SURGICARE

PROSPECTUS

Coverage under Surgicare is offered by Royal Sundaram General Insurance Company Limited, the first private non-life Insurance Company licensed to operate in India.

Introducing Surgicare Insurance

A Surgical hospitalization cover specially designed to offer protection to you and your family against the surgical worries.

With Surgicare you will also have access to value added services like cashless treatment (subject to conditions and authorizations) at a list of hospitals provided by us, and a 24 hrs helpline. It has been designed to ensure that you and your family get the best Surgical treatment

What are the key benefits of Surgicare?

1. **Surgical Cash**: This Policy pays a fixed amount on undergoing of covered Surgery. The Surgeries are classified as category-1, category-2, category-3 and category-4. The amount payable is 100% of the Sum Insured for all category-1 Surgeries, 50% of Sum Insured for all category-2 Surgeries, 25% of Sum Insured for all category-3 surgeries and 10% of Sum Insured for all category-4 surgeries subject to following limits:

   Maximum life time benefit payable under this policy is 4 times the annual Sum Insured opted by the insured Person.

   - The fixed benefit amount depending upon the category in which the covered Surgery falls shall be maximum amount payable, irrespective of the number of Surgicare policy the insured person holds.
   - The fixed benefit amount depending upon the category in which the covered Surgery falls shall be payable irrespective of the actual cost incurred by the Insured Person.
   - If at the time of availing cashless facility,the actual cost incurred is lower than the benefit amount, the Policy Holder shall be entitled to the difference as cash payout.

CATEGORY 1- Benefit scale 100% of the applicable SI

Sl.No	Surgeries	Waiting Period
	Cardio Vascular System	
1	Coronary artery bypass graft surgery	2 years
2	Heart, Lung or combined heart-lung transplantation	2 years
	ENT	
3	Block dissection of thoracic structures for cancers	
4	Extensive Surgery for oropharangeal malignancy accompanied with Radical neck dissection along with reconstructive surgery	
	General Surgery	

5	Bone Marrow transplant	
6	Kidney or Liver transplantation as a recipient	2 years
7	Major reconstructive oro-maxillofacial surgery for trauma or burns (not	
	for cosmetic purposes)	
	Neurology	
8	Craniotomy for excision of malignant cerebral tumours	
9	Repair of cerebral/ spinal arterio-venous malformations/cerebral aneurysms	2 years
	Orthopaedics	
10	Head-Face, Trauma, Craniofacial Approach Open Reduction and Fixation	

CATEGORY 2 - Benefit scale is 50% of the applicable SI

Sl.No	Surgeries	Waiting Period
	Cardio Vascular System	
11	Coronary angioplasty with stenting	2 years
12	Heart valve replacement using prosthesis via open heart surgery	2 years
13	Major Surgery of the Aorta with graft	
14	Major surgery of the pulmonary artery	
15	Permanent pacemaker implantation	2 years
	ENT	
16	Major Surgical treatment for Oropharangeal Malignancy (Excision Biosy Excluded)	
	General Surgery	
17	Abdominoperineal resection	
18	Hemi / Total colectomy	
19	Hepatectomy	
20	Large Vessel, Injury, Repair with Grafting	
21	Mandible, Tumours, Marginal Resection with/without Bone Graft	
22	Oesophagectomy	
23	Oesophagus, Tumour, Bypass with Stomach/Intestine	
24	Open Thoracotomy for mediastinal mass	
25	Radical Mastectomy / Modified Radical Mastectomy	2 Years
26	Radical nephrectomy	
27	Radical thyroidectomy	
28	Testis, Tumour, Retroperitoneal Lymph Node Dissection Following Orchidectomy	2 Years
29	Whipples operation	
	Gynaecology	

30	Wertheim's operation	2 Years
	Neurology	
31	Craniotomy for benign tumours / space occupying lesions	
32	Excision of benign / malignant spinal cord tumours	
	Orthopaedics	
33	Open Reduction Of Fracture Dislocation & Internal Fixation Of Spine/Pelvis	
34	Total hip replacement	2 years
35	Total knee replacement	2 years
	Urology	
36	Radical prostectomy	2 years

