

## CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LIMITED

Registered Office: 2<sup>nd</sup> Floor, "DARE House", 2, N.S.C. Bose Road, Chennai – 600 001.

Toll free: 1800 208 9100, T: +91 (0) 44 4044 5400, F: +91 (0) 44 4044 5550

E: [customercare@cholamsmurugappa.com](mailto:customercare@cholamsmurugappa.com); website: [www.cholainsurance.com](http://www.cholainsurance.com).

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 MS EVENT SHIELD INSURANCE 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 <div> <div>Insured Name</div> <div>Sum Insured (SI) (in Rs.)</div> </div> <<Insured 1>> Rs.	Not Applicable
5	Policy Coverage (What the Policy covers?) (Policy Clause Number/s)	Section 1 - Personal Accident Section 2 - Fracture Care Section 3 - Hospital Cash Benefit Section 4 - Food Poisoning Treatment cover Section 5 - Event Cancellation by Event Organiser Section 6 - Ticket Cancellation by Insured Beneficiary Section 1 Section 2 Section 3 Section 4 Section 3 Section 6 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 <b>GENERAL EXCLUSIONS: Applicable to Sections 1, 2, 3 and 4</b>	
		2. Investigation & Evaluation – Code – Excl04: a. Expenses related to any admission primarily for diagnostics and evaluation purposes only are excluded b. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.	GENERAL EXCLUSIONS A.2
		3. Rest Cure, rehabilitation and respite care – code – Excl05: a. Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes: i. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons. ii. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.	GENERAL EXCLUSIONS A.3
		4. Hazardous or Adventure sports: Code – Excl09: Expenses related to any treatment, necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.	GENERAL EXCLUSIONS A.4
		5. Breach of law: Code – Excl 10 : Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.	GENERAL EXCLUSIONS A.5
		6. Maternity: Code – Excl18: i. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalisation) except ectopic pregnancy; ii. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the policy period.	GENERAL EXCLUSIONS A.6
		7. Through suicide, attempted suicide (whether sane and insane) or intentionally self-inflicted injury or illness,	GENERAL EXCLUSIONS A.7
		8. While under the influence of liquor or drugs, alcohol or other intoxicants,	GENERAL EXCLUSIONS A.8
		9. Arising out of your participation in any police, naval, military or air force operations whether peace or in war in the form of military exercises or war games or actual engagement with the enemy, Whether foreign or domestic,	GENERAL EXCLUSIONS A.9
		10. Your consequential losses of any kind or your actual or alleged legal liability.	GENERAL EXCLUSIONS A.10
		11. Venereal or sexually transmitted diseases,	GENERAL EXCLUSIONS A.11
		12. War (whether declared or not), civil war, invasion, act of foreign enemies, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrest, restraint or detainment, confiscation or nationalization or requisition of or damage by or under the order of any government or public local authority, or	GENERAL EXCLUSIONS A.12
		13. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel,	GENERAL EXCLUSIONS A.13
		14. The radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of that equipment,	GENERAL EXCLUSIONS A.14
		15. Operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft; or Scheduled Airlines;	GENERAL EXCLUSIONS A.15
		16. Any claim caused by osteoporosis (porosity and brittleness of the bones due to loss of protein from the bones matrix) or pathological fracture (any fracture in an area where pre-existing Disease has caused the weakening of the bone) if osteoporosis or bone Disease diagnosed prior to the cover date	GENERAL EXCLUSIONS A.16
		17. Expenses incurred on neck belts, wrist bandages, walking sticks, abdomen belts, CPAP and any other similar external aid /devices, the use of which has been necessitated following an accident	GENERAL EXCLUSIONS A.17
		<b>GENERAL EXCLUSIONS: (Applicable to SECTIONS 5 and 6):</b>	

