

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?	<p>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.</p>	Section A.1
		<p>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.</p>	Section A.2
		<p>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</p>	Section A.3
		<p>4. Medical Check-up At the end of every continuous period of 4 years during which You/your spouse named in the schedule have held Our Tax Gain Policy without making a hospitalization claim , either You or your spouse (any one of You) named in the schedule may apply to Us for a free medical check up (Physician Consultation, Fasting Blood Glucose, Complete Blood Count, Serum Cholesterol, Urine Routine, X-ray Chest,) at a Bajaj Allianz Diagnostic Centre, the location of which We will specify at the time of Your application .</p>	Section A.4
		<p>5. Modern Treatment: Modern Treatment Methods and Advancement in Technologies (as per below list) shall be restricted to 50% of Sum Insured or 5 Lacs, whichever is lower. A. Uterine Artery Embolization and HIFU B. Balloon Sinuplasty C. Deep Brain stimulation D. Oral chemotherapy E. Immunotherapy- Monoclonal Antibody to be given as injection F. Intra vitreal injections G. Robotic surgeries H. Stereotactic radio surgeries I. Bronchical Thermoplasty J. Vaporisation of the prostate (Green laser treatment or holmium laser treatment) K. IONM -(Intra Operative Neuro Monitoring) L. Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered Note: This cover is subject to the Sum Insured, sub-limits, terms, conditions and definitions, exclusions contained or otherwise expressed in this Policy.</p>	Section A.5
3	What are the major exclusions in the policy common under hospitalisation cover	<p>General Exclusions</p> <ol style="list-style-type: none"> Any dental treatment that comprises of cosmetic surgery, dentures, dental prosthesis, dental implants, orthodontics, surgery of any kind unless as a result of Accidental Bodily Injury to natural teeth and also requiring hospitalization Medical expenses where Inpatient care is not warranted and does not require supervision of qualified nursing staff and qualified medical practitioner round the clock. This exclusion is however not applicable for any day care treatment taken for the accidental bodily injury in a day care centre/ hospital 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 nationalization or requisition of or damage by or under the order of any government or public local authority. Any Medical expenses incurred due to Act of Terrorism will be covered under the Policy. Circumcision unless required for the treatment of Illness or Accidental bodily injury, Investigation & Evaluation (Excl04) <ol style="list-style-type: none"> Expenses related to any admission primarily for diagnostics and evaluation purposes only are excluded even if the same requires confinement at a Hospital. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded. Rest Cure, rehabilitation and respite care (Excl05) <ol style="list-style-type: none"> Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes: <ol style="list-style-type: none"> Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons. Any services for people who are terminally ill to address medical, physical, social, emotional and spiritual needs 	

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<p>3</p>	<p>What are the major exclusions in the policy under OPD cover</p>	<ol style="list-style-type: none"> 7. Obesity/Weight Control (Excl06) Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions: <ol style="list-style-type: none"> 1. Surgery to be conducted is upon the advice of the Medical Practitioner/Doctor 2. The surgery/Procedure conducted should be supported by clinical protocols 3. The member has to be 18 years of age or older and 4. Body Mass Index (BMI); <ol style="list-style-type: none"> a. greater than or equal to 40 or b. greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss: <ol style="list-style-type: none"> i. Obesity-related cardiomyopathy ii. Coronary heart disease iii. Severe Sleep Apnea iv. Uncontrolled Type2 Diabetes 8. Change-of-gender treatments (Excl07) Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex. 9. Cosmetic or plastic Surgery (Excl08) Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner. 10. Hazardous or Adventure Sports (Excl09) Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving. 11. The cost of spectacles, contact lenses, hearing aids, crutches, dentures, artificial teeth and all other external appliances and/or devices whether for diagnosis or treatment except for Cost of Artificial Limbs, cost of prosthetic devices implanted during surgical procedure like Pacemaker, orthopedic implants, infra cardiac valve replacements, vascular stents etc. 12. External medical equipment of any kind used at home as post hospitalization care including cost of instrument used in the treatment of Sleep Apnea Syndrome (C.P.A.P), Continuous Peritoneal Ambulatory Dialysis (C.P.A.D) and Oxygen concentrator for Bronchial Asthmatic condition. 13. Congenital external diseases or defects or anomalies, growth hormone therapy, stem cell implantation or surgery except for Hematopoietic stem cells for bone marrow transplant for haematological conditions. 14. Intentional self-injury (including but not limited to the use or misuse of any intoxicating drugs or alcohol). 