

**MICRO INSURANCE – GRAMIN AROGYA NIDHI**

**INTRODUCTION**

HDFC ERGO General Insurance Company Limited takes pleasure in offering GRAMIN AROGYA NIDHI. This product protects the Insured against bodily injury resulting in death or permanent total disablement and Hospitalisation as an inpatient including a host of daycare treatments as stated in the Policy which are offered at an affordable cost to retail customers in the rural or social sectors.

The salient features of the product and price are briefly stated hereunder. For further details on definitions, coverage, exclusions and conditions, please refer to the **GRAMIN AROGYA NIDHI** Policy form.

**PRODUCT INFORMATION**

**ELIGIBILITY CRITERIA**

- This Policy covers persons in the age group of 18 years onwards.
- The maximum entry age is 65 years. (All such proposals may be renewed until the age the Insured makes a request for continual renewal based on the merits of the case)
- The Insured's in the policy are Individuals belonging to the rural, suburban and social sectors
- The policy offers option of covering on individual sum insured basis and/or includes the members of the family on family floater basis. However family floater can be provided only as an additional cover by payment of additional premium.
- Floater extension will be provided only with respect to Section II to either of the relationships Self/Spouse/Dependant Parents, however only a maximum of 2 adults can be covered under a Policy.
- The family includes spouse and dependent children.
- Dependent Children (between the age of 3 Months and 25 years) can be covered under the policy.

**SALIENT PRODUCT FEATURES**

**Section 1 – Personal Accident (Death Only Cover)** – In the event that an Insured Person sustains a Bodily Injury causing death, within twelve (12) months from the Date of Loss, then we provide the Insured Person's Beneficiary / Nominee or legal representative the compensation as stated in the policy.

In addition to the above the following riders also may be offered on the basis of additional premium payment.

- Permanent Total Disablement
- Dependent Child Education Benefit (Available for maximum of 2 Dependent Children)
- Dependent Girl Child Wedding Benefit

*In case of any claim being admissible and payable upto the full sum insured, the policy benefit for that section will cease to exist. In case where only partial sum insured is paid under any of the sections then the policy will still exist on the balance sum insured.*

**Section 2 – In - Patient Hospitalization** – This covers hospitalisation expenses due to an illness or accident. We will pay for the medical expenses for Room rent, boarding expenses, Nursing, Intensive care unit, Medical Practitioner, Anaesthesia, blood, oxygen, operation theatre charges, surgical appliances, Medicines, drugs and consumables, Diagnostic procedures, along with expenses incurred for day care treatments.

In addition to the above the following riders also may be offered on the basis of additional premium payment.

- Pre and Post Hospitalisation
- Domiciliary Hospitalisation
- Basic Maternity Coverage : The following condition should be noted under this endorsement:
  1. Benefit available for a maximum of 2 incidents involving Delivery or Lawful Termination

#### **COVERAGE**

- The sections and riders applicable to the relevant sections are independent and are not compulsory.
- All limits and deductibles as stated specifically for any of the covers under the respective sections shall be considered independently.
- The Maximum Sum Insured as mentioned in the Policy Schedule is the maximum sum payable as a whole under the Policy during any one year of the Policy Period.

#### **POLICY PERIOD**

- This Policy can be covered for a Period of 1, and 2 years, in the manner and on the terms and conditions as stated in the policy.
- The cover under this Policy, for the specific Insured, shall terminate in the event of a cancellation of the policy by the Policyholder or the Insurer in case of any fraudulent acts or misrepresentations of material facts by the Policyholder or the Insured's.



**SUM INSURED** (Per annum)

- Personal Accident (Section 1) - Rs. 25,000 to Rs. 200, 000.
- Inpatient Hospitalization (Section 2) - Rs 10,000 to Rs 150,000.

**PREMIUM**

Depends up on the Sum Insured selected, Coverage's chosen and the age band of the Individual's proposed to be covered.

