

**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@cholams.murugappa.com](mailto:customercare@cholams.murugappa.com); website: [www.cholainsurance.com](http://www.cholainsurance.com)

IRDA Regn. No.123; PAN AABCC6633K CIN U66030TN2001PLC047977

**PRAVASI BHARATIYA BIMA YOJANA**

IRDA/NL-HLT/CHSGI/P-H/V.I/286/13-14

Prospectus

**Suitability**

1. This insurance scheme is available to all Indian Citizens between the age group of 18-60 years whilst stay abroad having valid visa for the purpose of employment contract only.
2. This policy would be issued for a period of 6 months/ 1 year/ 2 years as mentioned in the schedule.
3. This policy would be issued to Individuals only.

**Salient Features & Benefits**

1. Personal Accident Benefit
  - a. Accidental Death
  - b. Permanent Total Disability
2. Family Cover\*

The family of the insured in India consisting of spouse and two dependent children upto 21 years of age shall be entitled to hospitalization benefit cover including AYUSH treatment as defined in the policy (amount not exceeding Rs. 10,000/- in all), in the event of death or permanent disability of the insured. Maternity benefit shall however not be available under this extended cover to the insured's spouse
3. Reimbursement of repatriation / Transport expenses on account of Death / Permanent Total disability / Termination of employment contract on account of contracting major illness (as defined in schedule)
4. Reimbursement of Repatriation / Transport expenses due to termination of contract of employment in certain other cases (e.g if he/she is not received by the employer or if there is any substantive change in the job/Employment Contract/agreement to the disadvantage of the Insured person, or if the employment is prematurely terminated within three months for no fault of the insured person)
5. Hospitalisation Cover (for treatment taken in India, limited up to a maximum of Rs. 50,000)
6. Maternity Benefit (up to a maximum of Rs. 20,000)
7. Maternity extension Benefit

**Requirement**

Completed proposal form,

**Rating Schedule**

The premium for this policy would vary depending on the

- a. Sum Insured
- b. Tenure of the policy

**Guide rates**

- a. Rs.200 - 300/- per person for policy period of six months.
- b. Rs.400 - 500/- per person for policy period of one year

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- c. Rs.500 - 700/- per person for policy period of two years  
The premium above are exclusive of Tax.

**SCHEDULE OF BENEFITS**

Benefits	Option 1 (INR)	Option 2 (INR)	Deductible (INR)
Personal Accident Expenses	5,00,000	10,00,000	-
Family Cover Expenses	25,000	50,000	-
Repatriation (Medically unfit condition / Remains)	Single, one way economy class air fare	Single, one way economy class air fare	-
Airfare for the attendant	Single, return economy class air fare	Single, return economy class air fare	-
Employment Contingency Expenses	Single, return economy class air fare	Single, return economy class air fare	-
Medical Hospitalisation Expenses	50,000	75,000	-
Maternity Benefit	20,000	25,000	-
Legal Expenses	25,000	30,000	-

**SCOPE OF COVER**

This insurance is available to all Indian Citizens between the age group of 18 to 65 years whilst stay abroad having valid visa for the purpose of employment only, for the period of cover as stated in the policy schedule.

Upon the happening of the event under any of the covers 2.1 to 2.8 below during the Policy Period, the Insurer will indemnify the Proposer up to the Limit of Indemnity as detailed below and as per the General Conditions:

**Personal Accident Expenses**

If at any time during currency of this policy, as stated in the schedule hereto, and whilst stay abroad, the insured person shall sustain any bodily injury resulting solely and directly from accident caused by external, violent and visible means, then in the event of the death or permanent disability of the Insured leading to loss of employment while abroad, the Company shall pay to the insured, insured's nominee or insured's legal representative(s), as the case may be, the sum or sums hereinafter set forth, that is to say :

1. If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the death of the insured, the Sum Insured as mentioned in the policy schedule.
2. If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of :
  - a. Sight of both eyes, or of the actual loss by physical separation of two entire hands or two entire feet, or of one entire hand and one entire foot, or of such loss of sight of one eye and such loss of one entire hand or one entire foot, the Sum Insured as mentioned in the policy schedule.

