

Travelsure – Group

PROSPECTUS

This Policy is designed to cover medical expenses, personal liability, personal accident and other travel support during journey abroad.

Who Can Buy This Policy

Only Groups with:

- Employer employee relationship
- Non employer/employee groups / affinity groups
- Students going abroad for studies on Student Visa

Age Criteria

Purpose of Travel	Business (Official) / Leisure	Education
Plan Types	Flexi Plan	
Type of Trip and Max Days	Single Trip/ Basis Man days Multi trips (Per Trip cannot exceed 15, 30, 45, 60, 90, 180 days as opted)	Single Trip
Age Eligibility	1 Day to 100 years	15 years to 50 years
Policy Period	1 Day to Maximum 1 Year	30 Days to Maximum 5 Years

Geography

- World wide Including USA and Canada
- Rest of the World (World wide excluding USA and Canada)

Scope of Cover

A. Base Cover

- Medical Expenses- Accident & Sickness
- Emergency Medical Evacuation and Transportation
- Repatriation of Mortal Remains
- Dental Expense

B. Optional Cover

- Pre-Existing Disease Cover (In-patient Hospitalization and Day Care Treatment)
- Hospital Daily Cash
- Personal Accident including Disappearance
- Accidental Death & Dismemberment (Common Carrier)
- Adventure Sports Coverage
- Reinstatement of SI in case of Accidental Hospitalisation
- Delay of Checked in Baggage
- Loss of Checked in Baggage
- Trip delay
- Missed Connection
- Trip Cancellation due to Hospitalization
- Trip Cancellation for any reason
- Trip Interruption
- Bounced Bookings of Airlines and Hotel
- Hijack Distress Allowance
- Loss of Passport
- Loss of International Driving License
- Up-gradation to Business Class
- Compassionate Visit
- Return of Minor Child
- Political Risk and Catastrophe Evacuation

- B. 22. Personal Liability
- B. 23. Bail Bond Insurance
- B. 24. Home Burglary (in INR)
- B. 25. Fire Cover for Building (Home in India) (in INR)
- B. 26. Fire Cover for Contents (Home in India) (in INR)
- B. 27. Emergency Cash Assistance
- B. 28. Maternity Cover
- B. 29. Loss of Portable equipment
- B. 30. Travel Loan Secure
- B. 31. Visa Fees Protection

C. Additional Optional Covers

- C. 1. Chiropractic Treatment
- C. 2. Extended Cover in the Country of Residence
- C. 3. Fraudulent Card Payment
- C. 4. Travel Date Change Cover
- C. 5. Deportation Expenses

D. Specific Optional Covers (for Students only)

- D. 1. Tuition Fee
- D. 2. Sponsor Protection
- D. 3. Loan Protection
- D. 4. Educational Institution - Insolvency/ Derecognition
- D. 5. Residential Nursing Benefit
- D. 6. Sports Injury
- D. 7. Alcoholism & Drug Abuse
- D. 8. Self-inflicted Injury
- D. 9. Mental and Nervous Disorder
- D. 10. Cancer Prevention - Screening & Mammography Cover
- D. 11. Physiotherapy
- D. 12. Vision Care
- D. 13. Felonious Assault
- D. 14. Visa Revocation Expenses
- D. 15. Accommodation Extension Expenses

Period of Insurance

Purpose of Travel	Business (Official) / Leisure	Education
Period of Insurance	Single Trip – 1 Day to Maximum 1 Year Annual Multi Trip – Total policy period is 1 year	30 Days to Maximum 5 Years

Standard Exclusions Applicable to all Sections

We shall be under no liability to make payment hereunder in respect of any Claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

1. Any Claim relating to events occurring before the commencement of the Policy (i.e. before the Policy Period) or otherwise outside of the Policy Period.
2. Any Claim relating to any Pre-Existing Disease or complications thereof unless otherwise covered by Us and specified in the Policy Schedule/Certificate of Insurance.
3. Treatment abroad if that is the sole reason or one of the reasons for the Insured Person's temporary stay abroad.
4. Any Claim amount lesser than the Deductibles as specified in the Policy Schedule/ Certificate of Insurance.
5. Any claim if the Insured Person under the following conditions:
 - i. Has undertaken the Insured Trip against the advice of a Physician or Medical Practitioner
 - ii. Is presently undergoing or waiting to receive, specified medical treatments as per the advice of a Physician or Medical Practitioner
 - iii. The nature of such treatments is such that either:
 - a. it would normally prevent the Insured from undertaking the Insured Trip; or
 - b. it is reasonably foreseeable as requiring continued or emergency treatment during the Insured Trip

- c. Has received terminal prognosis for a Medical Condition before undertaking the Insured Trip.
6. Is travelling to take part in a naval, military or air force operation.
7. War, invasion, acts of foreign enemy, hostilities (whether war be declared or not), civil war, civil unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any government or local authority.
8. The loss or destruction or damage to any property whatsoever or any loss or expenses whatsoever resulting or arising there from or any consequential loss directly or indirectly caused by or contributed to or arising from:
 - a. Ionising radiation or contamination by radioactivity from any nuclear waste from combustion of nuclear fuel; or
 9. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof, or Asbestos or any related Sickness or Disease resulting from the existence, production, handling, processing, manufacture, sale, distribution, deposit or use of asbestos, or products thereof.
 10. Any Claim arising out of actions or consequence of actions committed whilst being under the influence of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Physician and taken as prescribed. This exclusion shall be waived off, to the extent of limit specified, if optional Benefit Alcoholism & Drug Abuse has been opted under the Policy.
 11. Congenital external anomalies or any complications or conditions arising there from
 12. Treatment taken in India unless claim is specifically accepted under Benefit 'Emergency Medical Evacuation and Transportation' and Benefit Extended Cover in the Country of Residence.
 13. Any VISA charges, this exclusion shall be waived off, to the extent of limit specified, if the Insured Person has opted Benefit 'Visa Fees Protection' under the Policy.
 14. Any Claim or benefit hereunder to the extent that the provision of such cover, payment of such Claim, or provision of such benefit would expose the Company to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of India, the European Union, United Kingdom or United States of America.
 15. Hazardous or Adventure Sports - 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. Where the plan opted includes adventure sports benefit, this exclusion shall be waived only to the extent of coverage mentioned under Benefit Adventure Sports Coverage.
 16. The Insured Person's actual or attempted engagement in any criminal or other unlawful act.
 17. Any consequential losses.
 18. In respect of travel by the Insured Person to any country against whom the Republic of India has imposed general or special travel restrictions, or against whom it may impose such restrictions, or any country which has imposed or may impose subsequently, such restrictions against travel by a citizen of the Republic of India to such country.
 19. The Insured Person engaging in air travel unless he flies as a passenger on an Airline. For the purpose of this exclusion, air travel means being in or on, or boarding an Aircraft for the purpose of flying therein or alighting there from following a flight.
 20. Death or disablement, any Illness, expenses caused due to Suicide or attempted Suicide, intentional self-inflicted Injury or acts of self-destruction. This exclusion shall be waived off, to the extent of limit specified, if optional Benefit Self-Inflicted Injury has been opted under the Policy.
 21. Expenses related to Mental Disorders.

This exclusion shall not be applicable, if the Insured Person has opted Benefit Mental and Nervous Disorder under the Policy.

Specific Exclusions Applicable to 'Medical Expenses - Accident & Sickness Benefit', 'Emergency Medical Evacuation and Transportation', 'Repatriation of Mortal Remains', 'Reinstatement of SI in case of Accidental Hospitalisation'

We shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person for:

- i. Any Pre-Existing Disease, unless otherwise agreed by Us.
- ii. Medical treatment abroad if that is the sole reason or one of the reasons for temporary stay abroad.
- iii. Any travel against the advice of a Medical Practitioner/Physician.
- iv. Treatment that could be delayed: Treatment which could reasonably be delayed until the Insured/Insured Person's return to the Republic of India. The question of what can or what cannot be reasonably delayed will be decided jointly by the treating Physician and the Assistance Service Provider.
- v. Treatment of orthopaedic, degenerative, diseases and any cancer, malignant / benign tumours and such related conditions to Neoplasm, unless the medical assistance provided abroad involves unforeseen emergency measures to save the Insured Person's life or measures solely designed to relieve acute pain in any case excluding chemotherapy or radiotherapy expenses.
- vi. Charges in excess of the Reasonable and Customary Charges incurred on account of an insurable event as per the determination by the Service Provider.
- vii. Treatment or procedures related to teeth or structures supporting the teeth, including examinations, fillings (where appropriate), crowns, extractions, and surgery unless due to Accidental injury
- viii. Any form of plastic surgery (unless necessary for the treatment of Illness or Accidental bodily injury)

