ROYAL SUNDARAM GENERAL INSURANCE CO. LTD
Registered office: No. 21, Patullos Road, Chennai- 600 002
Corporate Office: Vishranthi Melaram Towers, No. 2/319,
Rajiv Gandhi Salai (OMR), Karapakkam, Chennai- 600 097

LOAN ASSURE – SECTION 2 - SURGI CASH ASSURE

1. Preamble

This is a contract between the Insured Person and Royal Sundaram General Insurance Co. Limited subject to the receipt of full premium, Disclosure to Information Norm including the information provided by the Insured Person in the Proposal Form and the terms, conditions and exclusions of this Policy.

The Policy covers the Insured Person during the Policy/ Coverage Period for the listed surgical procedures, provided it occurs, manifests or diagnosed itself during the Policy/ Coverage Period as a first incidence. Cover under Surgi Cash Assure section shall terminate upon 100% payment of a claim under Criti Assure (Loan Assure – Section 1) or Personal Accident (Loan Assure – Section 2) sections.

The Insured Person shall on his expense, inform the Company immediately of any change in the address, nature of job, state of health, or of any other changes affecting him or any Insured Person

The Policy, Certificate of Insurance, Policy Schedule and any Endorsement shall be read together and any word or expression to which a specific meaning has been attached in any one of them shall bear such meaning wherever it appears.

The terms, conditions and exclusions that appear in the Policy or in any Endorsement are part of the contract and must be complied with. Failure to comply may result in the claim being denied.

2. Definitions

In this Policy the singular will be deemed to include the plural, the male gender includes the female where the context permits, and the following words or phrases shall have the meanings attributed to them wherever they appear in this Policy.

2.1 Standard Definitions

2.1.1 **Accident** means a sudden, unforeseen and involuntary event caused by external, visible and violent means.

2.1.2 **Condition Precedent** means a policy term or condition upon which the Insurer's liability under the policy is conditional upon.

2.1.3 **Congenital Anomaly** means a condition which is present since birth, and which is abnormal with reference to form, structure or position.

a. Internal Congenital Anomaly

Congenital anomaly which is not in the visible and accessible parts of the body.

b. **External Congenital Anomaly**

Congenital anomaly which is in the visible and accessible parts of the body.

2.1.4 **Hospital** means any institution established for in- patient care and day care treatment of illness and/ or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) and

the said act Or complies with all minimum criteria as under:

has qualified nursing staff under its employment round the clock;

has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in- patient beds in all other places;

has qualified medical practitioner(s) in charge round the clock;

has a fully equipped operation theatre of its own where surgical procedures are carried out;

maintains daily records of patients and makes these accessible to the insurance company's authorized

personnel;

2.1.5 **Hospitalization** means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

2.1.6 **Illness** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.

2.1.7 **Acute condition** - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery

2.1.8 **Chronic condition** - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:

it needs ongoing or long-term monitoring through consultations, examinations, check- ups, and /or tests

it needs ongoing or long-term control or relief of symptoms

it requires rehabilitation for the patient or for the patient to be specially trained to cope with it

it continues indefinitely

it recurs or is likely to recur

2.1.9 **Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

2.1.10 Maternity expenses means;

medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization);

expenses towards lawful medical termination of pregnancy during the policy period

2.1.11 **Medical Advice** means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.

2.1.12 **Medical Expenses** means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.

2.1.13 **Medical Practitioner** means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction.

2.1.14 **Medically Necessary Treatment** means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which

is required for the medical management of the illness or injury suffered by the insured;

must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;

must have been prescribed by a medical practitioner,

must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

2.1.15 **Migration** means a facility provided to policyholders (including all members under family cover and group policies), to transfer the credits gained for pre-existing diseases and specific waiting periods from one health insurance policy to another with the same insurer.

2.1.16 **Network Provider** means hospitals or health care providers enlisted by an insurer, TPA or jointly by an Insurer and TPA to provide medical services to an insured by a cashless facility.

2.1.17 **Notification of claim** means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.

2.1.18 **Pre-existing disease** means any condition, aliment, injury or disease

that is/are diagnosed by a physician not more than 36 months prior to the date of commencement of the policy issued by the insurer; or

for which medical advice or treatment was recommended by, or received from, a physician, not more than 36 months prior to the date of commencement of the policy.

Provided that the definition of the pre-existing disease shall not be applicable for Overseas Travel Policies.

2.1.19 **Surgery or Surgical Procedure** means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.

2.1.20 **Unproven/Experimental treatment** means treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.

2.2 Specific Definitions

2.2.1 **Adventure or Hazardous Sports/Activities** means any sports or activity which is adventurous in nature uses any apparatus or involves physical movement, rotation, swinging, floating in air or water. These activities include Para sailing, Para gliding, trekking with apparatus, Bungee jumping, para-jumping, rock climbing, mountaineering, motor racing, horse racing or deep- sea diving etc.

2.2.2 **Age** means the completed age (in years) of the Insured Person as on his/her latest birthday.

2.2.3 **Alternative Treatments** are forms of treatments other than allopathic treatment or "modern medicine" and includes Ayurveda, Unani, Sidha and Homeopathy in the Indian context.

2.2.4 **Bank** means a banking Company which transacts the business of banking in India.

2.2.5 **Company/We/Our/Insurer/Us** means Royal Sundaram General Insurance Co. Limited.