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- b. Use of two hands or two feet, or of one hand or one foot, or of such loss of sight of one eye and such loss of use of one hand or one foot, the Sum insured as mentioned in the policy schedule.
- c. If such injury shall, as a direct consequence thereof, immediately, permanently, totally and absolutely, disable the insured person from engaging in any employment or occupation of any description whatsoever, then a lump sum equal to 100% of the Sum Insured.

**NOTE:** *For the purpose of Cause (b) above, physical separation of a hand means separation at or above the wrist and of the foot at or above the ankle.*

**Exclusions**

The Company shall not be liable under this Section of the Policy for:

- 3. Any payment in case of more than one claim under the Policy during any one period of insurance by which the maximum liability of the Company in that period would exceed the sum insured under the Policy.
- 4. Payment of compensation in respect of death or disablement of the insured person
  - d. from intentional self-injury, suicide or attempted suicide,
  - e. whilst under the influence of intoxicating liquor or drugs,
  - f. whilst engaging in Aviation or Ballooning whilst mounting into, dismounting from or traveling in any balloon or aircraft other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world,
  - g. directly or indirectly caused by venereal diseases, Aids or insanity,
  - h. arising or resulting from the insured person committing any breach of law with criminal intent.

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 multi engines.

- 5. Payment of compensation in respect of Death, Injury or Disablement of the insured person due to or arising out of or traceable to : War, Invasion, Act of foreign enemy, Hostilities (whether war be declared or not), threat of war or civil strife in the country of employment and/ or in the neighbouring country / region, Civil War, Rebellion, Revolution, Insurrection, Mutiny, Military or Usurped Power Seizure, Capture, Arrests, Restraints and Detainments by kings, princes and people of whatever nation, condition or nature.
- 6. Payment of Compensation in respect of death of, or bodily injury or any disease or illness to the insured person:
  - a. directly or indirectly caused by or contributed to by or arising from ionizing radiations or contamination by radioactivity from any nuclear fuel or from any

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- nuclear waste from the combustion of nuclear fuel. For the purpose of this exception, combustion shall include any self-sustaining process of nuclear fission.
- b. directly or indirectly caused by or contributed to by or arising from nuclear weapon material.
  - c. The total and irrecoverable loss of:
    - i. The sight of one eye, or of the actual loss by physical separation of one entire hand or one entire foot.
    - ii. Total and irrecoverable loss of use of a hand or a foot without physical separation.

PROVIDED also that due observance and fulfillment of the terms and conditions of this Policy (which conditions and all endorsements thereon are to be read as part of this Policy) shall so far as they relate to anything to be done or not to be done by the insured be a condition precedent to any liability of the company under this Policy.

7. Pregnancy Exclusion Clause : The insurance under this Policy shall not extend or cover death or disablement resulting directly or indirectly caused by contributed to or aggravated or prolonged by childbirth or from pregnancy or in consequence thereof.

**SECTION IB - FAMILY COVER EXPENSES**

The family of the insured in India consisting of spouse and two dependent children upto 21 years of age shall be entitled to hospitalization benefit cover including AYUSH treatment as defined in the policy, for an amount as mentioned in the policy schedule not exceeding in all in the event of death or permanent disability of the insured. Maternity benefit shall however not be available under this Family cover benefit to the insured's spouse.

