

CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LIMITEDRegistered Office: 2nd Floor, "DARE House", 2, N.S.C. Bose Road, Chennai – 600 001.

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IRDA Regn. No.123; PAN AABCC6633K CIN U66030TN2001PLC047977

**CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY**

This document provides key information about your policy. You are also advised to go through your policy document

Sl. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number				
1	Name of Insurance Product/Policy	CHOLA COMPREHENSIVE GROUP PERSONAL ACCIDENT POLICY					
2	Policy Number	<<Policy Number>>					
3	Type of Insurance Policy	Benefit					
4	Sum Insured (Basis) (Along with Amount)	Individual Sum Insured - Where each member has a separate sum insured under the policy <table><tr><th>Insured Name</th><th>Sum Insured (SI) (in Rs.)</th></tr><tr><td><<Insured 1>></td><td>Rs.</td></tr></table>	Insured Name	Sum Insured (SI) (in Rs.)	<<Insured 1>>	Rs.	Not Applicable
Insured Name	Sum Insured (SI) (in Rs.)						
<<Insured 1>>	Rs.						
5	Policy Coverage (What the Policy covers?) (Policy Clause Number/s)	Accidental Death Benefit (AD)	Base Covers 5.1.1				
		Permanent Total Disability Benefit (PTD)	Base Covers 5.1.2				
		Permanent Partial Disability Benefit (PPD)	Base Covers 5.1.3				
		Accidental Weekly Indemnity or Temporary Total Disablement	Optional Covers 5.2.1				
		Extended Permanent Total Disability Benefit	Optional Covers 5.2.2				
		Multifold Permanent Total Disablement Benefit	Optional Covers 5.2.3				
		Accidental Medical Expenses Reimbursement Benefit	Optional Covers 5.2.4				
		Accidental Medical Expenses Reimbursement-Inpatient	Optional Covers 5.2.5				
		Accidental Medical Expenses Reimbursement-Inpatient and Outpatient	Optional Covers 5.2.6				
		Education Grant Cover for One Dependent Child	Optional Covers 5.2.7				
		Education Grant Cover for Two Dependent Children	Optional Covers 5.2.8				
		Educational Encouragement Grant Cover	Optional Covers 5.2.9				
		Tuition Benefit	Optional Covers 5.2.10				
		Modification of Residential Accommodation and Vehicle	Optional Covers 5.2.11				
		Broken Bones	Optional Covers 5.2.12				
		Hospital Daily Cash	Optional Covers 5.2.13				
		Convalescence Benefit	Optional Covers 5.2.14				
		External Aids and Appliances	Optional Covers 5.2.15				
		Family Transportation Benefit	Optional Covers 5.2.16				
		Ambulance Charges	Optional Covers 5.2.17				
		Repatriation of Mortal Remains Benefit	Optional Covers 5.2.18				
		Cost of Cremation Benefit	Optional Covers 5.2.19				
		Extension for disappearance of Body Benefit	Optional Covers 5.2.20				
		Burn Injury Benefit	Optional Covers 5.2.21				
		Double Death Benefit due to Air Carrier (Scheduled / Unscheduled Flights)	Optional Covers 5.2.22				
		Accidental Miscarriage	Optional Covers 5.2.23				
		Terrorism Cover	Optional Covers 5.2.24				
		Lumpsum Benefit on diagnosis of HIV	Optional Covers 5.2.25				
The benefit applicable to the Insured under the policy will depend on the plan and Sum Insured opted and as mentioned in the Policy Schedule							
		The policy does not cover any losses caused directly due to the following					
		GENERAL EXCLUSIONS					
		1. intentionally self-inflicted injury, suicide or any attempt thereof, whether sane or insane;	2.1				
		2. Any Pre-existing condition or any complication arising from the same.	2.2				
		3. Sexually transmitted diseases or illness.	2.3				
		4. Congenital external defects or anomalies or in consequence thereof	2.4				
		5. Pregnancy or childbirth or in consequence thereof.	2.5				
		6. Treatment other than Allopathy and AYUSH	2.6				
		7. Injury or Disease directly caused by or contributed by ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel;	2.7				
		8. Injury or Disease directly caused by or contributed by the radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of that equipment;	2.8				
		9. war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detainment of all kings, princes, and people of whatsoever nation condition or quality.	2.9				
		10. Nuclear, Chemical and biological terrorism Exclusion Clause: The Insurance under this Policy shall not extend to cover Death, disablement or injury resulting directly arising out of, contributed to or caused by, or resulting from or in connection with any act of nuclear, chemical, biological terrorism (as defined below) regardless of any other cause or event contributing concurrently or in any other sequence to the loss. For the purpose of this endorsement "Nuclear, chemical, biological terrorism" shall mean the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous Chemical agent and/or Biological agent during the period of this insurance by any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear. "Chemical" agent shall mean any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property. "Biological" agent shall mean any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesized toxins) which cause illness and/or death in humans, animals or plants.	2.1				
		11. The Insured Person 's participation in naval, military or air force operations whether in the form of military exercises or war games or actual engagement with the enemy with foreign or domestic;	2.11				
		12. loss sustained or contracted in consequence of the Insured being under the influence of alcohol or drugs unless administered on the advice of a physician;	2.12				
		13. any loss of which a contributing cause was the Insured ' s actual or attempted commission of, or willful participation in, an illegal act or any violation or attempted violation of the law or resistance to arrest;	2.13				