2.2.6 **Commencement Date** is the first inception date of Surgi Cash Assure section for that Insured Person with the Company without any break in period of cover.

2.2.7 **Critical Illness** means those disease/illness/burns, which have been expressly defined under Basic Cover section of Loan Assure – Section 1 – Criti Assure.

2.2.8 **Diagnosis** means the identification of a disease/illness/ medical condition made by a Physician in India, based upon such specific evidence, as required, in the definition of the particular Surgical Procedure concerned, or, in the absence of such specific evidence, based upon radiological, clinical, histological, laboratory evidence or any other medical tests following medical advancement, acceptable to the Company.

2.2.9 **Financial Institution** shall have the same meaning assigned to the term under section 45 I of the Reserve Bank of India Act, 1934 and shall include a Non Banking Financial Company as defined under section 45 I of the Reserve Bank of India Act, 1934

2.2.10 **First Policy** means the Policy Schedule/Certificate of Insurance issued to the Insured Person at the time of inception of the Coverage under this section 1 mentioned in the Policy Schedule/ Certificate of Insurance with the Company

2.2.11 **Hospitalized** means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

2.2.12 **Insured Event** means any event specifically mentioned as covered under this Policy.

2.2.13 **Material Fact** shall mean and include all important, essential and relevant information in the context of underwriting the risk to be covered by the Company

2.2.14 **Nominee** means the person(s) nominated by the Insured Person to receive the insurance benefits under this Policy payable on the death of the Insured Person

2.2.15 **Off-label drug or treatment** means use of pharmaceutical drug for an unapproved indication or in an unapproved age group, dosage or route of administration

2.2.16 **Policy** means our contract of insurance with the Policyholder providing cover as detailed in this Policy terms and conditions, the proposal form, Policy Schedule/Insurance Certificate, Information Summary Sheet, Endorsement/s, if any and Annexure, which form part of the contract and must be read together

2.2.17 **Policy Period** is the period between the inception date and the expiry date of the Policy as specified in the Policy

Schedule/ Certificate of Insurance or the date of cancellation of this Policy, whichever is earlier

2.2.18 **Policy Schedule** means the schedule attached to and forming part of this Policy mentioning the details of the Insured Persons, the Sum Insured, the period and the limits to which benefits under the Policy are subject to, including any Annexures and/or endorsements, made to or on it from time to time, and if more than one, then the latest in time.

2.2.19 **Policy Year** means the period of one year commencing on the date of commencement specified in the Policy Schedule/ Certificate of Insurance or any anniversary thereof.

2.2.20 Sum Insured which is the maximum liability of the Company under this policy

2.2.21 **Surgeon** means a specialist Medical Practitioner who is fully qualified as per applicable law to practice Surgery/carry out Surgical Procedures in India.

2.2.22 **Surgery or Surgical Procedure** means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.

2.2.23 **Waiting Period** means a time-bound exclusion period related to condition(s) specified in the Policy Schedule/ Certificate of Insurance or the Policy which shall be served before a claim related to such condition(s) becomes admissible.

3. Benefits covered under the policy

3.1. Basic Cover- Surgical Cash Cover

If the Insured Person is Hospitalized as per the written advice of the treating Medical Practitioner due to an Illness contracted or any Injury sustained during the Period of insurance, and has been advised by a Surgeon to undergo a Surgical Procedure specified in Annexure B attached to this Policy, then We will pay the percentage amount specified against such Surgical Procedure in Annexure B as a lumpsum amount.

This Benefit shall be payable subject to the following:

1. We will consider more than one claim in respect of the Insured Person under Surgi Cash Assure section, subject to the availability of the overall Sum Insured as specified in the Policy Certificate against this cover, and provided that the Illness/Accident causing the Injury is distinct and unrelated for each such claim. On exhaustion of the Sum Insured, the Surgi Cash Assure section will terminate in relation to the Insured Person.
2. In case of 100% SI being paid due to a Critical Illness (Loan Assure – Section 1) or Personal Accident (Loan Assure – Section 3) event, the cover under this benefit shall cease to exist.
3. In case of multiple Surgeries/Surgical Procedures performed in a single Admission to a Hospital, or arising out of the same Illness/Injury, We will consider only one Surgery/Surgical Procedure with the maximum amount as specified in Annexure B
4. In order for a claim to be admissible under this section, 24 hours of continuous and completed Hospitalization is required.

4. Exclusions

4.1. Specific Exclusions

4.1.1. Waiting Period:

All the Waiting Periods shall be applicable individually for each Insured Person and claims shall be assessed accordingly.

The Company shall not be liable to make any payment under this Policy for covered listed Surgical Procedures directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following Waiting Periods:

1. Pre-existing Diseases Waiting Period :

Any Surgery/Surgical Procedure arising on account of or in connection with any Pre-Existing Disease(s).

2. Initial Waiting Period:

Any Surgery/Surgical Procedure where the symptoms indicative of such Surgery/Surgical Procedure have first manifested or first occurred prior to the Risk Inception Date or arisen within first 90 days of commencement of the Period of Cover. However, no Waiting Period will be applicable in case of any Surgery/Surgical Procedure arising out of/due to an Accident during the Period of Cover.

