



Issuing office :

## HOSPITAL CASH DAILY ALLOWANCE POLICY

Whereas the Insured has made to Bajaj Allianz General Insurance Company Ltd (hereinafter called the "Company"), a proposal which is hereby agreed to be the basis of this Policy and is deemed to be incorporated herein and has paid the premium specified in the Schedule, now the Company agrees, subject always to the following terms, conditions, exclusions, and limitations, to indemnify the Insured as is provided for herein and subject always to the Daily Allowance.

### A OPERATIVE PART

In the event of Accidental Bodily Injury or Sickness first occurring or manifesting itself during the Policy Period and causing the Insured's or the Named Insured's Hospitalisation within the Policy Period, the Company will pay:

- 1 The Daily Allowance for each continuous and completed period of 24 hours of Hospitalisation necessitated solely by reason of the said Accidental Bodily Injury or Sickness, or
- 2 Two times the Daily Allowance for each continuous and completed period of 24 hours required to be spent by the Insured or Named Insured in the Intensive Care Unit of a Hospital during any period of Hospitalisation necessitated solely by reason of the said Accidental Bodily Injury or Sickness for a maximum period of 7 days for each hospitalisation.

### B DEFINITIONS

The following words or terms shall have the meaning ascribed to them wherever they appear in this Policy, and references to the singular or to the masculine shall include references to the plural or to the female wherever the context so permits:

- 1 Accident or Accidental means a sudden, unintended, fortuitous, visible and external event and does not include any naturally occurring condition or degenerative process.
- 2 Bodily Injury means physical bodily harm or injury (but does not include any mental sickness, disease or illness) which first occurs during the Policy Period and requires inpatient treatment in a Hospital by a Physician.
- 3 Daily Allowance means the amount and period specified in the Schedule.
- 4 Hospital means an institution in India established for the indoor care, offers allopathic treatment only of sickness and injuries and which:
  - 4.1 is registered as a hospital or nursing home with the appropriate local authorities and is under the supervision of a registered and qualified Physician, or
  - 4.2 provides at least the following facilities:
    - 4.2.1 15 inpatient beds (10 in Class C towns), and
    - 4.2.2 a fully equipped operation theatre of its own where surgical operations are carried out, and
    - 4.2.3 fully qualified nursing staff under its employment 24 hours per day, and
    - 4.2.4 fully qualified Physicians in supervision 24 hours per day, and
    - 4.2.5 maintains a daily medical record for each of its patients.  
but shall not include any institution which is primarily a rest home or convalescent facility, a place for custodial care, a facility for the aged or alcoholic or drug addicts or for the treatment of psychiatric or mental disorders even if registered as a hospital or nursing home.
- 5 Hospitalisation means the Insured's or Named Insured's required stay as an inpatient in a Hospital within India for medically necessary treatment following and due to an insured event.
- 6 Insured means the person specified in the Schedule provided that the Insured has attained the age of 18 years and is not older than 60 years of age at the commencement of the Policy Period.





- 7 Intensive Care Unit means a special ward in any Hospital that is used for the sole purpose of the treatment of patients with a critical or exigent condition, and where the patient is under 24 hour care and monitoring, by a Physician and a Nurse.
- 8 Named Insured means the person specified in the Schedule provided that the Named Insured has attained the age of 3 months and is not older than 60 years of age at the commencement of the Policy Period.
- 9 Nurse means a person who holds a certificate of a recognised Nursing Council
- 10 Physician means a qualified medical practitioner holding a valid and subsisting license, granted by the appropriate licensing authority, and acting within the scope of his license, and who is not related to the Insured or the Named Insured by blood or marriage.
- 11 Policy means the proposal, the Schedule, the Policy document and any endorsements attaching to or forming part thereof either on the effective date or during the Policy Period.
- 12 Policy Period means the period between the commencement date and the expiry date shown in the Schedule.
- 13 Sickness means a sickness or a disease which first manifests itself during the Policy Period and requires inpatient treatment in a Hospital by a Physician.
- 14 Schedule means the Schedule attached to and forming part of this Policy.

