Tata AIG Group EMI Protect Policy wordings

Preamble

While this policy is in force we will pay the insured person the benefits as mentioned in the policy schedule or certificate of insurance, if the insured event occurs during the Policy Period subject to:

i. The terms, conditions and exclusions of this Policy,

ii. Statements in the proposal/enrolment form and information disclosed to Us by You or on Your behalf and on behalf of all persons to be insured which is incorporated into the Policy and is the basis of it.

Commencement of risk cover under the policy is subject to receipt of premium by Us.

Our liability at any time shall not exceed the maximum sum insured applicable for the benefit as specified in Your policy schedule or Certificate of insurance.

In case of any other sum insured and coverage restrictions, the same shall be clearly specified in Your Policy schedule/Certificate of Insurance.

Section 1: Definitions

The terms defined below and at other junctures in the Policy Wording have the meanings ascribed to them wherever they appear in this Policy and, where appropriate, references to the singular include references to the plural; references to the male include the female and references to any statutory enactment include subsequent changes to the same:

i. Standard Definitions

1. Accident

An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

2. Congenital Anomaly

Congenital Anomaly means a condition which is present since birth, and which is abnormal with reference to form, structure or position.

a) Internal Congenital Anomaly

Congenital anomaly which is not in the visible and accessible parts of the body.

b) External Congenital Anomaly

Congenital anomaly which is in the visible and accessible parts of the body

3. Deductible

Deductible means a cost sharing requirement under a health insurance policy that provides that the insurer will not be liable for a specified rupee amount in case of indemnity policies and for a specified number of days/hours in case of hospital cash policies which will apply before any benefits are payable by the insurer. A deductible does not reduce the Sum Insured.

4. Grace Period

Grace period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.

5. Hospital

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A hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) and the said act Or complies with all minimum criteria as under:

i. has qualified nursing staff under its employment round the clock;

ii. has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;

iii. has qualified medical practitioner(s) in charge round the clock;

iv. has a fully equipped operation theatre of its own where surgical procedures are carried out;

v. maintains daily records of patients and makes these accessible to the insurance company's authorized personnel;

6. Hospitalization

Hospitalization means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

7. Illness

Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.

(a) Acute condition

Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery

(b) Chronic condition

A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:

i. it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests

ii. it needs ongoing or long-term control or relief of symptoms

iii. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it

iv. it continues indefinitely

v. it recurs or is likely to recur

8. Injury

Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

9. Intensive Care Unit

Intensive care unit means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s),

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and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.

10. Inpatient Care

Inpatient care means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.

11. Medical Advice

Medical Advice means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.

12. Medical Practitioner

Medical Practitioner means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.

13. Medically Necessary Treatment

Medically necessary treatment means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:

i. is required for the medical management of the illness or injury suffered by the insured;

ii. must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;

iii. must have been prescribed by a medical practitioner;

iv. must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

14. Pre-Existing Disease

Pre-existing disease means any condition, ailment, injury or disease:

a) That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement or

b) For which medical advice or treatment was recommended by, or received from a physician within 48 months prior to effective date of the policy issued by the insurer or its reinstatement

15. Renewal

Renewal means the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.

16. Unproven/Experimental treatment

Unproven/Experimental treatment means the treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.

ii. Specific Definitions (Definitions other

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than as mentioned under Section 1 (i) above)

1. Age

Means the completed age of the Insured Person on his / her most recent birthday as per the English calendar, regardless of the actual time of birth.

2. EMI or EMI Amount

EMI or EMI amount means and includes the amount of monthly payment required to repay the principal amount of Loan and Interest by the Insured Person as set forth in the amortization chart referred to in the loan agreement (or any amendments thereto) between the Bank/Financial Institution and the Insured person prior to the date of occurrence of the Insured Event under this Policy. For the purpose of avoidance of doubt, it is clarified that any monthly payments that are overdue and unpaid by the Insured prior to the occurrence of the Insured Event will not be considered for the purpose of this Policy and shall be deemed as paid by the Insured.

3. Hazardous or Adventure sports

Hazardous or Adventure sports means those sports / activities which involves speed, height, a high level of physical exertion and holds high degree of risk.

4. Policyholder

The Policyholder shall be the Employer who has taken the group insurance policy as a service benefit to his Employees or a Group Manager of a homogeneous group of persons who assemble together for a commonality of purpose and there is a clearly evident relationship between the member and group manager for services other than insurance.

5. Portability

Portability means the right accorded to an individual health insurance policyholder (including family cover) to transfer the credit gained by the insured for pre-existing conditions and time bound exclusions if the policyholder chooses to switch from one insurer to another insurer or from one plan to another plan of the same insurer, provided the previous policy has been maintained without any break.

6. Professional sports

Professional sports shall mean a sport, which would remunerate a player in excess of 50% of his or her annual income as a means of their livelihood.

7. Proposal and Enrolment Form

Proposal form/Enrolment form means any initial or subsequent Proposal / Enrolment made by the Policyholder/ Insured Person and is deemed to be attached and which forms a part of this Policy.

8. We/Us/Our

We/US/Our means TATA AIG General Insurance Company Limited.

9. Winter Sports

Winter Sports mean snow skiing, Heli Skiing, Mountaineering & Ice Climbing, Auli skiing or sports held in the open air on snow or ice.