Category 3 - Benefit scale is 25% of the applicable SI

Sl.No	Surgeries	Waiting Period
	ENT	
37	Microlaryngeal Surgeries	
38	Radical glossectomy	
39	Radical tonsillectomy	
	General Surgery	
40	Adrenalectomy for carcinoma	
41	Hepatico-jejunostomy	
42	Nephrectomy	
43	Open lobectomy/pneumonectomy	
44	Repair of rupture of abdominal cavity viscus	
45	Segmental Osteotomy of mandible	
46	Segmental Osteotomy of maxilla	
47	Skin grafting treatment for major burns (third degree burns of more than 10% of the body surface area)	
48	Surgical treatment of diaphragmatic/hiatus hernia	2 years
49	Total Gastrectomy/ Gastroduodenectomy	
	Gynaecology	
50	Repair of Ruptured Uterus	
	Neurology	
51	Cranioplasty	
52	Craniotomy for traumatic fracture of skull with intracranial haematoma evacuation	
53	Decompression of nerve entrapment syndromes of upper and lower limbs with nerve transposition and endoneurolysis	
54	Major nerve repair with grafting to prevent muscle paralysis	
55	Trans-sphenoidal surgery of intracranial tumors	

	Orthopaedics	
56	Anterolateral decompresion and Spinal fusion	
57	Excision of bone tumours – Deep	
58	Extensive Crush Injuries (Lower limb and Upper limb), Debridement with repair of bone and soft tissues	
59	Hand and Foot, Complex Injuries, Debridement with Repair/Reconstruction	
60	Knee - ligament reconstruction(Arthroscopic / Open)	
61	Major amputation (Above knee/Below knee, Above elbow/Below elbow)	
62	Open reduction with internal fixation of long bones of lower limb	
63	Surgical treatment of fracture neck femur with or without prosthesis	
	Urology	
64	Major replacement / Reimplantation surgeries for reflux ureter	
65	Open Nephrolithotomy	2 Years

Category 4 - Benefit scale is 10% of the applicable SI

Sl.No	Surgeries	Waiting Period
	Cardio Vascular System	
66	Percutaneous transluminal mitral valvulotomy/Valvuloplasty	2 Years
	ENT	
67	Angiofibroma excision	
68	Excision of para thyroid adenoma/carcinoma	
69	Functional endoscopic sinus surgery (FESS)	2 years
70	Mastoidectomy with tympanoplasty	
71	Myringoplasty	
72	Septoplasty	2 years
73	Stapedectomy	
74	Tracheostomy	
	General Surgery	
75	Appendicectomy (Open / Laproscopic)	
76	Bypass procedure for inoperable cancer of pancreas	
77	Cholecystectomy (Open / Lap)	2 years
78	Cholecystectomy with chole biliary duct (CBD) exploration (Open / Lap)	2 years
79	Direct operation on oesophagus for portal hypertension	
80	Fistulectomy for high rectal fistula / complex fistulas	2 Years
81	Herniorhaphy for external hernia with or without mesh repair	2 Years
82	Herniotomy (Open / Laproscopic)	2 Years

83	Laparotomy for Peritonitis- Lavage and drainage	
84	Laryngectomy	
85	Lumbar sympathectomy	
86	Operation for intestinal Obstruction	
87	Pancreato duodenectomy	
88	Partial / Total thyroidectomy	2 Years
89	Pharyngotomy	
90	Prostatectomy(Open/ Trans urethral resection of prostate-TURP)	2 Years
91	Resection and anastomosis of intestine	
92	Simple mastectomy	2 Years
93	Skin and suncutaneous tissue - malignant tumour Wide excision and Reconstruction	
94	Skin grafting treatment for minor burns (third degree burns of less than 10% of the body surface area)	
95	Splenectomy	
96	Surgery for prolapse rectum	2 Years
97	Surgery for removal of liver abcess	

98	Surgery for removal of lung abcess	
99	Surgical treatment for pseudocyst of pancreas	
100	Temporary / Permanent colostomy as a stand alone procedure	
101	Thoracoplasty	
102	Total Parotidectomy	
103	Surgical treatment for gall bladder calculi (Lithotripsy)	2 Years
104	Varicose vein stripping with or without sub fascial ligation(Non Cosmetic)	2 Years
	Gynaecology	
105	Colporraphy/ Colpoperinnioraphy	
106	Hysterectomy (Abdominal / Vaginal / Laparoscopic / Pan)	2 Years
107	Myomectomy	2 Years
108	Ovarian cystectomy	2 Years
109	Salphingo oophrectomy/ Oophorectomy	
	Neurology	
110	Evacuation of hematoma through burrhole surgery	
111	Facial nerve decompression	
112	Primary Repair of Injury to Digital Nerve	
113	Surgery for brachial plexus injury	
114	Surgery for removal of brain abcess	

