

## my:credit Comprehensive Suraksha

### Introduction

my:credit Comprehensive Suraksha by HDFC ERGO is a loan linked product designed to offer coverage for the loanees who take the loan from Banks/NBFC or any other financial institution.

The Product offers coverage against all types of Critical illnesses and surgical Procedures related to Cancers, Heart ailments, illnesses related to Nervous System and other major illnesses. The product offers the coverage against women specific covers like Women specific cancers, surgical procedures, Pregnancy and New Born Complications etc. The product also provides the coverage against Assault and Burns, coverage for Hospital Cash Benefit anywhere in the world.

Different type of optional covers are provided under this policy like post diagnosis cover, loss of job, cardiac arrest, preventive health check up etc which provides the financial assistance to the insured person in case if the insured person is diagnosed with the major illnesses and also provide the renewal benefit .

Policy period for my:credit Comprehensive Suraksha policy will be till loan tenure or maximum upto 5 years .

Policy has multiple Sum insured options ranging from 1 Lakh to 5 Cr for section (1, 2, 3, 6, 8), for section 5 Rs.10,000 to Rs. 5,00,000, for section 7 Rs. 500 to Rs. 20,000 .

### Covers under the Policy

#### A. Coverage

##### Section 1 : Critical Illness

If **Insured Person** suffers from **Critical illness** or undergoes **Surgical Procedure** under any of the opted covers as specified below, whose diagnosis first commence/occurs after the applicable Waiting Period from first commencement of the Coverage under this Section, **We** will pay **Sum Insured** or percentage of **Sum Insured** in accordance with table applicable to each cover under this Section.

#### I. Coverage

##### i. Essential CI Cover

Critical Illness/Surgical Procedure	Percentage of Sum Insured Payable	Stage	Applicable Waiting Period
Cancer of specified severity	100%	Major	90 days
Open Chest CABG	100%	Major	90 days
Kidney failure DEquiring regular dialysis	100%	Major	90 days
Myocardial Infarction (First Heart Attack of specified severity)	100%	Major	90 days
Open Heart Replacement or Repair of Heart Valves	100%	Major	90 days
Major Organ/Bone Marrow Transplantation	100%	Major	90 days
Multiple Sclerosis with persisting symptoms	100%	Major	90 days
Permanent Paralysis of Limbs	100%	Major	90 days
Stroke resulting in permanent symptoms	100%	Major	90 days

##### ii. Essential CI Plus Cover

Critical Illness/Surgical Procedure	Percentage of Sum Insured Payable	Stage	Applicable Waiting Period
Benign Brain Tumour	100%	Major	90 days
Coma of specified severity	100%	Major	90 days
Parkinson's Disease	100%	Major	90 days

##### iii. Silver CI Cover

Critical Illness/Surgical Procedure	Percentage of Sum Insured Payable	Stage	Applicable Waiting Period
Benign Brain Tumour	100%	Major	90 days
Coma of specified severity	100%	Major	90 days
Parkinson's Disease	100%	Major	90 days
Alzheimer's Disease	100%	Major	90 days
Surgery of Aorta	100%	Major	90 days
End Stage Liver Failure	100%	Major	90 days

##### iv. Silver CI Plus Cover

Critical Illness/Surgical Procedure	Percentage of Sum Insured Payable	Stage	Applicable Waiting Period
Benign Brain Tumour	100%	Major	90 days
Coma of specified severity	100%	Major	90 days
Parkinson's Disease	100%	Major	90 days
Alzheimer's Disease	100%	Major	90 days
Surgery of Aorta	100%	Major	90 days
End Stage Liver Failure	100%	Major	90 days
Deafness	100%	Major	90 days
Loss of Speech	100%	Major	90 days
Third Degree Burns	100%	Major	90 days

##### v. Gold CI Cover

Critical Illness/Surgical Procedure	Percentage of Sum Insured Payable	Stage	Applicable Waiting Period
Benign Brain Tumour	100%	Major	90 days
Coma of specified severity	100%	Major	90 days
Parkinson's Disease	100%	Major	90 days
Alzheimer's Disease	100%	Major	90 days
Surgery of Aorta	100%	Major	90 days
End Stage Liver Failure	100%	Major	90 days
Deafness	100%	Major	90 days
Loss of Speech	100%	Major	90 days
Third Degree Burns	100%	Major	90 days
Medullary Cystic Disease	100%	Major	90 days
Motor Neurone Disease with permanent symptoms	100%	Major	90 days
Muscular Dystrophy	100%	Major	90 days
Infective Endocarditis	100%	Major	90 days
Primary (Idiopathic) Pulmonary Hypertension	100%	Major	90 days

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**vi. Gold CI Plus Cover**

Critical Illness/Surgical Procedure	Percentage of Sum Insured Payable	Stage	Applicable Waiting Period
Dissecting Aortic Aneurysm	100%	Major	90 days
Systemic Lupus Erythematosus with Lupus Nephritis	100%	Major	90 days
Benign Brain Tumour	100%	Major	90 days
Coma of specified severity	100%	Major	90 days
Parkinson's Disease	100%	Major	90 days
Alzheimer's Disease	100%	Major	90 days
Surgery of Aorta	100%	Major	90 days
End Stage Liver Failure	100%	Major	90 days
Deafness	100%	Major	90 days
Loss of Speech	100%	Major	90 days
Third Degree Burns	100%	Major	90 days
Medullary Cystic Disease	100%	Major	90 days
Motor Neurone Disease with permanent symptoms	100%	Major	90 days
Muscular Dystrophy	100%	Major	90 days
Infective Endocarditis	100%	Major	90 days
Primary (Idiopathic) Pulmonary Hypertension	100%	Major	90 days
Dissecting Aortic Aneurysm	100%	Major	90 days
Systemic Lupus Erythematosus with Lupus Nephritis	100%	Major	90 days
Apallic Syndrome	100%	Major	90 days
Aplastic Anaemia	100%	Major	90 days
Bacterial Meningitis	100%	Major	90 days
Cardiomyopathy	100%	Major	90 days
Other serious coronary artery disease	100%	Major	90 days
Creutzfeldt-Jakob Disease (CJD)	100%	Major	90 days
Encephalitis	100%	Major	90 days
End Stage Lung Failure	100%	Major	90 days
Fulminant Hepatitis	100%	Major	90 days
Eisenmenger's Syndrome	100%	Major	90 days
Major Head Trauma	100%	Major	90 days
Chronic Adrenal Insufficiency (Addison's Disease)	100%	Major	90 days
Progressive Scleroderma	100%	Major	90 days
Progressive Supranuclear Palsy	100%	Major	90 days
Blindness	100%	Major	90 days

**vii. Platinum CI Cover**

Critical Illness/Surgical Procedure	Percentage of Sum Insured Payable	Stage	Applicable Waiting Period
Benign Brain Tumour	100%	Major	90 days
Coma of specified severity	100%	Major	90 days
Parkinson's Disease	100%	Major	90 days
Alzheimer's Disease	100%	Major	90 days
Surgery of Aorta	100%	Major	90 days
End Stage Liver Failure	100%	Major	90 days
Deafness	100%	Major	90 days
Loss of Speech	100%	Major	90 days
Third Degree Burns	100%	Major	90 days
Medullary Cystic Disease	100%	Major	90 days
Motor Neurone Disease with permanent symptoms	100%	Major	90 days
Muscular Dystrophy	100%	Major	90 days
Infective Endocarditis	100%	Major	90 days
Primary (Idiopathic) Pulmonary Hypertension	100%	Major	90 days
Dissecting Aortic Aneurysm	100%	Major	90 days
Systemic Lupus Erythematosus with Lupus Nephritis	100%	Major	90 days
Apallic Syndrome	100%	Major	90 days
Aplastic Anaemia	100%	Major	90 days
Bacterial Meningitis	100%	Major	90 days
Cardiomyopathy	100%	Major	90 days
Other serious coronary artery disease	100%	Major	90 days
Creutzfeldt-Jakob Disease (CJD)	100%	Major	90 days
Encephalitis	100%	Major	90 days
End Stage Lung Failure	100%	Major	90 days
Fulminant Hepatitis	100%	Major	90 days
Eisenmenger's Syndrome	100%	Major	90 days
Major Head Trauma	100%	Major	90 days
Chronic Adrenal Insufficiency (Addison's Disease)	100%	Major	90 days
Progressive Scleroderma	100%	Major	90 days
Progressive Supranuclear Palsy	100%	Major	90 days
Blindness	100%	Major	90 days
Chronic Relapsing Pancreatitis	100%	Major	90 days
Elephantiasis	100%	Major	90 days
Brain Surgery	100%	Major	90 days
HIV due to blood transfusion and occupationally acquired HIV ü	100%	Major	90 days

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Critical Illness/Surgical Procedure	Percentage of Sum Insured Payable	Stage	Applicable Waiting Period
Terminal Illness	100%	Major	90 days
Myelofibrosis	100%	Major	90 days
Pheochromocytoma	100%	Major	90 days
Crohn's Disease	100%	Major	90 days
Severe Rheumatoid Arthritis	100%	Major	90 days
Severe Ulcerative Colitis	100%	Major	90 days
Angioplasty	25% of Sum Insured subject to maximum of INR 1,000,000	Minor	180 days

**II. Optional Covers applicable under Section 1 - Critical Illness**

In consideration of payment of additional Premium, **We** will provide coverage to the **Insured Person(s)** under below listed Covers, up to **Sum Insured** or limits mentioned on the Schedule of Coverage in the **Policy Schedule/Certificate of Insurance**. These Covers are optional and applicable only if opted for.

**i. Cardiac arrest**

We will pay **Sum Insured** if **Insured Person** suffers from **Cardiac arrest**, which first commence/occurs after 90 days from the first commencement of Coverage under this Section.

For the purpose of benefit payable under this Cover, **Cardiac arrest** will be treated as Major stage **Critical Illness**.

**ii. Molecular Gene Expression Profiling Test**

**We** will pay the expenses incurred towards Molecular Gene Expression Profiling Test for Treatment Guidance on diagnosis of **Cancer of specified severity** for which Claim is admissible under the Policy. The benefit under this cover can be availed only once during life time of Coverage under this Section.

**III. General Conditions applicable to Section 1 – Critical Illness and Optional covers**

**i. Waiting Period**

Coverage under this Section is subject to following waiting periods.

- Waiting period of 90 days for major **Critical Illnesses/Surgical Procedure** and 180 days for minor **Critical Illnesses/Surgical Procedure** shall apply to all the claims under this Policy from the first commencement of Coverage under this Section.
- A waiting period of 48 months shall apply for all Pre-existing Conditions declared and/or accepted at the time of first enrolment of Coverage under this Section.

**ii. Survival Period**

Claim under this Section is payable only if **Insured Person** survives 7 days from the diagnosis and fulfillment of the definition of the **Critical Illness/Surgical Procedure** covered.

The Claim is admissible only with confirmatory diagnosis of the conditions covered while the **Insured Person** is alive (A claim would not be admitted if the diagnosis is made post mortem)

**iii. Number of Claims and Benefits payable**

- Only one Claim is payable under each Major and Minor stage Critical Illness during lifetime of the Coverage under this Section subject to maximum 100% of Sum Insured mentioned on the Policy Schedule/Certificate of Insurance.
- On the admissibility of Claim under **Angioplasty**, coverage for **Angioplasty** shall cease to exist. The Coverage shall continue for other **Critical illness/Surgical Procedure** covered for Balance **Sum Insured**.
- On the admissibility of Claim under any Major Stage condition;
  - Coverage for all other Critical Illness/Surgical Procedure opted under Cover shall cease to exist.
  - Coverage for the Insured Person under all other sections of this Policy shall terminate. In consequence thereof no benefit shall be payable under any other section of this Policy.