6	Exclusions (What the policy does not cover)	1) Any expenses incurred if the Insured Event is cancelled by Insured/Event Organizer or the Ticket is cancelled by the Insured Beneficiary due to war, invasion, act of foreign enemy hostilities or war like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.	6.3.1
		2) Any expenses incurred if the Event is cancelled by Insured/Event Organizer or the Ticket is cancelled by the Insured Beneficiary, directly or indirectly, arising out of or attributable to ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or nuclear weapons material or from the combustion of nuclear fuel or the radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.	6.3.2
		<b>Specific Exclusions applicable to FRACTURE CARE</b> This policy shall not cover and no payment shall be made with respect to:	Section 2
		1) Loss caused directly or indirectly, wholly or partly by the Insured Beneficiary 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.	
		<b>Specific Exclusion Applicable to Hospital Cash Benefit:</b>  We will not be liable to make any payment under this Policy under any circumstances, for any claim directly attributable to, or based on, or arising out of, or connected with any of the following	Section 3
		1) Any Hospitalization for an existing disability from a previous Accident which has occurred prior to the first inception of this Policy. 2) Any stay in Hospital for an Injury due to Accident without undertaking any treatment. 3) Any Hospitalization for Accidental Injury aggravated by an existing disability or pre-existing illness / condition / injury. 4) Any Hospitalization due to an Accidental Injury where the treatment is undertaken by a family member and self-medication or any treatment that is not scientifically recognized. 5) Vaccination and inoculation of any kind unless forming part of treatment for Injury due to an Accident as prescribed by the Medical Practitioner. 6) Vitamins and tonics unless forming part of treatment for Injury due to an Accident as prescribed by the Medical Practitioner. 7) Cosmetic or plastic Surgery: Code – Excl08: Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner. 8) Treatment taken from persons not registered as Medical Practitioners under respective Medical Councils. 9) Any other medical or surgical treatment except as may be necessary solely as a result of Injury. 10) Any treatment taken outside India. 11) Treatment other than Allopathy and AYUSH	
		<b>Specific Exclusion Applicable to Food Poisoning Treatment cover</b> No indemnity is available hereunder for any Claim directly caused by, based on, arising out of or howsoever attributable to any of the following.	Section 4
		1) Any OPD treatment/Hospitalization for Food Poisoning which has occurred prior to the Insured Event period 2) Any stay in Hospital without undertaking any treatment. 3) Any OPD Treatment /Hospitalization for food poisoning after 24 hours of consumption of food during the Insured Event Period. 4) Any OPD treatment / Hospitalization due to food poisoning where the treatment is undertaken from a family member and self-medication or any treatment that is not scientifically recognized. 5) Vaccination and inoculation of any kind unless forming part of treatment for food poisoning as prescribed by the Medical Practitioner. 6) Code – Excl14 Dietary supplements and substances that can be purchased without prescription, including but not limited to vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalisation claim or day care procedure. 7) Treatment taken from persons not registered as Medical Practitioners under respective Medical Councils. 8) Any other medical or surgical treatment except as may be necessary solely for treatment of food poisoning. 9) Any Treatment taken outside India 10) Treatment other than Allopathy and AYUSH 11) Unproven Treatments Code – Excl16: Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.	
		<b>Exclusions applicable EVENT CANCELLATION by Event Organizer</b>  No indemnity is available hereunder for any Claim directly caused by, based on, arising out of or howsoever attributable to any of the following. 1) If on account of the Cancellation of the Insured Event, the Insured has received full refund from the Event Organizer 2) Death, accident, illness, non-appearance of an Individual person other than Main Artist 3) Non-Appearance of any Main Artist due to such person committing self-injury, suicide or attempting suicide. 4) Non-Appearance of the insured artist/ performer due legal, government cases, litigations, summons etc. 5) Cancellation of the event due to non-granting or withdrawal of permission by any local, state or central authority. 6) Cancellation and/or abandonment of the Insured Event by the Event Organizer after the Commencement of the Insured Event 7) Cancellation of the Insured Event by the Event Organizer due to lack of funds, errors or omissions 8) Cancellation of the Insured Event due to Arrest or imprisonment of the Named Artist or Event Organizer for any criminal activity. 9) Cancellation of the Insured Event by the Event Organizer arising out of fear, threat or hoax of terrorism or any act of Terrorism 10) Cancellation of event due to Contractual disputes between the Event Organizer and the Main Artist except Financial Dispute 11) Cancellation of the event due to Industrial Disputes /Industrial Action whether actual or Threatened 12) Cancellation of Event due to Pandemic outbreak	Section 5
		<b>Exclusions applicable Ticket Cancellation by Insured Beneficiary</b>	