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3. Specific Ailment Waiting Period:

   Expenses related to the treatment of the below listed Conditions, surgeries/treatments shall be excluded until the expiry of 24 months of continuous coverage after the date of inception of the first policy with us. This exclusion shall not be applicable for claims arising due to an accident.

- If any of the specified disease/procedure falls under the waiting period specified for pre-Existing diseases, then the longer of the two waiting periods shall apply.
- The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.

List of such specific diseases/procedures

1. Deviated Nasal Septum, CSOM-Chronic Suppurative Otitis Media
   i. Stapedectomy, Mastoidectomy, any treatment for conditions related to tonsils, adenoids,sinuses, turbinates/ concha
2. Fibroids (fibromyoma), Endometriosis, Uterine Prolapse, Polycysyic Ovarian Syndrome(PCOS)
3. Dilatation and curettage (D&C), Myomectomy, Hysterectomy
4. Arthritis, Gout and Rheumatism
5. Stones in gall bladder & Biliary System; Cholecystitis, Fissure/fistula in anus, hemorrhoids, pilonidalsinus, piles, Esophageal Varices & Gastric Varices, Gastritis, Duodenitis & Pancreatitis
6. Gastric & Duodenal ulcers, Gastro Esophageal Reflux Disorder (GERD)/Acid Peptic
   i. Disease, Ulcerative colitis, Crohn's disease, Irritable Bowel Syndrome, Inflammatory Bowel disease
7. All forms of cirrhosis, Rectal prolapse, Perineal Abscesses, Perianal Abscesses Cholecystectomy,
   i. Endoscopy
8. Stones in Urinary system, all prostate diseases, dialysis
9. Dysfunctional uterine bleeding, pelvic inflammatory diseases, stress incontinence, Hydrocele,varicocele/ rectocele/ spermatocele
10. Cataract, Glaucoma, Diseases of the vitreous and retina
11. Unless malignant, All Internal/ External tumors, cysts, nodules, polyps, sinus, fistula, adenoma, lumpsincluding teratoma, breast lumps, dermoid cyst, ovarian cyst, desmoid tumour, umblical granuloma, mucous cyst of lip/cheek
12. All types of internal congenital anomalies/illnesses/ defects
13. Diseases related to thyroid
14. All skin ailments
15. Ulcers of any kind (whether internal or external) including decubitus ulcers
16. Varicose veins & Varicose ulcers
17. Intervertebral disc disorders , Arthroscopy, Spinal and Vertebral Disorders including diagnosis as lowback ache, Surgeries for joint replacements (except if hospitalization is required due to an accidentalinjury)
18. All Hernias (except if Hospitalization is required due to an Injury)

4.1.2. Exclusions

The Company shall not be liable to make any payment under this Policy for any Surgical Procedures directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following

unless specifically mentioned elsewhere in the Policy;

1. Any Surgery/Surgical Procedure arising on account of or in connection with any Pre-Existing Disease(s).
2. Any Surgery/Surgical Procedure arising out of an Accident which occurred prior to Risk Inception Date.
3. Any Surgery/Surgical Procedure arising out of any Congenital Anomaly of the Insured Person.
4. Any of the covered Surgery/Surgical Procedure performed which was otherwise deemed unnecessary, or against standard health practices.
5. Any Unproven/Experimental treatment.
6. Any Surgery/Surgical Procedure performed solely due to cosmetic or aesthetic or psychological reasons.
7. Any claim made without a medical certificate from the treating Medical Practitioner evidencing the diagnosis of such Illness or Injury or the undergoing of the medical / Surgical Procedure.
8. **Conflict & Disaster:** Treatment for any illness or injury resulting from willful participation in any illegal (non- accidental) activity such as , war, riot, revolution, acts of terrorism or any similar event (other than natural disaster or calamity), invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion,revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detainment of citizens of whatever nation, riots or civil commotion
9. Experimental/ Investigational or Unproven Treatment:
   a. Services including device, treatment, procedure or pharmacological regimens which are considered as experimental, investigational or unproven.
   b Biodegradable (bioresorbable, bioabsorbable) polymer drug eluting stents will be considered as experimental and investigational for all purpose
10. **Hazardous Activities:** Any claim relating to Adventure or Hazardous Sports unless declared in the Enrolment Form beforehand and agreed by the Company.
11. **HIV, AIDS, and related complex:** Any condition directly or indirectly caused by or associated with Human Immunodeficiency Virus (HIV) or Acquired Immune Deficiency Syndrome (AIDS), including any condition that is related to HIV or AIDS.
12. **Mental and Psychiatric Conditions:** Treatment related to symptoms, complications and consequences of mental Illness, mood disorders, psychotic and non- psychotic disorders
13. **Reproductive medicine & other Maternity Expenses:** Any Surgical Procedure arising out of, directly/indirectly caused by, contributed to or aggravated by:
    a. Pregnancy or Child Birth Pregnancy (including voluntary termination), miscarriage, maternity or child birth (including through caesarean section)Birth Control Any type of contraception, sterilization, abortions, voluntary termination of pregnancy (except under Maternity Expenses for Medical Termination of Pregnancy (MTP) as governed by MTP Act 1971) or family planning;
    b. Assisted Reproduction Infertility services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI, Gestational Surrogacy;
    c. Sexual disorder and Erectile Dysfunction. Treatment of any sexual disorder including impotence (irrespective of the cause) and sex changes or gender reassignments or erectile dysfunction;
    d. Any costs or expenses related to pregnancy, complications arising from pregnancy or medical termination of pregnancy unless caused by an accident
14. Sexually transmitted Infections & diseases: Screening, prevention and treatment for sexually related infection or disease
15. Substance related and Addictive Disorders: Treatment and complications related to disorders of intoxication, dependence, abuse, and withdrawal caused by drugs and other substances such as alcohol, opiods or nicotine
16. Traffic Offences & Unlawful Activity: Any condition occurring either as a result of breach of law by the Insured Person with criminal intent
17. Unrecognized Physician or Hospital: a. Treatment or Medical Advice provided by a Medical Practitioner not recognized by the Medical Council of India or by Central Council of Indian Medicine or by Central

