

## Bajaj Allianz General Insurance Company Limited

UIN: IRDA/NL-HLT/BAGI/P-H/V.I/149/13-14

Issuing Office:

## **TAX GAIN CUSTOMER INFORMATION SHEET**

## Description is illustrative and not exhaustive

Sr no.	TITLE	DESCRIPTION	REFER TO POLICY CLAUSE NUMBER
1	Product Name	Tax Gain	
2	What am I covered for?	1. Hospitalization Medical Expenses: If You/Your spouse named in the schedule are hospitalised on the advice of a Doctor because of Illness or accidental Bodily Injury sustained or contracted during the Policy Period, then We will pay You, Reasonable and Customary Medical Expenses incurred subject to the maximum Limit of Indemnity specified in the schedule.	Section A.1
		2. Out Patient Medical Expenses: If You/Your spouse named in the schedule require treatment to be taken on Out Patient basis on advice of a Doctor because of illness or accidental Bodily Injury sustained or contracted during the Policy Period , then We will pay You, reasonable and Customary Medical Expenses incurred subject to the maximum Limit of Indemnity specified in the schedule.	Section A.2
		3. Ambulance Expenses: If a claim under Cover 1) is accepted, We will also pay the reasonable cost to a maximum of Rs 1000/- per valid hospitalization claim for transferring You to or between Hospitals in the Hospital's ambulance or in an ambulance provided by any ambulance service provider	Section A.3
	What are the major exclusions in the policy common under hospitalisation cover	1. War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion, unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition of or damage by or under the order of any government or public local authority and claims due to nuclear weapons and/or materials.	Section C.5 and C.14
		2. Circumcision unless required for treatment of illness or injury , laser treatment for correction of eye sight due to refractive error.	Section C.6
		3. Plastic surgery unless necessary for the treatment of cancer, burns or accidental Bodily Injury	Section C.7
3		4. The cost of spectacles, contact lenses, hearing aids, crutches, artificial limbs, dentures, artificial teeth and all other external medical equipments or devices	Section C.8 and C.9
		5. Dental treatment or surgery of any kind unless as a result of Accidental Bodily Injury to natural teeth and also requiring hospitalization.	Section C.10
		7. Convalescence, general debility, rest cure, congenital diseases or defects or anomalies	Section C.11
		8. Human Immunodeficiency Virus or Variant/mutant viruses and AIDS, Venereal disease or any sexually transmitted disease.	Section C.12
		9. Hospitalisation primarily and specifically for diagnostic, X-ray or laboratory examinations and investigations.	Section C.13
		10. Vaccination or inoculation unless forming a part of post bite treatment.	Section C.15
		12. Vitamins, tonics, nutritional supplements unless forming part of the treatment for injury or disease as certified by the attending Doctor	Section C.16
		13. Surgery to correct deviated nasal septum and hypertrophied turbinate	Section C.17
		14. Treatment for any mental illness or psychiatric illness	Section C.18



3	What are the major exclusions in the policy under OPD cover	<ol> <li>Any expenses for treatment taken without the doctor advising the same and which is not duly supported by prescriptions.</li> <li>Any expenses for diagnostic tests without the treating doctor's referral.</li> <li>Cost of spectacles in the first year of the policy. (This cost is payable in the second year of continuous renewal subject to a maximum limit of 25% of the OPD limit.)</li> <li>Cost of dentures in the first two years of the policy. (This cost is payable in the third year of continuous renewal subject to a maximum limit of 25% of the OPD limit.)</li> <li>Cost of hearing aids in the first two years of the policy. (This cost is payable in the third year of continuous renewal subject to a maximum limit of 25% of the OPD limit.)</li> <li>Cost of Annual Health Check up.</li> <li>Any expenses in excess of the maximum payable under the Outpatient medical expenses limit.</li> </ol>	Section D. 1 to 7
3	What are the major exclusions in the policy common under hospitalisation and OPD cover	<ol> <li>Cosmetic or aesthetic treatments of any description, treatment or surgery for change of life/gender.</li> <li>Intentional self-injury (including but not limited to the use or misuse any intoxicating drugs or alcohol)</li> <li>Ailments requiring treatment due to use or abuse of any substance, drug or alcohol and treatment for de-addiction.</li> <li>Treatment arising from or traceable to pregnancy (whether uterine or extra uterine) and childbirth including caesarian section, and/or any treatment related to pre and postnatal care.</li> <li>Any fertility, sub fertility, impotence or assisted conception operation or sterilization procedure.</li> <li>Experimental, unproven or non-standard treatment</li> <li>Treatment for any other system other than modern medicine (also known as Allopathy)</li> <li>Expenses related to donor screening, treatment, including surgery to remove organs from a donor in the case of transplant surgery.</li> <li>Venereal disease or any sexually transmitted disease or sickness.</li> <li>Weight management services and treatment related to weight reduction programmes including treatment of obesity</li> </ol>	Section E. 1 to 10
4	Waiting periods for hospitalisation cover	<ol> <li>Benefits will not be available for any pre existing condition, ailment or injury, until 48 months of continuous coverage have elapsed, after the date of inception of the first Tax Gain Policy.</li> <li>Benefits will not be available, during the first two consecutive annual periods during which You/ your spouse named in the schedule have the benefit of a Tax Gain Policy with Us in connection with any types of gastric or duodenal ulcers, cataracts, benign prostatic hypertrophy, hernia of all types, hydrocele, all types of sinuses, fistulae, haemorrhoids, fissure in ano, dysfunctional uterine bleeding, fibromyoma, endometriosis, hysterectomy, stones in the urinary and biliary systems, surgery on ears/tonsils/adenoids/paranasal sinuses, Surgery for any skin ailment, Surgery on all internal or external tumours/cysts/nodules/polyps of any kind including breast lumps with exception of Malignant tumor or growth. This exclusion period shall apply for a continuous period of a full 4 years from the date of Your first Tax Gain Policy with Us if the above referred illness were present at the time of commencement of the policy and if You had declared such illness at the time of proposing the policy for the first time.</li> <li>Benefits will not be available during the first four consecutive annual periods during which you/ your spouse named in the schedule have the benefit of a Tax Gain Policy with Us in connection with joint replacement surgery unless such joint replacement surgery is necessitated by accidental Bodily Injury</li> <li>30 days waiting period is applicable from date of first policy inception for any</li> </ol>	
		illness/ disease except for Accidental Bodily Injury.	



