitalization in case of emergency hospitalization for a claim to be notified under Section 1 and/or Section 2 of the Policy.

The Company's liability under this Policy will be subject to the following provisions, upon the happening of any event giving rise to or likely to give rise to a Claim under any Section of this Policy,

- i) An immediate notification is made to the Insurance Company/ Claims administrator in respect of any Claim under Medical expenses and emergency medical evacuation, by the Insured or, if deceased, his legal or other representative or immediate family member, and provided with the name of the treating Physician, the name and telephone number of the hospital at which treatment is being obtained, and the fact or matter giving rise to the need for medical treatment, all the original bills and receipts and any other documentation or information that might be required or requested by the Insurance Company / Claims Administrator for assessment of the claim.
- ii) The Insured need to fill in the claim form and forward the same to the Company/ Claims administrator along with all the bills, receipts and other supporting documentation or additional information requested by the Company/Claims administrator for assessment of the claim.
- iii) The Insured shall not admit any liability or make any offer or promise of payment without

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the prior intimation and written consent of the Company.

B. Assessment of Claim & Payment

- a. **For opting Cashless Facility:** (applicable where the Insured Person/s has opted for cashless facility in a Network Hospital & for the claim under Section 1 and/or 2 of the Policy) - The Insured Person must call the helpline and furnish Certificate Number and Policy Number and take an eligibility number to confirm communication. The same has to be quoted in the claim form. The call must be made 48 hours before admission to Hospital and details of hospitalization like diagnosis, name of Hospital, duration of stay in Hospital should be given. In case of emergency hospitalization the call should be made within 24 hours of admission.
 - i. The company may provide Cashless facility for Hospitalisation expenses either directly or through the TPA if treatment is undergone at a Network Hospital by issuing Pre- Authorisation letter to the health care service provider.
 - ii. For the purpose of considering Pre-Authorisation and Cashless facility, the Insured Person/s shall submit to the TPA complete information of the disease, requiring treatment along with necessary certification from the Hospital/Medical Practitioner.
 - iii. If the claim for treatment appears admissible, the Company either directly or through the TPA shall issue Pre-Authorisation to the Hospital concerned for cashless facility whereby hospitalization expenses shall be paid directly by the Company/ through the TPA as confirmed in the Pre-Authorisation.
 - iv. Cashless facility will not be available in Non-network Hospital and may be declined even for treatment at a network hospital where the information available does not conclusively establish that a claim in respect of the treatment would be admissible. In such cases, the Insured Person/s shall bear such expenses and claim reimbursement immediately after discharge from the Hospital.
 - v. The list of Network hospitals where we are having cash less arrangement would be made available to the Policy holder and subsequent amendments to the same would also be duly communicated by us/ the TPA service provider.
- b. **Reimbursement Claims** - Notice of claim with particulars relating to Policy numbers, name of the Insured Person in respect of whom claim is made, nature of illness/injury and name and address of the attending Medical Practitioner/ Hospital/ Nursing Home should be given to Us immediately on hospitalization /injury/ death, failing which admission of claim would be based on the merits of the case as per the board approved underwriting policy of the Company. The Insured Person/s shall after intimation as aforesaid, further submit at his/her own expense to the TPA within 15 days of discharge from the hospital the following:
 - i. Claim form duly completed in all respects
 - ii. Original Bills, Receipt and Discharge certificate / card from the Hospital.
 - iii. Original Cash Memos from Hospital(s)/Chemist(s), supported by proper prescriptions.
 - iv. Original Receipt and Pathological test reports from a Pathologist supported by the note from the attending Medical Practitioner / Surgeon demanding such Pathological tests.
 - v. Surgeon's certificate stating nature of operation performed and Surgeons' original bill and receipt.
 - vi. Attending Doctor's / Consultant's / Specialist's / - Anesthetist's original bill and receipt, and certificate regarding diagnosis.
 - vii. Medical Case History / Summary.

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- viii. Original bills & receipts for claiming Ambulance Charges
- ix. Any additional documents or information, as may be deemed necessary by the Company or TPA.

The Insured Person/s shall at any time as may be required authorize and permit the TPA and/or Company to obtain any further information or records from the Hospital, Medical Practitioner, Lab or other agency, in connection with the treatment relating to the claim. The Company may call for additional documents/information and/or carry out verification on a case to case basis to ascertain the facts/collect additional information/documents of the case to determine the extent of loss. Verification carried out will be done by professional Investigators or a member of the Service Provider and costs for such investigations shall be borne by the Company.

The Company may accept claims where documents have been provided after a delayed interval in case such delay is proved to be for reasons beyond the control of the Insured/ Insured Person/s. The Insured shall tender to the Company all reasonable information, assistance and proofs in connection with any claim hereunder.

Applicable Taxes prevailing at the time of claim will be considered as part of the Claim Amount and the aggregate liability of the Company, including any payment towards such Taxes shall in no case exceed the Sum Insured opted.

No person other than the Insured /Insured Person(s) and/ or nominees named in the proposal can claim or sue us under this Policy.

c. Payment of Claim

- i. We will make payment to You or Your Nominee. If there is no Nominee and You are incapacitated or deceased, We will pay Your heir, executor or validly appointed legal representative and any payment We make in this way will be a complete and final discharge of our liability to make payment.
- ii. No person other than the Insured /Insured Person(s) and/ or nominees named in the proposal or legal heir can claim or sue us under this Policy
- iii. On receipt of all the documents as mentioned under Annexure 'A'- Claim Documents Checklist as provided hereunder and on being satisfied with regards to admissibility of the claims as per Policy terms and conditions, We shall settle the claim within 30 days from the date of receipt of last necessary documents. In the case of delay in the payment of a claim, We shall be liable to pay interest from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate. 'bank rate' means 'Bank rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due'
- iv. However, where the circumstances of a claim warrants an investigation in the 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 documents. In such cases, We shall settle the claim within 45 days from the date of receipt of last necessary documents. In case of delay beyond stipulated 45 days, We shall be liable to pay interest at a rate 2% above bank rate from the date of receipt of last necessary document to the

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date of payment of claim

- v. In the event that the Company decides to reject a claim made under this Policy, the Company shall do so within a period of 30 days of the investigation report or the additional investigation report, as the case may be, in accordance with the provisions of 'Protection of Policyholders' Interest Regulations, 2017'.
- vi. The Policy - excludes the Standard List of excluded items - attached in the Policy document.
- vii. All the claim payments with respect to the claims made by the Insured will be made in Indian Rupees only.
- viii. The following will apply specifically in respect of a Claim under Sections 1 and/or 2:
 - a) The Company is not liable to make payment in respect of those charges approved by the Insurance Company/ Claims Administrator prior to being incurred.
 - b) The Insured or legal heir in case of death of the Insured, shall furnish all certificates, Post mortem report, information, proofs or other evidence in support of the Claim.
 - c) The Insured shall present himself for medical examination by a Medical Advisor as considered necessary by the Insurance Company / Claims Administrator at his expense and the Insured agrees that the Insurance Company / Claims Administrator may approach anyone who may have treated the Insured for information and/or documentation in respect of the Claim.
 - d) The Insured or legal heir in case of death of the Insured, shall furnish the additional documents if required to assess the claim to the Company.

