

HEALTH PRIME

Rider for Health Products Prospectus Cum Policy Wordings

PART A: PREAMBLE

Whereas the insured described in the Base Policy Schedule hereto (hereinafter called the 'Insured' or 'You') has made to Bajaj Allianz General Insurance Company Limited (hereinafter called the "Company" or "Insurer" or "We", "Insurance Company") an additional proposal or an additional Proposal as mentioned in the transcript of the additional Proposal, which shall be the basis of this Riders insurance Contract ["Rider"] and is deemed to be incorporated herein, containing certain undertakings, declarations, information/particulars and statements, which is hereby agreed to be the basis of this Rider Insurance Contract and be considered as incorporated herein, for the Rider Insurance Contract hereinafter contained and has paid the additional premium specified in the Rider as consideration for this Rider Insurance Contract, now the Company agrees, subject always to the Base Policy and the following terms, conditions, exclusions, and limitations (other than time bound exclusions) of the Base Policy, and in excess of the amount of the Deductible, to additionally indemnify/pay the Insured/Insured member, as the case may be, in the manner and to the extent during the Rider Period hereinafter.

PART B: DEFINITIONS

General Practitioner - General practitioners (GPs) is a Doctor/Medical Practitioner/Physician who did not specialize in any field of medicine after successful completion of graduation from medical school and treat all common medical conditions, refer patients to hospitals and other medical services for urgent and Specialist treatment. Provided such General Practitioner qualifies the National Exit Test held under section 15 of National Medical Commission Act, 2019 and is granted a license to practice medicine and shall have his/her name and qualifications enrolled in the National Register or a State Register, as the case may be maintained under National Medical Commission Act, 2019. Provided that a person who has been registered in the Indian Medical Register maintained under the Indian Medical Council Act, 1956 (102 of 1956) (i) prior to 02nd September 2019, and (ii) before the National Exit Test becomes operational under sub-section (3) of section 15 of National Medical Commission Act, 2019, shall be deemed to have been registered under National Medical Commission Act, 2019 and be enrolled in the National Register maintained under National Medical Commission Act, 2019.

Specialist - A specialist is a Physician/ is a Doctor/Medical Practitioner who has completed advanced education and training in a specific field of medicine. e.g Cardiologist, Gastroenterologist, ENT specialist, Gynaecologist, Paediatrician etc.,. Provided such Specialist qualifies the National Exit Test held under section 15 of National Medical Commission Act, 2019 and is granted a license to practice medicine and shall have his/her name and qualifications enrolled in the National Register or a State Register, as the case may be maintained under National Medical Commission Act, 2019. Provided that a person who has been registered in the Indian Medical Register maintained under the Indian Medical Council Act, 1956 (102 of 1956) (i) prior to 02nd September 2019, and (ii) before the National Exit Test becomes operational under sub-section (3) of section 15 of National Medical Commission Act, 2019, shall be deemed to have been registered under National Medical Commission Act, 2019 and be enrolled in the National Register maintained under National Medical Commission Act, 2019.

Rider: means the Rider insurance contract as in these Rider insurance contract wordings which may be opted by Insured for him/her and or the Insured members [in floater policy].

Rider Period: means period mentioned in II which shall be in consonance of the Policy Period under Base Policy.

Insured Member/s: means the family members of Insured covered under floater Base Policy.

Service Provider/s: means the service providers engaged/named by the Insurer for providing the riaks covers mentioned in this Riders.

All other DEFINITIONS as defined in the respective opted Base Policy Wordings are applicable mutatis mutandis, to this Rider.

The words used in these Riders but not defined herein shall bear the same definition/meaning as in the opted Base Policy.

PART C. OPERATIVE PARTS

What We will indemnify/pay for-

In consideration of payment of additional premium by the Insured to the Company and realization/receipt thereof by the Company, it is hereby agreed to indemnify/pay Insured or Insured member covered under the Rider, as the case may be, in respect of an admissible claims, any or all of the following covers subject to the Sum Insured, limits, terms, conditions and definitions, exclusions and in excess of the amount of the Deductible, contained or otherwise expressed in the Rider read with the Base Policy Schedule.

I. Who can opt for the Health Prime Rider?

Only Insured who have opted for the Company's Health Policy (Base Policy) can buy this Rider for Insured himself and or his family members ["Insured member/s"] in case of floater Base Policy. This Rider has 9 plans/Options.

