

Bajaj Allianz General Insurance Company Limited Corporate Identity Number: U66010PN2000PLC015329. IRDAI Registration No.113 Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerawada, Pune - 411 006

RESPECT

Rider for Bajaj Allianz Health Products

Prospectus Cum Policy Wordings UIN: BAJHLIA23141V012223

Whereas the Insured described in the Base Policy Schedule (hereinafter called the 'Insured' or 'You' or 'Your') has made to Bajaj Allianz General Insurance Company Limited (hereinafter called the 'Company' or 'Insurer' or 'We', or 'Insurance Company' or 'us') an additional Proposal as mentioned in the transcript of the additional Proposal, which shall be the basis of this Rider ["Rider"] and is deemed to be incorporated herein, containing certain undertakings, declarations, information / particulars and statements, which are hereby agreed to be the basis of this Rider and be considered as incorporated herein, for the Rider hereinafter contained and has paid the additional premium as consideration for this Rider, the Company agrees, subject to the Base Policy and the following terms, conditions, exclusions, and limitations, and in excess of the amount of the Deductible, if any, to provide assistance in procuring services / indemnify the Insured / Insured member, as the case may be, in the manner and to the extent during the Rider Period.

I. Who can opt for the Respect Rider?

Only Insured who has opted for the Company's Health Insurance Policy ("Base Policy") can buy this Rider for himself and / or his family members insured under Base Policy ["Insured member/s"] who are 50 years of age or above.

II. Rider Period and Type

Rider Period shall be as per the tenure of the Base Policy and will be offered on individual basis.

PART A. OPERATIVE PARTS

In consideration of payment of additional premium by the Insured to the Company and realization / receipt thereof by the Company, the Company hereby agrees to facilitate the listed services to the Insured or indemnify the Insured (only in respect of the actual cost of the Ambulance services) covered under the Rider as the case may be, in respect of an admissible claim for any or all of the following covers subject to the limits, terms, conditions and definitions, exclusions otherwise expressed in the Rider read with the Base Policy Schedule.

PART B. SCOPE OF COVER

The Rider would extend coverage for facilitating the listed services or indemnify the Insured (only in respect of the actual cost of the Ambulance services) as below.

- 1. Ambulance Service
 - a. Emergency Road Ambulance Service (up to 2 ambulance services in a year per Insured person)
 - b. Planned Road Ambulance Service (up to 2 ambulance services in a year per Insured person)
- 2. Fall Detection Technology through Smart Watch
- 3. Physiotherapy Service at Home (up to 5 days in a year with up to 1 hour session per day)
- 4. Nursing Care at Home (5 days in a year, 12 hours per day)
- 5. Unlimited Medical Tele-consultation services
- 6. Tele-consultation services for Psychological conditions (up to 2 consultations in a year)

7. Concierge Assistance Services



- a. Daily Care / Home Assistance
 - i. Assistance for arranging Physiotherapy at home
 - ii. Assistance for arranging Nursing at home
 - iii. Appointment Booking assistance at Hospital/Laboratory
 - iv. Assistance for booking Air Conditioning/water purifier/washing machine repair and maintenance services
 - v. Assistance for booking Electrician, Plumber, Carpenter services
 - vi. Assistance for booking Pest control services
 - vii. Assistance for booking Car wash/sanitization services
- b. Cyber Assistance
 - i. Assistance on how to block debit/credit card
 - ii. Assistance in understanding mobile phone and its usage
 - iii. Assistance in downloading OTT (Over The Top) media, making payments, etc.
 - iv. Assistance on gadget/app use as per demand e.g. Lab and Medicine Orders, Senior care related products etc. from the e-commerce platform
- c. Travel Assistance
 - i. Travel booking assistance
- d. Legal Assistance
 - i. Assistance for seeking legal consultation on will, property contract vetting, etc.