Benefit Schedule

Benefit Plans with Sum Insured and Deductibles:

Sections	Scope of Cover	Scope of Cover	Sum Insured-INR	Deductible-INR/hours per Claim
Section 1	Emergency Inpatient Hospitalization	Covers medical expenses incurred towards hospitalization on account of illness or accidental injury occurring during the trip.	Max upto 2,000,000 in multiples of 10,000	Nil or 1% of SI maximum upto INR 1000
Section 2	Emergency Accidental Hospitalization	Covers medical expenses incurred towards hospitalization on account of accidental injury occurring during the trip.	Max upto 2,000,000 in multiples of 10,000	Nil or 1% of SI maximum upto INR 1000 as a Deductible
Section 3	Outpatient Treatment for Injury	Covers medical expenses incurred towards outpatient treatment on account of	Max upto 20,000 in multiples of 1,000	Nil or 2.5% of SI maximum upto INR 500



		accidental injury occurring during the trip.		
Section 4	Ambulance Cover	Covers expenses incurred on an ambulance to transfer insured to the nearest hospital following accidental injury / illness.	Max upto 5,000 in multiples of 500	Nil
Section 5	Emergency Medical Evacuation	Covers emergency medical evacuation to another Hospital for advance treatment within India, arising out of accidental injury/illness occurring during the trip.	Max upto 500,000 in multiples of 1,000	Nil
Section 6	Transportation of Mortal Remains	Covers cost of transportation of mortal remains or equivalent amount for burial or cremation of the Insured at the location where death has occurred, in case of death on account of accidental injury/Illness during the trip.	Max upto 500,000 in multiples of 1,000	Nil
Section 7	Accidental Death* Mandatory Cover	Covers death due to an accident during the trip. Any claim paid under PTD/PPD would be deducted from payment of a claim under this section	Max upto 2,000,000 in multiples of 10,000	Nil
Section 8	Permanent Total Disablement	Covers Permanent Total Disability caused due to an accident during the trip.	Max upto 2,000,000 in multiples of 10,000	Nil
Section 9	Permanent Partial Disablement	Covers Permanent Partial Disability caused due to an accident during the trip.	Max upto 2,000,000 in multiples of 10,000	Nil
Section 10	Accidental Death (Common Carrier)	Covers accidental death while travelling in a common carrier like bus, tram, rail or aircraft. The cover is provided in addition to the Accidental Death Cover.	Max upto 2,000,000 in multiples of 10,000 (Equivalent or Lower than Death or PTD SI)	Nil

Section 11	Permanent Total Disablement (Common Carrier)	Covers Permanent Total Disability due to an accident while travelling in a common carrier like bus, tram, rail or aircraft. The cover is provided in addition to the Permanent total Disability Cover.	Max upto 2,000,000 in multiples of 10,000 (Equivalent or Lower than Death or PTD SI)	Nil
Section 12	Trip Delay	Reimbursement of expenses incurred towards meals and accommodation, if the Insured journey in an aircraft is delayed than the original scheduled time beyond hours as specified in your Policy Schedule.	Max upto 20,000 in multiples of 1,000. Reimbursed on actuals or upto the max amount whichever is lower	Minimum 3 hours
Section 13	Trip Cancellation	Compensate towards expenses for travel tickets, hotel booking and planned events including excursions, if the Insured's trip needs to be cancelled due to Death/Critical illness/Hospitalization due to an illness or injury of the Insured person/immediate family member, serious damage to Insured residence due to natural calamities or prevention of travel by government.	Max upto 100,000 in multiples of 500. Reimbursed on actuals or upto the max amount whichever is lower.	Nil or 1% of SI with INR 100 as minimum Deductible

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Section 14	Trip Cancellation Extension	Reimburse cost of common carrier ticket, if Insured trip needs to be cancelled prior to commencement of the Journey within specified no. of days prior to departure date and time. Or Reimburse difference in ticket cost booked by the Insured from other Carrier, If scheduled Common Carrier on which Insured was booked to travel is cancelled by the carrier authorities and was informed to Insured atleast 1 week before the scheduled date of departure	Max upto 100,000 in multiples of 500. Reimbursed on actuals or upto the max amount whichever is lower.	Nil or 1% of SI Minimum Rs. 100 as a Deductible
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		with adjusted flight time difference of more than 2 hours.		
Section 15	Loss of Checked in Baggage	Covers expenses incurred towards the total loss of checked in baggage in case of Your travel by Air mode.	Max upto 50,000 in multiples of 1,000. Per Baggage 50% and per Item maximum 10%	Nil
Section 16	Delay of Checked in Baggage	Covers expenses incurred towards purchasing essential personal items of medication, toiletries or clothing if the delivery of checked-in baggage is delayed by a Common Carrier beyond specified duration.	2,000 after a delay of 8 hours on reimbursement basis followed by 400/per 3hrs max up to 1200. In case of more than once incident during the trip, the Company's overall liability shall be limited to loss suffered for two such incidents of delay of Checked-In Baggage.	8 hours
Section 17	Home Content (Fire & Allied Perils)	We will compensate the Insured in case of any damage to the content in Insured premises caused due to fire and allied perils during the trip.	Max upto 200,000 in multiples of 10,000	Nil or 1% of SI maximum upto Rs. 1000 as a Deductible
Section 18	Home Burglary	We will compensate the Insured in case of any burglary/theft at his residence during the trip.	Max upto 200,000 in multiples of 10,000	1 % of Claim amount with minimum of INR 250 as a Deductible
Section 19	Adventure Sports: Accident Cover	Covers death/Permanent Total Disability caused due to an accidental bodily injury on account of participation in any of adventure sports during the trip.	Max upto 200,000 in multiples of 10,000	Nil or 1% of SI maximum upto Rs. 1000 as a Deductible
Section 20	Adventure Sports: Hospitalization Cover	Covers medical expenses incurred by the Insured towards accidental bodily injury on account of Insured's participation in any of the adventure sports.	Max upto 200,000 in multiples of 10,000	Nil or 1% of SI maximum upto Rs. 1000 as a Deductible

