

CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LIMITEDRegistered Office: 2nd 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@cholams.murugappa.com; website: 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 Income Shield Insurance (Group) | | | |
| 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 | Not Applicable | | |
| | | <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>> |
| Insured Name | Sum Insured (SI) (in Rs.) | | | | |
| <<Insured 1>> | Rs. | | | | |
| 5 | Policy Coverage (What the Policy covers?) (Policy Clause Number/s) | Base Cover | | | |
| | | Loss of Monthly Income due to Loss of Job | Coverage 3.1 | | |
| | | Optional Covers | | | |
| | | Accident Protection | Optional Cover 6.1 | | |
| | | Children Education Protection Benefit | Optional Cover 6.2 | | |
| | | Parental Care Benefit | Optional Cover 6.3 | | |
| 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 | | | | | |
| 3.3.2 The policy does not cover any losses caused directly due to the following: | | | | | |
| 1. The Company shall not be liable to make any payment under this policy in the event of termination, dismissal, temporary suspension or retrenchment from employment of the Insured Person being attributed to any dishonesty or fraud or poor performance on the part of the Insured Person or his/her willful violation of any rules of the employer or laws for the time being in force or any disciplinary action against the Insured Person by employer. | | | | | |
| | | | | | |
| 2. The Company shall not be liable to make any payment under this Policy in connection with or in respect of: | | | | | |
| a. Insured Person who are Self employed | | | | | |
| b. Unemployment arising within the waiting period of the Policy. | | | | | |
| | | | | | |
| 3. Any unemployment which does not commence during the Policy Period. | | | | | |
| | | | | | |
| 4. Any unemployment from a job under which no salary or any remuneration is provided to the Insured Person | | | | | |
| | | | | | |
| 5. Any unemployment due to death of the Insured Person | | | | | |
| | | | | | |
| 6. Any suspension from employment on account of any pending enquiry being conducted by the employer/ Public Authority. | | | | | |
| | | | | | |
| 7. Any unemployment due to resignation, voluntary retirement if opted by the Insured on personal grounds | | | | | |
| | | | | | |
| 8. Any Voluntary Superannuation or voluntary early retirement opted by the Insured | | | | | |
| | | | | | |
| 9. Any termination following a termination notice already served by the employee prior to the commencement of this Policy | | | | | |
| | | | | | |
| 10. Any events occurring before the commencement of the cover or otherwise outside the Period of Insurance | | | | | |
| | | | | | |
| Specific Exclusions applicable to Personal Accident (Coverage 3.1.d) | | | | | |
| | | | | | |
| a. Insured person acting against the advice of a physician | | | | | |
| | | | | | |
| b. Self-endangerment unless in self-defense or to save life. | | | | | |
| | | | | | |
| c. Intentional self Injury and / or the use or misuse of intoxicating drugs and / or alcohol | | | | | |
| | | | | | |
| d. War, whether war be declared or not, invasion, act of foreign enemy, hostilities, civil war, insurrection, terrorism or terrorist acts or activities, rebellion, revolution, mutiny, military or usurped power, riot, strike, lockout, military or popular uprising, civil | | | | | |
| | | | | | |
| e. Commotion, martial law or loot, sack or pillage in connection therewith, confiscation or destruction by any government or public authority or any act or condition incidental to any of the above. | | | | | |
| | | | | | |
| f. Naval or military operations of the armed forces or air force and participation in operations requiring the use of arms or which are ordered by military authorities for combat terrorists, rebels or like | | | | | |
| | | | | | |
| g. Insured person's participation in any hazardous activities including but not limited to scuba diving, motor racing, parachuting, hang gliding, rock / mountain climbing and the like whether voluntary or paid. | | | | | |
| | | | | | |
| h. Nuclear, Chemical, 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 | | | | | |
| | | | | | |
| 6 | Exclusions (What the policy does not cover) | Specific Exclusions applicable to Critical Illness benefit (coverage 3.1.e) | | | |
| | | a. Any Critical Illness arising on account of or in connection with any pre-existing disease | 3.3.4.a | | |
| | | b. Any sexually transmitted diseases or any condition directly caused by or associated with Human T-Cell Lymphotropic Virus type III (III LB III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS. | 3.3.4.b | | |
| | | c. War, whether war be declared or not, invasion, act of foreign enemy, hostilities, civil war, insurrection, terrorism or terrorist acts or activities, rebellion, revolution, mutiny, military or usurped power, riot, strike, lockout, military or popular uprising, civil. | 3.3.4.c | | |
| | | d. Commotion, martial law or loot, sack or pillage in connection therewith, confiscation or destruction by any government or public authority or any act or condition incidental to any of the above. | 3.3.4.d | | |
| | | e. Naval or military operations of the armed forces or air force and participation in operations requiring the use of arms or which are ordered by military authorities for combat terrorists, rebels or like | 3.3.4.e | | |
| | | f. Insured person's participation in any hazardous activities including but not limited to scuba diving, motor racing, parachuting, hang gliding, rock / mountain climbing and the like whether voluntary or paid. | 3.3.4.f | | |
| | | g. Any natural peril (including but not limited to storm, tempest, avalanche, earthquake, volcanic eruptions, hurricane, or any other kind of natural hazard) | 3.3.4.g | | |
| | | h. Radioactive contamination | 3.3.4.h | | |
| | | i. Intentional self Injury and / or the use or misuse of intoxicating drugs and / or alcohol | 3.3.4.i | | |
| | | Specific Exclusions applicable for Optional cover - Accident Protection | | | |

