

CRITICAL ILLNESS INSURANCE

Suitability

- This policy covers persons in the age group of 5 years onwards. The maximum entry age is 65 years.
- No Cover ceasing age under this policy.
- The policy will be issued for a ½ year(s) period.
- This policy can be issued to an individual only on individual Sum Insured basis.

Policy Period

The policy will be issued for 1 year /2 years period

Salient Features & Benefits

We will pay the Sum Insured as lumpsum on first diagnosis of any one of the following Critical Illness, provided that the Insured Person survives a period of 30 or 15 days as opted and mentioned on the Policy Schedule from the date of the first diagnosis.

Critical Illness covered	Silver	Gold	Platinum
1. Heart Attack (Myocardial Infarction)	✓	✓	✓
2. Coronary Artery Bypass Surgery	✓	✓	✓
3. Stroke	✓	✓	✓
4. Cancer	✓	✓	✓
5. Kidney Failure	✓	✓	✓
6. Major Organ Transplantation	✓	✓	✓
7. Multiple Sclerosis	✓	✓	✓
8. Paralysis	✓	✓	✓
9. Aorta Graft Surgery		✓	✓
10. Primary Pulmonary Arterial Hypertension		✓	✓
11. Heart Valve Replacement		✓	✓
12. Benign Brain Tumor			✓
13. Parkinson's Disease			✓
14. Alzheimer's Disease			✓
15. End Stage Liver Disease			✓

Condition for Payment for Payment means (i) the date of confirmed diagnosis and defined severity/event, if any; or (ii) date of undergoing specified surgery; as applicable to a particular Critical Illness.

The policy shall terminate on the occurrence of the first critical illness and you shall receive the sum insured as per applicable guidelines and the policy shall cease with no subsequent renewals for the insured.

Sum Insured would Range from: Rs. 100,000 to Rs. 50, 00,000.

Key Definitions

Activities of Daily Living refer to daily self care activities within an individual's place of residence, in outdoor environment or both.

The Activities of Daily Living are:

- Bathing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa;
- Mobility: the ability to move indoors from room to room on level surfaces;
- Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- Feeding: the ability to feed oneself once food has been prepared and made available.

Pre-existing Condition means any condition, ailment or injury or related condition(s) for which You had signs or symptoms, and / or were diagnosed, and / or received medical advice/ treatment, within 48 months prior to the first policy issued by the insurer.

Survival Period means the period after an insured event that the insured person has to survive before a claim becomes valid.

Critical Illness means any one of the following illnesses or conditions that occurs or manifests itself during the policy period as a first incidence and the insured survives the defined survival period

- Cancer of specified severity:
A malignant tumour characterised by the uncontrolled growth and spread of malignant cells with invasion & destruction of normal tissue. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukaemia, lymphoma and sarcoma.

The following are excluded:

- All tumours which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behaviour, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN-2 and CIN-3.
- Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- Malignant melanoma that has not caused invasion beyond the epidermis;
- All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- Chronic lymphocytic leukaemia less than RAI stage 3
- Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- All Gastro-Intestinal Stromal Tumours histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;

- Open Chest CABG:

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:

- Angioplasty and/or any other intra-arterial procedures

- Myocardial Infarction (First Heart Attack- Of Specified 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 shall be evidenced by all of the following criteria:

- ▲ history of typical clinical symptoms consistent with the diagnosis of Acute Myocardial Infarction (for e.g. typical chest pain).
- ▲ new characteristic electrocardiogram changes
- ▲ elevation of infarction specific enzymes, Troponins or other biochemical markers

II. The following are excluded:

- Other acute Coronary Syndromes
- Any type of angina pectoris
- ▲ rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

- Kidney Failure Requiring Regular 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.

- Major Organ Transplantation:

The actual undergoing of transplantation of;
One of the following human organs : heart, lung, liver, pancreas, kidney, that resulted from irreversible end stage failure of the relevant organ or.

Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist Medical Practitioner.

The following are excluded:

- Other stem cell transplants
- Where only islets of langerhans are transplanted

- Multiple Sclerosis With Persisting Symptoms:

- The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:
 - investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
 - there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.