	Opthalmology	
115	Corneal transplant	
116	Evisceration / Excentration of eyeball	
117	Retinal detachment surgery with or without vitrectomy	2 Years
118	Repair of penetrating injury of the eye / globe rupture	
119	Surgery for glaucoma	2 Years
	Orthopaedics	
120	Arthrodesis for ankle / knee joint	2 years
121	Disarticulations / Amputation of digits	
122	Disc Prolapse Surgery - Discectomy with laminectomy	2 years
123	Excision of bone tumours – superficial	
124	Implant Removal from long bones - upper / lower limb	
125	K-Wire fixation (Hand / Foot)	
126	Open reduction and fixation of mandibular fracture	
127	Open reduction and fixation of maxillary fracture	
128	Open Reduction Of Dislocations of Joints	
129	Open Reduction with internal fixation of long bones of upper limb	
130	Repair of multiple tendon injury – Flexor / Extensor of both upper and lower limb	
131	Total Ankle Joint replacement	2 years
132	Total Shoulder / Elbow joint replacement	2 years
	Urology	
133	Diathermy destruction of bladder neoplasm	
134	Kidney cyst excision	
135	Open drainage of perinephric abcess	
136	Operations for injuries of the bladder	
137	Operations for injuries of the kidney	
138	Pyeloplasty for hydronephrosis	
139	Treatment for renal/ureteric calculi - Lithotripsy / Cystoscopy and Basketting with/without stenting	2 Years
140	Ureterolithotomy	2 Years

What additional benefits do I get?

Along with the Surgical Cash, you are also entitled to avail of the following benefits:-

1. **Hospital Cash:** The Policy shall pay a fixed cash benefit of Rs.1000 for each 24 hours of Hospitalisation to cover incidental expenses; subject to a maximum of 10 days stay per annum per insured 2. Me**dical Second Opinion**

You may seek a second medical opinion through this service for any life threatening or serious condition for which you/any of the Insured Person under the policy is advised to under go a covered surgery ,service.. This second opinion will be provided by the **world leading specialis**ts in that condition, with the second opinion provider undertaking the facilitation of data gathering, accessing the specialist and providing the relevant feedback

3. **No Medical Examination:** required up to the age of 49.

4. **Tax Benefit:** Premium eligible tax benefits under Section 80D of the Income Tax Act, up to Rs.15, 000/- per year.

What is the coverage amount?

The maximum coverage for each Insured person per annum under this policy is stated below

Surgicare Plan		
Plan Type	Type 1	Type 2
Period of Insurance	2 years	3years
Surgicash Benefit	Rs.300000/-	Rs.150000/- or Rs.200000/- as per plan
Hospital Cash Benefit	Rs.10000/-	Rs.10000/-

Sugical Cash benefit gets increased by 10% of original benefit for every two years.There is no such increase for Hospital Cash benefit.

Following are the maximum limits for all the benefits described above:

Per Insured

Number of Surgeries covered during first 2 years Number of Surgeries covered after 2 years	100 140
Category	**Benefit in % age**
Category 1	100% of the applicable Sum Insured
Category 2	50% of the applicable Sum Insured
Category 3	25% of the applicable Sum Insured
Category 4	10% of the applicable Sum Insured

Who is eligible for the coverage?

You must satisfy the following conditions:

Parameter	Eligibility
Age at entry (Self & Spouse)	18 - 65 years(Renewable Lifelong)
Age at entry (Children)	91 days – 21 years
Proposing Insurance of Self	Not Mandatory
Proposing Insurance of Spouse	Optional but subsequent inclusion is not possible except in case of newly wedded.

Proposing Insurance of all dependent children	Optional but subsequent inclusion is not possible except in case of child less than 90 days at time of proposal and new born child

What do I need to do?

Understand fully well the features,benefits and exclusions of the policy. If you propose yourself and/or spouse and children you need to answer for a simple question about state of health of yourself and your family members. You need to undergo certain medical examination if you are above 49 years of completed age on date of proposal.

What do I need to pay?

If your proposal is accepted by us you need to pay the premium as per table given below according to plan selected and completed age.of each Proposed Person. The premium is inclusive of applicable service tax/education cess as per the prevailing rates. Premium will be subject to change due to change in these taxes and fees. Renewal premium will be informed to you.