		<p>No indemnity is available hereunder for any Claim directly caused by, based on, arising out of or howsoever attributable to any of the following.</p> <p>1) If the Insured Beneficiary has received full refund from the Event Organizer of the Insured Event</p> <p>2) In respect of any claim which is indemnifiable under section 1 of the policy</p> <p>3) If the ticket is cancelled due to any other reason except as provided in Scope of Cover (1) and (2)</p> <p>4) If the Ticket is cancelled after the Commencement of the Insured Event even if the Insured Beneficiary has not been able to attend the event for any reason.</p> <p>5) If the Ticket is cancelled by the Insured Beneficiary due to postponement or re scheduling of the Insured Event</p> <p>6) If the cancelled ticket is not a Bonafide ticket purchased from an Authorized Vendor</p>	Section 6
7	Waiting Period Time Period during which specified diseases/treatments are not covered. IT is counted from the beginning of the policy coverage	<p><b>Initial Waiting Period:</b> Not Applicable</p> <p><b>Specific Waiting Periods:</b> Not Applicable</p> <p><b>Pre-existing Diseases:</b> Covered after 36 consecutive months under the policy</p>	GENERAL EXCLUSIONS: Applicable to Sections 1,2,3 and 4 (1)
8	Financial limits of coverage	The policy will pay only up to the limits specified hereunder for the following diseases/procedures:	
	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>• <b>For Cashless Service</b> : Not Applicable</p> <p>• <b>For Reimbursement of Claim</b></p> <p><b>Notification:</b> Written notice of claim must be given to any loss, or as soon thereafter as reasonably possible, and in any event not later than 7 days of such occurrence or commencement</p> <p><b>Claim Documentation:</b> 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 for initial approval - 60 minutes (Health and PA Hospitalisation sections)</p> <p>TAT for cashless final bill authorisation / enhancements - 180 minutes (Health and PA Hospitalisation sections)</p> <p><b>Network Hospital details (Health and PA Hospitalisation sections):</b> Download the updated Network Hospitals from <a href="http://www.cholainsurance.com">www.cholainsurance.com</a> or Chola MS App</p> <p><b>Helpline Number:</b> For any assistance on claims, please contact us at our toll-free number: 1800-208-9100</p> <p><b>Hospitals which are excluded or from where no claims will be accepted by Insurer</b> - Refer to our website <a href="http://www.cholainsurance.com">www.cholainsurance.com</a> or Chola MS app for latest list of excluded hospitals, as we will not consider / pay any claim from these hospitals.</p> <p><b>Downloading/getting claim form:</b> Please visit our website <a href="http://www.cholainsurance.com">www.cholainsurance.com</a> and download the claim form or write to us at <a href="mailto:customer@cholams.murugappa.com">customer@cholams.murugappa.com</a> or call us at 1800-208-9100</p>	4. GENERAL TERMS AND CONDITIONS APPLICABLE TO ALL COVERS .13
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 <a href="mailto:customer@cholams.murugappa.com">customer@cholams.murugappa.com</a>	28. Grievances Redressal Mechanism

11	<b>Grievances / Complaints</b>	<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 <a href="https://www.cioins.co.in/Ombudsman">https://www.cioins.co.in/Ombudsman</a> to get details on Insurance Ombudsman Offices</p>	28. Grievances Redressal Mechanism
12	<b>Things to remember</b>	<p><b>Free Look Cancellation:</b> Not Applicable</p> <p><b>Policy renewal:-</b> Except on grounds of fraud , moral hazard or mis representation or non-co-operation, renewal of your policy shall not be denied. Note: The cover for the member shall terminate immediately in the event of admissible claim and settlement of 100% Sum Insured under Coverage Death or Permanent Total Disability and no Renewal of contract will be permissible</p> <p><b>Migration:</b> Not Applicable</p> <p><b>Portability</b> - Not Applicable</p> <p><b>Change in Sum Insured:</b> Not Applicable</p> <p><b>Moratorium Period:</b> Not Applicable</p>	4. GENERAL TERMS AND CONDITIONS APPLICABLE TO ALL COVERS .12
13	<b>Your Obligations</b>	<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>	