**IV. General Exclusions applicable to Section 1 – Critical Illness and Optional covers**

We will not make payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to any of the following unless expressly stated to the contrary in the Policy/Certificate of Insurance:

- Treatment directly or indirectly arising from or consequent upon war or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defense, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, radiation of any kind.
- Any Illness, sickness or disease other than those opted and specified as **Critical Illnesses or Surgical Procedure** under this Section.
- Any condition directly or indirectly caused by or associated with any sexually transmitted disease, including Genital Warts, Syphilis, Gonorrhoea, Genital Herpes, Chlamydia, Pubic Lice and Trichomoniasis, whether or not arising out of any **Pre-existing diseases**.
- Any Critical Illness or Surgical Procedure arising out of use, abuse or consequence or influence of any substance, intoxicant, drug, alcohol or hallucinogen
- Narcotics used by the **Insured Person** unless taken as prescribed by a registered Medical Practitioner
- Any Claim directly or indirectly caused due to intentional self-injury, suicide or attempted suicide; whether the person is medically sane or insane
- Any Critical Illness or Surgical Procedure directly or indirectly, caused by or arising from or attributable to a foreign invasion, act of foreign enemies, hostilities, warlike operations (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;
- Any claim caused by ionizing radiation or contamination by

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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.

- ix. Working in underground mines, tunnelling or involving electrical installations with high tension supply, or as jockeys or circus personnel;
- x. Congenital External Anomalies or any complications or conditions arising there from including any developmental conditions of the Insured;
- xi. Insured Persons whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation;
- xii. Participation by the **Insured Person** in any flying activity, except as a bona fide, fare paying passenger of a recognized airline on regular routes and on a scheduled time table.

## Section 2. Women Suraksha

### I. Coverage

If **Insured Person** suffers from **Critical illness** or undergoes **Surgical Procedure** under any of the opted covers as specified below, whose diagnosis first commence/occurs after the applicable Waiting Period from first commencement of the Coverage under this Policy, **We** will pay **Sum Insured** or percentage of **Sum Insured** in accordance with table applicable to each Cover under this Section.

#### i. Cancer Cover

Critical Illness/ Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Malignant Cancer of specified Sites			
• Breast	Major	100% of Sum Insured	90 days
• Cervix			
• Uterus			
• Fallopian Tube			
• Ovary			
• Vagina/Vulva			
Other Major Cancers	Major	100% of Sum Insured	90 days
Carcinoma in-situ of the Cervix Uteri	Minor	25% of <b>Sum Insured</b> subject to maximum of Rs. 1,000,000	180 days
Carcinoma in-situ of the Breast	Minor	25% of <b>Sum Insured</b> subject to maximum of Rs. 1,000,000	180 days

- a. Optional Cover under Cancer Cover - Molecular Gene Expression Profiling Test

In consideration of payment of additional Premium, **We** will pay the expenses incurred, maximum upto Sum Insured mentioned on

the Schedule of Coverage, towards Molecular Gene Expression Profiling Test for Treatment Guidance on diagnosis of **Cancer of specified severity** for which Claim is admissible under the Policy. The benefit under this cover can be availed only once during life time of Coverage under this Section.

#### ii. Major Illnesses

Critical Illness/ Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Systemic Lupus Erythematosus with Lupus Nephritis	Major	100% of Sum Insured	90 days
Rheumatoid Arthritis	Major		
Severe Osteoporosis	Minor	25% of <b>Sum Insured</b> subject to maximum of Rs. 1,000,000	180 days

#### iii. Surgical Procedures

Surgical Procedure/ Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Breast Lumpectomy	Minor	25% of <b>Sum Insured</b> subject to maximum of Rs. 1,000,000	180 Days
Mastectomy			
Breast Reconstructive Surgery			
Hysterectomy			
Wertheim's Operation			
Radical Vulvectomy			
Total Pelvic Exenteration			
Complicated Repair of Vaginal Fistula			

#### iv. Cardiac Ailment and Procedures

Critical Illness/Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Open Chest CABG	Major	100% of Sum Insured	90 days
Heart Valve Repair			
First Heart Attack of Specified Severity			
Coma of Specified Severity			
Stroke Resulting in Permanent Symptoms			
Balloon Valvotomy or Valvuloplasty	Minor	25% of <b>Sum Insured</b> subject to Maximum of Rs. 1,000,000	180 days
Insertion of Pacemaker			
Angioplasty			

- a. Optional Cover under Cardiac Ailment and Procedures – Cardiac arrest

In consideration of payment of additional Premium, **We** will pay **Sum Insured** mentioned on the Schedule of Coverage, If **Insured Person** suffers from **Cardiac arrest**, which first commence/occurs after 90 days from the first commencement of Coverage under this Section.



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For the purpose of benefit payable under this Cover, **Cardiac arrest** will be treated as Major stage **Critical Illness**.

**v. Critical Illnesses**

Critical illness/ Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period
Surgery of Aorta	Major	100%	90 days
Kidney failure requiring regular dialysis	Major	100%	90 days
Infective Endocarditis	Major	100%	90 days
Major Organ/ Bone Marrow Transplantation	Major	100%	90 days
Primary (Idiopathic) Pulmonary Hypertension	Major	100%	90 days
End Stage Liver Failure	Major	100%	90 days
Dissecting Aortic Aneurysm	Major	100%	90 days
Medullary Cystic Disease	Major	100%	90 days
Cardiomyopathy	Major	100%	90 days
Aplastic Anaemia	Major	100%	90 days
Other serious coronary artery disease	Major	100%	90 days
End Stage Lung Failure	Major	100%	90 days
Eisenmenger's Syndrome	Major	100%	90 days
Fulminant Hepatitis	Major	100%	90 days
Multiple Sclerosis with persisting symptoms	Major	100%	90 days
Chronic Adrenal Insufficiency (Addison's Disease)	Major	100%	90 days
Permanent Paralysis of Limbs	Major	100%	90 days
Progressive Scleroderma	Major	100%	90 days
Benign Brain Tumour	Major	100%	90 days
Chronic Relapsing Pancreatitis	Major	100%	90 days
Parkinson's Disease	Major	100%	90 days
Elephantiasis	Major	100%	90 days
Alzheimer's Disease	Major	100%	90 days
HIV due to blood transfusion and occupationally acquired HIV	Major	100%	90 days
Motor Neurone Disease with permanent symptoms	Major	100%	90 days

Critical illness/ Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period
Terminal Illness	Major	100%	90 days
Muscular Dystrophy	Major	100%	90 days
Myelofibrosis	Major	100%	90 days
Apallic Syndrome	Major	100%	90 days
Pheochromocytoma	Major	100%	90 days
Bacterial Meningitis	Major	100%	90 days
Crohn's Disease	Major	100%	90 days
Creutzfeldt-Jakob Disease (CJD)	Major	100%	90 days
Severe Ulcerative Colitis	Major	100%	90 days
Encephalitis	Major	100%	90 days
Deafness	Major	100%	90 days
Major Head Trauma	Major	100%	90 days
Loss of Speech	Major	100%	90 days
Progressive Supranuclear Palsy	Major	100%	90 days
Blindness	Major	100%	90 days
Brain Surgery	Major	100%	90 days

**II. Optional Cover applicable under Section 2 – Women Suraksha and Optional covers**

In consideration of payment of additional **Premium**, **We** will provide coverage to the **Insured Person(s)** under below listed Cover, up to **Sum Insured** or limits mentioned in the Schedule of Coverage in the **Policy Schedule/Certificate of Insurance**. These Covers are optional and applicable only if opted for.

**i. Pregnancy and New Born Complication**

**a. Pregnancy Complication**

If Insured Person suffers from **Pregnancy Complication** as listed below, whose diagnosis first commence/occurs after the applicable Waiting Period from first commencement of Coverage under this Section, We will pay **Sum Insured** or percentage of **Sum Insured** in accordance with table given below:

Pregnancy Complication	Percentage of Sum Insured Payable	Waiting Period Applicable
Disseminated Intravascular Coagulation (DIC)	25% of Sum Insured subject to maximum limit mentioned on Schedule of Coverage	1 year
Ectopic Pregnancy		
Molar Pregnancy		
Eclampsia		

**b. New Born Complication**

If baby born to Insured Person during the Coverage Period suffers from **New Born Complication** as listed below, whose diagnosis and/or manifestation first commence/occurs after the applicable Waiting Period from first commencement of Coverage under this Section, **We** will pay **Sum Insured** or percentage of **Sum Insured** as specified below.

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New Born Complications	Percentage of Sum Insured Payable	Waiting Period Applicable
Down's Syndrome	25% of <b>Sum Insured</b> subject to maximum limit mentioned on Schedule of Coverage	1 year
Spina Bifida		
Tetralogy of Fallot		
Cleft Palate		
Ventricular Septal Defect		
Patent Ductus Arteriosus		
Surgical Separation of Conjoined Twins		

**Diagnosis Period and Survival Period**

A Claim under New Born Complications is payable only if;

- The covered complication is diagnosed within two years from the date of delivery of the baby.
- The baby survives at least 30 days from the date of delivery with congenital condition.

**Specific Condition applicable to Pregnancy and New Born complication**

The coverage under this Section is effective for baby born to **Insured Person** upto age 50 years only

**III. General Conditions applicable to Section 2 – Women Suraksha and Optional covers**

**i. Reduced Premium Benefit**

If **Insured Person** is diagnosed with any Minor condition covered under this section and for which Claim is admissible, **We** will waive 50% of the applicable Annual **Renewal** Premium on subsequent **Renewal** of Coverage with **Us** subject to:

- Premium will be waived for the **Renewal** of **Insured Person** for whom the claim has been made as per terms applicable to the Coverage on **Renewal**
- Premium will be waived for continuous **Renewal** for 5 subsequent **Policy Years** only.

**ii. Waiting Period**

Coverage under this Section is subject to following waiting periods.

- Waiting period of 90 days for major **Critical Illnesses/Surgical Procedure** and 180 days for minor **Critical Illnesses/Surgical Procedure** shall apply to all the claims under this Policy from the first commencement of Coverage under this Section.
- A waiting period of 48 months shall apply for all Pre-existing Conditions declared and/or accepted at the time of first enrolment of Coverage under this Section.

**iii. Survival Period**

Claim under this Section is payable only if **Insured Person** survives 7 days from the diagnosis and fulfillment of the definition of the **Critical Illness/Surgical Procedure** covered.

The Claim is admissible only with confirmatory diagnosis of the conditions covered while the **Insured Person** is alive (A claim would not be admitted if the diagnosis is made post mortem)

**iv. Number of Claims and Benefits payable**

Only one Claim is payable under each of the stages given below during lifetime of the Policy under Covers specified above, subject to maximum 100% of Sum Insured mentioned on the **Policy Schedule/Certificate of Insurance**.

- Minor Stage** - On the admissibility of Claim under Minor Stage condition under this Section, coverage for all other Minor stage Conditions shall cease to exist. The Coverage under the Section shall continue for Major Stage conditions for Balance Sum Insured.
- Major Stage** – On the admissibility of Claim under any Major Stage condition;
  - coverage for all other Critical Illness/Surgical Procedure opted under the Cover shall cease to exist and;
  - coverage for the Insured Person under all other sections of this Policy shall terminate. In consequence thereof no benefit shall be payable under any other section of this Policy.