council of Homeopathy or by relevant authorities in the area or country where the treatment is taken. b. Treatment or Medical Advice related to one system of medicine provided by a Medical Practitioner of another system of medicine. c. Treatment provided by anyone with the same residence as an Insured Person or who is a member of the Insured Person's immediate family or relatives. d. Treatment provided by Hospital or health facility that is not recognized by the relevant authorities in India or any other country where treatment takes place. e. Treatment or services received in health hydros, nature cure clinics or any establishment that is not a recognized Hospital or healthcare facility.

18. Any claim made without a medical certificate from the treating Medical Practitioner evidencing the Surgery/Surgical Procedure
19. Any physical, medical or mental condition or treatment or service that is specifically excluded in the Policy Certificate.
20. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from nuclear weapon materials or from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission.
21. Participation (aggravation) in any kind of strike, processions, riots etc.
22. Any act of self-destruction or self-inflicted injury, attempted suicide or suicide.
23. Any Injury / Illness occurring whilst working in underground mines or explosives magazines, or involvingelectrical installation with high tension supply, or as jockeys or circus personnel
24. Any consequential or indirect losses or expenses related to any Insured Event.
25. Any tests and treatment relating to infertility and in vitro fertilization.
26. Any Injury / Illness occurring whilst engaging in any Adventure Sports either as aninstructor/ trainer, or as a participant.

5. Other terms and conditions

5.1. CLAIMS PROCEDURE

Provided that the due observance and fulfilment of the terms and conditions of this Policy (conditions and all Endorsements hereon are to be read as part of this Policy) shall, so far as they relate to anything to be done or not to be done by the Insured and /or Insured person, be a condition precedent to any liability of the Company under this Policy.

The Claims Procedure is as follows:

5.1.1. Claim Documents

The claim form duly completed in all respects along with all documents (if applicable) listed below should be submitted within 30 days from the date of first diagnosis of the illness:

1. Duly completed and signed claim form alongwith medical certificate from the attending physician forming part of the claim form, confirming inter alia
   a. name of the Insured person;
   b. name, date of occurrence and medical details of the Insured Event
   c. confirmation that the Insured Event does not relate to any Pre-Existing Illness or any Illness or Injury which existed within the first 90 days of commencement of Period of Insurance.
2. Discharge summary issued by the Hospital, describing the nature of the ailment, surgery and its duration, treatment given, advice on discharge etc.
3. All Consultation papers (including pre and post hospitalization) and all Test reports related to diagnosis of the illness including X-rays/MRI/CT scan reports/films etc.
4. All medical reports and prescriptions from first consultation leading to diagnosis of the illness
5. Indoor case papers
6. FIR/MLC in the case of Accident/Burns and English translation of the same, if in any other language.
7. Legal heir certificate in the absence of nomination under the policy, in case of death of the proposer.
8. Any other claim document as may be required by the Company

Acceptance of photocopies – Since Surgi Cash Assure is a benefit policy, all medical records may be accepted in photocopies except in cases where genuineness is suspected.

5.1.2. Payment of Claim

- All valid claims will be settled within 15 working days upon receipt of due written evidence of such loss and any further documentation information and assistance that the Company may require. The company shall be released from any obligation to pay benefits if any of the obligations are breached.
- All claims under this Policy shall be payable in Indian Currency.
- The Company shall be liable to pay any interest at 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed, for sums paid or payable under this Policy, upon acceptance of an offer of settlement by the insured but there is delay in payment beyond 7 days from the date of acceptance.
- The claim if admissible shall be paid to the legal heir/ nominee of the proposer in case if the proposer is not surviving at the time of payment of claim
- If a claim is settled for an insured, cover for other insured members under the policy shall continue.
- At the time of claim settlement, Company may insist on KYC documents of the Proposer as per the relevant AML guidelines in force.
- All claims are to be notified to Us within a timeline. In case where the delay in intimation is proved to be genuine and for reasons beyond the control of the Insured Person or Nominee specified in the Policy Schedule/Certificate of Insurance, We may condone such delay and process the claim. Please note that the waiver of the time limit for notice of claim and submission of claim is at Our evaluation.
- The claim documents should be sent to:

Health Claims Department

Royal Sundaram Alliance Insurance Co Ltd Vishranthi Melaram Towers, No.2/319, Rajiv Gandhi Salai (OMR) Karapakkam, Chennai - 600097

6. General terms and clauses

6.1. Specific terms and clauses

6.1.1. Observance of terms and conditions

The due adherence/observance and fulfillment of the terms, conditions and endorsement of this Policy in so far as they relate to anything to be done or complied with by the Insured Person, shall be a Condition Precedent to any liability to make payment under this Policy.