II. Rider Period:

1 year, 2 years, or 3 years as opted by Insured and mentioned in Rider and this Rider Period shall be as per the tenure of the Base Policy viz. if Base Policy is for 1 year then the Rider Period shall be for 1 year and if Base Policy is for 2 years then the Rider Period shall be for 2 years etc.,

PART D. SCOPE OF COVER:

We will pay Customary and Reasonable Medical Expenses incurred for below listed coverage during the Rider Period up to the Sum Insured as specified in the Rider or up to the limit of indemnity as specified in the Rider:

- a. Tele Consultation Cover
- b. Investigations Cover – Pathology & Radiology Cover
- c. Doctor Consultation Cover
- d. Annual Preventive Health check-up cover

HEALTH PRIME

Note:

During every Policy Year under Rider Period, Insured member will be eligible for coverage as per the plan selected from the below table. Plan must be opted separately for Insured/each Insured member covered under this Rider even if the Base Policy is Individual Sum Insured plan or floater plan. This cover will be applicable each year for Rider with Rider Period more than 1 year.

Options available in this Rider:

INDIVIDUAL POLICY						
Benefits	Option 1	Option 2 (In INR)	Option 3 (In INR)	Option 4 (In INR)	Option 5 (In INR)	Option 6 (In INR)
Tele Consultation Cover	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
	(GPs)	(All Specialties)	(All Specialties)	(All Specialties)	(All Specialties)	(All Specialties)
Investigations Cover – Pathology & Radiology Expenses	NA	1500	3000	5000	7000	15000
Doctor Consultation Cover	NA	NA	1000	2000	3000	
Annual Preventive Health Check -up cover	Yes	Yes	Yes	Yes	Yes	Yes
	(1 Voucher)	(1 Voucher)	(1 Voucher)	(1 Voucher)	(1 Voucher)	(1 Voucher)

FAMILY FLOATER			
Benefits	Family Floater Option 1 (Upto 2+2)	Family Floater Option 2 (Upto 2+2)	Family Floater Option 3 (Upto 2+2)
Tele Consultation Cover	Unlimited	Unlimited	Unlimited
	(All Specialties)	(All Specialties)	(All Specialties)
Investigations Cover – Pathology & Radiology Expenses	10,000	20,000	25,000
Doctor Consultation Cover			
Annual Preventive Health Check -up cover	Yes	Yes	Yes
	(2 Voucher)	(2 Voucher)	(2 Voucher)

Section 1. Tele Consultation Cover

Coverage:

If the Insured member is suffering from any illness or injury he / she can consult **Medical Practitioner/ Physician/Doctor** listed on the Digital platform of concerned service provider’s application via video, audio, or chat channel. This cover shall be in compliance with the Telemedicine Practice Guidelines dated 25th of March 2020 and as amended from time to time.

Section 2. Doctor Consultation Cover

Coverage:

- a) If the Insured/Insured member/s is suffering from any illness or injury he / she can consult Medical Practitioner/ Physician/Doctor in person from prescribed network centers or the Insured/Insured member/s can consult Medical Practitioner/ Physician/Doctor outside prescribed network centers up to the limit as specified under the this Rider read with Base Policy Schedule.]

Section 3. Investigations Cover – Pathology & Radiology Expenses

Coverage:

- a) If the Insured/Insured member/s is suffering from any illness or injury he / she can avail the service for investigations for pathology or radiology from prescribed network centers or outside prescribed network centers up the limit as specified under this Rider read with Base Policy Schedule.

Section 4. Annual Preventive Health Check -up cover:

Coverage:

1. The Insured/Insured member/s can avail the free Preventive health checkup once in every Policy Year as per the list given below.
 - i. Hemogram & ESR
 - ii. Liver function test
 - iii. Urine routine
 - iv. Blood sugar - Fasting
 - v. HbA1C
 - vi. Lipid profile
 - vii. Blood urea
 - viii. Serum creatinine
 - ix. T3/T4/TSH
 - x. ECG
2. The health check-up can be availed on a cashless basis in the prescribed list of hospitals or diagnostic centers.
3. List of prescribed hospitals or diagnostic centers can be accessed from the Insurer’s website or the Health application.
4. The free health check-up benefit must be availed within the Rider Period only, cover cannot be extended after the expiry of the Rider Period read with Base Policy.