**Exclusions:**

The Company shall not be liable to make any payment under this Section of the policy in respect of any expenses whatsoever incurred by any insured person in connection with or in respect of :-

1. During the first year of the operation of insurance cover, the expenses on treatment of diseases such as Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia or Fibromyoma, Hernia, Hydrocele, Congenital Internal Disease, Fistula in anus, Piles, Sinusitis and related disorders are not payable.
2. Injury or disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not).
3. Circumcision unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to an accident, Vaccination or inoculation or cosmetic or aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness.
4. Cost of spectacles and contact lenses, hearing aids.
5. External Medical Equipment of any kind used at home as post hospitalization care including cost of instrument used in treatment of sleep apnea syndrome (C.P.A.P.) and

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- continuous Peritoneal Ambulatory dialysis (C.P.A.D.) and Oxygen Concentrator for Bronchial asthmatic condition.
6. Any dental treatment or surgery which is a corrective, cosmetic or aesthetic procedure, including wear and tear, unless arising from disease or injury and which requires hospitalization for treatment.
  7. Convalescence, general debility, Run-down condition or rest cure, congenital external disease or defects of anomalies, sterility, venereal disease, intentional self-injury and use of intoxicating drugs / alcohol.
  8. All expenses arising out of any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency syndrome or any Syndrome or any condition of a similar kind commonly referred to as AIDS.
  9. Charges incurred at Hospital or Nursing Home primarily for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at a Hospital / Nursing Home.
  10. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending physician.
  11. Injury or Disease directly or indirectly caused by or contributed to by nuclear weapons / materials.
  12. Voluntary medical termination of pregnancy.
  13. Treatment other than Allopathy and AYUSH

**SECTION – IIA : REPATRIATION EXPENSES (Medically Unfit Body Condition Or Mortal Remains )**

In the event of accidental death of the insured person or a medically unfit body condition or state, whilst abroad, actual expenses incurred for repatriation of the dead body of the Insured to India shall be reimbursed to the nominee of the Insured.

**Exclusions**

The Company shall not be liable for any expenses under this Section of the policy for any exclusions mentioned under the General Exclusions.

**SECTION – IIB : AIRFARE FOR THE ATTENDANT**

In the event of the death of the Insured, the cost towards single one way economy class airfare, from and to India, of one attendant, shall be reimbursed. The claim for reimbursement of the attendant fare shall be filed within 90 days of completion of journey.

**Exclusions**

The Company shall not be liable for any expenses under this Section of the policy for any exclusion mentioned under the General Exclusions.

**SECTION III : EMPLOYMENT CONTINGENCY EXPENSES**

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The Company shall reimburse the expenses towards single, one way economy class airfare for the Insured in the event of any of the following contingencies:

- a. On arrival of the Insured at his work place or destination abroad, if he/she is not received by the employer and the Insured has to return back to India due to non availability of the employment / job, and the Insured has to return back to India within 1 month of the date of departure from India, provided that the grounds for repatriation are certified by the concerned Indian Mission / Post and air tickets are submitted in original OR
- b. If there is any substantive change in the job/Employment Contract/agreement to the disadvantage of the Insured thereby causing the Insured to return to India within 1 month immediately thereafter provided that the grounds for repatriation are certified by the concerned Indian Mission / Post and air tickets are submitted in original OR
- c. If the Insured's employment is prematurely, terminated within the period of employment, for no fault of the Insured, and the Insured has to return back to India within 1 month immediately thereafter, provided that the grounds for repatriation are certified by the concerned Indian Mission / Post and air tickets are submitted in original OR
- d. If the Insured falls ill / is declared medically unfit to commence or continue or resume work and as a result of which the Insured's work contract is terminated by the foreign employer within the first 12 months of taking the insurance, provided that the grounds for repatriation are certified by the concerned Indian Mission / Post and air tickets are submitted in original.

