

### CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

This document provides key information about your policy. You are also advised to go through your policy document.

*Please Note: Benefits opted and mentioned in the policy schedule/certificate of insurance will only be applicable.*

S. No.	Title	Description  (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number		
1	Name of Insurance Product / Policy	Home Credit Assure Shakti	NA		
2	Policy number	Policy number shall be as on Policy Schedule issued post policy issuance	NA		
3	Type of Insurance Product / Policy	Both Indemnity and Benefit	NA		
4	Sum Insured	<ul style="list-style-type: none"><li>Individual Sum Insured - Where each member has a separate sum insured under the policy)</li><li>Floater Sum Insured - Where all members under the policy have a single sum insured limit which may be utilized by any or all members</li></ul> <u>Note:</u> For complete details of Sum Insured applicability, please refer to your Certificate of Insurance	NA		
5	Policy Coverage (What the policy covers?)	<b>Base Covers:</b> Coverages in force for the Insured Persons shall be as opted and as specified in Policy Schedule / Certificate of Insurance  Expenses in respect of:			
		<b>1. HOME BUILDING AND CONTENTS COVER:</b> Indemnity in case of physical loss or damage, or destruction caused to Insured Property by the following named perils during the Policy Period. <table><tr><td>Sr.no</td><td>Insured Events</td></tr><tr><td></td><td></td></tr></table>	Sr.no	Insured Events	
Sr.no	Insured Events				

		1	Fire		
		2	Explosion or Implosion		
		3	Lightning i.e. damages caused by lightning, whether fire results or not.		
		4	Earthquake, volcanic eruption, or other convulsions of nature		
		5	Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado		
		6	Tsunami, Flood and Inundation		
		7	Subsidence of the land on which Your Home Building stands, Landslide, Rockslide, Avalanche		
		8	Bush fire, Forest fire, Jungle fire		
		9	Impact damage of any kind, i.e., damage caused by impact of, or collision caused by any external physical object (e.g. vehicle, falling trees, aircraft, wall etc.)		
		10	Missile testing operations i.e. conducted by the Government of India		
		11	Riot, Strikes, Malicious Damages		
		12	Bursting or overflowing of water tanks, apparatus and pipes.		
		13	Leakage from automatic sprinkler installations.		
		14	Theft within 7 (seven) days from the occurrence of and proximately caused by any of the above Insured Events.		
		15	Loan value cover for Flats & Apartment		
		16	Costs compelled by Municipal Regulations		
		17	Smoke Damage		

		<b>2. BURGLARY AND HOUSEBREAKING INCLUDING LARCENY AND THEFT:</b> <b>a.</b> Indemnity in respect of loss or damage to Home Contents, by burglary and housebreaking including larceny and theft. <b>b.</b> indemnity in respect of damage to the Insured's home and/or safe resulting from burglary and/or housebreaking or any attempt thereat subject to a maximum of 5% of the Sum Insured under this Section.	2
		<b>3. MAJOR MEDICAL ILLNESS:</b> Lump sum payout on first diagnosis of listed Major Medical Illness during the Policy Period	3
		<b>4. PERSONAL ACCIDENT:</b> Lump Sum payment in the event of an accident for the below listed perils	4
		i. Accidental Death: Lump Sum payment in the event of an Accidental Death due to an Accident	4.A
		ii. Permanent Disablement: Lump Sum payment in the event of a listed Permanent Disablement due to an Accident	4.B
		<b>5. DEPENDENT CHILD EDUCATION BENEFIT:</b> Lump Sum payment to fund for child's education in the event of an Accidental Death OR Permanent Disablement due to an Accident	5
		<b>6. LOSS OF JOB - TERMINATION OF EMPLOYMENT:</b> Coverage for upto 3 immediate upcoming monthly EMLs from the date of termination from employment	6
		<b>7. LOSS OF INCOME - MAJOR MEDICAL ILLNESS</b> Income protection for the Insured Person if he is diagnosed with a listed Major Medical Illnesses.	7
		<b>8. VECTOR BORNE DISEASE COVER (BENEFIT):</b> Lumpsum payout upon diagnosis of any listed Vector Borne Disease	8
		<b>9. EMI HOSPITALIZATION:</b> Payment of Lumpsum amount on completion of defined number of days of Hospitalization due to injury or illness as stipulated in the Certificate of Insurance	9