Disclosure to Information Norm

The policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, mis-description or non- disclosure of any material particulars in the proposal form, personal statement, declaration, claim form declaration, medical history on the claim form and connected documents, or any material information having been withheld by You or any one acting on Your behalf, under this Policy.

6.1.2. Material Change

It is a Condition Precedent to the Our's liability under the Policy that the Policyholder shall immediately notify Us in writing of any material change in the risk on account of change in nature of occupation or business at his own expense. We may, in its discretion, adjust the scope of cover and/or the premium paid or payable, accordingly. You must exercise the same duty to disclose those matters to Us before the Renewal, extension, variation, endorsement or reinstatement of the contract.

6.1.3. Cancellation/Termination

Cancellation/ Termination (other than Free Look cancellation)

The policyholder may cancel his/her policy at any time during the term, by giving 7 days notice in writing.

The Company shall:

a. refund proportionate premium for unexpired policy period, if the term of policy is up to one year and there is no claim (s) made during the policy period.

b. refund premium for the unexpired policy period, in respect of policies with term more than 1 year and risk coverage for such policy years has not commenced.

Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any benefit has been availed by the Insured person under the Policy.

The Company may cancel the Policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud by the Insured Person, by giving 7 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud.

6.1.4. Notice

a. Notices Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post, or facsimile to: a. Policyholder/ Insured Person at the address specified in the Policy Schedule/Certificate of Insurance or at the changed address of which the Company must receive written notice.

b. The Company at the following address:

M/s. Royal Sundaram General Insurance Co. Limited.,

Corporate office: Vishranthi Melaram Towers,

No. 2 / 319 Rajiv Gandhi Salai (OMR), Karapakkam,
Chennai - 600097

c. The Company may send the Insured Person other information through electronic and telecommunications means with respect to the Policy from time to time.

6.1.5. Premium Instalment

(Applicable for policies with instalment payment).

i. The Insured Person is required to pay the premium on monthly/ quartely/ half yearly / yearly/ total tenure payment for the number of Insured persons opted for this cover.

ii. It is a condition precedent that premium applicable to the entire policy period shall be paid, by the Insured/Insured Person/Insured Person's legal heir(s) as the case may be, in the event of claim under this Policy.

iii. No refund of premium will be made for the months prior to the month in which the Insured Person exercises his/her option to withdraw from the Plan.

6.1.6. Fraudulent claims

If a claim is in any way found to be fraudulent, or if any false statement, or declaration is made or used in support of such a claim, or if any fraudulent means or devices are used by the Insured Person or anyone acting on behalf of the Insured Person or any false or incorrect Disclosure to Information Norms to obtain any benefit under this Policy, then the Company may reserve the right to cancel the Policy and all benefits under the Policy shall be forfeited and all sums paid under this Policy shall be repaid to the Company by the Insured Person.

6.1.7. Nomination

d. Insured Person is mandatorily required at the inception of the Policy, to make a nomination for the purpose of payment of claims under the Policy in the event of Insured Person death.

e. Any change of nomination shall be communicated to the Company in writing and such change shall be effective only when an endorsement on the Policy is made by the Company.

6.1.8. Policy Disputes

Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions contained herein shall be governed by Indian law and shall be subject to the jurisdiction of the Indian Courts.

The disputes of quantum of payment of losses shall be preferred to be dealt and resolved under the alternative dispute resolution system including Arbitration and Conciliation Act of India.

6.1.9. Maintenance of Records

As a Condition Precedent, the Insured Person shall keep an accurate record containing all relevant medical records and shall allow the Company or its representative(s) to inspect such records. The Insured Person shall furnish such information as we may require under this Policy at any time during the Policy Period.

6.1.10. Geography

All benefits are available in India provided the diagnosis taken in India only and all claims shall be payable in India in Indian Rupees only

6.1.11. Modifications to the Policy

This Policy constitutes the complete contract of insurance. No change or alteration shall be valid or effective unless approved in writing by the Company, which approval shall be evidenced by a written Endorsement signed and stamped by the Company.

6.1.12. Withdrawal of the Product

This product or any variant/plan under the product may be withdrawn at the Company's option subject to change in regulations. In such a case the Company shall notify Policyholder of any such change at least 3 months prior to the date from which such withdrawal shall come into effect or as may be provided by the applicable law.

6.1.13. Insurer's rights for admissibility

In the event of any dispute or disagreement regarding the appropriateness or correctness of the Diagnosis, the Company shall have the right to call for an examination, of either the Insured Person or the evidence used in arriving at such Diagnosis, by an independent acknowledged expert in the field of medicine concerned selected by the Company and the opinion of such expert as to such Diagnosis shall be binding on both the Insured Person and the Company.

6.1.14. Free Look Provision:

At the inception of the policy the Insured Person will be allowed a period of 30 from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable. If Insured Person has not made any claim during the free look period, he will be entitled to the following, provided no claim has been settled or lodged for the period the policy has been in force:

6.1.14.1. A refund of the premium paid less any expenses incurred by the Insurer on medical examination of the insured person and the stamp duty charges or;

6.1.14.2. where the risk has already commenced and the option of return of the policy is exercised, a deduction towards the proportionate risk premium for period on cover or;

6.1.14.3. Where only a part of the risk has commenced, such proportionate risk premium commensurate with therisk covered during such period.