**Exclusions**

The Company shall not be liable to make any payment under this Section of the Policy if the repatriation of the insured person is on account of –

- a. violation of any law, fraud, or any breach of employment conditions.
- b. such repatriation becomes necessary due to any amendment or change in the existing laws of the country of employment, or proclamation by Government Order that all workers of foreign origin are being deported,
- c. the employment is obtained through fake or forged documents, work permit or improper entry visa.
- d. the entry into the country has been made without completing legal formalities for whatsoever reason.
- e. Any amount relating to medical expenses
- f. the entry into the country has been refused on medical grounds,
- g. no attempt being made by the insured person to contact his employer on arrival if the insured person is not received at such time,

**SECTION – IV A : MEDICAL HOSPITALISATION EXPENSES**

If at any time during currency of this policy, the insured person whilst abroad, in the country of employment, shall contract any disease or suffer from any illness or sustain any bodily injury through accident and if such disease or injury shall require any such insured person, upon the advice of a duly qualified medical practitioner or duly qualified surgeon to incur hospitalization

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expenses for medical / surgical treatment at any nursing home / hospital in India or in the country of employment, as an inpatient, the Company will reimburse to the Insured, the amount of such expenses as are reasonably and necessarily incurred by the Insured upto an as mentioned in the policy schedule.

Expenses on Hospitalization for minimum period of 24 hours are admissible. However, this time limit will not apply for specific treatments i.e. Dialysis, Chemotherapy, Radiotherapy, Eye Surgery, Dental Surgery, Lithotripsy (Kidney stone removal), Tonsillectomy D&C taken in the Hospital / Nursing Home and the insured is discharged on the same day, the treatment will be considered to be taken under Hospitalisation Benefit. Further this condition will also not apply in case of stay in hospital of less than 24 hours under any of the following circumstances.

- i. The treatment is such that it necessitates hospitalization and the procedure involves specialized infrastructural facilities available in hospitals.
- ii. Due to technological advances hospitalization is required for less than 24 hours only.
- iii. Surgical procedure is involved.

**Exclusions:**

The Company shall not be liable to make any payment under this Section of the policy in respect of any expenses whatsoever incurred by any insured person in connection with or in respect of :-

1. During the first year of the operation of insurance cover, the expenses on treatment of diseases such as Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia or Fibromyoma, Hernia, Hydrocele, Congenital Internal Disease, Fistula in anus, Piles, Sinusitis and related disorders are not payable.
2. Injury or disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not).
3. Circumcision unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to an accident, Vaccination or inoculation or cosmetic or aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness.
4. Cost of spectacles and contact lenses, hearing aids.
5. External Medical Equipment of any kind used at home as post hospitalization care including cost of instrument used in treatment of sleep apnea syndrome (C.P.A.P.) and continuous Peritoneal Ambulatory dialysis (C.P.A.D.) and Oxygen Concentrator for Bronchial asthmatic condition.
6. Any dental treatment or surgery which is a corrective, cosmetic or aesthetic procedure, including wear and tear, unless arising from disease or injury and which requires hospitalization for treatment.
7. Convalescence, general debility, Run-down condition or rest cure, congenital external disease or defects of anomalies, sterility, venereal disease, intentional self-injury and use of intoxicating drugs / alcohol.
8. All expenses arising out of any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus type III (HTLV-III) or Lymphadenopathy

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Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency syndrome or any Syndrome or any condition of a similar kind commonly referred to as AIDS.

9. Charges incurred at Hospital or Nursing Home primarily for diagnostic, x-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at a Hospital / Nursing Home.
10. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending physician.
11. Injury or Disease directly or indirectly caused by or contributed to by nuclear weapons / materials.
12. Voluntary medical termination of pregnancy.
13. Naturopathy Treatment.

**SECTION IV B: MATERNITY BENEFIT**

The Company shall reimburse the actual maternity benefit for the insured upto a maximum limit as mentioned in the policy schedule provided treatment is taken by the insured in a Hospital / Nursing Home as in-patient in India or the country of employment. In case of medical treatment for maternity is taken in the country of employment, the benefit shall be provided only if the requisite documents are certified by the concerned Indian mission / post. Reimbursement shall be restricted to actuals.