- ix. Cosmetic or aesthetic treatments of any description, treatment or surgery for change of life/gender, Lasik treatment for refractive error.
- x. Maternity, Childbirth and related conditions:
 - a. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy;
 - b. expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the policy period.
This exclusion shall not be applicable, if the Insured Person has opted maternity cover under the Policy.
- xi. Medical check-ups during pregnancy or treatment of the pregnancy.
- xii. Expenses related to physical rehabilitation and physiotherapy.
- xiii. Any Treatment related to addiction or dependency of the Insured Person to tobacco, cigarette and other tobacco usage habits, alcohol, psychoactive substance including but not related to various drug and prescriptive drugs.
- xiv. Any Expense related to Prosthetics and artificial limbs.
- xv. Expenses related to Well Childcare and Immunization
- xvi. Routine health tests that are undertaken without a Medical Practitioner prescription as a part of treatment of some Illness / Injury as covered under the Policy.
- xvii. Eyeglasses, Hearing Aids etc: eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof, unless Injury or Sickness has caused impairment of vision or hearing.
- xviii. Expenses incurred in connection with rest or recuperation at a spa or health resort, sanatorium, convalescence home or similar institution.
- xix. Experimental, unproven, or non-standard treatment
- xx. Treatment by any other system other than modern medicine (also known as Allopathy) like manual therapy, chiropractic treatment, Acupressure, Acupuncture etc.

Specific Exclusions Applicable to 'Dental Expense'

We shall be under no liability to make payment in respect of:

- i. Any routine dental examination
- ii. Any Pre-existing ailment or disease
- iii. Dentures including dental crowns, inlays and on lays
- iv. Dental Expense that goes beyond treatment for pain relief as well as prophylactic Dental Expense including plaque removal.
- v. Corrective treatment incurred due to previously fitted dental implants, bridge, caps prior to Policy inception date.
- vi. Any cosmetic Dental Expense.

Specific Exclusions Applicable to 'Personal Accident including Disappearance', 'Accidental Death & Dismemberment (Common Carrier)', 'Travel Loan Secure', 'Loan Protection'

We shall not be liable to make any payments under this Policy in respect of:

- i. Any claim for death or disablement of Insured Person
 - a. from intentional self-injury unless in self-defence or to save life, suicide or attempted suicide;
 - b. whilst under the influence of intoxicating liquor or drugs or other intoxicants except where the insured is not directly responsible for the injury / Accident though under influence of intoxication.
 - c. whilst engaging in aviation or ballooning, or whilst mounting into, or dismounting from or travelling in any balloon or aircraft other than as a passenger (fare-paying or otherwise) in any Scheduled Airlines in the world. [Standard type of aircraft means any aircraft duly licensed to carry passengers (for hire or otherwise) by appropriate authority irrespective of whether such an aircraft is privately owned or chartered or operated by a regular airline or whether such an aircraft has a single engine or multiengine;]
 - d. arising or resulting from the Insured Person committing any breach of law with criminal intent.
- ii. Any claim for death or disablement of Insured Person 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.
- iii. Any claim resulting or arising from, or any consequential loss directly or indirectly caused by or contributed to or arising from:
 - a. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or from any nuclear waste from combustion (including any self-sustaining process of nuclear fission) of nuclear fuel.
 - b. Nuclear weapons material
 - c. The radioactive, toxic, explosive, or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
 - d. Nuclear, chemical, and biological terrorism
- iv. Any loss arising out of the Insured Person's actual or attempted commission of or wilful participation in an illegal act or any violation or attempted violation of the law.

Specific Exclusions applicable to 'Adventure Sports Coverage'

We shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person for:

- i. Participation in any Adventure Sports whilst being under influence of Alcohol or any other narcotic drugs or abuse of prescription drugs or any hallucinates.
- ii. Whilst being under any medication or treatment which slows down response and alertness or makes the Insured Person unfit for participating in such sports
- iii. Participation against Medical Advice or against the advice of the professional instructor or any representative of the Adventure Sport Centre or Organiser.
- iv. Insured Person going against instructions, guidelines or rules of participation issued by the Adventure Sport Centre or Organiser
- v. Any participation in a semi-professional or professional capacity.
- vi. Participation in any other Adventure Sports not listed under the above list.
- vii. If the Insured is suffering from a Pre-Existing Injury that limits their participation in the selected Adventure Sports
- viii. Regardless of the Age definition (refer Entry Age under General Conditions), Insured is aged above 55 year or if the Insured is less than 14 years.
- ix. If the Insured is already pregnant as on the date when the Insured undertook participation
- x. If there is a public weather advice or prevailing weather conditions which are not suitable for undertaking participation in such activities.
- xi. Participation in any Adventure Sports within 2 weeks or before the end of recouping period as per the advice by the attending Physician, whichever is maximum.
- xii. Participation in any water-based Adventure Sports without knowledge of swimming by the Insured.
- xiii. Participation in any Adventure Sports which is undertaken without direct supervision of a professionally trained guide for that specific Adventure Sports.
- xiv. Participation in any Adventure Sports which is undertaken at a Centre or under an Organiser who do not have required certifications as per the rules of the prevailing Jurisdiction or internationally accepted norms.
- xv. If the purpose of Insured Trip is to undertake Adventure Sports activity or obtain training for Adventure Sports activity, or more than 50% of Policy Period is spent undertaking the Adventure Sports activity.
- xvi. Participation in the Adventure Sports after local sunset at the Destination City.

Specific Exclusions applicable to 'Loss of Checked in Baggage'

- i. Accompanied or cabin luggage.
- ii. Partial destruction of baggage or contents missing from the baggage.
- iii. No partial loss or damage shall become payable. However, total loss or damage of an individual unit (s) of baggage shall not be construed as falling within this exclusion.
- iv. No claim will be paid for items valued more than US \$ 100 without proof of ownership. Such proof shall be presented to the Insurer / Service Provider in the event of a claim hereunder.
- v. No claim will be paid for Valuables as defined. Such items should always be carried by the Insured Person and not packed as part of Checked in Baggage.
- vi. Any recovery from a carrier or an airline including under the terms of the Warsaw Convention, shall become the property of the Insurer.
- vii. Any loss of Your baggage sent in advance or souvenirs and articles mailed or shipped separately.

Specific Exclusions applicable to 'Trip delay'

- i. For any departure which is delayed as a result of the Insured Person or any other person who is to travel with him failing to check-in correctly as required by the airlines.
- ii. For any delayed departure caused by strike or industrial action known to exist or was anticipated at the time the trip was booked
- iii. If the aircraft is taken out of service on the instructions of the Civil Aviation Authority or similar authority
- iv. Delay caused by Equipment Failure of a Common Carrier.

Specific Exclusions applicable to 'Missed Connection'

- i. Caused by strike or industrial action known to exist or was anticipated at the time the trip was booked.
- ii. If the aircraft is taken out of service on the instructions of the Civil Aviation Authority or similar authority
- iii. Caused by Equipment Failure of a Common Carrier or Inclement Weather

Specific Exclusions applicable to 'Trip Cancellation due to Hospitalization'

We shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person for:

- i. Aircraft-caused delays, including an announced, organized sanctioned union labour strike that affects public transportation, unless the commencement of the period of insurance is prior to a date when the strike is foreseeable. A strike is foreseeable on such date as when the labour union members vote to approve a strike, and such information becomes available to general public.
- ii. Travel arrangements cancelled or changed by an airline, cruise line, or tour operator.
- iii. Changes in plans by the Insured Person(s), an Immediate Family Member or Travelling Companion for any reason other than listed in this benefit.
- iv. Adverse change in financial circumstances of the Insured Person(s), any Immediate Family Member, or a Travelling Companion.
- v. Any business or contractual obligations of the Insured Person(s), any Immediate Family Member, or a Travelling Companion,
- vi. Default by the person, agency, or tour operator/Master Policyholder from whom the Insured Person(s) bought this Policy and/or made travel arrangements.
- vii. Any government regulation or prohibition.
- viii. An event or circumstance, which occurs prior to the Policy Period Start Date, except where specifically listed as covered under this benefit.
- ix. On account of a felonious assault, where the Insured / Insured Person, any Family Member of the Insured / Insured Person, the Travelling Companion or Travelling Companion's Family Member has been a principal or accessory in the assault committed.
- x. Cost for Visa fees.

Specific Exclusions applicable to 'Trip Cancellation for any reason'

We shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person for:

- i. Cost for Visa fees.