Section 21	Trip Curtailment	Compensate towards the expenses incurred for travel tickets or hotel booking, if the Insured's Trip is cut short or he needs to return to his city of residence due to Death/Critical illness/Hospitalization of the Insured/immediate family member, serious damage to Insured residence due to natural calamities or Inclement weather condition.	Max upto 100,000 in multiples of 500. Reimbursed on actuals or upto the max amount whichever is lower.	Nil or 2% of SI Maximum upto Rs. 1000 as a Deductible
Section 22	Emergency Family Visit	Covers cost of visit by one immediate family member, in the event of hospitalization of the Insured on account of accidental injury/illness.	Max upto 20,000 in multiples of 1,000	Nil
Section 23	Emergency Family Accommodation	Covers cost of accommodation of one immediate family member, in the event of hospitalization of the Insured on account of accidental injury/illness.	Max upto 20,000 in multiples of 1,000	Nil
Section 24	Personal Liability	Covers expenses in respect of any legal liability arising out of accidental bodily injury or accidental property damage by the Insured.	Max upto 200,000 in multiples of 50,000. Reimbursed on actuals or upto the max amount whichever is lower.	INR 1000
Section 25	Hospital Daily Cash – Accident	Pays daily cash allowance, if the Insured is hospitalized due to accidental injury.	500/1000/1500/2000 per day/7 days	24 hours
Section 26	Missed Connection	Pays the amount towards missed connection, if the flight/common carrier booked by the Insured to travel from the city of residence is delayed beyond specific duration as mentioned in your Policy than the original scheduled time, for arrival at the destination of the connecting flight, resulting in	Max upto 20,000 in multiples of 1,000 Reimbursed on actuals or upto the max amount whichever is lower	Nil or 5% of SI with minimum INR 100 as a Deductible

		missing of the connecting flight/ common carrier.		
Section 27	Missed Departure	Pays the amount towards the cost of common carrier actual ticket, if Insured cannot reach the original departure point due to public transport services fail or vehicle in which Insured is travelling meets with an accident which results in outpatient/inpatient hospitalization.	Max upto 20,000 in multiples of 1,000 Reimbursed on actuals or upto the max amount whichever is lower	Nil or 5% of SI with minimum INR 100 as a Deductible
Section 28	Loss of Tickets	Pays reasonable cost of economy class actual ticket (common carrier), wherein the ticket is lost by Insured and he is unable to continue his planned travel.	Max upto 20,000 in multiples of 1,000 Reimbursed on actuals or upto the max amount whichever is lower	Nil or 5% of SI minimum INR 100 as a Deductible
Section 29	Emergency Catastrophe Evacuation	Pays the amount towards the immediate evacuation of the Insured, to avoid any kind of personal injury or illness to him/her.	Max upto 50,000 in multiples of 1,000	Nil
Section 30	Bounced Hotel/Common Carrier Booking	Reimburse expenses for the loss incurred on account of bouncing due to overbooking of hotel reservation or common carrier tickets.	Max upto 25,000 in multiples of 1,000	Nil or 5% of SI minimum INR 100 as a Deductible
Section 31	Substitute Staff to Complete Your Business	Pays for reasonable travel expenses for a substitute person to complete the original business purposes of the journey on the insured's behalf, if the accidental injury/Illness prevents Insured from completing the business purposes of the journey or he is hospitalized or required to return to place of origin or home town on advice of the registered medical practitioner.	Max upto 25,000 in multiples of 5,000	Nil

Section 32	Hijack Allowance	Compensation payable on hijack of common carrier in which Insured is travelling.	Max upto 20,000 in multiples of 5,000	Nil
Section 33	Loss of Credit Card/Debit Card	Covers expenses incurred in obtaining duplicate or fresh Credit card/Debit Card, if Insured loses the Credit Card/Debit Card during the trip.	Max upto 5,000 in multiples of 200	Nil
Section 34	Emergency Assistance Services	1. Medical Assistance i. Medical Consultation, Evaluation and Referral ii. Medical Monitoring and Case Management iii. Emergency Medical Evacuation iv. Assistance in Repatriation of Mortal Remains v. Telephone Medical Assistance: 2. Trip Assistance i. Delayed / Lost / Damaged Baggage Assistance ii. Lost / Expired Travel Documents / Tickets iii. Trip Rescheduling iv. Compassionate Visit v. Assistance with Emergency Family Member Accommodation vi. Assistance of Return of Travelling Companions and Children vii. Emergency Travel Services viii. Hotel Accommodation Referral & Arrangement: ix. Assistance in Emergency Catastrophe Evacuation 3. Personal Assistance i. Emergency Cash Advance ii. Lost Credit Card/Debit Card Assistance iii. Legal Referral & Assistance		Nil

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		iv. Car Rental and Sight-seeing Assistance v. Pet Boarding Assistance		
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Premium Rates

Premium rates as Annexed

Annexure A – Claim Documents Checklist

Following is the indicative document list for reimbursement claims:

Emergency Inpatient Hospitalization, Emergency Accidental Hospitalization, Ambulance Cover, Outpatient Treatment for Injury, Emergency Medical Evacuation, Hospital Daily Cash - Accident Only & Adventure Sports: Hospitalization Cover:

- & Flight itinerary and Boarding pass and/or ticket details as applicable
- & Duly filled and signed Claim Form.
- & Policy Copy
- & Photocopy of ID card / Photocopy of current year policy.
- & Original Detailed Discharge Summary / Day care summary from the hospital. Original consolidated hospital bill with bill no and break up of each Item, duly signed by the insured.
- & Original payment Receipt of the hospital bill with receipt number
- & First Consultation letter and subsequent Prescriptions.
- & Original bills, original payment receipts and Reports for investigation supported by the note from Attending Medical Practitioner / Surgeon demanding such test.
- & Copy of Indoor cases papers and other medical records as applicable for claim
- & Surgeons certificate stating nature of Operation performed and Surgeons Bills and Receipts
- & Attending Doctors/ Consultants/ Specialist's/ Anesthetist Bill and receipt and certificate regarding same
- & Original medicine bills and receipts with corresponding Prescriptions.
- & Original invoice/bills for Implants (viz. Stent /PHS Mesh/ IOL etc.) with original payment receipts.
- & Hospital Registration Number and PAN details from the Hospital
- & Doctors registration Number and Qualification from the doctor
- & Photo ID and Address proof of policy holder and patient
- & Original cancelled cheque with payee name printed on the cheque. If the name of the payee is not printed on the cheque please provide copy of first page of bank passbook
- & C-KYC form for claims above 1 lac

Accident Death, Accident Death (Common Carrier) & Adventure Sports: Accident Cover:

- & Duly Completed Personal Accident Insurance Policy Claim Form signed by Nominee.
- & Boarding pass and/or ticket towards the journey
- & Copy of address proof (Ration card or electricity bill copy).
- & Attested copy of Death Certificate.
- & Burial Certificate (wherever applicable).
- & Attested copy of Statement of Witness, if any lodged with police authorities.
- & Attested of FIR / Panchanama / Inquest Panchanama.
- & Attested copy of Post Mortem Report (only if conducted).

- & Attested copy of Viscera report if any (Only if Post Mortem is conducted).
- & Claim form with NEFT details
- & Original cancelled cheque with payee name printed on the cheque. If the name of the payee is not printed on the cheque please provide copy of first page of bank passbook
- & Original Policy copy

Permanent Total Disablement, Permanent Partial Disablement & Permanent Total Disablement (Common Carrier):

- & Duly Completed Personal Accident Insurance Policy Claim Form signed by insured.
- & Boarding pass and/or ticket towards the journey
- & Attested copy of disability certificate from Civil Surgeon of Government Hospital stating percentage of disability.
- & Attested copy of FIR.
- & All X-Ray / Investigation reports and films supporting to disablement.
- & Claim form with NEFT details
- & Original cancelled cheque with payee name printed on the cheque. If the name of the payee is not printed on the cheque please provide copy of first page of bank passbook
- & Original Policy copy.

Transportation of Mortal Remains:

- & Duly filled and signed Claim Form.
- & Original Policy copy.
- & Flight itinerary and Boarding pass and/or ticket details as applicable
- & Copy of death certificate with date, time, place and cause of death.
- & Post mortem report, if conducted.
- & Documentary evidence towards expenses incurred on disposal of mortal remains.
- & In case of transportation of mortal remains, receipt towards expenses incurred in preparation and packing of mortal remains of the deceased along with the transportation of the same to the city of residence.

Ambulance Cover

- & Duly filled and signed Claim Form.
- & Original Policy copy.
- & Flight itinerary and Boarding pass and/or ticket details as applicable
- & Original Bill with Original Payment Receipt.
- & Treating Doctor's consultation prescription indicating Emergency Hospitalization.

Trip Delay

- & Duly filled and signed Claim Form.
- & Policy copy

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& Cancelled cheque



- & Invoices related to List of essential purchases made, such as meals, refreshments or other related expenses directly resulting from the flight delay.
- & Confirmation letter from the airlines clearly stating the duration and the reason for flight delay (Mandatory)
- & Copies of Boarding Pass, Ticket.
- & Please Note: Claim payment can be made only against the receipts for expenses directly resulting from flight delay.

Trip Cancellation, Trip Cancellation Extension and Trip Curtailment:

- & Duly filled and signed Claim Form.
- & Policy copy
- & Letter from insured mentioning the reason of trip cancellation with related proof
- & Confirmation of cancellation of the Trip from the Common Carrier detailing the circumstances of cancellation
- & Copies of Travel ticket and boarding pass of flight or travel ticket in case of rail or any other common carrier boarded by Insured.
- & Medical reports and doctor's certificate in case of medical reasons for Trip cancellation/Curtailment
- & Copy of death certificate in case of death of the immediate family member.
- & Proof of travel and accommodation expenses made in advance for the trip
- & Copies of receipts of travel and accommodation and proof of refund received for travel and accommodation expenses.
- & Certificate from service providers about deductions of travel and accommodation charges.
- & Cancelled cheque

Loss of Checked In Baggage Loss:

- & Duly filled and signed claim form
- & Policy copy
- & Copies of Travel ticket and/or boarding pass
- & Claim form submitted to airlines, mentioning the details items lost/damaged, with their respective cost. (Mandatory)
- & Flight itinerary
- & Cancelled Cheque
- & Original Property Irregularity Report (PIR) from airlines
- & Baggage Loss/Damage Report OR letter from airlines OR any other document from airlines confirming the loss of items.
- & Details of Compensation received from Airlines If Any.
- & Original Bills/Receipts for the items lost.

Delay of Checked In Baggage:

- & Duly filled and signed claim form
- & Copies of travel tickets/boarding pass/baggage tags
- & Correspondence copies with common carrier about the delay of Baggage certificate with delay and

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actual date and time of delivery of baggage.



- & Original Property Irregularity Report (PIR) from airlines
- & Details of Compensation received from Airlines If Any.
- & Flight itinerary
- & Policy copy
- & Cancelled Cheque
- & Original Bills/Receipts of medication, toiletries or clothing purchased

Home Content – Fire & Allied Perils:

- & Duly filled and signed claim form
- & Policy copy
- & Copies of Travel ticket and/or boarding pass
- & First Information Report
- & Panchnama
- & Investigation Report by the Police
- & Fire Brigade Report
- & Estimate and final bills of repairers
- & Invoices of owned articles, if required by the Company
- & Legal opinion wherever required
- & Any other document as may be appropriately applicable for the claims

Home Burglary (Contents):

- & Duly filled and signed claim form
- & Policy copy
- & Copies of Travel ticket and/ or boarding pass
- & Proof of complaint to local police
- & Inventory/list of items stolen/ damaged and their cost
- & Details of householders Policy
- & Report of the Surveyor
- & Bills towards repair of damages (if applicable)
- & Any other document as may be appropriately applicable for the claims

Emergency Family Visit & Accommodation:

- & Duly filled and signed claim form
- & Insured person/s Original Travel ticket and boarding pass
- & Certificate from the Medical Practitioner recommending the presence in the form of special assistance to be rendered by a member of the Family or near relative during the entire period of Hospitalization.
- & Policy copy
- & Cancelled cheque
- & Discharge summary
- & Detail of expenses invoice
- & Ticket used for the travel to and fro by the member of the Family or near relative.