6.1.14.4. Free-look will not be applicable for policies with tenure less than one year.

6.1.14.5. Free-look not applicable in case of renewals.

All rights under this Policy shall immediately stand extinguished on the free look cancellation of the Policy.

6.1.15. Multiple Policies

If multiple certificates are issued under the same Group policy or across multiple group policies in the name of same person then we shall refund the premium of all other policies except the policy with maximum Sum Insured. However, in case of fraud or misrepresentation, all the policies will be cancelled and premium stands forfeited. . If customer has multiple policies with different insurers, on occurrence of the insured event, he can claim from all Insurers under all policies.

6.1.16. Arbitration

If any dispute or difference shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole Arbitrator to be appointed in writing by the parties to difference or, if they cannot agree upon a single Arbitrator within 30 days of any party invoking Arbitration, the same shall be referred to a panel of three Arbitrators, comprising of two Arbitrators, one to be appointed by each of the parties to the dispute/ difference and the third Arbitrator to be appointed by such two Arbitrators and Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to Arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this Policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this Policy that the award by such Arbitrator/ Arbitrators of the amount of the loss or damage shall be first obtained.

6.1.17. 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 5 continuous years would be applicable from data of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period no health insurance claim shall be contestable except for proven fraud and permanent exclusions specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments, deductibles as per the policy contract.

6.1.18. Grievances Redressal Procedure

We promise to provide the service you want, but sometimes mistakes can happen. If you're not satisfied with our service, we're here to make it right. Your satisfaction is our main concern, especially when things haven't gone as planned.

Step 1: Raise a Complaint
Please raise your concern with us through our Online form / Call us at: 1860 425 0000 / 1860 258 0000 / mail us at care@royalsundaram.in &

write us at
Customer Services Team
Royal Sundaram General Insurance Co. Limited
Vishranthi Melaram Towers
No.2/319, Rajiv Gandhi Salai(OMR) Karapakkam,
Chennai – 600097

Senior Citizen can mail us at: seniorcitizengrievances@royalsundaram.in

We will acknowledge your grievance immediately and provide a resolution.

Step 2: **Escalation 1**

If you are not satisfied with the resolution provided or require any further assistance, you may escalate the matter to: manager.care@royalsundaram.in

Step 3: **Escalation 2**

If you feel your grievance has not been resolved satisfactorily, you may escalate further to:
head.cs@royalsundaram.in

Step 4: **Escalation to Grievance Redressal Officer - Final Internal Escalation**

If you need further resolution, you may escalate it to:

Grievance Redressal Officer: Mr. T M Shyamsunder, 9500413094
Senior Citizen Redressal: 9500413019
Email: gro@royalsundaram.in

For updated details of grievance officer, kindly refer the link http://www.royalsundaram.in.

lf you are not satisfied with the Redressal of grievance through above methods, you may also approach the office of Insurance Ombudsman of the respective area/region for Redressal of grievance as per insurance Ombudsman Rules 2017.

Insurance Ombudsman addresses can be accessed at - https://www.cioins.co.in/Ombudsman

Insurance is the subject matter of solicitation.