		<b>Optional Covers:</b> Optional covers in force for the Insured Persons shall be as opted and as specified in Policy Schedule / Certificate of Insurance	
		<b>1. Optional covers under Major Medical Illness</b>	
		i. Cardiac Arrest	
		ii. Angioplasty	
		iii. Molecular Gene Profiling test	
		iv. Second Medical Opinion	
		a. Second Medical Opinion – India	
		b. Second Medical Opinion – Global	
		<b>2. Optional covers under Loss of Income – Major Medical Illness</b>	
		i. Cardiac Arrest	
		ii. Angioplasty	
		iii. Molecular Gene Profiling test	
		iv. Second Medical Opinion	
		a. Second Medical Opinion – India	
		b. Second Medical Opinion – Global	
6	Exclusions (what the policy does not cover)	Exclusions specific to particular benefit	
		<u>Specific Exclusions applicable to</u>	
		<u>Home Building And Contents Cover</u>	

		<ol style="list-style-type: none"> <li>1. Your deliberate, willful or intentional act or omission, or of anyone on Your behalf, or with Your connivance.</li> <li>2. War, invasion, act of foreign enemy hostilities or war-like operations (whether war is declared or not), civil war, mutiny, civil commotion amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.</li> <li>3. 'HOME BUILDING AND CONTENTS COVER' section excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss unless otherwise stated in the Certificate of Insurance.  For the purpose of this exclusion, an act of terrorism means an act or series of acts, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), or unlawful associations, recognized under Unlawful Activities (Prevention) Amendment Act, 2008 or any other related and applicable national or state legislation formulated to combat unlawful and terrorist activities in the nation for the time being in force, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public or any section of the public in fear for such purposes.  This exclusion also includes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to the above. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from combustion of nuclear fuel, or the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component that is part of it.</li> <li>4. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from combustion of nuclear fuel, or the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component that is part of it.</li> <li>5. Pollution or contamination, unless <ol style="list-style-type: none"> <li>i) the pollution or contamination itself has resulted from an Insured Event,</li> </ol> </li> </ol>	
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		<p>or</p> <p>ii) an Insured Event itself results from pollution or contamination.</p> <ol style="list-style-type: none"> <li>6. Loss, damage or destruction to any electrical/electronic machine, apparatus, fixture, or fitting by over-running, excessive pressure, short circuiting, arcing, self- heating or leakage of electricity from whatever cause (lightning included). This exclusion applies only to the particular machine so lost, damaged or destroyed unless otherwise opted and mentioned in the Certificate of Insurance.</li> <li>7. Loss or damage to bullion or unset precious stones, manuscripts, plans, drawings, securities, obligations or documents of any kind, coins or paper money, cheques, vehicles, and explosive substances unless otherwise expressly stated in 'HOME BUILDING AND CONTENTS COVER' section.</li> <li>8. Loss of any Insured Property which is missing or has been mislaid, or its disappearance cannot be linked to any single identifiable event.</li> <li>9. Loss or damage to any Insured Property removed from Your Home to any other place.</li> <li>10. Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.</li> <li>11. Any reduction in market value of any Insured Property after its repair or reinstatement.</li> <li>12. Any addition, extension, or alteration to any structure of Your Home Building that increases its Carpet Area by more than 10% of the Carpet Area existing at the Commencement Date or on the date of renewal of this Policy, unless You have paid additional premium and such addition, extension or alteration is added by Endorsement.</li> <li>13. Costs, fees or expenses for preparing any claim.</li> </ol> <p>Where Insured property is declared illegal through operation of any law for the time being in force or by any Public Authority</p>	
		<p><u>Specific Exclusions applicable to</u></p> <p><u>BURGLARY AND HOUSEBREAKING INCLUDING LARCENY AND THEFT</u></p> <p>This Section does not cover loss, destruction or damage:-</p>	

