

A POLICY THAT GIVES YOU MAXIMUM PROTECTION.

INTRODUCING FLEXI MAX PROTECT



Flexi Max Protect provides an additional level of financial support. Costly medical emergencies and procedures such as heart attacks, strokes, or cancer will be covered by this plan.

► MEMBERS ELIGIBLE FOR COVER



Self, spouse, parents and parents-in-law
18 years - 65 years



Dependent children
05 years - 26 years

Note: Coverage of Proposer is mandatory under the policy. If the child above 18 years of age is financially independent, he or she shall be ineligible for coverage in the subsequent renewals.

► POLICY TENURE



- The Policy shall be issued for a term of One/Two/Three Years.
- On Renewal, policy term shall be restricted to One Year, for individuals of age 80 years and above.

► APPLICABILITY OF PRE-POLICY MEDICAL CHECK UP



- Above 45 Years of age
- With adverse medical history
- Persons opting for Sum Insured above ₹25 Lakhs irrespective of age

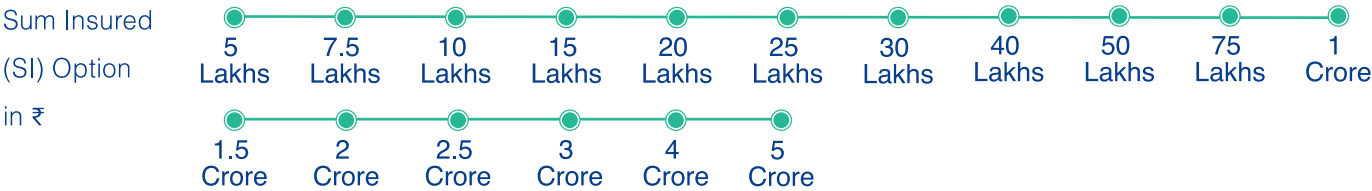
► COST OF PRE POLICY MEDICAL CHECK UP

- a. Pre policy Medical Check up for the proposed customers will be arranged by our Designated Service Provider on Cashless basis.
- b. No cost will be collected from the Customers towards the same.
- c. In case after undergoing the Pre Policy Medical Check up, the Proposal gets rejected by us or Insured decides not to take the policy, the expenses incurred by the Insurer for the purpose of Pre Policy Medical Check up will be deducted from the Insured's premium and the balance premium would be refunded.

► POLICY COVERAGE

BASE COVER

Benefit	Diagnosis Benefit
Coverage	Lumpsum benefit equal to 100% of Sum Insured on diagnosis of Critical Illness (CI) listed under the policy.



Applicability of the Benefit (illustration)	'X' opts for a SI of ₹10 Lakhs. 'X' contracts and is diagnosed with one of the listed Critical illness after 90 days of policy inception and survives upto 30 days post diagnosis of the CI. In this scenario, 'X' shall be eligible for 100% of SI, i.e. ₹10 Lakhs shall be payable to 'X'
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► **OPTIONAL COVERS**

Benefit	Double Protection Cover
Coverage	Lumpsum benefit equal to 50% of the Base Sum Insured, in the event of diagnosis of a second CI listed under the plan during the same policy year and not related to first CI paid under the policy. A 30-day cooling off period is applicable between the two claims.
Sum Insured (SI) Option in ₹	50% of the Base Sum Insured. Survival period shall be as applicable under Base Cover.
Applicability of the Benefit (illustration)	'X' has availed Double Protection Cover and gets diagnosed with a second CI which is not related to the first CI for which claim was admitted under Base Cover. 'X' Survives for a period of 30 days post diagnosis of second CI. 'X' shall be eligible for 50% of Base SI, i.e. ₹5 Lakhs shall be payable to 'X'.

Benefit	Loss of Job Cover
Coverage	10% of base SI or Gross Monthly Salary of the Insured upto a maximum of 3 months, whichever is lower as a Lumpsum benefit in the event of Loss of Job due to CI paid under Base Cover. No Loss of Job benefit shall be paid for claim admitted under Double Protection.
Sum Insured (SI) Option in ₹	Min. ₹10,000/- to Max. ₹30 Lakhs in multiples of ₹1000/-. Per month or 10% of base SI whichever is lower. Average of 3 month's Gross salary shall be considered as basis of Sum Insured. Sum Insured opted should not exceed the Gross Monthly Salary.

