

Prospectus

I. Eligibility Criteria

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|----------------------|--|
| Minimum Entry Age | 91 days |
| Maximum Entry Age | Child : 24 years Adult : 70 years |
| Maximum Renewal Age | Lifelong |
| Age of Proposer | 18 Years or above |
| Relationship Covered | Legally married Spouse, Children, Parents, Brother, Sister, Parents-in-Law, Grandparents, Grandchildren, Uncle, Aunt, Nephew, Niece and any other relationship having insurable interest |
| Cover Type | Individual |
| Tenure (in years) | 1 / 2 / 3 |

General Conditions applicable to all Benefits / Optional Covers

- (i) There are 14 Benefits and 9 Optional Covers in the Product; any Benefit / Optional Cover will be applicable and available only if it is specifically chosen by the Policyholder.
- (ii) We will provide cover under the Benefits 1, 2, 3, 4, 5, 7, 9, 11 & 13 and Optional Covers 2, 3, 5, 6, 7 & 9, to any Insured Event arising worldwide provided no coverage is available in listed civilian nations (as per Annexure – II).
- (iii) In case any Claim is admissible under Benefit 1, coverage under the Policy for that Insured Person shall immediately and automatically terminate. However, other Insured Person shall continue to be covered under this Policy.
- (iv) If Optional Cover 1 is opted for, then Optional Cover 4 and / or Optional Cover 6 cannot be opted. Similarly, either if Optional Cover 4 or Optional Cover 6 is opted for, then Optional Cover 1 cannot be opted.

2. Key Benefits

Accidents are never foreseen as they mean! But a stitch in time can save nine!!
A small plan for such unforeseen events can protect the interests of your beneficiaries in a big way.

If an Insured Person suffers an Injury during the Policy Period, while the Policy is in force, which results in an Insured Event within twelve calendar months from the Injury, We will pay to the Policyholder (or the Nominee or his legal heir), the amount chosen by the Policyholder for each Benefit / Optional Cover, subject always to the terms and conditions of the Policy, and the availability of the Sum Insured / respective Coverage Amount, as applicable.

2.1 Benefit 1 : Accidental Death

We shall pay the Sum Insured, as chosen by the Policyholder, in case of death of the Insured Person on account of any Accident / Injury during the Policy Period or within twelve calendar months from the date of occurrence of such Accident / Injury which occurred during Policy Period.

2.2 Benefit 2 : Permanent Total Disablement (PTD)

We shall pay up to an amount as chosen by the Policyholder in case of any permanent total disablement of the Insured Person on account of any Accident / Injury during the Policy Period or within twelve calendar months from the date of occurrence of such Accident / Injury which occurred during Policy Period. The payout of the Sum Insured shall be as per 'PTD Table' stated below:

| S. No. | Insured Events | % of Sum Insured Payable |
|--------|--|--------------------------|
| 1. | Total and irrecoverable loss of sight of both eyes, or of the actual loss by physical separation of two entire hands or two entire feet, or one entire hand and one entire foot, or the total and irrecoverable loss of sight of one eye and loss by physical separation of one entire hand or one entire foot | 100% |
| 2. | Total and irrecoverable loss of (a) use of two hands or two feet, or (b) one hand and one foot, or (c) sight of one eye and use of one hand or one foot | 100% |
| 3. | Total and irrecoverable loss of sight of one eye, or of the actual loss by physical separation of one entire hand or one entire foot | 50% |
| 4. | Total and irrecoverable loss of use of a hand or a foot without physical separation | 50% |
| 5. | Paraplegia or Quadriplegia or Hemiplegia | 100% |

Notes for the Table above:

- (a) For the purpose of Sr. No. I to IV above, physical separation of a hand or foot shall mean separation of the hand at or above the wrist, and of the foot at or above the ankle.
- (b) For the purpose of this Benefit only:
 - (i) "Hemiplegia" means complete and irrecoverable paralysis of the arm, leg, and trunk on the same side of the body;
 - (ii) "Paraplegia" means complete and irrecoverable paralysis of the whole of the lower half of the body (below waist) including both the legs;
 - (iii) "Quadriplegia" means complete and irrecoverable paralysis of all four limbs.

2.3 Benefit 3 : Permanent Partial Disablement (PPD)

We shall pay up to an amount as chosen by the Policyholder, in case Insured Person suffers Permanent Partial Disablement on account of any Accident / Injury which occurred during the Policy Period or within twelve calendar months from the date of occurrence of such Accident / Injury which occurred during Policy Period. The payout of the Sum Insured shall be as per 'PPD Table' below:

| S. No. | Insured Events | % of Sum Insured Payable |
|--------|--|--|
| I | Total and irrecoverable loss of hearing in: - a) Both ears b) One ear | 75% 20% |
| II | Loss of toes a) All b) Both phalanges of great toes bilateral c) Both phalanges of one great toe d) Both phalanges of other than great toes for each toe | 20% 5% 2% 1% |
| III | Loss of four fingers and thumb of one hand | 40% |
| IV | Loss of four fingers of one hand | 35% |
| V | Loss of thumb a) both phalanges b) one phalanx | 25% 10% |
| VI | Loss of index finger a) three phalanges b) two phalanges c) One phalanx | 10% 8% 4% |
| VII | Loss of middle finger a) three phalanges b) two phalanges c) One phalanx | 6% 4% 2% |
| VIII | Loss of ring finger a) three phalanges b) two phalanges c) One phalanx | 5% 3% 2% |
| IX | Loss of little finger a) three phalanges b) two phalanges c) One phalanx | 4% 3% 2% |
| X | Loss of metacarpus a) First or second b) Third, fourth or fifth | 3% 2% |
| XI | Permanent partial disablement not otherwise provided for under Sr. No. I to X inclusive. | Percentage of the Sum Insured will be determined in accordance with the medical assessment carried out by the Medical Practitioner provided that the percentage under Insured Event Sr. No. XI shall not exceed 50% of the Sum Insured |

Note: For the purpose of Insured Events II to X (both inclusive), loss means either actual physical separation or total and irrecoverable loss only.

2.4 Benefit 4 : Fractures

We will pay up to an amount as chosen by the Policyholder, as per 'Fractures Table' below in case the Insured Person suffers any Injury during the Policy Period resulting into any of the fractures:

| S. No. | Description of Fracture | % of Sum Insured payable |
|--------|--|--------------------------|
| I | Hip or Pelvis (excluding thigh or coccyx): Multiple fractures – at least one Compound Fracture and one Complete Fracture | 100% |
| II | Hip or Pelvis (excluding thigh or coccyx) - All other Compound Fractures | 50% |
| III | Thigh or Heel: Multiple fractures – at least one Compound Fracture and one Complete Fracture | 100% |
| IV | Thigh or Heel: Multiple fractures – at least one Complete Fracture | 50% |
| V | Lower leg, skull, clavicle, ankle, elbows, upper or lower arm (including wrist but excluding Colles-type fractures): Multiple Fractures – at least one Compound Fracture and one Complete Fracture | 100% |
| VI | Lower leg, skull, clavicle, ankle, elbows, upper or lower arm (including wrist but excluding Colles-type fractures): All other Compound Fractures | 30% |
| VII | Colles type fracture of the lower arm - If Compound Fracture | 100% |
| VIII | Colles type fracture of the lower arm - If Compound Fracture | 50% |

It is further agreed that:

- (i) If an Injury results in more than one of the 'Description of Fractures' above, then our maximum liability shall not exceed the Sum Insured.
- (ii) We shall not be liable to make any payment in respect of dislocation of bones or joints or in respect of Hairline Fractures or Simple Fractures.

For the purpose of this Benefit only:

- (i) Complete Fracture means a fracture where the bone is completely broken across and no connection is left between the pieces.
- (ii) Compound Fracture means a fracture where the bone breaks the skin and is exposed.
- (iii) Hairline Fracture means a mere crack in the bone.
- (iv) Simple Fracture means a fracture in which there is a basic and uncomplicated break in the bone and which in the opinion of a Medical Practitioner requires minimal and uncomplicated medical treatment.

2.5 Benefit 5 : Child Education

We will pay an amount as chosen by the Policyholder, towards the education of the Insured Person's Child in case We pay a Claim under Benefit 1 or Benefit 2.

2.6 Benefit 6 : Major Diagnostic Tests

We will reimburse the expenses incurred (up to an amount as chosen by the Policyholder) for carrying out any major diagnostic tests like CT Scan, MRI, etc. consequent to an Injury resulting in a Claim which is payable under Benefit 1 or Benefit 2 or Benefit 3, if these tests are undertaken on the written advice of a Medical Practitioner and are conducted within 3 months of occurrence of the Injury.

2.7 Benefit 7 : Disappearance

In case the Insured Person's body cannot be located within 1 year after a forced landing, stranding, sinking or wrecking of a Common Carrier or in any event arising as a result of any Acts of God perils during the Policy Period and it can be reasonably concluded that such Insured Person has died as a result of such Accident, We will pay the Sum Insured (as chosen by the Policyholder) admitting the Claim under Benefit 1. However, if it is later found that the Insured Person survived such an Accident / Injury for which we have paid the claim, the amount paid shall be paid back to Us.

2.8 Benefit 8 : Mobility Cover

We will reimburse the expenses incurred (up to an amount as chosen by the Policyholder) for procuring medically necessary prosthetic devices (artificial devices replacing body parts, including artificial legs, arms or eyes), orthopaedic braces (including but not limited to arm, back or neck braces) and durable medical equipment (including but not limited to wheelchairs and Hospital beds) to assist the Insured Person's basic medical needs, consequent to an Accident / Injury. The expenses under this Benefit shall be paid only if the Claim is paid under Benefit 2 and such devices or equipment is procured on the written advice of a treating Medical Practitioner.

2.9 Benefit 9 : Burns

If the Injury suffered by the Insured Person solely and directly results in any of the following second or third degree burn injuries, We will pay up to an amount as chosen by the Policyholder as per 'Burns' table below:

| S. No. | Description of Fracture | Amount payable = % of the Sum Insured applicable under this Benefit |
|--------|--|---|
| I | Third degree burns of 30% or more of the total body surface area | 100% |
| II | Second degree burns of 30% or more of the total body surface area | 50% |
| III | Third degree burns of 20% or more, but less than 30% of the total body surface area | 80% |
| IV | Second degree burns of 20% or more, but less than 30% of the total body surface area | 40% |
| V | Third degree burns of 10% or more, but less than 20% of the total body surface area | 40% |
| VI | Second degree burns of 10% or more, but less than 20% of the total body surface area | 20% |
| 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% |

Note: In case an Injury results in more than one of the 'Descriptions of Extent of Burn Injury' above, then Our maximum liability shall not exceed the Sum Insured.

2.10 Benefit 10 : Domestic Road Ambulance

If a Claim for any event under Benefit 1 or Benefit 2 or Benefit 3 or Benefit 4 or Benefit 9 or Optional Cover 1 or Optional Cover 4 or Optional Cover 6 or Optional Cover 9 of the Policy has been admitted, We will indemnify up to the specified amount as chosen by the Policyholder, in addition to any amount payable under that Benefit / Optional Cover, for the reasonable expenses necessarily incurred on availing Ambulance services offered by a Hospital or by an Ambulance service provider for the Insured Person's necessary transportation to the nearest Hospital in case of an Emergency provided that the necessity of the Ambulance transportation is certified by the treating Medical Practitioner.

2.11 Benefit 11 : Nursing Care

We will pay for the expenses incurred (up to an amount as chosen by the Policyholder) towards hiring a Qualified Nurse with the purpose of providing care and convenience to the Insured Person to perform his daily activities consequent to any Accident / Injury resulting in Permanent Total Disablement / Permanent Partial Disablement, which facilitate his activities of daily living and are recommended by a Medical Practitioner in writing.

2.12 **Benefit 12 : Reconstructive Surgery**

In case the Insured Person is required to undergo reconstructive surgery consequent to any Accident / Injury, We will reimburse the Medical Expenses incurred (up to an amount as chosen by the Policyholder) on such reconstructive surgery at a Hospital only if the surgery is carried out within 30 days of Accident / Injury and We have admitted a Claim under Benefit 2 or Benefit 3.

2.13 **Benefit 13 : Repatriation of Mortal Remains**

We will pay up to an amount as chosen by the Policyholder, for the transportation of Insured Person's body from the place of death to the city of last known address of the Insured Person as per Our records or as per the request of the Insured Person's family only if a Claim is payable under Benefit 1.