		<ol style="list-style-type: none"> <li>1. Caused by burglary and/or housebreaking and/or theft and/or larceny where any member of the Insured's family is concerned as principal or accessory</li> <li>2. To securities, documents of any kind, stamps, coins, cash/paper money, deeds, ATM cards, credit cards, charge cards, bonds, bills of exchange, promissory notes, or any other negotiable instrument, books of accounts or any other business books, and explosives.</li> <li>3. To articles of consumable nature, livestock and motor vehicles.</li> <li>4. To curios, antiques, pictures and other works of art, guns, collection of stamps, coins and medals for an amount collectively in excess of Rs. 10,000 unless specifically stated to the contrary in the Certificate of Insurance.</li> </ol>	
		<p><u>Specific Exclusions applicable to</u></p> <p><u>Major Medical Illness &amp; LOSS OF INCOME - MAJOR MEDICAL ILLNESS</u></p> <ol style="list-style-type: none"> <li>i. Treatment arising from or consequent upon war or any act of war (whether war be declared or not or caused during service in the armed forces of any country), invasion, act of foreign enemy, civil war, public defense, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, radiation of any kind.</li> <li>ii. Any Illness, sickness, disease or Major medical Illness not listed in the plan opted.</li> <li>iii. Any Critical Illness or Surgical Procedure arising out of use, abuse or consequence or influence of any substance, intoxicant, drug, alcohol or hallucinogen.</li> <li>iv. Narcotics used by the Insured Person unless taken as prescribed by a registered Medical Practitioner</li> <li>v. Any Claim caused due to intentional self-injury, suicide or attempted suicide.</li> <li>vi. Any Critical Illness or Surgical Procedure caused by or arising from or attributable to a foreign invasion, act of foreign enemies, hostilities, (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), civil war, public defence, rebellion, revolution, insurrection, military or usurped power;</li> <li>vii. Any claim caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.</li> <li>viii. Working in underground mines, tunnelling or involving electrical installations with high tension supply, or as jockeys or circus personnel;</li> </ol>	

		<ul style="list-style-type: none"> <li>ix. Congenital External Anomalies or any complications or conditions arising there from including any developmental conditions of the Insured;</li> <li>x. Whilst engaging in Adventure Sports.</li> <li>xi. Involvement of the Insured Person in naval, military or air force operation.</li> <li>xii. Participation by the Insured Person in any flying activity, except as a bona fide, passenger (fare paying or otherwise) of a recognized airline on regular routes and on a scheduled time table.</li> </ul>	
		<p><u>Specific Exclusions applicable to</u></p> <p><u>Personal Accident &amp; DEPENDENT CHILD EDUCATION BENEFIT</u></p> <ol style="list-style-type: none"> <li>1. The abuse or the consequences of the abuse of tobacco, intoxicants or hallucinogenic substances such as drugs and alcohol, including smoking cessation programs and the treatment of nicotine addiction or alcohol addiction programs, any other substance abuse treatment or services, or supplies.</li> <li>2. 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</li> <li>3. Whilst engaging in aviation or ballooning, whilst mounting into, dismounting from or travelling in any balloon or aircraft other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world.</li> <li>4. Any loss suffered by the Insured on account of his participation as the driver, co-driver or passenger during motor racing or trial runs or rallies using a motorized vehicle or bicycle</li> <li>5. Loss or damage caused by or arising from or in consequence of or contributed to nuclear weapons material by or arising from or in consequence of or contributed to by ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel (including any self-sustaining process of nuclear fission).</li> <li>6. Any <b>Insured Person</b> committing or attempting to commit a breach of law with criminal intent, or intentional self-injury or attempted suicide or suicide.</li> <li>7. From engaging in or participation in or involvement including but not limited to naval, military or air force operation.</li> <li>8. From participation in <b>Adventure sports</b></li> </ol> <p><u>Specific Exclusions applicable</u></p>	