Specific Exclusions applicable to 'Trip Interruption'

We shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person for:

- i. Aircraft-caused delays, including an announced, organized sanctioned union labour strike that affects public transportation, unless the commencement of the period of insurance is prior to a date when the strike is foreseeable. A strike is foreseeable on the date the labour union members vote to approve a strike.
- ii. Travel arrangements cancelled or changed by an airline, cruise line, or tour operator.
- iii. Changes in plans by the Insured Person(s), an Immediate Family Member or Travelling Companion for any reason.
- iv. Adverse change in financial circumstances of the Insured Person(s), any Family Member, or a Travelling Companion.
- v. Any business or contractual obligations of the Insured Person(s), any Family Member, or a Travelling Companion.
- vi. Default by the person, agency, tour operator or Master Policyholder from whom the Insured Person(s) bought this Policy and/or made travel arrangements.
- vii. Any government regulation or prohibition.
- viii. An event or circumstance, which occurs prior to the commencement of the period of insurance.
- ix. On account of a felonious assault, where the Insured, any Family Member of the Insured, the Travelling Companion or Travelling Companion's Family Member has been a principal or accessory in the assault committed.

Specific Exclusions applicable to 'Bounced Booking of Airline and Hotel'

We shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person for:

- i. If the Insured shall fail to adhere to the rules of the Common Carrier or the accommodation provider in connection with reconfirmation of the booking before the date of travel or occupation as the case may be.
- ii. In connection with any waitlisted travel booking or accommodation booking irrespective of whether such bookings have been promised to be confirmed later.
- iii. If the confirmed accommodation shall be a personal arrangement free of charge.
- iv. Where the alternative arrangements for either the travel or the accommodation is provided by the Common Carrier or the accommodation provider as the case may be within 6 hours from the time of departure of the travel covered by the bounced booking or the time commencement of stay covered by the earlier confirmed accommodation booking.
- v. Any air tickets / hotel bookings which are allotted to Airline staff / hotel staff or under any special travel industry employee scheme.

Specific Exclusions applicable to 'Loss of Passport'

- Loss or damage to Insured's passport because of the confiscation or detention by customs, police or any other authority
- Loss which is not reported to the appropriate police authority within 24 hours of the discovery of the loss, and in respect of which an official report has not been obtained.
- Loss caused because of Insured's negligence.
- Cost of VISA
- Legal costs and expenses incurred in pursuit of any claim against Us, our Assistance or our agents, someone Insured were travelling with, a person related to insured, or another Insured.

Specific Exclusions applicable to 'Loss of International Driving License'

- Loss or damage to International Driving License because of the confiscation or detention by customs, police or any other authority
- Loss which is not reported to the appropriate police authority within 24 hours of the discovery of the loss, and in respect of which an official report has not been obtained.
- Loss caused due to negligence.
- Legal costs and expenses incurred in pursuit of any claim against us, our Assistance or our agents, someone Insured were travelling with, a person related to insured, or another Insured.

Specific Exclusions applicable to 'Political Risk and Catastrophe Evacuation'

This benefit does not cover any other loss, directly or indirectly, in whole or in part, including loss caused by or resulting from:

- Insured violating the laws or regulations of the Destination Country from which he is to be evacuated.
- Failure to produce or maintain immigration, work, residence, or similar visas, permits or other documentation.
- Failure to honour any contractual obligation or bond or to obey any conditions in a license.
- Insured being a national of the country from which he is to be evacuated.
- Claims arising out of an event which is already existing and known to the Insured, or reasonably predictable before Insured's arrival to the Destination Country where the event takes place.
- Where the Insured has travelled against the travel advisory issued by a public authority especially but not limited to the WHO, United Nations, the Government of India, or the Government/Public Authority of the Destination Country.
- Any expenses that the Insured can get back from any tour operator, airline, hotel or other provider of services.
- Any claim resulting from the Insured travelling against the advice of the appropriate national or local authority.

Specific Exclusions applicable to 'Personal Liability'

- Insured liability towards his/her employees (whether under a contract of or for services);
- Bodily Injury to and/or Property Damage to property belonging to the Insured Family or Travelling Companion.
- Any liability for Bodily Injury and/or Property Damage arising directly or indirectly from or due to:
- Livestock belonging to Insured or in Insured's care, custody or control.
- Any wilful, malicious, criminal, or unlawful act, error, or omission.
- The pursuit of any trade, business of profession, employment or occupation.
- Ownership, possession or use of vehicles, aircraft or aerial devices, or watercraft or hovercraft.
- Due to insured being involved in any other dangerous or hazardous activity.
- Use or misuse of alcohol, any hallucinogenic substance, drugs (except those used as medically prescribed), or drug addiction.
- Supply of goods or services.
- Any form of ownership or occupation of land or buildings (other than occupation only of any temporary residence).
- Any professional liability arising out of insured professional activities.

Specific Exclusions applicable to 'Bail Bond Insurance'

We shall not be liable

- for any bail amount where Insured Person has been charged for breaking the law with Criminal Intent
- for any bail amount where Insured Person has been charged for over speeding in a vehicle.

Specific Exclusions applicable to 'Home Burglary (Home in India)'

No indemnity is available hereunder for any Claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- Deductible of INR 10000 of each and every claim amount subject to a minimum of INR 10,000 unless specifically revised and altered by the Us and mentioned in the Policy Schedule/Certificate of Insurance.
- Any loss or damage covered and/or recoverable under other Sections of this Policy.

- iii. Loss or damage directly or indirectly, proximately or remotely occasioned by or which arises out of or in connection with riot and strike, civil commotion, terrorist activities.
- iv. Earthquake, flood, storm, cyclone or other convulsions of nature or atmospheric disturbances.
- v. Any consequential losses of any kind, be they by way of loss of profit, business interruption, market loss or otherwise, and any other legal liability of any kind.
- vi. Loss or damage to any property/item illegally acquired, kept, stored or property subject to forfeiture in any manner whatsoever
- vii. Loss or damage caused by theft.
- viii. Loss or damage to Valuables.
- ix. Any loss or damage to, or on account of loss of, livestock, motor vehicles, pedal cycles, money, securities for money, stamp, bullion, deeds, bonds, bills of exchange, promissory notes, stock or share certificates, business books, manuscripts, documents of any kind, ATM debit or credit cards, precious stones that are not part of jewellery or ornaments, gold bullion (unless previously specifically declared to, and accepted by Us in writing)

Specific Exclusions applicable to 'Fire Cover for Building (Home in India) (in INR)'

This Policy does not cover:

- i. Loss, Destruction or Damage caused to the property by pollution or contamination excluding:
 - Pollution or contamination which itself results from a peril covered under this benefit.
 - Any peril which would otherwise be covered under this benefit, where such peril itself results from pollution or contamination.
- ii. Loss, Destruction or Damage to bullion or unset precious stones, any curios or works of art for an amount exceeding Rs. 10000/-, manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper Money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the Policy.
- iii. Loss, Destruction or Damage to the stocks in Cold Storage premises caused by change of temperature.
- iv. Loss, Destruction or Damage to any electrical machine, apparatus, fixture, or fitting arising from or occasioned by over-running, excessive pressure, short circuiting, arcing, self heating or leakage of electricity from whatever cause (lightning included) provided that this exclusion shall apply only to the particular electrical machine, apparatus, fixture or fitting so affected and not to other machines, apparatus, fixtures or fittings which may be destroyed or damaged by fire so set up.
- v. Expenses necessarily incurred on
 - Architects, Surveyors and Consulting Engineer's Fees and
 - Debris Removal by the Insured following a Loss, Destruction or Damage to the property by a peril insured under this benefit, in excess of 3% and 1% of the claim amount respectively.
- vi. Loss of earnings, loss by delay, legal liability, loss of market or other consequential or indirect Loss, Destruction or Damage of any kind or description whatsoever.
- vii. Loss, Destruction or Damage by spoilage resulting from the retardation or interruption or cessation of any process or operation caused by operation of any of the perils covered.
- viii. Loss by theft during or after the occurrence of any insured peril, except as provided under Riot, Strike and Malicious Damage cover.
- ix. Any Loss, Destruction or Damage occasioned by or through or in consequence directly or indirectly due to earthquake, Volcanic eruption or other convulsions of nature.
- x. Loss, Destruction or Damage to property if removed to any building or place other than in which it is herein stated to be Insured, except machinery and equipment temporarily removed for repairs, cleaning, renovation or other similar purposes for a period not exceeding 60 days.
- xi. Loss, Destruction or Damage in connection to a building of Kutcha Construction.
- xii. Loss, Destruction or Damage in connection to a building or residence that is under construction or under renovation.
- xiii. Loss, Destruction or Damage that occurs when the Policyholder's Residence has been unoccupied for at least 90 days immediately preceding the date of loss.