Plans available in this Rider:

Services	Plan 1	Plan 2	Plan 3
Emergency Road Ambulance Service	Yes	Yes	Yes
Planned Road Ambulance Service	Yes	Yes	Yes
Fall Detection Technology through Smart Watch	No	No	Yes
Physiotherapy Service at Home	No	Yes	Yes
Nursing Care at Home	No	Yes	Yes
Unlimited Medical Tele-consultation services	Optional	Optional	Optional
Tele-consultation services for Psychological conditions	No	Yes	Yes
Concierge Assistance Services	Yes	Yes	Yes

Coverage Description

1. Ambulance Service

a. Emergency Road Ambulance Service

The Service Provider shall offer cashless ambulance service to the Insured in case of a medical emergency to transfer the Insured from the site of incidence to the nearest hospital / medical facility or subject to note below, indemnify the Insured only in respect of the actual cost of the Ambulance services. The Policy covers up to 2 cashless emergency ambulance services in a policy year per Insured person.

Note: (i) No waiting period will apply for emergency ambulance service cover.

(ii) Indemnification with respect to actual cost of the Ambulance services will be done only in cases where (a) Service Provider could not arrange the Ambulance in the specific listed locations even after intimation of claim on account of reasons other than strikes, lockouts, civil commotion, riots, war, acts of terrorism, action of any government or regulatory authority, abnormal weather conditions or act of god perils at the location of services, or any other cause beyond the reasonable control of the Service Provider and or Company and the Insured avails service of alternate ambulance for the same incidence(b) the ambulance arranged by the Service Provider could not reach the place of incidence within prescribed time on account of reasons other than strikes, lockouts, civil commotion, riots, war, acts of terrorism, action of any government or regulatory authority, abnormal weather conditions or act of god perils at the location of services, or any other cause beyond the reasonable control of the Service Provider and or Company and the Insured avails service of alternate ambulance for the same incidence.

b. Planned Road Ambulance Service

The Service Provider shall offer up to 2 cashless ambulance services for a planned medical treatment to transfer the Insured from:



- i. Home to Hospital
- ii. Hospital to Home
- iii. Hospital to Hospital

Note:

- i. The scope of cover is within a radius of 40 kms from the pick-up location of the Insured from where the service is being requested for.
- ii. Waiting period of 14 days from Policy inception date is applicable for planned ambulance service cover for New Business Policies and ported-in Policies.

Specific Conditions applicable to Ambulance Services-

- i. The ambulance service will be offered only if medically necessary
- ii. This service will be provided at specific listed locations in India only (excluding the islands)
 - iii. If the emergency road ambulance service request is cancelled after 5 minutes of booking, then such cancellation shall be treated as "Service Delivered".
 - iv. If the planned road ambulance service request is cancelled at any time less than 4 hours of the scheduled pickup time, then such cancellation shall be treated as "Service Delivered".
 - v. If the Planned ambulance service is required to carry the Insured beyond the scope of coverage of 40 kms radius, then the Insured will have to pay an additional charge for every km travelled beyond the covered radius at the prevailing rate of the Service Provider at that point of time.
 - vi. Any unutilized service cannot be carried forward to the next year
 - vii. Emergency ambulance arranged will be a BLS (Basic Life Support) ambulance
- viii. Ambulance Services will be provided to pick up the Insured from the nearest motorable point. .

2. Fall Detection Technology by Smartwatch

This cover comes with a fall detection smartwatch having an inbuilt vital sensor for continuous health monitoring with the following features. This smartwatch has to be worn at all times by the Insured in order to activate all the below listed features. The Insured will have to enable the notifications & reminders in the smartwatch for below features to work and give alert.