II. Neurological damage due to SLE is excluded.

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- vii) 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.
- viii) 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
Transient ischemic attacks (TIA)
Traumatic injury of the brain
Vascular disease affecting only the eye or optic nerve or vestibular functions.
- ix) Surgery of Aorta:
The actual undergoing of medically necessary surgery for a disease of the aorta needing excision and surgical replacement of the diseased aorta with a graft. For the purpose of this definition aorta shall mean the thoracic and abdominal aorta but not its branches. Traumatic injury of the aorta is excluded.
- x) 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 Catheterization. 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.
- xi) Open Heart Replacement or Repair of Heart Valves:
The actual undergoing of Open heart valve surgery is to replace or repair one or more heart valves, as consequences of defects in, abnormalities of, or disease affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by 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.
- xii) Benign Brain Tumour
I. Benign brain tumor is defined as a life threatening, non-cancerous tumor in the brain, cranial nerves or meninges within the skull. The presence of the underlying tumor must be confirmed by imaging studies such as CT scan or MRI.
II. This brain tumor must result in at least one of the following and must be confirmed by the relevant medical specialist.
a. Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
b. Undergone surgical resection or radiation therapy to treat the brain tumor.
III. The following conditions are excluded:
Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas, abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.
- xiii) Parkinson's Disease
I. The occurrence of Parkinson's Disease where there is an associated Neurological Deficit that results in Permanent Inability to perform independently at least three of the activities of daily living as defined below.
1. Transfer: Getting in and out of bed without requiring external physical assistance
2. Mobility: The ability to move from one room to another without requiring any external physical assistance
3. Dressing: Putting on and taking of all necessary items of clothing without requiring any external physical assistance
4. Bathing/Washing: The ability to wash in the bath or shower (including getting in and out of the bath or shower) or wash by other means
5. Eating: All tasks of getting food into the body once it has been prepared
II. Parkinson's disease secondary to drug and/or alcohol abuse is excluded.

- xiv) Alzheimer's Disease
Clinically established diagnosis of Alzheimer's Disease (presenile dementia) resulting in a permanent inability to perform independently three or more activities of daily living – bathing, dressing/undressing, getting to and using the toilet, transferring from bed to chair or chair to bed, continence, eating/drinking and taking medication – or resulting in need of supervision and permanent presence of care staff due to the disease. These conditions have to be medically documented for at least 3 months.
- xv) End Stage Liver Failure
I. Permanent and irreversible failure of liver function that has resulted in all three of the following:
a. Permanent jaundice; and
b. Ascites; and
c. Hepatic encephalopathy.
II. Liver failure secondary to drug or alcohol abuse is excluded.

Portability:

The Insured Person will have the option to port the Policy to other insurers by applying to such Insurer to port the entire policy along with all the members of the family, if any, at least 45 days before, but not earlier than 60 days from the policy renewal date as per IRDAI guidelines related to Portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance policy with an Indian General/Health insurer, the proposed Insured Person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on portability.

For Detailed Guidelines on Portability, kindly refer the link https://www.irdai.gov.in/ADMINCMS/cms/frmGuidelines_Layout.aspx?page=PageNo3987

Free Look Period

The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the Policy.

The Insured Person shall be allowed free look period of fifteen days from date of receipt of the policy document to review the terms and conditions of the policy, and to return the same if not acceptable.

If the Insured has not made any claim during the Free Look Period, the insured shall be entitled to

- a refund of the premium paid less any expenses incurred by the Company on medical examination of the Insured Person and the stamp duty charges or
- where the risk has already commenced and the option of return of the Policy is exercised by the Insured Person, a deduction towards the proportionate risk premium for period of cover or
- Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

Exclusions

Key Exclusions

- Waiting period of first 90 days will apply to all claims unless the Insured Person has been insured under this policy continuously and without any break in the previous Policy Year
48 months waiting period for all Pre-existing Conditions declared and/or accepted at the time of application
- War or any act of war, invasion, act of foreign enemy, (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, radiation of any kind.
- Insured Person committing or attempting any breach of the law with criminal intent or Arising out of or as a result of any act of self-destruction or self inflicted injury, attempted suicide or suicide.
- Insured Person's participation or involvement in Adventure Sports
- Involvement in naval, military or air force operations.
- The abuse or the consequences of the abuse of tobacco, intoxicants or hallucinogenic substances including all forms of narcotic drugs and alcohol unless prescribed by Medical Practitioner
- Lymphomas in brain, Kaposi's sarcoma, tuberculosis.
- Any treatment arising from pregnancy (including voluntary termination), miscarriage, maternity or birth (including caesarean section), congenital external defects or anomalies.

Claim Procedure:

HDFC ERGO General Insurance Company will process and settle all claims under this policy and the final decision on any claim solely rests with HDFC ERGO General Insurance Company Limited.