10. You/Your/Yourself

You/Your/Yourself means the Policy Holder

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and/or Insured Person(s) who is named in the Policy Schedule.

Section 2: Benefits

Scope of coverage - Worldwide

B1. Inpatient Hospitalization Benefit

We will pay the number of EMIs/EMI amount as specified in the Policy Schedule/ Certificate of Insurance for every completed continuous hospitalization period of 24 hours, in the event the insured person is hospitalized as an Inpatient due to injury/ illness/ disease during the policy period, subject to any deductible and for specified number of days as mentioned in Policy Schedule/ Certificate of Insurance.

B2. Critical Illness Benefit (Category "A")

We will pay the insured person the number of EMIs/EMI amount as specified in the Policy Schedule/Certificate of Insurance for the listed critical illnesses subject to the following conditions:

a. The claim is admissible for first time diagnosis of listed critical illnesses or undergoing the listed Surgery for Critical Illness for the first time as mentioned below under clause (f) of this section.

b. The claim is admissible under this section if the critical illness manifest after 90 days from the first risk commencement date.

c. Claims under this section will be admissible only if the Insured Person survives the Illness for a period as specified on the Policy Schedule/ Certificate of Insurance after the date of occurrence of the listed critical illness.

d. Pre-existing conditions or its related conditions shall be covered after a waiting period as specified on the Policy Schedule/Certificate of Insurance. The said conditions must be declared, if known, by the insured person at the time of application and must not have been explicitly excluded in the policy.

e. Only one claim shall be payable to the insured regardless of the number of Critical Illness/Surgery for Critical Illness, incapacities or treatments suffered by him/her unless explicitly stated otherwise.

f. Covered Critical Illness/Surgery for Critical Illness: A "Critical Illness/ Surgery for Critical Illness" shall mean any one of the following critical illness with specific meaning as defined in the policy:

Sl.No.	Critical Illness
C1	Cancer of Specified Severity
C2	End Stage Renal Failure requiring dialysis
C3	Major organ/Bone Marrow Transplant
C4	Open Heart Valve Replacement/Repair
C5	Open Chest Coronary Artery Bypass Graft
C6	Myocardial Infarction (First Heart Attack of specific severity)
C7	Refractory heart failure
C8	Cardiomyopathy

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C9	Stroke resulting in permanent symptoms
C10	Permanent Paralysis of Limbs
C11	Parkinson's disease
C12	Primary (Idiopathic) Pulmonary Hypertension
C13	End Stage Lung Failure
C14	Aplastic Anemia
C15	End Stage Liver Failure

C1 Cancer of Specified Severity

I. A malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma.

II. The following are excluded –

i. All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN - 2 and CIN-3.

ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;

iii. Malignant melanoma that has not caused invasion beyond the epidermis;

iv. All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0

v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;

vi. Chronic lymphocytic leukaemia less than RAI stage 3

vii. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,

viii. All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;

C2 End Stage Renal Failure requiring dialysis

End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

C3 Major organ/Bone Marrow Transplant

i. The actual undergoing of a transplant of:

a. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from

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irreversible end-stage failure of the relevant organ, or

b. Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

ii. The following are excluded:

a. Other stem-cell transplants

b. Where only Islets of Langerhans are transplanted

C4 Open Heart Valve Replacement/Repair

The actual undergoing of open-heart valve surgery to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner.

Catheter based techniques including but not limited to, balloon valvotomy/ valvuloplasty are excluded.

C5 Open Chest Coronary Artery Bypass Graft

i. The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.

ii. The following are excluded:

a. Angioplasty and/or any other intra-arterial procedures

C6 Myocardial Infarction (First Heart Attack of specific severity)

i. The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:

a. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)

b. New characteristic electrocardiogram changes

c. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

ii. The following are excluded:

a. Other acute Coronary Syndromes

b. Any type of angina pectoris

c. A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

C7 Refractory heart failure

Refractory heart failure must be diagnosed

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by a Cardiologist and optimal therapy must have been established for at least 6 months. The diagnosis of heart failure to be evidence by at least any 4 following criteria:

a. Class 3 of the New York Heart Association classification's of functional capacity (heart disease resulting in marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain)

b. Presence of third heart sound

c. Jugular venous pressure above 6cms

d. Rales present in both bases on auscultation

e. Cardiomegaly on chest x-ray

f. Grade 3, or gross ascites, associated with marked abdominal distension or peripheral oedema

g. 2-D echocardiography report suggestive of LVEF of 40% or less

h. Elevated biomarkers – B-type natriuretic peptide (BNP)/N-terminal pro-BNP(NT-proBNP)

The following are excluded:

- Heart Failure due to Auto-immune disorders
- Heart Failure secondary to drug or alcohol abuse

C8 Cardiomyopathy

A diagnosis of cardiomyopathy by a Specialist Medical Practitioner (Cardiologist). There must be clinical impairment of heart function resulting in the permanent loss of ability to perform physical activities for a minimum period of 30 days to at least Class 3 of the New York Heart Association classification's of functional capacity (heart disease resulting in marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain) and LVEF of 40% or less.

The following are excluded:

- Cardiomyopathy secondary to alcohol or drug abuse.
- All other forms of heart disease, heart enlargement and myocarditis.

C9 Stroke resulting in permanent symptoms

i. Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.

ii. The following are excluded:

a. Transient ischemic attacks (TIA)

b. Traumatic injury of the brain

c. Vascular disease affecting only the eye or optic nerve or vestibular functions.