HEALTH PRIME

PART E: SPECIFIC EXCLUSIONS APPLICABLE TO ALL SECTIONS

Exclusions for Tele Consultation Cover

1. Tele consultation outside the Digital platform of service provider's application/website video/audio/chat consultation, in-clinic/physical consultation is not covered under the Rider.
2. Teleconsultation benefit is not transferrable to any other member unless the member is covered under the Base Policy & has opted this Rider.
3. If the Tele Consultation is not availed in the policy year during the Rider Period, the benefit cannot be carried forward to the subsequent policy year during the Rider Period.
4. Reimbursement of teleconsultation benefit is not covered.
5. Initial 30 days waiting period is applicable on teleconsultation required for illness during the first year of Rider Period. This waiting period is not applicable for renewals without break.

Exclusions for Doctor Consultation Cover:

1. Other expenses of investigations, medicines, procedures or any medical, non-medical items are not covered.
2. If the Doctor Consultation cover is not availed in the policy year the benefit cannot be carried forward to the subsequent policy year after renewal.
3. Initial 30 days waiting period is applicable for consultation required for illness during the first year of this Rider. This waiting period is not applicable for renewals without break.

Exclusions for Investigations Cover – Pathology & Radiology expenses

1. If the Investigation cover is not availed in the respective policy year the benefit cannot be carried forward to the subsequent policy year after renewal.
2. Initial 30 days waiting period is applicable for investigations Cover- Pathology & Radiology expenses related to illness during the first year of Rider. This waiting period is not applicable for renewals without break.

Exclusions for Annual Preventive Health Check -up cover

1. Preventive health check-up cannot be availed outside the prescribed list of hospitals or diagnostic centers.
2. Home collection facility will be available only at selected locations. For locations where home sample collection is not available, the customer will have to physically go and take the tests.
3. The complete list of tests as given above has to be completed in a single appointment.
4. If the health check-up is not availed in the policy year during the Rider Period the benefit cannot be carried forward to the subsequent policy year during the Rider Period after renewal.
5. Reimbursement of preventive health check-up expenses is excluded from the scope of the Rider.
6. Initial 30 days waiting period is applicable for investigations related to illness during the first year of Rider Period. This waiting period is not applicable for renewals without break.

PART F: STANDARD 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 Coverage under these Riders for Health Products.

1. Cancellation of Riders:-

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

2. Grievance Redressal Procedure

The company has always been known as a forward-looking customer centric organization. It takes immense pride in its approach of "Caringly Yours". To provide you with top-notch service on all fronts, the company has provided with multiple platforms via which you can always reach out to us at below mentioned touch points

1. Our toll-free number 1-800-209- 5858 or 020-30305858, say "Hi" on WhatsApp on +91 7507245858
2. Branches for resolution of your grievances / complaints, the Branch details can be found on our website www.bajajallianz.com/branch-locator.html
3. Register your grievances / complaints on our website www.bajajallianz.com/about-us/customer-service.html
4. E-mail
 - a) Level 1: Write to bagichelp@bajajallianz.co.in and for senior citizens to seniorcitizen@bajajallianz.co.in
 - b) Level 2: In case you are not satisfied with the response given to you at Level 1 you may write to our Grievance Redressal Officer at ggro@bajajallianz.co.in
 - c) Level 3: If in case, your grievance is still not resolved, and you wish to talk to our care specialist, please give a missed call on +91 80809 45060 OR SMS To 575758 and our care specialist will call you back
5. If you are still not satisfied with the decision of the Insurance Company, you may approach the Insurance Ombudsman, established by the Central Government for redressal of grievance. Detailed process along with list of Ombudsman offices are available at www.cioins.co.in/ombudsman.html

The contact details of the Ombudsman offices are mentioned in Annexure I:

PART F: SPECIFIC 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 Coverage under these Riders for Health Products.

3. Opting Rider-

This Rider cannot be opted during mid-term of Base Policy.
Any discount applicable, if any, on Base Policy will not be applicable on this Rider.