2 Years		
Sum Insured	**300,000**	
Age Band	**Male**	**Female**
91 days - 4 Yrs	2,393	1,858
5 Yrs - 17 Yrs	2,251	1,663
18 Yrs - 23 Yrs	4,313	2,686
24 Yrs	4,872	3,160
25 Yrs - 28 Yrs	5,054	3,307
29 Yrs	5,465	3,829
30 Yrs - 33 Yrs	5,517	3,968
34 Yrs	5,797	4,593
35 Yrs - 38 Yrs	5,802	4,603
39 Yrs	7,085	5,710
40 Yrs - 43 Yrs	7,108	5,920
44 Yrs	8,752	6,927
45 Yrs - 48 Yrs	8,842	7,066
49 Yrs	12,419	8,512
50 Yrs - 53 Yrs	13,790	10,086
54 Yrs	17,236	11,904
55 Yrs - 58 Yrs	17,707	12,194

59 Yrs	24,527	14,694
60 Yrs	25,228	15,052

Including 12.36% service tax

3 Years*		
Sum Insured	1,50,000	
Age Band	Male	Female
91 days - 4 Yrs	2091	1819
5 Yrs - 17 Yrs	2392	1894
18 Yrs - 21 Yrs	4104	2694
22 Yrs	4351	2906
23 Yrs	4580	3106
24 Yrs	4781	3279
25 Yrs - 26 Yrs	4846	3331
27 Yrs	5028	3567
28 Yrs	5200	3791
29 Yrs	5349	3985
30 Yrs - 31 Yrs	5368	4032
32 Yrs	5488	4327
33 Yrs	5602	4607
34 Yrs	5700	4847
35 Yrs - 36 Yrs	5702	4852
37 Yrs	6264	5364
38 Yrs	6796	5845
39 Yrs	7256	6264
40 Yrs - 41 Yrs	7269	6341

Including 12.36% service tax

3 Years*		
Sum Insured	2,00,000	
Age Band	Male	Female
91 days - 4 Yrs	2360	2007
5 Yrs - 17 Yrs	2751	2103
18 Yrs - 21 Yrs	4961	3127
22 Yrs	5279	3402
23 Yrs	5581	3660
24 Yrs	5839	3883
25 Yrs - 26 Yrs	5925	3950
27 Yrs	6161	4254
28 Yrs	6384	4542
29 Yrs	6577	4786
30 Yrs - 31 Yrs	6601	4850
32 Yrs	6757	5223
33 Yrs	6907	5571
34 Yrs	7038	5874
35 Yrs - 36 Yrs	7042	5881
37 Yrs	7774	6530
38 Yrs	8465	7144
39 Yrs	9063	7675
40 Yrs - 41 Yrs	9079	7774

42 Yrs	7980	6796
43 Yrs	8652	7227
44 Yrs	9235	7599
45 Yrs - 46 Yrs	9271	7652
47 Yrs	10819	8284
48 Yrs	12281	8877
49 Yrs	13545	9393
50 Yrs - 51 Yrs	14351	10269
52 Yrs	15840	11036
53 Yrs	17243	11757
54 Yrs	18458	12384
55 Yrs - 56 Yrs	18628	12489
57 Yrs	21602	13580
58 Yrs	24407	14606
59 Yrs	26841	15498
60 Yrs - 61 Yrs	27100	15629
62 Yrs	28471	16856
63 Yrs	29766	18011
64 Yrs	30888	19015
65 Yrs - 68 Yrs	31086	19185

42 Yrs	10011	8359
43 Yrs	10892	8912
44 Yrs	11654	9388
45 Yrs - 46 Yrs	11698	9456
47 Yrs	13729	10280
48 Yrs	15645	11057
49 Yrs	17304	11729
50 Yrs - 51 Yrs	18134	12653
52 Yrs	20090	13671
53 Yrs	21931	14633
54 Yrs	23526	15462
55 Yrs - 56 Yrs	23747	15598
57 Yrs	27634	17022
58 Yrs	31300	18365
59 Yrs	34473	19527
60 Yrs - 61 Yrs	34804	19698
62 Yrs	36557	21300
63 Yrs	38212	22811
64 Yrs	39642	24122
65 Yrs-68 Yrs	39891	24336

How do I pay my Premium?

- You can choose to pay the premium in full by a cheque or demand draft in favour of “Royal Sundaram General Insurance Company Limited” or by Credit Card.

When does the coverage start?

- Coverage commence from the date the company has received the premium with respect to the lives insured.

How can my coverage end?

The coverage shall end on occurrence of any one of the instances as mentioned in the table below.

Event	Parameter
End of coverage term	After 2 years or 3 years of policy inception (as per the plan selected)
If you Opt to cancel the coverage	Premium would be refunded as per the grid short period scales

What document will I get as a proof of Insurance?