Applicability of the Benefit (illustration)	<p>'X' is a salaried employee and avails Loss of Job cover. 'X' earns an average Gross Monthly Salary of ₹84,375/- as per the Pay Slip. He has opted a Sum Insured of ₹15 Lakhs.</p> <p>SI - 10% of Base SI = ₹15 Lakhs*10% = ₹1.5 Lakhs (or)</p> <p>Gross Monthly Salary-SI for 'X' shall be fixed at ₹84,000/- per month and the total liability under the cover will be upto a maximum of ₹2,52,000/- (3 months). Whichever is lower.</p> <p>In the event of Loss of Job of 'X', due to CI diagnosed under base cover, 'X' shall be eligible for a claim payment upto a maximum of ₹1,50,000/-</p>
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Benefit	Loss of Income for Self Employed
Coverage	<p>5% of Base SI or ₹10 Lakhs per month, whichever is lower, upto a maximum of 3 months, in the event of Loss of income due to CI paid under Base Cover.</p> <p>No Loss of Income benefit shall be paid for claim admitted under Double Protection.</p>
Sum Insured (SI) Option in ₹	5% of Base SI or ₹10 Lakhs per month, whichever is lower.

Applicability of the Benefit (illustration)	<p>'Y' is a Professional and avails Loss of Income cover. Base SI of 'Y' under the policy is ₹10 Lakhs. SI for 'Y' shall be fixed at ₹50,000/-per month and the total liability under the cover will be upto a maximum of ₹1.5 Lakhs. In the event of Loss of Income of 'Y' due to CI diagnosed under base cover, 'Y' shall be eligible for a claim payment upto a maximum of ₹1.5 lakhs.</p> <p>In case of base sum insured of ₹2.5 Crores, the SI shall be fixed at ₹10 Lakhs per month with the maximum liability of ₹30 Lakhs.</p>
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► ADD-ON COVER

Benefit	Medical Second Opinion
Coverage	<p>In the event of any Insured Person, being diagnosed with any Medical Condition during the Policy Year, he or she can obtain the Medical Second Opinion from the World's Leading Medical Centers (WLMC) tied up with our Service Provider.</p> <p>The Add-on cover can be opted only at the time of inception or renewal of the policy.</p> <p>On opting for the same, the cover will be applicable for all the Insured members under the base policy. The proposer will not have an option to exclude the insured members from this cover.</p>

► WAITING PERIOD



- 90 days from the date of commencement of the policy for Base Cover, Loss of Job and Loss of Income cover.

► SURVIVAL PERIOD



- NIL / 30 days (as opted and mentioned in the policy schedule).

► SUM INSURED ELIGIBILITY

1. Sum Insured eligibility under Base Cover shall be based on following criteria:

Age	Sum Insured
Upto 60 Years (Earning Members)	Sum Insured options upto a maximum of 10 times of the Annual Income

► ILLUSTRATION

Age	45 Years
Annual Income	₹15 Lakhs Per Annum
Sum Insured Eligibility	Sum Insured Eligibility: 15 Lakhs*10 times=1.5 Crores The member will be eligible to choose Sum Insured from the available options not exceeding ₹1.5 Crores.

Age	Sum Insured
61 Years and Above (Earning Members)	5 times of Annual Income upto max of ₹25 Lakhs at the time of policy issuance/renewal.

► ILLUSTRATION

Age	62 Years
Annual Income	₹10 Lakhs Per Annum
Sum Insured Eligibility	Sum Insured Eligibility: 10 Lakhs*5 times=50 Lakhs However, maximum Sum Insured that is allowed for persons above 60 years is ₹25 Lakhs. Hence member will be eligible to choose Sum Insured from the available options not exceeding ₹25 Lakhs.