Critical Illness

- You must intimate us of any event or occurrence that may give rise to a

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claim under this Policy within 14 days of the diagnosis of the first occurrence of the Critical Illness.

- You must submit a duly filled claim form along with specified documents within 45 days of completion of survival period for the Critical Illness against which the claim is made.
- Any additional information requested must be submitted within 10 days of Our request.

Renewal of Policy

The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the insured person.

- The Company shall endeavour to give notice for Renewal. However, the Company is not under obligation to give any notice for Renewal.
- Renewal shall not be denied on the ground that the Insured Person had made a claim or claims in the preceding policy years.
- Request for Renewal along with requisite premium shall be received by the Company before the end of the policy period.
- At the end of the policy period, the Policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without Break in Policy. Coverage is not available during the Grace Period.
- No loading shall apply on renewals based on individual claims experience.
- Change of Sum Insured** – Change in Sum Insured can be only done at the time of renewal subject to underwriting guidelines. In case of enhancement in the basic sum insured the waiting period will apply afresh in relation to the amount by which the basic sum insured has been enhanced. However the quantum of enhancement shall be at sole discretion of underwriting. In case of a claim during the waiting period on the enhanced sum insured, the basic sum insured would be paid and the policy will cease with no subsequent renewals

Tax Benefit:

The premium amount paid under this policy qualifies for deduction under Section 80D of the Income Tax Act.

Requirement

- Completed proposal form
- Medical Tests depending on the age and sum insured

Pre-Policy Check-up:

Pre-Acceptance Medical Tests at our network depending on the age and sum insured. We will reimburse 50% of the expenses incurred per insured person on the acceptance of the proposal. The medical reports are valid for a period of 90 days from the date of Pre-Policy Checkup.

Critical Illness				
Sum Insured (in ₹ Lacs)				
Age (Yrs)	1 to 2	2.5 to 5	7.5 to 10	10 to 50
18-45	Nil	ME, FBS, ECG	ME, RUA, FBS, ECG, TC, CBC	ME, RUA, FBS, CBC, TMT, HbA1c, SGOT, Sr Creat, Lipids, X-Ray Chest, HBsAg, PSA (males), USG Abd (females)
46-55	ME, FBS, ECG	ME, RUA, FBS, CBC, TMT, Lipids	ME, RUA, FBS, CBC, TMT, HbA1c, SGOT, Sr Creat, Lipids, PSA (males), USG Abd (females)	ME, RUA, FBS, CBC, Lipids, TMT, HbA1c, LFT, RFT, X-Ray Chest, HBsAg, PSA (males), USG Abd (females)
>55	ME, RUA, FBS, ECG	ME, RUA, FBS, CBC, Lipids, TMT, SGOT, Sr Creatinine	ME, RUA, FBS, CBC, Lipids, TMT, HbA1c, LFT, RFT, PSA (males), USG Abd (females)	ME, RUA, FBS, CBC, Lipids, TMT, HbA1c, LFT, RFT, X-Ray Chest, HBsAg, PSA (males), USG Abd (females)

ME = Medical Examination (Report); CBC = Complete Blood Count; ECG = Electro Cardio Gram; FBS = Fasting Blood Sugar; Lipids = Lipid Profile; Sr Creatinine = Serum Creatinine; LFT = Liver Function Test; PSA = Prostate Specific antigen; RFT = Renal Function Test; RUA = Routine Urine Examination; TMT = Treadmill Test; USG = Ultrasonogram

Rating Schedule

The premium varies depending of several factors including the age of the persons proposed to be covered, and the Sum insured.

Premium Rates

Annual Premium table [Per mille SI] excluding Service Tax - 30 days survival period

Age Bands	Platinum	Gold	Silver
5-17	1.10	1.00	0.90
18-25	2.30	2.15	2.00
26-30	3.50	3.00	2.50
31-35	4.00	3.50	3.00
36-40	7.00	6.00	5.00
41-45	9.50	8.50	7.50
46-50	15.25	13.75	12.25
51-55	25.75	23.25	21.00
56-60	40.00	36.00	32.00
61-65	68.00	61.00	54.00
66-70	116.00	104.00	92.00
>70	255.50	229.00	203.00