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C10 Permanent Paralysis of Limbs

Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

C11 Parkinson's disease

Unequivocal diagnosis of idiopathic or primary Parkinson's Disease (all other forms of Parkinsonism are excluded) before age 65 that has to be confirmed by a Consultant Neurologist.

The disease cannot be controlled with medication; objective sign of progressive impairment and the disease must result in a permanent inability to perform independently three or more Activities of Daily Living:

i. Bathing(ability to wash in the bath or shower),

ii. Dressing (ability to put on, take off, secure and unfasten garments),

iii. Personal hygiene (ability to use the lavatory and to maintain a reasonable level of hygiene),

iv. Mobility (ability to move indoors on a level surface), continence(ability to manage bowel and bladder functions),

v. Eating/Drinking (ability to feed oneself (but not to prepare the food) or

vi. Must result in a permanent bedridden situation and inability to get up without outside assistance.

These conditions have to be medically documented for at least 90 days. Excluded are Drug-induced or toxic causes of Parkinsonism.

C12 Primary (Idiopathic) Pulmonary Hypertension

I. An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Cauterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification of cardiac impairment.

II. The NYHA Classification of Cardiac Impairment are as follows:

   i. Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.

   ii. Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

III. Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.

C13 End stage Lung Failure

End stage lung disease, causing chronic

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respiratory failure, as confirmed and evidenced by all of the following:

i. FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and

ii. Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and

iii. Arterial blood gas analysis with partial oxygen pressure of 55mmHg or less (PaO2 < 55mmHg); and

iv. Dyspnea at rest.

C14 Aplastic Anemia

Chronic persistent bone marrow failure which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least one of the following:

- Blood product transfusion;
- Marrow stimulating agents;
- Immunosuppressive agents; or
- Bone marrow transplantation

A certified hematologist must make the diagnosis of severe irreversible aplastic anemia. There must be permanent bone marrow failure resulting in bone marrow cellularity of less than 25% and there must be two of the following:

- Absolute neutrophil count of less than 500/mm^3
- Platelets count less than 20,000/mm^3
- Reticulocyte count of less than 20,000/mm^3

Temporary or reversible Aplastic Anemia is excluded.

C15 End stage Liver Failure

I. Permanent and irreversible failure of liver function that has resulted in all three of the following:

i. Permanent jaundice; and

ii. Ascites; and

iii. Hepatic encephalopathy.

II. Liver failure secondary to drug or alcohol abuse is excluded.

Limitations applicable to Section B2 – Critical illness

I. In the event of more than one claim of critical illness (es) is/are lodged under this policy, We shall only pay for one such critical illness claim during the policy year, unless explicitly stated otherwise Upon payment of this claim, the coverage for critical illness would cease to continue till expiry of the policy. However, the cover for other benefits which have a separate sum insured shall continue till the expiry of the policy and our liability for such benefits shall be restricted to the sum insured for such benefit as mentioned on the Policy Schedule/Certificate of Insurance.

II. We will not pay more than once for the same critical illness claim under the policy (even after renewals).

B3. Personal Accident

P1 Accidental Death

We will pay to Insured person's beneficiary or legal representative the specified number of EMIs/EMI amount/sum insured as specified in the Policy Schedule/ Certificate of Insurance, if an Insured Person suffers an accident during the

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policy period and this is the proximate cause of his death within 365 days from the date of accident.

P2 Disappearance

We will pay to Insured person's beneficiary or legal representative the specified number of EMIs/EMI amount/sum insured as specified in the Policy Schedule/ Certificate of Insurance, for Loss of Life occurring within policy period if Insured person's body cannot be located within 365 Days after the forced landing, stranding, sinking or wrecking of a conveyance in which You were a passenger or as a result of any Acts of God, subject to all other terms and provisions of the Policy.

P3 Permanent Total Disability

We will pay the specified number of EMIs/ EMI amount as specified in the policy schedule/Certificate of Insurance, if injury to you results in you suffering Permanent Total Disability. The injury must occur within the policy period as mentioned in the policy schedule/Certificate of insurance and the disability should continue for 365 days from the date of accident which caused the injury. This waiting period of 365 days is not applicable for severance or amputation cases.

If the Insured Person suffers more than one below mentioned loss as a result of the same accident, our liability shall be restricted to the specified benefit amount mentioned on the Policy Schedule/ Certificate of Insurance.

For the purpose of this cover, Permanent Total Disability shall mean either of the following:

- Irrecoverable Loss of sight of both eyes
- Physical Separation of or the irrecoverable loss of ability to use both hands or both feet
- Physical Separation of or the irrecoverable loss of ability to use one hand and one foot
- Irrecoverable Loss of sight of one eye and the physical separation of or the irrecoverable loss of ability to use either one hand or one foot.

Specific Exclusions applicable to this Section B3

The following exclusions will be applicable in addition to the General Exclusions listed in this Policy:

i. Any Pre-existing injury or disability or any complication arising from it. This exclusion shall not be applicable if the proximate cause is accident or

ii. Any physical disability which existed prior to first risk inception date which was not disclosed , or

iii. Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.

iv. Being under the influence of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Physician and taken as prescribed; or

v. 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

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of government or military power; or

vi. 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

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

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

ix. Caused due to act of terrorism.

x. Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.

xi. Disability based on a Diagnosis made by the Insured or his/her Immediate Family Member or anyone who is living in the same household as the Insured or by a herbalists, acupuncturist or any other non-traditional health care provider.

Limitations applicable to Section 2 – Benefits

Upon payment of the claim under this section, the coverage for this section would cease to continue till expiry of the policy unless otherwise explicitly stated. However, the cover for other benefits which have a separate sum insured shall continue till the expiry of the policy and our liability for such benefits shall be restricted to the sum insured for the benefit as mentioned on the Policy Schedule/Certificate of Insurance.

Section 3: Exclusions

i. Standard Exclusions

1. Exclusions with Waiting Period

Applicable for both B1 (Inpatient Hospitalization Benefit) & B2 (Critical Illness Benefit) of the base cover

***i. Pre-existing Diseases*(Code-Excl01)**

a. Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 48 months of continuous coverage after the date of inception of the first policy with insurer.

b. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.

c. If the Insured Person is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations, then waiting period for the same would be reduced to the extent of prior coverage.

d. Coverage under the policy after the expiry of 48 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer.

Applicable for B1 (Inpatient Hospitalization Benefit) of the base cover

ii. A Specified disease/procedure waiting

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period (Code-Excl02)

a. Expenses related to the treatment of the listed Conditions, surgeries/treatments shall be excluded until the expiry of 24 months of continuous coverage after the date of inception of the first policy with us. This exclusion shall not be applicable for claims arising due to an accident.

b. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.

c. If any of the specified disease/procedure falls under the waiting period specified for pre-Existing diseases, then the longer of the two waiting periods shall apply.

d. The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.

e. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.

f. The following Illnesses/diseases would be covered after a waiting period irrespective of the treatment undergone, medical or surgical:

   a. Tumors, Cysts, polyps including breast lumps (benign)
   b. Polycystic ovarian disease
   c. Fibromyoma
   d. Adenomyosis
   e. Endometriosis
   f. Prolapsed Uterus
   g. Non-infective arthritis
   h. Gout and Rheumatism
   i. Osteoporosis
   j. Ligament, Tendon or Meniscal tear (due to injury or otherwise)
   k. Prolapsed Inter Vertebral Disc (due to injury or otherwise)
   l. Cholelithiasis
   m. Pancreatitis
   n. Fissure/fistula in anus, haemorrhoids, pilonidal sinus
   o. Ulcer & erosion of stomach & duodenum
   p. Gastro Esophageal Reflux Disorder (GERD)
   q. Liver Cirrhosis
   r. Perineal Abscesses
   s. Perianal / Anal Abscesses
   t. Calculus diseases of Urogenital system Example: Kidney stone, Urinary bladder stone.
   u. Benign Hyperplasia of prostate
   v. Varicocele
   w. Cataract
   x. Retinal detachment
   y. Glaucoma
   z. Congenital Internal Diseases

The following treatments are covered after a waiting period irrespective of the illness for which it is done:

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a. Adenoidectomy

b. Mastoidectomy

c. Tonsillectomy

d. Tympanoplasty

e. Surgery for nasal septum deviation

f. Nasal concha resection

g. Surgery for Turbinate hypertrophy

h. Hysterectomy

i. Joint replacement surgeries Eg: Knee replacement, Hip replacement

j. Cholecystectomy

k. Hernioplasty or Herniorraphy

l. Surgery/procedure for Benign prostate enlargement

m. Surgery for Hydrocele/ Rectocele

n. Surgery of varicose veins and varicose ulcers

iii. 30 days waiting period (Code-Excl03)

a. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident, provided the same are covered.

b. This exclusion shall not, however, apply if the Insured Person has Continuous Coverage for more than twelve months.

c. The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently.

2. Medical Exclusions

We will not make any payment for any claim in respect of any Insured Person, arising from or in any way attributable to any of the following unless expressly stated to the contrary in this Policy:

i. Investigation & Evaluation (Code-Excl04)

a. Expenses related to any admission primarily for diagnostics and evaluation purpose only are excluded.

b. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.

ii. Rest Cure, rehabilitation and respite care(Code-Excl05)

a. Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:

i. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons.

ii. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.

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iii. Obesity and weight control: (Code-Excl06)

Expenses related to the surgical treatment of obesity that does not fulfill all the below conditions:

1. Surgery to be conducted is upon the advice of the Doctor
2. The surgery/Procedure conducted should be supported by clinical protocols
3. The member has to be 18 years of age or older and
4. Body Mass Index (BMI);
   a. greater than or equal to 40 or
   b. greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
      i. Obesity-related cardiomyopathy
      ii. Coronary heart disease
      iii. Severe Sleep Apnea
      iv. Uncontrolled Type2 Diabetes

iv. Change-of-Gender treatments (Code- Excl07)

Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.

v. Cosmetic or Plastic Surgery (Code-Excl 08)

Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.

vi. Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. **(Code- Excl 12)**

vii. Refractive Error(Code- Excl 15)

Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres.

viii. Unproven treatments (Code- Excl 16)

Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.

ix. Sterility and Infertility (Code- Excl 17)

Expenses related to Birth Control, sterility and infertility. This includes:

a. Any type of contraception, sterilization
b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI

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c. Gestational Surrogacy

d. Reversal of sterilization

x. Maternity (Code - Excl 18)

i. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy.

ii. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the policy period.

3. Non-Medical Exclusions

i. Breach of law (Code- Excl 10):

Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.

ii. Excluded Providers: (Code-Excl 11)

Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website / notified to the policyholders are not admissible. However, in case of life threatening situations or following an accident, expenses up to the stage of stabilization are payable but not the complete claim.

ii. Specific Exclusions (Exclusions other than as mentioned under Section 3 (i) above)

i. Alcoholic Pancreatitis

ii. Admission primarily for long term confinement or rehabilitative care where there is no active line of treatment in case of psychiatric/ mental disorders

iii. Parkinsons and Alzheimer's disease

iv. General debility or exhaustion or run-down condition

v. Congenital External Diseases, defects or anomalies

vi. Stem cell implantation or surgery (except for haematological conditions); or growth hormone therapy;

vii. Sleep-apnoea

viii. Charges related to Peritoneal Dialysis (CAPD), including supplies (except during per-post hospitalization period)

ix. Venereal disease, sexually transmitted disease or illness;

x. All preventive care, vaccination including inoculation and immunisations;

xi. Dental treatment or surgery of any kind unless as a result of Accidental Bodily Injury/Illness/Disease to natural teeth and also requiring hospitalization

xii. Any non-allopathic treatment

xiii. Any other Critical illness which is not listed (applicable for Section B2 only)

xiv. Any Critical Illness/Disability based on a Diagnosis made by the Insured

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or his/her Immediate Family Member or anyone who is living in the same household as the Insured or by a herbalists, acupuncturist or any other non-traditional health care provider.

4. Non-Medical Exclusions

i. War or any act of war, invasion, act of foreign enemy, civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, ionising radiation.

ii. Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.

iii. Intentional self-injury or attempted suicide while sane or insane.

iv. Any claim incurred after date of proposal/enrolment form and before issuance of policy/Certificate of Insurance where there is change in health status of the member and the same is not communicated to us.

Section 4 – General Terms and Clauses

Specific Terms and Clauses

1. Condition Precedent

i. Condition Precedent means a policy term or condition upon which the Insurer's liability under the policy is conditional upon.

ii. The fulfilment of the terms and conditions of this Policy (including the payment of premium by the due dates mentioned in the Schedule) insofar as they relate to anything to be done or complied with by You or any Insured Person shall be conditions precedent to Our liability.

iii. The premium for the policy will remain the same for the policy period as mentioned in the policy schedule.

iv. No change in this Policy shall be valid unless a valid endorsement is passed in the policy.

v. In case of master policy, the policy period would be 1 year however the period of certificate of insurance would be from 1 year to 5 years. Details of the policy term applicable to individual certificate of insurance would be clearly stated in Your certificate of insurance.

2. Insured Person

i. Only those persons named as an Insured Person in the Policy Schedule/Certificate of insurance shall be covered under this Policy.

ii. Mid-term addition of Primary Insured and Dependents:

Mid-term addition of Primary insured and dependents shall be allowed in the event of following:

1. Intimation is given to Us by a defined & agreed date and shall be subjected to IRDAI (Insurance Regulatory and Development Authority of

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India) group insurance policies guidelines, 2005 and any subsequent amendments as published by the Regulator from time to time

2. Requisite premium has been paid to Us.

3. All existing dependents must be covered along with the Primary Insured and the addition of Dependents shall be allowed only in the event of:

   - Children in the event of childbirth
   - Spouse in the event of marriage

If any of the conditions (1) & (2) above are not met, coverage will commence only from the date of intimation to Us or premium remittance whichever is later.

iii. Mid-term deletion of Primary Insured and Dependents:

a. The coverage shall automatically expire from the date the insured person exits the scheme.

b. In case of refund of premium being generated on the Policy due to deletion of Insured Persons, the same will be refunded or adjusted accordingly against the future premium installments due on the Policy.

3. Entire Contract

i. This Policy, its Schedule, endorsement(s), proposal/enrolment form constitutes the entire contract of insurance. No change in this policy shall be valid unless approved by Us and such approval be endorsed hereon.

ii. This Policy and the policy Schedule/ Certificate of insurance shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear such meaning wherever it may appear.

4. Fraud

i. We will not be liable to pay under the policy if any claim is in any manner dishonest or fraudulent or is supported by any dishonest or fraudulent means or devices, whether by You or any Insured Person or anyone acting on behalf of You or an Insured Person.

ii. In the event of fraud done by a primary insured person/his dependents, the certificate of insurance shall be terminated ab initio without any premium refund.

5. Mis-representation, or non-disclosure of material facts

We will not be liable to pay under the policy if any Mis-representation or non-disclosure of material facts is noted at the time of claim or otherwise, whether by You or any Insured Person or anyone acting on behalf of You or an Insured Person, & certificate of insurance shall be void ab-initio without any premium refund.

