Group personal Accident, ICICI Lombard

Customer Information Sheet / Know Your Policy (Description is illustrative and not exhaustive)

This document provides key information about your policy. You are also advised to go through your policy document.

S.No.	Title	Description			Policy Clause Number
1	Name of insurance Product/Policy	**Group Personal Accident, ICICI Lombard**			
2	Policy Number	XXXX/XXXXXX/XX/XXXX			
3	Type of insurance Product/Policy	**Indemnity and / Or Benefit-** Indemnity (Where insured losses are covered up to the sum insured under the policy) Benefit (Where an Insurance Policy pays a fixed amount under the policy on the occurance of a covered event) Both Indemnity and Benefit (where policy has elements of both the above)			
4	Sum insured (Basis) (Along with the Amount)	INR XX,XXXX Individual Sum Insured Or Floater Basis Individual Sum Insured -Where each member has a separate sum insured under the policy), or Floater Sum Insured-Where all members under the policy have a single sum insured limit which may be utilized by any or all members			
		Cover Name	Cover definition	Payout	Policy Clause No.
5	Policy Coverage (what the policy Covers?) (Policy Clause Number/s)	**Accidental death**			Section 1
		Permanent total disablement			Section 2
		Permanent partial disablement			Section 3
		Temporary total disablement			Section 4
		Fracture dislocation broken bones			Section 5
		Burns			Section 6
		Comatose benefit			Section 7
		Disappearance			Section 8
		Adventure sports benefit			Section 9
		Inhospital medical expenses inpatient			Section 10
		In hospital medex inpatient			Section 11
		Outpatient medical expenses			Section 12
		Outpatient medex opd			Section 13
		Hospital cash			Section 14
		Home convalescence			Section 15
		Rehabilitation cover			Section 16
		Reconstructive surgery cover			Section 17
		Follow up medical trip			Section 18

		External aids and appliances		Section 19
		Purchase of blood		Section 20
		Assault		Section 21
		Animal attack		Section 22
		Common carrier		Section 23
		Last rites costs		Section 24
		Transportation of mortal remains		Section 25
		Hostage release fees		Section 26
		Home and vehicle modification		Section 27
		Ambulance cost		Section 28
		Air ambulance		Section 29
		Spouse or dependent child consolation benefit		Section 30
		Insured and family counselling cover		Section 31
		Medical evacuation cover		Section 32
		Dependent child education benefit		Section 33
		Widowhood benefit		Section 34
		Home tuition benefit		Section 35
		Parental care benefit		Section 36
		Compassionate visit		Section 37
		Loss of job cover		Section 38
		Personal belonging		Section 39
		Legal expenses		Section 40
		Emi protection cover		Section 41
		Health insurance premium indemnity		Section 42
		Dependent childs marriage benefit		Section 43
		Transportation of imported medicine		Section 44
6	What are the Major exclusions in the policy	General Exclusions The Company shall not be liable to make any payment for any claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following: Any Pre-existing Condition(s) and complications arising out of or resulting therefrom; Through suicide, attempted suicide (whether sane and insane) or intentionally self-inflicted injury or illness, including abstinent from a normal behavior of having food. Whilst engaging in Adventure Sports. The list of adventurous sports are Water Rafting, Wildlife/Jeep Safaris, Trekking, Camping, Boat safaris, Parasailing, Paragliding, Elephant/Camel/Horse/Yak Safaris, Cycling, House Boat stays, Motor Bike tours, Kayaking, Rock Climbing, Artificial Wall Climbing, Bungee Jumping, Paintball, Suba Diving, Hot Air Ballooning, Canoeing, Mountain Biking, Rappelling, Snorkeling, Zip wires & high Rope course, Abseiling, Surfing, Water Skiing, Skiing, Caving, Self-Drive tours, Mountaineering/Hiking, All Terrain Vehicle, Hang Gliding, Snowboarding, Ultra-Light flying, Heli-skiing, Sky Diving. . While under the influence of liquor or drugs , alcohol or other intoxicants, Through deliberate or intentional, unlawful or criminal act, error, or omission, participation in an actual or attempted felony, riot, crime,		As per exclusions section of the Policy wordings