| | | | |
|----|---|---|--|
| | | <p>1. intentionally self-inflicted injury, suicide or any attempt thereof, whether sane or insane;</p> <p>2. 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;</p> <p>3. 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;</p> <p>4. 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,</p> <p>5. 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;</p> <p>6. 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;</p> <p>7. 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</p> <p>8. 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;</p> <p>9. 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;</p> <p>10. Resulting in injury whilst participating as the driver, co-driver or passenger of a motor vehicle during motor racing or trial runs</p> <p>11. Payment of compensation in respect of death or Permanent Total Disablement arising from or resulting from any Illness to any Insured Person</p> <p>12. Any Events/incidences that happened before the policy inception would not be covered. All events should fall under the policy duration.</p> <p>13. While you are participating or training for any sport as a professional</p> <p>14. Pregnancy Exclusion Clause : The Insurance under this Policy shall not extend to cover death or disablement resulting directly caused the contributed to or aggravated or prolonged by child birth or from pregnancy or in consequence thereof</p> <p>15. As a result of, or which is contributed to by, the Insured person suffering from any pre-existing condition or pre-existing physical infirmity.</p> | Optional cover 6.1 |
| 7 | Waiting Period Time Period during which specified diseases/treatments are not covered. IT is counted from the beginning of the policy coverage | <p>Waiting Period: A waiting period of 90 days will apply to all claims under the policy excluding loss of Job due to Personal Accident.</p> <p>Specific Waiting Periods (Not applicable for claims arising due to an accident): Not Applicable</p> <p>Pre-existing Diseases: Not Applicable</p> | 3.3.1 |
| 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) | <p>In case of a claim, this policy requires you to share the following costs: Expenses exceeding the following sub-limits:</p> <p>Not Applicable</p> | |
| | 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: Advance claim intimation of at least 48 hours is required for planned hospitalisation and intimation within 24 hours for emergency hospitalisation. This would help us to pre-process your claim for a smooth experience. Claim Documents as listed in the Policy Terms have to be submitted at the earliest possible opportunity not exceeding 30 days from date of discharge.</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 - Not Applicable</p> <p>TAT for cashless final bill authorisation / enhancements - Not Applicable</p> <p>Network Hospital details: Download the updated Network Hospitals from www.cholainsurance.com or Chola MS App</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. However, in case of life-threatening situations or following an accident, expenses incurred for the treatment up to the stage of stabilization are payable but not the complete claim.</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> | 4. General Conditions 19 |
| 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 5-Grievances Redressal Mechanism |

| | | | |
|----|-------------------------|---|--|
| 11 | Grievances / Complaints | <p>Procedure of Grievance Redressal</p> <ul style="list-style-type: none"> • Please write to customer@cholams.murugappa.com to register your complaint. • In Case of Senior Citizen please write to seniorcitizensupport@cholams.murugappa.com or call our Toll free @ 1800 208 9100 (for Health products) • 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. • 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. Escalation Matrix • In case you are dissatisfied with the response or have not received a response, you may escalate the same to our Nodal Officer – Nodalescalation@cholams.murugappa.com (Quoting the previous Service request number) • 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) • 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. | Section 5-Grievances Redressal Mechanism |
| 12 | Things to remember | <p>Free Look Cancellation: Not Applicable</p> <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>Migration: Not Applicable</p> <p>Portability: Not Applicable</p> <p>Change in Sum Insured: Not Applicable</p> <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> | <p>4. General Conditions 7</p> <p>4. General Conditions 18</p> |
| 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 customer@cholams.murugappa.com to intimate any change to the material information affecting the policy.</p> | |