## C EXCLUSIONS

No indemnity is available hereunder and no payment will be made by the Company for any claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- 1 Pre-existing disease: Any medical condition or complication arising from it which existed before the commencement of the Policy Period, or for which care, treatment or advice was sought, recommended by or received from a Physician or for which a claim has or could have been made under any earlier policy.
- 2 Any treatment not performed by a Physician or any treatment of a purely experimental nature.
- 3 Any and all variants of the condition commonly referred to as Cancer, except in case of invasive malignant melanoma.
- 4 Any routine or prescribed medical check up or examination. *Medical Expenses* relating to any hospitalisation for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any *Illness* or accidental *Bodily Injury* for which hospitalisation is required.
- 5 Any Sickness that has been classified as an Epidemic by the Central or State Government.
- 6 Sickness requiring Hospitalisation within the first 30 days from the commencement date of the Policy Period unless the Policy is renewed without interruption and with the Company.
- 7 Without prejudice to Exclusion 1 above, the treatment of cataracts, benign prostatic hypertrophy, hysterectomy, menorrhagia, fibromyoma, D&C, endometriosis, hernia of all types, hydrocele, fistulae, haemorrhoids, fissure in ano, stones in the urinary and biliary systems, surgery on ears, tonsils or sinuses, skin and all internal tumours/cysts/nodules/polyps of any kind including breast lumps, gastric or duodenal ulcer, backache, prolapsed intervertebral disc during the first year of a series of Daily Hospital Allowance Policies renewed with the Company without interruption.
- 8 Circumcision, cosmetic or aesthetic treatments of any description change of life surgery or treatment, plastic surgery (unless necessary for the treatment of *Illness* or accidental *Bodily Injury* as a direct result of the insured event and performed within 6 months of the same).
- 9 Dental treatment or surgery of any kind unless necessitated by Accidental Bodily Injury.
- 10 Convalescence, general debility, nervous or other breakdown, rest cure, congenital diseases or defect or anomaly, sterility, sterilisation or infertility (diagnosis and treatment), any sanatoriums, spa or rest cures or long term care or hospitalisation undertaken as a preventive or recuperative measure.
- 11 Self afflicted injuries or conditions (attempted suicide), and/or the use or misuse of any drugs or alcohol.
- 12 Any sexually transmitted diseases or any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus type or any Syndrome or condition of a similar kind commonly referred to as AIDS.
- 13 Any diagnosis or treatment arising from or traceable to pregnancy (whether uterine or extra uterine), childbirth including caesarean section, medical termination of pregnancy and/or any treatment related to pre and post natal care of the mother or the new born.
- 14 Hospitalisation for the sole purpose of traction, physiotherapy or any ailment for which hospitalisation is not warranted due to advancement in medical technology
- 15 War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection military





or usurped power of civil commotion or loot or pillage in connection herewith.

- 16 Naval or military operations of the armed forces or airforce and participation in operations requiring the use of arms or which are ordered by military authorities for combating terrorists, rebels and the like.
- 17 Any natural peril including but not limited to avalanche, earthquake, volcanic eruptions or any kind of natural hazard.
- 18 Participation in any hazardous activity.
- 19 Radioactive contamination.
- 20 Non-allopathic treatment.
- 21 Consequential losses of any kind, be they by way of loss of profit, loss of opportunity, loss of gain, business interruption, market loss or otherwise, or any claims arising out of loss of a pure financial nature such as loss of goodwill or any legal liability of any kind whatsoever.

## **D GENERAL CONDITIONS**

### **1 Due Observance**

The due observance of and compliance with the terms, provisions, warranties and conditions of this Policy in so far as they relate to anything to be done or complied with by the Insured and/or the Named Insured shall be a condition precedent to the Company's liability under this Policy.

### **2 Duties and Obligations of the Insured and/or Named Insured after the Occurrence of an Insured Event**

It is a condition precedent to the Company's liability under this Policy that in the event of any Accidental Bodily Injury or Sickness that may give rise to a claim:

- 2.1 the Insured and/or the Named Insured shall immediately and in any event within 14 days provide the Company with written notification of a claim, and
- 2.2 the Insured and/or the Named Insured shall take every other reasonable step and/or measure to minimise the consequences of the Bodily Injury or Sickness, and
- 2.3 the Insured and/or the Named Insured shall expeditiously provide the Company with or arrange for the Company to be provided with any and all information and documentation in respect of the claim and/or the Company's liability hereunder that may be requested, and submit himself for examination by the Company's medical advisors as often as may be considered necessary by the Company.

### **3 Payment of Claims**

- 3.1 The Company shall only make payment under this Policy to the Insured or in the event of death or total incapacitation of the Insured to the Named Insured. Any payment made in good faith by the Company as aforesaid shall operate as a complete and final discharge of the Company's liability to make payment under this Policy for such claim.
- 3.2 In respect of any period of Hospitalisation for which the Company is liable to make payment under Operative Part 2, the Company shall have no liability to make payment under Operative Part 1.
- 3.3 A continuous and completed period of less than 24 hours of Hospitalisation consequent upon an insured event shall be deemed to be a continuous and completed period of 24 hours if such period extends to at least 12 hours and also includes 0300 hours.

