Wellsurance Family Policy

A special health Insurance policy from TATA AIG General Insurance Company Ltd.

- This document has been prepared to assist you in understanding the above insurance product.
- It should be read concurrently with the policy wordings
- We recommend that you keep the document for future reference.
- This is only a summary of the key features of the product and should not be construed as an advertisement.

<table>
<thead>
<tr>
<th>Title</th>
<th>Description</th>
<th>Refer To Policy Clause Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is Wellsurance Family Policy ?</td>
<td>Wellsurance Family is a single policy for you &amp; your family. Its Unique combination of cashless health insurance &amp; Wellness offers. Its beyond health insurance. Wellsurance Family covers Critical Illnesses. Provides Hospital Cash &amp; also Recuperation benefit and child education benefit, all in one policy. It offers Cashless hospitalisation in a network of 3000+ hospitals. In addition to the above mentioned Insurance benefits it also offers a host value added services like Health Line &amp; health query, Health &amp; wellness discounts, Health portal and regular health newsletters. It is an annually renewable plan. Please refer to the policy schedule for benefit chart and wordings for the terms and conditions including exclusions.</td>
<td>Part D : Coverage</td>
</tr>
<tr>
<td>What am I covered for:</td>
<td>(a) CRITICAL ILLNESS BENEFITS - Critical Illness benefits are available on diagnosis of specified Critical Illnesses without hospitalisation of the insured. This benefit will be paid without any conditions as how the money would be spent by you. In case of hospitalisation you can convert this benefit into cashless claim facility. (b) Hospital Cash benefits - Hospital Cash benefits are payable basis the number of days the insured is hospitalized. These benefits take care of the incidental expenses incurred during hospitalisation. This benefit will be paid, regardless of the expenses incurred. (c) Convalescence benefit is paid in lumpsum after every continuous hospitalisation of 5 days. (d) Child Education Benefit is payable in lumpsum in an unfortunate event of death or permanent disability of the primary insured. Please refer to the Policy Schedule for the exact amount of benefits payable under each category. (e) Value Added Benefits - (i) Free Health Helpline: You can call out expert medical practitioners to avail help on health &amp; wellness related information. (ii) Comprehensive Health Portal: You can explore a host of benefits like a personalized health tracker that helps you monitor your health &amp; fitness levels, get access to exclusive health &amp; wellness articles. View the list of our network hospitals, check and compare cost of various medical services provided by different hospitals. Post a health query to our specialized medical practitioners. (iii) Health Offers &amp; Discounts: Get discounts on our network of selected Gyms, Spas, Skin care &amp; Weights Management Centers List of updated offers available on our portal. (iv) Health Perks: Get discounts on selected health check up packages at our wide range of network hospitals.</td>
<td>Part D : Coverage</td>
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<tr>
<th>ELIGIBILITY</th>
<th>PREMIUM PAYMENT</th>
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<tbody>
<tr>
<td>18 - 65 YEARS AT ENTRY</td>
<td>Structure : Level</td>
</tr>
<tr>
<td>Renewable for life</td>
<td>Manner : Cheque or Direct Debit or Credit card</td>
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<tr>
<td>Critical Illness benefits are not available for children covered under the policy</td>
<td>Mode : Annual or Monthly</td>
</tr>
<tr>
<td>All benefits are reduced by 50% for children covered in the Policy</td>
<td>Premium is calculated as per the age of the eldest member covered in the policy</td>
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What are the major exclusions in the policy: This entire Policy does not provide benefits for any loss resulting in whole or in part from, or expenses incurred, directly or indirectly in respect of:

1. Any Pre-existing Condition, any complication arising from it except if the insured has taken a similar Wellsurance Policy from Us and is covered without a break, for a period of 4 consecutive years since inception of the first policy with Us. Unless if the Insured person:
   i) was insured continuously and without interruption for at least 4 years under another Indian insurer’s individual health insurance policy for the reimbursement of medical costs for inpatient treatment in a Hospital, and
ii) establishes to Our satisfaction that he was unaware of and had not taken any advice or medication for such illness or treatment.

iii) If the Insured person renews with Us or transfers from any other insurer and increases the Sum Insured (other than as a result of the application of Benefit 2a) upon renewal with Us), then this exclusion shall only apply in relation to the amount by which the Sum Insured has been increased.

With reference to the point (i) to (iii), The insured person will be given the credit of the waiting period based on the number of years of continuous and uninterrupted insurance cover.

2. 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; attempted suicide, or

3. 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; or

4. serving in any branch of the Military or Armed Forces of any country, whether in peace or War, and in such an event We, upon written notification by You, shall return the pro rata premium for any such period of service; or

5. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel; or

6. The radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of that equipment; or

7. Congenital anomalies or any complications or conditions arising there from; or

8. Professional Sports, Hazardous Activities; or

9. Cosmetic or plastic surgery or any elective surgery or cosmetic procedure, circumcision, (except as a result of an Injury caused by a Covered Accident while Our Policy is in force) that improve physical appearance, surgical and non-surgical treatment of obesity (including morbid obesity) and weight control programs, or treatment of an optional nature; Routine health checks or convalescence, Custodial Care, general debility, lethargy, rest cure; expenses on vitamins, tonics and any other health supplement; vaccination, inoculation of any kind; or