Age	Sum Insured
Non-Earning Members	Spouse – Sum Insured options upto 50% of Proposer's Base Sum Insured or ₹25 Lakhs, whichever is lower
	Children – Sum Insured options upto 25% of Proposer's Base Sum Insured or ₹15 Lakhs, whichever is lower
	Parents/Parents in law- Sum Insured options upto 10% of Proposer's Base Sum Insured or ₹25 Lakhs, whichever is lower at the time of policy issuance or renewal

Note: 1. Optional Covers and Add-on covers are subject to payment of additional premium.
2. *Loss of Job and Loss of Income for Self Employed can be opted only by and for the earning member's.

► SPECIFIC CONDITION

Upon the diagnosis of the defined Critical Illness, the Base cover shall immediately cease to exist with reference to that Insured. It is not permissible to renew the policy after diagnosis of any insured critical illness under Base Cover. However, the optional covers other than Double Protection Cover, if opted and mentioned in the policy schedule shall continue for the Insured until a claim becoming admissible or upto the policy period mentioned in the policy schedule, whichever is earlier.

► LIST OF CRITICAL ILLNESS COVERED

Name of the Critical Illness / Plan	Plan A- 10 CI	Plan B- 12 CI	Plan C- 20 CI	Plan D- 40 CI	Plan E- 50 CI
Cancer of specified severity	✓	✓	✓	✓	✓
Stroke resulting in permanent symptoms	✓	✓	✓	✓	✓
Myocardial Infarction (First heart attack of specified severity)	✓	✓	✓	✓	✓
Open chest CABG	✓	✓	✓	✓	✓
Kidney failure requiring regular dialysis	✓	✓	✓	✓	✓
Multiple sclerosis with persisting symptoms	✓	✓	✓	✓	✓
Major organ/bone marrow transplant	✓	✓	✓	✓	✓
Permanent paralysis of limbs	✓	✓	✓	✓	✓
Aorta graft surgery	✓	✓	✓	✓	✓
Primary (Idiopathic) pulmonary hypertension	✓	✓	✓	✓	✓

Name of the Critical Illness / Plan	Plan A- 10 CI	Plan B- 12 CI	Plan C- 20 CI	Plan D- 40 CI	Plan E- 50 CI
Primary parkinson's disease		✓	✓	✓	✓
Motor neuron disease with permanent symptoms		✓	✓	✓	✓
Open heart replacement or repair of heart valve			✓	✓	✓
Third Degree Burns			✓	✓	✓
Aplastic anaemia			✓	✓	✓
Bacterial meningitis			✓	✓	✓
COMA of specified severity			✓	✓	✓
Loss of speech			✓	✓	✓
End stage liver failure			✓	✓	✓
Deafness			✓	✓	✓
End stage lung failure				✓	✓
Goodpasture's syndrome				✓	✓
Apallic syndrome or Persistent Vegetative State (PVS)				✓	✓
Systemic lupus Erythematosus with Lupus Nephritis				✓	✓
Multiple system atrophy				✓	✓
Progressive scleroderma				✓	✓
Pneumectomy				✓	✓
Pulmonary artery graft surgery				✓	✓
Alzheimer's disease				✓	✓
Benign brain tumour [resulting in permanent neurological symptoms]				✓	✓
Cardiomyopathy				✓	✓
Progressive supranuclear palsy				✓	✓
Creutzfeldt-jakob disease (CJD)				✓	✓
Major head trauma				✓	✓
Encephalitis				✓	✓
Blindness				✓	✓
Brain surgery				✓	✓
Fulminant Viral Hepatitis				✓	✓

Name of the Critical Illness / Plan	Plan A- 10 CI	Plan B- 12 CI	Plan C- 20 CI	Plan D- 40 CI	Plan E- 50 CI
Muscular Dystrophy				✓	✓
Medullary Cystic Disease				✓	✓
Hemiplegia					✓
Severe Rheumatoid Arthritis					✓
Dissecting Aortic aneurysm					✓
Myasthenia Gravis					✓
Infective Endocarditis					✓
Pheochromocytoma					✓
Eisenmenger's Syndrome					✓
Chronic Adrenal Insufficiency					✓
Myelofibrosis					✓
Chronic Relapsing Pancreatitis					✓

List of Critical Illness applicable for Children from 05 to 17 years of age shall be as follows, irrespective of the plan opted under the policy. Any Critical Illness other than the below listed, shall not be payable for Claims relating to Children upto the age of 17 years.