5	Payout basis	<ul> <li>i. Inpatient Hospitalisation and Outpatient benefit on indemnity payment basis.</li> <li>ii. in respect of surgery for cataracts (after the expiry of the 2 year period referred to in Exclusion above, shall be restricted to 10% of the Sum Isnured for each and every claim, subject to a minimum of Rs 12,000 and maximum of Rs 25,000/- for each of You and subject always to the Lifetime Limit of Indemnity.</li> </ul>	Section F.6
6	Cost sharing	For hospitalisation in a hospital other than a Network hospital co payment of 10% of the claim payable will be applicable. (The waiver of co-payment is available on payment of additional premium).	Section F 6.ii,
7	Renewal Conditions	<ul> <li>i. Under normal circumstances, renewal will not be refused except on the grounds of moral hazard of the insured.</li> <li>ii. In case of Our own renewal a grace period of 30 days is permissible and the Policy will be considered as continuous for the purpose of Two year waiting period / Four year waiting periods and Health Check-up benefit. Any medical expenses incurred as a result of disease condition/ Accident contracted during the break period will not be admissible under the policy.</li> <li>iii. For renewals received after completion of 30 days grace period, a fresh application of health insurance should be submitted to Us, it would be processed as per a new business proposal.</li> </ul>	Section F 10
8	Special Condition	Free Look Period You have a period of 15 days from the date of receipt of the first policy document to review the terms and conditions of this Policy. If You have any objections to any of the terms and conditions, You have the option of cancelling the Policy stating the reasons for cancellation.  If you have not made any claim during the Free look period, you shall be entitled to refund of premium subject to,  • a deduction of the expenses incurred by Us on Your medical examination, stamp duty charges, if the risk has not commenced,  • a deduction of the stamp duty charges, medical examination charges & proportionate risk premium for period on cover, If the risk has commenced  • a deduction of such proportionate risk premium commensurating with the risk covered during such period ,where only a part of risk has commenced  Free look period is not applicable for renewal policies.	Section F.9
9	Renewal Benefits	<b>Medical Check-up:</b> At the end of every continuous period of 4 years during which You have held Our Tax Gain policy without making a claim You may apply to Us for a free medical check up (Physician Consultation, ECG, Complete Blood Count, , Fasting Blood Sugar, Lipid Profile, Serum Creatinine, SGOT, SGPT and Urine Routine ) at a Bajaj Allianz Diagnostic Centre	Section A.4
10	Cancellation	We may cancel this insurance by giving You at least 15 days written notice, and if no claim has been made then We shall refund a pro-rata premium for the unexpired Policy Period. Under normal circumstances, policy will not be cancelled except for reasons of non-disclosure while proposing for insurance and /or lodging any fraudulent claim  You may cancel this insurance by giving Us at least 15 days written notice, and if no claim has been made then the We shall refund premium on short term rates for the unexpired Policy Period as per the rates detailed below  PERIOD ON RISK  RATE OF PREMIUM REFUNDED  To one month  To of annual rate Upto three months  Solo of annual rate Upto six months	Section F.10
		Exceeding six months Nil	

(LEGAL DISCLAIMER) NOTE: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the KFD and the policy document the terms and conditions mentioned in the policy document shall prevail.