HEALTH PRIME

4. Service Delivery Process specific to Rider- Doctor consultation Service Delivery process

Doctor Consultation service can be availed 2 ways, as given

A. Reimbursement Service Delivery

I. Digital platform of service provider App / Service provider Website

- a) Start by downloading the Digital platform of service provider app / Sign-up on the Service provider website.
- b) Sign-up using the registered mobile number
- c) Under my "Health Plans", select the product "Health Prime"
- d) Select doctor consultation benefit option
- e) Enter the necessary details and upload the invoice
- f) Share bank account details and upload a cancelled cheque
- g) Submit the claim

II. Emailing to Customer Service

- a) Email to Service provider or call on customer care no. of service provider
- b) Attach a scanned copy of the invoice with all details clearly visible
- c) Mention details like hospital/clinic name, patient name, and bill amount
- d) Share bank details (account number, bank name, IFSC, primary account holder name) and upload a cancelled cheque

Tele-consultation Service Delivery Process:

I. Digital platform of service provider App / Service provider Website

- a) Start by downloading the Digital platform of service provider app / visiting the Service provider website
- b) Sign-up using the registered mobile number
- c) Under my "Health Plans", select the product "Health Prime"
- d) Select teleconsultation benefit option
- e) Select the Doctor of choice from the Doctor list
- f) Select the date and time of choice
- g) Submit
- h) The Insured Member/Members will receive the link to join the call 15 mins before the consultation
- i) The Doctor will join the call on scheduled day and time

Investigations Cover – Pathology & Radiology Service Delivery Process

I. Digital platform of service provider App / Service provider Website

- a) Start by downloading the Digital platform of service provider App / Sign-up on the Service provider website
- b) Sign-up using the registered mobile number
- c) Under my "Health Plans", select the product "Health Prime"
- d) Select laboratory & radiology benefit option
- e) Enter the necessary details and upload the invoice
- f) Share bank account details and upload a cancelled cheque
- g) Submit the claim

II. Emailing to Customer Service

- a) Email to Service provider or call on customer care no. of service provider.
- b) Attach a scanned copy of the invoice with all details clearly visible
- c) Mention details like hospital/lab name, patient name, and bill amount
- d) Share bank details (account number, bank name, IFSC, primary account holder name) and upload a cancelled cheque

Free Preventive Health Check -up Service Delivery process

I. Digital platform of service provider App / Service provider Website

- a) Start by downloading the Digital platform of service provider App / Log in to the Service provider website
- b) Sign-up using the registered mobile number
- c) Under my "Health Plans", select the product "Health Prime"
- d) Select preventive health check-up option
- e) Select the hospital/ diagnostic centre as per Your choice
- f) Enter the date of availing service
- g) SMS with voucher link shared on the registered mobile number
- h) Share the voucher code to avail cashless preventive health check-up benefit

II. Emailing to Customer Service

- a) Email to Service provider or call on customer care no. of service provider.
- b) Mention details like hospital/lab name, customer name, and date
- c) The customer care executive will call to confirm the customer's identity using OTP
- d) SMS with voucher link shared on the registered mobile number
- e) Share the voucher code to avail cashless preventive health check-up benefit.

HEALTH PRIME

Doctor Consultation & Investigation services can be availed 2 ways, as given

B. Cashless Service Delivery

I. Digital platform of service provider App / Service provider Website

- a) Start by downloading the Digital platform of service provider App / Sign-up on the Service provider website
- b) Sign-up using the registered mobile number
- c) Under my "Health Plans", select the product "Health Prime"
- d) Select Doctor Consultation & Investigation benefit option with cashless mode
- e) Select "Doctor Consultation" or "Pathology & Radiology Cover"
- f) Select the doctor/hospital/lab of choice within the Digital platform of service provider
- g) Select the date of redemption and enter the amount to be utilized
- h) Review and submit

5. Discounts:

- i. **Family Discount:** 10% family discount shall be offered if 2 eligible Family Members are covered under a single Policy and 15 % if more than 2 of any of the eligible Family Members are covered under a single Policy. Moreover, this family discount will be offered for both new policies as well as for renewal policies. Family discount is not applicable to Floater Policies.
- ii. **Employee Discount:** 20% discount on published premium rates to employees of Bajaj Allianz & its group companies, this discount is applicable only if the Policy is booked in direct code.
- iii. **Online/Direct Business Discount:** For business written online where no commission is paid 5% discount will be given.
 Note: this discount is not applicable for Employees who get employee discount
- iv. **Long Term Policy Discount:**
 - a. 4 % discount is applicable if Policy is opted for 2 years
 - b. 8 % discount is applicable if Policy is opted for 3 years

6. Withdrawal of Rider:

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

7. Instalment Premium

Instalment premium option of Base Policy shall mutatis mutandis apply to the Installment Premium.