**IV. General Exclusions applicable to Section 2 – Women Suraksha and Optional covers**

We will not make payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to any of the following unless expressly stated to the contrary in the Policy/Certificate of Insurance:

- Treatment directly or indirectly arising from or consequent upon war or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defense, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/ materials, chemical and biological weapons, radiation of any kind.
- Any Illness, sickness or disease other than those opted and specified as **Critical Illnesses or Surgical Procedure** under this Section
- Any condition directly or indirectly caused by or associated with any sexually transmitted disease, including Genital Warts, Syphilis, Gonorrhoea, Genital Herpes, Chlamydia, Pubic Lice and Trichomoniasis, whether or not arising out of any **Pre-existing diseases**.
- Any Critical Illness or Surgical Procedure arising out of use, abuse or consequence or influence of any substance, intoxicant, drug, alcohol or hallucinogen
- Narcotics used by the **Insured Person** unless taken as prescribed by a registered Medical Practitioner
- Any Claim directly or indirectly caused due to intentional self-injury, suicide or attempted suicide; whether the person is medically sane or insane
- Any Critical Illness or Surgical Procedure directly or indirectly, caused by or arising from or attributable to a foreign invasion, act of foreign enemies, hostilities, warlike operations (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;
- Any claim caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form)

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or from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.

- ix. Working in underground mines, tunnelling or involving electrical installations with high tension supply, or as jockeys or circus personnel;
- x. Congenital External Anomalies or any complications or conditions arising there from including any developmental conditions of the Insured; this exclusion is not applicable on New Born Complications - Cleft palate, Surgical Separation of Conjoined Twins and Spina Bifida to the extent of Coverage provided.;
- xi. Insured Persons whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation;
- xii. Participation by the **Insured Person** in any flying activity, except as a bona fide, fare paying passenger of a recognized airline on regular routes and on a scheduled time table.

**Section 3. Sachet Critical Illness**

**I. Coverage**

If **Insured Person** suffers from **Critical illness** or undergoes **Surgical Procedure** under any of the opted covers as specified below, whose diagnosis first commence/occurs after the applicable Waiting Period from first commencement of the Coverage under this Section, **We** will pay **Sum Insured** or percentage of **Sum Insured** in accordance with table applicable to each Cover under this Section.

**i. Cancer Cover**

Critical illness /Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Malignant Cancer of specified Sites			
Specified Sites- Female			
• Breast	Major	100% of Sum Insured	90 days
• Cervix			
• Uterus			
• Fallopian Tube			
• Ovary			
• Vagina/Vulva			
Specified Sites- Male			
• Head and Neck	Major	100% of Sum Insured	90 days
• Lung			
• Stomach			
• Colorectum			
• Prostate			
Cancer of specified severity	Major	100% of Sum Insured	90 days
Aplastic Anemia	Major	100% of Sum Insured	90 days
Major Organ Transplant – Bone Marrow	Major	100% of Sum Insured	90 days

Critical illness /Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Early Stage Cancer	Minor	25% of Sum Insured subject to maximum of Rs. 1,000,000	180 days
Carcinoma in situ	Minor		

- a. Optional Cover applicable under Cancer Cover - Molecular Gene Expression Profiling Test

In consideration of payment of additional Premium, **We** will pay the expenses incurred, maximum upto Sum Insured mentioned on the Schedule of Coverage, towards Molecular Gene Expression Profiling Test for Treatment Guidance on diagnosis of **Cancer of specified severity** for which Claim is admissible under this Section. The benefit under this cover can be availed only once during life time of Coverage under this Section.

**ii. Heart Cover**

Critical illness /Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Open Chest CABG	Major	100% of Sum Insured	90 days
Myocardial Infarction (First Heart Attack of specified severity)	Major	100% of Sum Insured	90 days
Open Heart Replacement or Repair of Heart Valves	Major	100% of Sum Insured	90 days
Major Organ Transplant – Heart	Major	100% of Sum Insured	90 days
Surgery of Aorta	Major	100% of Sum Insured	90 days
Primary (Idiopathic) Pulmonary Hypertension	Major	100% of Sum Insured	90 days
Other serious coronary artery disease	Major	100% of Sum Insured	90 days
Dissecting Aortic Aneurysm	Major	100% of Sum Insured	90 days
Cardiomyopathy	Major	100% of Sum Insured	90 days
Eisenmenger's Syndrome	Major	100% of Sum Insured	90 days
Infective Endocarditis	Major	100% of Sum Insured	90 days
Angioplasty	Minor	25% subject to maximum of INR 1,000,000	180 days
Balloon Valvotomy or Valvuloplasty	Minor		180 days
Insertion of Pacemaker	Minor		180 days

- a. Optional Cover applicable under Heart Cover – Cardiac arrest

In consideration of payment of additional Premium, **We** will pay **Sum Insured** mentioned on the Schedule of Coverage, If **Insured**

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Person suffers from **Cardiac arrest**, which first commence/occurs after 90 days from the first commencement of Coverage under this Section.

For the purpose of benefit payable under this Cover, **Cardiac arrest** will be treated as Major stage **Critical Illness**.

### iii. Nervous System Cover

Critical illness /Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Multiple Sclerosis with persisting symptoms	Major	100% of Sum Insured	90 days
Permanent Paralysis of Limbs	Major	100% of Sum Insured	90 days
Stroke resulting in permanent symptoms	Major	100% of Sum Insured	90 days
Benign Brain Tumor	Major	100% of Sum Insured	90 days
Coma of specified severity	Major	100% of Sum Insured	90 days
Parkinson's Disease	Major	100% of Sum Insured	90 days
Alzheimer's Disease	Major	100% of Sum Insured	90 days
Motor Neurone Disease with permanent symptoms	Major	100% of Sum Insured	90 days
Muscular Dystrophy	Major	100% of Sum Insured	90 days
Apallic Syndrome	Major	100% of Sum Insured	90 days
Bacterial Meningitis	Major	100% of Sum Insured	90 days
Creutzfeldt-Jakob Disease (CJD)	Major	100% of Sum Insured	90 days
Encephalitis	Major	100% of Sum Insured	90 days
Major Head Trauma	Major	100% of Sum Insured	90 days
Progressive Supranuclear Palsy	Major	100% of Sum Insured	90 days
Brain Surgery	Major	100% of Sum Insured	90 days
Loss of Speech	Major	100% of Sum Insured	90 days

### iv. Other Major Organ Cover

Critical illness /Surgical Procedure	Stage	Percentage of Sum Insured Payable	Waiting Period Applicable
Kidney failure requiring regular dialysis	Major	100% of Sum Insured	90 days
Major Organ Transplant – Kidney, Lung, Liver and Pancreas	Major	100% of Sum Insured	90 days
End Stage Liver Failure	Major	100% of Sum Insured	90 days
Medullary Cystic Disease	Major	100% of Sum Insured	90 days
Systemic Lupus Erythematosus with Lupus Nephritis	Major	100% of Sum Insured	90 days
End Stage Lung Failure	Major	100% of Sum Insured	90 days
Fulminant Hepatitis	Major	100% of Sum Insured	90 days
Chronic Adrenal Insufficiency (Addison's Disease)	Major	100% of Sum Insured	90 days
Progressive Scleroderma	Major	100% of Sum Insured	90 days
Chronic Relapsing Pancreatitis	Major	100% of Sum Insured	90 days
Elephantiasis	Major	100% of Sum Insured	90 days
HIV due to blood transfusion and occupationally acquired HIV	Major	100% of Sum Insured	90 days
Terminal Illness	Major	100% of Sum Insured	90 days
Myelofibrosis	Major	100% of Sum Insured	90 days
Pheochromocytoma	Major	100% of Sum Insured	90 days
Crohn's Disease	Major	100% of Sum Insured	90 days
Severe Rheumatoid Arthritis	Major	100% of Sum Insured	90 days
Severe Ulcerative Colitis	Major	100% of Sum Insured	90 days
Deafness	Major	100% of Sum Insured	90 days
Blindness	Major	100% of Sum Insured	90 days
Third Degree Burns	Major	100% of Sum Insured	90 days
Severe Osteoporosis	Minor	25% subject to maximum payout of INR 1,000,000	180 days



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**II. General Conditions applicable to Section 3 – Sachet Critical Illness and Optional covers**

**i. Reduced Premium Benefit**

If **Insured Person** is diagnosed with any Minor condition covered under this section and for which Claim is admissible, **We** will waive 50% of the applicable Annual **Renewal** Premium on subsequent **Renewal** of Coverage with **Us** subject to:

- a. Premium will be waived for the **Renewal** of **Insured Person** for whom the claim has been made as per terms applicable to the Coverage on **Renewal**
- b. Premium will be waived for continuous **Renewal** for 5 subsequent **Policy Years** only.

**ii. Waiting Period**

Coverage under this Section is subject to following waiting periods.

1. Waiting period of 90 days for major **Critical Illnesses/ Surgical Procedure** and 180 days for minor **Critical Illnesses/Surgical Procedure** shall apply to all the claims under this Policy from the first commencement of Coverage under this Section.
2. A waiting period of 48 months shall apply for all Pre-existing Conditions declared and/or accepted at the time of first enrolment of Coverage under this Section.

**iii. Survival Period**

Claim under this Section is payable only if **Insured Person** survives 7 days from the diagnosis and fulfillment of the definition of the **Critical Illness/Surgical Procedure** covered.

The Claim is admissible only with confirmatory diagnosis of the conditions covered while the **Insured Person** is alive (A claim would not be admitted if the diagnosis is made post mortem)

**iv. Number of Claims and Benefits payable**

Only one Claim is payable under each of the stages given below during lifetime of the Policy under Covers specified above, subject to maximum 100% of Sum Insured mentioned on the **Policy Schedule/Certificate of Insurance**.

- a. **Minor Stage** - On the admissibility of Claim under Minor Stage condition under this Section, coverage for all other Minor stage Conditions shall cease to exist. The Coverage under the Section shall continue for Major Stage conditions for Balance Sum Insured.
- b. **Major Stage** – On the admissibility of Claim under any Major Stage condition;
  - i. coverage for all other Critical Illness/Surgical Procedure opted under the Cover shall cease to exist and;
  - ii. coverage for the Insured Person under all other sections of this Policy shall terminate. In consequence thereof no benefit shall be payable under any other section of this Policy.

**III. General Exclusions applicable to Section 3 – Sachet Critical Illness and Optional covers**

We will not make payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to any of the following unless expressly stated to the contrary in the Policy/Certificate of Insurance:

- i. Treatment directly or indirectly arising from or consequent upon war or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defense, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/ materials, chemical and biological weapons, radiation of any kind.
- ii. Any Illness, sickness or disease other than those opted and specified as **Critical Illnesses or Surgical Procedure** under this Section.
- iii. Any condition directly or indirectly caused by or associated with any sexually transmitted disease, including Genital Warts, Syphilis, Gonorrhoea, Genital Herpes, Chlamydia, Pubic Lice and Trichomoniasis, whether or not arising out of any **Pre-existing diseases**.
- iv. Any Critical Illness or Surgical Procedure arising out of use, abuse or consequence or influence of any substance, intoxicant, drug, alcohol or hallucinogen
- v. Narcotics used by the **Insured Person** unless taken as prescribed by a registered Medical Practitioner
- vi. Any Claim directly or indirectly caused due to intentional self-injury, suicide or attempted suicide; whether the person is medically sane or insane
- vii. Any Critical Illness or Surgical Procedure directly or indirectly, caused by or arising from or attributable to a foreign invasion, act of foreign enemies, hostilities, warlike operations (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;
- viii. 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.
- ix. Working in underground mines, tunnelling or involving electrical installations with high tension supply, or as jockeys or circus personnel;
- x. Congenital External Anomalies or any complications or conditions arising there from including any developmental conditions of the Insured;
- xi. Insured Persons whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation;
- xii. Participation by the **Insured Person** in any flying activity, except as a bona fide, fare paying passenger of a recognized airline on regular routes and on a scheduled time table.