Personal liability:

- & Duly filled and signed claim form
- & Policy copy
- & Original Travel ticket and boarding pass
- & Self-Declaration and statement of event in writing
- & Statements of the witnesses
- & Legal notice/summons or any other documents relevant to incident
- & Any other document as may be appropriately applicable for the claims

Missed Connection:

- & Duly filled and signed claim form
- & Policy copy
- & Cancelled cheque
- & Copies of Travel ticket and boarding pass of flight Scheduled from the first port of arrival
- & Copies of Travel ticket and boarding pass of New flight Scheduled from the first port of arrival
- & Confirmation from the Common Carrier of the delayed flight
- & Reasons for delay
- & Unused ticket for the ongoing flight (Missed Flight) with an endorsement of the Common Carrier of cancellation of the same
- & Original used ticket obtained afresh towards the alternative flight
- & Certificate from the Common Carrier of the Missed Flight that the fare for the part of the Trip covered by the Missed Flight is forfeited in full or in part together with the amount of forfeiture.

Missed Departure:

- & Duly filled and signed claim form.
- & Policy copy
- & Cancelled cheque
- & Original Travel ticket and boarding pass
- & Missed departure certified by the concerned Schedule airlines/ Scheduled Railways / Scheduled Road Transport
- & Proof of complaint to local police incase vehicle in which You are travelling is involved in an accident
- & Proof of Public transport services failure

Loss of tickets:

- & Duly filled and signed claim form
- & Policy copy
- & Cancelled cheque
- & Copy of new Ticket
- & Copy of previous Ticket (if available)
- & Proof of complaint to local police
- & Proof of complaint to common carrier and their response on the same.

Emergency Catastrophe Evacuation:

- & Duly filled and signed claim form
- & Policy copy
- & Cancelled cheque
- & Copies of Travel ticket and /or boarding pass
- & Documentary evidence towards the catastrophe occurred.
- & Any other document as may be appropriately applicable for the claims

Bounced Hotel/Common Carrier Booking:

- & Duly filled and signed claim form
- & Policy copy
- & Cancelled cheque
- & Proof against hotel/common carrier booking Details
- & Letter from Hotel/common carrier mentioning reason for non-accommodation and compensation received if any
- & Bills/invoices and receipt raised against the accommodation or transportation

Substitute Staff to Complete Your Business:

- & Duly filled and signed claim form
- & Policy copy
- & Cancelled cheque
- & Original Travel ticket and boarding pass
- & Copies of Medical records which prevents Insured from completing the business purposes of the journey.
- & Any other document as may be appropriately applicable for the claims

Hijack Allowance:

- & Duly filled and signed claim form
- & Policy copy
- & Cancelled cheque
- & Copies of Travel ticket and boarding pass
- & Correspondence copies with common carrier about the event
- & Self-Declaration and statement of event in writing
- & Statements of the witnesses
- & Any other document as may be appropriately applicable for the claims

Loss of Credit Card/Debit Card:

- & Duly filled and signed claim form
- & Policy copy
- & Cancelled cheque
- & Copy of new debit card/credit card
- & Copy of previous debit card/credit card (if available)
- & Copy of return tickets
- & Proof of complaint to local police
- & Any other document as may be appropriately applicable for the claims

Standard List of Excluded Items:

S.No	NAME OF THE NON MEDICAL ITEM	PAYABLE/NOT PAYABLE
	TOILETRIES/ COSMETICS/ PERSONAL COMFORT OR CONVENIENCE ITEMS	
1	ANNE FRENCH CHARGES	Not Payable
2	BABY CHARGES (UNLESS SPECIFIED/INDICATED)	Not Payable
3	BABY FOOD	Not Payable
4	BABY UTILITES CHARGES	Not Payable
5	BABY SET	Not Payable
6	BABY BOTTLES	Not Payable
7	BOTTLE	Not Payable
8	BRUSH	Not Payable
9	COSY TOWEL	Not Payable
10	HAND WASH	Not Payable
11	MOISTURISER PASTE BRUSH	Not Payable
12	POWDER	Not Payable
13	RAZOR	Payable
14	TOWEL	Not Payable
15	SHOE COVER	Not Payable
16	BEAUTY SERVICES	Not Payable
17	BELTS/ BRACES	Essential and should be paid at least specifically for cases who have undergone surgery of thoracic or lumbar spine.
18	BUDS	Not Payable
19	BARBER CHARGES	Not Payable
20	CAPS	Not Payable
21	COLD PACK/HOT PACK	Not Payable
22	CARRY BAGS	Not Payable
23	CRADLE CHARGES	Not Payable
24	COMB	Not Payable
25	DISPOSABLES RAZORS CHARGES (for site preparations)	Payable
26	EAU-DE-COLOGNE / ROOM FRESHNERS	Not Payable
27	EYE PAD	Not Payable
28	EYE SHEILD	Not Payable
29	EMAIL / INTERNET CHARGES	Not Payable
30	FOOD CHARGES (OTHER THAN PATIENT's DIET PROVIDED BY HOSPITAL)	Not Payable
31	FOOT COVER	Not Payable

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32	GOWN	Not Payable
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33	LEGGINGS	Essential in bariatric and varicose vein surgery and may be considered for at least these conditions where surgery itself is payable.
34	LAUNDRY CHARGES	Not Payable
35	MINERAL WATER	Not Payable
36	OIL CHARGES	Not Payable
37	SANITARY PAD	Not Payable
38	SLIPPERS	Not Payable
39	TELEPHONE CHARGES	Not Payable
40	TISSUE PAPER	Not Payable
41	TOOTH PASTE	Not Payable
42	TOOTH BRUSH	Not Payable
43	GUEST SERVICES	Not Payable
44	BED PAN	Not Payable
45	BED UNDER PAD CHARGES	Not Payable
46	CAMERA COVER	Not Payable
47	CARE FREE	Not Payable
48	CLINIPLAST	Not Payable
49	CREPE BANDAGE	Not Payable
50	CURAPORE	Not Payable
51	DIAPER OF ANY TYPE	Not Payable
52	DVD, CD CHARGES	Not Payable (However if CD is specifically sought by Insurer/TPA then payable)
53	EYELET COLLAR	Not Payable
54	FACE MASK	Not Payable
55	FLEXI MASK	Not Payable
56	GAUSE SOFT	Not Payable
57	GAUZE	Not Payable
58	HAND HOLDER	Not Payable
59	HANSAPLAST/ ADHESIVE BANDAGES	Not Payable
60	LACTOGEN/ INFANT FOOD	Not Payable
61	SLINGS	Reasonable costs for one sling in case of upper arm fractures may be considered ITEMS SPECIFICALLY EXCLUDED IN THE POLICIES
ITEMS SPECIFICALLY EXCLUDED IN THE POLICIES		
62	WEIGHT CONTROL PROGRAMS/ SUPPLIES/ SERVICES	Exclusion in policy unless otherwise specified
63	COST OF SPECTACLES/ CONTACT LENSES/ HEARING AIDS ETC.,	Not Payable