Specific Exclusions applicable to 'Fire Cover for Contents (Home in India)'

This Policy does not cover:

- i. Loss, Destruction or Damage caused to the property by pollution or contamination excluding:
 - Pollution or contamination which itself results from a peril covered under this benefit.
 - Any peril which would otherwise be covered under this benefit, where such peril itself results from pollution or contamination.
- ii. Loss, Destruction or Damage to bullion or unset precious stones, any curios or works of art for an amount exceeding Rs. 10000/-, manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper Money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the Policy.
- iii. Loss, Destruction or Damage to the stocks in Cold Storage premises caused by change of temperature.
- iv. Loss, Destruction or Damage to any electrical machine, apparatus, fixture, or fitting arising from or occasioned by over-running, excessive pressure, short circuiting, arcing, self heating or leakage of electricity from whatever cause (lightning included) provided that this exclusion shall apply only to the particular electrical machine, apparatus, fixture or fitting so affected and not to other machines, apparatus, fixtures or fittings which may be destroyed or damaged by fire so set up.

- v. Expenses necessarily incurred on
 - Architects, Surveyors and Consulting Engineer's Fees and
 - Debris Removal by the Insured following a Loss, Destruction or Damage to the property by a peril insured under this benefit, in excess of 3% and 1% of the claim amount respectively.
 - vi. Loss of earnings, loss by delay, legal liability, loss of market or other consequential or indirect Loss, Destruction or Damage of any kind or description whatsoever.
 - vii. Loss, Destruction or Damage by spoilage resulting from the retardation or interruption or cessation of any process or operation caused by operation of any of the perils covered.
 - viii. Loss by theft during or after the occurrence of any insured peril, except as provided under Riot, Strike and Malicious Damage cover.
 - ix. Any Loss, Destruction or Damage occasioned by or through or in consequence directly or indirectly due to earthquake, Volcanic eruption or other convulsions of nature.
 - x. Loss, Destruction or Damage to property if removed to any building or place other than in which it is herein stated to be Insured, except machinery and equipment temporarily removed for repairs, cleaning, renovation or other similar purposes for a period not exceeding 60 days.
 - xi. Loss, Destruction or Damage in connection to a building of Kutcha Construction.
 - xii. Loss, Destruction or Damage in connection to a building or residence that is under construction or under renovation.
 - xiii. Loss, Destruction or Damage that occurs when the Policyholder's Residence has been unoccupied for at least 90 days immediately preceding the date of loss.
- Our total liability in aggregate for all Claims paid under this benefit shall not exceed the Sum Insured for the benefit as mentioned in the Policy Schedule/Certificate of Insurance.

Specific Exclusion applicable to 'Loss of Portable equipment'

We shall not be liable to make any payment under this benefit in respect of the following:

- i. Any loss not reported to the police within 24 hours of the occurrence of the incident and a written report being obtained for the same.
- ii. Loss of the Equipment if left unattended or forgotten by the Insured Person in a public place or public transport, hotel or apartment.
- iii. Theft from any vehicle except vehicle of fully enclosed saloon type having at the time all the doors, windows and other openings securely locked and properly fastened.
- iv. Loss of Equipment not kept in the personal custody of the Insured.
- v. Any loss due to Accidental external means.
- vi. Any loss at airport or by common carrier or while in checked-in baggage
- vii. This benefit is available once in Policy Period
- viii. Our maximum liability under this benefit is limited to the Sum Insured specified in the Policy Schedule/Certificate of Insurance.

Specific Exclusions applicable to 'Visa Fees Protection'

- i. Any charges or expenses made by Insured to avail Visa other than Visa Application fees (processing fees, service fees, Government fees)
- ii. If Insured's Visa gets rejected due to any existing criminal record
- iii. Insured Person does not provide data or proof to return back to Republic of India.
- iv. Application of Visa applied by Insured for Permanent Resident or Work permit.
- v. Insured's past poor travel history which includes cancellation of any previous visa application or overstaying in any country or performed activities violating the Visa norms of any specific country during the stay period.
- vi. Withdrawal of Visa Application at Insured's end and/or non submission of valid documents or query response to the Embassy within the stipulated timelines shall be excluded under the Policy.
- vii. Rejection of Visa if the Insured Person is unable to attend visa interview due to any reason.
- viii. Contractual breach or non-adherence to the terms and conditions of Visa embassy.
- ix. Rejection of Visa due to Incomplete or no proof of travel itinerary & accommodation, if such proof is a pre requisite for obtaining a visa.
- x. Past travel history which has resulted in deporting from the said country.

Specific Exclusions applicable to 'Fraudulent Card Payment'

- i. Loss in respect of international debit/credit card against which there are any overdue bills or charges.
- ii. Losses recoverable from card issuer, or any other liable party.
- iii. Loss or damage due to wilful act or negligence on the part of the Insured.
- iv. Debit or Credit card which has expired and not renewed by the Insured.
- v. Any loss without any substantiation, mysterious disappearance or unexplained losses.
- vi. Any loss due to any cyberattack/cyberterrorism/ cyber incident

Specific Exclusions applicable to 'Travel Date Change Cover'

- i. Cost for Visa fees
- ii. Any extra services or charges apart from rescheduling of the Insured Trip not limited to services like Pre booking of meals, extra baggage, preferred or premium seats, up gradation charge to move from one class to another class, etc.,
- iii. Any claim already paid under Benefit- Trip Cancellation due to Hospitalization or Benefit-Trip Cancellation for any reason under the Policy

Specific Exclusions applicable to 'Deportation Expenses'

- i. The Insured must have been granted a valid Visa before the Trip Start Date.
- ii. The Insured Person must report the deportation order within 7 days of the incidence and produce the order of the appropriate authority.

Specific Exclusions applicable to 'Tuition Fees'

- i. Any claim already paid under Benefit Sponsor Protection.

Specific Exclusions applicable to 'Sponsor Protection'

- i. Any claim already paid under Benefit Tuition Fees.

Specific Exclusions applicable to 'Felonious Assault'

- i. Any loss resulting from an assault for which a police Complaint has not been registered, or where a police first information report is not available.
- ii. Any loss which occurred while Insured Person was under the influence of drugs or alcohol, unless otherwise agreed by Us.
- iii. Any loss which occurred while Insured Person was participating in an actual or attempted felony, riot or any other crime, or while committing any breach of law with criminal intent.

Specific Exclusions applicable to 'Visa Revocation Expenses'

- i. Any claim arising or resulting from the Insured Person committing any breach of law with criminal intent or while participating in an actual or attempted felony, riot or any other crime.

Specific Exclusions applicable to 'Accommodation Extension Expenses'

- i. Any claim arising or resulting from the Insured Person breaching any rules and regulations established by the Educational Institution in which he/ she is pursuing education.
- ii. Any claim arising or resulting from the Insured Person committing any breach of law with criminal intent or while participating in an actual or attempted felony, riot or any other crime.
- iii. Any claim arising out of actions or consequence of actions committed whilst being under the influence of drugs, alcohol, or other intoxicants or hallucinogens.

Cancellation

- i. The Master Policyholder may cancel this Master Policy by giving 15 days' written notice to the Company and there would be no refund of premium on such cancellation request.
- ii. No Premium shall be refunded in case of early termination or cancellation of the Certificate of Insurance after the commencement of the Insured Trip unless agreed by the Company.
However, cancellations are permitted prior to the commencement of the Insured Trip subject to a cancellation fee of Rs.100/- unless agreed by the Company.
- iii. 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.

Free Look Period

The Free Look Period shall be available only for Annual Multi Trip/ Long Term policies and shall be applicable on new individual policies and not on Renewals or at the time of porting/migrating the Policy.

The Insured Person shall be allowed free look period of thirty days from date of receipt of the Policy document to review the terms and conditions of the Policy, and to return the same if not acceptable.

If the Insured has not made any Claim during the Free Look Period, the Insured shall be entitled to

- i. a refund of the premium paid less any expenses incurred by the Company on medical examination (if applicable) of the Insured Person and the stamp duty charges or
- ii. where the risk has already commenced and the option of return of the Policy is exercised by the Insured Person, a deduction towards the proportionate risk premium for period of cover or
- iii. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period;

Policy Period for Student Travel

- i. In case the Student is travelling to country other than City/ Country of Education, within the geographical limits as mentioned in the Policy Schedule/ Certificate of Insurance, for an educational trip or internship (as part of education/ university curriculum), in such case the Policy shall remain in-force for that duration of travel towards Medical Expenses covered under Base Covers, Pre-Existing Disease Cover (In-Patient Hospitalization and Day Care Treatment), Hospital Daily Cash, Personal Accident Including Disappearance, Accidental Death & Dismemberment (Common Carrier), Adventure Sports Cover, Reinstatement of Sum Insured in Case of Accidental Hospitalization.