A Certificate of Insurance (COI) issued to you by the company, can be used as a proof of payment of premium to claim a benefit under the prevailing taxation laws. You would also get the Health Cards and the policy terms and conditions towards the insurance policy along with the Health Kit.

What is the claim process?

- All claims under this policy are administered by a Third Party Administrator (TPA) appointed by the company.
- It is necessary that all claim intimation is sent to TPA & all claim documents are submitted to TPA.

Claims Process at Network Hospitals

All Claims at Network Hospitals should be preauthorised by the Third Party Administrator of the Company. Preauthorisation of a claim allows cashless access at the Network Hospital. In case of hospitalisation, the treating hospital will send a completely filled 'Preauthorisation Request Form' to the nearest office of the TPA. Preauthorisation is completed upon issuance of an Authorisation Letter by the TPA.

For planned surgical admissions, preauthorization would be provided up to 96 hours prior to admission.

If the actual cost incurred by the Insured is lower than the entitled benefit amount, the Policy Holder/Insured shall be entitled to the difference as cash payout. Any Claims for cash payout should be reported to the TPA within 30 days from the date of discharge.

Claims process at Non-Network Hospitals Reporting of Claim –

All claims should be reported to the TPA within 30 days from the date of discharge from the hospital along with following documents.

Claims Document Submission

- Duly completed and signed claim form,
- original or attested photo copies of bills, receipts, discharge summary sheet, pathological and investigation reports with Dr. Prescriptions.
- X ray films , Scan films if necessary

- Copies of First Information Report (FIR) and Medico Legal Certificate (MLC) where required.
- Self Declaration as to When, Where and how the accident/injury happened
- and any other relevant details & documents, indoor case records if specifically sought by Us pertaining to the Hospitalisation.

The claim documents should be sent to:
Health Claims Department
M/s Royal Sundaram General Insurance Co. Limited
(Formerly known as Royal Sundaram Alliance Insurance Company Limited)
Corporate office,
Vishranthi Melaram Towers,
No. 2 / 319, Rajiv Gandhi Salai (OMR)
Karapakkam, Chennai – 600097
Phone: 044-7117 - 7117

Emergency Hospitalisation

In emergency, if the Insured gets admitted to a Network Hospital, the Hospital would then contact the TPA and request for the Authorisation.

For emergency claims on the network, the pre-authorization process would include a specific processing queue with an enhanced Turn Around Time.

Claims for Hospital Cash Benefit (section C, article 2.1 of policy) are payable after discharge from the Hospital and should be claimed along with excess cash payout (if any) arising from Surgical Benefit (section C, article 1.1 of policy). All such claims should be submitted to the TPA within 30 days from the date of discharge.

TAT for hospitalization in a Network hospital.
1. 3 Hours for emergency hospitalization.
2. 6 Hours for normal hospitalization.
3. 48 Hours for planned hospitalization.

Medical Second Opinion
Process for Medical second opinion
- Customer Calls dedicated Medical Second opinion number.
- TPA verifies the membership ID.
- Qualifying medical condition (QMC) verified.
- TPA sends consent forms to Customer along with list of medical centre.
- Customer sends the signed forms, relevant medical reports and preferred medical centre.
- Records send to selected WLMC (World leading medical centre).
- Medical Second option from WLMC sent to TPA.
- TPA sends Medical Second option to Customer.

Payment of Benefits
- The benefits payable under this Policy shall be payable only in Indian Rupees in India subject to the Policy terms, conditions, limitations and exclusions. If the Policy Holder dies, the benefits are paid to the Nominee/legal heirs.
- Benefits payable under this policy will be paid within 30 days of the receipt of last necessary document
- 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 the date of acceptance.

- At the time of claim settlement, Company may insist on KYC documents of the Proposer as per the relevant AML guidelines in force.

What is unique about this Insurance apart from what have been explained above?

Surgicare comes to you along with a guarantee for coverage for lifetime subject to payment of prevailing renewal premium.