2.14 **Benefit 14 : Loyalty Benefit**

For each continuous and completed Policy Year, on subsequent renewal, We will enhance the Coverage amount pertaining to Benefit 1, Benefit 2 and Benefit 3 of last Policy Year, by flat 5% of the Sum Insured, on a cumulative basis, as a Loyalty Bonus:

The Benefit offering is subject to the conditions specified below:

- (i) The accrued Loyalty Bonus available in the renewed Policy at any point of time shall not exceed 50% of the Sum Insured (pertaining to Benefit 1, Benefit 2 and Benefit 3.
- (ii) The Loyalty Bonus which is accrued will only be available to those Insured Persons who were insured in a particular Policy Year and continue to be insured in the subsequent Policy Year as well.
- (iii) The entire Loyalty Bonus will be forfeited if the Policy is not continued / renewed on or before Policy Period End Date or the expiry of the Grace Period whichever is later.
- (iv) If Sum Insured under the Policy is increased (decreased) at the time of renewal, then the applicable Loyalty Bonus shall also be increased (decreased) in proportion to the Sum Insured, on the subsequent renewal.
- (v) A credit for accrued Loyalty Bonus would be provided regardless of Claim history in the previous Policy Year(s).

Optional Covers

The Policy provides the following Optional Covers which can be opted either at the inception of the Policy or at the time of renewal.

2.15 **Optional Cover 1 : Accidental Hospitalization**

This Optional Cover aims at providing coverage for the following three sub-benefits:--

2.15.1 Hospitalization Expenses: Through this cover, We will reimburse the Medical Expenses, up to a specified amount, incurred at a Hospital consequent to any Injury suffered by an Insured Person and undergoes In-patient Care Treatment or Day Care Treatment. (The list of Day Care Treatments is attached as Annexure-I)

2.15.2 Daily Allowance: Through this cover, We will pay you a lump sum amount per day for each completed day of your Medically Necessary hospitalization up to a maximum of 5 days per Accidental Hospitalization subject to a deductible of 2 days. The payment shall be made only in case the In-Patient Hospitalization Expenses are payable.

2.15.3 Compassionate Visit: In case an Insured Person is hospitalized for treatment of any Injury, We will reimburse the reasonable expenses incurred by an Immediate Family Member, towards the cost of economy class air ticket or equivalent, from the city of normal residence to the place of that Insured Person's Hospitalization, provided that such hospitalization is within 3 days from the occurrence of the Injury and the hospitalization is required for a minimum period of 5 consecutive days.

2.16 **Optional Cover 2: Permanent Total Disablement Improvement**

Notwithstanding anything contrary to the coverage stated under Clause 2.2 (Benefit 2 'Permanent Total Disablement'), We agree to pay the amount as chosen by the Policyholder and as per the 'PTD Table' stated under Clause 2.2, in case the Insured Person suffers an Injury during the Policy Period, which directly results in the Insured Person's Permanent Total Disablement within 12 months from the date of Accident (including date of Accident).

The Coverage amount applicable under this Optional Cover will be over and above the amount payable under Benefit 2 'Permanent Total Disablement'. Claim pay-out under this Optional Cover triggers only when claim pay-out is triggered under Benefit 2.

2.17 **Optional Cover 3: Permanent Partial Disablement Improvement**

Notwithstanding anything contrary to the coverage stated under Clause 2.3 (Benefit 3 'Permanent Partial Disablement'), We agree to pay the amount as chosen by the Policyholder and as per the 'PPD Table' stated under Clause 2.3, in case the Insured Person suffers an Injury during the Policy Period, which directly results in the Insured Person's Permanent Partial Disablement within 12 months from the date of Accident (including date of Accident).

The Coverage amount applicable under this Optional Cover will be over and above the amount payable under Benefit 3 'Permanent Partial Disablement'. Claim pay-out under this Optional Cover triggers only when claim pay-out is triggered under Benefit 3.

2.18 **Optional Cover 4: Accidental Hospitalization Expenses**

Through this cover, We will reimburse the Medical Expenses, up to a specified amount, as chosen by the Policyholder, incurred at a Hospital consequent to any Injury suffered by an Insured Person and undergoes In-patient Care Treatment or Day Care Treatment. The amount assessed by Us under this Benefit shall be reduced by the specified Deductible amount, as chosen by the Policyholder, on each admitted Claim (The list of Day Care Treatments is attached as Annexure-I).

2.19 **Optional Cover 5: Convalescence Benefit**

If an Insured Person suffers an Injury and undergoes Medically Necessary Hospitalization for a minimum specified period of days, We will pay a lump sum amount, as chosen by the Policyholder. This Benefit will be payable for a maximum of 3 times / 6 times in a Policy Year (for different injury causing events leading to Hospitalization), as chosen by the Policyholder.

2.20 **Optional Cover 6: Accidental Hospitalization Daily Allowance**

If an Insured Person suffers an Injury and undergoes Medically Necessary In-Patient Hospitalization for a minimum specified period of days, We will pay an amount, as chosen by the Policyholder, for each continuous and completed period of 24 hours of Hospitalization of the Insured Person, provided that Our liability is confined up to a maximum number of days, as chosen by the Policyholder.

2.21 **Optional Cover 7: Temporary Total Disablement (TTD)**

a. If an Insured Person suffers an Accident during the Policy Period which is the sole and direct cause of a temporary disablement which completely prevents that Insured Person from performing each and every duty pertaining to his employment or occupation, then We will pay an amount as chosen by the Policyholder, for each continuous and completed week of the Insured Person's Temporary Total Disablement, provided that:

- (i) For a single claim, maximum duration till which this Optional Cover will be payable is 100 weeks from the date of the Accident and if the Insured Person is disabled for a part of a week, then only a proportionate part of the weekly benefit will be payable.
- (ii) For the purpose of this Optional Cover only, Temporary Total Disablement means the temporary and total inability of an Insured Person to engage in any occupation or any gainful employment while that Insured Person is under the regular care of, and acting in accordance with, the instructions or on the written advice from the treating Medical Practitioner and is confined to bed.
- (iii) We will not pay any amount in excess of the Insured Person's base weekly income excluding overtime, bonuses, tips, commissions, or any other special compensation.
- (iv) Our liability to make payment under this Optional Cover shall commence only upon completion of the period of Deductible on number of weeks, as chosen by the Policyholder.

2.22 **Optional Cover 8: Accidental OPD Cover**

If an Insured Person suffers an Injury during the Policy Period, that requires the Insured Person to take an OPD treatment, then We will indemnify the Insured Person, for the Medical expenses incurred up to the amount as chosen by the Policyholder, subject to the following conditions:

- (i) A maximum of 4 consultations (or diagnostics) will be admissible for the same 'Injury causing event'.
- (ii) The amount assessed by Us on each admitted Claim for the Insured Person under this Optional Cover shall be reduced by a Deductible amount as chosen by the Policyholder. We shall be liable to make payment under the Policy for any Claim in respect of the Insured Person only when the Deductible on that Claim is exhausted.
- (iii) After the applicable Deductible, a specified Co-payment (as chosen by the Policyholder) shall be applicable to each and every Claim made.
- (iv) Re-imbursment towards claims incurred in a Policy year can be claimed only twice during that Policy Year.
- (v) Clause 3 (b) (ix) under Permanent Exclusions, is superseded to the extent covered under this Optional Cover.

2.23 **Optional Cover 9: Common Carrier Mishap Cover**

If the Insured Person suffers an Injury which results in Accidental Death (or Permanent Total Disablement, if Benefit 2 is offered in the plan), within 12 months of such Injury sustained which is lead solely and directly due to an Accident, occurred during the Policy Period, whilst mounting into or dismounting from or travelling in a Common Carrier on a valid ticket, We will pay additional 100% of the Sum Insured of Benefit 1 (or Benefit 2, if applicable). In case of an Insured Event, where only 50% of Sum Insured is payable, We will pay an additional 50% of Sum Insured under this Optional Cover.

3. **Permanent Exclusions**

(a) **Exclusions applicable to all the Benefits and Optional Covers:**

Any Claim in respect of any Insured Person for, arising out of or directly or indirectly due to any of the following shall not be admissible, unless expressly stated to the contrary elsewhere in the Policy:

- (i) Any Illness including any pre-existing condition or its complications except where an Insured Event under general conditions applicable to all Benefits resulting from an illness which arises directly as a consequence of an Injury sustained during the Policy Period;
- (ii) Any pre-existing injury or disability;
- (iii) The Insured Person operating or learning to operate any aircraft or performing duties as a member of a crew on any aircraft or Scheduled Airline or any airline personnel;
- (iv) The Insured Person flying in an aircraft other than as a fare paying passenger in a Scheduled Airline;
- (v) Any intentional self-inflicted injury, suicide or attempted suicide, sexually transmitted conditions, mental or nervous conditions, insanity, disorder or depression;
- (vi) Influence of drugs, alcohols or other intoxications or hallucinogens;
- (vii) War (whether declared or not) and warlike occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrection, mutiny, military or usurped power; seizure, capture, arrest, restraints and detentions of all kinds; Insured event occurring in a civilian nation (Please refer to Annexure - II for list of Civilian nations);
- (viii) Participation in actual or attempted felony, riots, civil commotion or criminal misdemeanour;
- (ix) A complication of infection with human immune deficiency virus (HIV) or any variance including acquired immune deficiency syndrome (AIDS) and AIDS Related complex (ARC) or venereal diseases;
- (x) The Insured Person engaging in sporting activities in so far as they involve the training for or participation in competitions of professional sports, unless declared beforehand and agreed by Us in writing subject to additional premium being received and incorporated accordingly in the Policy;

- (xi) Any act resulting in breach of law committed by the Insured Person with a criminal intent;
- (xii) The Insured Person serving in any branch of the military, navy or air-force or any branch of armed Forces or any paramilitary forces;
- (xiii) Radioactive contamination whether arising directly or indirectly or any consequential loss thereof, ionizing radiation, toxic, explosive or other hazardous properties of nuclear material;
- (xiv) The Insured Person working in or with mines, tunnelling or explosives or involving electrical installation with high tension supply or conveyance testing or oil rigs work or ship crew services or as jockeys or circus personnel or aerial photography or engaged in Hazardous Activities;
- (xv) Nuclear, chemical or biological attack or weapons, contributed to, caused by, resulting from, or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense. For the purpose of this exclusion:
 - I. Nuclear attack or weapons means the use of any nuclear weapon or device or waste or combustion of nuclear fuel or the emission, discharge, dispersal, release or escape of fissile or fusion material emitting a level of radioactivity capable of causing incapacitating disablement or death.
 - II. Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing incapacitating disablement or death.
 - III. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) micro-organisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesised toxins) which are capable of causing incapacitating disablement or death.
- (xvi) Impairment of the Insured Person's intellectual faculties by abuse of stimulants or depressants or by the illegal use of any solid, liquid or gaseous substance.
- (xvii) Any claim related to Hazardous Activities.
- (xviii) Persons whilst working with in underground mines or surface mining, explosives, press, activities like racing on wheels or horseback, winter sports, canoeing involving white water rapids, any bodily contact sport.
- (xix) External Congenital Anomaly or any complications or conditions arising therefrom.
- (xx) Bacterial infections (except pyogenic infection which occurs through an Accidental cut or wound).
- (xxi) Treatments rendered by a Doctor who shares the same residence as an Insured Person or who is a member of an Insured Person's family.
- (xxii) Any change of profession after inception of the Policy which results in the enhancement of Our risk, if not accepted and endorsed by Us on the schedule of Policy Certificate.
- (xxiii) As a result of any curative treatments or interventions that the Insured Person has carried out or have carried out on the Insured Person's body.
- (xxiv) Any treatment arising from or traceable to pregnancy (including voluntary termination), miscarriage (unless due to an Accident), childbirth, maternity (including caesarian section), abortion or complications of any of these. This exclusion will not apply to ectopic pregnancy.
- (xxv) Claim arising out of mental illness, psychiatric or psychological disorders.

(b) Additional Exclusions applicable to Optional Covers related to Hospitalization occurring due to Injury:

- (i) 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, Acquired Immuno Deficiency Syndrome (AIDS) whether or not arising out of HIV, Human T-Cell Lymphotropic Virus Type III (HTLV-III or IITLB-III) or Lymphadenopathy Associated Virus (LAV) or the mutants derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind.
- (ii) Any treatment arising from or traceable to any fertility, infertility, sub fertility or assisted conception procedure or sterilization, birth control procedures, hormone replacement therapy, contraceptive supplies or services including complications arising due to supplying services or Assisted Reproductive Technology.
- (iii) Treatment taken from anyone who is not a Medical Practitioner or from a Medical Practitioner who is practicing outside the discipline for which he is licensed or any kind of self-medication.
- (iv) Experimental, investigational or unproven treatments which are not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any Illness for which confinement is required at a Hospital. Any Illness or treatment which is a result or a consequence of undergoing such experimental or unproven treatment.
- (v) Any expenses incurred on prosthesis, corrective devices, external durable medical equipment of any kind, like wheelchairs, walkers, belts, collars, caps, splints, braces, stockings of any kind, diabetic footwear, glucometer/thermometer, crutches, ambulatory devices, instruments used in treatment of sleep apnea syndrome (C.P.A.P) or continuous ambulatory peritoneal dialysis (C.A.P.D.) and oxygen concentrator for asthmatic condition, cost of cochlear implants.
- (vi) Any treatment related to sleep disorder or sleep apnea syndrome, general debility convalescence, cure, rest cure, health hydros, nature cure clinics, sanatorium treatment, Rehabilitation measures, private duty nursing, respite care, long-term nursing care, custodial care or any treatment in an establishment that is not a Hospital.
- (vii) All expenses related to donor screening, treatment, including surgery to remove organs from the donor, in case of transplant surgery.
- (viii) Alternative Treatment
- (ix) OPD treatment
- (x) Treatment received outside India.