1. Acquired Brain Damage

2. Aplastic Anaemia

3. Bone Marrow Transplant

4. Brain Surgery

5. Glomerulonephritis

6. Permanent paralysis of limbs

7. Leukaemia

8. Osteogenesis Imperfecta- Type III

9. Tuberculosis Meningitis

10. Third Degree Burns

11. Blindness

12. Deafness

13. Loss of speech

► IMPORTANT EXCLUSIONS

The list of exclusions below is illustrative only. For detailed list of exclusions, please refer to the policy wordings.



Any Critical Illness diagnosed before inception date of the policy with Us



Congenital external diseases, defects or anomalies or in consequence thereof



Any Critical Illness directly caused due to intentional self-injury, suicide or attempted suicide, whether the person is medically sane or insane



In the event of the death of the Insured Person within the stipulated survival period



Working in underground mines, tunneling or involving electrical installations with high tension supply, or as race jockeys or circus personnel.

► **FREE LOOK PERIOD**

Every policyholder of new individual health insurance policies, except for those policies with tenure of less than a year, shall be provided a free look period of 30 days beginning from the date of receipt of policy document, whether received electronically or otherwise, to review the terms and conditions of such policy and to return the same if not acceptable.

Free Look Period shall not be applicable on renewals or at the time of porting/migrating the policy.

If the insured has not made any claim during the Free Look Period, the insured shall be entitled to

- i. a refund of premium paid less any expenses incurred by the company on medical examination of the insured person and the stamp duty charges, where the risk has not commenced 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, expenses if any incurred by the Company on medical examination of the policyholder and stamp duty charges or
- iii. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period, expenses if any incurred by the Company on medical examination of the policyholder and stamp duty charges.

► **TERRITORIAL LIMITS**

The Insurer's liability to make any payment towards illness shall be to make payment within India.

► **CLAIM NOTIFICATION**

It shall be a condition precedent for any claim to be made by the Insured Person under this policy or for liability attaching to us hereunder that claim intimation is provided to the Insurer within 30 days from the date of diagnosis/occurrence of the event by telephone through toll free number (1800-208-9100) or in writing by email (customer@cholams.murugappa.com) / letter).

► **CLAIM DOCUMENTATION**

Upon completion of the survival period, wherever applicable and also disease specific waiting periods to check for permanent impact of the critical illness, the Insured would need to submit the claim documents as listed in the Policy Terms & Conditions within 30 days of completion of the survival period for processing of the claim along with the duly filled & signed claim form by the insured/nominee.

► **RENEWAL OF POLICY**

The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the insured person.

- i. The Company shall endeavour to give notice for renewal. However, the Company is not under obligation to give any notice for renewal. Request for renewal along with requisite premium shall be received by the Company before the end of the policy period.
- ii. 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.

- iii. No loading shall apply on renewals based on individual claims experience.
- iv. If a claim was paid under the Base Cover during the policy period for anyone of the covered critical illness, then this policy stands terminated and shall not be subsequently renewed. However, the optional covers other than Double Protection Cover, shall continue till the expiry of the policy period as mentioned in the Policy Schedule or occurrence of a claim under optional cover opted, whichever is earlier.
- v. When an insured Person is added to this Policy either by way of endorsement or at the time of renewal the waiting periods will be applicable to that insured person considering such policy period as the first policy with us.
- vi. Maximum Renewal age for dependent children is 26 years. On renewal, such insured person shall be migrated into a separate similar Health policy with continuity benefits.