What are the exclusions?

a) Surgeries due to Pre Existing condition

b) Treatment which is either not taken from recognised Hospitals or not taken under the supervision of a registered Medical Practitioner.

c) Treatment by any Medical Practitioner acting outside the scope of licence or registration granted to him by any Medical Council

d) Any surgical procedure carried out on account of opportunistic conditions associated with HIV/AIDS, AIDS Related Complex Syndrome (ARCS) and sexually transmitted diseases.

e) Where the surgery is being undertaken to correct congenital or hereditary diseases / internal or external physical defects.

f) Any cosmetic, plastic surgery, aesthetic or related treatment of any description, including laser surgery for power correction,myopia, hyper metropia, astigmatism and any complication arising from these treatments, whether or not for psychological reasons, unless medically necessary as a result of an accident.

g) Suicide or attempted suicide or intentional self inflicted injury, by the Insured, whether sane or not at the time

h) Insured being under the influence of drugs, alcohol, narcotics or psychotropic substance, not prescribed by a registered Medical Practitioner and surgical procedure necessitated due to Atherosclerosis, Ischemic Heart Disease, Coronary Artery Disease, hemorrhagic stroke, ischemic stroke, Chronic Obstructive Pulmonary Disease, Chronic Obstructive Airway Disease, Emphysema, Chronic Bronchitis, Buerger's Disease (Thromboangitis Obliterans) All types of pre malignant conditions /cancer in situ, oral cancer, Leukoplakia, Larynx cancer, Cancer of Oesophagus, Stomach, Kidney, Pancreas and Cervical Cancers, resulting from, or related to tobacco abuse only.

i) Service in the military / Para-military , naval, air force or police organizations of any country in a state of war (declared or undeclared) or of armed conflict

j) Admission into a hospital for pregnancy and childbirth, pregnancy complications such as toxemia, or hyperemesis gravidarum, abortion, ectopic pregnancy.

k) Any birth control procedures and/or hormone replacement therapy, contraceptive measures, fertility tests and invitro fertilization.

l) Prosthesis, corrective devices, durable medical equipments and items and medical appliances/apparatus/machines, which are not required intra-operatively.

m) Participation by the Insured in any flying activity other than as a bonafide passenger (whether paying or not), in a licensed aircraft provided that the Insured does not, at that time, have any duty on board such aircraft.

n) Insured engaging in or taking part in professional sport (s) or competitive sports or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee-jumping

o) Admission into a hospital for an organ transplant procedure, where the Insured himself acts as a donor

p) Any covered Surgical Procedure necessitated as a result of the Insured committing any breach of law

q) War, invasion, act of foreign enemy, war like operations whether war be declared or not.

r) Treatment by

1. a family member of the Insured, even though the family member may be a registered Medical Practitioner.
2. self-medication by Insured, even though the Insured may be a registered Medical Practitioner.
3. Non Allopathic means

s) Any act of terrorism

t) Nuclear weapons, materials ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.

u) Experimental and unproven treatment, any Illness or Injury caused by or as result or consequence of undergoing of any experimental or unproven treatment, diagnostic tests and treatment not consistent with or incidental to the usual diagnosis and treatment of any Illness or Injury for which Hospitalization is required.

v) Cost incurred towards non-allopathic treatment even if the treatment is administered and/or recommended by an allopathic medical practitioner.

w) Treatment received outside India.

x) Any travel or transportation expenses

How is indexation applicable under the policy?

A simple indexation of 10 is applicable, on the SI and the Surgical Cash payable, every two years, with a life time maximum cap of INR 600,000 per Insured. However this indexation benefit does not change the life time maximum SI (as mentioned in 3.0 of policy) payable.

What is the Lifetime Maximum Sum Insured Limit under the policy?

The lifetime maximum Sum Insured Limit shall be capped at 4 times the annual Sum Insured at nception of first policy in respect of each Insured.

What are the conditions of Renewal ?

i. This Policy will automatically terminate at the end of the Policy Period. This Policy is ordinarily renewable on mutual consent for life, subject to application of Renewal and realization of Renewal premium. All Renewal application should reach Us on or before the Policy Period End Date.

ii. We may in Our sole discretion, revise the Product and Renewal premium payable under the Policy provided that revision to the Renewal premium are in accordance with the IRDAI rules and regulations as applicable from time to time. Renewal premiums will not alter based on individual claims experience. We will intimate You of any such changes at least 3 months prior to date of such revision or modification.

iii. The premium payable on renewal shall be paid to Us on or before the Policy Period End Date and in any event before the expiry of the **Grace Period**. For the purpose of this provision, Grace Period means a period of 30 days in case of one year immediately following the Policy Period End Date during which a payment can be made to renew this Policy without loss of continuity benefits such as Waiting Periods and coverage of Pre Existing Diseases.

iv. Renewal of the Policy will not ordinarily be denied other than on grounds of moral hazard, misrepresentation or fraud or non-cooperation by You.

v. We reserve the right to carry out underwriting in relation to any alterations like increase/decrease in Sum Insured, change in plan/coverage, addition/deletion of members, addition/deletion of Medical Conditions, request at the time of Renewal of the Policy. Any request for acceptance of changes on renewal will be subject to underwriting. The terms and conditions of the existing Policy will not be altered.

vi. This product may be withdrawn by Us after due approval from the IRDAI. In case this product is withdrawn 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 You regarding the withdrawal of this product and the options available to You at the time of Renewal of this Policy.

vii. This Policy is a 2 years or 3 years policy. The policy is renewed once in 2 years or 3 years by payment of premium.