- (xi) Charges incurred at Hospital primarily for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any Illness or Injury, for which In-patient Care/ Day Care Treatment is required.
- (xii) Any charges incurred to procure any medical certificate, treatment or Illness related documents pertaining to any period of Hospitalization or Illness.
- (xiii) Personal comfort and convenience items or services including but not limited to T.V. (wherever specifically charged separately), charges for access to telephone and telephone calls (wherever specifically charged separately), foodstuffs (except patient's diet), cosmetics, hygiene articles, body or baby care products and bath additive, barber or beauty service, guest service as well as similar incidental services and supplies.
- (xiv) Expenses related to any kind of RMO charges, service charge, surcharge, admission fees, registration fees, night charges levied by the hospital under whatever head.
- (xv) Any Hospitalization primarily for investigation and / or diagnosis purpose.
- (xvi) Treatment taken in Black Listed Hospitals (as per Annexure - III) except in case of emergency Hospitalization.

In addition to the foregoing, any loss, claim or expense of whatsoever nature directly or indirectly arising out of, contributed to, caused by, resulting from, or in connection with any action taken in controlling, preventing, suppressing, minimizing or in any way relating to the above is also excluded.

4. Portability

The Policyholder and / or Insured Person can apply to Us for a health insurance policy only in case the proposed Insured Person is covered without any break under any individual health insurance policy from any Indian non-life insurance company or Health Insurance Company registered with the IRDAI or any group health insurance policy from Us.

* Note: Portability provisions will apply even if the Insured Person migrates to any other health insurance policy.

5. Claims Intimation, Assessment and Management

Upon the occurrence of any event or Injury that may give rise to a Claim under this Policy, then as a condition precedent to Our liability under the Policy, the Policyholder or Insured Person (or the Nominee or legal heir, in case the Insured Person is deceased) shall undertake all the following, in addition to any specific requirements specified within the Benefit / Optional Cover under which the Claim is made:

5.1 Claim Intimation

- (i) If any Injury is suffered or any other contingency occurs which has resulted in a Claim or may result in a Claim under the Policy, We shall be notified with full particulars within 48 hours from the date of occurrence of event or before the Insured Person's discharge from Hospital, either at Our call center or in writing.
- (ii) If the Insured Person is to undergo planned Hospitalization, the Policyholder or Insured Person shall give written intimation to Us, about the proposed Hospitalization at least 48 hours prior to the planned date of admission to Hospital.
- (iii) At the time of intimation of Claim, We may require details like Policy Number, Name of the Policyholder, Name of the Insured Person in respect of whom the Claim is being made, Nature of Injury or any other information, documentation or details requested by Us.

5.2 Claim Procedure

- (i) Any claim under this Policy would be processed or settled through reimbursement mode, except for Hospitalization incurred due to an Accident, which can be processed through Cashless Facility as well, at any of our Network Provider.
- (ii) It is agreed and understood that in all cases where intimation of a Claim has been provided under this provision, all the information and documentation specified by Us, shall be submitted (at the Insured Person's expense) to Us immediately and in any event within 30 days of Insured Person's discharge from Hospital or completion of treatment or date of loss, whichever is later.

5.3 Claim Documentation

- (i) All the Claim documents and related information shall be submitted along with a completed and signed claim form to Us at the earliest and in any event within 30 days of occurrence of the event in respect of all Claims. However, We shall condone delay on merit for delayed Claims where delay is proved to be for reasons beyond the control of the Policyholder or the Insured Person.
- (ii) We reserve the right to seek additional documents depending upon the cause of Claim or the Benefit / Optional Cover under which the Claim is made.
- (iii) We will only accept bills/invoices/medical treatment related documents which are made in the Insured Person's name. Only in the event that original bills, receipts, prescriptions, reports or other documents have already been given to any other insurance company, We will accept properly verified photocopies of such documents attested by such other insurance company along with an original certificate of the extent of payment received from such insurance company.

5.4 Policyholder's Or Insured Person's Or Claimant's Duty At The Time Of Claim

- (i) All reasonable steps and measures must be taken to avoid or minimize the quantum of any Claim that may be made under this Policy.
- (ii) Intimation of the claim and submission or provision of all information and documentation shall be made promptly and in any event in accordance with the procedures and within the specified timeframes of the Policy, under which the Claim is being made.
- (iii) The Insured Person will, at Our request, submit himself / herself for a medical examination by the Company's nominated Medical Practitioner as often

as We consider reasonable and necessary. The cost of such examination will be borne by Us.

- (iv) Our Medical Practitioner and representatives shall be given access and co-operation to inspect the Insured Person's medical and hospitalization records and to investigate the facts and examine the Insured Person.
- (v) We shall be provided with complete documentation and information which We have requested to establish Our liability for the Claim, its circumstances and its quantum.

5.5 Claim Assessment and Payment Terms

- (i) All admissible Claims under this Policy shall be assessed by Us directly. The Claim amount assessed would be deducted from the Sum Insured / Coverage amount of respective Benefit or Optional Cover.
- (ii) We shall have no liability to make payment of a Claim under the Policy in respect of an Insured Person during the Policy period, once the applicable Sum Insured / Coverage amount under respective Benefit or Optional Cover for that Insured Person is exhausted.
- (iii) All payments under this Policy shall be made in Indian Rupees and within India.
- (iv) In the event of death of the Policyholder, We will pay the nominee (as named in the Policy Certificate) and in case of no nominee at its discretion to the legal heirs of the Policyholder whose discharge shall be treated as full and final discharge of its liability under the Policy.
- (v) On payment of renewal premium, the Insured Person shall give written notice to Us of any disease, physical defect or infirmity or change in occupation or profession, with respect to the Insured Person.
- (vi) If the Insured Person suffers a relapse within 45 days from the date of discharge from the Hospital for which a Claim has been made, then such relapse shall be deemed to be part of the same Claim.
- (vii) We shall settle any Claim within 30 days of receipt of all the necessary documents/ information as required for settlement of such Claim and sought by Us. We shall provide the Insured Person an offer of settlement of Claim, and upon acceptance of such offer by the Insured Person, We shall make payment within 7 days from the date of receipt of such acceptance. In case there is delay in the payment beyond the stipulated timelines, We shall pay additional amount as 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. For the purpose of this clause, 'bank rate' shall mean the existing bank rate as notified by Reserve Bank of India, unless the extent regulation requires payment based on some other prescribed interest rate.
- (viii) The Claim shall be paid only for the Policy Period in which the Insured event which gives rise to a Claim under this Policy occurs.

6. Salient Features

6.1 Free Look Period

- (i) The Policyholder may, within 15 days from the receipt of the Policy document, return the Policy stating reasons for his objection, if the Policyholder disagrees with any Policy terms and conditions.
- (ii) If no Claim has been made under the Policy, We will refund the premium received after deducting proportionate risk premium for the period on cover, and stamp duty charges. If only part of the risk has commenced, such proportionate risk premium shall be calculated as commensurate with the risk covered during such period. All rights under the Policy will immediately stand extinguished on the free look cancellation of the Policy.
- (iii) Provision for Free look period is not applicable and available at the time of renewal of the Policy.

6.2 Premium

The premium charged under the policy depends upon the Plan, Sum Insured chosen, tenure and Optional Covers taken and the health status of the individual.

The premium rates for the plans offered are annexed hereto with the prospectus.

6.3 Cancellation / Termination

- a. We may at any time, cancel this Policy on grounds as specified in Clause 6.1 and We shall have no liability to make payment of any claims and the premium paid shall be forfeited to Us and no refund of premium shall be effected by Us, by giving 15 days' notice in writing by Registered Post Acknowledgment Due / recorded delivery to the Policyholder or Insured Person at his last known address.
- b. The Policyholder may also give 15 days' notice in writing, to Us, for the cancellation of this Policy, in which case We shall from the date of receipt of the notice, cancel the Policy and refund the premium for the unexpired period of this Policy at the short period scales as mentioned below, provided no Claim has been made under the Policy and full premium has been received under the Policy.

Refund % to be applied on premium received.

| Cancellation date up to (x months) from Policy Period Start Date | 1 Year | 2 Year | 3 Year |
|--|--------|--------|--------|
| Upto 1 month | 75.0% | 87.50% | 91.50% |
| 1 month to 3 months | 50.0% | 75.0% | 88.50% |
| 3 months to 6 months | 25.0% | 62.50% | 75.0% |
| 6 months to 12 months | 0.0% | 50.0% | 66.50% |
| 12 months to 15 months | N.A. | 25.0% | 50.0% |
| 15 months to 18 months | N.A. | 12.50% | 41.50% |
| 18 months to 24 months | N.A. | 0.0% | 33.0% |
| 24 months to 30 months | N.A. | N.A. | 8.0% |
| Beyond 30 months | N.A. | N.A. | 0.0% |

c. In case of demise of the Policyholder,

- (i) Where the Policy covers only the Policyholder, this Policy shall stand null and void from the date and time of demise of the Policy holder.
- (ii) Where the Policy covers other Insured Persons, this Policy shall continue till the end of Policy Period or next premium due whichever is earlier. If the other Insured Persons wish to continue with the same Policy, We will renew the Policy subject to the appointment of a policyholder provided that:
 - I. Written notice in this regard is given to Us before the Policy Period End Date; and
 - II. A person over Age 18 who satisfies Our criteria to become a Policyholder.

Note: Our liability in respect of an Insured Person shall cease upon making any refund of premium under this Policy in accordance with the terms and conditions hereof in respect of such an Insured Person and the benefit in respect of that Insured Person shall forthwith terminate.

6.4 Underwriting

The proposal shall be subjected to individual underwriting based on the annual income and the sum insured proposed for each prospect.

Post the underwriting review, the underwriter may:

- Accept the proposal as is
- Reject the proposal
- Accept the proposal with loading (as per Underwriting policy of the Company)

Loading Parameters:

| Sr. No. | Description | Loading |
|---------|---|---------|
| 1 | Occupations belonging to higher risk class (eg.: Taxi drivers, Airline ground-staff, Bus and Car Mechanics) | 15 |
| 2 | Involved in Adventure Sport / Extreme Sports * | 25 |

NOTE: The applicable loadings are additive in nature (i.e. maximum 40%).

* Engagement in sporting activities under Clause 3 (a) (x) under 'permanent exclusions' is waived off on payment of additional premium if insured declares beforehand and agreed by us in writing.

6.5 Multiple Policies

In case you are covered under more than one indemnity insurance policies, with Us or with other insurers, You shall have the right to settle the Claim with any of the Company, provided that the Claim amount payable is up to Sum Insured of such Policy.

In case the Claim amount exceeds the Sum Insured, then You shall have the right to choose the companies with whom the Claim is to be settled. Further, You shall have the right to choose the companies from whom you want to claim the balance amount. You shall only be indemnified the hospitalization costs in accordance with terms & conditions of chosen Policy. This clause shall not apply to any Benefit offered on a fixed benefit basis.

6.6 Renewal Terms

- i. This Policy will automatically terminate on the Policy Period End Date. All renewal applications and requisite premium shall be given to Us on or before the Policy Period End Date provided the policy is in force and in any event before the expiry of the Grace Period. The Policyholder shall give Us written notice along with the renewal application of any material changes to the risk insured under the Policy. If no such written notice is received by Us along with the renewal application, it shall be deemed that there is no material change to the risk.
- ii. For the purpose of this provision, Grace Period means a period of 30 days immediately following the Policy Period End Date during which a payment can be made to renew this Policy without loss of continuity benefits. Coverage is not available for the period for which premium is not received by Us and We shall not be liable for any Claims incurred during such period. This Clause is applicable at Person level.
- iii. Renewal shall be offered lifelong. We will ordinarily not refuse to renew the Policy except on grounds of fraud, moral hazard or misrepresentation or non-co-operation by the Insured.

- iv. We may revise the renewal premium payable under the Policy provided that revisions to the renewal premium are in accordance with the IRDAI rules and regulations as applicable from time to time. Change in rates will be applicable from the date of approval by the Authority and shall be applied only prospectively thereafter for new policies and at the date of renewal for renewals.
- v. This product may be withdrawn / modified by Us after due approval from IRDAI. In case this product is withdrawn / modified by Us, this Policy can be renewed under the then prevailing Health Insurance Product or its nearest substitute approved by IRDAI. We shall duly intimate Policyholder at least three months prior to the date of such withdrawal / modification of this product and the options available to Insured Person at the time of renewal of this policy.
- vi. No loading based on individual claim experience shall be applicable on renewal premium payable.
- vii. Sum Insured can be increased / decreased only at the time of renewal. However, increase in Sum Insured may require further Underwriting.
- viii. If Claim has been made under Benefit 1, 2 or 3 and 100% of the Sum Insured has been exhausted then the policy would not be renewed for that Insured Person.