Expenses on Hospitalization for minimum period of 24 hours are admissible. However, this time limit will not apply for specific treatments i.e. Dialysis, Chemotherapy, Radiotherapy, Eye Surgery, Dental Surgery, Lithotripsy (Kidney stone removal), Tonsillectomy D&C taken in the Hospital / Nursing Home and the insured is discharged on the same day, the treatment will be considered to be taken under Hospitalisation Benefit. Further this condition will also not apply in case of stay in hospital of less than 24 hours under any of the following circumstances.

1. The treatment is such that it necessitates hospitalization and the procedure involves specialized infrastructural facilities available in hospitals.
2. Due to technological advances hospitalization is required for less than 24 hours only.
3. Surgical procedure is involved.

**Exclusions:**

The Company shall not be liable to make any payment under this Section of the policy in respect of any expenses whatsoever incurred by any insured person in connection with or in respect of :-

1. During the first year of the operation of insurance cover, the expenses on treatment of diseases such as Cataract, Benign Prostatic Hypertrophy, Hysterectomy for Menorrhagia or Fibromyoma, Hernia, Hydrocele, Congenital Internal Disease, Fistula in anus, Piles, Sinusitis and related disorders are not payable.
2. Injury or disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not).

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3. Circumcision unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to an accident, Vaccination or inoculation or cosmetic or aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness.
4. Cost of spectacles and contact lenses, hearing aids.
5. External Medical Equipment of any kind used at home as post hospitalization care including cost of instrument used in treatment of sleep appnea syndrome (C.P.A.P.) and continuous Peritoneal Ambulatory dialysis (C.P.A.D.) and Oxygen Concentrator for Bronchial asthmatic condition.
6. Any dental treatment or surgery which is a corrective, cosmetic or aesthetic procedure, including wear and tear, unless arising from disease or injury and which requires hospitalization for treatment.
7. Convalescence, general debility, Run-down condition or rest cure, congenital external disease or defects of anomalies, sterility, venereal disease, intentional self-injury and use of intoxicating drugs / alcohol.
8. All expenses arising out of any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency syndrome or any Syndrome or any condition of a similar kind commonly referred to as AIDS.
9. Charges incurred at Hospital or Nursing Home primarily for diagnostic, x-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any ailment, sickness or injury, for which confinement is required at a Hospital / Nursing Home.
10. Expenses on vitamins and tonics unless forming part of treatment for injury or disease as certified by the attending physician.
11. Injury or Disease directly or indirectly caused by or contributed to by nuclear weapons / materials.
12. Voluntary medical termination of pregnancy.
13. Naturopathy Treatment.

**Special Conditions Applicable to Maternity Expenses Benefit:**

- a. **Maternity Expenses Benefit** means treatment taken in hospital /Nursing Home arising from or traceable to pregnancy, childbirth including normal Caesarean Section

These Benefits are admissible if the expenses are incurred in Hospital / Nursing Home as in-patients in India or in the country of employment.

- b. A waiting period of 9 months is applicable for payment of any claim relating to normal delivery or caesarean section or abdominal operation for extra uterine pregnancy. The waiting period may be relaxed only in case of delivery, miscarriage or abortion induced by accident or other medical emergency.
- c. Claim in respect of delivery for only first two children and / or operations associated therewith will be considered in respect of any one insured person covered under the

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Policy or any renewal thereof. Those insured persons who are already having two or more living children will not be eligible for this benefit.

- d. Pre-natal and post-natal expenses are not covered unless admitted in Hospital / Nursing Home and treatment is taken there.

**SECTION V: LEGAL EXPENSES**

The Company shall reimburse upto a maximum amount as mentioned in the policy schedule towards any legal expenses incurred by the Insured in any litigation relating to his employment provided the necessity of filing such legal case is certified by the appropriate Ministry of that country.

The actual expenses incurred need to be certified by the concerned Indian Mission / Post.