The Insured Person is covered up to maximum 2 trips during the Policy Year.

Note: Additional premium shall be borne by the Insured in the event of change in geographical limits.

- ii. In the event the Insured Person visits Country of Residence during the Policy Period, the coverage shall be temporarily suspended during the period of stay in Country of Residence. Coverage shall automatically resume upon the Insured Person's return to the original City of Education as specified in the Policy Schedule/ Certificate of Insurance. Such visit is restricted to maximum 3 trips during the Policy Year, an overall duration should not exceed 90 days in a Policy Year.

Grievances Redressal Procedure

If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows:

Stage 1: Bima Bharosa

You can register your grievances with the regulator using the following link: <https://bimabharosa.irdai.gov.in/Home/Home>

Stage 2: Head – Customer Care

Alternatively, if you wish to register your grievances directly with us, you may write to the Head – Customer Care. We aim to respond to all Grievances within 7 days. In our initial acknowledgement of receipt letter, we will provide the name and title of the person that is handling your Grievance. This individual will have the authority necessary to investigate and resolve the Grievance.

Email: head.customercare@sbigeneral.in

Toll-Free Number: 1800 102 1111 (Available 24/7)

For Senior Citizens:

Senior citizens can reach us through the following dedicated channels:

Email: Seniorcitizengrивences@sbigeneral.in

Toll-Free Number: 1800 102 1111 (Available 24/7)

Stage 3: Grievance Redressal Officer (GRO)

In case, you are still not satisfied with the decision/resolution communicated by the above officer or have not received any response within 5 Business days, you may escalate the matter to the Grievance Redressal Officer (GRO) which will undergo a detailed case investigation, and we aim to resolve the issue within 7 days from the date of receipt of your Grievance at GRO Desk

Email: gro@sbigeneral.in

Phone: 022-45138021

Note: - The Company shall endeavour to maintain the regulatory TAT of 14 days in resolving your grievances.

Stage 4: Escalation to Insurance Ombudsman

If you feel that the response to your Grievance was unsatisfactory, or if you believe your concerns have not been adequately addressed by the company, you may escalate the matter to the Insurance Ombudsman.

Submit your Grievance online: <https://www.cioins.co.in/Ombudsman>

Claim Procedure

1. Claim Intimation

- i. In case of an Emergency: The Insured Person shall immediately contact the Help Line of Assistance Service Provider stating necessary details. The details of phone numbers and Help Line are given in the Policy Schedule/Certificate of Insurance attached to this Policy.
- ii. The Insured Person needs to contact the Help Line number whilst overseas as soon as possible and inform in case the Insured Person is/will be filing any Claim, even if assistance is not required. We will not be liable to pay any Claim that has not been informed by the Insured Person while being abroad to the Help Line.
- iii. The Help Line of the Assistance Service Provider will verify the identity of the caller by asking appropriate information.
- iv. In the event of an Illness / Injury where it is not possible to contact the Help Line before consulting a Physician or going to the Hospital, the Insured Person shall contact the Help Line as soon as possible. In either case, when being admitted as a patient, the Insured Person shall show the concerned Physician or personnel this Policy.
- v. In no event should a claim be notified and documents be submitted to Insurer / Service Provider later than 31 days after the end of an insured trip.

However the Insurer at his sole discretion may relax this condition subject to a satisfactory proof/ evidence being produced on the reasons for such a delay for maximum 60 days.

- vi. In case financial emergency assistance is required, the Insured Person shall immediately contact the Help Line of the Assistance Service Provider stating the details of his / her Policy along with the police report containing the passport number and a written statement narrating the incident of loss i.e. causes, circumstances and the place. Failure to do so may prejudice the Insured /Insured Person's claim.
- vii. In case of Hijacking, the fact of the incident having occurred should be confirmed by police authorities. The police report should contain details such as the passport number of the Insured Person, the period of hijack, etc. In rare cases, the Company may consider other supporting documents such as a report issued by the airlines, newspaper reports, TV and other media coverage with regard to the particular hijacking incident.

2. Claim Process

- a. the procedure stated above is complied with, Assistance Service Provider, as the case may be, will guarantee to the Hospital / other providers the costs of Hospitalisation, transportation for emergency services, transportation home of the Insured Person including accompanying person, if any, and provide financial emergency assistance to the Insured Person. All costs will be directly settled by Assistance Service Provider on Our behalf and the same shall constitute due discharge of the our obligations hereunder.
- b. If the Hospital / other providers do not accept the guarantee of payment from Assistance Service Provider, We cannot be held liable for the same. The cost will then have to be borne by the Insured Person and the same will then be reimbursed by the Assistance Service Provider / Us on submission of required documents.
- c. Reimbursement of claims will be made by the Assistance Service Provider/Us in Indian Rupees on the Insured Person's return back to the Republic of India, at the exchange rate specified by the Reserve Bank of India, as applicable on the date the amount is billed.
- d. In case of claim under home burglary insurance, the loss shall be reported to the Police and intimated to Us and We shall appoint an independent surveyor to assess the loss.

3. Claim Documents

Following claim documents will be required for processing of claim

Benefit Name	Document Required for Claim
MEDICAL EXPENSES- ACCIDENT & SICKNESS, CHIROPRACTIC TREATMENT, SPORTS INJURY, ALCOHOLISM & DRUG ABUSE, MENTAL AND NERVOUS DISORDER	<ol style="list-style-type: none"> 1. Claim Form (To be signed by the Treating Doctor and Insured Person) and with the Claims Reference No. 2. Original documents of Doctor's medical report, admission and discharge cards, and Prescriptions. 3. Original bills, vouchers, reports, and payment receipts stating the details for the treatment performed 4. Original X-ray, pathological and investigative reports. 5. For expenses of transportation due to medical reasons, you also need to attach a medical statement from the doctor indicating: <ul style="list-style-type: none"> • Cause of Illness • Reason for necessity of the transportation 6. Copy of passport, visa with entry, and exit stamp 7. Cancelled cheque leaf of the insured / Nominee
DENTAL EXPENSE	<ol style="list-style-type: none"> 1. Claim form duly filled and signed by Insured Person 2. Complete set of Dental Records (Presenting complain, diagnosis, treatment given, In case of Hospitalization discharge summary if any.) All the test reports and X-ray reports 3. Prescription from the doctor 4. Policy Copy 5. Name, address, contact no, e-mail id of the Local Medical Officer (LMO), Invoices (itemized) and original bills description of charges for the services rendered and original payment receipts towards expenses incurred. 6. Copy of passport visa with exit stamp 7. Cancelled cheque leaf of the insured / Nominee
PRE-EXISTING DISEASE COVER (IN-PATIENT HOSPITALIZATION AND DAY CARE TREATMENT)	Documents same as MEDICAL EXPENSES- ACCIDENT & SICKNESS
HOSPITAL DAILY CASH	Documents same as MEDICAL EXPENSES- ACCIDENT & SICKNESS
PERSONAL ACCIDENT INCLUDING DISAPPEARANCE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured/Nominee 2. Original Death Certificate 3. Copy of FIR/Police inquest report/ Coroners report 4. Copy of Post-mortem report in case of Accidental Death claim 5. Dismemberment Case: 6. Original documents of Doctor's medical report, admission and discharge cards, and prescriptions, Disability Certificate from the doctor 7. Copy of treatment papers along with No. 1 & 3 above