### **4 Fraud**

If the Insured and/or Named Insured shall make or advance any claim knowing the same to be false or fraudulent as regards amount or otherwise, this Policy shall be void and all claims or payments hereunder shall be forfeited.

### **5 Insurance of Family**

If this Policy is taken for the benefit of the Insured's family (and not by an employer for his employees), then it is a condition precedent to the Company's liability that the following categories of persons are included and maintained as Named Insureds:

- 5.1 The lawful spouse of the Insured, who is not older than 60 years of age at the commencement of the Policy Period.
- 5.2 The lawful children of the Insured and his spouse aged between 3 months and 21 years at the commencement of the Policy Period who are living with the Insured and/or his spouse and who have no income of their own.

### **6 Notifications & Declarations**





- 6.1 Any and all notices and declarations for the attention of the Company shall be submitted in writing and shall be delivered to the address specified in the Schedule.
- 6.2 All notices and declarations for the attention of the Insured or the Named Insured shall be posted and addressed to the Insured's address as stated in the Schedule.
- 6.3 The Insured and Named Insured agree that the Insured shall also act on behalf of all Named Insureds as to:
  - 6.3.1 The giving and receiving of any notice or declaration under or in respect of this Policy (including notice of cancellation),
  - 6.3.2 The payment of premiums and the receipt of any return premium, and
  - 6.3.3 The acceptance of any endorsements to this Policy.

**7 Cancellation and Addition and Deletion of Named Insureds**

- 7.1 This Policy may be cancelled wholly or for specific Named Insured(s) by or on behalf of the Company by giving the Insured at least 7 days written notice and in such event the Company shall refund to the Insured a pro-rata premium for the unexpired Policy Period. For the avoidance of doubt, the Company shall remain liable for any claim which was made prior to the date upon which this insurance is cancelled.
- 7.2 This Policy may be cancelled by the Insured at any time by giving at least 7 days written notice to the Company. The Company will refund premium according to the Company's Short Period Rates (except that no refund of premium will be due if any claim has been made on the Policy):

<b>SHORT PERIOD SCALES</b>	
<b>Period on risk</b>	<b>Rate of premium to be retained by the Company</b>
Up to 1 month	25% of premium
Up to 3 months	50% of premium
Up to 6 months	75% of premium
Exceeding 6 months	100% of premium

- 7.3 No person other than a person named as the Named Insured shall be covered under this Policy unless and until his name has been notified in writing to the Company, any additional premium due has been paid and the Company's agreement to extend cover has been indicated by it issuing an endorsement confirming the addition of such person as a Named Insured.
- 7.4 Cover under this Policy shall be withdrawn from any person named as a Named Insured immediately upon the Insured delivering written notice of the same to the Company.

**8 Arbitration**

- 8.1 If any dispute all difference shall arise as to the quantum to be paid under the policy (Liability being otherwise admitted) such difference shall independently of all other questions be referred to decision of a sole arbitrator in writing by the parties 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 the arbitrators comprising of two arbitrators, one appointed by each of the party to the dispute / difference and the third arbitrators to be appointed by such two arbitrator and arbitrations shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996. The Law of the arbitrations will be Indian law, and the seat of the arbitration and venue for all sharings shall be within India.
- 8.2 It is clearly agreed and understood that no difference or disputes shall be referable to arbitration as herein before provided, if the Company has disputed or not accepted liability under or in respect of this policy.
- 8.3 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 award by such arbitrator / arbitrators of the amount of the loss or damage shall be first obtained.
- 8.4 If these arbitration provision are held to be invalid, then such all such disputes or differences shall be referred to the exclusive jurisdiction of the Indian Courts.

**9 Governing Law**

The construction, interpretation and meaning of the provisions of this Policy shall be determined in accordance with Indian law. The section headings of this Policy are included for descriptive purposes only and do not form part of this Policy for the purpose of its construction or interpretation.





**10 Entire Contract**

The Policy constitutes the complete contract of insurance. No change or alteration in this Policy shall be valid or effective unless approved in writing by the Company, which approval shall be evidenced by an endorsement on the Policy.

**11 Renewal**

For the avoidance of doubt, nothing herein shall oblige the Company to offer renewal terms or renew this Policy or issue a fresh Policy.

**12 Territorial Limits**

This Policy covers an insured event arising, occurring and/or manifesting itself only in India, and the Company's liability to make any payment shall be to make payment within India and in Indian Rupees only.





Welcome to Bajaj Allianz and Thank You for choosing us as your insurer.

Please read your policy and schedule. The policy and policy schedule set out the terms of your contract with us. Please read your policy and policy schedule carefully to ensure that the cover meets your needs.