Annexure B
List of Surgeries/Surgical Procedures

S.No.	BODY SYSTEM	NAME OF SURGERY/SURGICAL PROCEDURES	% of Surgical Cash Benefit Payable
1	CARDIOVASCULAR SYSTEM	Aortic valve repair (Open Heart Valvuloplasty)	25%
2	CARDIOVASCULAR SYSTEM	Other vascular bypass grafts(eg. Femoral popliteal grafts)	25%
3	CARDIOVASCULAR SYSTEM	Clipping or repair of Aneurysm(including aortic, cerebral, femoral or iliac) with or without graft	25%
4	CARDIOVASCULAR SYSTEM	Closed Heart Valvotomy (Aortic, Mitral, Pulmonary, Tricuspid Valves)	25%
5	CARDIOVASCULAR SYSTEM	Coronary Angioplasty with Stent implantation	25%
6	CARDIOVASCULAR SYSTEM	Excision of benign mediastinal lesions (evidence of thoracotomy needs to be ascertained)	25%
7	CARDIOVASCULAR SYSTEM	Heart Proximal aortic aneurysm, Aortic root transplantation with coronary artery reimplantation	25%
8	CARDIOVASCULAR SYSTEM	Initial implantation of permanent pacemaker/ICD/VAD device in heart	25%
9	CARDIOVASCULAR SYSTEM	Major vein repair with or without grafting for traumatic & non traumatic lesions	25%
10	CARDIOVASCULAR SYSTEM	Mitral valve repair (Open Heart Valvuloplasty)	25%
11	CARDIOVASCULAR SYSTEM	Percutaneous (balloon) Valvuloplasty	25%
12	CARDIOVASCULAR SYSTEM	Pericardiotomy / Pericardectomy	25%
13	CARDIOVASCULAR SYSTEM	Pulmonary valve repair (Open Heart Valvuloplasty)	25%
14	CARDIOVASCULAR SYSTEM	Carotid endarterectomy/ Ext carotid Int. carotid bypass/Carotid tumour excision	50%
15	CARDIOVASCULAR SYSTEM	Dissecting Aortic aneurysm surgery	50%
16	CARDIOVASCULAR SYSTEM	VENTRI-CULAR PERITONEAL SHUNT(V-P SHUNT)	50%
17	CARDIOVASCULAR SYSTEM	INFERIOR VENA CAVA FILTER PLACEMENTAND/OR REMOVAL (IVC FILTER)	25%
18	CARDIOVASCULAR SYSTEM	Surgery for Cardiac Arrhythmia	25%
19	DIGESTIC SYSTEM	PANCREATIC STENTING	25%
20	DIGESTIV SYSTEM	CARDIOMYOTOMY	25%
21	DIGESTIV SYSTEM	TRANSJUGULAR INTRAHEPATIC PORTOSYSTEMIC SHUNT (TIPSS)	25%
22	DIGESTIVE SYSTEM	Hemicolectomy/ Colectomy/ Ileocolectomy	25%
23	DIGESTIVE SYSTEM	Total excision of stomach	50%
24	DIGESTIVE SYSTEM	Partial/ Complete Gastrectomy	50%
25	DIGESTIVE SYSTEM	Partial/ Complete Eosophagectomy	50%
26	DIGESTIVE SYSTEM	Pancreatectomy	50%
27	DIGESTIVE SYSTEM	Pancrepancreaticoduodenectomy- Whipples surgery	50%
28	DIGESTIVE SYSTEM	Partial/Complete Hepatectomy	25%
29	DIGESTIVE SYSTEM	Partial / complete splenectomy	25%
30	DIGESTIVE SYSTEM	Portal Vein Thrombosis (New)	25%
31	DIGESTIVE SYSTEM	Diaphragmatic/Hiatus Hernia Repair	50%
32	DIGESTIVE SYSTEM	Total Esophagectomy	50%
33	ENDOCRINE SYSTEM	Complete excision of adrenal glands	50%
34	ENDOCRINE SYSTEM	Total thyroidectomy	50%
35	ENDOCRINE SYSTEM	Complete excision of Parathyroid gland	50%
36	MISCELLANEOUS	surgerical removal of eyeball	25%
37	MUSCULOSKELETAL SYSTEM	Amputation of arm	50%

38	MUSCULOSKELETAL SYSTEM	Amputation of foot	50%
39	MUSCULOSKELETAL SYSTEM	Amputation of hand	50%
40	MUSCULOSKELETAL SYSTEM	Amputation of leg	50%
41	MUSCULOSKELETAL SYSTEM	Excision reconstruction of joint	50%
42	MUSCULOSKELETAL SYSTEM	Finger Trauma replantation	50%
43	MUSCULOSKELETAL SYSTEM	Implantation of prosthesis for limb	50%
44	MUSCULOSKELETAL SYSTEM	Open Reduction and Internal fixation of fracture Long bone (Humerus, Radius, ulna, Femur, Tibia, Fibula), with or without Bone grafting	25%
45	MUSCULOSKELETAL SYSTEM	Osteomyelitis - Surgical Drainage and Curettage	25%
46	MUSCULOSKELETAL SYSTEM	Other interposition reconstruction of joint	50%
47	MUSCULOSKELETAL SYSTEM	Other prosthetic replacement of articulation of other bone	50%
48	MUSCULOSKELETAL SYSTEM	Other prosthetic replacement of head of femur	50%
49	MUSCULOSKELETAL SYSTEM	Other prosthetic replacement of head of Humerus	50%
50	MUSCULOSKELETAL SYSTEM	Other reconstruction of joint	50%
51	MUSCULOSKELETAL SYSTEM	Other total prosthetic replacement of hip joint/core decompression with graft for osteonecrosis of femoral head	50%
52	MUSCULOSKELETAL SYSTEM	Other total prosthetic replacement of knee joint	50%
53	MUSCULOSKELETAL SYSTEM	Other total prosthetic replacement of other joint	50%
54	MUSCULOSKELETAL SYSTEM	Prosthetic interposition reconstruction of joint	50%
55	MUSCULOSKELETAL SYSTEM	Prosthetic replacement of head of femur not using cement	50%
56	MUSCULOSKELETAL SYSTEM	Prosthetic replacement of head of femur using cement	50%
57	MUSCULOSKELETAL SYSTEM	Prosthetic replacement of head of Humerus not using cement	50%
58	MUSCULOSKELETAL SYSTEM	Prosthetic replacement of head of Humerus using cement	50%
59	MUSCULOSKELETAL SYSTEM	Prosthetic replacement/articulation/other bone not using cement	50%
60	MUSCULOSKELETAL SYSTEM	Prosthetic replacement/articulation/other bone using cement	50%
61	MUSCULOSKELETAL SYSTEM	Replantation of lower limb	50%
62	MUSCULOSKELETAL SYSTEM	Replantation of upper limb	50%
63	MUSCULOSKELETAL SYSTEM	Spinal Fusion (arthrodesis of spine with bone graft/internal fixation)	50%
64	MUSCULOSKELETAL SYSTEM	Therapeutic endoscopic operations on cavity of knee joint	25%
65	MUSCULOSKELETAL SYSTEM	Therapeutic endoscopic operations on cavity of Shoulder joint	25%
66	MUSCULOSKELETAL SYSTEM	Unilateral or bilateral prosthetic replacement of hip joint not using cement	50%
67	MUSCULOSKELETAL SYSTEM	Unilateral or bilateral prosthetic replacement of hip joint using cement	50%
68	MUSCULOSKELETAL SYSTEM	Unilateral or bilateral replacement of knee joint not using cement	50%