6.7 Grievance Redressal

We have developed proper procedures and effective mechanism to address Your complaints. We are committed to comply with the Regulations, standards which have been set forth in the Regulations, Circulars issued by the Authority (IRDAI) from time to time in this regard.

(a) If You/Insured Person has a grievance that You/Insured Person wishes Us to redress, You/Insured Person may contact Us with the details of the Website/link: <https://www.careinsurance.com/contact-us.html>

Mobile App: Care Health - Customer App

Tollfree (WhatsApp Number): 8860402452

Courier: Any of Company's Branch Office or Corporate Office

Insured Person may also approach the grievance cell at any of the Company's branches with the details of grievance.

If Insured Person is not satisfied with the redressal of grievance through one of the above methods, Insured Person may contact the grievance officer at Branch Office or Corporate Office. For updated details of grievance officer,

Kindly refer the link <https://www.careinsurance.com/customer-grievance-redressal.html>

If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017.

Grievance may also be lodged at IRDAI integrated Grievance Management System - <https://bimabharosa.irdai.gov.in/>

Exclusively for Senior Citizens, the Company has a separate extension on the Customer Service Toll Free Number. This separate customer service channel prioritizes and routes any kind of request / grievance raised by Senior Citizens through various fast track internal escalations leading to lesser Turn-Around-Time (TAT) for request / grievance addressal.

You / Insured Person may approach the nearest Insurance Ombudsman for resolution of the grievance. Details of Insurance Ombudsman offices are available at IRDAI website: www.irda.gov.in, or on our website at www.careinsurance.com

Schedule of Discounts

| S.No. | Description | Discount | |
|-------|--|---------------------|----------|
| | | No. of persons | Discount |
| 1 | Family discount - This discount shall be applicable if more than one persons of the same family are covered in the same policy, individually | 2 members and above | 5% |
| 2 | Discount for Employees and their dependents of CHIL, CHIL's Promoters and its Subsidiaries /Affiliates. | 15% | |
| 3 | Discount for multi-year policies (on single premium) | No. of years | Discount |
| | 2 year rate = Annual Rate x 2 x (1 - Discount applicable) | 2 year | 7.50% |
| | 3 year rate = Annual Rate x 3 x (1 - Discount applicable) | 3 year | 10.0% |

Note: The above stated discounts are multiplicative in nature & applicable on final Premium calculated under Policy.

Schedule of Benefits

| Plan Detail | Secure 1 | Secure 2 | Secure 3 | Secure 4 | Secure 5 | Secure 6 |
|------------------------------------|--|---|---|---|-----------------|--------------------|
| Sum Insured (in Rs.) | 1 Lac to 10 Lac | Above 10 Lac up to 30 Lac | Above 30 lac up to 3 Crore | Above 3 Crore up to 25 Crores | 1 Lac to 30 Lac | 1 Lac to 25 Crores |
| Benefits | | | | | | |
| 1. Accidental Death | 100% Sum Insured | | | | | |
| 2. Permanent Total Disablement | As per PTD Table in Annexure - 1 (a) | | | | | No |
| 3. Permanent Partial Disablement | As per PTD Table in Annexure - 1 (b) | | | | | No |
| 4. Fractures | sub-limit of ₹50,000 (As per Fractures Table in Annexure-1(c)) | sub-limit of ₹1,00,000 (As per Fractures Table in Annexure-1(c)) | sub-limit of ₹2,00,000 (As per Fractures Table in Annexure-1(c)) | sub-limit of ₹3,00,000 (As per Fractures Table in Annexure-1(c)) | No | No |
| 5. Child Education | No | 10% of SI | 10% of SI | 10% of SI | No | No |
| 6. Major Diagnostics Tests | No | Up to ₹ 15,000 | Up to ₹ 25,000 | Up to ₹ 50,000 | No | No |
| 7. Disappearance | No | 100% SI | 100% SI | 100% SI | No | No |
| 8. Mobility cover | No | Up to ₹ 15,000 | Up to ₹ 25,000 | Up to ₹ 50,000 | No | No |
| 9. Burns | No | sub-limit of ₹ 10,00,000 (As per Burns Table in Annexure - 1 (d)) | sub-limit of ₹ 20,00,000 (As per Burns Table in Annexure - 1 (d)) | sub-limit of ₹ 25,00,000 (As per Burns Table in Annexure - 1 (d)) | No | No |
| 10. Domestic Road Ambulance | No | No | Up to ₹ 5,000 | Up to ₹ 5,000 | No | No |
| 11. Nursing Care | No | No | ₹ 1,000 per day, Max for 15 days/claim | ₹ 1,500 per day, Max for 15 days/claim | No | No |
| 12. Reconstructive Surgery | No | No | Upto ₹ 10,00,000 | Upto ₹ 20,00,000 | No | No |
| 13. Repatriation of Mortal Remains | No | No | 2% of the SI or Max ₹ 1,00,000; whichever is lower | 2% of the SI or Max ₹ 1,00,000; whichever is lower | No | No |
| 14. Loyalty Benefit | For each continuous and completed Policy Year, on subsequent renewal, the Company will enhance the Coverage amount of last Policy Year, pertaining to Benefit 1, Benefit 2 and Benefit 3, by flat 5% of the Sum Insured, on a cumulative basis, as a Loyalty Bonus; Max. Increase up to 50% of Sum Insured | | | | | |

| Plan Detail | Secure 1 | Secure 2 | Secure 3 | Secure 4 | Secure 5 | Secure 6 |
|--|--|--|--|--|--|---|
| Sum Insured (in Rs.) | 1 Lac to 10 Lac | Above 10 Lac up to 30 Lac | Above 30 lac up to 3 Crore | Above 3 Crore up to 25 Crores | 1 Lac to 30 Lac | 1 Lac to 25 Crores |
| Optional Covers | | | | | | |
| 1. Accidental Hospitalization | | | | | | |
| (a) Hospitalization Expenses | Up to ₹ 1,00,000 | Up to ₹ 1,00,000 | Up to ₹ 5,00,000 | Up to ₹ 10,00,000 | Up to ₹ 1,00,000 | - Up to Rs. 1 Lac for SI up to 30 Lac; - Up to Rs. 5 Lac for SI above 30 Lac up to 3 Crore; - Up to Rs. 10 Lac for SI above 3 Cr. |
| (b) Daily Allowance | ₹ 500 per day, Max for 5 days, with a deductible of 2 days | ₹ 500 per day, Max for 5 days, with a deductible of 2 days | ₹ 500 per day, Max for 5 days, with a deductible of 2 days | ₹ 500 per day, Max for 5 days, with a deductible of 2 days | ₹ 500 per day, Max for 5 days, with a deductible of 2 days | ₹ 500 per day, Max for 5 days, with a deductible of 2 days |
| (c) Compassionate Visit | Up to ₹ 15,000 | Up to ₹ 15,000 | Up to ₹ 25,000 | Up to ₹ 50,000 | Up to ₹ 15,000 | - Up to Rs. 15,000 for SI up to 30 Lac; - Up to Rs. 25,000 for SI above 30 Lac up to 3 Crore; - Up to Rs. 50,000 for SI above 3 Cr. |
| 2. Permanent Total Disablement Improvement | Up to ₹ 25 Crore; As per PTD Table in Annexure – I (a) | | | | | |
| 3. Permanent Partial Disablement Improvement | Up to ₹ 25 Crore; As per PPD Table in Annexure – I (b) | | | | | |
| 4. Accidental Hospitalization Expenses | - Coverage amount Options (in ₹): 5,000 / 10,000 / 25,000 / 50,000 / 75,000 / 1,00,000 / 2,00,000 / 3,00,000 / 4,00,000 / 5,00,000 / 7,00,000 / 10,00,000 - Deductible in amount Options: 0 to ₹ 25,000 (in multiples of 5,000) | | | | | |
| 5. Convalescence Benefit | - Coverage Amount Options: From ₹ 1,000 to ₹ 1,00,000 (in multiples of 1,000) - Deductible in Days Options: 5 or 10 days - This Benefit will be payable for a maximum of 3 times / 6 times in a Policy Year (for different injury causing events leading to Hospitalization), as chosen by the Policyholder | | | | | |
| 6. Accidental Hospitalization Daily Allowance | - Coverage amount per Day Options: From ₹ 100 to ₹ 10,000 (in multiples of 100) - Deductible in Days Options: 0 to 5 days - Options for Max. payable Duration: 1 to 15 days and 20 / 25 / 30 days | | | | | |
| 7. Temporary Total Disablement (TTD) | ₹ 5,000 / week | ₹ 10,000 / week | ₹ 20,000 / week | ₹ 30,000 / week | ₹ 5,000 / week | No |
| In any case, maximum payable amount will not exceed the base weekly income of Insured Person; Deductible Options available: No Deductible or 1 week Deductible | | | | | | |
| 8. Accidental OPD Cover | - Coverage amount Options (in Rs.): 500 / 1000 / 2000 / 3000 / 5000 - Deductible in amount Options (in Rs.): 100 / 500 / 1000 - Co-payment Options: 0% / 20% / 30% / 50% - Re-imbursment towards claims incurred in a policy year can be claimed only twice during that policy year - Admissible up to 4 consultations (or diagnostics), for the same 'Injury causing event' | | | | | |
| 9. Common Carrier Mishap Cover | Pays additional 100% of the Sum Insured of Benefit 1 (or Benefit 2, if offered in the plan), in case the Insured Person suffers an Injury which results in Accidental Death (or Permanent Total Disablement, if Benefit 2 is applicable), whilst travelling in a Common Carrier Note: In case of an Insured Event, where only 50% of Sum Insured is payable, We will pay an additional 50% of Sum Insured under this Optional Cover | | | | | |

* Note: Up to means – “Actual expenses incurred or the amount specified, whichever is lower.”

Explanation to the Benefits

| Description | Description | Payment Settlement Basis | Part of Main Sum Insured or Outside Sum Insured | Scope of Cover | Precondition - Admissibility of Claim under Benefit |
|--|---|-----------------------------------|---|----------------|---|
| Benefit 1 | Accidental Death | Benefit | Part of Main Sum Insured | Worldwide | Not Applicable |
| Benefit 2 | Permanent Total Disablement | Benefit | Part of Main Sum Insured | Worldwide | Not Applicable |
| Benefit 3 | Permanent Partial Disablement | Benefit | Part of Main Sum Insured | Worldwide | Not Applicable |
| Benefit 4 | Fractures | Benefit | Part of Main Sum Insured | Worldwide | Not Applicable |
| Benefit 5 | Child Education | Benefit | Addition to Main Sum Insured | Worldwide | Benefit 1 or Benefit 2 |
| Benefit 6 | Major Diagnostics Tests | Indemnity | Addition to Main Sum Insured | India | Benefit 1 or Benefit 2 or Benefit 3 |
| Benefit 7 | Disappearance | Benefit | Part of Main Sum Insured | Worldwide | In lieu of Benefit 1 |
| Benefit 8 | Mobility cover | Indemnity | Addition to Main Sum Insured | India | Benefit 2 |
| Benefit 9 | Burns | Benefit | Part of Main Sum Insured | Worldwide | Not Applicable |
| Benefit 10 | Domestic Road Ambulance | Indemnity | Addition to Main Sum Insured | India | Benefit 1 or Benefit 2 or Benefit 3 |
| Benefit 11 | Nursing Care | Benefit | Addition to Main Sum Insured | Worldwide | Benefit 2 or Benefit 3 |
| Benefit 12 | Reconstructive Surgery | Indemnity | Addition to Main Sum Insured | India | Benefit 2 or Benefit 3 |
| Benefit 13 | Repatriation of Mortal Remains | Benefit | Addition to Main Sum Insured | Worldwide | Benefit 1 |
| Benefit 14 | LoyaltyBenefit | Benefit | Addition to Main Sum Insured | NA | Not Applicable |
| Optional Cover 1: Accidental Hospitalization | (a) HospitalizationExpenses (b) DailyAllowance (c) Compassionatevisit | Indemnity Benefit Indemnity | Addition to Main Sum Insured | NA | Not Applicable |
| Optional Cover 2 | Permanent Total Disablement Improvement | Benefit | Addition to Main Sum Insured | Worldwide | Benefit 2 |
| Optional Cover 3 | Permanent Partial Disablement Improvement | Benefit | Addition to Main Sum Insured | Worldwide | Benefit 3 |
| Optional Cover 4 | Accidental Hospitalization Expenses | Indemnity | Addition to Main Sum Insured | India | Not Applicable |
| Optional Cover 5 | Convalescence Benefit | Benefit | Addition to Main Sum Insured | Worldwide | Not Applicable |
| Optional Cover 6 | Accidental Hospitalization Daily Allowance | Benefit | Addition to Main Sum Insured | Worldwide | Not Applicable |
| Optional Cover 7 | Temporary Total Disablement | Benefit | Part of Main Sum Insured | Worldwide | Not Applicable |
| Optional Cover 8 | Accidental OPD Cover | Indemnity | Addition to Main Sum Insured | India | Not Applicable |
| Optional Cover 9 | Common Carrier Mishap Cover | Benefit | Addition to Main Sum Insured | Worldwide | Benefit 1 or Benefit 2 |

Note to the above table:

(1) 'Main Sum Insured' is the Sum Insured chosen by the Proposer; under the base plan; Any Claim paid for Benefits which form part of 'Main Sum Insured' shall reduce the Sum Insured for that Policy Year and only the balance shall be available for all the future claims for that Policy Year.