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64	DENTAL TREATMENT EXPENSES THAT DO NOT REQUIRE HOSPITALISATION	Not Payable
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65	HORMONE REPLACEMENT THERAPY	Exclusion in policy unless otherwise specified
66	HOME VISIT CHARGES	Exclusion in policy unless otherwise specified
67	INFERTILITY/ SUBFERTILITY/ ASSISTED CONCEPTION PROCEDURE	Exclusion in policy unless otherwise specified
68	OBESITY (INCLUDING MORBID OBESITY) TREATMENT	Exclusion in policy unless otherwise specified
69	PSYCHIATRIC & PSYCHOSOMATIC DISORDERS	Exclusion in policy unless otherwise specified
70	CORRECTIVE SURGERY FOR REFRACTIVE ERROR	Exclusion in policy unless otherwise specified
71	TREATMENT OF SEXUALLY TRANSMITTED DISEASES	Exclusion in policy unless otherwise specified
72	DONOR SCREENING CHARGES	Exclusion in policy unless otherwise specified
73	ADMISSION/REGISTRATION CHARGES	Exclusion in policy unless otherwise specified
74	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE	Exclusion in policy unless otherwise specified
75	EXPENSES FOR INVESTIGATION/ TREATMENT IRRELEVANT TO THE DISEASE FOR WHICH ADMITTED OR DIAGNOSED	Not Payable - Exclusion in policy unless otherwise specified
76	ANY EXPENSES WHEN THE PATIENT IS DIAGNOSED WITH RETRO VIRUS + OR SUFFERING FROM /HIV/ AIDS ETC IS DETECTED/ DIRECTLY OR INDIRECTLY	Not payable as per HIV/AIDS exclusion
77	STEM CELL IMPLANTATION/ SURGERY	Not Payable except Bone Marrow Transplantation where covered by policy
	ITEMS WHICH FORM PART OF HOSPITAL SERVICES WHERE SEPARATE CONSUMABLES ARE NOT PAYABLE BUT THE SERVICE IS	
78	WARD AND THEATRE BOOKING CHARGES	Payable under OT Charges, not payable separately
79	ARTHROSCOPY & ENDOSCOPY INSTRUMENTS	Rental charged by the hospital payable. Purchase of Instruments not payable.
80	MICROSCOPE COVER	Payable under OT Charges, not separately
81	SURGICAL BLADES, HARMONIC SCALPEL, SHAVER	Payable under OT Charges, not separately
82	SURGICAL DRILL	Payable under OT Charges, not separately

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83	EYE KIT	Payable under OT Charges, not separately
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84	EYE DRAPE	Payable under OT Charges, not separately
85	X-RAY FILM	Payable under Radiology Charges, not as consumable
86	SPUTUM CUP	Payable under Investigation Charges, not as consumable
87	BOYLES APPARATUS CHARGES	Part of OT Charges, not separately
88	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES	Part of Cost of Blood, not payable
89	SAVLON Not	Payable-Part of Dressing Charges
90	BAND AIDS, BANDAGES, STERILE INJECTIONS, NEEDLES, SYRINGES	Not Payable - Part of Dressing charges
91	COTTON	Not Payable-Part of Dressing Charges
92	COTTON BANDAGE	Not Payable- Part of Dressing Charges
93	MICROPORE/ SURGICAL TAPE	Not Payable-Payable by the patient when prescribed, otherwise included as Dressing Charges
94	BLADE	Not Payable
95	APRON	Not Payable -Part of Hospital Services/ Disposable linen to be part of OT/ICU charges
96	TORNIQUET	Not Payable (service is charged by hospitals, consumables cannot be separately charged)
97	ORTHOBUNDLE, GYNAEC BUNDLE	Part of Dressing Charges
98	URINE CONTAINER	Not Payable
ELEMENTS OF ROOM CHARGE		
99	LUXURY TAX	Actual tax levied by government is payable. Part of room charge for sub limits
100	HVAC	Part of room charge not payable separately
101	HOUSE KEEPING CHARGES	Part of room charge not payable separately
102	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED	Part of room charge not payable separately
103	TELEVISION & AIR CONDITIONER CHARGES	Payable under room charges not if separately levied
104	SURCHARGES	Part of Room Charge, Not payable separately
105	ATTENDANT CHARGES	Not Payable - Part of Room Charges
106	IM IV INJECTION CHARGES	Part of nursing charges, not payable
107	CLEAN SHEET	Part of Laundry/Housekeeping not payable separately

108	EXTRA DIET OF PATIENT(OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)	Patient Diet provided by hospital is payable
109	BLANKET/WARMER BLANKET	Not Payable- part of room charges
ADMINISTRATIVE OR NON-MEDICAL CHARGES		
110	ADMISSION KIT	Not Payable
111	BIRTH CERTIFICATE	Not Payable
112	BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES	Not Payable
113	CERTIFICATE CHARGES	Not Payable
114	COURIER CHARGES	Not Payable
115	CONVENYANCE CHARGES	Not Payable
116	DIABETIC CHART CHARGES	Not Payable
117	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES	Not Payable
118	DISCHARGE PROCEDURE CHARGES	Not Payable
119	DAILY CHART CHARGES	Not Payable
120	ENTRANCE PASS / VISITORS PASS CHARGES	Not Payable
121	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE	To be claimed by patient under Post Hosp where admissible
122	FILE OPENING CHARGES	Not Payable
123	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)	Not Payable
124	MEDICAL CERTIFICATE	Not Payable
125	MAINTAINANCE CHARGES	Not Payable
126	MEDICAL RECORDS	Not Payable
127	PREPARATION CHARGES	Not Payable
128	PHOTOCOPIES CHARGES	Not Payable
129	PATIENT IDENTIFICATION BAND / NAME TAG	Not Payable
130	WASHING CHARGES	Not Payable
131	MEDICINE BOX	Not Payable
132	MORTUARY CHARGES	Payable upto 24 hrs, shifting charges not payable
133	MEDICO LEGAL CASE CHARGES (MLC CHARGES)	Not Payable
EXTERNAL DURABLE DEVICES		
134	WALKING AIDS CHARGES	Not Payable
135	BIPAP MACHINE	Not Payable
136	COMMODE	Not Payable
137	CPAP/ CAPD EQUIPMENTS	Device not payable
138	INFUSION PUMP - COST	Device not payable