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## Section 4 – Optional Covers applicable under Section 1 to 3

In consideration of payment of additional Premium, We will provide coverage to the **Insured Person(s)** under below listed Covers, up to **Sum Insured** or limits mentioned on the Schedule of Coverage in the **Policy Schedule/Certificate of Insurance**. These Covers are optional and applicable only if opted for.

## I. Preventive Health Check up

**Insured Person** will be entitled for Preventive Health Check-up after completion of each Policy Year at our Network Diagnostic centers or hospitals in accordance to list of tests, eligibility criteria and waiting period as specified below.

Age / Expiring Policy Sum Insured	1 Lac to 10 Lacs	11 Lacs to 50 Lacs	Above 50 Lacs
18 to 40 Years	Set 1	Set 1, Thyroid, USG abdomen and pelvis	Set 1, Thyroid, USG abdomen and pelvis, Lipid Profile, Renal Profile
41 Yrs and Above	Set 1, Sr Creat	Set 1, Sr Creat, Thyroid, USG abdomen and pelvis	Set 1, Thyroid, USG abdomen and pelvis, Lipid Profile, Renal profile, ECG

Set 1 -Comprises of, Complete Blood Count, Urine R, FBS, Sr Cholesterol

Other terms and Conditions applicable to this Benefit

- This benefit will not be carried forward if not utilized within 60 days of Policy anniversary date.
- Eligibility to avail Health Check-up will be in accordance to Sum Insured under expiring Policy Year.
- The test reports received under this benefit will not be utilized for re-underwriting the coverage of **Insured Person**

Procedure for availing this benefit

- You** will be intimated to undergo the health check-up at our **Network Provider**, through **Our my: health App**.
- Test reports from our **Network Provider** will be made available to You on **Our my: health App**
- You** have the option to avail this benefit at our **Network Provider** through Phone/Email or other modes of communication available time to time.

## II. Post Diagnosis Assistance

We will pay per session **Sum Insured** upto maximum number of sessions specified on Schedule of Coverage towards out patient counselling required upon diagnosis of **Critical Illnesses** or undergoing **Surgical Procedures** for which Claim is admissible under the Policy.

## III. Second Medical Opinion

## a. Second Medical Opinion – India

We will pay **Medical consultation** expenses incurred towards **Second Medical Opinion** availed from **Medical Practitioner**

any where in India in respect of **Critical Illnesses** and **Surgical Procedures** for which Claim is admissible under the Policy.

## b. Second Medical Opinion – Global

We will pay **Medical consultation** expenses incurred towards **Second Medical Opinion** availed from **Medical Practitioner** any where in the world in respect of **Critical Illnesses** and **Surgical Procedures** for which Claim is admissible under the Policy.

## IV. Loss of Job

We will pay **Sum Insured** if **Insured Person** suffers from Loss of Job due to his/her Voluntary Resignation or Termination from the employment within six months of diagnosis of any of the Major stage **Critical Illnesses** or undergoing any of the Major stage **Surgical Procedures** for which Claim is admissible under the Policy.

Exclusions applicable to this Cover;

- Loss of job due to retirement whether voluntary or otherwise
- Resignation due to non-confirmation of employment after or during such period under which the Insured was under probation

## V. Pre Diagnosis Cover

We will pay the expenses incurred towards diagnostic tests/ procedures incurred up to 30 days prior to the diagnosis of **Critical Illness or Undergoing Surgical Procedure** for which Claim is admissible under the Coverage.

Indicative list of Procedures covered

Sr No	List of Diagnostic tests/ Procedures
1	Renal/Cardiac Angiogram.
2	Intravenous Pyelogram.
3	Ultrasonography.
4	Ultrasound Guided FNAC.
5	Colour Doppler.
6	Mammography.
7	CT Scan.
8	MRI Scan.
9	Treadmill Test ECHO.
10	Cardiogram.
11	Electrophysiology.
12	Endoscopic Procedures.
13	Special Radiological Procedures such as barium meal investigations
14	Arthrograph, ERCP, Intravenous Urogram, Cystourethrogram,
15	Nephrostogram.
16	Special Blood Investigations such as Assay of Various Blood Factors.
17	Virology Markers, Complete Coagulation Work up

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**Section 5 - Recovery Benefit**

**I. Coverage**

We will pay **Sum Insured** upon **Medically Necessary**;

**i. Hospitalization**

**ii. Domiciliary Hospitalization**

**iii. Hospitalization for Alternative Treatments**

of an **Insured Person** exceeding 10 consecutive and continuous days in India due to **Illness** or **Injury** sustained or contracted during Period of Insurance.

**II. Optional Cover Applicable under Section 5 – Recovery Benefit**

In consideration of payment of additional **Premium**, **We** will provide coverage to the **Insured Person(s)** cover under below listed Covers, up to **Sum Insured** or limits mentioned on the Schedule of Coverage in the **Policy Schedule/Certificate of Insurance**. These Covers are optional and applicable only if opted for.

**i. Preventive Health Check up**

**Insured Person** will be entitled for Preventive Health Check-up after completion of each Policy Year at our Network Diagnostic centers or hospitals in accordance to list of tests, eligibility criteria and waiting period as specified below.

Age	18 to 40 Years	41 Yrs and Above
<b>Test</b>	Set 1	Set 1, Sr Creat

Set 1 -Comprises of, Complete Blood Count, Urine R, FBS, Sr Cholesterol

Other terms and Conditions applicable to this Benefit

- This benefit will not be carried forward if not utilized within 60 days of Policy anniversary date.
- Eligibility to avail Health Check-up will be in accordance to Sum Insured under expiring Policy Year.
- The test reports received under this benefit will not be utilized for re-underwriting the coverage of **Insured Person**

Procedure for availing this benefit

- You** will be intimated to undergo the health check-up at our **Network Provider**, through **Our my: health App**.
- Test reports from our **Network Provider** will be made available to You on **Our my: health App**
- You** have the option to avail this benefit at our **Network Provider** through Phone/Email or other modes of communication available time to time.

**ii. Recovery Benefit – Global**

On opting this Cover, We will pay Sum Insured on Hospitalization of Insured Person in accordance with Cover I of this Section, anywhere in World.

**iii. Maternity Benefit**

On opting this cover, General exclusion ix) under IV of this Section shall stand deleted for the claim admissible under cover I – Coverage.

**iv. Reinstatement of Sum Insured**

On opting this Cover, **We** will add to the Sum Insured, an amount equivalent to the Sum Insured under Cover I of this Section, on subsequent **Hospitalization** of the **Insured Person** during Policy Year subject to;

- Maximum Reinstatement of Sum Insured will be equivalent to Sum Insured under Cover I of this Section
- Reinstatement of Sum Insured is not applicable to claim in respect of **Any one Illness**
- In case of treatment for Chemotherapy and Dialysis, Reinstatement of Sum Insured will be applicable only once in lifetime of Coverage.
- This cover will be applicable annually for Coverage with term more than one year.
- Any unutilized number of benefit days cannot be carried over to next **Policy Year** or **Renewal** of Coverage

**v. Waiting Period modification option**

On opting this Cover, **Waiting Periods** under IV of this Section shall stand modified as mentioned in Schedule of Coverage on the **Policy Schedule/Certificate of Insurance**.

All other terms and Conditions of the respective Section and Policy shall remain unaltered

**III. General Conditions application to Section 5**

**i. Mental Health Care**

If an Insured Person is hospitalized for any **Mental Illness** contracted during the Policy period We will pay Sum Insured under Section 5 I in accordance with The Mental Health Care Act, 2017, subsequent amendments and other applicable laws and Rules provided that the **Hospitalization** is done in **Mental Health Establishment**

**IV. Waiting Period and General Exclusions applicable to Section 5 – Recovery Benefit and Optional covers**

**i. Waiting Periods**

All claims payable under this Section will be subject to the waiting periods specified below:

- General waiting period:** 30 days except claims arising due to an **Accident**.
- Waiting Period for listed illnesses and Procedures:** 24 months all **Illnesses** and **Surgical Procedures** listed in following table a. and b. except claims payable due to the occurrence of cancer.

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**a. Illnesses**

Internal Congenital diseases	Non infective Arthritis
Diseases of gall bladder including cholecystitis	Urogenital system e.g. Kidney stone, Urinary Bladder Stone
Pancreatitis	Ulcer and erosion of stomach and duodenum
All forms of Cirrhosis	Gastro Oesophageal Reflux Disorder (GERD)
Perineal Abscesses	Perianal Abscesses
Cataract	Fissure/fistula in anus, Haemorrhoids including
Pilonidal sinus	Gout and rheumatism
Benign tumors, cysts, nodules, polyps including breast lumps	Osteoarthritis and osteoporosis
Polycystic ovarian diseases	Fibroids ( fibromyoma)
Sinusitis, Rhinitis	Tonsillitis
Skin tumors	Benign Hyperplasia of Prostate

**b. Procedures**

Adenoidectomy, tonsillectomy	Tympanoplasty, Mastoidectomy
Dilatation and curettage (D&C)	Nasal concha resection
Myomectomy for fibroids	<b>Surgery</b> of Genito urinary system
<b>Surgery</b> on prostate	Cholecystectomy
Hernia	Hydrocele/Rectocele
<b>Surgery</b> for prolapsed inter vertebral disc	Joint replacement surgeries
<b>Surgery</b> for varicose veins and varicose ulcers	<b>Surgery</b> for Nasal septum deviation
<b>Surgery</b> for Perianal Abscesses	Fissurectomy, Haemorrhoidectomy, Fistulectomy, ENT surgeries

**c. Waiting Period for Pre-existing diseases**

A waiting period of 48 months shall apply for all Pre-existing Conditions declared and/or accepted at the time of first enrolment of Coverage under this Section.

**ii. General Exclusions**

We will not make payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to any of the following unless expressly stated to the contrary in the Policy/Certificate of Insurance:

- War or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, radiation of any kind.
- Any Insured Person committing or attempting to commit a breach of law with criminal intent, or intentional self-injury or attempted suicide or suicide while mentally sound or unsound.