ACCIDENTAL DEATH & DISMEMBERMENT (COMMON CARRIER)	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured/Nominee 2. Original Death Certificate, 3. Copy of FIR/Police inquest report/Coroners report 4. Copy of Post-mortem report in case of Accidental Death claim 5. Dismemberment Case: 6. Original documents of Doctor's medical report, admission and discharge cards, and prescriptions, Disability Certificate from the doctor 7. Copy of treatment papers along with No. 1 & 3 above
ADVENTURE SPORTS	<ol style="list-style-type: none"> 1. Claim Form duly filled in and signed by Treating Doctor and Insured Person/Nominee 2. Copy of Policy Certificate 3. Age Proof/ Copy of Passport 4. Medical reports and discharge summary issued by the Hospital or prescriptions and medical records from the medical practitioner furnishing the name of the insured, period of treatment and details of treatment rendered i.e. line of treatment and final diagnosis. 5. Original Hospital bills with proper description of services rendered and payment receipts towards expenses incurred 6. Attending Surgeon's/Medical Practitioner's Prescription advising Hospitalization 7. Details of the adventure sport undertaken along with bills/receipts, medical certification declaring good health (where required), proof of required minimum training, and contact details of the service provider/guide/centre/organizer with whom adventure sport was undertaken. 8. Proof of Affiliation/Accreditation/ Government Certification etc, whichever applicable, of service/sport provider who is providing Adventurous Sport Activity 9. Cancelled cheque of the insured / nominee
REINSTATEMENT OF SUM INSURED IN CASE OF ACCIDENTAL HOSPITALISATION	Documents same as MEDICAL EXPENSES- ACCIDENT & SICKNESS
DELAY OF CHECKED-IN BAGGAGE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. Copies of boarding Pass/Ticket/Baggage Tags 3. Copy of passport, visa with entry and exit stamp 4. Copies of correspondence with the Airline authorities/others certifying the delay of checked baggage 5. Property Irregularity Report (PIR - a written proof from the carrier) from the Airline authorities stating the period of delay 6. Original bills/receipts/invoices for any necessary emergency purchases like toiletries, medication and clothing (If incurred) 7. Details of compensation received from Airlines/other authorities
LOSS OF CHECKED IN BAGGAGE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. Copies of boarding Pass/Ticket/Baggage Tags 3. Copies of correspondence with the Airline authorities/others certifying the delay 4. Property Irregularity Report (to be obtained from the airline authorities) 5. Details of compensation received from Airlines/other authorities
TRIP DELAY	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. Please attach confirmation from the airlines, clearly mentioning the scheduled arrival time and the actual arrival time 3. Copy of passport, visa with entry and exit stamp, Boarding Pass/Ticket 4. Copies of Correspondence with the Airline authorities certifying about the delay
MISSED CONNECTION	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. Please attach confirmation from the airlines, clearly mentioning the scheduled arrival time and the actual arrival time 3. Copy of passport, visa with entry, and exit stamp, Boarding Pass/Ticket 4. Copies of Correspondence with the Airline authorities certifying about the delay 5. All the bills / receipts of reasonable additional expenses incurred and / or proof of cancellation charges levied by the carriers shall be submitted.

TRIP CANCELLATION DUE TO HOSPITALIZATION	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured Person 2. If trip is cancelled or interrupted due to medical reasons, then provide medical reports and doctors statement 3. All the bills / receipts of reasonable additional expenses incurred and / or proof of cancellation charges levied by the carriers shall be submitted.
TRIP CANCELLATION FOR ANY REASON	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. If trip is cancelled or interrupted due to medical reasons, then provide medical reports and doctors statement 3. If trip is cancelled or interrupted due to employment reason, then termination letter from the company shall be submitted 4. If due to other insured events, police report confirming the incident/government order shall be submitted 5. In case the cancellation or interruption is owing to the sickness, injury or death of a Travelling Companion, the original tickets of the insured and the Travelling Companion indicating travel to the same destination for the same dates needs to be submitted 6. All the bills / receipts of reasonable additional expenses incurred and / or proof of cancellation charges levied by the carriers shall be submitted.
TRIP INTERRUPTION	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. If trip is cancelled or interrupted due to medical reasons, then provide medical reports and doctors statement 3. If trip is cancelled or interrupted due to employment reason, then termination letter from the company shall be submitted 4. If due to other insured events, police report confirming the incident/government order shall be submitted 5. In case the cancellation or interruption is owing to the sickness, injury or death of a travelling companion, the original tickets of the insured and the Travelling Companion indicating travel to the same destination for the same dates needs to be submitted 6. All the bills / receipts of reasonable additional expenses incurred and / or proof of cancellation charges levied by the carriers shall be submitted.
BOUNCED BOOKINGS OF AIRLINES AND HOTEL	<ol style="list-style-type: none"> 1. Duly completed claim form with signature of Insured 2. Policy Copy 3. Declaration from the Insured specifying the compliance of rules laid down by the Common Carrier or accommodation provider relating to the reconfirmation of the booking prior to the date of departure of the flight or occupation of the accommodation 4. A confirmation from the Common Carrier of the bounced booking solely at their instance and responsibility. 5. Insured shall lodge his/ her claim on the Common Carrier and/ or the accommodation provider for the additional charges that he/ she might have incurred for which he/ she has lodged a claim on this Company and in case of any recovery from the concerned agencies, shall return such recovery to the Company to extent of amount paid hereunder 6. Cancelled cheque of the insured / nominee
HIJACK DISTRESS ALLOWANCE (PER DAY UP TO 7 DAYS)	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. Full statement of the events in writing 3. Duly completed Claim Form with your signature Airline correspondence (copy of Passenger List etc.) 4. Copy of ticket/ Boarding Pass
LOSS OF PASSPORT	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. Copy of New Passport & previous passport (if available) 3. Original bills/invoices of expenses incurred for obtaining a new passport 4. Copy of FIR/ Police Report 5. Copy of return tickets

LOSS OF INTERNATIONAL DRIVING LICENSE	<ol style="list-style-type: none"> 1. Duly Completed Claims form with signature of Insured 2. Copy of Policy Certificate 3. Copy of new International Driving License 4. Copy of previous International Driving License if available 5. Copy of new tickets 6. Proof of complaint to local police 7. Cancelled cheque of the insured / nominee
UP-GRADATION TO BUSINESS CLASS	<ol style="list-style-type: none"> 1. Duly completed claim form with signature of Insured 2. Policy Copy 3. Complete set of medical records including Discharge Summary & Travel recommendation from the treating doctor mentioning the reason for upgrade to business class. 4. A Copy of scheduled Travel itinerary & actual itinerary along with the difference of additional expenses incurred towards upgrade to business class. 5. Cancelled cheque of the insured / nominee
COMPASSIONATE VISIT	<ol style="list-style-type: none"> 1. Claim Form duly filled in and signed 2. Copy of Policy Certificate 3. Travel Details: Air Ticket and Boarding passes or copy of passport with visa entry and exit stamp 4. Medical record of the patient, Discharge Summary, Presenting complains, diagnosis, treatment given, etc. 5. Certificate from the Treating Medical Officer mentioning the need for a companion (If no adult member from the family is available) 6. Paid receipts in original for expenses incurred towards air tickets and stay of the insured/Immediate Family Member 7. Depending upon the peculiarity of the case, additional documents/information's will be asked for 8. Covering letter detailing circumstances 9. Cancelled cheque of the insured / nominee
RETURN OF MINOR CHILDREN	<ol style="list-style-type: none"> 1. Claim Form duly filled in and signed by Insured Person 2. Copy of Policy Certificate 3. A certificate from the Medical Practitioner specifying the cause and minimum period of Hospitalisation. Discharge summary of the Hospital 4. Original ticket(s) used for the travel by the Minor Child back to India, if the ticket(s) are bought on behalf of the Insured without any interference of the Company. 5. Clear Copy of the death certificate (wherever applicable) providing the details of the place, date and time, and the circumstances and cause of the death (photocopy of the post-mortem certificate, wherever required by the Assistance Service Provider, for cases where post-mortem is conducted), issued by the appropriate authority where the contingency has arisen. 6. Cancelled cheque of the insured / nominee
POLITICAL RISK AND CATASTROPHE EVACUATION	<ol style="list-style-type: none"> 1. Claim Form duly filled in and signed by Insured Person 2. Copy of Policy Certificate 3. Official Declaration by embassy of India of the Insured 4. Original Invoice of Hotel Accommodation during the period Insured is unable to return to India 5. Original ticket(s) used for the travel back to India. 6. Cancelled cheque of the insured / nominee
PERSONAL LIABILITY	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured Person 2. Full statement of the facts in writing 3. Any other documents relevant to the incident, including Summons, Legal Notice, etc 4. Witness statements or any other information you would like to share with us.
BAIL BOND INSURANCE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured Person 2. Provide the court order stipulating the required amount as bail bond 3. Police report
HOME BURGLARY (HOME IN INDIA)	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured Person 2. Copy of FIR/ Police Report 3. Invoice of lost item.