		<p><b><u>LOSS OF JOB - TERMINATION OF EMPLOYMENT</u></b></p> <ol style="list-style-type: none"> <li>1. In the event of termination, dismissal, temporary suspension or retrenchment from employment of the Insured Person being attributed to any dishonesty or fraud or poor performance on the part of the Insured or his willful violation of any rules of the employer or laws for the time being in force or any disciplinary action against the Insured by the employer.</li> <li>2. Claim in connection with or in respect of: <ol style="list-style-type: none"> <li>i. Self-employed persons;</li> <li>ii. unemployment from a job which is casual, temporary, seasonal or contractual in nature or any claim relating to an employee not on the direct rolls of the employer;</li> <li>iii. Any voluntary unemployment;</li> <li>iv. Unemployment at the time of inception of the Policy Period or arising within the first 90 days of inception of the Policy Period.</li> </ol> </li> <li>3. Any unemployment from a job under which no salary or any remuneration is provided to the Insured Person</li> <li>4. Any suspension from employment on account of any pending enquiry being conducted by the employer / Public Authority</li> <li>5. Any unemployment due to resignation, retirement whether voluntary or otherwise</li> <li>6. Termination from employment while the Insured Person is under probation.</li> </ol>	
		<p><b><u>Specific Exclusions applicable to</u></b></p> <p><b><u>EMI Hospitalization</u></b></p> <p><b>1. Standard Permanent Exclusions</b></p> <p>We will not make any payment for any claim in respect of any <b>Insured Person</b> caused by, arising from or attributable to any of the following unless expressly stated to the contrary in this <b>Policy</b>:</p> <ol style="list-style-type: none"> <li>i. <b>Investigation &amp; Evaluation:</b> Code Excl04 <ol style="list-style-type: none"> <li>a. Expenses related to any admission primarily for diagnostic and evaluation purposes only are excluded.</li> <li>b. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.</li> </ol> </li> <li>ii. <b>Rest Cure, rehabilitation and respite care:</b> Code – Excl05: Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:</li> </ol>	