- Any Insured Person's participation or involvement in naval, military or air force operation, racing, diving, aviation, scuba diving, parachuting, hang-gliding, rock or mountain climbing of a professional or semi-professional nature.
- 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.
- Treatment of Obesity and any weight control program.
- sleep-apnoea, Parkinson and Alzheimer's disease, general debility or exhaustion ("run-down condition").
- Congenital external diseases, defects or anomalies,
- Stem cell harvesting, or growth hormone therapy. Venereal disease, sexually transmitted disease or **Illness**
- Pregnancy (including voluntary termination), miscarriage (except as a result of an Accident or **Illness**), maternity or birth (including caesarean section) except in the case of ectopic pregnancy.
- treatment to treat infertility any fertility, sub-fertility or assisted conception procedure,
- Sterility, treatment whether to affect infertility, surrogate or vicarious pregnancy, birth control, contraceptive supplies or services including complications arising due to supplying services.
- Treatment and supplies for analysis and adjustments of spinal subluxation, 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).
- Circumcisions (unless necessitated by **Illness** or **Injury** and forming part of treatment); treatment for correction of vision due to refractive error, aesthetic or change-of-life treatments of any description such as sex transformation operations.
- Plastic surgery or cosmetic surgery or treatments to change appearance unless necessary as a part of **Medically Necessary Treatment** certified by the attending Medical Practitioner for reconstruction following an **Accident**, cancer or burns.
- Experimental**, investigational or **Unproven** treatments, devices and pharmacological regimens.
- Investigation & Evaluation;
    - Expenses related to any admission primarily for diagnostic and evaluation purposes only are excluded.
    - Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.
- Any Convalescence, cure, rest cure, sanatorium treatment, rehabilitation measures, private duty nursing, respite care, long-term nursing care or custodial care.
- Preventive care, any physical, psychiatric or psychological examinations or testing if doesn't required **Hospitalization**; enteral feedings (infusion formulas via a tube into the upper gastrointestinal tract) and other nutritional and electrolyte supplements, unless certified to be required by the attending Medical Practitioner as a direct consequence of an otherwise covered claim.
- vaccination including inoculation and immunisations (Except post bite treatment),



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- xx. Treatment rendered by a Medical Practitioner which is outside his discipline or the discipline for which he is licensed; treatments rendered by a Medical Practitioner who is a member of an Insured Person's family, or stays with him
- xxi. Any Claim arising due to Non-disclosure of Pre-existing **Illness** or Material fact as sought to be declared on the Proposal/Enrolment form

**Section 6 - Assault and Burns**

**I. Coverage**

**i. Assault**

If an **Insured Person** sustains **Bodily Injury** that results in Death, Permanent Total Disablement or Permanent Partial Disablement, as a result of or arising from **Assault** after the applicable waiting Period from first commencement of Coverage under this Section, **We** will pay **Sum Insured** or percentage of **Sum Insured** in accordance with the table below;

Table of Benefits	Percentage of Sum Insured Payable	Applicable Waiting Period
Accidental Death		90 days
a) Accidental Death	100%	
Permanent Total Disability		
a) Loss of sight of both eyes	100%	
b) Physical separation of two entire hands or two entire feet	100%	
c) Loss of one entire hand and one entire foot	100%	
d) Loss of sight of one eye and such loss of one entire hand or one entire foot	100%	
e) Complete loss of hearing of both ears and complete loss of speech	100%	
f) Complete loss of hearing of both ears and loss of one limb/loss of sight of one eye	100%	
g) Complete loss of speech and loss of one limb/loss of sight of one eye	100%	
For the purpose of items 2 above, physical separation of one entire hand shall mean separation at or above wrist and/or of the foot at or above ankle, respectively		90 days
Permanent total and absolute disablement disabling the Insured Person from engaging in any employment or occupation of any description whatsoever	100%	
Permanent Partial Disability		
a) Sight of one eye	50%	
b) One hand or One foot	50%	
c) Loss of toes-all	20%	
d) Loss of Toes Great - both phalanges	05%	

Table of Benefits	Percentage of Sum Insured Payable	Applicable Waiting Period
e) Loss of Toes Great - one phalanges	02%	90 days
f) Loss of Toes Other than great, if more than one toe lost, each	01%	
g) Loss of hearing-both ears	50%	
h) Loss of hearing -one ear	15%	
i) Loss of speech	50%	
j) Loss of four fingers and thumb of one hand	40%	
k) Loss of four fingers	35%	
l) Loss of thumb -both phalanges	25%	
m) Loss of thumb- one phalanx	10%	
n) Loss of index finger-three phalanges	10%	
a. two phalanges	4%	
b. one phalanx	8%	
o) Loss of middle finger-three phalanges	6%	
a. two phalanges	4%	
b. one phalanx	2%	
p) Loss of ring finger-three phalanges	5%	
a. two phalanges	4%	
b. one phalanx	2%	
q) Loss of little finger-three phalanges	4%	
a. two phalanges	3%	
b. one phalanx	2%	
r) Loss of metacarpals-first or second,	3%	Percentage as assessed by panel doctor appointed by the Company.
a. third, fourth or fifth	2%	
s) Any other Permanent Disablement		

**ii. Burns**

If an **Insured Person** sustains **Bodily Injury** that results in second or third degree burns after the applicable waiting Period from first commencement of Coverage under this Policy, **We** will pay **Sum Insured** or percentage of **Sum Insured** in accordance with table below;

Table of Benefits	Percentage of Total Sum Insured	Applicable Waiting Period
<b>a. Head</b>		90 days
i. Third degree burns of 8% or more of the total head surface area	100%	
ii. Second degree burns of 8% or more of the total head surface	50%	
iii. Third degree burns of 5% or more, but less than 8% of the total head surface area	80%	
iv. Second degree burns of 5% or more, but less than 8% of the total head surface area	40%	

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Table of Benefits	Percentage of Total Sum Insured	Applicable Waiting Period
v. Third degree burns of 2% or more, but less than 5% of the total head surface area	60%	
vi. Second degree burns of 2% or more, but less than 5% of the total head surface area	0%	
b. Rest of the Body		
i. Third degree burns of 20% or more of the total body surface area	100%	
ii. Second degree burns of 20% or more of the total body surface area	50%	
iii. Third degree burns of 15% or more, but less than 20% of the total body surface area	80%	
iv. Second degree burns of 15% or more, but less than 20% of the total body surface area	40%	
v. Third degree burns of 10% or more, but less than 15% of the total body surface area	60%	
vi. Second degree burns of 10% or more, but less than 15% of the total body surface area	30%	
vii. Third degree burns of 5% or more, but less than 10% of the total body surface area	20%	
viii. Second degree burns of 5% or more, but less than 10% of the total body surface area	10%	

**II. General Conditions applicable to Section 6 – Assault & Burns and Optional covers**

**i. Waiting Period**

Coverage under this Section is subject to following waiting periods.

- Waiting period of 90 days shall apply to all the claims from the first commencement of Coverage under this Section.
- A waiting period of 48 months shall apply for all Pre-existing Conditions declared and/or accepted at the time of first enrolment of Coverage under this Section.

**ii. Survival Period**

Claim under Cover I(ii), Burns is admissible only if Insured Person survives 7 days from the occurrence of **Bodily Injury** covered.

**iii. Number of Claims and Benefits payable**

- On admissibility of Claim under this Section, where benefit amount payable is less than 100% of Sum Insured, the coverage under this Section shall continue for balance Sum Insured under the Section.
- On admissibility of Claim under this Section, where benefit amount payable is 100% of Sum Insured, coverage for Insured Person under all Sections of this Policy shall terminate. In consequence thereof no benefit shall be payable under any other section of this Policy.

**III. General Exclusions applicable to Section 6 – Assault & Burns and Optional covers**

We will not make payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to any of the following unless expressly stated to the contrary in the Policy/Certificate of Insurance:

- Treatment directly or indirectly arising from or consequent upon war or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defense, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/ materials, chemical and biological weapons, radiation of any kind.
- Any **Insured Person** committing or attempting to commit a breach of law with criminal intent, or intentional self-injury or attempted suicide while sane or insane.
- Participation or involvement of an **Insured Person** in naval, military or air force operation, racing, in a professional or semiprofessional nature
- From engaging in or participation in adventure sports including but not limited to winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters, participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sport for which the Insured is untrained.
- Abuse or the consequences of the abuse of intoxicants or hallucinogenic substances such as intoxicating drugs and alcohol including smoking cessation programs and the treatment of nicotine addiction or any other substance abuse treatment or services, or supplies
- Event which occurs whilst the Insured is operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft, or Scheduled Airlines or is engaging in aviation or ballooning, or whilst the Insured is mounting into, or 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.
- The Company shall not be liable to pay any benefit in respect of any Insured Person for an act of **Assault** by military or police force, or military or paramilitary organisation.
- Participation or involvement of an **Insured Person** in naval, Policy, military or air force operation.

**IV. Optional Covers Applicable under Section 6**

In consideration of payment of additional Premium, **We** will provide coverage to the **Insured Person(s)** under below listed Covers, up to **Sum Insured** or limits mentioned on the Schedule of Coverage in the **Policy Schedule/Certificate of Insurance**. These Covers are optional and applicable only if opted for.

**a. Preventive Health Check up**

**Insured Person** will be entitled for Preventive Health Check-up after completion of each Policy Year at our Network Diagnostic centers or hospitals in accordance to list of tests, eligibility criteria and waiting period as specified below.

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Age / Expiring Policy Sum Insured	1 Lac to 10 Lacs	11 Lacs to 50 Lacs	Above 50 Lacs
<b>18 to 40 Years</b>	Set 1	Set 1, Thyroid, USG abdomen and pelvis	Set 1, Thyroid, USG abdomen and pelvis, Lipid Profile, Renal Profile
<b>41 Yrs and Above</b>	Set 1, Sr Creat	Set 1, Sr Creat, Thyroid, USG abdomen and pelvis	Set 1, Thyroid, USG abdomen and pelvis, Lipid Profile, Renal profile, ECG

Set 1 -Comprises of, Complete Blood Count, Urine R, FBS, Sr Cholesterol

Other terms and Conditions applicable to this Benefit

- This benefit will not be carried forward if not utilized within 60 days of Policy anniversary date.
- Eligibility to avail Health Check-up will be in accordance to Sum Insured under expiring Policy Year.
- The test reports received under this benefit will not be utilized for re-underwriting the coverage of **Insured Person**

Procedure for availing this benefit

- You** will be intimated to undergo the health check-up at our **Network Provider**, through **Our my: health App**.
- Test reports from our **Network Provider** will be made available to You on **Our my: health App**
- You** have the option to avail this benefit at our **Network Provider** through Phone/Email or other modes of communication available time to time.

**b. Post Trauma Assistance**

**We** will pay **Sum Insured** towards out patient counselling required on Insured Person suffering from **Bodily Injury** arising out of **Assault** or Burns for which Claim is admissible under this Section.

Benefit under this cover is applicable upto specified amount per session subject to maximum number of sessions specified on Schedule of Coverage/Certificate of Insurance.

**c. Second Medical Opinion**

**a. Second Medical Opinion – India**

**We** will pay **Medical consultation** expenses incurred towards **Second Medical Opinion** availed from **Medical Practitioner** any where in India in respect of **Bodily Injury** suffered by **Insured Person** arising out of **Assault** or Burns for which is Claim is admissible under this Section.

**b. Second Medical Opinion – Global**

**We** will pay **Medical consultation** expenses incurred towards **Second Medical Opinion** availed from **Medical Practitioner** any where in the World in respect of **Bodily Injury** suffered by **Insured Person** arising out of **Assault** or Burns for which is Claim is admissible under this Section.

**d. Loss of Job**

**We** will pay **Sum Insured** if **Insured Person** suffers from Loss of

Job due to his/her Voluntary Resignation or Termination from the employment within six months of suffering **Bodily Injury** due to **Assault** or Burns for which Claim is admissible under this Section.

Exclusions applicable to this Cover;

- Loss of job due to retirement whether voluntary or otherwise
- Resignation due to non-confirmation of employment after or during such period under which the Insured was under probation

**Section 7 - Hospital Cash**

**I. Coverage**

**i. Hospital Cash**

**We** will pay **Sum Insured** for each continuous and completed period of 24 hours on **Medically Necessary**;

**i. Hospitalization**

**ii. Domiciliary Hospitalization**

**iii. Hospitalization for Alternative Treatments of an Insured Person** in India due to **Illness** or **Injury** sustained or contracted during Period of Insurance.