Annexure I:

Office Details	Jurisdiction of Office Union Territory, District
<p>AHMEDABAD - Shri Kuldip Singh</p> <p>Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in (mailto:bimalokpal.ahmedabad@cioins.co.in)</p>	<p>Gujarat, Dadra & Nagar Haveli, Daman and Diu.</p>

HEALTH PRIME

Office Details	Jurisdiction of Office Union Territory, District
<p>BENGALURU -</p> <p>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 (mailto:bimalokpal.bengaluru@cioins.co.in)</p>	<p>Karnataka.</p>
<p>BHOPAL -</p> <p>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 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@cioins.co.in (mailto:bimalokpal.bhopal@cioins.co.in)</p>	<p>Madhya Pradesh Chattisgarh.</p>
<p>BHUBANESHWAR - Shri Suresh Chandra Panda</p> <p>Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@cioins.co.in (mailto:bimalokpal.bhubaneswar@cioins.co.in)</p>	<p>Orissa.</p>
<p>CHANDIGARH -</p> <p>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 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@cioins.co.in (mailto:bimalokpal.chandigarh@cioins.co.in)</p>	<p>Punjab, Haryana(excluding Gurugram, Faridabad, Sonapat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.</p>

HEALTH PRIME

Office Details	Jurisdiction of Office Union Territory, District
<p>CHENNAI -</p> <p>Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@cioins.co.in (mailto:bimalokpal.chennai@cioins.co.in)</p>	<p>Tamil Nadu, Tamil Nadu PuducherryTown and Karaikal (which are part of Puducherry).</p>
<p>DELHI - Shri Sudhir Krishna</p> <p>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 (mailto:bimalokpal.delhi@cioins.co.in)</p>	<p>Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh.</p>
<p>GUWAHATI -</p> <p>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 (mailto:bimalokpal.guwahati@cioins.co.in)</p>	<p>Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.</p>
<p>HYDERABAD -</p> <p>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 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@cioins.co.in (mailto:bimalokpal.hyderabad@cioins.co.in)</p>	<p>Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.</p>
<p>JAIPUR -</p> <p>Office of the Insurance Ombudsman,</p>	<p>Rajasthan.</p>

HEALTH PRIME

Office Details	Jurisdiction of Office Union Territory, District
<p>Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@cioins.co.in (mailto:bimalokpal.jaipur@cioins.co.in)</p>	
<p>ERNAKULAM - Ms. Poonam Bodra Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@cioins.co.in (mailto:bimalokpal.ernakulam@cioins.co.in)</p>	<p>Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.</p>
<p>KOLKATA - Shri P. K. Rath Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@cioins.co.in (mailto:bimalokpal.kolkata@cioins.co.in)</p>	<p>West Bengal, Sikkim, Andaman & Nicobar Islands.</p>
<p>LUCKNOW -Shri Justice Anil Kumar Srivastava Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@cioins.co.in (mailto:bimalokpal.lucknow@cioins.co.in)</p>	<p>Districts of Uttar Pradesh :</p> <p>Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, 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.</p>

HEALTH PRIME

Office Details	Jurisdiction of Office Union Territory, District
<p>MUMBAI -</p> <p>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 Fax: 022 - 26106052 Email: bimalokpal.mumbai@cioins.co.in (mailto:bimalokpal.mumbai@cioins.co.in)</p>	<p>Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.</p>
<p>NOIDA - Shri Chandra Shekhar Prasad</p> <p>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 (mailto:bimalokpal.noida@cioins.co.in)</p>	<p>State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.</p>
<p>PATNA - Shri N. K. Singh</p> <p>Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel. : 0612-2547068 Email: bimalokpal.patna@cioins.co.in (mailto:bimalokpal.patna@cioins.co.in)</p>	<p>Bihar, Jharkhand.</p>
<p>PUNE - Shri Vinay Sah</p> <p>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 (mailto:bimalokpal.pune@cioins.co.in)</p>	<p>Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.</p>

Bajaj Allianz General Insurance Co. Ltd.

Bajaj Allianz House, Airport Road, Yerawada, Pune - 411 006. Reg. No.: 113
For more details, log on to: www.bajajallianz.com | E-mail: bagichelp@bajajallianz.co.in or
Call at: Sales - 1800 209 0144 / Service - 1800 209 5858 (Toll Free No.)
Issuing Office:

Caringly yours



HEALTH PRIME