6	Exclusions (What the policy does not cover)	14. any loss sustained whilst engaging in aviation or ballooning, whilst mounting into, dismounting from or travelling in any balloon or aircraft other than as a passenger (fare paying otherwise) in any duly licensed standard type of aircraft anywhere in the world;	2.14
		15. any loss sustained while the Insured is participating in contests of speed using a motorized vehicle or bicycle and/or hunting and/or skiing and/or skydiving and/or gliding and/or mountaineering and/or winter sports;	2.15
		16. Resulting in injury whilst participating as the driver, co-driver or passenger of a motor vehicle during motor racing or trial runs	2.16
		17. Consequential losses of any kind or actual or alleged legal liability	2.17
		18. Any Events/incidences that happened before the policy inception would not be covered. All events should fall under the policy duration.	2.18
		19. While you are participating or training for any sport as a professional.	2.19
		20. This Insurance does not cover any loss, damage, cost or expense directly arising out of or due to any act of terrorism. For the purpose of this Exclusion, an act of terrorism means an act, including but not limited to the use of force or violence and / or the threat thereof, of any person whether acting alone or on behalf of or in connection with any organization(s) or government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and / or to put the public, or any section of the public in fear.	2.2
		Exclusions applicable to ACCIDENTAL DEATH	Base Covers 5.1.1
		In addition to the General Exclusions listed in Part II of the policy, this form shall not cover and no payment shall be made with respect to:	
		1) loss caused directly, wholly or partly by: a. bacterial infections (except pyogenic infections which shall occur through an accidental cut or wound) or any other kind of disease; b. medical or surgical treatment except as may be necessary solely as a result of Injury;	
		Exclusions applicable to ACCIDENTAL MEDICAL EXPENSES REIMBURSEMENT BENEFIT	Optional Covers 5.2.4
		In addition to the General Exclusions listed in Part II of the policy, this form shall not cover and no payment shall be made with respect to:	
		1) Loss caused directly, wholly or partly by: a. Bacterial infections (except pyogenic infections which shall occur through an accidental cut or wound) or any other kind of disease; b. Medical or surgical treatment except as may be necessary solely as a result of Injury; 2) Treatment of hernia resulting from any bodily injury. 3) Dental care or surgery except as occasioned by Accidental Injury	
		Exclusions applicable to ACCIDENTAL MEDICAL EXPENSES REIMBURSEMENT – INPATIENT	Optional Covers 5.2.5
		In addition to the General Exclusions listed in Part II of the policy, this form shall not cover and no payment shall be made with respect to:	
		1) Loss caused directly, wholly or partly by: a. Bacterial infections (except pyogenic infections which shall occur through an accidental cut or wound) or any other kind of disease; b. Medical or surgical treatment except as may be necessary solely as a result of Injury; 2) Treatment of hernia resulting from any bodily injury. 3) Dental care or surgery except as occasioned by Accidental Injury.	
		Exclusions applicable to ACCIDENTAL MEDICAL EXPENSES REIMBURSEMENT – INPATIENT & OUTPATIENT	Optional Covers 5.2.6
		In addition to the Exclusions listed in Part II of the policy, this form shall not cover and no payment shall be made with respect to:	
		1) Loss caused directly, wholly or partly by: a. Bacterial infections (except pyogenic infections which shall occur through an accidental cut or wound) or any other kind of disease; b. Medical or surgical treatment except as may be necessary solely as a result of Injury; 2) Treatment of hernia resulting from any bodily injury. 3) Dental care or surgery except as occasioned by Accidental Injury.	
		Exclusions applicable to BROKEN BONES BENEFIT:	Optional Covers 5.2.12
		In addition to the General Exclusions listed in Part II of the policy, this form shall not cover and no payment shall be made with respect to:	
		1) Loss caused directly, wholly or partly by the Insured Person suffering from sickness of disease not resulting in bodily injury 2) Any fracture resulting from Osteoporosis or a malignant disease where this condition has been diagnosed prior to the fracture occurring. 3) While the Insured Person in engaging in any form of aerial flight other than as a passenger 4) While the Insured Person in participating or training for any sport as a professional.	
		Exclusions applicable to ACCIDENTAL MISCARRIAGE:	Optional Covers 5.2.23
		1. Voluntary Termination of Pregnancy	
7	Waiting Period Time Period during which specified diseases/treatments are not covered. IT is counted from the beginning of the policy coverage	Initial Waiting Period: Not Applicable	
		Specific Waiting Periods: Not Applicable	
		Pre-existing Diseases: Not Applicable	
	Financial limits of coverage	The policy will pay only up to the limits specified hereunder for the following diseases/procedures:	