15. Breach of law (Excl10) Expenses for treatment directly arising from or consequent upon any Insured committing or attempting to commit a breach of law with criminal intent. 16. Excluded Providers (Excl11) Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website / notified to the policyholders are not admissible. However, in case of life threatening situations or following an accident, expenses up to the stage of stabilization are payable but not the complete claim. 17. Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. (Excl12) 18. Treatments received in health spas, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons.(Excl13) 19. Vaccination or inoculation unless forming a part of post bite treatment or if medically necessary and forming a part of treatment recommended by the treating Medical practitioner. 20. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure. (Excl14) 21. Refractive Error (Excl15) Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptries. 22. Unproven Treatments (Excl16) Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness. 23. Sterility and Infertility (Excl17) Expenses related to sterility and infertility. This includes: <ol style="list-style-type: none"> a. Any type of contraception, sterilization b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, c. Gestational Surrogacy d. Reversal of sterilization 	<p>Section D.</p>
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		<p>What we will not pay in case of Outpatient treatments</p> <p>I. Waiting Period</p> <p>1. 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.)</p> <p>2. 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.)</p> <p>3. 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.)</p> <p>II. Specific Exclusion</p> <p>1. Any expenses for treatment taken without the doctor advising the same and which is not duly supported by prescriptions.</p> <p>2. Any expenses for diagnostic tests without the treating doctor's referral.</p> <p>3. Cost of Annual Health Check up.</p> <p>4. Any expenses in excess of the maximum payable under the Outpatient medical expenses limit.</p>																					
4	Waiting periods for hospitalization cover	<p>1. Pre-existing Diseases waiting period (Excl01)</p> <p>a. Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 48 months of continuous coverage after the date of inception of the first Tax Gain Policy with us.</p> <p>b. In case of enhancement of Sum Insured the exclusion shall apply afresh to the extent of Sum Insured increase.</p> <p>c. If the Insured is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations then waiting period for the same would be reduced to the extent of prior coverage.</p> <p>d. Coverage under the Policy after the expiry of 48 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Us.</p> <p>2. Specified disease/procedure waiting period (Excl02)</p> <p>a. Expenses related to the treatment of the listed Conditions, surgeries/treatments shall be excluded until the expiry of 24 months of continuous coverage after the date of inception of the first Tax Gain Policy with Us. This exclusion shall not be applicable for claims arising due to an accident.</p> <p>b. In case of enhancement of Sum Insured the exclusion shall apply afresh to the extent of Sum Insured increase.</p> <p>c. If any of the specified disease/procedure falls under the waiting period specified for Pre-Existing diseases, then the longer of the two waiting periods shall apply.</p> <p>d. The waiting period for listed conditions shall apply even if contracted after the Policy or declared and accepted without a specific exclusion.</p> <p>e. If the Insured is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.</p> <p>f. List of specific diseases/procedures is as below</p> <table border="1"> <tr> <td>1. Any types of gastric or duodenal ulcers,</td> <td>10. Hernia and Hydrocele of all types</td> </tr> <tr> <td>2. Benign prostatic hypertrophy</td> <td>11. Fistulae,</td> </tr> <tr> <td>3. All types of sinuses</td> <td>12. Fissure in ano</td> </tr> <tr> <td>4. Haemorrhoids</td> <td>13. Fibromyoma</td> </tr> <tr> <td>5. Dysfunctional uterine bleeding</td> <td>14. Hysterectomy</td> </tr> <tr> <td>6. Endometriosis</td> <td>15. Surgery for any skin ailment</td> </tr> <tr> <td>7. Stones in the urinary and biliary systems</td> <td>16. Surgery on all internal or external tumours/ cysts/ nodules/polyps of any kind including breast lumps with exception of Malignant tumor or growth.</td> </tr> <tr> <td>8. Surgery on ears/tonsils/adenoids/ paranasal sinuses</td> <td>17. Parkinson's Disease</td> </tr> <tr> <td>9. Cataracts,</td> <td>18. Alzheimer's Disease</td> </tr> <tr> <td></td> <td>19. Mental Illness</td> </tr> </table>	1. Any types of gastric or duodenal ulcers,	10. Hernia and Hydrocele of all types	2. Benign prostatic hypertrophy	11. Fistulae,	3. All types of sinuses	12. Fissure in ano	4. Haemorrhoids	13. Fibromyoma	5. Dysfunctional uterine bleeding	14. Hysterectomy	6. Endometriosis	15. Surgery for any skin ailment	7. Stones in the urinary and biliary systems	16. Surgery on all internal or external tumours/ cysts/ nodules/polyps of any kind including breast lumps with exception of Malignant tumor or growth.	8. Surgery on ears/tonsils/adenoids/ paranasal sinuses	17. Parkinson's Disease	9. Cataracts,	18. Alzheimer's Disease		19. Mental Illness	Section D.