(2) In the Table above, Scope of Cover under 'Worldwide' does not include listed civilian nations. For updated list of such excluded nations, please refer Annexure II (List of civilian nations) or visit Our website.

About us

Care Health Insurance Limited

Care Health Insurance is a specialized health insurer offering products in the retail segment for Health Insurance, Top-up Coverage, Personal Accident, Maternity, International Travel Insurance and Critical Illness along with Group Health Insurance and Group Personal Accident Insurance for Corporates, Micro Insurance Products for the Rural Market and a Comprehensive Set of Wellness Services. With its operating philosophy being based on the principal tenet of 'consumer-centricity', the company has consistently invested in the effective application of technology to deliver excellence in customer servicing, product innovation and value-for-money services.

Care Health Insurance was awarded 'Best Health Insurance Company of the Year' at the India Insurance Summit & Awards 2023, 'Smart Insurer of the Year' and 'Sales Champion of the Year' at The Economic Times Insurance Summit & Awards 2022. The company was also conferred 'Best Health Insurance Product' and 'Best Health Insurance Agents' awards at the Insurance Alerts Awards, 2021 and 'Best Health Insurance Product Award' at FICCI Healthcare Excellence Awards 2019.

| | |
|-------------------------------|---|
| Registered Office: | Care Health Insurance Limited 5th Floor, 19 Chawla House, Nehru Place, New Delhi-110019 |
| Correspondence address | Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road, Sector-43, Gurugram-122009 |
| Tollfree (WhatsApp Number) | 8860402452 |
| E-mail ID for Claims | claims@careinsurance.com |
| Submit Your Queries/Requests: | https://www.careinsurance.com/contact-us.html |
| Website | www.careinsurance.com |

Disclaimer: This is only a summary of product securē. For more details on risk factors, terms and conditions please read sales brochure carefully before concluding a sale. Please seek the advice of your insurance advisor if you require any further information or clarification.

Statutory Warning: Prohibition of Rebates (under Section 41 of Insurance Act, 1938): No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

Insurance is a subject matter of solicitation. UAN:23115962 UIN: RHIPAI18048V021718 CIN: U66000DL2007PLC161503 IRDAI Registration Number - 148

Note:

1. The foregoing is only an indication of the cover offered. For details, please refer to the Policy terms and conditions, available on request.
2. The Proposal Form shall form the basis of the insurance contract. It is mandatory for You to provide Us a duly filled in and signed Proposal Form and retain a copy as an evidence of the basis of the insurance contract.
3. Any risk under the Policy shall commence only once We receive the premium (including all taxes and levies thereto).
4. In case You have not understood any of the details, coverage, etc. in this document, You can seek for a clarification or a copy of this document in a language understood by You.
5. For full details of this product, please log on to www.careinsurance.com
6. The product is in conformity with the IRDAI approval and health insurance regulations and standardization guidelines.

Annexure I - List of Day Care Surgeries

1. **Cardiology Related:**
 1. CORONARY ANGIOGRAPHY
2. **Critical Care Related:**
 2. INSERT NON-TUNNEL CV CATH
 3. INSERT PICC CATH (PERIPHERALLY INSERTED CENTRAL CATHETER)
 4. REPLACE PICC CATH (PERIPHERALLY INSERTED CENTRAL CATHETER)
 5. INSERTION CATHETER, INTRAANTERIOR
 6. INSERTION OF PORTACATH
3. **Dental Related:**
 7. SPLINTING OF AVULSED TEETH
 8. SUTURING LACERATED LIP
 9. SUTURING ORAL MUCOSA
 10. ORAL BIOPSY IN CASE OF ABNORMAL TISSUE PRESENTATION
 11. FNAC
 12. SMEAR FROM ORAL CAVITY
4. **ENT Related:**
 13. MYRINGOTOMY WITH GROMMET INSERTION
 14. TYMPANOPLASTY (CLOSURE OF AN EAR DRUM PERFORATION/RECONSTRUCTION OF THE AUDITORY OSSICLES)
 15. REMOVAL OF A TYMPANIC DRAIN
 16. KERATOSIS REMOVAL UNDER GA
 17. OPERATIONS ON THE TURBINATES (NASAL CONCHA)
 18. TYMPANOPLASTY (CLOSURE OF AN EAR DRUM PERFORATION/RECONSTRUCTION OF THE AUDITORY OSSICLES)
 19. REMOVAL OF KERATOSIS OBTURANS
 20. STAPEDOTOMY TO TREAT VARIOUS LESIONS IN MIDDLE EAR
 21. REVISION OF A STAPEDECTOMY
 22. OTHER OPERATIONS ON THE AUDITORY OSSICLES
 23. MYRINGOPLASTY (POST-AURA/ENDAURAL APPROACH AS WELL AS SIMPLE TYPE -I TYMPANOPLASTY)
 24. FENESTRATION OF THE INNER EAR
 25. REVISION OF A FENESTRATION OF THE INNER EAR
 26. PALATOPLASTY
 27. TRANSORAL INCISION AND DRAINAGE OF A PHARYNGEAL ABSCESS
 28. TONSILLECTOMY WITHOUT ADENOIDECTOMY
 29. TONSILLECTOMY WITH ADENOIDECTOMY
 30. EXCISION AND DESTRUCTION OF A LINGUAL TONSIL
 31. REVISION OF A TYMPANOPLASTY
 32. OTHER MICROSURGICAL OPERATIONS ON THE MIDDLE EAR
 33. INCISION OF THE MASTOID PROCESS AND MIDDLE EAR
 34. MASTOIDECTOMY
 35. RECONSTRUCTION OF THE MIDDLE EAR
 36. OTHER EXCISIONS OF THE MIDDLE AND INNER EAR
 37. INCISION (OPENING) AND DESTRUCTION (ELIMINATION) OF THE INNER EAR
 38. OTHER OPERATIONS ON THE MIDDLE AND INNER EAR
 39. EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE NOSE
 40. OTHER OPERATIONS ON THE NOSE
 41. NASAL SINUS ASPIRATION
 42. FOREIGN BODY REMOVAL FROM NOSE
 43. OTHER OPERATIONS ON THE TONSILS AND ADENOIDS
 44. ADENOIDECTOMY
 45. LABYRINTHECTOMY FOR SEVERE VERTIGO
46. STAPEDECTOMY UNDER GA
47. STAPEDECTOMY UNDER LA
48. TYMPANOPLASTY (TYPE IV)
49. ENDOLYMPHATIC SAC SURGERY FOR MENIERE'S DISEASE
50. TURBINECTOMY
51. ENDOSCOPIC STAPEDECTOMY
52. INCISION AND DRAINAGE OF PERICHONDRIITIS
53. SEPTOPLASTY
54. VESTIBULAR NERVE SECTION
55. THYROPLASTY TYPE I
56. PSEUDOCYST OF THE PINNA - EXCISION
57. INCISION AND DRAINAGE - HAEMATOMA AURICLE
58. TYMPANOPLASTY (TYPE II)
59. REDUCTION OF FRACTURE OF NASAL BONE
60. THYROPLASTY TYPE II
61. TRACHEOSTOMY
62. EXCISION OF ANGIOMA SEPTUM
63. TURBINOPLASTY
64. INCISION & DRAINAGE OF RETRO PHARYNGEAL ABSCESS
65. UVULO PALATO PHARYNGO PLASTY
66. ADENOIDECTOMY WITH GROMMET INSERTION
67. ADENOIDECTOMY WITHOUT GROMMET INSERTION
68. VOCAL CORD LATERALISATION PROCEDURE
69. INCISION & DRAINAGE OF PARA PHARYNGEAL ABSCESS
70. TRACHEOPLASTY
5. **Gastroenterology Related:**
 71. CHOLECYSTECTOMY AND CHOLEDOCHO-JEJUNOSTOMY/ DUODENOSTOMY/GASTROSTOMY/EXPLORATION COMMON BILE DUCT
 72. ESOPHAGOSCOPY, GASTROSCOPY, DUODENOSCOPY WITH POLYPECTOMY/ REMOVAL OF FOREIGN BODY/DIATHERMY OF BLEEDING LESIONS
 73. PANCREATIC PSEUDOCYST EUS & DRAINAGE
 74. RF ABLATION FOR BARRETT'S OESOPHAGUS
 75. ERCP AND PAPILOTOMY
 76. ESOPHAGOSCOPE AND SCLEROSANT INJECTION
 77. EUS + SUBMUCOSAL RESECTION
 78. CONSTRUCTION OF GASTROSTOMY TUBE
 79. EUS + ASPIRATION PANCREATIC CYST
 80. SMALL BOWEL ENDOSCOPY (THERAPEUTIC)
 81. COLONOSCOPY , LESION REMOVAL
 82. ERCP
 83. COLONOSCOPY STENTING OF STRICTURE
 84. PERCUTANEOUS ENDOSCOPIC GASTROSTOMY
 85. EUS AND PANCREATIC PSEUDO CYST DRAINAGE
 86. ERCP AND CHOLEDOCHOSCOPY
 87. PROCTOSIGMOIDOSCOPY VOLVULUS DETORSION
 88. ERCP AND SPHINCTEROTOMY
 89. ESOPHAGEAL STENT PLACEMENT
 90. ERCP + PLACEMENT OF BILIARY STENTS
 91. SIGMOIDOSCOPY W/ STENT
 92. EUS + COELIAC NODE BIOPSY
 93. UGI SCOPY AND INJECTION OF ADRENALINE, SCLEROSANTS, BLEEDING ULCERS

6. General Surgery Related:

94. INCISION OF A PILONIDAL SINUS / ABSCESS
95. FISSURE IN ANO SPHINCTEROTOMY
96. SURGICAL TREATMENT OF A VARICOCELE AND A HYDROCELE OF THE SPERMATIC CORD
97. ORCHIDOPEXY
98. ABDOMINAL EXPLORATION IN CRYPTORCHIDISM
99. SURGICAL TREATMENT OF ANAL FISTULAS
100. DIVISION OF THE ANAL SPHINCTER (SPHINCTEROTOMY)
101. EPIDIDYMECTOMY
102. INCISION OF THE BREAST ABSCESS
103. OPERATIONS ON THE NIPPLE
104. EXCISION OF SINGLE BREAST LUMP
105. INCISION AND EXCISION OF TISSUE IN THE PERIANAL REGION
106. SURGICAL TREATMENT OF HEMORRHOIDS
107. OTHER OPERATIONS ON THE ANUS
108. ULTRASOUND GUIDED ASPIRATIONS
109. SCLEROTHERAPY, ETC.
110. LAPAROTOMY FOR GRADING LYMPHOMA WITH SPLENECTOMY/LIVER/LYMPH NODE BIOPSY
111. THERAPEUTIC LAPAROSCOPY WITH LASER
112. APPENDICECTOMY WITH/WITHOUT DRAINAGE
113. INFECTED KELOID EXCISION
114. AXILLARY LYMPHADENECTOMY
115. WOUND DEBRIDEMENT AND COVER
116. ABSCESS-DECOMPRESSION
117. CERVICAL LYMPHADENECTOMY
118. INFECTED SEBACEOUS CYST
119. INGUINAL LYMPHADENECTOMY
120. INCISION AND DRAINAGE OF ABSCESS
121. SUTURING OF LACERATIONS
122. SCALP SUTURING
123. INFECTED LIPOMA EXCISION
124. MAXIMAL ANAL DILATATION
125. PILES
126. A) INJECTION SCLEROTHERAPY
127. B) PILES BANDING
128. LIVER ABSCESS- CATHETER DRAINAGE
129. FISSURE IN ANO- FISSURECTOMY
130. FIBROADENOMA BREAST EXCISION
131. OESOPHAGEAL VARICES SCLEROTHERAPY
132. ERCP - PANCREATIC DUCT STONE REMOVAL
133. PERIANAL ABSCESS I&D
134. PERIANAL HEMATOMA EVACUATION
135. UGI SCOPY AND POLYPECTOMY OESOPHAGUS
136. BREAST ABSCESS I&D
137. FEEDING GASTROSTOMY
138. OESOPHAGOSCOPY AND BIOPSY OF GROWTH OESOPHAGUS
139. ERCP - BILE DUCT STONE REMOVAL
140. ILEOSTOMY CLOSURE
141. COLONOSCOPY
142. POLYPECTOMY COLON
143. SPLENIC ABSCESES LAPAROSCOPIC DRAINAGE
144. UGI SCOPY AND POLYPECTOMY STOMACH
145. RIGID OESOPHAGOSCOPY FOR FB REMOVAL

146. FEEDING JEJUNOSTOMY
147. COLOSTOMY
148. ILEOSTOMY
149. COLOSTOMY CLOSURE
150. SUBMANDIBULAR SALIVARY DUCT STONE REMOVAL
151. PNEUMATIC REDUCTION OF INTUSSUSCEPTION
152. VARICOSE VEINS LEGS - INJECTION SCLEROTHERAPY
153. RIGID OESOPHAGOSCOPY FOR PLUMMER VINSON SYNDROME
154. PANCREATIC PSEUDOCYSTS ENDOSCOPIC DRAINAGE
155. ZADEK'S NAIL BED EXCISION
156. SUBCUTANEOUS MASTECTOMY
157. EXCISION OF RANULA UNDER GA
158. RIGID OESOPHAGOSCOPY FOR DILATION OF BENIGN STRICTURES
159. EVERSION OF SAC
160. UNILATERAL
161. ILATERAL
162. LORD'S PLICATION
163. JABOULAY'S PROCEDURE
164. SCROTOPLASTY
165. CIRCUMCISION FOR TRAUMA
166. MEATOPLASTY
167. INTERSPHINCTERIC ABSCESS INCISION AND DRAINAGE
168. PSOAS ABSCESS INCISION AND DRAINAGE
169. THYROID ABSCESS INCISION AND DRAINAGE
170. TIPS PROCEDURE FOR PORTAL HYPERTENSION
171. ESOPHAGEAL GROWTH STENT
172. PAIR PROCEDURE OF HYDATID CYST LIVER
173. TRU CUT LIVER BIOPSY
174. PHOTODYNAMIC THERAPY OR ESOPHAGEAL TUMOUR AND LUNG TUMOUR
175. EXCISION OF CERVICAL RIB
176. LAPAROSCOPIC REDUCTION OF INTUSSUSCEPTION
177. MICRODOCHECTOMY BREAST
178. SURGERY FOR FRACTURE PENIS
179. SENTINEL NODE BIOPSY
180. PARASTOMAL HERNIA
181. REVISION COLOSTOMY
182. PROLAPSED COLOSTOMY- CORRECTION
183. TESTICULAR BIOPSY
184. LAPAROSCOPIC CARDIOMYOTOMY (HELLERS)
185. SENTINEL NODE BIOPSY MALIGNANT MELANOMA
186. LAPAROSCOPIC PYLOROMYOTOMY (RAMSTEDT)

7. Gynecology Related:

187. OPERATIONS ON BARTHOLIN'S GLANDS (CYST)
188. INCISION OF THE OVARY
189. INSUFFLATIONS OF THE FALLOPIAN TUBES
190. OTHER OPERATIONS ON THE FALLOPIAN TUBE
191. DILATATION OF THE CERVICAL CANAL
192. CONISATION OF THE UTERINE CERVIX
193. THERAPEUTIC CURETTAGE WITH COLPOSCOPY / BIOPSY / DIATHERMY / CRYOSURGERY
194. LASER THERAPY OF CERVIX FOR VARIOUS LESIONS OF UTERUS
195. OTHER OPERATIONS ON THE UTERINE CERVIX

196. INCISION OF THE UTERUS (HYSTERECTOMY)
197. LOCAL EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE VAGINA AND THE POUCH OF DOUGLAS
198. INCISION OF VAGINA
199. INCISION OF VULVA
200. CULDOTOMY
201. SALPINGO-OOPHORECTOMY VIA LAPAROTOMY
202. ENDOSCOPIC POLYPECTOMY
203. HYSTEROSCOPIC REMOVAL OF MYOMA
204. D&C
205. HYSTEROSCOPIC RESECTION OF SEPTUM
206. THERMAL CAUTERISATION OF CERVIX
207. MIRENA INSERTION
208. HYSTEROSCOPIC ADHESIOLYSIS
209. LEEP
210. CRYOCAUTERISATION OF CERVIX
211. POLYPECTOMY ENDOMETRIUM
212. HYSTEROSCOPIC RESECTION OF FIBROID
213. LLETZ
214. CONIZATION
215. POLYPECTOMY CERVIX
216. HYSTEROSCOPIC RESECTION OF ENDOMETRIAL POLYP
217. VULVAL WART EXCISION
218. LAPAROSCOPIC PARAOVARIAN CYST EXCISION
219. UTERINE ARTERY EMBOLIZATION
220. LAPAROSCOPIC CYSTECTOMY
221. HYMENECTOMY (IMPERFORATE HYMEN)
222. ENDOMETRIAL ABLATION
223. VAGINAL WALL CYST EXCISION
224. VULVAL CYST EXCISION
225. LAPAROSCOPIC PARATUBAL CYST EXCISION
226. REPAIR OF VAGINA (VAGINAL ATRESIA)
227. HYSTEROSCOPY, REMOVAL OF MYOMA
228. TURBT
229. URETEROCOELE REPAIR - CONGENITAL INTERNAL
230. VAGINAL MESH FOR POP
231. LAPAROSCOPIC MYOMECTOMY
232. SURGERY FOR SUI
233. REPAIR RECTO- VAGINA FISTULA
234. PELVIC FLOOR REPAIR (EXCLUDING FISTULA REPAIR)
235. URS + LL
236. LAPAROSCOPIC OOPHORECTOMY
237. NORMAL VAGINAL DELIVERY AND VARIANTS

8. Neurology Related:

238. FACIAL NERVE PHYSIOTHERAPY
239. NERVE BIOPSY
240. MUSCLE BIOPSY
241. EPIDURAL STEROID INJECTION
242. GLYCEROL RHIZOTOMY
243. SPINAL CORD STIMULATION
244. MOTOR CORTEX STIMULATION
245. STEREOTACTIC RADIOSURGERY
246. PERCUTANEOUS CORDOTOMY
247. INTRATHECAL BACLOFEN THERAPY
248. ENTRAPMENT NEUROPATHY RELEASE
249. DIAGNOSTIC CEREBRAL ANGIOGRAPHY

250. VP SHUNT
 251. VENTRICULOATRIAL SHUNT
- 9. Oncology Related:**
252. RADIO THERAPY FOR CANCER
 253. CANCER CHEMOTHERAPY
 254. IV PUSH CHEMOTHERAPY
 255. HBI-HEMIBODY RADIO THERAPY
 256. INFUSIONAL TARGETED THERAPY
 257. SRT-STEREOTACTIC ARC THERAPY
 258. SC ADMINISTRATION OF GROWTH FACTORS
 259. CONTINUOUS INFUSIONAL CHEMOTHERAPY
 260. INFUSIONAL CHEMOTHERAPY
 261. CCRT-CONCURRENT CHEMO + RT
 262. 2D RADIO THERAPY
 263. 3D CONFORMAL RADIO THERAPY
 264. IGRT- IMAGE GUIDED RADIO THERAPY
 265. IMRT- STEP & SHOOT
 266. INFUSIONAL BISPHOSPHONATES
 267. IMRT-DMLC
 268. ROTATIONAL ARC THERAPY
 269. TELE GAMMA THERAPY
 270. FSRT-FRACTIONATED SRT
 271. VMAT-VOLUMETRIC MODULATED ARC THERAPY
 272. SBRT-STEREOTACTIC BODY RADIO THERAPY
 273. HELICAL TOMOTHERAPY
 274. SRS-STEREOTACTIC RADIOSURGERY
 275. X-KNIFE SRS
 276. GAMMA KNIFE SRS
 277. TBI- TOTAL BODY RADIO THERAPY
 278. INTRALUMINAL BRACHYTHERAPY
 279. ELECTRON THERAPY
 280. TSET-TOTAL ELECTRON SKIN THERAPY
 281. EXTRACORPOREAL IRRADIATION OF BLOOD PRODUCTS
 282. TELECOBALT THERAPY
 283. TELECESIUM THERAPY
 284. EXTERNAL MOULD BRACHYTHERAPY
 285. INTERSTITIAL BRACHYTHERAPY
 286. INTRACAVITY BRACHYTHERAPY
 287. 3D BRACHYTHERAPY
 288. IMPLANT BRACHYTHERAPY
 289. INTRAVESICAL BRACHYTHERAPY
 290. ADJUVANT RADIO THERAPY
 291. AFTERLOADING CATHETER BRACHYTHERAPY
 292. CONDITIONING RADIO THERAPY FOR BMT
 293. EXTRACORPOREAL IRRADIATION TO THE HOMOLOGOUS BONE GRAFTS
 294. RADICAL CHEMOTHERAPY
 295. NEOADJUVANT RADIO THERAPY
 296. LDR BRACHYTHERAPY
 297. PALLIATIVE RADIO THERAPY
 298. RADICAL RADIO THERAPY
 299. PALLIATIVE CHEMOTHERAPY
 300. TEMPLATE BRACHYTHERAPY
 301. NEOADJUVANT CHEMOTHERAPY
 302. ADJUVANT CHEMOTHERAPY

303. INDUCTION CHEMOTHERAPY
304. CONSOLIDATION CHEMOTHERAPY
305. MAINTENANCE CHEMOTHERAPY
306. HDR BRACHYTHERAPY
- 10. Operations on the salivary glands & salivary ducts:**
307. INCISION AND LANCING OF A SALIVARY GLAND AND A SALIVARY DUCT
308. EXCISION OF DISEASED TISSUE OF A SALIVARY GLAND AND A SALIVARY DUCT
309. RESECTION OF A SALIVARY GLAND
310. RECONSTRUCTION OF A SALIVARY GLAND AND A SALIVARY DUCT
311. OTHER OPERATIONS ON THE SALIVARY GLANDS AND SALIVARY DUCTS
- 11. Operations on the skin & subcutaneous tissues:**
312. OTHER INCISIONS OF THE SKIN AND SUBCUTANEOUS TISSUES
313. SURGICAL WOUND TOILET (WOUND DEBRIDEMENT) AND REMOVAL OF DISEASED TISSUE OF THE SKIN AND SUBCUTANEOUS TISSUES
314. LOCAL EXCISION OF DISEASED TISSUE OF THE SKIN AND SUBCUTANEOUS TISSUES
315. OTHER EXCISIONS OF THE SKIN AND SUBCUTANEOUS TISSUES
316. SIMPLE RESTORATION OF SURFACE CONTINUITY OF THE SKIN AND SUBCUTANEOUS TISSUES
317. FREE SKIN TRANSPLANTATION, DONOR SITE
318. FREE SKIN TRANSPLANTATION, RECIPIENT SITE
319. REVISION OF SKIN PLASTY
320. OTHER RESTORATION AND RECONSTRUCTION OF THE SKIN AND SUBCUTANEOUS TISSUES.
321. CHEMOSURGERY TO THE SKIN.
322. DESTRUCTION OF DISEASED TISSUE IN THE SKIN AND SUBCUTANEOUS TISSUES
323. RECONSTRUCTION OF DEFORMITY/DEFECT IN NAIL BED
324. EXCISION OF BURSITIS
325. TENNIS ELBOW RELEASE
- 12. Operations on the Tongue:**
326. INCISION, EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE TONGUE
327. PARTIAL GLOSSECTOMY
328. GLOSSECTOMY
329. RECONSTRUCTION OF THE TONGUE
330. OTHER OPERATIONS ON THE TONGUE
- 13. Ophthalmology Related:**
331. SURGERY FOR CATARACT
332. INCISION OF TEAR GLANDS
333. OTHER OPERATIONS ON THE TEAR DUCTS
334. INCISION OF DISEASED EYELIDS
335. EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE EYELID
336. OPERATIONS ON THE CANTHUS AND EPICANTHUS
337. CORRECTIVE SURGERY FOR ENTROPION AND ECTROPION
338. CORRECTIVE SURGERY FOR BLEPHAROPTOSIS
339. REMOVAL OF A FOREIGN BODY FROM THE CONJUNCTIVA
340. REMOVAL OF A FOREIGN BODY FROM THE CORNEA
341. INCISION OF THE CORNEA
342. OPERATIONS FOR PTERYGIUM
343. OTHER OPERATIONS ON THE CORNEA
344. REMOVAL OF A FOREIGN BODY FROM THE LENS OF THE EYE
345. REMOVAL OF A FOREIGN BODY FROM THE POSTERIOR CHAMBER OF THE EYE
346. REMOVAL OF A FOREIGN BODY FROM THE ORBIT AND EYEBALL
347. CORRECTION OF EYELID PTOSIS BY LEVATOR PALPEBRAE SUPERIORIS RESECTION (BILATERAL)
348. CORRECTION OF EYELID PTOSIS BY FASCIA LATA GRAFT (BILATERAL)
349. DIATHERMY/CRYOTHERAPY TO TREAT RETINAL TEAR
350. ANTERIOR CHAMBER PARACENTESIS / CYCLODIATHERMY / CYCLOCRYOTHERAPY / GONIOTOMY/TRABECULOTOMY AND FILTERING AND ALLIED OPERATIONS TO TREAT GLAUCOMA
351. ENUCLEATION OF EYE WITHOUT IMPLANT
352. DACRYOCYSTORHINOSTOMY FOR VARIOUS LESIONS OF LACRIMAL GLAND
353. LASER PHOTOCOAGULATION TO TREAT RATINAL TEAR
354. BIOPSY OF TEAR GLAND
355. TREATMENT OF RETINAL LESION
- 14. Orthopedics Related:**
356. SURGERY FOR MENISCUS TEAR
357. INCISION ON BONE, SEPTIC AND ASEPTIC
358. CLOSED REDUCTION ON FRACTURE, LUXATION OR EPIPHYSEOLYSIS WITH OSTEOSYNTHESIS
359. SUTURE AND OTHER OPERATIONS ON TENDONS AND TENDON SHEATH
360. REDUCTION OF DISLOCATION UNDER GA
361. ARTHROSCOPIC KNEE ASPIRATION
362. SURGERY FOR LIGAMENT TEAR
363. SURGERY FOR HEMOARTHROSIS/PYOARTHROSIS
364. REMOVAL OF FRACTURE PINS/NAILS
365. REMOVAL OF METAL WIRE
366. CLOSED REDUCTION ON FRACTURE, LUXATION
367. REDUCTION OF DISLOCATION UNDER GA
368. EPIPHYSEOLYSIS WITH OSTEOSYNTHESIS
369. EXCISION OF VARIOUS LESIONS IN COCCYX
370. ARTHROSCOPIC REPAIR OF ACL TEAR KNEE
371. CLOSED REDUCTION OF MINOR FRACTURES
372. ARTHROSCOPIC REPAIR OF PCL TEAR KNEE
373. TENDON SHORTENING
374. ARTHROSCOPIC MENISCECTOMY - KNEE
375. TREATMENT OF CLAVICLE DISLOCATION
376. HAEMARTHROSIS KNEE- LAVAGE
377. ABSCESS KNEE JOINT DRAINAGE

378. CARPAL TUNNEL RELEASE
379. CLOSED REDUCTION OF MINOR DISLOCATION
380. REPAIR OF KNEE CAP TENDON
381. ORIF WITH K WIRE FIXATION- SMALL BONES
382. RELEASE OF MIDFOOT JOINT
383. ORIF WITH PLATING- SMALL LONG BONES
384. IMPLANT REMOVAL MINOR
385. K WIRE REMOVAL
386. POP APPLICATION
387. CLOSED REDUCTION AND EXTERNAL FIXATION
388. ARTHROTOMY HIP JOINT
389. SYME'S AMPUTATION
390. ARTHROPLASTY
391. PARTIAL REMOVAL OF RIB
392. TREATMENT OF SESAMOID BONE FRACTURE
393. SHOULDER ARTHROSCOPY / SURGERY
394. ELBOW ARTHROSCOPY
395. AMPUTATION OF METACARPAL BONE
396. RELEASE OF THUMB CONTRACTURE
397. INCISION OF FOOT FASCIA
398. CALCANEUM SPUR HYDROCORT INJECTION
399. GANGLION WRIST HYALASE INJECTION
400. PARTIAL REMOVAL OF METATARSAL
401. REPAIR / GRAFT OF FOOT TENDON
402. REVISION/REMOVAL OF KNEE CAP
403. AMPUTATION FOLLOW-UP SURGERY
404. EXPLORATION OF ANKLE JOINT
405. REMOVE/GRAFT LEG BONE LESION
406. REPAIR/GRAFT ACHILLES TENDON
407. REMOVE OF TISSUE EXPANDER
408. BIOPSY ELBOW JOINT LINING
409. REMOVAL OF WRIST PROSTHESIS
410. BIOPSY FINGER JOINT LINING
411. TENDON LENGTHENING
412. TREATMENT OF SHOULDER DISLOCATION
413. LENGTHENING OF HAND TENDON
414. REMOVAL OF ELBOW BURSA
415. FIXATION OF KNEE JOINT
416. TREATMENT OF FOOT DISLOCATION
417. SURGERY OF BUNION
418. INTRAARTICULAR STEROID INJECTION
419. TENDON TRANSFER PROCEDURE
420. REMOVAL OF KNEE CAP BURSA
421. TREATMENT OF FRACTURE OF ULNA
422. TREATMENT OF SCAPULA FRACTURE
423. REMOVAL OF TUMOR OF ARM/ ELBOW UNDER RA/GA
424. REPAIR OF RUPTURED TENDON
425. DECOMPRESS FOREARM SPACE
426. REVISION OF NECK MUSCLE (TORTICOLLIS RELEASE)
427. LENGTHENING OF THIGH TENDONS
428. TREATMENT FRACTURE OF RADIUS & ULNA
429. REPAIR OF KNEE JOINT
- 15. Other operations on the mouth & face:**
430. EXTERNAL INCISION AND DRAINAGE IN THE REGION OF THE MOUTH, JAW AND FACE
431. INCISION OF THE HARD AND SOFT PALATE
432. EXCISION AND DESTRUCTION OF DISEASED HARD AND SOFT PALATE
433. INCISION, EXCISION AND DESTRUCTION IN THE MOUTH
434. OTHER OPERATIONS IN THE MOUTH
- 16. Pediatric surgery Related:**
435. EXCISION OF FISTULA-IN-ANO
436. EXCISION JUVENILE POLYPS RECTUM
437. VAGINOPLASTY
438. DILATATION OF ACCIDENTAL CAUSTIC STRICTURE OESOPHAGEAL
439. PRESACRAL TERATOMAS EXCISION
440. REMOVAL OF VESICAL STONE
441. EXCISION SIGMOID POLYP
442. STERNOMASTOID TENOTOMY
443. INFANTILE HYPERTROPHIC PYLORIC STENOSIS PYLOROMYOTOMY
444. EXCISION OF SOFT TISSUE RHABDOMYOSARCOMA
445. MEDIASTINAL LYMPH NODE BIOPSY
446. HIGH ORCHIDECTOMY FOR TESTIS TUMOURS
447. EXCISION OF CERVICAL TERATOMA
448. RECTAL-MYOMECTOMY
449. RECTAL PROLAPSE (DELORME'S PROCEDURE)
450. DETORSION OF TORSION TESTIS
451. EUA + BIOPSY MULTIPLE FISTULA IN ANO
452. CYSTIC HYGROMA - INJECTION TREATMENT
- 17. Plastic Surgery Related:**
453. CONSTRUCTION SKIN PEDICLE FLAP
454. GLUTEAL PRESSURE ULCER-EXCISION
455. MUSCLE-SKIN GRAFT, LEG
456. REMOVAL OF BONE FOR GRAFT
457. MUSCLE-SKIN GRAFT DUCT FISTULA
458. REMOVAL CARTILAGE GRAFT
459. MYOCUTANEOUS FLAP
460. FIBRO MYOCUTANEOUS FLAP
461. BREAST RECONSTRUCTION SURGERY AFTER MASTECTOMY
462. SLING OPERATION FOR FACIAL PALSY
463. SPLIT SKIN GRAFTING UNDER RA
464. WOLFE SKIN GRAFT
465. PLASTIC SURGERY TO THE FLOOR OF THE MOUTH UNDER GA
- 18. Thoracic surgery Related:**
466. THORACOSCOPY AND LUNG BIOPSY
467. EXCISION OF CERVICAL SYMPATHETIC CHAIN THORACOSCOPIC
468. LASER ABLATION OF BARRETT'S OESOPHAGUS
469. PLEURODESIS
470. THORACOSCOPY AND PLEURAL BIOPSY
471. EBUS + BIOPSY
472. THORACOSCOPY LIGATION THORACIC DUCT
473. THORACOSCOPY ASSISTED EMPYAEMA DRAINAGE
- 19. Urology Related:**
474. HAEMODIALYSIS
475. LITHOTRIPSY/NEPHROLITHOTOMY FOR RENAL CALCULUS
476. EXCISION OF RENAL CYST
477. DRAINAGE OF PYONEPHROSIS/PERINEPHRIC ABSCESS
478. INCISION OF THE PROSTATE
479. TRANSURETHRAL EXCISION AND DESTRUCTION OF PROSTATE TISSUE

480. TRANSURETHRAL AND PERCUTANEOUS DESTRUCTION OF PROSTATE TISSUE

481. OPEN SURGICAL EXCISION AND DESTRUCTION OF PROSTATE TISSUE

482. RADICAL PROSTATOVESICULECTOMY

483. OTHER EXCISION AND DESTRUCTION OF PROSTATE TISSUE

484. OPERATIONS ON THE SEMINAL VESICLES

485. INCISION AND EXCISION OF PERIPROSTATIC TISSUE

486. OTHER OPERATIONS ON THE PROSTATE

487. INCISION OF THE SCROTUM AND TUNICA VAGINALIS TESTIS

488. OPERATION ON A TESTICULAR HYDROCELE

489. EXCISION AND DESTRUCTION OF DISEASED SCROTAL TISSUE

490. OTHER OPERATIONS ON THE SCROTUM AND TUNICA VAGINALIS TESTIS

491. INCISION OF THE TESTES

492. EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE TESTES

493. UNILATERAL ORCHIDECTOMY

494. BILATERAL ORCHIDECTOMY

495. SURGICAL REPOSITIONING OF AN ABDOMINAL TESTIS

496. RECONSTRUCTION OF THE TESTIS

497. IMPLANTATION, EXCHANGE AND REMOVAL OF A TESTICULAR PROSTHESIS

498. OTHER OPERATIONS ON THE TESTIS

499. EXCISION IN THE AREA OF THE EPIDIDYMIS

500. OPERATIONS ON THE FORESKIN

501. LOCAL EXCISION AND DESTRUCTION OF DISEASED TISSUE OF THE PENIS

502. AMPUTATION OF THE PENIS

503. OTHER OPERATIONS ON THE PENIS

504. CYSTOSCOPICAL REMOVAL OF STONES

505. CATHETERISATION OF BLADDER

506. LITHOTRIPSY

507. BIOPSY OF TEMPORAL ARTERY FOR VARIOUS LESIONS

508. EXTERNAL ARTERIO-VENOUS SHUNT

509. AV FISTULA - WRIST

510. URSL WITH STENTING

511. URSL WITH LITHOTRIPSY

512. CYSTOSCOPIC LITHOLAPAXY

513. ESWL

514. BLADDER NECK INCISION

515. CYSTOSCOPY & BIOPSY

516. CYSTOSCOPY AND REMOVAL OF POLYP

517. SUPRAPUBIC CYSTOSTOMY

518. PERCUTANEOUS NEPHROSTOMY

519. CYSTOSCOPY AND "SLING" PROCEDURE.

520. TUNA-PROSTATE

521. EXCISION OF URETHRAL DIVERTICULUM

522. REMOVAL OF URETHRAL STONE

523. EXCISION OF URETHRAL PROLAPSE

524. MEGA-URETER RECONSTRUCTION

525. KIDNEY RENOSCOPY AND BIOPSY

526. URETER ENDOSCOPY AND TREATMENT

527. VESICO URETERIC REFLUX CORRECTION

528. SURGERY FOR PELVI URETERIC JUNCTION OBSTRUCTION

529. ANDERSON HYNES OPERATION

530. KIDNEY ENDOSCOPY AND BIOPSY

531. PARAPHIMOSIS SURGERY

532. INJURY PREPUCE- CIRCUMCISION

533. FRENULAR TEAR REPAIR

534. MEATOTOMY FOR MEATAL STENOSIS

535. SURGERY FOR FOURNIER'S GANGRENE SCROTUM

536. SURGERY FILARIAL SCROTUM

537. SURGERY FOR WATERING CAN PERINEUM

538. REPAIR OF PENILE TORSION

539. DRAINAGE OF PROSTATE ABSCESS

540. ORCHIECTOMY

541. CYSTOSCOPY AND REMOVAL OF FB

Note: This list is not exhaustive, only illustrative. Due to Technological advancement any treatment considered by the Indian Medical Council as Day Care surgery / procedure, such treatments would also be considered for Day care surgeries / procedures.

Hence it is requested to verify Company's website for detailed list of updated Day Care Surgeries / procedures for easy understanding purposes.