		<ul style="list-style-type: none"> <li>a. 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.</li> <li>b. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.</li> </ul> <p>iii. <b>Obesity/Weight control:</b> Code – Excl06: Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions:</p> <ul style="list-style-type: none"> <li>a. Surgery to be conducted is upon the advice of the doctor</li> <li>b. The surgery/procedure conducted should be supported by clinical protocols</li> <li>c. The member has to be 18 years of age or older and</li> <li>d. Body Mass Index (BMI) <ul style="list-style-type: none"> <li>a. Greater than or equal to 40 or,</li> <li>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: <ol style="list-style-type: none"> <li>1. Obesity related cardiomyopathy</li> <li>2. coronary heart disease</li> <li>3. severe sleep apnoea</li> <li>4. uncontrolled type2 diabetes</li> </ol> </li> </ul> </li> </ul> <p>iv. <b>Change-of-Gender treatments:</b> Code – Excl07: Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.</p> <p>v. <b>Cosmetic or plastic surgery:</b> Code – Excl08: 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 <b>Medically Necessary Treatment</b> 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 <b>Medical Practitioner</b>.</p> <p>vi. <b>Breach of Law:</b> Code – Excl10 - Expenses for treatment directly arising from or consequent upon any <b>Insured Person</b> committing or attempting to commit a breach of law with criminal intent.</p>	
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		<p>vii. <b>Excluded Providers-</b> Code – Excl11 Expenses incurred towards treatment in any hospital or by any <b>Medical Practitioner</b> or any other provider specifically excluded by the <b>Insurer</b> and disclosed in its website/notified to the policyholders are not admissible. However, in case of <b>life threatening situations</b> or following an <b>Accident</b>, expenses up to the stage of stabilization are payable but not the complete claim.</p> <p>viii. Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. Code – Excl12</p> <p>ix. Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons. Code – Excl13</p> <p>x. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a <b>Medical Practitioner</b> as part of <b>Hospitalization</b> claim or day care procedure. Code – Excl14</p> <p>xi. Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptries. Code – Excl15</p> <p>xii. <b>Unproven Treatments–</b> 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. Code – Excl16</p> <p>xiii. <b>Sterility and Infertility –</b>Code – Excl17 -Expenses related to sterility and infertility. This includes:</p> <ol style="list-style-type: none"> <li>Any type of contraception, sterilization</li> <li>Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI</li> <li>Gestational Surrogacy</li> <li>Reversal of sterilization</li> </ol> <p>xiv. <b>Maternity:</b> Code – Excl18</p> <ol style="list-style-type: none"> <li>Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy;</li> <li>Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the <b>Policy</b> period.</li> </ol>	
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		<p><b>2. Specific Permanent Exclusions</b></p> <ul style="list-style-type: none"> <li>i. 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, <b>Nuclear, Chemical or Biological</b> attack or weapons, radiation of any kind.</li> <li>ii. Any <b>Insured Person</b> committing or attempting to commit intentional self-injury or attempted suicide or suicide.</li> <li>iii. Any <b>Insured Person's</b> participation or involvement in naval, military or air force operation.</li> <li>iv. Investigative treatment for Sleep-apnoea, General debility or exhaustion ("run-down condition").</li> <li>v. Congenital external diseases, defects or anomalies,</li> <li>vi. Stem cell harvesting.</li> <li>vii. Investigative treatments for analysis and adjustments of spinal sub luxation, diagnosis and treatment by manipulation of the skeletal structure or for muscle stimulation by any means except treatment of fractures (excluding hairline fractures) and dislocations of the mandible and extremities).</li> <li>viii. Circumcisions (unless necessitated by <b>Illness or Injury</b> and forming part of treatment).</li> <li>ix. Any Convalescence, sanatorium treatment, private duty nursing or long-term nursing care.</li> <li>x. Vaccination including inoculation and immunisations (Except post Animal bite treatment),</li> <li>xi. <b>Non-Medical expenses</b> such as Food charges (other than patient's diet provided by hospital), laundry charges, attendant charges, ambulance collar, ambulance equipment, baby food, baby utility charges and other such items. Full list of Non-Medical expenses is attached and also available at <a href="http://www.hdfcergo.com">www.hdfcergo.com</a>.</li> <li>xii. OPD treatment,</li> <li>xiii. The provision or fitting of hearing aids, spectacles or contact lenses.</li> <li>xiv. Any treatment and associated expenses for alopecia, baldness including corticosteroids and topical immunotherapy wigs, toupees, hair pieces, any non-surgical hair replacement methods, Optometric therapy.</li> </ul>	
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		<p>xv. Any treatment or part of a treatment that is not of a Reasonable and Customary charge, not Medically Necessary; treatments or drugs not supported by a prescription.</p> <p>xvi. Expenses for Artificial limbs and/or device used for diagnosis or treatment (except when used intra-operatively). prosthesis, corrective devices external durable medical equipment of any kind, wheelchairs, crutches, and oxygen concentrator for bronchial asthma/ COPD conditions, cost of cochlear implant(s) unless necessitated by an Accident. Exhaustive list of Non-Medical expenses is attached and also available on <a href="http://www.hdfcergo.com">www.hdfcergo.com</a></p> <p>xvii. Whilst engaging in Adventure Sports.</p>	
7	<p>Waiting Periods</p> <ul style="list-style-type: none"> <li>Time period during which specified disease / treatments are not covered</li> <li>It is counted from the beginning of the policy coverage</li> </ul>	Waiting Periods applicable to specific benefits	
		<p><u>Waiting Periods applicable to Major Medical Illness &amp; Loss of Income - Major Medical Illness</u></p> <p>Initial Waiting Period (default): 90 days</p> <p>Initial Waiting Period (options): 0/7/15/30 days</p> <p>Pre-Existing disease waiting period (default): 36 Months</p> <p>Pre-Existing disease waiting period (options): 0/12/24 Months</p> <p>Survival Period (default): 7 days</p> <p>Survival Period (options): 0/15/30 days</p> <p><u>Optional cover under Major Medical Illness &amp; Loss of Income - Major Medical Illness</u></p> <p>Initial Waiting period under Angioplasty: 180 days</p>	
		<p><u>Waiting Periods applicable to Loss of Job – Termination of Employment</u></p> <p>Initial Waiting period : 90 Days</p>	
		<p><u>Waiting Periods applicable to Vector Borne Diseases Cover (Benefit)</u></p> <p>Initial Waiting Period: 7/15/30 days</p> <p>Minimum hours of Hospitalization required for benefit to trigger: 24/48 hours</p>	

