Customer Information Sheet (Description is illustrative and not exhaustive)



Tata AIG COVID Protection Group Insurance

The information mentioned below is illustrative and not exhaustive. Information must be read in conjunction with the product brochures and policy document. In case of any conflict between the Key Features Document and the policy document the terms and conditions mentioned in the policy document shall prevail.

Si. No	Title	Description	Refer To Policy Clause Number
1	Product Name	Tata AIG COVID Protection Group Insurance	
2	What am I covered for	Corona Virus Disease (Covid-19) Cover	Section - 2
		If during the Policy / Cover Period, the Insured Person(s) contracts and is / are diagnosed for the first time with Corona Virus Disease (Covid-19), which is caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), at a Government of India authorized centre then the Company shall pay to such Insured Person the amount as mentioned in the Policy Schedule/Certificate of Insurance subject to an initial waiting period of 15 days(fifteen days) from the Policy / Cover Period Start Date.	
		Medical Exclusions	Section - 3
		The Company will not make any payment for any claim in respect of an Insured Person, caused by, arising from or in any way attributable to any reasons as mentioned below:	
		i. Any disease or illness other than the Corona Virus Disease (Covid-19)	
		ii. Any accident	
		iii. Any claim in relation to Corona Virus Disease (Covid-19) where such disease has been diagnosed prior to Policy/Cover Period Start Date	
		iv. Any diagnosis of Covid-19 outside India	
		v. Any diagnosis of Covid-19 at any centre which has not been authorized by the Government of India to conduct such test	
		vi. Arising due to any Pre-existing Disease	
		Non-Medical Exclusions	Section - 3
3	What are the Major exclusions in the policy	i. War or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, ionising radiation.	
3		ii. Any Insured Person committing or attempting to commit a breach of law with criminal intent	
		iii. Treatment rendered by a Medical Practitioner which is outside his discipline	
		iv. If the Insured Person is already or currently in isolation or quarantined for suspected Covid-19 or post diagnosis of Covid-19	
		v. Any cohabitation prior to Policy /Cover Period Start Date, with a person who has been diagnosed with Covid-19	
		vi. Any travel after Policy / Cover Period Start Date or 60 days prior to Policy / Cover Period Start date, by the Insured Person to any country against whom the Republic of India has imposed general or special travel restrictions, or any country which has imposed or may impose subsequently, such restrictions against travel by a citizen of the Republic of India to such country.	
4	Waiting period	The Company is not liable for any claim arising due to Corona Virus Disease (COVID-19) for which consultation, investigation, diagnosis, treatment or admission started prior to the Policy / Cover Period Start Date or within 15 days (fifteen days) from the Policy / Cover Period Start Date. In case of renewals, this waiting period shall not be applicable to the extent of Sum Insured under the previous policy/certificate of insurance is in force.	Section - 3
5	Payment basis	The policy offers cover on Benefit basis.	
6	Cancellation	i. In the event of Payment of Claim for an Insured Person under this Policy / Certificate of Insurance, cover of such Insured Person shall terminate, and no further claim shall be admissible for such Insured Person.	Section - 4
		This is onetime benefit applicable for the entire tenure of the Policy and shall terminate upon payment of this benefit.	

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		ii. Policyholder / Insured Person may terminate this Policy / Certificate of Insurance at any time by giving the Company written notice, and the Policy/Certificate of Insurance shall terminate when such written notice is received.	
		iii. The Company may at any time terminate this Policy/Certificate of Insurance on grounds of misrepresentation, fraud, non-disclosure of material facts or non-cooperation by Insured Person(s) by sending an endorsement to the Insured Person's address shown in the Policy Schedule/Certificate of Insurance.	
		iv. In the event of termination of this Policy/Certificate of Insurance on grounds of mis-representation, fraud, non-disclosure of material facts, the policy shall stand cancelled ab-initio and there will be no refund of premium.	
		v. In the event of cancellation after 15 days of policy/cover period start date, there will be no premium refund	
7	Claims	For any claim related assistance, notification of claim and submission of claim related documents, insured person can contact the Company through:	Section - 5
		Website: www.tataaig.com	
		• Toll Free No.: 1800 266 7780/ For Senior Citizens: 1800 22 9966	
		Claim Document Submission to:	
		Accident & Health Claims Department	
		Tata-AIG General Insurance Co. Ltd.	
		A-501,5th Floor, Bldg No -4, Infinity Park, Dindoshi,	
		Malad (E), Mumbai 400 097	
	Policy Servicing	Company Officials:	
		I. If you are not satisfied with our services and wish to lodge a complaint, please call our 24X7 Toll free number 1800-266-7780 or 1800 22 9966 (for Senior Citizens) or you may email to the customer service desk at customersupport@tataaig.com	
		II. For lack of a response or if the resolution still does not meet your expectations, you can write to:	
		Escalation Level 1:	
8		manager.customersupport@tataaig.com	
		Escalation Level 2:	
		head.customerservices@tataaig.com	
	Grievances/ Complaints	a. Details of Grievance redressal officer is available on our website https://www.tataaig.com/grievance-redressal-policy	Section - 6
		b. IRDAI Integrated Grievance Management System - https://igms.irda.gov.in/	
		c. Insurance Ombudsman – The contact details of the Insurance Ombudsman offices are available on our website www.tataaig.com	
9	Insured's Rights	Notification of Claim:	Section - 5
		It is a condition precedent to the Company's liability hereunder that notice with full particulars must be given by Insured Person(s) to the Company within seven (7) days after an actual or potential loss begins or as soon as reasonably possible and in any event no later than (15) Days after an actual or potential loss begins.	
		Insured Person can notify a claim by calling the Company's 24x7 toll free helpline 1800-266-7780. Insured Person can even write to the Company at general.claims@tataaig.com	
		Claim Payment	
		i. The Company shall be under no obligation to make any payment under this Policy unless the Company have received all premium payments in full in time and the Company have been provided with the documentation and information the Company had requested to establish the circumstances of the claim, its quantum or the Company's liability for it, and unless the Insured Person has complied with his obligations under this Policy.	
		ii. The Company will only make payment to Insured Person under this Policy. The Insured Person's receipt shall be considered as a complete discharge of the Company's liability against any claim under this Policy.	
		iii. In the event of the Insured Person's death, the Company will make payment to the Nominee (as named in the Schedule).	
		iv. This Policy only covers diagnosis of COVID19 within India and payments under this Policy shall only be made in Indian Rupees within India.	
		v. The Company shall settle or reject a claim, as may be the case, within 30 days of the receipt of the last 'necessary' document.	

		vi. The Company shall settle or reject a claim, as the case may be, within 30 days from the date of receipt of last necessary document.	Section - 5
		vii. In the case of delay in the payment of a claim, the Company 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.	
		viii. However, where the circumstances of a claim warrant an investigation in the opinion of the Company, it shall initiate and complete such investigation at the earliest in any case not later than 30 days from the date of receipt of last necessary document. In such cases, the Company shall settle the claim within 45 days from the date of receipt of last necessary document.	
		ix. In case of delay beyond stipulated 45 days the company shall be liable to pay interest at a rate 2% above the bank rate from the date of receipt of last necessary document to the date of payment of claim.	
		x. All claims will be settled in accordance with the applicable regulatory guidelines, including IRDAI (Protection of Policyholders Interests Regulation), 2017	
10	Insured's Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.	

Legal Disclaimer Note: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail.