

		i. Leave Compensation Benefit: This cover pays the Primary Insured Person per day compensation equal to 135% of: the daily basic salary before tax or the Daily Cash amount whichever is lower, if during the Policy Period, the Primary Insured Person undergoes Hospitalization for an Illness/Injury for a minimum period of 4 continuous and consecutive days.	3.9
		j. Time Deductible: Selected Time Deductible shall be applicable on each and every In-Patient Hospitalization claim Time Deductible Options: 24/48/72 hours	3.10
		k. Waiver of Waiting Period for Pre-Existing Disease: This Cover shall reduce the Waiting Period for Pre-Existing Diseases to zero months, 12 months or 24 months as the case may be	3.11
		l. Waiver of Waiting Period for Specific Disease/procedure: This Cover shall reduce the Waiting Period Condition for Specified disease/procedure listed in Section 4 (ii) of the Policy wording to zero months or 12 months as the case may be	3.12
		m. Waiver of 30 days Waiting Period: This cover shall waive off the Initial 30 Days Waiting Period Condition.	3.13
		n. Waiver of Waiting Period for Maternity Cover: This Cover shall waives off the Maternity Cover Waiting Period Condition.	3.14
6.	Exclusions (what the policy does not cover)	<p>Exclusions:</p> <ol style="list-style-type: none"> Investigation & Evaluation (Code:Excl04) Rest Cure, rehabilitation and respite care (Code:Excl05) Obesity/ Weight Control (Code:Excl06) Change-of-Gender treatments (Code:Excl07) Cosmetic or Plastic Surgery (Code: Excl08) Hazardous or Adventure sports (Code:Excl09) Breach of law (Code: Excl10) Excluded Providers (Code:Excl11) Substance Abuse and Alcohol (Code: Excl12) Wellness and Rejuvenation (Code:Excl13) Dietary Supplements & Substances (Code: Excl14) Refractive Error (Code: Excl15) Unproven Treatments-Code (Code: Excl16) Sterility and Infertility (Code: Excl17) Maternity Expenses (Code: Excl 18) ,this exclusion shall not be apply if Benefit-Maternity Cover has been opted under the Policy Dental Treatments Domiciliary Hospitalization and Home Treatment External Congenital Anomaly Treatment other than Medically Necessary Treatment Non-medical expenses Nuclear and radiological emissions, acts of terrorism Outpatient treatment Overseas treatment Charges other than Reasonable & Customary Charges Self-injury or suicide Treatment outside discipline War Wilful Act/Negligence: <p>Specific Exclusions applicable to Benefit-Personal Accident Cover</p> <ol style="list-style-type: none"> Service in the armed forces, or any police organization, of any country at war or at peace or service in any force of an international body or participation in any of the naval, military or air force operation during peace time. Any change of profession after inception of the Policy or any Renewal which results in the enhancement of the Company's risk, if not accepted and endorsed by the Company on the Policy Schedule. 	5



3. Taking or absorbing, accidentally or otherwise, any intoxicating liquor, drug, narcotic, medicine, sedative or poison, except as prescribed by a Medical Practitioner other than the Policyholder or an Insured Person.
4. Body or mental infirmity or any Illness except where such condition arises directly as a result of an Accident during the Policy Period.
5. Participation in aviation/marine activities (including crew) other than as a passenger in an aircraft/watercraft that is authorized by the relevant regulations to carry such passengers between established airports or ports.
6. Participation in winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), participation in any Professional Sports, or any other hazardous or potentially dangerous sport for which the Insured Person is untrained.
7. No claim shall be payable under Personal Accident Cover against any Pre-Existing Disability/Accidental Injury. Pre-Existing Disability/Accidental Injury means any disability or Injury present prior to the commencement of Policy Period or resulting from an Accident which occurred prior to the commencement of Policy Period; whether or not the same has been treated, and any Illness, complication or ailment arising out of or connected to such disability, Injury or Accident.

Specific Exclusions applicable Benefit - Leave Compensation Benefit

1. Apart from the basic pay, no other component of the salary including but not limited to the allowances, perks, variable pay, bonuses or any other component of the salary is payable
2. It is imperative that the Primary Insured Person stays employed as on the Date of Discharge. If the Primary Insured is not employed on the Date of Discharge, then no compensation is payable under this benefit.
3. No consequential loss due to the leave availed during Hospitalization apart from as provided above is payable under this cover.
4. Loss of Employment is not covered under this benefit

Note: For detailed description of Exclusions, kindly refer policy wordings.

7. **Waiting period**
Time period during which specified diseases/treatments are not covered
It is counted from the beginning of the policy coverage.

30-day waiting period-

- a) Expenses related to the treatment of any illness within 30 days (and treatment of Covid-19 within 15 days) from the first policy commencement date shall be excluded except claims arising due to an Accident, provided the same are covered..
- b) This exclusion shall not, however, apply if the Insured Person has continuous coverage for more than twelve months.
- c) The within referred waiting period is made applicable to the enhanced Sum Insured in the event of granting higher Sum Insured subsequently.

Waiting Period for Specified disease/procedure

24 months Specified disease/procedure waiting period Condition for Specified disease/procedure listed in Section 4 (ii) of the Policy wording

Pre-Existing Diseases -

- a) Expenses related to the treatment of a Pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 36 months (as specified in Policy Schedule) of continuous coverage after the date of inception of the first Policy with Insurer
- b) In case of enhancement of Sum Insured the exclusion shall apply afresh to the extent of Sum Insured increase.
- c) If the Insured Person is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations, then waiting period for the same would be reduced to the extent of prior coverage
- d) Coverage under the Policy after the expiry of 24/36 months (as specified in Policy Schedule) for any Pre-Existing Disease is subject to the same being declared at the time of application and accepted by Insurer



	<p>Maternity Cover - The claim under Benefit-8 Maternity Cover (if opted) shall become payable only after the expiry of 12 months from the date of inception of the first Policy with the Company</p> <p>Covid-19 related claims - 15 Days waiting period for Covid-19 related claims</p> <p>Note: For detailed information on waiting period, kindly refer policy schedule / policy copy mentioned below under coverage section and policy wordings</p>	
<p>8. Financial limits of coverage</p> <p>i. Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit)</p> <p>ii. Co-payment (It is a specified amount/ percentage of the admissible claim amount to be paid by policyholder/ insured).</p> <p>iii. Deductible (It is a specified amount:</p> <ul style="list-style-type: none"> • Up to which an insurance company will not pay any claim, and • Which will be deducted from total claim amount (if claim amount is more than the specified amount) <p>iv. Any other limit (as applicable)</p>	<p>Please refer the policy schedule / policy copy mentioned below under coverage section for all financial limits.</p> <p>a. Sub limits</p> <ul style="list-style-type: none"> • In-Patient Treatment: AYUSH Treatment, maximum upto 15 days of In-Patient Treatment <p>b. Deductible</p> <ul style="list-style-type: none"> • Accidental Medical Expenses: Deductible of Rs. 1000 applicable on each and every OPD claim • Leave Compensation Benefit: Franchise Deductible of 4 days • Time Deductible(if opted): 24/48/72 hours 	3
<p>9. Claims/Claims Procedure</p>	<ol style="list-style-type: none"> 1. TPA to intimate the claim to IndusInd General Insurance Company Ltd. 2. Upon receiving the required documents, processing team adjudicates each case basis policy T&C 3. After the claim is verified and found legitimate, the claim is processed 4. If the Claim is approved, payment shall be made to claimant as per the policy T&C within 7 working days 5. If the Claim is under Query, email communication shall be sent to insured/TPA for submission of required documents 6. If the Claim is Rejected, email communication shall be sent to insured/TPA mentioning the reason for rejection <p>Documents Required for Claim Submission</p> <ol style="list-style-type: none"> i. A duly filled and signed claim form ii. All original bills, receipts etc., iii. A medical certificate, case file and other documentation which should be signed by treating doctor iv. Pharmacy bills, Investigation reports v. Discharge card, summary report and all clearance documents vi. Cancelled cheque <p>**Any other document as required by the Company to process the claim</p>	6



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IRDAI Registration No. 103. IndusInd General Insurance Company Limited.

An ISO 9001:2015 Certified Company

For complete details on the benefits, coverage, terms & conditions and exclusions, do read the sales brochure, prospectus and policy wordings carefully before concluding sale. Registered & Corporate Office: 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off. Western Express Highway, Goregaon (E), Mumbai-400063. Corporate Identity Number: U66603MH2000PLC128300.

IndusInd - Group Hospi Cash Insurance - Plan B. UIN No.: RELHLGP21573V012021. IGI/MCOM/CO/IGHCI-PLAN B/CIS/Ver. 1.0/200924.



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		<p>Moratorium Period: After completion of Five continuous years under the policy no look back to be applied. This period of Five years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of Five continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits.</p> <p>After the expiry of Moratorium Period no health insurance policy shall be contestable except for proven fraud and permanent exclusions specified in the policy contract</p>	7(3)
13.	Your Obligations	<p>Disclosure of other material information during the policy period.) Insurer to specify the material information</p>	7(1)

Declaration by the Policyholder;

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

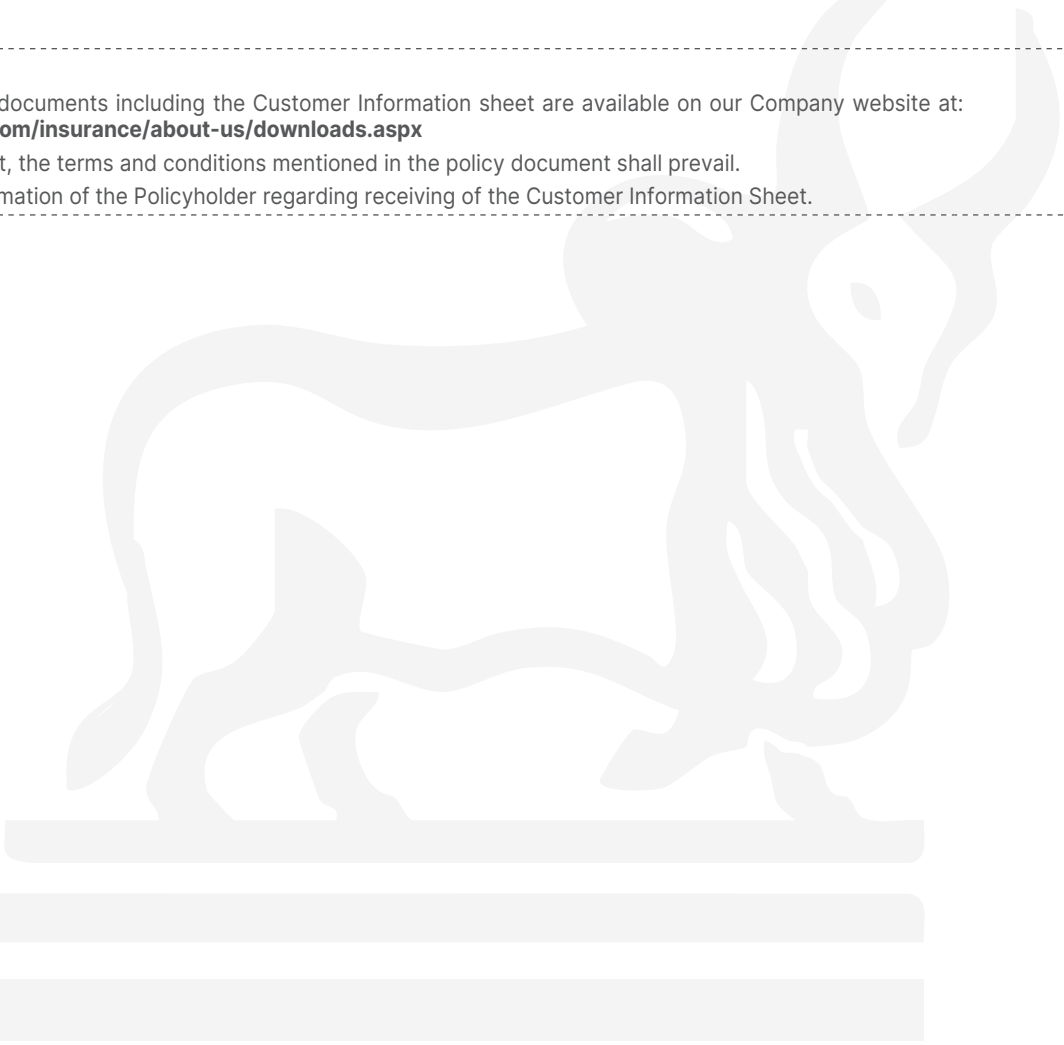
Place: _____

Date: _____

(Signature of the Policyholder)

Note:

- I. The product related documents including the Customer Information sheet are available on our Company website at: indusindinsurance.com/insurance/about-us/downloads.aspx
- II. In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.
- III. Insurer to take confirmation of the Policyholder regarding receiving of the Customer Information Sheet.



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