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6. Renewal conditions

i. The Policy is ordinarily renewable lifelong unless You or any one acting on behalf of You has acted in a fraudulent manner or any misrepresentation under or in relation to this policy or renewal of the Policy poses a moral hazard.

ii. The Policy/Certificate of Insurance may be renewed by upfront payment of the total premium specified by Us, which premium shall be at Our premium rate in force at the time of renewal. Premium rates are subject to revision at the time of renewal depending upon overall performance of the product and / or the claim experience under the policy.

iii. Your premium will also change if you move into a higher age group, change in Sum Insured, change the term or change the plan.

iv. The Policy may be renewed by mutual consent and in such event the renewal premium should be paid to Us on or before the date of expiry of the Policy or within the grace period of 30 days from the expiry of the Policy. Grace Period of 30 days for renewing the Policy/Certificate of Insurance is provided under this Policy. If the renewal is made within the grace period, continuity of benefits will be allowed. We will not be liable to pay for any claim under this policy that occur during the grace Period. Grace period at the time of renewal is applicable for all policies irrespective of premium payment frequency.

v. We, however, are not bound to give notice that it is due for renewal. Unless renewed as herein provided, this Policy or Certificate of Insurance shall terminate at the expiration of the period for which premium has been paid.

vi. Any revision / modification in the product will be done with the approval of the Insurance Regulatory and Development Authority of India (IRDAI) and will be intimated to You at least 3 months in advance.

7. Option to Migrate

We will offer the Insured Person an option to migrate to similar health insurance Policy with Us provided that:

i. Insured Person has been insured with Us under this Policy

ii. This option for migration to similar health insurance policy shall be exercised by the Insured Person only when he / she is at the end of specified exit age and certainly at the time of renewal only.

iii. Insured Person will be offered continuity of coverage & suitable credits, if any, for all the previous policy years, provided the policy has been maintained without a break.

8. Withdrawal of Policy

i. In the likelihood of this product being withdrawn in future, we will intimate you about the same 3 months prior to expiry of the policy.

ii. You will have the option to migrate to similar health insurance product

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available with us at the time of renewal with all the accrued continuity benefits such as waiver of waiting period etc. provided the policy has been maintained without a break as per portability guidelines issued by IRDAI.

9. Portability

We shall allow portability under this policy which shall be in accordance with portability guidelines as defined by the IRDAI from time to time.

10. Notices

Any notice, direction or instruction under this Policy shall be in writing and if it is to:

a. Any Insured Person, then it shall be sent to You at Your address specified in the Schedule to this Policy and You shall act for all Insured Persons for these purposes.

b. Us, it shall be delivered to Our address specified in the Schedule to this Policy. No insurance agents, brokers or other person or entity is authorised to receive any notice, direction or instruction on Our behalf unless We have expressly stated to the contrary in writing.

11. Termination

i. You may terminate this Policy / Certificate of Insurance at any time by giving Us written notice, and the Policy/Certificate of Insurance shall terminate when such written notice is received.

ii. In case of master policy, each Certificate of Insurance will get terminated on the earliest of the following dates:

a. The date You or We cancel the Certificate of Insurance

b. Insured Person opts out of the scheme

c. Foreclosure/closure of loan availed (wherever applicable)

The insured person has an option to continue the cover till the expiry of the Certificate of Insurance in case of condition (c) as mentioned above.

In the event of foreclosure/closure of entire loan where certificate of insurance is terminated, we shall refund proportionate premium provided there are no claims under the policy. In case of prepayment of the entire loan and upon making any refund of premium under this Policy in accordance with the terms and conditions hereof in respect of the Insured person, the cover in respect of the Insured person shall forthwith terminate and the Company shall not be liable hereunder.

iii. If no claim has been made under the Policy/Certificate of Insurance, then We will refund premium in accordance with the short rate table below:

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	Year				
Length of time Policy in force	1	2	3	4	5
Upto 1 Month	85.00%	87.50%	91.50%	96%	98%
>1 month & Upto 3 Months	70.00%	75.00%	88.50%	93%	95%
>3 months & Upto 6 Months	50.00%	62.50%	75%	78%	80%
>6 months & Upto 12 Months	Nil	50.00%	66.50%	70%	72%
>12 months & Upto 15 Months	Not Applicable	30%	50%	52%	54%
>15 months & Upto 18 Months	Not Applicable	20%	41.50%	43%	44%
>18 months & Upto 24 months	Not Applicable	Nil	33%	35%	36%
>24 months & Upto 30 months	Not Applicable	Not Applicable	15%	20%	30%
> 30 months & Up to 36 months	Not Applicable	Not Applicable	Nil	15%	25%
> 36 months & up to 42	Not Applicable	Not Applicable	Not Applicable	Nil	20%
Exceeding 42 months	Not Applicable	Not Applicable	Not Applicable	Nil	Nil

iv. We may at any time terminate this Policy /Certificate of insurance on grounds of misrepresentation, fraud, non-disclosure of material facts or non-cooperation by You or any Insured Person or anyone acting on Your behalf or on behalf of an Insured Person by sending an endorsement to Your address shown in the Schedule to this Policy.

v. 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.

vi. In the event the policy/Certificate of insurance is terminated on grounds of non-cooperation of the Insured Person the premium shall be computed in accordance with Our short rate table for the period the Policy has been in force, upon 15 days notice by sending an endorsement to Your address shown in the Schedule provided no claim has occurred up to the date of termination. In the event a claim has occurred in which case there shall be no return of premium.

12. Free Look Period

i. You have a period of 15 days from the date of receipt of the Policy / Certificate of Insurance 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/ Certificate of insurance stating the

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reasons for cancellation.

ii. You will be refunded the premium paid by You after adjusting the stamp duty charges and proportionate risk premium.

iii. You can cancel Your Policy/Certificate of insurance only if You have not made any claims under the Policy.

iv. All Your rights under this Policy will immediately stand extinguished on the free look cancellation of the Policy.

v. Free look provision is not applicable and available at the time of renewal of the Policy.