2 Year Premium table [Per mille SI] excluding Service Tax - 30 days survival period

Age Bands	Platinum	Gold	Silver
5-17	2.18	1.98	1.78
18-25	4.55	4.26	3.96
26-30	6.93	5.94	4.95
31-35	7.92	6.93	5.94
36-40	13.86	11.88	9.90
41-45	18.81	16.83	14.85
46-50	30.20	27.23	24.26
51-55	50.99	46.04	41.58
56-60	79.20	71.28	63.36
61-65	134.64	120.78	106.92
66-70	229.68	205.92	182.16
>70	505.89	453.42	401.94

Annual Premium table [Per mille SI] excluding Service Tax - 15 days survival period

Age Bands	Platinum	Gold	Silver
5-17	1.27	1.15	1.04
18-25	2.65	2.47	2.30
26-30	4.03	3.45	2.88
31-35	4.60	4.03	3.45
36-40	8.05	6.90	5.75
41-45	10.93	9.78	8.63
46-50	17.54	15.81	14.09
51-55	29.61	26.74	24.15
56-60	46.00	41.40	36.80
61-65	78.20	70.15	62.10
66-70	133.40	119.60	105.80
>70	293.83	263.35	233.45

2 Year Premium table [Per mille SI] excluding Service Tax - 15 days survival period

Age Bands	Platinum	Gold	Silver
5-17	2.50	2.28	2.05
18-25	5.24	4.90	4.55
26-30	7.97	6.83	5.69
31-35	9.11	7.97	6.83
36-40	15.94	13.66	11.39
41-45	21.63	19.35	17.08
46-50	34.72	31.31	27.89
51-55	58.63	52.94	47.82
56-60	91.08	81.97	72.86
61-65	154.84	138.90	122.96
66-70	264.13	236.81	209.48
>70	581.77	521.43	462.23

- The premium is mentioned as Annual Premium and 2 Year Premium - Per mille Sum Insured
- All premium rates are exclusive of service tax
- Premium rates can be revised subject to approval from IRDA

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- The premium for the policy will remain the same for the Policy Period mentioned in the policy schedule.
- Please note that your premium at renewal may change due to a change in your age or changes in the applicable tax rate.

Lodgings

- We may apply a risk loading on the premium payable (based upon the declarations made in the proposal form and the health status of the persons proposed for insurance). The maximum risk loading applicable for an individual shall not exceed above 100% per diagnosis/ medical condition and an overall risk loading of over 150% per person. These loadings are applied from Commencement Date of the policy including subsequent renewal (s) with us or on the receipt of the request of increase in sum insured (for the increased Sum Insured).
- We will inform you about the applicable risk loading through a counter offer letter. You need to revert to us with consent and additional premium (if any), within 7 days of the issuance of such counter offer letter. In case, you neither accept the counter offer nor revert to us within 7 days, we shall cancel your application and refund the premium paid within next 7 days.
- Please note that we will issue policy only after getting your consent.
- We will not apply any additional loading on Your policy premium at Renewal based on claim experience in Your Policy.

Section 41 of Insurance Act 1938 (Prohibition of Rebates):

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take 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 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 prospectus or tables of the insurers.
2. Any person making default in complying with the provision of this section shall be punishable with fine which may extend to ₹10 Lakhs.

IRDA REGULATION NO 5 - This policy is subject to regulation 5 of IRDA (Protection of Policyholder's Interests) Regulation.

Disclaimer

This is only a summary of the product features. The actual benefits available are as described in the policy, and will be subject to the policy terms, conditions and exclusions. Please seek the advice of your insurance advisor if you require any further information or clarification.

Note: Policy Term and Conditions & Premium rates are subject to change with prior approval from IRDA

Schedule of Benefits.

Plan	Silver	Gold	Platinum
Sum Insured	As mentioned in the Schedule		
Critical Illness covered			
1. Heart Attack (Myocardial Infarction)	✓	✓	✓
2. Coronary Artery Bypass Surgery	✓	✓	✓
3. Stroke	✓	✓	✓
4. Cancer	✓	✓	✓
5. Kidney Failure	✓	✓	✓
6. Major Organ Transplantation	✓	✓	✓
7. Multiple Sclerosis	✓	✓	✓
8. Paralysis	✓	✓	✓
9. Aorta Graft Surgery		✓	✓
10. Primary Pulmonary Arterial Hypertension		✓	✓
11. Heart Valve Replacement		✓	✓
12. Benign Brain Tumor			✓
13. Parkinson's Disease			✓
14. Alzheimer's Disease			✓
15. End Stage Liver Disease			✓