The payment is subject to **Time Deductible** and per day benefit **Sum Insured** for up to maximum number of benefit days as specified on the Schedule of Coverage in the **Policy Schedule/ Certificate of Insurance**.

**II. Optional Covers applicable under Section 7 – Hospital Cash**

In consideration of payment of additional Premium, **We** will provide coverage to the **Insured Person(s)** under below listed Covers, up to **Sum Insured** or limits mentioned on the Schedule of Coverage in the **Policy Schedule/Certificate of Insurance**. These Covers are optional and applicable only if opted for.

**i. Hospital Cash – Global**

On opting this Cover, **We** will pay **Sum Insured** on Hospitalization of Insured Person in accordance with Cover I of this Section, anywhere in World.

**ii. Companion Benefit**

In the event of admissible Claim under Cover I, **We** will pay additional **Sum Insured** towards expenses of an accompanying person during Hospitalization of the Insured Person.

**iii. ICU Hospitalization**

In the event of **hospitalization** of Insured Person under Cover I for which admission is required in an **Intensive Care Unit**, **We** will pay **Sum Insured** for each continuous and completed period of 24 hours of Hospitalization in **Intensive Care Unit**.

**iv. Maternity Benefit**

On opting this cover, General exclusion ix) under IV of this Section shall stand deleted for the Claim under I.i Hospital Cash.

**v. Waiting Period modification option**

On opting this Cover, **Waiting Periods** under IV of this Section shall stand modified as mentioned in Schedule of Coverage on the **Policy Schedule/Certificate of Insurance**.

All other terms and Conditions of the respective Section and Policy shall remain unaltered

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**vi. Time deductible modification option**

On availing this option, **Time Deductible** as mentioned on the Schedule of Coverage in the **Policy Schedule/Certificate** of Insurance will be applied on each and every admissible Claim under the Policy.

**vii. Reinstatement of Sum Insured**

In an event of a claim admissible under this section, the Sum Insured would be fully restored by the Number of benefit days utilised in respect of any subsequent admissible claim of the Insured Person under this Section during the Policy Year subject to;

- Maximum number of Reinstatement days will be equivalent to Benefit days opted under this Section.
- Reinstatement of Sum Insured is not applicable to claim in respect of **Any one Illness**
- In case of treatment for Chemotherapy and Dialysis, Reinstatement of cover will be applicable only once in lifetime of Coverage.
- This cover will be applicable annually for policies with term more than one year.
- Any unutilized number of benefit days cannot be carried over to next **Policy Year** or **Renewal** of Coverage

**viii. Preventive Health Check up**

**Insured Person** will be entitled for Preventive Health Check-up after completion of each Policy Year at our Network Diagnostic centers or hospitals in accordance to list of tests, eligibility criteria and waiting period as specified below

Age	18 to 40 Years	41 Yrs and Above
Test	Set 1	Set 1, Sr Creat

Set 1 -Comprises of, Complete Blood Count, Urine R, FBS, Sr Cholesterol

Other terms and Conditions applicable to this Benefit

- This benefit will not be carried forward if not utilized within 60 days of Policy anniversary date.
- Eligibility to avail Health Check-up will be in accordance to Sum Insured under expiring Policy Year.
- The test reports received under this benefit will not be utilized for re-underwriting the coverage of **Insured Person**

Procedure for availing this benefit

- You** will be intimated to undergo the health check-up at our **Network Provider**, through **Our my: health App**.
- Test reports from our **Network Provider** will be made available to You on **Our my: health App**
- You** have the option to avail this benefit at our **Network Provider** through Phone/Email or other modes of communication available time to time.

**III. General Conditions applicable to Section 7 Hospital Cash**

**i. Mental Health Care**

If an Insured Person is hospitalized for any **Mental Illness** contracted during the Policy period We will pay Sum Insured under Section 7 I in accordance with The Mental Health Care Act, 2017, subsequent amendments and other applicable laws and Rules provided that the **Hospitalization** is done in **Mental Health Establishment**

**IV. Waiting Periods and General Exclusions applicable to Section 7 and Optional covers**

**i. Waiting Periods**

All claims payable under this Section will be subject to the waiting periods specified below:

- General waiting period:** 30 days except claims arising due to an **Accident**.
- Waiting Period for listed illnesses and Procedures:** 24 months all **Illnesses** and **Surgical Procedures** listed in following table a. and b. except claims payable due to the occurrence of cancer.

**a. Illnesses**

Internal Congenital diseases	Non infective Arthritis
Diseases of gall bladder including cholecystitis	Urogenital system e.g. Kidney stone, Urinary Bladder Stone
Pancreatitis	Ulcer and erosion of stomach and duodenum
All forms of Cirrhosis	Gastro Oesophageal Reflux Disorder (GERD)
Perineal Abscesses	Perianal Abscesses
Cataract	Fissure/fistula in anus, Haemorrhoids including
Pilonidal sinus	Gout and rheumatism
Benign tumors, cysts, nodules, polyps including breast lumps	Osteoarthritis and osteoporosis
Polycystic ovarian diseases	Fibroids ( fibromyoma)
Sinusitis, Rhinitis	Tonsillitis
Skin tumors	Benign Hyperplasia of Prostate

**b. Procedures**

Adenoidectomy, tonsillectomy	Tympanoplasty, Mastoidectomy
Dilatation and curettage (D&C)	Nasal concha resection
Myomectomy for fibroids	<b>Surgery</b> of Genito urinary system
<b>Surgery</b> on prostate	Cholecystectomy
Hernia	Hydrocele/Rectocele
<b>Surgery</b> for prolapsed inter vertebral disc	Joint replacement surgeries
<b>Surgery</b> for varicose veins and varicose ulcers	<b>Surgery</b> for Nasal septum deviation
<b>Surgery</b> for Perianal Abscesses	Fissurectomy, Haemorrhoidectomy, Fistulectomy, ENT surgeries

**c. Waiting Period for Pre-existing diseases**

A waiting period of 48 months shall apply for all Pre-existing Conditions declared and/or accepted at the time of first enrolment of Coverage with us under this Section.



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### ii. General Exclusions

- We will not make payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to any of the following unless expressly stated to the contrary in the Policy/Certificate of Insurance:
- i. War or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, radiation of any kind.
  - ii. Any Insured Person committing or attempting to commit a breach of law with criminal intent, or intentional self-injury or attempted suicide or suicide while mentally sound or unsound.
  - iii. Any Insured Person's participation or involvement in naval, military or air force operation, racing, diving, aviation, scuba diving, parachuting, hang-gliding, rock or mountain climbing of a professional or semi-professional nature.
  - iv. 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.
  - v. Treatment of Obesity and any weight control program.
  - vi. sleep-apnoea, Parkinson and Alzheimer's disease, general debility or exhaustion ("run-down condition").
  - vii. Congenital external diseases, defects or anomalies,
  - viii. Stem cell harvesting, or growth hormone therapy. Venereal disease, sexually transmitted disease or **Illness**
  - ix. Pregnancy (including voluntary termination), miscarriage (except as a result of an Accident or **Illness**), maternity or birth (including caesarean section) except in the case of ectopic pregnancy.
  - x. treatment to treat infertility any fertility, sub-fertility or assisted conception procedure,
  - xi. Sterility, treatment whether to affect infertility, surrogate or vicarious pregnancy, birth control, contraceptive supplies or services including complications arising due to supplying services.
  - xii. Treatment and supplies for analysis and adjustments of spinal subluxation, 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).
  - xiii. Circumcisions (unless necessitated by **Illness** or **Injury** and forming part of treatment); treatment for correction of vision due to refractive error, aesthetic or change-of-life treatments of any description such as sex transformation operations.
  - xiv. Plastic surgery or cosmetic surgery or treatments to change appearance unless necessary as a part of **Medically Necessary Treatment** certified by the attending Medical Practitioner for reconstruction following an **Accident**, cancer or burns.
  - xv. **Experimental**, investigational or **Unproven** treatments, devices and pharmacological regimens.

- xvi. i. Investigation & Evaluation;
  - a. Expenses related to any admission primarily for diagnostic and evaluation purposes only are excluded.
  - b. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.
- xvii. Any Convalescence, cure, rest cure, sanatorium treatment, rehabilitation measures, private duty nursing, respite care, long-term nursing care or custodial care.
- xviii. Preventive care, any physical, psychiatric or psychological examinations or testing if doesn't required **Hospitalization**; enteral feedings (infusion formulas via a tube into the upper gastrointestinal tract) and other nutritional and electrolyte supplements, unless certified to be required by the attending Medical Practitioner as a direct consequence of an otherwise covered claim.
- xix. vaccination including inoculation and immunisations (Except post bite treatment),
- xx. Treatment rendered by a Medical Practitioner which is outside his discipline or the discipline for which he is licensed; treatments rendered by a Medical Practitioner who is a member of an Insured Person's family, or stays with him
- xxi. Any Claim arising due to Non-disclosure of Pre-existing **Illness** or Material fact as sought to be declared on the Proposal/Enrolment form.

## Section 8 - Permanent Total Disablement – Illness

### I. Coverage

#### i. Permanent Total Disablement – Illness

We will pay **Sum Insured** as specified on the Schedule of Coverage in the **Policy Schedule/Certificate of Insurance**, if Insured Person suffers from **Permanent Total Disablement** due to **Illness** which is contracted during Period of Insurance and whose diagnosis first commence/occurs after the applicable waiting period from first commencement of coverage under this Section.

### II. Optional Covers applicable under Section 8 – Permanent Total Disablement

#### i. Loss of Job

We will pay **Sum Insured** if **Insured Person** suffers from Loss of Job due to his/her Voluntary Resignation or Termination from the employment within six months of suffering Permanent Total Disablement for which Claim is admissible under this Section.

Exclusions applicable to this Cover;

- i. Loss of job due to retirement whether voluntary or otherwise
- ii. Resignation due to non-confirmation of employment after or during such period under which the Insured was under probation

### III. General Conditions applicable to Section 8 - Permanent Total Disablement – Illness and Optional cover

#### i. Survival Period

Claim under this Section is payable only if **Insured Person** survives 7 days from the diagnosis and fulfillment of the definition of the **Permanent Total Disablement** covered.

The Claim is admissible only with confirmatory diagnosis of **Permanent Total Disablement** while the **Insured Person** is alive (A claim would not be admitted if the diagnosis is made post mortem)

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### ii. **Number of Claims and Benefits payable**

On admissibility of Claim under this Section, coverage for Insured Person under all Sections of this Policy shall terminate. In consequence thereof no benefit shall be payable under any other section of this Policy.

### IV. **Waiting Periods and General Exclusions applicable to Section 8 and Optional covers**

#### i. **Waiting Periods**

Coverage under this Section is subject to following waiting periods.

- a. Waiting period of 90 days shall apply to all the claims from the first commencement of Coverage under this Section.
- b. A waiting period of 48 months shall apply for all Pre-existing Conditions declared and/or accepted at the time of first enrolment of Coverage under this Section.