- i. **Fall Detection** Upon accidental fall of the Insured wearing the smartwatch, provided along with the rider (if Plan 3 is opted), the smartwatch will detect the fall and trigger an alarm to Service Provider as well as the registered primary / emergency contact, if any updated by the Insured. The Service Provider shall get in touch with the Insured / registered primary contact through a phone call and subsequently arrange for an ambulance, if medically necessary to transfer the Insured to the nearest hospital. Also, if for any reason the Service Provider may not be able to get in touch with the Insured / registered primary contact, in that case also the Service Provider will arrange an ambulance to be sent to the Insured's current location.
- ii. **SOS Function** This smartwatch is also equipped with an SOS button which, on activating, will trigger an alarm to the Service Provider as well as the primary contact upon which the Service Provider shall contact the Insured for any medical assistance.
- iii. **GPS Position** In case of a fall Detection / SOS Trigger, the phone GPS will be activated, and location will be automatically shared with the Service Provider and the registered primary contact for reaching out to the Insured for.
- iv. **Sedentary Alert** A sedentary alert will trigger in the smartwatch and it will vibrate as a reminder for the user to get up and move around if they have been inactive for too long.
- v. **Medicine Reminder** A medicine alert will trigger in the smartwatch and it will vibrate as a reminder for the user to consume their medicines on schedule.

- vi. **Pedometer-** While the user wears the smartwatch, the sensors will track the steps taken and record it in the smartwatch.
- vii. **SpO2-** Users can track their Blood Oxygen Saturation levels while they wear the smartwatch.
- viii. **24x7 Body Temperature** Users can track their body temperature continuously while they wear the smartwatch. In case if the body temperature rises above a certain level, the smartwatch will vibrate and alert the user on the rise in temperature.
- ix. **24x7 Heart Rate-** Users can track their heart rate continuously while they wear the smartwatch. In case if the heart rate rises above a certain level, the watch will vibrate and alert the user on the rise in heart rate.

Note- For delivery of the Services under coverages as listed above, kindly ensure to use the required specification and process to be followed to activate the smartwatch and other features on watch. Further, the mobile application must be installed with which the smartwatch needs to be connected and the smart phone must remain connected with internet at all times. The user must strictly follow all the instructions given in the instruction manual along with the smartwatch.

3. Physiotherapy Service at Home

If the Insured suffers from any illness / injury during the Policy period, and if the treating Doctor prescribes physiotherapy, then on request of the Insured, the Service Provider will arrange physiotherapy services at home for the Insured.

The services under this coverage can be availed up to a maximum of 5 days in a year with a 1 hour session per day in a year.

<u>Note:</u> Waiting period of 30 days from Policy inception date is applicable for Physiotherapy service for New Business Policies and ported-in Policies except in case of accident, provided it has occurred during the Policy Period.

Specific Conditions applicable to Physiotherapy Service -

- Request for Physiotherapy Services at Home must be placed at least 24 hours before the scheduled date and time of requirement.
- ii. In case the Insured cancels the service within 12 hours before the scheduled appointment, then such cancellation shall be treated as "Service Delivered/availed".
- iii. Insured shall provide all the information / record requested by the service provider in order to enable providing appropriate physiotherapy and avoid any complications arising therefrom in terms of side / ill effects.
- iv. Any unutilized service cannot be carried forward to the next year.

4. Nursing Care at home

If the Insured suffers from any illness / injury during the Policy period, then at the request of the Insured, the Service Provider will arrange nursing services by qualified and trained professionals at home for the Insured up to a maximum of 5 days in a year with a duration of 12 hours per day if prescribed by the treating doctor as a requirement for post-operative care or managing a health condition.

<u>Note:</u> Waiting period of 30 days from Policy inception date is applicable for Nursing Care cover at Home for New Policies and ported-in Policies except in case of accident, provided it has occurred during the Policy Period.

Specific Conditions applicable for Nursing Care at home -

- i. The Insured must provide the treating doctor's prescription stating that the covered beneficiary requires nursing care at home, provided the insured has not taken forced discharge / discharge against medical advice and still requires post-hospital discharge care
- ii. Request for Nursing Care at Home must be placed at least 24 hours before the scheduled date and time of requirement.
- iii. Nursing care at Home does not include any medical equipment/medicine/injections or toiletries etc., which have to be provided by the Insured at his own expense.