**Exclusions**

- a. The Company shall not be liable to make any payment under this Section of the policy in connection with or in respect of any of the expenses incurred by the Insured in connection with or in respect of :
- b. Any claim of the personal liability of the Insured towards his / her family, relations and traveling companions, whether personal or official
- c. Any claim resulting from any transmission of any kind of illness /disease by the Insured
- d. Any claim arising out of the professional activities involving the Insured

**4. GENERAL EXCLUSIONS (applicable to all covers under the policy)**

The Company shall not be liable to make any payments under any of the Section in this policy in respect of claims:

- i. pertaining to events occurring outside the Period of insurance the policy
- ii. if the Insured is traveling against the advice of the physician
- iii. if the Insured has received any prognosis for a medical condition
- iv. if the Insured is taking part in any naval, military or air force operation
- v. emanating from an Injury or disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not).
- vi. due to Convalescence, general debility, Run-down condition or rest cure, congenital external disease or defects of anomalies, sterility, venereal disease, intentional self-injury and use of intoxicating drugs / alcohol.
- vii. due to expenses arising out of any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus type III (HTLV-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency syndrome or any Syndrome or any condition of a similar kind commonly referred to as AIDS
- viii. arising out of Injury or Disease directly or indirectly caused by or contributed to by nuclear weapons / materials.

**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@cholams.murugappa.com](mailto:customercare@cholams.murugappa.com); website: [www.cholainsurance.com](http://www.cholainsurance.com)

IRDA Regn. No.123; PAN AABCC6633K CIN U66030TN2001PLC047977



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- ix. Any act of terrorism
- x. due to repatriation charges / deportation expenses necessitated by termination of contract of the insured if such expenses are to be borne by the employer as per employment contract.
- xi. Any repatriation charges / transportation expenses necessitated by termination of contract of the insured and consequent deportation on account of misconduct, commission of any criminal offence, etc.
- xii. Non-medical Expenses incurred during Hospitalisation. The list of such Non medical Expenses is placed at Annexure 1 of the policy

**GENERAL CONDITIONS (applicable to all covers under the policy)**

**Claim Procedure and documentation**

Upon the happening of any event which may give rise to a claim under this Policy, the insured / assignee or authorized / legal representative(s) as the case may be, shall forthwith give notice thereof to the Company in writing, at the Company address given below:

**Cholamandalam MS General Insurance Company Limited**

**Chola MS HELP – Health Claims Department**

New No.2, Old No. 234, Parry House,

3rd Floor, N. S. C. Bose Road

Chennai - 600001

Customer Care Toll Free No: 1800-208-9100

E-Mail: [customercare@cholams.murugappa.com](mailto:customercare@cholams.murugappa.com)

The insured / nominee shall thereafter within 1 month of the occurrence of the event under SECTION 1B, SECTION III, SECTION IVA, SECTION IVB and SECTION V, and within 90 days of the occurrence of the event under SECTION IIA, SECTION IIB and within 12 calendar months from the date of occurrence of the event under SECTION IA, submit the claim form duly filled in all respects, signed and supported by documents relevant to the claim, as stated below:

- a. In case of death due to accident:
  - i. Police Report confirming accidental death.
  - ii. Post Mortem Report.
  - iii. Certificate / Report from concerned Indian Embassy.
  - iv. Duly attested copy of passport (all pages).
- b. Permanent Total Disability -
  - i. Medical records pertaining to treatment following the accident.
  - ii. Disability certificate issued by the competent medical authority.

In case of permanent total disability, the insured person shall, if the Company so desires, also present himself / herself for examination before a medical practitioner to be deputed by the Company to assess the extent of disability suffered by the insured.

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The insured / nominee or authorized / legal representative as the case may be, shall thereafter give all assistance and cooperation and furnish such information and documents depending on the nature of claim as may be sought by the Company, inter alia –

1. Original insurance certificate / policy.
2. Application form for compensation duly filled in all respects and signed by the claimant
3. Copy of passport (all pages) / emergency certificate issued by the Indian Mission / Post, duly attested, if death occurs outside India.
4. Air Ticket
5. Medical Certificate issued by the competent authority in case of return on Medical grounds
6. Certificate from concerned Indian Mission / Post that the prospective employer has refused to employ the worker
7. Copy of the Notice served on the Insured

Any compensation under this Policy will be paid in India in Indian currency only. No sum under this Policy shall carry interest.