#### ii. **General Exclusions**

We will not make payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to any of the following unless expressly stated to the contrary in the Policy/Certificate of Insurance:

- i. War or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, radiation of any kind.
- ii. Any Insured Person committing or attempting to commit a breach of law with criminal intent, or intentional self-injury or attempted suicide or suicide while mentally sound or unsound.
- iii. Any Insured Person's participation or involvement in naval, military or air force operation, racing, diving, aviation, scuba diving, parachuting, hang-gliding, rock or mountain climbing of a professional or semi-professional nature.
- iv. 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.
- v. Treatment of Obesity and any weight control program.
- vi. sleep-apnoea, Parkinson and Alzheimer's disease, general debility or exhaustion ("run-down condition").
- vii. Congenital external diseases, defects or anomalies,
- viii. Stem cell harvesting, or growth hormone therapy. Venereal disease, sexually transmitted disease or **Illness**
- ix. Pregnancy (including voluntary termination), miscarriage (except as a result of an Accident or **Illness**), maternity or birth (including caesarean section) except in the case of ectopic pregnancy.
- x. treatment to treat infertility any fertility, sub-fertility or assisted conception procedure,
- xi. Sterility, treatment whether to affect infertility, surrogate or vicarious pregnancy, birth control, contraceptive supplies or services including complications arising due to supplying services.

- xii. Treatment and supplies for analysis and adjustments of spinal subluxation, 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).
- xiii. Circumcisions (unless necessitated by **Illness** or **Injury** and forming part of treatment); treatment for correction of vision due to refractive error, aesthetic or change-of-life treatments of any description such as sex transformation operations.
- xiv. Plastic surgery or cosmetic surgery or treatments to change appearance unless necessary as a part of **Medically Necessary Treatment** certified by the attending Medical Practitioner for reconstruction following an **Accident**, cancer or burns.
- xv. **Experimental**, investigational or **Unproven** treatments, devices and pharmacological regimens.
- xvi.
  - i. Investigation & Evaluation;
    - a. Expenses related to any admission primarily for diagnostic and evaluation purposes only are excluded.
    - b. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.
- xvii. Any Convalescence, cure, rest cure, sanatorium treatment, rehabilitation measures, private duty nursing, respite care, long-term nursing care or custodial care.
- xviii. Preventive care, any physical, psychiatric or psychological examinations or testing if doesn't required **Hospitalization**; enteral feedings (infusion formulas via a tube into the upper gastrointestinal tract) and other nutritional and electrolyte supplements, unless certified to be required by the attending Medical Practitioner as a direct consequence of an otherwise covered claim.
- xix. vaccination including inoculation and immunisations (Except post bite treatment),
- xx. Treatment rendered by a Medical Practitioner which is outside his discipline or the discipline for which he is licensed; treatments rendered by a Medical Practitioner who is a member of an Insured Person's family, or stays with him
- xxi. Any Claim arising due to Non-disclosure of Pre-existing **Illness** or Material fact as sought to be declared on the Proposal/Enrolment form.

### **B. My:health Active**

The services listed below are available to all **Insured Person** through **Our Network Provider** on **Our my: health mobile app** only.

#### i. **Health Coach:**

An **Insured Person** will have access to Health Coaching services in areas such as:

- Disease management
- Activity and fitness
- Nutrition
- Weight management.

These services will be available through **Our my: health mobile app** as a chat service or as a call back facility.

#### ii. **Wellness services**

- **Discounts:** on OPD, Pharmaceuticals, pharmacy and diagnostic centers.
- **Customer Engagement:** Monthly newsletters, Diet consultation, health tips.

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- Specialized programs:** like stress management, Pregnancy Care, Work life balance management and Healthcare Management.

These services will be available through **Our my: health mobile app**

**Disclaimer applicable to my: health Mobile app and associated services**

It is agreed and understood that Our my:health mobile app and Wellness services are not providing and shall not be deemed to be providing any **Medical Advice**, they shall only provide a suggestion for the **Insured** Person's consideration and it is the **Insured** Person's sole and absolute choice to follow the suggestion for any health related advice. **We** do not assume any liability towards any loss or damage arising out of or in relation to any opinion, actual or alleged errors, omissions and representations suggested under this benefit.

Product Details	
<b>Policy Type</b>	Individual Sum Insured Basis Only
<b>Age Limit (Age last Birthday as at Policy Inception date)</b>	Minimum Entry Age – 16 Years Maximum Entry Age – 65 Years
<b>Basis of Sum Insured</b>	Principal Outstanding Fixed Sum Insured
<b>Sum Insured</b>	<ul style="list-style-type: none"> <li>Section 1 Critical Illness Cover (Rs 1 Lac to 5 Cr)</li> <li>Section 2 Women Suraksha (Rs 1 Lac to 5 Cr)</li> <li>Section 3 Sachet Critical Illness (Rs 1 Lac to 5 Cr)</li> <li>Section 5 Recovery Benefit (Rs 10,000 Lac to 5 Lakh)</li> <li>Section 6 Assault and Burns (Rs 1 Lac to 5 Cr)</li> <li>Section 7 Hospital Cash (Per day benefit) Rs 500 to Rs 20,000/-</li> <li>Section 8 Permanent Total Disablement – Illness (Rs 1 Lac to 5 Cr)</li> </ul>
<b>Basis of Payment</b>	Benefit and Indemnity basis
<b>Policy Duration</b>	Loan Tenure or up to 5 years whichever is lower

### Pre policy check ups

#### 1. Pre Policy Underwriting Matrix for Cancer Cover under Section 1,2,3

The PPC tests required will be as per the below PPC grid. This grid may be subject to change based on the company policy in future & will be guided by our experience

Sum Insured in INR	18 yrs to 50 Yrs	Age above 50 years	Financial underwriting
3 Lacs to 1 Cr	NA	NA	Not Applicable
Above 1 crore to 5 crores	NA	Ca Set 1	Applicable

Ca Set 1-ME, RUA, CBC with ESR, Sr Creatinine, SGPT, GGTP, SGOT, HBsAg, PSA (Males), Pap Smear (Females), CEA, Sonomamography (Females)

#### 2. Pre Policy Underwriting Matrix for all other Covers under Sections 1,2,3,8

The PPC tests required will be as per the below PPC grid. This grid may be subject to change based on the company policy in future & will be guided by our experience

Sum Insured in INR	18 yrs to 50 Yrs	Age above 50 years	Financial underwriting
3 Lacs to 1 Cr	NA	NA	Not Applicable
Above 1 crore to 5 crores	NA	Set 1	Applicable

Set 1: ME, RUA, CBC with ESR, Sr Creatinine, Lipid Profile, SGPT, GGTP, SGOT, HBA1C, ECG, HBsAg, TMT/2D Echo, USG Abdomen & Pelvis, Chest X Ray, CEA, PSA (Males), Pap Smear (Females), Sonomamography

#### 1. Pre Policy Underwriting Matrix for Section 5,7 :

The PPC tests required will be as per the below PPC grid. This grid may be subject to change based on the company policy in future & will be guided by our experience

Per Day Benefit in INR	Up to 18 Yrs	18 yrs to 45 Yrs	Age above 45 years	Financial Underwriting
500 to 10,000	NA	NA	NA	NA
Above Rs.10,000	NA	Set 1	Set 2	Applicable

Set 1: ME, RUA, CBC, SrCreatinine, Lipid Profile, SGPT, GGTP, SGOT, HBA1C, ECG

Set 2 :Set 1, HBsAg, TMT/2D Echo,USG Abdomen & Pelvis, Chest X ray

#### Medical tests:

ME = Medical Examination (Report)	CBC = Complete Blood Count
ECG = Electro Cardio Gram	FBS = Fasting Blood Sugar
Lipids = Lipid Profile	SrCreatinine = Serum Creatinine
LFT = Liver Function Test	RFT = Renal Function Test
PSA = Prostate Specific antigen	TMT = Treadmill Test
RUA = Routine Urine Examination	SGPT = Serum Glutamic Pyruvic Transaminase
USG = Ultrasonogram	HBsAg = Hepatitis B Surface Antigen
GGT = Gamma-Glutamyl Transpeptidase	2D ECHO-2D Echocardiogram, CEA = Carcinoembryogenic Antigen

**Wherever Section 1,2,3 and 7 are opted for, the pre policy tests conducted would be a combination of the tests as mentioned above.**

#### Guidelines for Pre Policy Check up

- Pre Policy Check-up will be conducted at our **Network provider**
- Where ever Pre Policy Check-up is conducted at our **Network provider**, 100% of the Medical test charges will be reimbursed on acceptance of proposal. In case Customer Insists on a Check-up outside our **Network provider**, 50% of the Medical test charges will be reimbursed on acceptance of Proposal.
- If Proposal is declined post Pre Policy Check-up, 50% of the Medical test charges incurred will be reimbursed
- Medical Reports are considered valid for up to 3 months
- In case of any positive health declaration on the proposal form the relevant medical tests shall be advised in addition to the above grid tests
- In case of any additional tests advised besides the ones mentioned above, 50% of the cost incurred on such test will be borne by Us

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### Claim Process

On the occurrence of any Insured Event that may give rise to a Claim under this Policy, the Claims Procedure set out below shall be followed.

<b>Claim Intimation</b>	<b>You</b> shall intimate the Claims to <b>us</b> through any available mode of communication as specified in the <b>Policy</b> , Health Card or <b>our</b> Website, You can register your claim through call to our IPO (Mobile/Portal) app, e-mail, Call to our call centre.
<b>Claim Intimation Timelines</b>	Within 15 days of the diagnosis of Critical Illness or Hospitalization
<b>Particulars to be provided to Us for Claim notification</b>	<ul style="list-style-type: none"> <li>✓ Policy Number,</li> <li>✓ Name of the Insured Person(s) named in the Policy schedule/Certificate availing treatment,</li> <li>✓ Nature of disease/illness/injury,</li> <li>✓ Name and address of the attending Medical Practitioner/Hospital</li> <li>✓ Date of admission &amp; probable date of discharge</li> </ul>
<b>Claims Documents for Critical Illness/Surgical Procedure and Permanent Total Disablement due to Illness.</b>	<ul style="list-style-type: none"> <li>✓ Duly filled Claim Form with signature of claimant.</li> <li>✓ Copy of Discharge Summary / Discharge Certificate / Death Certificate (in case insured expired);</li> <li>✓ First consultation letter from treating Medical Practitioner</li> <li>✓ Medical certificate confirming diagnosis, and the treatment from Medical Practitioner</li> <li>✓ Certificate from treating Medical Practitioner, specifying the duration and etiology</li> <li>✓ OT Notes in case of Surgery</li> <li>✓ Medical certificate from treating Medical Practitioner specifying the diagnosis and need for the surgery</li> <li>✓ MLC/FIR copy/ certificate regarding abuse of Alcohol/intoxicating agent if applicable</li> <li>✓ All pathological/Histopathological and radiological Investigation Reports</li> <li>✓ NEFT details &amp; cancelled cheque of Claimant or Nominee (in case claimant expired), Provide legal heir certificate in case nominee is minor. Provide KYC ( Know your customer ) form along with photocopy of any one of following KYC documents for all claims amounting to Rs 1 lakh and above (Aadhaar Card, Passport, Driving License Voter ID, etc)</li> </ul> <p>We may require the Insured Person to undergo medical examination by Medical Practitioner authorized by Us to obtain an independent medical opinion for the processing of the claim. Any cost towards such medical examination will be borne by Us.</p>
<b>Claims documents for Hospital Cash and Recovery Benefit</b>	<ul style="list-style-type: none"> <li>✓ Claim Form duly signed by the Insured Person</li> <li>✓ Copy of Discharge Summary / Discharge Certificate along with time of admission and discharge for hospital cash benefit</li> <li>✓ First consultation letter from treating Medical Practitioner</li> <li>✓ Certificate from treating Medical Practitioner, specifying the duration and etiology</li> <li>✓ MLC/FIR copy/ certificate regarding abuse of Alcohol/intoxicating agent if applicable</li> <li>✓ NEFT details &amp; cancelled cheque of Claimant or Nominee (in case claimant expired), Provide legal heir certificate in case nominee is minor.</li> </ul>
<b>Claims documents for Assault and Burns</b>	<ul style="list-style-type: none"> <li>✓ Duly Completed Claim Form signed by Insured Person.</li> <li>✓ Attested copy of disability certificate from Civil Surgeon of Government Hospital stating percentage of disability.</li> <li>✓ Attested copy of FIR for Assault</li> <li>✓ Attested copy of certificate from treating Medical Practitioner specifying type of burns with percentage of burns</li> <li>✓ Attested copy of FIR for Burns (for Claims other than those arising out of use of Common Career)</li> <li>✓ All X-Ray / Investigation reports and films supporting to disability.</li> <li>✓ NEFT details &amp; cancelled cheque of Claimant or Nominee (in case claimant expired), Provide legal heir certificate in case nominee is minor.</li> </ul>