69	MUSCULOSKELETAL SYSTEM	Unilateral or bilateral prosthetic replacement of knee joint using cement	50%
70	MUSCULOSKELETAL SYSTEM	Unilateral or bilateral prosthetic replacement of other joint not using cement	50%
71	MUSCULOSKELETAL SYSTEM	ACL/PCL repair/reconstruction	25%
72	NERVOUS SYSTEM	Bur-hole Drainage of Extradural, subdural or intracerebral space	25%
73	NERVOUS SYSTEM	Craniotomy for non malignant space occupying lesions	50%
74	NERVOUS SYSTEM	Craniotomy for Drainage of Extradural, subdural or intracerebral space	50%
75	NERVOUS SYSTEM	Craniotomy for malignant Brain tumors	50%
76	NERVOUS SYSTEM	Decompression surgery for Entrapment Syndrome	50%
77	NERVOUS SYSTEM	Embolectomy / Thrombectomy/Endarterectomy with or without Graft	50%
78	NERVOUS SYSTEM	Excision of deep seated peripheral nerve tumor	50%
79	NERVOUS SYSTEM	Excision of pineal gland	50%
80	NERVOUS SYSTEM	Fixation of fracture of spine	50%
81	NERVOUS SYSTEM	Free Fascia Graft for Facial Nerve Paralysis	25%
82	NERVOUS SYSTEM	Intracranial transection of Cranial nerve	50%
83	NERVOUS SYSTEM	Laminectomy/Discectomy for Spinal nerve root decompression	50%
84	NERVOUS SYSTEM	Microvascular decompression of cranial nerves/nervectomy	50%
85	NERVOUS SYSTEM	Multiple Microsurgical Repair of digital nerve	50%
86	NERVOUS SYSTEM	Operations on Subarachnoid space of brain	50%
87	NERVOUS SYSTEM	Other operations on the meninges of the Brain	50%
88	NERVOUS SYSTEM	Peripheral nerve Graft	50%
89	NERVOUS SYSTEM	Repair of Cerebral or Spinal Arterio- Venous Malformations or aneurysms	50%
90	NERVOUS SYSTEM	Total or Partial Excision of the pituitary gland - Any approach (Transforntal or Trans Sphenoid)	50%
91	NERVOUS SYSTEM	Brain Surgery	50%
92	ORGAN TRANSPLANT	Heart/Heart-Lung Transplant	50%
93	ORGAN TRANSPLANT	Liver Transplantation	50%
94	ORGAN TRANSPLANT	Lung Transplantation	50%
95	ORGAN TRANSPLANT	Renal transplant (recipient)	50%
96	ORGAN TRANSPLANT	Bone Marrow Transplant (as recipient)	50%
97	ORO-MAXILLOFACIAL SURGERY	Major reconstructive oro-maxillafacial surgery due to trauma or burns and not for cosmetic purpose	50%
98	ORO-MAXILLOFACIAL SURGERY	Osteotomy including segmental resection with bone grafting for Mandibular and maxillary lesions	50%
99	OTHERS	Excision and Major Flap Repair of skin and Subcutaneous tissue due to Major Burns	50%
100	OTHERS	Radical Excision of malignant tumor in bones	50%
101	OTHERS	Major resection of tumour and reconstruction of bone	50%
102	OTHERS	Radical Mastectomy	25%
103	OTHERS	Total excision of breast/ Simple Mastectomy	25%
104	RENAL/GENITO URINARY SYSTEM	Amputation of penis	25%
105	RENAL/GENITO URINARY SYSTEM	Excision of ureter	25%
106	RENAL/GENITO URINARY SYSTEM	Kidney injury repair	25%
107	RENAL/GENITO URINARY SYSTEM	Open extirpation of lesion of kidney	25%
108	RENAL/GENITO URINARY SYSTEM	Total or partial excision of bladder	25%
109	RENAL/GENITO URINARY SYSTEM	Total or Partial nephrectomy due to medical advice (not as a transplant donor)	50%

110	RENAL/GENITO URINARY SYSTEM	Unilateral or Bilateral excision of testes	25%
111	RENAL/GENITO URINARY SYSTEM	Urinary diversion	25%
112	RENAL/GENITO URINARY SYSTEM	Ovarian Cystectomy	25%
113	RENAL/GENITO URINARY SYSTEM	Prostatectomy	25%
114	RENAL/GENITO URINARY SYSTEM	open Hysterectomy/BSO due to cancer only	50%
115	RENAL/GENITO URINARY SYSTEM	Lap. Hysterectomy+ BSO due to cancer only	25%
116	RENAL/GENITO URINARY SYSTEM	Removal Of One Kidney (due to Kidney Failure/Damage)	50%
117	RESPIRATORY SYSTEM	Wide excision and Major reconstruction of malignant Oro-pharyngeal tumors with chemo	50%
118	RESPIRATORY SYSTEM	Pneumonectomy/Lobectomy	50%
119	RESPIRATORY SYSTEM	Pleurectomy	25%
120	RESPIRATORY SYSTEM	Chronic bronchopleural fistula requiring a surgical procedure for closure of the fistula through an open thoracotomy	25%