FIRE COVER FOR BUILDING (HOME IN INDIA)	<ol style="list-style-type: none"> 1. Claim Form duly filled in and signed by Insured Person 2. Copy of Policy Certificate 3. Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp 4. Fire Department report/Police report. 5. Original receipts for all items claimed. If not available, provide description of items and the date, place and price of purchase 6. Newspaper cutting/Media report - Depending upon the peculiarity of the case, additional documents/information's will be asked for 7. Covering letter detailing circumstances 8. Cancelled cheque of the insured / nominee 9. Proof of ownership of the House 10. Panchnama
FIRE COVER FOR CONTENTS (HOME IN INDIA)	<ol style="list-style-type: none"> 1. Claim Form duly filled in and signed by Insured Person 2. Copy of Policy Certificate 3. Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp 4. Fire Department report/Police report. 5. Original receipts for all items claimed. If not available, provide description of items and the date, place and price of purchase 6. Newspaper cutting/Media report - Depending upon the peculiarity of the case, additional documents/information's will be asked for 7. Covering letter detailing circumstances 8. Cancelled cheque of the insured / nominee 9. Proof of ownership of the House 10. Panchnama
EMERGENCY CASH ASSISTANCE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured Person 2. Copy of FIR/ Police Report
MATERNITY EXPENSES	<ol style="list-style-type: none"> 1. Claim Form (To be signed by the Treating Doctor and Insured Person) and with the Claims Reference No. 2. Original documents of Doctor's medical report, admission and discharge cards, and Prescriptions. 3. Original bills, vouchers, reports, and payment receipts stating the details for the treatment performed 4. Original X-ray, pathological and investigative reports. 5. For expenses of transportation due to medical reasons, you also need to attach a medical statement from the doctor indicating: 6. Copy of passport, visa with entry and exit stamp
OUTPATIENT TREATMENT (OPD)	<ol style="list-style-type: none"> 1. Claim Form (To be signed by the Treating Doctor and Insured) and with the Claims Reference No. 2. Original documents of Doctor's medical report, admission and discharge cards, and Prescriptions. 3. Original bills, vouchers, reports, and payment receipts stating the details for the treatment performed 4. Original X-ray, pathological and investigative reports. 5. For expenses of transportation due to medical reasons, you also need to attach a medical statement from the doctor indicating: <ul style="list-style-type: none"> • Cause of Illness 6. Copy of passport, visa with entry and exit stamp
LOSS OF PORTABLE EQUIPMENT	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured Person 2. Copy of FIR/ Police Report 3. Original Invoice of lost item.
TRAVEL LOAN SECURE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with your signature 2. Loan Dispatch/Approval Letter 3. Original Death Certificate, 4. Copy of FIR/Police inquest report/Coroners report 5. Copy of Post-Mortem report in case of Accidental Death claim 6. Dismemberment Case: 7. Original documents of Doctor's medical report, admission and discharge cards, and prescriptions, Disability Certificate from the doctor 8. Copy of treatment papers along with No. 1 & 3 above

VISA FEES PROTECTION	<ol style="list-style-type: none"> 1. Letter/ Email of rejection with reason of rejection (if available) from the embassy 2. Passport copy of the insured 3. Copy of the Visa submitted reference number/ receipt copy 4. Visa application by the traveller/ agent with the confirmation of the date/ time stamp 5. Copy of confirmed travel ticket
EXTENDED COVER IN THE COUNTRY OF RESIDENCE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Copy of passport, visa with entry, and exit stamp 3. Documents as specified for Section Medical Expenses – Accident & Sickness (as applicable).
FRAUDULENT CARD PAYMENT	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Police Report in original. 3. Details of the attempts made to trace the loss of Payment Card 4. Statement of Claim for the expenses incurred, after reporting the fraud to the issuing financial institution. 5. Travel itinerary, Passport (first and last page with immigration stamping on visa)
TRAVEL DATE CHANGE COVER	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Insured 2. If Trip is rescheduled due to medical reasons, then provide medical reports and doctor's statement 3. If Trip is rescheduled due to employment reason, then letter from the Company shall be submitted 4. If due to other Insured events, police report confirming the incident/ government order shall be submitted 5. In case the modification is owing to the sickness, Injury or death of a Travelling Companion, the original tickets of the Insured and the Travelling Companion indicating travel to the same destination for the same dates needs to be submitted 6. All the bills / receipts of reasonable additional expenses incurred and / or proof of charges levied by the carriers shall be submitted.
DEPORTATION EXPENSES	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Proof of deportation of Insured with reason 3. Passport copy of the Insured
TUITION FEE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Photocopy of valid photo identity proof of the Insured 3. Letter from Educational Institution confirming the Academic course details along with the complete fee details paid. 4. Original documents of Doctor's medical report, admission and discharge cards, and prescriptions of Insured, if applicable 5. Disability certificate, medical reports, diagnostic test and Hospitalization papers and reports, police report of the Sponsor or immediate family member, if applicable 6. Death Certificate of Sponsor or immediate family member, if applicable 7. Travel itinerary, Passport (first and last page with immigration stamping on visa), boarding pass 8. Letter from Educational Institution confirming the Academic course details along with the Tuition Fees paid.
SPONSOR PROTECTION	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Photocopy of valid photo identity proof of the Insured 3. Letter from Educational Institution confirming the Academic course details along with the complete fee details both paid and unpaid. 4. Disability certificate, medical reports, diagnostic test and Hospitalization papers and reports, police report of the Sponsor, if applicable 5. Death Certificate of Sponsor, if applicable 6. Travel itinerary, Passport (first and last page with immigration stamping on visa), boarding pass
LOAN PROTECTION	<ol style="list-style-type: none"> 1. Duly completed Claim Form with signature of Claimant 2. Photocopy of valid Photo ID proof of the Insured 3. Medical reports giving the details of the Accident 4. Death certificate (if applicable) 5. Postmortem report, if conducted 6. Police report 7. Loan Dispatch/Approval Letter

EDUCATIONAL INSTITUTION -INSOLVENCY/ DERECOGNITION	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Photocopy of valid photo identity proof of the Insured 3. Proof of Insolvency of Educational Institution or derecognition of course 4. Recovery from the Educational Institution, if any
RESIDENTIAL NURSING BENEFIT	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Photocopy of valid photo identity proof of the Insured 3. Certificate from the Treating Medical Officer mentioning the need for a Qualified Nurse 4. Documents as specified for Section Medical Expenses – Accident & Sickness (as applicable).
SCHOLARSHIP STUDENT LIVING ALLOWANCE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Photocopy of valid photo identity proof of the Insured 3. Proof of scholarship 4. Documents as specified for Section Medical Expenses – Accident & Sickness (as applicable).
SELF-INFLICTED INJURY	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's / Claimant's signature 2. Photocopy of valid Photo ID proof of the Insured 3. Copy of Police FIR 4. Documents as specified for Section Medical Expenses – Accident & Sickness (as applicable).
CANCER PREVENTION SCREENING & MAMMOGRAPHY COVER	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Hospitalization papers, previous consultation papers, Medical Practitioner's referral notes for cancer screening and mammographic examination, diagnostic test reports, Prescriptions and pharmacy bills. 3. Photocopy of valid photo identity proof of the Insured
PHYSIOTHERAPY	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Photocopy of valid Photo ID proof of the Insured 3. Consultation papers, Medical Practitioner's referral notes for Physiotherapy.
VISION CARE	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Photocopy of valid Photo ID proof of the Insured 3. Vision test report, consultation paper 4. Receipts for expenses incurred for the purchase of spectacles or lenses
FELONIOUS ASSAULT	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's / Claimant's signature 2. Photocopy of valid Photo ID proof of the Insured 3. Medical reports giving the details of the Accident 4. Death certificate (if applicable) 5. Copy of Post-Mortem report in case of Accidental Death 6. Police report
VISA REVOCATION EXPENSES	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Letter/ Email of revocation with reason 3. Passport copy of the Insured 4. Copy of the Visa submitted reference number/ receipt copy 5. Copy of confirmed travel ticket 6. Details of legal expenses for reinstatement of Visa
ACCOMMODATION EXTENSION EXPENSES	<ol style="list-style-type: none"> 1. Duly completed Claim Form with Insured's signature 2. Letter/ Email from Educational Institution mentioning that Insured has been disenrolled with reason 3. Photocopy of valid photo identity proof of the Insured

Note-

- Policy/certificate copy, Passport copy with entry and exit stamp and Cancelled cheque copy of Insured/Nominee is required against all the Claims.
- Contact details of Assistance Service Provider is available on the Policy Schedule / Certificate of Insurance.
- The Company at its discretion may relax or call for other documents to assess the Claim.

Premium Rates

As per Rating Chart attached

Possibility of Revision of Terms of the Policy Including the Premium Rates

The Company, with prior approval of IRDAI, may revise or modify the terms of the Policy including the premium rates. The Insured Person shall be notified three months before the changes are affected.

Withdrawal of the Product

- In the likelihood of this product being withdrawn in future, the Company will intimate the Insured Person about the same 90 days prior to expiry of the policy.
- Insured Person will have the option to migrate to a similar health insurance product available with the Company at the time of Renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period. as per IRDAI guidelines, provided the Policy has been maintained without a break.

Section 41 of the Insurance Act 1938 prohibition of Rebates

As per Section 41 of the Insurance Act 1938, as amended, the practice of rebating is prohibited, as follows:

- No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing (or continuing) a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.
- Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to Ten Lakh rupees.