Can the Sum Insured be enhanced?

Change in Sum Insured is not allowed both during currency of the policy and also during subsequent renewals.

Does the policy provides for transfer of interest?

Transferring of interest in this Policy to anyone else is not allowed.

What are the cancellation provisions?

The Company may at any time cancel the Policy on grounds of misrepresentation, fraud, nondisclosure of material fact of the insured or non-cooperation by the insured by sending seven days notice in writing by Registered A/D to the insured at his last known address in which case the Company shall not refund to the insured any portion of the premium.

The insured may at any time cancel this policy and in such event, the Company shall allow refund of premium less premium at Company's short period rate table given below provided no claim has occurred upto the date of cancellation

Short period rates:

Short Period Scale for 2 Years

For a period not exceeding	30 days	10% of the Premium paid
For a period not exceeding	2 months	15% of the Premium paid
For a period not exceeding	4 months	30% of the Premium paid
For a period not exceeding	6 months	40% of the Premium paid
For a period not exceeding	8 months	50% of the Premium paid
For a period not exceeding	10 months	60% of the Premium paid
For a period not exceeding	12 months	70% of the Premium paid
For a period not exceeding	14 months	75% of the Premium paid
For a period not exceeding	16 months	80% of the Premium paid
For a period not exceeding	18 months	85% of the Premium paid
For a period exceeding	18 months	Full Premium paid

Short Period Scale for 3 Years

For a period not exceeding	1 month	10% of premium
For a period not exceeding	3 months	20% of premium
For a period not exceeding	6months	25% of premium
For a period not exceeding	12 months	30% of premium
For a period not exceeding	13 months	40% of premium
For a period not exceeding	15 months	50% of premium
For a period not exceeding	18 months	60% of premium
For a period not exceeding	24 months	70% of premium

For a period not exceeding	25 months	75% of premium
For a period not exceeding	27 months	80% of premium
For a period not exceeding	30 months	90% of premium
For a period exceeding	30 months	Full Premium

What is the Geographical Area covered under the policy?

The cover granted under this insurance is valid for treatments taken in India only.

What are the Company's Rights?

We have the right to do the following, in Insured Person's name at Our expense:
- Take over the defense on settlement of any claim.
- Start legal action to get compensation from anyone else.
- Start legal action to get back from anyone else for payments that have already been made by Us.

What are the conditions associated with fraud?

If any claim is in any respect fraudulent, or if any fraudulent means or devices are used by the Insured Person or anyone acting on his behalf to obtain any benefit under this Policy, all benefits under this Policy will be forfeited and the Company may choose to void the Policy and reclaim all benefits paid in respect of such Insured Person.

Is there a Free Look-in provision under the policy?

At the inception of the policy the Insured Person will be allowed a period of 30 days 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:
a) 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;
b) 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;
c) Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.
d) Free-look will not be applicable for policies with tenure less than one year.
e) 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.

Is my Surgicare policy portable?

The insured Person will have the option to port the policy to other insurers as an extant Guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance plan with an Indian General/Health insurer as per

Guidelines on portability, the proposed Insured Person will get all the accrued continuity benefits in waiting periods as under:

i. The waiting periods as specified in Section D shall be reduced by the number of continuous preceding years of coverage of the Insured Person under the previous health insurance policy.
ii. Portability benefit will be offered to the extent of sum of previous sum insured and accrued bonus (as part of the base sum insured), portability benefit shall not apply to any other additional increased Sum Insured.

For Detailed Guidelines on Portability, kindly refer the below link: -

https://www.royalsundaram.in/health-insurance/health-insurance-portability

Moratorium Period

After completion of five continuous years under this policy no look back would be applied. This period of five years is called as moratorium period. The moratorium would be applicable for the Sum Insured of the first policy and subsequently completion of five continuous years would be applicable from the date of enhancement of sum insured only on the enhanced limits. After the expiry of Moratorium Period no claim under this policy shall be contestable except for proven fraud specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments as per the policy. The accrued credits gained under the ported and migrated policies shall be counted for the purpose of calculating the Moratorium period.