**RESOLVING ISSUES**

We do our best to ensure that our customers are delighted with the service they receive from Bajaj Allianz , If you are dissatisfied we would like to inform you that we have a procedure for resolving issues. Please include your policy number in any communication. This will help us deal with the issue more efficiently. If you don't have it, please call your Branch office.

**First Step**

Initially, we suggest you contact the Branch Manager / Regional Manager of the local office which has issued the policy. The address and telephone number will be available in the policy.

**Second Step**

Naturally, we hope the issue can be resolved to your satisfaction at the earlier stage itself. But if you feel dissatisfied with the suggested resolution of the issue after contacting the local office, please e-mail or write to:

**Customer Care Cell**

Bajaj Allianz General Insurance Co. Ltd  
 GE Plaza, Airport Road, Yerawada, Pune 411 006  
 E-mail: [customercare@bajajallianz.co.in](mailto:customercare@bajajallianz.co.in)

If You are still not satisfied, You can approach the Insurance Ombudsman in the respective area for resolving the issue. The contact details of the Ombudsman offices is mentioned below:

Areas of Jurisdiction	Office of the Ombudsman
Gujarat, UT of Dadra & Nagar Haveli, Daman and Diu	2 <sup>nd</sup> Flr., Ambica House, Nr. C.U. Shah College, 5, Navyug Colony, Ashram Road, AHMEDABAD - 380 014 (O) 079-27546150, 27546139, Fax:079-27546142
Madhya Pradesh & Chhattisgarh	1 <sup>st</sup> Floor, 117, Zone-II, (Above D.M. Motors Pvt. Ltd.) Maharana Pratap Nagar, BHOPAL - 462 011 (O) 0755-2769200, 2769202, 2769201, Fax:0755-2769203
Orissa	62, Forest Park, BHUBANESWAR - 751 009 (O) 0674-2535220, 2533798, Fax:0674-2531607
Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, UT of Chandigarh	S.C.O. No. 101,102 & 103, 2nd Floor, Batra Building, Sector 17-D, CHANDIGARH - 160 017 (O) 0172-2706196, 2705861, EPBX: 0172-2706468, Fax: 0172-2708274
Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)	Fatima Akhtar Court, 4th Flr., 453(old 312 ), Anna Salai, Teynampet, CHENNAI -600 018 (O) 044-24333678, 24333668, Fax: 044-24333664
Delhi & Rajasthan	2/2 A, 1 <sup>st</sup> Floor, Universal Insurance Bldg., Asaf Ali Road, NEW DELHI – 110 002 (O) 011-23239611,23237539, 23237532, Fax: 011-23230858
Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura	Aquarius, Bhaskar Nagar, R.G. Baruah Rd., GUWAHATI - 781 021 (O) 0361-2413525, EPBX: 0361-2415430, Fax: 0361-2414051
Andhra Pradesh, Karnataka and UT of Yanam – a part of the UT of Pondicherry	6-2-46, 1 <sup>st</sup> Floor, Moin Court, Lane Opp.Saleem Function Palace, A. C. Guards, Lakdi-Ka-pool, HYDERABAD - 500 004. (o) 040-23325325, 23312122, 65504123, Fax:040-23376599
Kerala, UT of (a) Lakshadweep, (b) Mahe – a part of UT of Pondicherry	2 <sup>nd</sup> Flr., CC 27/ 2603, Pulinat Building, Opp. Cochin Shipyard, M.G. Road, ERNAKULAM - 682 015 (O) 0484-2358734, 2359338, 2358759, Fax:0484-2359336
West Bengal, Bihar, Jharkhand and UT of Andaman & Nicobar Islands, Sikkim	North British Bldg. 29, N. S. Road, 3rd Flr., KOLKATA -700 001. (O) 033-22134869, 22134867, 22134866, Fax: 033-22134868
Uttar Pradesh and Uttaranchal	Jeevan Bhawan, Phase 2, 6 <sup>th</sup> Floor, Nawal Kishore Rd., Hazartganj, LUCKNOW - 226 001 (O) 0522-2201188, 2231330, 2231331, Fax:0522-2231310
Maharashtra, Goa	3rd Flr., Jeevan Seva Annexe, S.V. Road, Santa Cruz (W), MUMBAI - 400 054 (O) 022-26106928, 26106360, EPBX: 022-6106889, Fax: 022-26106052

Note : Address and contact number of Governing Body of Insurance Council:

Secretary General - Governing Body of Insurance Council  
 Jeevan Seva Annexe, 3rd Floor, S.V. Road, Santacruz (W), Mumbai - 400 054  
 Tel. No. : 022 - 2610 6889, 26106245, Fax No. : 022 - 26106949, 2610 6052, E-mail ID : [inscoun@vsnl.net](mailto:inscoun@vsnl.net)