Annexure II - List of Civilian Nations

| Sr. No. | Africa | | |
|---------|---|-----|----------------------------|
| 1. | Algeria | | |
| 2. | Republic of Angola | | |
| 3. | Republic of Benin | 52. | Asia |
| 4. | Botswana | 53. | Afghanistan |
| 5. | Burkina Faso | 54. | North Korea |
| 6. | Burundi | 55. | Pakistan |
| 7. | Cameroon | 56. | Timor-Leste |
| 8. | Central African Republic | 57. | Kyrgyzstan |
| 9. | Chad | 58. | Kazakhstan |
| 10. | Congo | 59. | Mongolia |
| 11. | Republic of Cote d'Ivoire | 60. | Tajikistan |
| 12. | Republic of Sao Tome and Principe | 61. | Uzbekistan |
| 13. | Djibouti | | Turkmenistan |
| 14. | Republic of Equatorial Guinea | | Caribbean |
| 15. | Eritrea | 62. | Haiti |
| 16. | Ethiopia | 63. | Montserrat Central America |
| 17. | Gabon | 64. | El Salvador |
| 18. | Gambia | 65. | Honduras |
| 19. | Ghana | 66. | Nicaragua |
| 20. | Great Socialist People's Libyan Arab Jamahiriya | | Europe |
| 21. | Guinea/Guinea-Bissou | | Armenia |
| 22. | Republic of Guinea-Bissau | 67. | Georgia |
| 23. | Mauritania | 68. | Moldova |
| 24. | Kenya | 69. | Ukraine |
| 25. | Lesotho | 70. | |
| 26. | Morocco | | Middle East |
| 27. | Swaziland | | Egypt |
| 28. | Liberia | 71. | Azerbaijan |
| 29. | Great Socialist People's Libyan Arab Jamahiriya | 72. | Iran |
| 30. | Republic of Madagascar | 73. | Iraq |
| 31. | Republic of Malawi | 74. | Iran |
| 32. | Republic of Mali | 75. | Israel |
| 33. | Islamic Republic of Mauritania | 76. | Lebanon |
| 34. | Mozambique | 77. | Turkey |
| 35. | Namibia | 78. | Yemen |
| 36. | Nigeria | 79. | Syria |
| 37. | Republic of Cape Verde | 80. | |
| 38. | Madagascar | | Oceanic |
| 39. | Rwanda | | Papua New Guinea |
| 40. | Senegal | 81. | Solomon Islands |
| 41. | Republic of Sierra Leone | 82. | |
| 42. | Sudan | | South America |
| 43. | Uganda | | Venezuela |
| 44. | Zambia | 83. | Colombia |
| 45. | Somalia | 84. | Guyana |
| 46. | Swaziland | 85. | Ecuador |
| 47. | Tanzania | 86. | Paraguay |
| 48. | Togolese Republic | 87. | Peru |
| 49. | Tunisian Republic | 88. | Bolivia |
| 50. | Republic of Uganda | 89. | Suriname |
| 51. | Western Sahara | 90. | Venezuela |
| | | 91. | |

NOTE: For an updated list of Civilian Nations, please visit the Company's Website.

Annexure III - List of Hospitals where Claim will not be admitted

| Hospital Name | Address |
|---|--|
| Nulife Hospital And Maternity Centre | 1616 Outram Lines,Kingsway Camp,Guru Teg Bahadur Nagar , New Delhi , Delhi |
| Taneja Hospital | F-15,Vikas Marg, Preet Vihar , New Delhi , Delhi |
| Shri Komal Hospital & Dr.Saxena's Nursing Home | Opp. Radhika Cinema,Circular Road , Rewari , Haryana |
| Sona Devi Memorial Hospital & Trauma Centre | Sohna Road, Badshahpur , Gurgaon , Haryana |
| Amar Hospital | Sector-70,S.A.S.Nagar, Mohali, Sector 70 , Mohali , Punjab |
| Brij Medical Centre | K K 54, Kavi Nagar , Ghaziabad , Uttar Pradesh |
| Famliy Medicare | A-55,Sector 61, Rajat Vihar Sector 62 , Noida , Uttar Pradesh |
| Jeevan Jyoti Hospital | 162,Lowther Road, Bai Ka Bagh , Allahabad , Uttar Pradesh |
| City Hospital & Trauma Centre | C-1,Cinder Dump Complex,Opposite Krishna Cinema Hall,Kanpur Road, Alambagh , Lucknow , Uttar Pradesh |
| Dayal Maternity & Nursing Home | No.953/23,D.C.F.Chowk, DLF Colony , Rohtak , Haryana |
| Metas Adventist Hospital | No.24, Ring-Road,Athwalines, Surat , Surat , Gujarat |
| Surgicare Medical Centre | Sai Dwar Oberoi Complex,S.A.B.T.V.Lane Road,Lokhandwala, Near Laxmi Industrial Estate, Andheri, Mumbai, Maharashtra |
| Paramount General Hospital & I.C.C.U. | Laxmi Commercial Premises,Andheri Kurla Road , Andheri , Mumbai , Maharashtra |
| Gokul Hospital | Thakur Complex , Kandivali East , Mumbai , Maharashtra |
| Shree Sai Hospital | Gokul Nagri I,Thankur Complex,Western Express Highway, Kandivali East , Mumbai , Maharashtra |
| Shreedevi Hospital | Akash Arcade,Bhanu Nagar,Near Bhanu Sagar Theatre,Dr.Deepak Shetty Road, Kalyan D.C. , Thane , Maharashtra |
| Saykhedkar Hospital And Research Centre Pvt. Ltd. | Trimurthy Chowk,Kamatwada Road,Cidco Colony , Nashik , Maharashtra |
| Arpan Hospital And Research Centre | No.151/2,Imli Bazar,Near Rajwada, Imli Bazar , Indore , Madhya Pradesh |
| Ramkrishna Care Hospital | Aurobindo Enclave,Pachpedhi Naka,Dhamtri Road,National Highway No 43, Raipur , Chhattisgarh |
| Gupta Multispeciality Hospital | B-20, Vivek Vihar , New Delhi , Delhi |
| R.K.Hospital | 3C/59,BP,Near Metro Cinema, New Industrial Township 1 , Faridabad , Haryana |
| Prakash Hospital | D -12,12A,12B,Noida, Sector 33 , Noida , Uttar Pradesh |
| Aryan Hospital Pvt. Ltd. | Old Railway Road,Near New Colony, New Colony , Gurgaon , Haryana |
| Medilink Hospital Research Centre Pvt. Ltd. | Near Shyamal Char Rasta,132, Ring Road, Satellite , Ahmedabad , Gujarat |
| Mohit Hospital | Khoya B-Wing,Near National Park,Borivali(E), Kandivali West , Mumbai , Maharashtra |
| Scope Hospital | 628,Niti Khand-I, Indirapuram , Ghaziabad , Uttar Pradesh |
| Agarwal Medical Centre | E-234,- , Greater Kailash 1 , New Delhi , Delhi |
| Oxygen Hospital | Bhiwani Stand, Durga Bhawan , Rohtak , Haryana |
| Prayag Hospital & Research Centre Pvt. Ltd. | J-206 A/1, Sector 41 , Noida , Uttar Pradesh |
| Karnavati Superspeciality Hospital | Opposite Sajpur Tower, Naroda Road , Ahmedabad , Gujarat |
| Palwal Hospital | Old G.T. Road,Near New Sohna Mod, Palwal , Haryana |
| B.K.S. Hospital | No.18,1st Cross,Gandhi Nagar, Adyar , Bellary , Karnataka |
| East West Medical Centre | No.711,Sector 14, Sector 14 , Gurgaon , Haryana |
| Jagtap Hospital | Anand Nagar,Sinhgood Road , Anandnagar , Pune , Maharashtra |
| Dr. Malwankar's Romeen Nursing Home | Ganesh Marg,Tagore Nagar , Vikhroli East , Mumbai , Maharashtra |
| Noble Medical Centre | SVP Road, Borivali West , Mumbai , Maharashtra |
| Rama Hospital | Sonepat Road,Bahalgarh, Sonipat , Haryana |
| S.B.Nursing Home & ICU | Lake Bloom 16,17,18 Opposite Solaris Estate, L.T.Gate No.6,Tunga Gaon, Saki-Vihar Road, Powai , Mumbai , Maharashtra |
| Sparsh Multy Speciality Hospital & Trauma Care Center | G.I.D.C Road, Nr Udhana Citizan Co-Op.Bank , Surat , Gujarat |

| Hospital Name | Address |
|--|---|
| Saraswati Hospital | Divya Smruti Building, 1st Floor, Opp Toyota Showroom, Malad Link Road, Malad West , Mumbai , Maharashtra |
| Shakuntla Hospital | 3-B Tashkant Marg,Near St. Joseph Collage, Allahabad , Uttar Pradesh |
| Mahaveer Hospital & Trauma Centre | 76-E,Station Road, Panki , Kanpur , Uttar Pradesh |
| Eashwar Lakshmi Hospital | Plot No. 9,Near Sub Registrar Office, Gandhi Nagar , Hyderabad , Andhra Pradesh |
| Amrapali Hospital | Plot No. NH-34,P-2,Omega -1, Greater Noida , Noida , Uttar Pradesh |
| Hardik Hospital | 29c,Budh Bazar, Vikas Nagar , New Delhi , Delhi |
| Jabalpur Hospital & Research Centre Pvt Ltd | Russel Crossing,Naptier Town, Jabalpur , Madhya Pradesh |
| Panvel Hospital | Plot No. 260A,Uran Naka, Old Panvel , Navi Mumbai , Maharashtra |
| Santosh Hospital | L-629/631,Hapur Road, Shastri Nagar , Meerut , Uttar Pradesh |
| Sona Medical Centre | 5/58,Near Police Station, Vikas Nagar , Lucknow , Uttar Pradesh |
| City Super Speciality Hospital | Near Mohan Petrol Pump,Gohana Road, Rohtak , Haryana |
| Navjeevan Hospital & Maternity Centre | 753/21,Madanpuri Road, Near Pataudi Chowk , Gurgaon , Haryana |
| Abhishek Hospital | C-12,New Azad Nagar, Kanpur , Kanpur , Uttar Pradesh |
| Raj Nursing Home | 23-A, Park Road , Allahabad , Uttar Pradesh |
| Sparsh Medicare and Trauma Centre | Shakti Khand - III/54 ,Behind Cambridge School , Indirapuram, Ghaziabad , Uttar Pradesh |
| Saras Healthcare Pvt Ltd. | K-112, SEC-12 ,Pratap Vihar , Ghaziabad , Uttar Pradesh |
| Getwell Soon Multispeciality Institute Pvt Ltd | S-19, Shalimar Garden Extn. , Near Dayanand Park, Sahibabad , Ghaziabad , Uttar Pradesh |
| Shivalik Medical Centre Pvt Ltd | A-93, Sector 34 , Noida , Uttar Pradesh |
| Aakanksha Hospital | 126, Aaradhnanagar Soc,B/H. Bhulabhavan School, Aanand-Mahal Rd. , Adajan , Surat , Gujarat |
| Abhinav Hospital | Harsh Apartment,Nr Jamna Nagar Bus Stop, Goddod Road , Surat , Gujarat |
| Adhar Ortho Hospital | Dawer Chambers,Nr. Sub Jail, Ring Road , Surat , Gujarat |
| Aris Care Hospital | A 223-224, Mansarovar Soc,60 Feet, Godadara Road , Surat , Gujarat |
| Arzoo Hospital | Opp. L.B. Cinema, Bhatar Rd. , Surat , Gujarat |
| Auc Hospital | B-44, Gujarat Housing Board, Pandeshara , Surat , Gujarat |
| Dharamjivan General Hospital & Trauma Centre | Karmayogi - 1, Plot No. 20/21, Near Piyush Point, Pandesara , Surat , Gujarat |
| Dr. Santosh Basotia Hospital | Bhatar Road , Bhatar Road , Surat , Gujarat |
| God Father Hosp. | 344, Nandvan Soc., B/H. Matrushakti Soc. , Puna Gam , Surat , Gujarat |
| Govind-Prabha Arogya Sankool | Opp. Ratna-Sagar Vidhyalaya,Kaji Medan, Gopipura , Surat , Gujarat |
| Hari Milan Hospital | L H Road , Surat , Gujarat |
| Jaldhi Ano-Rectal Hospital | 103, Payal Apt., Nxt To Rander Zone Office, Tadwadi , Surat , Gujarat |
| Jeevan Path Gen. Hospital | 2Nd. Fl., Dwarkesh Nagri, Nr. Laxmi Farsan, Sayan , Surat , Gujarat |
| Kalrav Children Hospital | Yashkamal Complex, Nr. Jivan Jyot, Udhna , Surat , Gujarat |
| Kanchan General Surgical Hospital | Plot No. 380, Ishwarnagar Soc, Bhamroli-Bhatar, Pandesara , Surat , Gujarat |
| Krishnavati General Hospital | Bamroli Road , Surat , Gujarat |
| Niramayam Hosptial & Prasutigruah | Shraddha Raw House, Near Natures Park , Surat , Gujarat |
| Patna Hospital | 25, Ashapuri Soc - 2, Bamroli Road, Surat , Gujarat |
| Poshia Children Hospital | Harekrishan Shoping Complex 1St Floor, Varachha Road , Surat , Gujarat |
| R.D Janseva Hospital | 120 Feet Bamroli Road, Pandesara , Surat , Gujarat |
| Radha Hospital & Maternity Home | 239/240 Bhagunagar Society, Opp Hans Society, L H Road, Varachha Road, Surat , Gujarat |
| Santosh Hospital | L H Road , Varachha , Surat , Gujarat |

Notes:

- 1.For an updated list of Hospitals, please visit the Company's website.
- 2.Only in case of a medical emergency, claims would be payable if admitted in the above Hospitals.