Claims in respect of Multiple Policies

If multiple certificates are issued under the same Group policy or across multiple group policies in the name of same person issued by us 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.

Migration

The Insured Person will have the option to migrate the Policy to other health insurance products/plans offered by the company as per extant Guidelines related to Migration. If such person is presently covered and has been continuously covered without any lapses under any health insurance product/plan offered by the company, as per Guidelines on migration, the proposed Insured Person will get all the accrued continuity benefits in waiting periods as per below:

i. The waiting periods specified in Section D shall be reduced by the number of continuous preceding years of coverage of the Insured Person under the previous health insurance policy.
ii. Migration benefit will be offered to the extent of sum of previous sum insured and accrued bonus/multiplier benefit (as part of the base sum insured), migration benefits shall not apply to any other additional increased Sum Insured.

For Detailed Guidelines on Migration, kindly refer the below link:-
https://www.royalsundaram.in/html/files/Modification-guidelines-on-standardization-in-health-insurance-Migration.pdf

Prohibition of rebates:

Section 41 of the Insurance Act 1938

No person shall allow or offer to allow, 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 prospectuses or table of the insurer Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

Grievance Redressal:

In case of any grievance the insured person may contact the company
through Website: https://www.royalsundaram.in
Grievance Redressal: https://www.royalsundaram.in/customer-service
You may call us at – 1860 258 0000, 1860 425 0000

Email:
Please raise a complaint with us through e mail – care@royalsundaram.in, and we would come back to you with a response in 24 hours.
In case you are not satisfied with our response or have not received any response in 24 hours, you may write to manager.care@royalsundaram.in
If you feel you are not heard of or have not received any response in 2 business days, you may escalate it to head.cs@royalsundaram.in
In case you are not happy with our response or have not received any response in 2 business days, you may approach gro@royalsundaram.in - GRO Contact Number – 7228087400

Sr. Citizen can email us at : seniorcitizengrievances@royalsundaram.in - Senior Citizen Grievance Number - 7228933501 (A separate e-mail id for Senior Citizens has been created for the ease and convenience of Senior citizens)

Fax us at: 044 – 7117 7140
Courier us your complaint at:
Royal Sundaram General Insurance Co. Limited
Vishranthi Melaram Towers,
No.2/319, Rajiv Gandhi Salai (OMR)
Karapakkam, Chennai – 600097

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
Mr. T M Shyamsunder
Grievance Redressal Officer
Royal Sundaram General Insurance Co. Limited
Vishranthi Melaram Towers,
No.2/319, Rajiv Gandhi Salai (OMR)
Karapakkam, Chennai – 600097

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

Insurance Ombudsman addresses -https://www.cioins.co.in/ContactUs

Grievance may also be lodged at –
Registration of Complaints in Bima Bharosa by Policyholders:
Can directly register complaint in the **Bima Bharosa Portal** https://bimabharosa.irdai.gov.in/
Can send the complaint through Email to complaints@irdai.gov.in.
Can call Toll Free No. **155255** or **1800 4254 732**.

Apart from the above options, if it is felt necessary by the complainant to send the communication in physical form, the same may be sent to IRDAI addressed to:
General Manager
Insurance Regulatory and Development Authority of India(IRDAI)
Policyholder's Protection & Grievance Redressal Department – Grievance Redressal Cell. Sy.No.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad – 500 032.

No loading shall apply on renewals based on individual claims experience.
Insurance is the subject matter of solicitation.

Council for Insurance Ombudsmen

Contact details:
Address:
Council for Insurance Ombudsmen,
3rd Floor, Jeevan Seva Annexe,
S. V. Road, Santacruz (W),
Mumbai - 400 054.

INSURANCE OMBUDSMAN OFFICE LIST
The contact details of **Insurance Ombudsman Office** details are as below:
https://www.cioins.co.in/ContactUs

WHAT IF I EVER NEED TO COMPLAIN?

We hope, of course, that you will never feel the need to complain. Nevertheless, sometimes things do go wrong. When they do, we want to know straight away, so we can put them right as quickly as possible, and take steps to make sure they don't happen again.

In all instances, call our Customer Services at our Chennai office at 1860 258 0000 or e-mail at care@royalsundaram.in or write us to Royal Sundaram General Insurance Co. Limited, Vishranthi Melaram Towers, No. 2 / 319, Rajiv Gandhi Salai (OMR), Karapakkam, Chennai - 600097.

Royal Sundaram General Insurance Co. Limited

IRDAI Registration No.102. | CIN: U67200TN2000PLC045611