**EXCLUSIONS**

- Any treatment within first 30 days of cover except any accidental injury
- Coverage for Pre-existing diseases within/up to 4years since inception of the policy.
- Expenses arising from HIV or AIDs and related diseases.
- Mental disorder or insanity, cosmetic surgery, weight control treatment
- Abuse of intoxicant or hallucinogenic substance like drugs and alcohol.
- Hospitalization due to War or act of war, nuclear, chemical or biological weapon and radiation of any kind.

**RENEWALS**

The maximum age for renewal is upto the Insured makes a request for continual renewal (Coverage for persons above the age of 65 years can be renewed but not exceeding the age the Insured makes a request for continual renewal based on the merits of the case).Any change in the scope of cover or increase in Premium due to loadings charged on the filed rates shall be specifically intimated to the client at the time of generation of the renewal notice.

In case of rejection of a proposal at the time of renewal of the Policy the Company shall intimate the client in writing.

The company shall continue to renew the policy up to the age of 80 years as per the rates filed. However, if the insured desires to renew the policy beyond the age of 80 years the premium shall be additionally loaded as per the loading table attached below:

**The loadings will be applicable only for Section II – (In- Patient Hospitalization )& All the endorsements and not applicable for Section I ( Personal Accident )**

Age (years)	Loading (%)
81 - 85	25% loading to be applied on 76 - 80 years premium slab



86 and above	40% loading to be applied on 81-85 years premium slab
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**RENEWAL INCENTIVES**

- Cumulative bonus of 5% will be provided for every claim free policy period and accumulating up to a maximum of 50% under Individual Sum Insured option. In case of a claim being payable the bonus amount will be reduced by 10%. This benefit shall be available on Section II of the policy only.

**CLAIMS**

The Policyholder or the Insured is required to deliver all information and documentation in original concerning the claim at their own costs, to the TPA/Company, within 30 days of the Insured's discharge from Hospital.

Claims shall be assessed and paid on the basis of the following documents required to be submitted to the Company.

**PERSONAL ACCIDENT**

Fatal Claims	Non Fatal Claims	Death Claims Due to Snake Bite
a). Completed Claim Form; b). FIR; c). Post Mortem Report; d). Final Report from police; e). Copies of Inquest Report of criminal case filed by police (IF ANY); f). Statements of Gram Pradhan/ Municipal Councilor/Post Master/School Teacher; g). If Claimant is not the spouse, succession certificate from Collector's Office	a). Completed Claim Form; b). FIR/Report to Police Station; c). Certificate regarding disability from a Government Hospital of a Doctor equivalent to CMO / Dy. CMO; d). Statement of witnesses; e). Original Admission / discharge card if hospitalized; f). Investigation / Lab reports (x-ray etc.).	a). Completed Claim Form; b). Post Mortem Report, (Forensic report may be called if PM is inconclusive) c). Statements From Neighbours; d). Statement from Witness/Person who discovered the body; e). Investigation Report (may be called for depending on the case); f). If Claimant is not the spouse, succession certificate from Collector's Office



**INPATIENT HOSPITALISATION**

<b>Hospitalization due to Accidental Injury</b>	<b>Hospitalization due to Illness / Disease</b>
a). Claim form, b). Police Report, if accident is reported to Police, c). Medical papers, pathology reports, X-ray reports, as applicable, d). Doctor’s medical prescriptions, Itemized bills and cash memos showing the patient’s name, date of treatment, the type of treatment given, the diagnosis or nature of condition being treated and the hospital / nursing home’s name and address, e). Hospital Discharge Card	a). Claim Form, b). Medical papers, pathology reports, X-ray reports, as applicable, c). Doctor’s prescription and line of treatment suggested, d). Itemized bills and cash memos showing the patient’s name, date of treatment, the type of treatment given, the diagnosis or nature of condition being treated and the hospital / nursing home’s name and address, e). Hospital Discharge Card

**Disclaimer**

This is only a summary of the product features. The actual benefits available and the coverage / extent thereof 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.

**INSURANCE IS THE SUBJECT MATTER OF THE SOLICITATION**