8	i. Sublimit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit)	In case of a claim, this policy requires you to share the following costs: Expenses exceeding the following sub-limits: Not Applicable	
	ii. Co-Payment (It is a specified amount/percentage of the admissible claim amount to be paid by policyholder/insured)	Not Applicable	
	iii. Deductible (It is a specified amount: - upto which an insurance company will not pay any claim, and - which will be deducted from total claim amount (if claim amount is more than the specified amount))	Not Applicable	
	iv. Any other limit (as applicable)	Not Applicable	
	Claims / Claims Procedure	<p>• For Cashless Service: Not Applicable</p> <p>• For Reimbursement of Claim: Claims Notification: Written notice of claim must be given to any loss, or as soon thereafter as reasonably possible, and in any event not later than 30 days of such occurrence or commencement</p> <p>Claim Documentation: Claim Documents as listed in the Policy Terms have to be submitted at the earliest possible opportunity not exceeding 30 days from the date of loss</p> <p>Turn Around Time (TAT) for claims settlement: 30 days from the date of receipt of last necessary document</p> <p>TAT for Pre-authorisation of cashless facility - Not Applicable</p> <p>TAT for cashless final bill authorisation - Not Applicable</p> <p>Network Hospital details: Not Applicable</p> <p>Helpline Number: For any assistance on claims, please contact us at our toll-free number: 1800-208-9100</p> <p>Hospitals which are excluded or from where no claims will be accepted by Insurer - Refer to our website www.cholainsurance.com or Chola MS app for latest list of excluded hospitals, as we will not consider / pay any claim from these hospitals.</p> <p>Downloading/getting claim form: Please visit our website www.cholainsurance.com and download the claim form or write to us at customercare@cholams.murugappa.com or call us at 1800-208-9100</p>	General Condition 3.7
10	Policy Servicing	For queries related to policy / claim servicing, please contact us at our Toll free number 1800-208-9100 or write to us at customercare@cholams.murugappa.com	Section 4-Grievances Redressal Mechanism
11	Grievances / Complaints	<p>Procedure of Grievance Redressal</p> <p>.Please write to customercare@cholams.murugappa.com to registeryour complaint.</p> <p>.In Case of Senior Citizen please write to seniorcitizensupport@cholams.murugappa.com or call our Toll free @ 1800 208 9100 (for Health products)</p> <p>.On lodging the complaint, a complaint reference number will be provided. An acknowledgement will also be sent with the details of turn around time for resolution and complaint registration details.</p> <p>.In case you are not happy with the resolution provided or delay of greater than 7 working days, you may follow the below escalation matrix.</p> <p>Escalation Matrix</p> <p>.In case you are dissatisfied with the response or have not received a response, you may escalate the same to our Nodal Officer</p> <p>Nodalescalation@cholams.murugappa.com (Quoting the previous Service request number)</p> <p>.In case you are still unhappy with the response or have not received a response within 7 working days, you may escalate the same to our Chief Grievance Officer - GRO@cholams.murugappa.com (Quoting the previous Service request number)</p> <p>.If after having followed the above steps and your issue still remain unresolved, you may approach the Insurance Ombudsman for Redressal. Login to https://www.cioins.co.in/Ombudsman to get details on Insurance Ombudsman Offices</p>	Section 4-Grievances Redressal Mechanism
12	Things to remember	Free Look Cancellation: Not Applicable	
		<p>Policy renewal:- Except on grounds of fraud , moral hazard or mis representation or non-co-operation, renewal of your policy shall not be denied. This policy can be renewed subject to payment of premium prior to expiry of the policy and not later than 30 days grace period posts the expiry of the policy. The claims if any occurring during the period of break in insurance shall not be payable under the renewed policy.</p> <p>Automatic Termination:</p> <p>The cover for the Insured Person shall terminate immediately in the event of admissible claim and settlement of 100% Sum Insured under Accidental Death or Permanent Total Disability</p> <p>Migration: Not Applicable</p> <p>Portability - Not Applicable</p>	General Condition 3.11, 3.26
		Change in Sum Insured: e. Sum Insured can be enhanced only at the time of renewal subject to reported claim status and health condition of the insured. If you decide to increase the sum insured at the time of renewal, the Sum Insured revision is subject to written application and our acceptance	General Condition 3.11.e

		<p>Moratorium Period: After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the insurer on grounds of non-disclosure, misrepresentation, except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits</p>	General Condition 3.27
13	Your Obligations	<p>Insured is at obligation to disclose all pre-existing diseases or condition in the Proposal form. In the event of misrepresentation, misdescription or non-disclosure of any material fact by the Insured, the Policy shall be void and all premium paid hereon shall be forfeited to the Company and no claims shall be payable.</p> <p>Insured can contact our toll free no. 1800 208 9100 or write to us at customercare@cholams.murugappa.com to intimate any change to the material information affecting the policy.</p>	