Contact us

For any product or service-related information or assistance, here's how you can reach Us.

Contact details for Policy Servicing	Contact details for Claim Servicing
SBI General Insurance Company Limited, Address: 9th Floor, Wing A & B, Fulcrum, Sahar Road, Andheri (East), Mumbai – 400 099. Email: customer.care@sbigeneral.in; seniortcitizengrievances@sbigeneral.in (for Senior Citizens) Toll free number: 1800221111, 18001021111 (24/7) Website: www.sbigeneral.in	Accident & Health claims team, SBI General Insurance Company Limited, Address: 9th Floor, Westport, Pan Card Club Road, Baner, Pune, Maharashtra – 411 045. Email: sbig.health@sbigeneral.in Toll Free number: 1800 210 3366, 1800 210 6366 Website: www.sbigeneral.in

TPA Details:

Across Assist Private Limited, (formerly known as Axa Assistance India/Bharti Assist Global Private Limited)

The centre for Social Research,

Plot number- 98, Sector 44, Gurugram, Haryana - 122003

Contact Number: +91 120-4670711 / 0120-4501411

Dedicated International toll free numbers for US & Canada:

844-691-8882 – Canada

844-691-8884 – US

For Rest of the world:

SBI dedicated Hotline – +91 120-4670711 (Call Back Facility) Reverse call back.

Alarm Centre FAX – +91 0120-4344847

Disclaimer

For more details on risk factors, terms and conditions, please read the sales brochure before concluding the sale.

Table: Covers, Sum Insured and Deductibles

Covers		Sum Insured in USD	Deductibles in USD
Base Covers			
1	Medical Expenses- Accident & Sickness	USD 25,000 USD 50,000 to 2,000,000 (In Multiples of 50,000)	a. 50 to 500 (in multiples of 50) b. without deductible
2	Emergency Medical Evacuation and Transportation	Covered Up to "Medical Expenses – Accident & Sickness" SI as opted	
3	Repatriation of Mortal Remains	Covered Up to "Medical Expenses – Accident & Sickness" SI as opted	Nil
4	Dental Expense	From 250 - Up to 1000 (max. 100 per tooth)	a. 50/100/150/200 b. Without Deductible
Optional Covers			
1	PED Cover (In-patient Hospitalization and Day Care Treatment)	500 up to 25000 (in multiple of 500)	i. without Co-Pay ii. with Co-pay of 5%/10%/15%/20% of SI for admissible claims incurred due to PED
2	Hospital Daily Cash	50 to 500 (In Multiple of 50)	0/1/2/3 day
3	Personal Accident including Disappearance	5000 to 50000 (In Multiple of 5000)	Nil
4	Accidental Death & Dismemberment (Common Carrier)	5000 to 25000 (In Multiple of 5000)	Nil
5	Adventure Sports Cover	Within Medical Expenses	Nil
6	Reinstatement of Sum Insured in case of Accidental Hospitalisation	100% of Medical SI	Nil
7	Delay of Checked in Baggage	100 to 500	3/6/9/12/15/18 hrs
8	Loss of Checked in Baggage	500 to 2500	Nil
9	Trip Delay	10/ 15/ 20/ 25/ 30	For every 3/6/9 hrs up to 12 / 24/ 36 hrs
10	Missed Connection	100 to 1500 (In multiple of 100)	3/6/9/12/15/18 hrs
11	Trip Cancellation due to Hospitalization	500 to 2000 (In Multiple of 250)	Nil
12	Trip Cancellation for any reason	25%/ 50%/ 75%/ 100% of non-refundable prepaid payments for travel and accommodation	12/24/36/48 hrs
13	Trip Interruption	500 to 2000 (In Multiple of 250)	Nil
14	Bounced Bookings of Airlines and Hotel	500 to 3000 (In Multiple of 250)	a) 15% of claim b) 10% of claim c) Nil
15	Hijack Distress Allowance	50 to 500/day (In Multiple of 50)	Nil
16	Loss of Passport	100 to 1000 (In Multiple of 50)	a) 25/ 50/75/ 100 b) Nil
17	Loss of International Driving License	100 to 500 (In Multiple of 100)	Nil
18	Up-gradation to Business Class	250 to 1500 (In Multiple of 50)	Nil
19	Compassionate Visit	2000 to 10000 (In Multiple of 500) In case of continuous hospitalization of 5/ 7/ 10 days	Nil

Covers		Sum Insured in USD	Deductibles in USD
20	Return of Minor Child	1000 to 10000 (In Multiple of 500) In case of continuous hospitalization of 5/ 7/ 10 days	Nil
21	Political Risk and Catastrophe Evacuation	1000 to 15000 (In Multiple of 500)	Nil
22	Personal Liability	25000 to 500000 (In Multiple of 25000)	a. Nil b. 5% of actuals c. 10% of actuals
23	Bail Bond Insurance	300 to 1000 (In Multiple of 100)	Nil
24	Home Burglary (Home in India) (in INR)	100000 to 1000000 (In Multiple of 100000)	a. 5%/ 10%/15%/20% of each claim subject to minimum INR 10,000 of each claim b. Nil
25	Fire Cover for Building (Home in India) (in INR)	100000 to 3000000 (In Multiple of 100000)	a. 5%/ 10%/15%/20% of each claim subject to minimum of INR 10,000 b. Nil
26	Fire Cover for Contents (Home in India) (in INR)	100000 to 1000000 (In Multiple of 100000)	a. 5%/ 10%/15%/20% of each claim subject to minimum of INR 10,000 b. Nil
27	Emergency Cash Assistance	Covered	Nil
28	Maternity Cover	300 to 2700 (In multiples of 300)	<u>Deductible</u> a. 50/100/150/200/250/ 300/ 350/ 400/ 450/ 500 b. Without deductible <u>Waiting Period</u> a. Waiting Period- 15/ 30/ 45/ 60/ 75/ 90 days b. No Waiting Period
29	Loss of Portable Equipment	500 to 10000 (In Multiple of 500)	As per Depreciation Table
30	Travel Loan Secure	Up to 25% (In Multiple of 5%) of 'Personal accident including disappearance' Sum Insured Payable in INR	Nil
31	Visa Fees Protection	a. 100 - 300 (in multiples of 50) OR b. 1000 USD - 3000 USD (in multiples of USD 500)	a. Nil OR b. USD 100
Additional Optional Covers			
1	Chiropractic Treatment	200, 500 per session maximum up to 1000	50/ 100
2	Extended Cover in the Country of Residence	Covered Up to SI as opted	Nil
3	Fraudulent Card Payment	500/ 1000	Nil/ 50
4	Travel Date Change Cover	25%/ 50%/ 75%/ 100% of non-refundable prepaid payments for travel air ticket booking maximum up to 500 to 2000 (In Multiple of 250)	12/24/36/48 hrs
5	Deportation Expenses	10000/20000/25000	100/200/300/400/500
Specific Optional Covers (For Students only)			
1	Tuition Fee	5000- 50000 (in multiple of 5000)	Nil
2	Sponsor Protection	10000/ 25000/ 50000/ 100000/ 200000/ 250000	Nil

Covers		Sum Insured in USD	Deductibles in USD
3	Loan Protection	30000/ 40000/ 50000/ 60000/ Actuals, whichever is lower	Nil
4	Educational Institution - Insolvency/ Derecognition	5000/ 7500/ 10000/ 15000	Nil
5	Residential Nursing Benefit	\$125 per day to maximum \$2500	Nil
6	Sports Injury	Covered Up to SI as opted	100
7	Alcoholism & Drug Abuse	500/ 1000/ 1500/ 3000	Nil
8	Self-inflicted Injury	1000-5000 (in multiples of 500)	100
9	Mental and Nervous Disorder	500/ 1000/ 1500/ 3000	a) 75/ 100 b) Nil
10	Cancer Prevention - Screening & Mammography Cover	500/ 1000/ 2000/ 4000	Nil
11	Physiotherapy	500 per session maximum up to 2500	Nil
12	Vision Care	200	50/ 100
13	Felonious Assault	3000/ 5000/ 10000	Nil
14	Visa Revocation Expenses	10000/20000/25000	100/200/300/400/500
15	Accommodation Extension Expenses	10000/20000/25000	100/200/300/400/500
Other			
1	Automatic extension	Covered	Not Applicable

Note -

- 1) The Insured Person can opt either Benefit "Trip Cancellation due to Hospitalisation" or Benefit "Trip Cancellation for any reason" or Benefit "Travel Date Change Cover".
- 2) Family Floater cover shall be applicable only for "Medical Expenses – Accident and Sickness"