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5	Payout basis	<p>i. Inpatient Hospitalisation and Outpatient benefit on indemnity payment basis.</p> <p>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 Insured 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.</p> <p>iii. Mental Illness is covered upto 25% of Sum Insured or 2 Lac whichever is lower</p> <p>iv. Modern Treatment Methods and Advancement in Technologies (as per list in Annexure III) is covered upto 50% of Sum Insured</p>	Section E																																																			
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 E																																																			
7	Renewal Conditions	<p>Renewal of Policy The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the insured person.</p> <p>i. The Company shall endeavor to give notice for renewal. However, the Company is not under obligation to give any notice for renewal.</p> <p>ii. Renewal shall not be denied on the ground that the insured person had made a claim or claims in the preceding policy years.</p> <p>iii. Request for renewal along with requisite premium shall be received by the Company before the end of the policy period.</p> <p>iv. At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without break in policy. Coverage is not available during the grace period.</p> <p>v. No loading shall apply on renewals based on individual claims experience.</p>	Section E																																																			
8	Insured's Rights	<p>a. Free Look period of 15 days from the date of receipt of the policy shall be applicable at the inception</p> <p>b. Lifelong renewability (except on certain specific grounds)</p> <p>c. Right to migrate from one product to another product of the company</p> <p>d. Right to port from one company to another company</p> <p>e. Change in SI during the policy term or at the time of renewal</p> <p>f. In the case of delay in the payment of a claim, the Company shall be liable to pay interest from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate</p>	Section F.9																																																			
9	Renewal Benefits	<p>Medical Check-up: At the end of every continuous period of 4 years during which You/your spouse named in the schedule have held Our Tax Gain Policy without making a hospitalization claim , either You or your spouse (any one of You) named in the schedule may apply to Us for a free medical check up (Physician Consultation, Fasting Blood Glucose, Complete Blood Count, Serum Cholesterol, Urine Routine, X-ray Chest,) at a Bajaj Allianz Diagnostic Centre, the location of which We will specify at the time of Your application</p>	Section A.4																																																			
10	Cancellation	<p>i. The policyholder may cancel this policy by giving 15days' written notice and in such an event, the Company shall refund premium for the unexpired policy period as detailed below.</p> <p>Cancellation grid for premium received on annual & long term basis and refund is as under</p> <table border="1"> <thead> <tr> <th rowspan="2">Period in Risk</th> <th colspan="3">Premium Refund</th> </tr> <tr> <th>Policy Period 1 Year</th> <th>Policy Pe-riod 2 Year</th> <th>Policy Period 3 Year</th> </tr> </thead> <tbody> <tr> <td>Within 15 Days</td> <td colspan="3">As per Free Look up period Condition</td> </tr> <tr> <td>Exceeding 15 days but less than or equal to 1 month</td> <td>75.00%</td> <td>75.00%</td> <td>80.00%</td> </tr> <tr> <td>Exceeding 1 month but less than or equal to 3 months</td> <td>50.00</td> <td>75.00%</td> <td>80.00%</td> </tr> <tr> <td>Exceeding 3 months but less than or equal to 6 months</td> <td>25.00%</td> <td>65.00%</td> <td>75.00%</td> </tr> <tr> <td>Exceeding 6 months but less than or equal to 12 months</td> <td>0.00%</td> <td>45.00%</td> <td>60.00%</td> </tr> <tr> <td>Exceeding 12 months but less than or equal to 15 months</td> <td>0.00%</td> <td>30.00%</td> <td>50.00%</td> </tr> <tr> <td>Exceeding 15 months but less than or equal to 18 months</td> <td>0.00%</td> <td>20.00%</td> <td>45.00%</td> </tr> <tr> <td>Exceeding 18 months but less than or equal to 24 