► **ENHANCEMENT OF SUM INSURED**

- a. Sum Insured under Base Cover can be enhanced only at the time of renewal subject to reported claim status and health condition of the insured. If the Insured Person/Policy holder decides to increase the sum insured at the time of renewal, the Sum Insured revision is subject to the conditions mentioned below and our acceptance of the Sum Insured enhancement request.
 - a. Written application,
 - b. Submission of proof of Annual Income
 - c. Medical Examination or other medical tests for persons above 45 years of age and our acceptance.

The coverage for the increased sum insured, if any shall be as if a new policy is issued for the additional sum insured. The additional Sum Insured will be available subject to applicable waiting periods under the policy.

- b. Enhancement of Sum Insured will not be considered for:
 - i. Any Insured Person over 65 years of age.
 - ii. Any Insured Person who had undergone more than one Hospitalisation in the preceding two years.
 - iii. Any Insured Person suffering from one or more of the following Illnesses / Conditions:
 - Any chronic Illness
 - Any recurring Illness
 - Any Critical Illness

► **POSSIBILITY OF REVISION OF TERMS OF THE POLICY INCLUDING THE PREMIUM RATES**

The company may revise or modify the terms of the policy including the premium rates with prior approval of the Product Management Committee, of the Company. The insured person shall be notified three months before the changes are effected.

► WITHDRAWAL OF THE PRODUCT

- i. 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.
- ii. Insured person will have the option to migrate to similar health insurance product available with the company at the time of renewal with all the accrued continuity benefits, waiver of waiting period as per IRDAI guidelines, provided the policy has been maintained without a break.

► CANCELLATION OF COVER

- i. The policyholder may cancel this policy by giving 15 days written notice and in such an event, the Company shall refund premium for the unexpired policy period as per the short period table defined in the policy.

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.

- ii. 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.

► TAX EXEMPTION UNDER 80 D

The premium paid under this policy for self, spouse, dependent children and parents is eligible for deduction under Section 80D of the Income Tax Act.*

*Tax benefits subject to change in tax laws

► UNDERWRITING LOADING

Risk loading may be applied on premium payable (excluding taxes and cess) based on the details of the Insured Persons, including the health status, habits and lifestyle, past medical records, declarations on the Proposal Form and results of the Pre-Policy Medical check-up. The maximum risk loading for an individual shall not exceed 100%.

These loadings are applicable from commencement date of policy including subsequent renewal(s).

These loadings may only be applied if the proposal is accepted with the declared illness/ with the deviated value of medical test report, at the time of underwriting and only if the proposed policyholder accepts these loadings being applied for the underlying illness/condition at the time of underwriting.

► PREMIUMS

The premiums for selected ages, Sum Insured, Survival period and plans for the BASE COVER are illustrated in below tables:

(all Premiums are in ₹ and Exclusive of GST and for one year term)

Survival Period - 30 days						Survival Period - 0 days				
Plan	PLAN A - 10 CI	PLAN B - 12 CI	PLAN C - 20 CI	PLAN D - 40 CI	PLAN E - 50 CI	PLAN A - 10 CI	PLAN B - 12 CI	PLAN C - 20 CI	PLAN D - 40 CI	PLAN E - 50 CI
Sum Insured (in ₹)	500000					500000				
25	337	339	403	519	544	354	356	423	545	571
30	483	485	563	704	744	507	510	591	740	782
35	646	651	736	899	949	678	684	773	944	997
40	1,281	1,297	1,429	1,699	1,795	1,345	1,362	1,501	1,784	1,885
45	2,379	2,414	2,599	3,009	3,179	2,498	2,534	2,729	3,159	3,338
50	4,265	4,333	4,581	5,209	5,680	4,479	4,549	4,810	5,469	5,964
55	7,010	7,136	7,441	8,379	9,052	7,361	7,493	7,813	8,798	9,505
60	9,400	9,604	9,921	11,184	12,001	9,870	10,084	10,417	11,743	12,601
65	16,431	16,895	17,360	20,053	21,406	17,253	17,740	18,228	21,055	22,476
Sum Insured (in ₹)	1000000					1000000				
25	673	677	805	1,037	1,087	707	711	845	1,089	1,141
30	965	970	1,125	1,408	1,488	1,013	1,019	1,181	1,479	1,563
35	1,292	1,302	1,472	1,797	1,898	1,356	1,367	1,545	1,887	1,993
40	2,562	2,593	2,858	3,398	3,590	2,690	2,723	3,001	3,568	3,770
45	4,758	4,827	5,197	6,017	6,357	4,996	5,068	5,457	6,318	6,675
50	8,530	8,665	9,162	10,417	11,360	8,957	9,098	9,620	10,938	11,928
55	14,020	14,272	14,882	16,757	18,103	14,721	14,985	15,626	17,595	19,009
60	18,800	19,207	19,842	22,367	24,002	19,740	20,167	20,834	23,485	25,202
65	32,862	33,790	34,720	40,105	42,812	34,505	35,480	36,456	42,110	44,952