- iv. In case the Insured cancels the service within 12 hours of the scheduled appointment, then such cancellation shall be treated as service delivered / availed.
- v. Any unutilized service cannot be carried forward to the next year.
- vi. Insured shall provide all the information / record requested by the Service Provider in order to enable providing appropriate nursing care at home and avoid any complications arising therefrom in terms of side / ill effects.
- vii. Nursing care at home will be provided only at the residential address of the insured provided in the policy schedule.
- viii. The deputed nurse will, periodically monitor the health parameters of the Insured and follow the instructions as prescribed by the treating doctor. However, the nurse/Service Provider will not be held responsible for the health condition per se of the Insured person.

5. Medical Tele-consultation services

If the Insured suffers from any illness / injury during the Policy period, then the Insured can avail medical Telephonic consultation from an empaneled qualified medical practitioner/s (General Practitioners and / or specialists).

Note: No waiting period is applicable for this benefit.

Specific Conditions applicable to medical teleconsultation

- i. The Insured shall call and place a request for a medical teleconsultation on the helpdesk number and the Service Provider shall arrange a callback for the Insured. Weshall not be responsible or liable for any defect or deficiency in the medical consultation, diagnosis or treatment recommended to Insured by any medical practitioner
- ii. This service is NOT for use for medical emergencies, for life threatening conditions or for when Insured needs acute care and the Insured should not disregard or delay to seek medical advice from his/her physician based on anything that appears or is provided to him by or through this service in case of medical emergencies, for life threatening conditions or for when Insured needs acute care.
- iii. The consulting doctor may not be able to complete the diagnosis or prescribe a medicine in one consultation due to additional requirements of some medical tests or reports that the consulting doctor may prescribe at his/her own discretion. In such cases, the decision of the doctor whether to issue a prescription or advice a follow up will be considered final.

6. Tele-consultation services for Psychological conditions

On request of the Insured, the Service Provider will arrange up to 2 telephonic consultations in a year with trained and qualified practitioners to manage mental health & wellness.

Note: A waiting period of 30 days from Policy inception date is applicable to this benefit for New Policies and ported-in Policies.

Specific Conditions applicable to Tele-consultation services for Psychological conditions-

- i. No medical intervention will be covered under this benefit
- ii. Any unutilized service cannot be carried forwarded to the next year.
- iii. The psychological assistance would be offered around managing anxiety, mental stress, coping with changing environment etc.

7. Concierge services/ Assistance

The Service Provider would be offering telephonic assistance for booking and coordination of various concierge services as listed below to support the Insured as per his requirement. The Insured shall directly pay to the Service Provider and or Service Provider's vendor the fees towards such service utilization, if any.

- a. Daily Care / Home Assistance
 - i. Assistance for arranging Physiotherapy at home (over and above the Physiotherapy Service mentioned in Part B. Scope of Cover 3)
 - ii. Assistance for arranging Nursing at home (over and above the Physiotherapy Service mentioned in Part B. Scope of Cover 4)
 - iii. Appointment booking assistance at Hospital / Laboratory
 - iv. Assistance for booking Air Conditioning / water purifier / washing machine repair and maintenance services
 - v. Assistance for booking Electrician, Plumber, Carpenter services
 - vi. Assistance for booking Pest control services
 - vii. Assistance for booking Car wash / sanitization services
- b. Cyber Assistance
 - i. Assistance on how to block debit / credit card
 - ii. Assistance in understanding mobile phone and its usage
 - iii. Assistance in downloading OTT (Over The Top) media, making payments etc.
 - iv. Assistance in placing online orders
- c. Travel Assistance
 - Travel booking assistance
- d. Legal Assistance
 - i. Assistance for seeking Legal consultation on will, property contract vetting etc.

The telephonic concierge service support extended by the Service Provider would be unlimited and the offering can be only on need basis and depends on the Service Providers availability in the vicinity.

Note: No waiting period is applicable to this benefit.

Specific Conditions applicable to Concierge services/ Assistance

- i. Insured agrees to pay all charges reasonably levied by Service Provider and or Service Provider's vendors as notified at the time of booking and the same are not reimbursable from the Company. Additional charges may be incurred from time to time depending upon actual service availed / utilized by the insured.
- ii. The Insured member should under no circumstances share their password or banking credentials or any critical personal information with the Service Providers or Service Provider's vendor.