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<b>Claims documents and procedure for Second Opinion</b>	<ul style="list-style-type: none"> <li>✓ Duly filled claim form along with the copy of all medical reports including investigation reports and discharge summary (if any)</li> <li>✓ Select Our network Medical Practitioner from whom you would prefer to take the second opinion. (Please refer our Website or call at 24X 7 toll free line to obtain the list of Our panel doctors).</li> <li>✓ On receipt of the complete set of documents, We will forward the same to the concerned doctor.</li> <li>✓ The Second Opinion shall be forwarded to the member within 15 working days of receipt of the complete set of documents.</li> </ul>
<b>Claims documents for loss of Job</b>	<ul style="list-style-type: none"> <li>✓ Duly Completed Claim Form signed by Insured Person;</li> <li>✓ Form 16A</li> <li>✓ Termination letter/Resignation Letter/ Resignation Acceptance letter</li> <li>✓ NEFT details &amp; cancelled cheque of Claimant or Nominee (in case claimant expired), Provide legal heir certificate in case nominee is minor.</li> </ul>
<b>Claims documents for Post Diagnosis Counselling</b>	<ul style="list-style-type: none"> <li>✓ Claim Form duly signed by the Insured Person</li> <li>✓ Consultation papers</li> </ul>
<b>Condonation of delay</b>	If the claim is not notified/ or submitted to <b>Us</b> within the specified time limits, then <b>We</b> shall be provided the reasons for the delay in writing. <b>We</b> will condone such delay on merits where the delay has been proved to be for reasons beyond the claimant's control

## General Conditions

1) **Fraudulent claim**

- i. If any claim made under the policy is found to be fraudulent, or is supported by any fraudulent means or devices or software by **Insured Person** or anyone acting on their behalf to obtain any benefit under this Policy then The policy shall be cancelled ab-initio from the inception date or the renewal date (as the case may be),
- ii. All benefits payable, if any, under such Policy shall be forfeited with respect to such claim

2) **Complete Discharge**

Payment by the Company to the Policyholder or Insured Person or the Nominee or the legal heir of the Insured Member, as the case may be, under the Policy shall in all cases be complete and construe as an effectual discharge in favor of the Company

3) **Geography**

The policy provides worldwide coverage unless specified in the Coverage otherwise

4) **Grace Period**

- 1) A **grace period** of 30 days for **Renewals** is permissible and the Coverage will be considered as continuous for the purpose of all waiting periods. However, any treatment availed for an **Illness** contracted during the **grace period** will not be admissible under the **Policy**.
- 2) For **Renewal** received after completion of 30 days grace period, the Coverage would be considered as afresh without any **Renewal** benefits

5) **Premium Payment Option**

- i. **Policy holder/Insured Person** shall have the option to pay policy premium in total at the inception of policy or in instalments as per options as below.

Options	Installment Premium Option	Grace Period
Option 1	Half Yearly	30 days
Option 2	Quarterly	30 days
Option 3	Monthly	15 days

- i. No Additional charges, on the existing premium are applicable irrespective of the Instalment Option selected.

- ii. **Grace Period** of 15 days in case of Monthly premium payment option and 30 days for half yearly and Quarterly premium payment option shall be applicable. Any hospitalization availed for an Illness contracted during the grace period will not be admissible under the Policy.

- iii. If case of non-receipt of Instalment Premium on the Instalment due date or before expiry of the grace period, the policy stands cancelled and the Premium for unexpired period will be refund as below

- iv. In case of Claim under the Policy, unpaid instalment premium will be recovered from the Claim amount payable.

v. **Cancellation**

- a. Where Instalment option is not opted and premium has been paid in lump sum, cancellation grid as mentioned in clause 6 ii above will be applicable
- b. For all other Premium Payment options, 50% of current instalment premium will be refunded when the current period is less than 6 months in to the policy year. For instalment after 6 months, no refund will be payable.
- c. No refund of any premium in case of any claim during policy year

6) **Renewal**

The **Company** shall be under no obligation to renew the Policy/ Coverage on expiry of the period for which premium has been paid. The **Company** reserves the right to offer revised rates, terms and conditions at renewal based on claim experience and a fresh assessment of the risk. This policy may be renewed only by mutual consent and subject to payment in advance of the total premium at the rate in force at the time of renewal. The **Company**, however, shall not be bound to give notice that the policy is due for renewal or to accept any Renewal premium. Unless renewed as herein provided, this policy shall automatically terminate at the expiry of the **Policy Period/ Coverage Period**.

7) **Cancellation**i. **Cancellation by Insurer**

**We** may cancel the Policy or Coverage on grounds of misrepresentation, fraud, non-disclosure of material facts as sought

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to be in proposal form/enrolment form or non-cooperation by **Policy Holder** or **Insured Person**. Cancellation shall be ab initio from the inception date or the Renewal date (as the case may be), at our sole discretion upon giving 30 days' notice

### ii. Cancellation by Insured Person

You may cancel Your Coverage under the **Policy** at any time by giving **Us** written notice. The cancellation shall be from the date of receipt of such written notice. In case of any claim made during **Policy Year**, no premium will be refunded.

If no claim has been made under the Policy, We will refund premium in accordance with the table below

Refund table applicable to Fixed Sum Insured Basis

Loan Period	1	2	3	4	5+
Policy Period	1	2	3	4	5
Year Of Cancellations	% Return Premium				
1		50%	67%	75%	80%
2			33%	50%	60%
3				25%	40%
4					20%

Refund table applicable to Reducing Balance Sum Insured

% Return Premium															
Policy Period	2	3	4	5	5	5	5	5	5	5	5	5	5	5	5
Loan Period	2	3	4	5	6	7	8	9	10	11	12	13	14	15	
Year 1	25%	45%	57%	65%	70%	73%	74%	75%	76%	77%	77%	78%	78%	78%	
Year 2		11%	26%	37%	45%	49%	51%	53%	54%	55%	56%	56%	57%	57%	
Year 3			6%	17%	24%	28%	31%	33%	34%	35%	36%	36%	37%	37%	
Year 4				4%	9%	12%	14%	15%	16%	16%	17%	17%	18%	18%	
% Return Premium															
	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
	78%	79%	79%	79%	79%	79%	79%	79%	79%	79%	79%	80%	80%	80%	
	57%	58%	58%	58%	58%	59%	59%	59%	59%	59%	59%	59%	59%	59%	
	37%	38%	38%	38%	38%	39%	39%	39%	39%	39%	39%	39%	39%	39%	
	18%	18%	19%	19%	19%	19%	19%	19%	19%	19%	19%	19%	20%	20%	

- In event of part prepayment of the Loan, no refunds of premium shall be made under this Policy. No refunds of premium will be made under the Policy during the last year of the Policy Period.
- Upon making any refund of premium under this Policy in accordance with the terms and conditions hereof in respect of the Insured, the cover in respect of the Insured shall forthwith terminate and the Company shall not be liable under the Policy.
- Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of the Insured where Claim under the Policy is admissible by the Company.

### 8) Withdrawal of the Product

- We may withdraw this product with the prior approval from Insurance Regulatory and Development Authority of India.
- We will intimate You/Policy Holder of any such changes at least 3 months prior to date of such revision or modification.
- In such an event of withdrawal of this product, You/ Policy Holder can choose to renew this policy under any of Our similar Health insurance products.

- Credit of continuity/waiting periods for all the previous policy years would be extended in the new policy on Renewal with Use

### 9) Endorsements

The following endorsements are permissible during the Coverage Period:

- 1.1. Non-Financial Endorsements – which do not affect the premium**
  - Minor rectification/correction in name of the Insured Person (and not the complete name change)
  - Rectification in gender of the Insured Person (if this does not impact the premium)
  - Rectification of date of birth of the Insured Person (if this does not impact the premium)
  - Change in the correspondence address of the Proposer (if this does not impact the premium)
  - Change in Nominee Details
  - Change in bank details
  - Any other non-financial endorsement
- 1.2. Financial Endorsements – which result in alteration in premium**
  - Cancellation of Policy
  - Any other financial endorsement

### 10) Payment of Claim

- If there are any deficiencies in the necessary claim documents which are not met or are partially met, **We** will send a maximum of 3 (three) reminders following which **We** will send a closure letter or make a part-payment if **We** have not received the deficiency documents after 45 days from the date of the initial request for such documents
- On receipt of all the documents and on being satisfied with regard to the admissibility of the claim as per policy terms and conditions, **We** shall offer within a period of 30 days a settlement of the claim to the Insured person.
- Upon acceptance of an offer of settlement by the **Insured person**, the payment of the amount due shall be made within 7 days from the date of acceptance of the offer by the **Insured Person**. In the cases of delay in the payment **We** shall be liable to pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by it.
- However, where the circumstances of a claim warrant an investigation, **We** will initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document. In such cases, **We** will settle the claim within 45 days from the date of receipt of last necessary document. In case of delay beyond stipulated 45 days, the Company will be liable to pay interest at a rate which is 2% above the bank rate from the date of receipt of last necessary document to the date of payment of claim.
- If **We**, for any reason decide to reject the claim the reasons regarding the rejection shall be communicated to You in writing within 30 days of the receipt of documents.
- If requested by **Us** and at **Our** cost, the **Insured Person** must submit to medical examination by **Our Medical Practitioner** as often as **We** consider reasonable and necessary and **We/Our** representatives must be permitted to inspect the medical and Hospitalization records pertaining to the treatment of **Insured Person** and to investigate the circumstances pertaining to the claim.  
  
**We** and **Our** representatives must be given all reasonable co-operation in investigating the claim in order to assess **Our** liability and quantum in respect of the claim.

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### 11) Contact Us

Claim Intimation:	Claim document submission at address
<b>Service No.</b> 022-62346234 / 0120-62346234 <b>Email:</b> healthclaims@hdfcergo.com	HDFC ERGO General Insurance Co. Ltd. Stellar IT Park, Tower-15th Floor, C - 25, Noida, Sector 62, 201301, Uttar Pradesh

#### 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 Rupees Ten Lakh Rupees.

**IRDAI Regulation no 5-** This policy is subject to regulation 5 of IRDAI (Protection of Policyholder's Interests) Regulation

**DISCLAIMER:** THE ABOVE IS DESCRIPTIVE ONLY. THE ACTUAL TERMS AND CONDITIONS CAN BE FOUND IN THE POLICY DOCUMENT. INSURED'S ARE ADVISED TO READ THE POLICY DOCUMENT COMPLETELY FOR A FULL DESCRIPTION OF THE TERMS AND CONDITIONS OF COVERAGE AND THE EXCLUSIONS RELATING THERETO.

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