The period of insurance of the policy shall be as per the duration mentioned on the Policy Schedule. Proof of identity and residence of the beneficiary for claims exceeding Rs 1 Lakh

Upon acceptance of the offer of claim settlement by the Insured, the claim amount will be settled by the Company within 7 days from the date of acceptance of the offer by the Insured. In case of delay in the payment, the Company shall be liable to pay interest at the rates stipulated by IRDA from time to time

**Free Look Period**

You shall be allowed a period of 30 days from the date of receipt of this policy to review the terms and conditions of the policy and to return the same if not acceptable.

The Insured can return the policy within 30 days of its receipt if he/she is not satisfied with its coverage or terms and conditions. In such a case the policy will be cancelled from date of cancellation request received at Insurer's office provided no claim is reported and considered. Refund of premium would be after retaining charges towards medical tests, stamp duty charges and pro-rata premium from the risk start date till date of cancellation.

**Renewal of Policy**

1. We agree to renew your policy unless on grounds of moral hazard, misrepresentation, fraud or non-cooperation by the Insured.
2. The claims if any occurring during the period of break in insurance shall not be payable under the renewed policy
3. The company reserves its rights to vary the premium from time to time subject to approval of Product Management Committee of the Company.

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4. This product may be withdrawn from the market after approval from the Product Management Committee of the Company. We will intimate the Insured person in writing about such withdrawal atleast 30 days prior to the renewal date. The Insured person will have the option to purchase another policy with similar covers if available with the company.

**Cancellation of cover**

This policy may be cancelled by us on account of misrepresentation, fraud, and non-disclosure of material facts or non cooperation of the insured by giving 15 days written notice delivered to, or mailed to the Insured persons' last address as shown in the records. The policy shall be void and all premium paid hereon shall be forfeited to the Company. Upon cancellation of the policy by us for any other reasons (other than the above), the insured person shall be entitled to refund of pro-rata premium subject to a minimum retention of Rs.101/- for the unexpired portion of the policy on the date of cancellation, subject to proposed journey has not commenced

The company may allow cancellation of the policy only in case when the journey is not undertaken subject to production of the original passport as a proof. The Company will retain Rs. 101/- as cancellation charges.

**Nomination:**

The Insured person is entitled to nominate the person/ persons to whom the money secured by the Policy shall be paid in the event of his death as per the provisions of S.39 of the Insurance Act, 1938. In case the nominee is a minor, the Policyholder can appoint a person who will receive the money secured by the policy in the event of the Policyholder's death during the minority of the nominee.

The details of nomination will be acknowledged by the Company in the Policy issued by the Company. The Policyholder is entitled to cancel or withdraw the nomination at any time and the Company upon request shall make the necessary endorsement in the Policy.

**GRIEVANCES****Mechanism for Grievance Redressal:-**

In case of any grievance the insured person may contact the company through

Website : [www.cholainsurance.com](http://www.cholainsurance.com)

Toll free : 1800 208 9100

E-Mail : [customercare@cholams.murugappa.com](mailto:customercare@cholams.murugappa.com)

Courier : Manager , Customer Care, Chola MS General Insurance Company Limited, Hari Nivas Towers First Floor, #163, Thambu Chetty Street, Parry's Corner, Chennai -600001

**Procedure of Grievance Redressal**

- Please write to [customercare@cholams.murugappa.com](mailto:customercare@cholams.murugappa.com) to register your complaint.

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- In Case of Senior Citizen please write to [seniorcitizensupport@cholams.murugappa.com](mailto: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](mailto: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](mailto: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.