8. General conditions for all coverages:

- The services under this Rider are provided by the respective Service Providers to Insured. The Company is only a facilitator for such services by Service Provider and does not represent, assure or endorse the accuracy, completeness, reliability, suitability, appropriateness or the quality of the actual services provided by Service Provider/s. Decision to avail the services of Service Provider shall be taken by insured after careful and independent evaluation, which shall be at insured's sole discretion and risk. The Company is not responsible / liable in any way for any deficiency of services provided by Service Providers or for any losses / sufferings / injuries, if any, incurred by the Insured as a result of availing / utilizing the services from Service Provider/s.
- The Company and or Service Provider will not be held liable for non-delivery of Services in case of unforeseen circumstances beyond their control including but not limited to strikes, lockouts, , civil commotion, riots, war, acts of terrorism, , action of any government or regulatory authority, , abnormal weather conditions or act of god perils at the location of services, or any other cause beyond the reasonable control which by exercise of reasonable diligence could not have been prevented or provided against.

PART C. DEFINITIONS

1. Base Policy – Company's Health Insurance Policy with which this Rider can be attached is termed as "Base Policy"

2. Doctor / Medical Practitioner

A Medical Practitioner is a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of license.

3. Medical Emergency / Emergency Care

Emergency care means management of an illness or injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a medical practitioner to prevent death or serious long term impairment of the Insured Member's health.

- 4. Insured or Insured Member/s: means the insured person, or his Family Members, named in the Schedule.
- 5. **Primary Contact** means any individual whom the Insured covered under this Rider has named to be contacted in case of any emergency situation which falls under the purview of this Rider.
- 6. **Rider:** means the Rider as in this Rider insurance contract wordings which may be opted by Insured for him/her and or the Insured Members [in floater policy].
- 7. Rider Period: means period mentioned in Schedule of the Base Policy.
- 8. **Service Provider/s:** means the service providers engaged / named by the Company for providing the services as covered in this Rider.
- 9. **Specialist Consultant** means a person who holds a medical post graduate or higher degree in the specific line of treatment under Allopathic medicine.

All other DEFINITIONS as defined in the Base Policy wordings are applicable mutatis mutandis to this Rider.

The words used in this Rider but not defined herein shall bear the same definition/meaning as in the Base Policy.

PART D: SPECIFIC GENERAL CONDITIONS APPLICABLE TO ALL SECTIONS

All Policy Terms and Conditions and General conditions of opted Base Policy read with Base Policy Schedule are applicable mutatis mutandis, to all Coverages under this Rider for Health Products.

1. Opting Rider

This Rider cannot be opted during mid-term of Base Policy.

2. Cancellation of Riders

All the other terms and conditions as to cancellation of Base Policy shall mutatis mutandis apply to the Cancellation of Rider.

3. Service Delivery Process specific to Rider

1. Ambulance Services service delivery process

- i. Insured can reach the Service Provider by:
 - a) Directly calling on the Customer Care number 0120-4984848
 - b) Pressing the SOS button on the BAGIC app (Caringly Your's app)
- ii. The service under the section includes the support assistance primarily arising due to any accidental occurrence, fall, sudden illness, Anxiety, palpitations, road accident, etc.
- iii. The Service Provider will have a 24*7 manned helpdesk to ensure the services.
- iv. The qualified medical/ trained personnel shall be managing all the emergency assistance
- v. In case of any need and requirement, the Customer Care shall arrange the Ambulance to refer the patient to the nearest medical facility/Hospital The Customer Care shall also arrange the intimation and regularly update the registered primary contact in respect of status of service delivery.

Note: This service is currently available in specific listed locations, specified at www.bajajallianz.com. New locations may be added to this list subsequently.