Survival Period - 30 days						Survival Period - 0 days				
Plan	PLAN A - 10 CI	PLAN B - 12 CI	PLAN C - 20 CI	PLAN D - 40 CI	PLAN E - 50 CI	PLAN A - 10 CI	PLAN B - 12 CI	PLAN C - 20 CI	PLAN D - 40 CI	PLAN E - 50 CI
Sum Insured (in ₹)	2500000					2500000				
25	1,683	1,693	2,013	2,593	2,718	1,768	1,778	2,113	2,723	2,853
30	2,413	2,425	2,813	3,520	3,720	2,533	2,548	2,953	3,698	3,908
35	3,230	3,255	3,680	4,492	4,745	3,390	3,418	3,863	4,718	4,983
40	6,405	6,483	7,145	8,495	8,975	6,725	6,808	7,503	8,920	9,425
45	11,895	12,068	12,993	15,043	15,893	12,490	12,670	13,643	15,795	16,688
50	21,325	21,663	22,905	26,043	28,400	22,393	22,745	24,050	27,345	29,890
55	35,050	35,680	37,205	41,893	45,258	36,803	37,463	39,065	43,988	47,523
60	47,000	48,018	49,605	55,918	60,005	49,350	50,418	52,085	58,713	63,005
65	82,155	84,475	86,800	1,00,263	1,07,030	86,263	88,700	91,140	1,05,275	1,12,380

Survival Period - 30 days						Survival Period - 0 days				
Plan	PLAN A - 10 CI	PLAN B - 12 CI	PLAN C - 20 CI	PLAN D - 40 CI	PLAN E - 50 CI	PLAN A - 10 CI	PLAN B - 12 CI	PLAN C - 20 CI	PLAN D - 40 CI	PLAN E - 50 CI
Sum Insured (in ₹)	5000000					5000000				
25	3,365	3,385	4,025	5,185	5,435	3,535	3,555	4,225	5,445	5,705
30	4,825	4,850	5,625	7,040	7,440	5,065	5,095	5,905	7,395	7,815
35	6,460	6,510	7,360	8,985	9,490	6,780	6,835	7,725	9,435	9,965
40	12,810	12,965	14,290	16,990	17,950	13,450	13,615	15,005	17,840	18,850
45	23,790	24,135	25,985	30,085	31,785	24,980	25,340	27,285	31,590	33,375
50	42,650	43,325	45,810	52,085	56,800	44,785	45,490	48,100	54,690	59,540
55	70,100	71,360	74,410	83,785	90,515	73,605	74,925	78,130	87,975	95,045
60	94,000	96,035	99,210	1,11,835	1,20,010	98,700	1,00,835	1,04,170	1,17,425	1,26,010
65	1,64,310	1,68,950	1,73,600	2,00,525	2,14,060	1,72,525	1,77,400	1,82,280	2,10,550	2,24,760

► LONG TERM DISCOUNT

No of Years	Discount (%) on Premium
1	0%
2	5%
3	10%



Cholamandalam MS General Insurance Company Limited

(A Joint Venture between Murugappa Group & Mitsui Sumitomo Insurance Company Ltd., Japan)

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