		misdemeanor, civil commotion, Whilst engaging in aviation, whilst mounting into, dismounting from or traveling in any aircraft other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world, Whilst participating as the driver, co-driver or passenger of a motor vehicle during motor racing or trial runs, As a result of any curative treatments or interventions that you carry out or have carried out on your body, including alternative forms of medicines like chiropractic treatments etc. Arising out of your participation in any police ,naval, military or air force operations whether peace or in war in the form of military exercises or war games or actual engagement with the enemy, Whether foreign or domestic, Your consequential losses of any kind or your actual or alleged legal liability. Venereal or sexually transmitted diseases, other dangerous properties of any explosive nuclear equipment or any part of that equipment, Operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft; or Scheduled Airlines No benefit would be paid under this policy, unless the nature & extent of injury is established medically with appropriate investigation reports & certified by the treating doctor While engaged in hazardous activity unless specifically covered under the policy Expenses incurred on neck belts, wrist bandages, walking sticks, abdomen belts, CPAP and any other similar external aid /devices, the use of which has been necessitated following an accident unless specifically covered under the policy Additional exclusions applicable to the Medical Sections Vaccination and inoculation of any kind unless forming part of treatment for Injury due to an Accident as prescribed by the Medical Practitioner. Vitamins and tonics unless forming part of treatment for Injury due to an Accident as prescribed by the Medical Practitioner. Charges related to Aesthetic treatment, cosmetic surgery and plastic surgery unless specifically covered under the policy. Treatment taken from persons not registered as Medical Practitioners under respective Medical Councils. Any other medical or surgical treatment except as may be necessary solely as a result of Injury. Dental treatment or surgery of any kind unless as a result of Accidental Bodily Injury to Pregnancy, resulting childbirth, maternity expenses, miscarriage, abortion, or complications arising out of any of these, War (whether declared or not), civil war, invasion, act of foreign enemies, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrest, restraint or detainment, confiscation or nationalization or requisition of or damage by or under the order of any government or public local authority, or Ionising radiation	

		or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel, The radioactive, toxic, explosive or natural teeth and subject to Inpatient &/ or Outpatient Hospitalization Treatment being specifically covered under the policy. Experimental, unproven or non-standard treatment. (Note: The above is only a partial listing of the policy exclusions. Please refer to the policy clauses for the full listing)	
7	Waiting period Time period during which specified diseases/treatments are not covered It is counted from the beginning of the policy coverage.	Not applicable	
8	Financial limits of coverage Sub-limit (It is a predefined limit and the insurance company will not pay any amount in excess of this limit) Co-payment (It is a specified amount/percentage of the admissible claim amount to be paid by policyholder/insured). Deductible (It is a specified amount: up to which an insurance company will not pay any claim, and which will be deducted from total claim amount claim amount is more	Should fetch from Special conditions of the policy schedule	

	than the specified amount) iv. Any other limit (as applicable)		
9	Claims and Claims procedure	Insured Person/Insured Person's representative should intimate the claims within 7 working days upon occurrence of the event. For emergency hospitalization claims, the Insured Person must provide notification of claim within 48 hours of admission to the Hospital or before discharge from the Hospital, whichever is earlier. The Notification of Claim should be ideally provided by the Insured Person or his representative. In the event Insured Person is unwell, then the Notification of Claim should be provided by Insured Person's representative. However, if there is a genuine reason for delay in intimation, the Company shall not enforce any penalty if the admissibility of the claims is not contested upon. • Upon the happening of any event giving rise or likely to give rise to a claim under this policy, the Insured shall intimate and register the claim with the Company on our 24x7 toll free helpline 18002666 and in writing at Our address. • The list of documentation required is provided under each specific Section. • The Insured shall intimate the claims with all the necessary documents to Our claim processing team immediately and in any event within 7 days of the event giving rise to a claim. Benefits payable under this policy will be paid within 15 days of the receipt of claim along with claim form and required documents • Customer to send documents to Company at :- ICICI Lombard General Insurance Company Limited 1st, 4th (Half) , 5th and 6th floors, Varun Towers- II , Opp. Hyderabad Public school , Begumpet, Hyderabad District Hyderabad , Pin code -500016 Download the Claim Form here https://www.icicilombard.com/downloads Find our extensive list of hospitals providing services on our website https://www.icicilombard.com/health-insurance/health-claim/partner-hospital or on the IL TakeCare App. List of excluded providers/delisted hospitals is available on our website https://www.icicilombard.com/docs/default-source/apps/healthclaims/assets/files/delisted-hospital-list.pdf	SECTION 6
10	Policy Servicing	You may contact us on our Toll Free no: 1800 2666, or email to customersupport@icicilombard.comor use our IL TakeCare	