		<u>Waiting Periods applicable to EMI Hospitalization</u>  General Waiting period (default): 30 days  General Waiting period (options): 0/7/15 days  Pre-Existing disease waiting period (default): 36 Months  Pre-Existing disease waiting period (options): 0/12/24 Months  Specified Disease/Procedure [Specific Illness] waiting period (default): 24 months  Specified Disease/Procedure [Specific Illness] waiting period (options): 0/12 months	
8	Financial Limits of coverage	Financial limits specific to covers	
	Sub-limits	Sub limits specific to particular covers	
	(It is a predefined limit and the insurance company will not pay any amount in excess of this limit)	<u>Sub-limits applicable to Personal Accident</u>  Comatose: 25% of Accidental Death SI	
	Sum Insured Limits	Sum Insured specific to particular base covers  <u>Financial limits applicable to Major Medical Illness</u>  a. SI: 10k to 5cr  <u>Financial limits applicable to optional covers under Major Medical Illness</u>  a. Cardiac Arrest SI: Upto 100% SI of opted plan b. Angioplasty SI: Sublimit - INR (10,000 – 10 Lakhs) c. Molecular gene profiling test SI: Additional SI – INR (5000 - 30,000) d. Second medical opinion: Additional - INR (5000 - 20,000) = X i. Second medical opinion (India) SI: X ii. Second medical opinion (Global) SI : 2X  <u>Financial limits applicable to Personal accident</u>	

		SI: 10k to 5cr	
		<u>Financial limits applicable to Dependent Child Education benefit</u>	
		SI: 10k to 10L per child	
		<u>Financial limits applicable to Loss of Job Termination of Employment</u>	
		Termination from employment SI: Upto upcoming 3 EMIs as on the date of termination from employment	
		<u>Financial limits applicable to Loss of Job Termination of Employment</u>	
9	Claims / Claims procedure	Loss of Income – major medical illness SI: 1k to 50L	
		Optional plans	
		i. Cardiac arrest: 100% SI of opted plan	
		ii. Angioplasty: 100% SI of opted plan	
		<u>Financial limits applicable to Vector Borne Disease</u>	
		SI: 1k to 1L	
		<u>Financial limits applicable to EMI Hospitalization</u>	
		a. 500 to 50 Lacs (opted amount) (x)	
		b. Exact EMI amount (x)	
		Details of procedure to be followed for cashless service as well as for reimbursement of claim including pre and post hospitalization.	
		Turn Around Time (TAT) for claims settlement:	
		<u>For Cashless Process:</u>	
		i. TAT for preauthorization of cashless facility: Decision on cashless authorization to be provided within 1 hour from the time of receipt of request.	

		<p>ii. TAT for cashless final bill authorization: Within 3 hours of the receipt of discharge authorization request from the hospital.</p> <p><u>For Reimbursement Process :</u></p> <p>i. TAT for Claim settlement – Within 15 days of claim intimation.</p> <p>Provide the details /web link for following:</p> <p>Network Hospital details :  <a href="https://www.hdfcergo.com/locators/cashless-hospitals-networks">https://www.hdfcergo.com/locators/cashless-hospitals-networks</a></p> <p>Helpline number :  <a href="https://www.hdfcergo.com/customercare/grievances">https://www.hdfcergo.com/customercare/grievances</a></p> <p>Call - : 022 6234 6234 / 0120 6234 6234</p> <p>Hospitals which are excluded or from where no claims will be accepted by insurer  <a href="http://www.hdfcergo.com/docs/default-source/documents/excluded-hospital1.pdf">http://www.hdfcergo.com/docs/default-source/documents/excluded-hospital1.pdf</a></p> <p>Downloading/getting claim form  <a href="https://www.hdfcergo.com/download/claim-form">https://www.hdfcergo.com/download/claim-form</a></p>	
10	Policy Servicing	<p>Call Centre Number:            Contact Us at: <a href="tel:02262346234">022 6234 6234 / 0120 6234 6234</a> Or            visit help section on <a href="http://www.hdfcergo.com">www.hdfcergo.com</a></p> <p>Details of Company officials:            Customer Happiness Centre: D-301, 3rd Floor, Eastern Business District LBS Marg, Bhandup (West), Mumbai - 400078.</p>	
11	Grievances / Complaints	<p>In case of any grievance the insured person may contact the Company through:</p> <ul style="list-style-type: none"> <li>- <b>First Point of Contact</b> : Call us at <a href="tel:02261582020">022 6158 2020 / 022 6234 6234</a>/<a href="http://www.hdfcergo.com">www.hdfcergo.com</a></li> <li>- <b>Level 1</b> (For lack of a response or if the response provided does not meet your expectation) : Write to The Complaints &amp; Grievance Cell (C&amp;G Cell) on the address mentioned below / email to <a href="mailto:grievance@hdfcergo.com">grievance@hdfcergo.com</a> / Call on <a href="tel:18002677444">18002677444</a> (operational Monday - Saturday 9AM to 6PM)</li> <li>- <b>Level 2</b> (If you're not satisfied with the resolution or if no response was received within 15 days) : Write to the Chief Grievance Officer on the address mentioned below / email to <a href="mailto:cgo@hdfcergo.com">cgo@hdfcergo.com</a></li> </ul>	