139	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)	Not Payable
140	PULSE OXYMETER CHARGES	Device not payable
141	SPACER	Not Payable
142	SPIROMETER	Device not payable
143	SPO2 PROBE	Not Payable
144	NEBULIZER KIT	Not Payable
145	STEAM INHALER	Not Payable
146	ARMSLING	Not Payable
147	THERMOMETER	Not Payable (paid by patient)
148	CERVICAL COLLAR	Not Payable
149	SPLINT	Not Payable
150	DIABETIC FOOT WEAR	Not Payable
151	KNEE BRACES (LONG/ SHORT/ HINGED)	Not Payable
152	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER	Not Payable
153	LUMBO SACRAL BELT	Essential and should be paid at least specifically for cases who have undergone surgery of lumbar spine.
154	NIMBUS BED OR WATER OR AIR BED CHARGES	Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia/quadruplegia for any reason and at reasonable cost of approximately Rs 200/ day
155	AMBULANCE COLLAR	Not Payable
156	AMBULANCE EQUIPMENT	Not Payable
157	MICROSHEILD	Not Payable
158	ABDOMINAL BINDER	Essential and should be paid at least in post surgery patients of major abdominal surgery including TAH, LSCS, incisional hernia repair, exploratory laparotomy for intestinal obstruction, liver transplant etc.
ITEMS PAYABLE IF SUPPORTED BY A PRESCRIPTION		
159	BETADINE \ HYDROGEN PEROXIDE \ SPIRIT \ DETTOL \ SAVLON \ DISINFECTANTS ETC	May be payable when prescribed for patient, not payable for hospital use in OT or ward or for dressings in hospital
160	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES	Post hospitalization nursing charges not Payable
161	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES / DIET CHARGES	Patient Diet provided by hospital is payable

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162	ALEX SUGAR FREE	Payable -Sugar free variants of admissible medicines are not excluded
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163	CREAMS POWDERS LOTIONS (Toiletries are not payable, only prescribed medical pharmaceuticals payable)	Payable when prescribed
164	DIGENE GEL/ ANTACID GEL	Payable when prescribed
165	ECG ELECTRODES	Upto 5 electrodes are required for every case visiting OT or ICU. For longer stay in ICU, may require a change and at least one set every second day must be payable.
166	GLOVES	Sterilized Gloves payable / unsterilized gloves not payable
167	HIV KIT	Payable - payable Pre operative screening
168	LISTERINE/ ANTISEPTIC MOUTHWASH	Payable when prescribed
169	LOZENGES	Payable when prescribed
170	MOUTH PAINT	Payable when prescribed
171	NEBULISATION KIT	If used during hospitalization is payable reasonably
172	NEOSPRIN	Payable when prescribed
173	NOVARAPID	Payable when prescribed
174	17 VOLINI GEL/ ANALGESIC GEL	Payable when prescribed
175	ZYTEE GEL	Payable when prescribed
176	VACCINATION CHARGES	Routine Vaccination not Payable / Post Bite Vaccination Payable
PART OF HOSPITAL'S OWN COSTS AND NOT PAYABLE		
177	AHD	Not Payable - Part of Hospital's internal Cost
178	ALCOHOL SWABES	Not Payable - Part of Hospital's internal Cost
179	SCRUB SOLUTION/STERILLIUM	Not Payable - Part of Hospital's internal Cost
OTHERS		
180	VACCINE CHARGES FOR BABY	Not Payable
181	AESTHETIC TREATMENT / SURGERY	Not Payable
182	TPA CHARGES	Not Payable
183	VISCO BELT CHARGES	Not Payable
184	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]	Not Payable
185	EXAMINATION GLOVES	Not Payable
186	KIDNEY TRAY	Not Payable
187	MASK	Not Payable
188	OUNCE GLASS	Not Payable

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189	OUTSTATION CONSULTANT'S/ SURGEON'S FEES	Not payable, except for telemedicine consultations where covered by policy
190	OXYGEN MASK	Not Payable

191	PAPER GLOVES	Not Payable
192	PELVIC TRACTION BELT	Should be payable in case of PIVD requiring traction as this is generally not reused
193	REFERAL DOCTOR'S FEES	Not Payable
194	ACCU CHECK (Glucometry/ Strips)	Not payable pre hospitilisation or post hospitalisation / Reports and Charts required/ Device not payable
195	PAN CAN	Not Payable
196	SOFNET	Not Payable
197	TROLLY COVER	Not Payable
198	UROMETER, URINE JUG	Not Payable
199	AMBULANCE	Payable-Ambulance from home to hospital or inter hospital shifts is payable/ RTA as specific requirement is payable
200	TEGADERM / VASOFIX SAFETY	Payable - maximum of 3 in 48 hrs and then 1 in 24 hrs
201	URINE BAG	Payable where medically necessary till a reasonable cost - maximum 1 per 24 hrs
202	SOFTOVAC	Not Payable
203	STOCKINGS	Essential for case like CABG etc. where it should be paid.

Liberty General Insurance Ltd.

Unit 1501&1502, 15th Floor, Tower 2, One International Center,
Senapati Bapat Marg, Prabhadevi, Mumbai – 400013,
Phone: +91 226700 1313 Fax: +91 226700 1606
IRDAI of India Reg. No.150 • CIN: U66000MH2010PLC269656
Website Link: www.libertyinsurance.in



Grievance Redressal- Annexure B

We are concerned about you and are committed to extend the best possible services. In case you are not satisfied with our services or resolutions, please follow the below steps for redressal.