		App or send a Hi to RIA, our Responsive Intelligent Assistant on WhatsApp (7738282666) for policy services. For details of Company officials kindly visit our website https://www.icicilombard.com/customer-support.	
11	Grievances/Complaints	ln case of any grievance the insured person may contact the Company through Website: www.icicilombard.com Toll free: 1800 2666 Email: customersupport@icicilombard.com ICICI Lombard General Insurance Co. Ltd. Ground floor- Interface 11, Sixth floor- Interface 16 , Office no 601 & 602, New linking Road, Malad (West), Mumbai – 400064 There is an interactive voice response (IVR) facility for senior citizens' grievance redressal for easy and faster resolution lnsured person may also approach the grievance cell at any of the company's branches with the details of grievance. For branch details, please visit https://www.icicilombard.com/docs/default-source/policy-wordings-product-brochure/final-gro-mapping.pdf. lf lnsured person is not satisfied with the redressal of grievance ,insured person may contact the grievance redressal officer at the details provided in the below link: https://www.icicilombard.com/grievanceredressal.com lf lnsured person is not satisfied with the redressal of grievance, the insured person may also approach Insurance Regulatory and Development Authority of India (IRDAI) through the Bima Bharosa Portal - https://bimabharosa.irdai.gov.in/ or IRDA Grievance Call Centre(IGCC) at their toll free no. 1800 4254 732 / 155255 Insured may also approach Insurance Ombudsman, subject to vested jurisdiction, for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDAI website: www.irdai.gov.in, or on the Company's website at www.icicilombard.com or on https://www.cioins.co.in/Ombudsman	SECTION 5
12	Things to remember	**Free Look Period:** Free look period: Every insured of new health insurance policies, except for those policies with tenure of less than a year, shall be provided a free look period of 30 days beginning from the date of receipt of policy document, whether received electronically or otherwise, to review the terms and conditions of such policy. If the insured cancels the policy within free look period then the insured shall be entitled to a refund of the premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the	

		expenses, if any, incurred by the insurer on medical examination of the insured and stamp duty charges.Renewal Conditions Under the group variant of the product, the Company may charge addition loading on the policy premium at renewal based on claim experience. The renewal premium for this policy will not change unless we have revised the premium. The premium will only change if there is a change in the plan or change in the Sum Insured. i. The Company shall endeavour to give notice for renewal.. ii. Renewal shall not be denied on the grounds that the insured person had made a claim or claims in the preceding policy years. iii. Request for renewal along with requisite premium shall be received by the Company before the end of the Policy Period. iv. At the end of the Policy Period, the policy shall terminate and can be renewed with in the Grace Period of 30 days to maintain continuity of benefits without Break in Policy. Coverage is not available during the grace period. **Change in Sum Insured**: Sum Insured can be changed (increased/decreased) only at the time of renewal or at any time, subject to underwriting by the company. For increase in SI, the waiting period if any shall start afresh only for the enhanced portion of the sum insured **Moratorium Period**: : After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the company on grounds of non-disclosure, misrepresentation, except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever, the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits.Withdrawal of Policy i. ln the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the policy. ii. lnsured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting periodas per regulatory prescriptions, provided the policy has been maintained without a break."
13	Your Obligations	• Please disclose all material information (Including Pre-Existing Diseases) before buying the policy.Non disclosure may affect the claim settlement. Any changes in the exposure /Sum insured/ Occupancies of the insured members during the policy tenure should be immediately notified to the insurer. • Cooperation from the Insured/claimant is solicited in providing all or sufficient documents as per the claims procedure in support of claim.

Declaration by the policy holder:

I have read the above and confirm having noted the details

Place

Dated Signature

In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.

The product related documents including the Customer Information sheet are available on the website at https://www.icicilombard.com/downloads