Section 5 – Claims Procedure and Claims Payment

This section explains about the procedures involved to file a valid claim by the insured person and processes related in managing the claim by Us. All the procedures and processes such as notification of claim, supporting claim documents and related claim terms of payment are explained in this section.

1. Notification of Claim

	Treatment, Consultation or Procedure:	**We must be informed:**
1	If any treatment for which a claim may be made and that treatment requires planned Hospitalisation:	At least 48 hours prior to the Insured Person's admission.
2	If any treatment for which a claim may be made and that treatment requires emergency Hospitalisation	Within 24 hours of the Insured Person's admission to Hospital.

Failure to furnish such intimation within the time required shall not invalidate nor reduce any claim if You can satisfy us that it was not reasonably possible for You to give proof of such delay within such time. The Company may relax these timelines only in special circumstances and for the reasons beyond the control of the insured.

2. Supporting Documentation & Examination

i. You or someone claiming on Your behalf shall provide Us with documentation, medical records and information We may request to establish the circumstances of the claim, its quantum or Our liability for the claim within 15 days or earlier of Our request or the Insured Person's discharge from Hospitalisation or completion of treatment.

ii. Failure to furnish such evidence within the time required shall not invalidate nor reduce any claim if you can satisfy us that it was not reasonably possible for you to give proof within such time.

iii. We may accept claims where documents have been provided after a delayed interval only in special circumstances and for the reasons beyond the control of the Insured Person.

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iv. Such documentation will include the following:

I. Our claim form, duly completed and signed for on behalf of the Insured Person.We, upon receipt of a notice of claim, will furnish Your representative with such forms as We may require for filing proofs of loss or you may download the claim form from our Web site www.tataaig.com

II. Regulatory requirements as amended from time to time, currently mandatory NEFT (to enable direct credit of claim amount in bank account) and KYC (recent ID/Address proof and photograph) requirements.

III. Current loan account statement

IV. In addition to the documents mentioned above (I - III), following documents are applicable for:

Section B1 – Inpatient Hospitalization Benefit:

a. All medical reports, case histories, investigation reports, indoor case papers/ treatment papers (if available) discharge summaries.

b. A precise diagnosis of the treatment for which a claim is made.

c. Treating doctor's certificate regarding missing information in case histories e.g. Circumstance of injury and Alcohol or drug influence at the time of accident, if available.

d. Copy of MLC (Medico legal case) records, if carried out and FIR (First information report) if registered, in case of claims arising out of an accident and available with the claimant.

Section B2 – Critical Illness:

a. Medical Certificate and investigation report confirming the diagnosis of Critical Illness/ Surgery

b. Copy of complete medical records such as Hospital Discharge card/Summary, Indoor case papers along with the diagnostic Laboratory & radiological investigation reports including CT Scan, MRI & USG report with plates, wherever applicable and done

c. A precise diagnosis of the treatment for which a claim is made

d. i) Previous and subsequent consultation letter, medical records and prescriptions related to illness/ surgery.

ii) In the event insured person suffers from one of the following critical illness and where death occurs within 3 months of such diagnosis, but after confirmed diagnosis of the illness, then the modified condition as mentioned below shall be applicable to the respective Critical Illness. However, this is subject to fulfilment of other conditions as laid down under definitions of respective critical illness and for the period for which the Insured survived the diagnosis of Critical Illness

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Critical Illness (Section 1-B2)	Name of Critical Illness	Modified Condition applicable
C9	Stroke resulting in permanent symptoms	Evidence of permanent neurological deficit lasting for the period for which the Insured person survived
C10	Permanent Paralysis of Limbs	Evidence of existence of paralysis for the period for which the Insured person survived
C11	Parkinson's disease	Medical documentation of conditions (i-vi) for the period the Insured Person survived
C13	End Stage Lung Failure	Condition (i) wherein FEV1 test results for the period the Insured Person survived

e. Copy of MLC (Medico legal case) records, if carried out and FIR (First information report) if registered, in case of claims arising out of an accident and available with the claimant.

f. Recent Photograph

g. Death certificate/Death summary, if applicable

h. Post Mortem report (wherever applicable & conducted)

i. Legal heir/succession certificate, if applicable & available

Section B3 – Personal Accident:

1. Accidental Death/Disappearance:

a. Attending Physician Statement if applicable

b. Original \Nominee Attested copy of Death Certificate

c. In the event of disappearance where death certificate is not issued, we would require missing compliant report filed with the police authorities or police inquest/ investigation report.

d. Copy of death summary, all previous medical records, if hospitalised / treatment given.

e. Copy of Post Mortem report, if applicable and conducted

f. Copy of FIR, if filed / Panchanama, if conducted

g. Recent Photograph

h. Nominee-attested copy of news paper cutting, if any.

2. Permanent Total Disability:

a. Attending Doctor Statement if applicable

b. certificate from Civil Surgeon or Medical Superintendent/Dean of government hospital/medical board, confirming the Disability percentage / period and prognosis

c. Copy of Admission/ discharge card with complete medical records

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including relevant Investigation/ Lab reports (X-Ray, MRI etc.)

d. Copy of FIR, if filed / Panchanama, if conducted

e. Photograph of injured area, if required

f. Self-attested copy of news paper cutting, if any.