Step 1

Call us on Toll free number: **1800-266-5844**

(8:00 AM to 8.00 PM, 7 days of the week) or

Email us at: care@libertyinsurance.in or

Write to us at:

Customer Service

Liberty General Insurance Limited

Unit 1501&1502, 15th Floor, Tower 2, One International Center, Senapati
Bapat Marg, Prabhadevi, Mumbai - 400 013

Step 2

If our response or resolution does not meet your expectations, you can escalate at **Manager@libertyinsurance.in**

Step 3

If you are still not satisfied with the resolution provided, you can further escalate at **ServiceHead@libertyinsurance.in**

An acknowledgment will be sent on receipt of your concern, we would then Investigate the matter Internally and respond with a suitable resolution. Please share your contact details to enable us to get In touch with you.

In case you are not satisfied with the decision or resolution provided by the company you may approach the Insurance Ombudsman for redressal. The details of Insurance Ombudsman Offices are given below:

Liberty General Insurance Ltd.

Unit 1501&1502, 15th Floor, Tower 2, One International Center,
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Liberty
General Insurance™

Office of the Insurance Ombudsman and Contact Details	Areas of Jurisdiction
AHMEDABAD Office of the Insurance Ombudsman Jeevan Prakash Building 6th floor Tilak Marg Relief Road Ahmedabad 380 001 Tel: 07 25501201/02 Email: oio.ahmedabad@cioins.co.in	Gujarat Dadra & Nagar Flaveli Daman and Diu
BENGALURU Office of the Insurance Ombudsman Jeevan Soudha Building PID No 57 27 N 1 Ground Floor 1 H 24th Main Road JPNagar 1st Phase Bengaluru 560 078 Tel : 080 26652048 / 2665204 Email: oio.bengaluru@cioins.co.in	Karnataka
BHOPAL Office of the Insurance Ombudsman Opp. Gayatri Mandir, Area Hills, Bhopal -462 011. Tel.: 0755 - 2769201 /2769202 /2769203 Email: oio.bhopal@cioins.co.in	Madhya Pradesh and Chaitisgarh
BHUBNESHWAR Office of the Insurance Ombudsman 62 Forest park Bhubneshwar 751 00 Email: oio.bhubaneswar@cioins.co.in	
CHANDIGARH Office of the Insurance Ombudsman Sector -17 A, Chandigarh - 160 017. Tel.: 0172-2706468 Email: oio.chandigarh@cioins.co.in	Punjab Haryana Himachal Pradesh Jammu & Kashmir Chandigarh
CHENNAI Office of the Insurance Ombudsman Fatima Akhtar Court 4th Floor 453 Anna Sialai Teynampet CHENNAI - 600 018. Email: oio.chennai@cioins.co.in	Tamil Nadu Pondicherry Town and Karaikal (which are part of Pondicherry)
Office of the Insurance Ombudsman 2/2 A Universal Insurance Building Asaf Ali Road New Delhi 110 002 Email: oio.delhi@cioins.co.in	
KOCHI Office of the Insurance Ombudsman 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College Ground, M.G.Road, Kochi - 682 011. Tel.: 0484 -2358759 Email: oio.ernakulam@cioins.co.in	Kerala Lakshadweep Mahe a part of Pondicherry
GUWAHATI Office of the Insurance Ombudsman Jeevan Nivesh 5th Floor Nr Panbazar over bridge S.S. Road, Guwahati - 871001 (ASSAM) Email: oio.guwahati@cioins.co.in	Assam Meghalaya Manipur Mizoram Arunachal Pradesh Nagaland and Tripura

Office of the Ombudsman and Contact Details	Areas of Jurisdiction
HYDERABAD Office of the Insurance Ombudsman 6-2- 46, 1st floor, "Moin Court", Lane Opp. Hyundai Showroom, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 / 23376991 / 23376599 / 23328709 / 23325325 Email: oio.hyderabad@cioins.co.in	Andhra Pradesh Telangana Yanam and part of Territory of Pondicherry
JAIPUR Office of the Insurance Ombudsman Jeevan Nidhi, II Bldg, Gr Floor Bhawani Singh Marg, Jaipur - 302 005 Tel: 0141 2740363 Email: oio.jaipur@cioins.co.in	Rajasthan
Tel.: 033 - 22124339 / 22124341 Email: oio.kolkata@cioins.co.in	West Bengal Sikkim Andaman & Nicobar Islands
Office of the Insurance Ombudsman 6th Floor, Jeevan Bhawan Phase II Nawal Kishore Road, Hazratganj Lucknow - 226 001 Tel.: 0522 - 4002082 / 3500613 Email: oio.lucknow@cioins.co.in	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 Sravasti Gonda Faizabad Amethi Kaushambi Balrampur Basti Ambedkamagar Sultanpur Maharajgang Santkabimagar Azamgarh Kushinagar Gorkhpur Deoria Mau Ghazipur Chandauli Ballia Sidharathnagar
Office of the Insurance Ombudsman 3rd Floor Jeevan Seva Annexe S V Road Santacruz (W) Mumbai Tel.: 022 - 69038800/27/29/31/32/33 Email: oio.mumbai@cioins.co.in	Goa Mumbai Metropolitan Region excluding Navi Mumbai & Thane
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- 2514252 / 2514253 Email: oio.noida@cioins.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra Aligarh Bagpat Bareilly Bijnor Budaun Bulandshahr 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

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Office of the Ombudsman and Contact Details	Areas of Jurisdiction
PATNA Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: oio.patna@cioins.co.in	Bihar Jharkhand
PUNE Office of the Insurance Ombudsman Jeevan Darshan Bldg 3rd Floor CTS Nos 1 Sto 1 8 NC Kelkar Road Narayan Peth Pune 411030 Tel.: 020-24471175 Email: oio.pune@cioins.co.in	Maharashtra Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region
THANE Office of the Insurance Ombudsman, 2nd Floor, Jeevan Chintamani Building, Vasantao Naik Mahamarg, Thane (West) - 400604 Tel.: 022- 20812868/69 Email: oio.thane@cioins.co.in	Maharashtra

GOVERNING BODY OF INSURANCE COUNCIL,

Shri P.N.Gandhi, Secretary General
Smt Moushuml Mukherji, Secretary
3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.:
022 - 26106889 / 671 / 980
Fax: 022-26106949
Email: inscoun@cioins.co.in