Customer Information Sheet/ Know Your Policy

This document provides key information about your policy. You are advised to go through your policy document. Description is illustrative and not exhaustive.

S.no.	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1.	**Name of Insurance Product/Policy:** Overseas Group Travel Insurance	
2.	**Policy Number:** XXXXXX	
3.	**Type of Insurance Product/Policy:** Both Indemnity and Benefit	
4.	**Sum Insured (Basis):** Individual Sum Insured -USD XXX -Where each member has a separate sum insured under the policy)	
5.	**Policy Coverage (What the policy covers?):** **Medical Expenses Cover** Hospitalization due to an accidental injury or illness during the policy period **Transportation** Covers additional expenses for medically necessary transportation from a foreign country to the insured's permanent residence in India, provided it is deemed essential by the Third Party Administrator and incurred due to an insurable event. **Balanced Period of Policy +30 days** If, during the remaining period of the policy plus 30 days, the Third Party Administrator recommends continued treatment in India, the company will cover medical expenses incurred in India for an illness or bodily injury contracted abroad within the insurance period. **Repatriation of Remains** –	Benefit 1

	Costs of transporting the deceased insured's remains to India or, up to an equivalent amount, for local burial or cremation, subject to the specified maximum limit and applicable deductible excess for each claim.	
	Dental Treatment – Covers acute anesthetic treatment of natural teeth during a trip reimbursed up to the specified limit.	Benefit 2
	Total Loss of checked in Baggage- Compensation for total loss of checked in baggage during trip abroad, limited to destinations in the main travel ticket.	Benefit 3
	Delay of Checked-In Baggage Fixed payout in case the checked-in baggage is delayed beyond the period specified in policy certificate.	Benefit 4
	Loss of Passport Reimbursement for actual expenses necessarily and reasonably incurred in connection with obtaining a duplicate or fresh passport.	Benefit 5
	Personal Liability Payment of legal liability to a third party during the covered trip arising out of bodily or property damages to third party.	Benefit 6
	Personal Accident- Compensation for personal accidents i.e. a sudden external event or injuries from excessive exertion during a Trip abroad.	Benefit 7
	Trip Cancellation & Interruption Indemnification for financial losses due to trip cancellation due to earthquake, storm, terrorism etc.	Benefit 8
	Replacement & Rearrangement of staff Covers reasonable travel & accommodation expenses for staff replacement or rearrangement due to disablement, death of a close associate, compulsory quarantine etc.	Benefit 9
	Financial Emergency Assistance Assistance service provided in case you are left with no travel funds following an incident of theft, robbery, larceny etc. during the policy period	Benefit 10

6.	**GENERAL EXCLUSIONS - APPLICABLE TO ALL COVERS UNDER THE POLICY (What does the policy not cover):** • Exclusions for events occurring before policy commencement or outside the coverage period. • Restrictions for travel against medical advice, specified treatment, terminal prognosis, or military operations. • Exclusions for intentional harm, criminal acts, war-related incidents, and terrorism. • Damages from ionizing radiation, nuclear contamination, or explosive nuclear properties. • Restrictions on sports activities unless declared with additional premium. • Pre-existing conditions and alternative treatments other than AYUSH are not covered. **Cover specific exclusions-** **Medical expenses Cover-** • Pre-existing conditions. • Treatments that can be delayed until return to India. • Orthopedic, degenerative, oncological treatments unless for emergencies or acute pain relief. • Charges exceeding reasonable limits. • Costs for non-emergency cancer treatment. • Cosmetic/plastic surgery. • Costs for spa or similar rest facilities. • Pregnancy-related unless emergency measures are needed. • Treatment for typical pregnancy symptoms. • Medical check-ups during pregnancy. • Rehabilitation, physiotherapy, or prosthetic costs. **Dental Treatment** • Expenses for dental treatment abroad. • Pre-existing conditions. • Treatments that can be delayed until return to India. • Orthopedic, degenerative, or oncological treatments unless for emergencies or acute pain. • Charges exceeding reasonable limits. • Costs for non-emergency cancer treatment. • Cosmetic/plastic surgery and costs fir spa or similar rest facilities.	Benefit 1 Benefit 2

	Total Loss of Checked-In Baggage • Undeclared valuables, money, securities, tickets, or items not agreed upon by the Company. • Loss of property without a submitted Property Irregularity Report. • Partial loss of items within checked-in baggage. • Items valued over US $100 without proper ownership proof. • Losses due to delay, detention, or confiscation by customs or authorities. • Loss from complete or partial damage to checked-in baggage. • Loss of checked-in baggage within the Republic of India. **Delay of Checked-In Baggage** • Undeclared valuables, money, securities, or items. • Loss without a Property Irregularity Report. • Partial loss of items in checked-in baggage. • Valuables over US $100 without proof of ownership. • Loss due to delay, detention, or confiscation. • Damage to checked-in baggage. • Baggage delay on the inbound to India **Loss of Passport** • Loss of passport due to delay, confiscation, or detention by customs, police, or authorities. • Loss due to theft unless reported to police within 24 hours with a written report. • Loss by leaving unattended or forgetting in a public place or transport. • Theft from a private place or vehicle, unless in a locked hotel room or vehicle with forcible entry **Personal Liability** • Claims from contractual liability or promises made by the Insured. • Personal liability claims toward family, relations, and companions. • Claims from transmission of illness or disease by the Insured. • Damage from professional activities of the Insured. • Liability claims due to possession of animals, vehicles, aircraft, or certain activities. • Claims from wilful, malicious, or unlawful acts. • Use of alcohol/drugs (except as prescribed) or drug addiction. • Supply of goods or services by the Insured. • Ownership or occupation of land, buildings, or temporary residences.	Benefit 3 Benefit 4 Benefit 5 Benefit 6