V. For any claim related assistance, notification of claim and submission of claim related documents, insured person can contact Us through:

- Website : www.tataaig.com
- Toll Free No.: 1800 266 7780/ For Senior Citizens: 1800 22 9966
- Courier:

Accident & Health Claims Department (EMI Protect policy)

Tata AIG General Insurance Co. Ltd.

7th and 8th Floor, Romell Tech Park, Cama Industrial Estate, Western Express Highway, Goregaon(E), Mumbai, Maharashtra 400063

We at our own expense, shall have the right and opportunity to examine insured persons through an Independent Medical Practitioner whose details will be notified to insured person when and as often as We may reasonably require during the pendency of a claim hereunder.

3. Claims Payment

i. We shall be under no obligation to make any payment under this Policy unless We have received all premium payments in full in time and We have been provided with the documentation and information requested to establish the circumstances of the claim, its quantum or Our liability for it, and unless the Insured Person has complied with his obligations under this Policy.

ii. We will make payment to You or in case of death of insured person to the Insured person's beneficiary or legal representative under this Policy. Your receipt shall be considered as a complete discharge of Our liability against any claim under this Policy.

iii. In the event of Your death, We will make payment to the Nominee (as named in the Schedule).

iv. We shall settle or reject a claim, as may be the case, within 30 days of the receipt of the last 'necessary' document

v. We shall make the payment of claim that has been admitted as payable by Us under the Policy terms and conditions within 30 days from the date of receipt of last necessary document.

vi. 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. For the purpose of this clause, 'bank rate' shall mean bank rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due.

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vii. All claims will be settled in accordance with the applicable regulatory guidelines, including IRDAI (Protection of Policyholders Interests Regulation), 2017.

Section 6 - Dispute Resolution

The Company is committed to extend the best possible services to its customers. However, if **you** are not satisfied with **our** services and wish to lodge a complaint, please feel free to call **our** 24X7 Toll free number 1800-266-7780or **you** may email to the customer service desk at customersupport@tataaig.com. Senior citizens can call our dedicated line at 1800 22 9966.

Nodal Officer

Please visit **our** website at www.tataaig.com to know the contact details of the nodal officer for **your** servicing branch.

After investigating the grievance internally and subsequent closure, **We** will send **Our** response within a period of 10 days from the date of receipt of the complaint by the Company or its office in Mumbai. In case the resolution is likely to take longer time, **We** will inform **you** of the same through an interim reply.

Escalation Level 1

For lack of a response or if the resolution still does not meet **your** expectations, **you** can write to manager.customersupport@tataaig.com. After investigating the matter internally and subsequent closure **We** will send **Our** response within a period of 8 days from the date of receipt at this email id.

Escalation Level 2

For lack of a response or if the resolution still does not meet **your** expectations, **you** can write to the Head - Customer Services at head.customerservices@tataaig.com. After examining the matter, **We** will send **you** our final response within a period of 7 days from the date of receipt of **your** complaint on this email id.

Within 30 days of lodging a complaint with **us**, if **you** do not get a satisfactory response from **us** and **you** wish to pursue other avenues for redressal of grievances, **you** may approach Insurance Ombudsman appointed by IRDAI under the Insurance Ombudsman Scheme.

Annexure A

NAMES OF OMBUDSMAN AND ADDRESSES OF OMBUDSMAN CENTRES

SN	Centre	Address & Contact
1	Ahmedabad	Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in

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SN	Centre	Address & Contact
2	Bengaluru	Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in
3	Bhopal	Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Email: bimalokpal.bhopal@cioins.co.in
4	Bhubaneswar	Office of the Insurance Ombudsman, 62, Forest park, Bhubaneswar – 751 009. Tel.: 0674 - 2596461 /2596455 Email: bimalokpal.bhubaneswar@cioins.co.in
5	Chandigarh	Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Email: bimalokpal.chandigarh@cioins.co.in
6	Chennai	Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Email: bimalokpal.chennai@cioins.co.in
7	New Delhi	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@cioins.co.in
8	Guwahati	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in
9	Hyderabad	Office of the Insurance Ombudsman, 6-2-46, 1st floor, “Moin Court”, Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 Email: bimalokpal.hyderabad@cioins.co.in

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SN	Centre	Address & Contact
10	Jaipur	Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@cioins.co.in
11	Ernakulam	Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Email: bimalokpal.ernakulam@cioins.co.in
12	Kolkata	Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 7th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Email: bimalokpal.kolkata@cioins.co.in
13	Lucknow	Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Email: bimalokpal.lucknow@cioins.co.in
14	Mumbai	Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 69038821/23/24/25/26/ 27/28/28/29/30/31 Email: bimalokpal.mumbai@cioins.co.in
15	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: bimalokpal.noida@cioins.co.in
16	Patna	Office of the Insurance Ombudsman, 2nd Floor, North wing, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: bimalokpal.patna@cioins.co.in
17	Pune	Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@cioins.co.in

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For updated list and details of Insurance Ombudsman Offices, please visit website http://www.cioins.co.in/ombudsman.html

Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

"Insurance is the subject matter of the solicitation". For details on benefits, exclusions, limitations, terms & conditions, please refer sales brochure/ policy wordings carefully, before concluding a sale."

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