months</td> <td>0.00%</td> <td>0.00%</td> <td>30.00%</td> </tr> <tr> <td>Exceeding 24 months but less than or equal to 27 months</td> <td>0.00%</td> <td>0.00%</td> <td>20.00%</td> </tr> <tr> <td>Exceeding 27 months but less than or equal to 30 months</td> <td>0.00%</td> <td>0.00%</td> <td>15.00%</td> </tr> <tr> <td>Exceeding 30 months but less than or equal to 36 months</td> <td>0.00%</td> <td>0.00%</td> <td>0.00%</td> </tr> </tbody> </table>	Period in Risk	Premium Refund			Policy Period 1 Year	Policy Pe-riod 2 Year	Policy Period 3 Year	Within 15 Days	As per Free Look up period Condition			Exceeding 15 days but less than or equal to 1 month	75.00%	75.00%	80.00%	Exceeding 1 month but less than or equal to 3 months	50.00	75.00%	80.00%	Exceeding 3 months but less than or equal to 6 months	25.00%	65.00%	75.00%	Exceeding 6 months but less than or equal to 12 months	0.00%	45.00%	60.00%	Exceeding 12 months but less than or equal to 15 months	0.00%	30.00%	50.00%	Exceeding 15 months but less than or equal to 18 months	0.00%	20.00%	45.00%	Exceeding 18 months but less than or equal to 24 months	0.00%	0.00%	30.00%	Exceeding 24 months but less than or equal to 27 months	0.00%	0.00%	20.00%	Exceeding 27 months but less than or equal to 30 months	0.00%	0.00%	15.00%	Exceeding 30 months but less than or equal to 36 months	0.00%	0.00%	0.00%	Section E
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		<p>Cancellation grid for premium received on instalment basis and refund is as under The premium will be refunded as per the below table:</p> <table border="1"> <thead> <tr> <th rowspan="2">Period in Risk (from latest instalment date)</th> <th colspan="3">Premium Refund</th> </tr> <tr> <th>% of Monthly Premium</th> <th>% of Quarterly Premium</th> <th>% of Half Yearly Premium</th> </tr> </thead> <tbody> <tr> <td>Upto 15 days from 1st Instalment Date</td> <td colspan="3">As per Free Look Period Condition</td> </tr> <tr> <td>Exceeding 15 days but less than or equal to 3 months</td> <td colspan="2" rowspan="2">No Refund</td> <td>30%</td> </tr> <tr> <td>Exceeding 3 months but less than or equal to 6 months</td> <td>0%</td> </tr> </tbody> </table> <p>Note:</p> <ul style="list-style-type: none"> The first slab of Number of days "within 15 days" in above table is applicable only in case of new business. In case of renewal policies, period is risk "Exceeding 15 days but less than 3 months" should be read as "within 3 months". Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any benefit has been availed by the insured person under the policy. The Company may cancel the policy at any time on grounds of misrepresentation non-disclosure of material facts, fraud by the insured person by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud. 	Period in Risk (from latest instalment date)	Premium Refund			% of Monthly Premium	% of Quarterly Premium	% of Half Yearly Premium	Upto 15 days from 1st Instalment Date	As per Free Look Period Condition			Exceeding 15 days but less than or equal to 3 months	No Refund		30%	Exceeding 3 months but less than or equal to 6 months	0%	
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11	Claims	<p>a. For Cashless Service: List of Network Hospitals available on our website www.bajajallianz.com</p> <p>b. For Reimbursement of Claim: For reimbursement of claims the insured person may submit the necessary documents to Company within the prescribed time limit as specified in the Policy wordings</p>	Section E																	
12	Policy Servicing, Grievances/ Complaints	<p>a. If Insured person is not satisfied with the redressal of grievance through one of the methods, insured person may contact the grievance officer at ggro@bajajallianz.co.in For updated details of grievance officer, https://www.bajajallianz.com/about-us/customer-service.html</p> <p>b. IRDAI Integrated Grievance Management System - https://igms.irda.gov.in/</p> <p>c. Insurance Ombudsman - The contact details of the Insurance Ombudsman offices have been provided in Policy document.</p>	Section E																	
13	Insured's Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.	Section E																	
<p>(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.</p>																				