	Personal Accident • Accidents causing consciousness issues, strokes, fits, or convulsions. • Health damage from curative measures, or radiation (except accident-related). • Payment not exceeding death sum. • No additional claims after death claim pay-out. • Exclusions for aircraft-related accidents, parachuting, and certain health conditions. **Trip Cancellation & interruption** • Loss due to war, invasion, hostilities, civil unrest, or nuclear-related incidents. • Exclusions for cancellations by common carriers, travel agents, or government authority. • Any circumstance not directly linked to specified peril	Benefit 7 Benefit 8
7.	**Waiting period:** • Time period during which specified diseases/treatments are not covered • It is counted from the beginning of the policy coverage **Initial waiting Period:** Not Applicable **Specific Waiting periods (Not applicable for claims arising due to an accident):** Not Applicable **Pre-existing diseases:** Not Applicable	
8.	**Financial limits of coverage:** **i. Sub-limit** (It is a pre- defined limit and the insurance company will not pay any amount in excess of this limit The policy will pay only up to the limits specified against the covers in Part 1 of the policy schedule. **ii. Co-payment:** (It is a specified amount /percentage of the admissible claim amount to be paid by policyholder/insured) Copayment is specific to each coverage and is outlined in Part 1 of the policy schedule **iii. 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 (if claim amount is more than the specified amount) The The deductible is specific to each coverage and is outlined in Part 1 of the policy schedule **iv. Any other limit (as applicable)** • Not Applicable	
9.	**<u>Claims Procedure:</u>** In the event of a payable claim, we shall make such payment through Cashless facility or provide Reimbursement of benefits, up to an amount as specified for said cover. **Turn Around Time(TAT) for claim settlements-** <u>Cashless Claims:</u> Notify us through our Assistance Service Provider within 24 hours of emergency hospitalization to avail cashless facility. If You notify pre authorization request for cashless facility through our Assistance Service Provider along with complete set of documents & information, We will decide within 1 hour of the actual receipt of such pre authorization request. Further, we shall grant final authorization within three hours of the receipt of discharge authorization request from the hospital. <u>Reimbursement Claims:</u> Claims will be processed within 15 days from receipt of claim along with claim form and documents. Reasons for rejections (if any) will be provided **Claims Procedure-** **Network hospital details** In order to get the referral of nearest hospitals insured has to reach out to our assistance service provider at the below coordinates. Insured can also get the network hospital list on the web link given below. HELPLINE NUMBERS- In USA and Canada: + 1 844 871 1200(Toll-free) From the rest of the world: +91 124 4498778 (With Call back facility) In India: 1800 102 5721 (Toll-free and accessible in India only)	General Conditions- Settlement/ Rejection of claims General Conditions : Claims Procedure

	Fax: +91 124 4006674 E-mail: icicilombard@falck.com E-claim web link: https://fgaindia.com/FalckMLink/ Customer needs to reach out to Falck for assistance. Once the necessary details are obtained, Falck will provide the claim form & procedure to the customer.	
10.	**Policy Servicing** • You may contact us through our website www.icicilombard.com (Customer Support section) or call us on our toll Free no: 1800 2666, or email us at customersupport@icicilombard.com.	General Conditions : Claims Procedure
11.	**Grievances/Complaints:** In 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 Insured 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. If Insured person is not satisfied with the redressal of grievance ,insured person may contact the grievance officer at the details provided in the below link: https://www.icicilombard.com/grievanceredressal.com If Insured person is not satisfied with the redressal of grievance, the insured person may also approach Insurance Regulatory and Development Authority (IRDA) 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	Standard terms and conditions (29)

	Insured may also approach Insurance Ombudsman, subject to vested jurisdiction, for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDA website: www.irdai.gov.in or on the Company's website at www.icicilombard.com or on https://www.cioins.co.in/Ombudsman	
12	**Things to remember:** **Free look cancellation:** Every insured of new individual 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 proposer and stamp duty charges. **Policy renewal:** The Policy may be renewed by mutual consent and in such event the renewal premium shall be paid to Us on or before the date of expiry of the Policy and in no case later than Grace Period of 30 days from the expiry of the policy. **Migration and Portability:** Not Applicable **Change in Sum Insured:** Not Applicable	General terms and conditions (25) Standard terms and conditions (24)
12.	**Your Obligations:** The Policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, or on non-disclosure in any material particular in the proposal form, personal statement, declaration and connected documents, or any material information having been withheld, or a claim being established as fraudulent or if established that any fraudulent means or devices being used by the Insured or any one acting on his behalf to obtain any benefit under this Policy.	Standard terms and conditions (1) .

Declaration by the Policy Holder:

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

Place:

Date: _____ Signature of the Policy Holder

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