10. Any investigation(s) or treatments not directly related to a Covered Illness or Covered Injury or the conditions or diagnosis necessitating hospital admission; or Any surgery done on the organ(s), if they are not infected or affected;

11. Services, supplies, or treatment, including any period of Hospital confinement, which were not recommended, approved, and certified as Medically Necessary by a Physician; or

12. Organ transplants that are considered experimental in nature; expenses incurred for hospitalization or surgery for donation of organs; or

13. pregnancy and all related conditions, including services and supplies related to the diagnosis or treatment of infertility or other problems related to inability to conceive a child; birth control, including surgical procedures and devices; This however does not include ectopic pregnancy proved by diagnostic means and is certified to be life threatening by the Physician; or

14. Medical expenses incurred as the result of alcohol and/or drug abuse, addiction or overdose; or

15. Any surgery for donation of organs; or

16. Treatment of Spondylosis/Spondilitis; or

17. Cost of Spectacles and contact lenses, hearing aids, walkers, crutches, wheel chairs and such other aids; or

18. Any Ayurvedic, Homeopath or naturopathy treatments

**Waiting Period**

- There is a waiting period of 90 days & survival period of 30 days for all Critical Illness benefits
- There is a waiting period of 90 days for all sickness related hospitalization benefits
- There is no waiting period for accident related hospitalization benefits

**Key Terms**

- **Waiting Period** – This is the period where the policy has incepted however claims would not be paid during this time.
- **Survival Period** – The insured has to survive post diagnosis of a particular illness for the claim to be paid.
- **Claims Service Provider** – A service provider chosen by the insurance company & is licenced by IRDA that helps the Insurance Company & the insured in claims processing.
Title | Description | Refer To Policy Clause Number
--- | --- | ---
Payout basis | Fixed amount on the occurrence of a covered event | Part D: Coverage
Cost Sharing | Not Applicable | ---
Renewal Conditions | • Policy is ordinarily life-long renewable, subject to application for renewal and the renewal premium in full has been received by the due dates and realisation of premium. • The renewal premium for this policy will not change unless We have revised the premium and obtained due approval from IRDA. Your premium will also change if you move into a higher age group, or change the plan. • Grace period of 30 days for renewing the policy is provided. To avoid any confusion any claim incurred during break-in period will not be payable under this policy. • We will not apply any additional loading on your policy premium at renewal based on your claim experience. | Part C: Uniform Provisions 4
Renewal Benefits | Not Applicable | ---
Taxation Clause | Get tax benefit for premium paid on policies as per section 80D of the Income Tax Act. | ---
Free Look Period | You have a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy. If you have any objections to any of the terms and conditions, you have the option of cancelling the Policy stating the reasons for cancellation and you will be refunded the premium paid by you after adjusting the amounts spent on any medical check-up, stamp duty charges and proportionate risk premium. You can cancel your Policy only if you have not made any claims under the Policy. All your rights under this Policy will immediately stand extinguished on the free look cancellation of the Policy. Free look provision is not applicable and available at the time of renewal of the Policy. | Part C: Uniform Provisions – 22
Cancellation | This policy would be cancelled by us on grounds of misrepresentation, fraud, non-disclosure of material facts or non-cooperation by any Insured Person, upon giving 30 days notice. No refund of premium will be allowed if policy is cancelled on the grounds of misrepresentation, fraud, or non-disclosure of material facts. In case policy is cancelled by us on the grounds of non-cooperation or you cancel the policy by giving 30 days notice then your policy will be refunded balance premium after retaining premium for the period policy was in force on short period rate basis. No refund of premium will be allowed if claim has been made on the policy. | Part C: Uniform Provisions – 6

### CANCELLATION RATES AS PER TATA AIG GUIDELINES

<table>
<thead>
<tr>
<th>Cancellation date</th>
<th>Refund amount</th>
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</thead>
<tbody>
<tr>
<td>Upto 1 month</td>
<td>75% of annual premium</td>
<td>Upto 6 months</td>
<td>37.5% of annual premium</td>
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<tr>
<td>Upto 3 months</td>
<td>62.5% of annual premium</td>
<td>Upto 8 months</td>
<td>12.5% of annual premium</td>
</tr>
<tr>
<td>Upto 4 months</td>
<td>50% of annual premium</td>
<td>After 8 months</td>
<td>No refund</td>
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- Cancellation date is from the date of dispatch of the policy document.

How to Claim | Please contact our designated TPA at 1800 103 5252 and 0124-4149710 (for senior citizens only), E-Mail ID - seniorcitizen@emeditek.com, atleast 48 hours prior to an event which might give rise to a claim. For any emergency situations, kindly contact our TPA within 24 hours of the event. | Part C: Uniform Provisions – 9

**Important Notes:**

1. The coverage on the plan is effective subject to acceptance by Tata AIG Insurance Company Ltd. (Tata AIG).
2. Please note this document is for reference only and is not to be construed as a contract of insurance and/or professional advice. Please refer to the policy wordings for details terms & conditions before concluding a sale.
3. Insurance is the subject matter of the solicitation.
4. The policy is underwritten by Tata AIG General Insurance Company Ltd. (Tata AIG), whose registered office is at Tata AIG General Insurance Company Ltd. Peninsula Business Park, Tower A, 15th Floor, G. K. Marg, Lower Parel, Mumbai-400013.