2. Fall Detection Smart watch service delivery process-

- a) Upon accidental fall of the Insured Person wearing smart watch, the watch will detect the fall and intimate the same to the Service Provider as well as the registered primary contact.
- b) The Service provider shall get in touch with the insured person/primary contact through a phone call and subsequently arrange for an ambulance if medically necessary to transfer the insured person to the nearest hospital.
- c) The smart watch has to be worn at all times by the Insured Person in order to detect the fall.

Note: This service is currently available in specific listed locations. New locations may be added to this list subsequently.

3. Physiotherapy service delivery process

Insured Member can reach the Service Provider by:

- a) Directly calling on the Customer Care number 0120-4984848
- b) Pressing the SOS button on the BAGIC app (Caringly your's app) which shall lead the call to the Customer Care number

Note: This service is currently available in specific listed locations. New locations may be added to this list subsequently.

4. Nursing Care service delivery process

Insured can reach the Service Provider by:

- a) Directly calling on the Customer Care number 0120-4984848
- b) Pressing the SOS button on the BAGIC app (Caringly your's app) which shall lead the call to the Customer Care number.

Note: This service is currently available in specific listed locations. New locations may be added to this list subsequently.

5. Unlimited Medical Teleconsultation service delivery process.

Insured can reach the Service Provider by:

- a) Directly calling on the Customer Care number 0120-4984848
- b) Pressing the SOS button on the BAGIC app (Caringly your's app) which shall lead the call to the Customer Care number

Once the request is placed with the Service Provider, they will arrange a call back for consultation to the insured.

6. Tele-consultation services for Psychological conditions service delivery process

Insured can reach the Service Provider by:

- a) Directly calling on the Customer Care number 0120-4984848
- b) Pressing the SOS button on the BAGIC app (Caringly your's app) which shall lead the call to the Customer Care number
 - Once the request is placed with the Service Provider, they will arrange a callback for consultation to the Insured.

7. Concierge Services/ Assistance Service Delivery process

Insured can reach the Service Provider by:

- a) Directly calling on the Customer Care number 0120-4984848
- b) Pressing the SOS button on the BAGIC app (Caringly your's app) which shall lead the call to the Customer Care number

Note: This service is currently available in specific listed locations . New locations may be added to this list subsequently.

4. Discount

- a) Employee Discount: 20% discount on published premium rates to the Company's employees & employees of group companies, this discount is applicable only if the Policy is booked in direct code.
- b) Online/Direct Business Discount: For business written online where no commission is paid, 5% discount will be given. This discount is not applicable for Employees who get employee discount
- c) Long Term Policy Discount:
 - i. 4% discount is applicable if Rider and Base Policy are opted for 2 years
 - ii. 8% discount is applicable if Rider and Base Policy are opted for 3 years

Note: Other discounts, if any, as per Base Policy will not be applicable to this Rider



5. Withdrawal of Rider

- a. If Base Policy is withdrawn by the Company, then this Rider shall also stand withdrawn automatically without any separate notice/intimation.
- b. In the likelihood of this Rider being withdrawn in future, the Company will intimate the Insured about the same 90 days prior to expiry of the Base Policy.

6. Grievance Redressal Procedure

Welcome to Bajaj Allianz General Insurance Company Ltd ["Bajaj Allianz"] and Thank You for choosing Us as *Your* Insurer.

Please read Your Rider together with Base Policy Wordings and Base Policy Schedule.

The Rider Wordings and Base Policy set out the terms of *Your* contract with us, including for Riders, if opted by You. Please read *Your* Rider Wordings and Base Policy carefully to ensure that this Rider meets *Your* needs.

We do Our best to ensure that Our customers are delighted with the service they receive from the Insurer. 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 with the Company. This will help us deal with the issue more efficiently. If *You* don't have it, please call Our Branch office.