12	Things to remember\	<ul style="list-style-type: none"> <li>- <b>Level 3</b> (In case grievance is not resolved at the above escalation levels) : Lodge an online complaint through the website of Council for Insurance Ombudsmen (CIO) <a href="http://www.cioins.co.in">www.cioins.co.in</a></li> <li>- <b>Senior Citizen</b> Dedicated Helpline: <a href="tel:02261582026">022 6158 2026</a> / <a href="mailto:seniorcitizen@hdfcergo.com">seniorcitizen@hdfcergo.com</a></li> <li>- <b>Women</b> Dedicated Helpline: <a href="tel:02261582055">022 6158 2055</a></li> </ul>	
		<b>Grievance Redressal Escalation matrix:</b> <a href="https://www.hdfcergo.com/customer-voice/grievances">https://www.hdfcergo.com/customer-voice/grievances</a>	
		<b>Ombudsman</b> (If not satisfied with the redressal of grievance through above methods): <a href="https://bimabharosa.irdai.gov.in/">https://bimabharosa.irdai.gov.in/</a>	
		<b>Free Look cancellation:</b> You may cancel the insurance policy if you do not want it, within 30 days from the beginning of the policy.  Process for free look cancellation: <ol style="list-style-type: none"> <li>1. 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.</li> <li>2. The insured person shall be allowed free look period of 30 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.</li> </ol>	
		<b>Policy renewal:</b> Except on grounds of fraud, moral hazard or misrepresentation or non-cooperation, renewal of your policy shall not be denied, provided the policy is not withdrawn.	
		<b>Migration and Portability:</b> When your policy is due for renewal, you may migrate to another policy with us or port your policy to another insurer.	
		<b>Process for migration:</b> The Insured Person will have the option to migrate the Policy to other health insurance products/plans offered by the Company by applying for Migration of the policy atleast 30 days before the policy renewal date as per IRDAI guidelines on Migration.	
		<b>Process for portability:</b> 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 30 days before, but not earlier than 60 days from the policy renewal date as per IRDAI guidelines related to Portability.	
		<b>Moratorium Period:</b> After completion of five continuous years under the policy no look back to be applied. This period of five years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and applicable for the sums insured of the first policy and subsequently completion of five continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits.	

		After the expiry of Moratorium Period no health insurance policy shall be contestable except for proven fraud and permanent exclusions specified in the policy contract.	
13	Your Obligations	Please disclose all pre-existing disease/s or condition/s and fill in the complete details in the proposal form before buying a policy. Non-disclosure may affect the claim settlement.	

**Note:**

1. Web-link of the product documents: << <https://www.hdfcergo.com/download> >>
2. In case of any conflict, the terms and conditions mention in the policy document shall prevail.

**Declaration by the Policy Holder**

I have read the above and confirm having noted the details.

Place:

Date: (Signature of the Policyholder)

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