Initially, We suggest *You* contact the Branch Operations Manager of the local office which has issued the Policy. The address and telephone number will be available in the Policy. 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:

Bajaj Allianz General Insurance Co. Ltd Bajaj Allianz House, Airport Road Yerawada, Pune 411006

E-mail: bagichelp@bajajallianz.co.in

Call: 1800-225858 (free calls from BSNL/MTNL lines only)

1800-1025858 (free calls from Bharti users - mobile /landline) or 020-30305858

Grievance Redressal Cell for Senior Citizens

Senior Citizen Cell for Insured who are Senior Citizens

'Good things come with time' and so for Our customers who are above 60 years of age We have created special cell to address any health insurance related query. Our senior citizen customers can reach Us through the below dedicated channels to enable Us to service them promptly

Health toll free number: 1800-103-2529

Exclusive Email address: seniorcitizen@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 are mentioned below:



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 are mentioned below:

Office Details Jurisdiction of Office Union Territory, District)		
AHMEDABAD - nsurance Ombudsman Office of the Insurance Ombudsman, eevan Prakash Building, 6th floor, Tilak Marg, Relief Road, AHMEDABAD – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu	
BENGALURU - Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Soudha Building,PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in	Karnataka.	
BHOPAL - Insurance Ombudsman Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Email: bimalokpal.bhopal@cioins.co.in	Madhya Pradesh Chattisgarh.	
BHUBANESHWAR - Insurance Ombudsman Office of the Insurance Ombudsman, 62, Forest park, Bhubaneswar – 751 009. Tel.: 0674 - 2596461 /2596455 Email: bimalokpal.bhubaneswar@cioins.co.in	Orissa.	
CHANDIGARH - Insurance Ombudsman Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Email: bimalokpal.chandigarh@cioins.co.in	Punjab, Haryana (excluding Gurugram, Faridabad, Sonepat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu & Kashmir,Ladakh & Chandigarh.	
CHENNAI - Insurance Ombudsman Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Email: bimalokpal.chennai@cioins.co.in	Delhi & following Districts of Haryana - Gurugram, Faridabad, Sonepat & Bahadurgarh.	
DELHI - Insurance Ombudsman Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@cioins.co.in	Delhi & following Districts of Haryana - Gurugram, Faridabad, Sonepat & Bahadurgarh.	



GUWAHATI - Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.	
HYDERABAD - Insurance Ombudsman Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 Email: bimalokpal.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.	
JAIPUR - Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Nidhi — II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@cioins.co.in	Rajasthan.	
ERNAKULAM - Insurance Ombudsman Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Email: bimalokpal.ernakulam@cioins.co.in	Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.	
KOLKATA - Insurance Ombudsman Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Email: bimalokpal.kolkata@cioins.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.	
LUCKNOW - Insurance Ombudsman Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Email: bimalokpal.lucknow@cioins.co.in	Districts of Uttar Pradesh: Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar	
MUMBAI - Insurance Ombudsman Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 69038821/23/24/25/26/27/28/28/29/30/31 Email: bimalokpal.mumbai@cioins.co.in	Goa, Mumbai Metropolitan Region (excluding Navi Mumbai & Thane).	



NOIDA -

Insurance Ombudsman
Office of the Insurance Ombudsman,
Bhagwan Sahai Palace
4th Floor, Main Road, Naya Bans, Sector 15,
Distt: Gautam Buddh Nagar, U.P-201301.
Tel.: 0120-2514252 / 2514253
Email: bimalokpal.noida@cioins.co.in

State of Uttarakhand and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddh nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.

PATNA -

Insurance Ombudsman Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: bimalokpal.patna@cioins.co.in

Bihar, Jharkhand.

PUNE -

Insurance Ombudsman
Office of the Insurance Ombudsman,
Jeevan Darshan Bldg., 3rd Floor,
C.T.S. No.s. 195 to 198, N.C. Kelkar Road,
Narayan Peth, Pune – 411 030.
Tel.: 020-41312555
Email: bimalokpal.pune@cioins.co.in

Maharashtra, Areas of Navi Mumbai and Thane (excluding Mumbai Metropolitan Region).

"List of Ombudsman offices established by the Central Government for redressal of grievance are also available at https://www.cioins.co.in/Ombudsman"

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

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

E-mail: inscoun@cioins.co.in, Tel: 022 -69038800/69038812, Website: https://www.cioins.co.in