





■ **Bajaj Allianz**
Bajaj Allianz General Insurance Company Limited is a joint venture between Bajaj Finserv Limited (recently demerged from Bajaj Auto Limited) and Allianz SE. Both enjoy a reputation of expertise, stability and strength. This joint venture company incorporates global expertise with local experience. The comprehensive, innovative solutions combine the technical expertise and experience of the more than 110 year old Allianz SE, and in-depth market knowledge and good will of Bajaj brand in India. Competitive pricing and quick honest response have earned the company the customer's trust and market leadership in a very short time.

■ **The Bajaj Allianz Advantage**

-  HAT: In-house Claim Administration
-  Global expertise
-  Innovative packages to match individual needs
-  Quick disbursement of claims

■ **Why do you need a Critical Illness Insurance Policy?**

There was a time when life cover was enough, Your main fear was probably of dying prematurely and leaving your family to cope without a breadwinner. However due to the advancement in Medical technology Many life-threatening illnesses such as heart attack, cancer can now be cured. You would agree that the requirement of financial support would be very critical in such situations. Bajaj Allianz, in its efforts to provide a customer centric solution is offering an insurance policy to cover to some of these critical illnesses. This is the reason why Critical Illness Insurance policies have been developed.

■ **What does the Critical Illness Insurance Policy Cover?**

Critical Illness insurance is a benefit policy which covers 10 Critical Illnesses. A lump sum amount would be paid on diagnosis of one of the listed critical illness subject to the policy terms and conditions:

■ **Critical Illnesses covered under the policy:**

1. First Heart Attack (Myocardial Infarction)
2. Open Chest CABG (Coronary Artery Disease Requiring Surgery)
3. Stroke Resulting in Permanent Symptoms
4. Cancer of Specified Severity
5. Kidney Failure Requiring Regular Dialysis
6. Major Organ Transplantation
7. Multiple Sclerosis with Persisting Symptoms

8. Surgery of Aorta
9. Primary Pulmonary Arterial Hypertension
10. Permanent Paralysis of Limbs
11. Neuro Surgery
12. Joint Replacement

■ **Who Can covered under Policy?**

Self, Spouse, Dependent Children, Grandchildren, Parents, Sister, Brother, Father In law, Mother In law, Aunt, Uncle

■ **What is the entry age?**

- Entry age for Adult is 18 years – 65 years.
- Entry age for dependent Children is 6 years – 21 years.

■ **What will be the renewal age?**

Under normal circumstances, lifetime renewal benefit is available under the policy except on the grounds of fraud, misrepresentation or moral hazard or upon the occurrence of an event of Critical Illness Insurance.

■ **What is the policy period?**

1 Year / 2 Year / 3 Year

■ **Discount under the policy:**

- Long Term Policy Discount:
- a. 4% discount is applicable if policy is opted for 2 years
 - b. 8% discount is applicable if policy is opted for 3 years

*Note:

This will not apply to policies where premium is paid in installments.

■ **What is the premium paying term?**

Policy can be paid on installment basis-Annual, Half Yearly, Quarterly or Monthly

■ **What are the Sum Insured options available?**

- Sum Insured options of ₹100000/- to ₹5000000/- for age group 6 years to 60 years
- Sum Insured options of ₹100000/- to ₹500000/- for age group 61 years to 65 years

■ **What are the advantages of Critical Illness Insurance cover?**

1. The benefit amount is payable once the disease is diagnosed meeting specific criteria and the insured survives 30 days after the diagnosis.
2. The insured member can utilize this amount for treatment of the disease, lifestyle changes, donor expenses or a planned treatment outside India etc.
3. Hassle free In House claim process
4. Premium paid is exempt under section 80-D of Income Tax Act.
5. Competitive premium rates.

■ **What are the Pre policy Medical examination Criteria?**

- Pre-policy Medical examination would be advised based on the age, Sum insured opted and the adverse health declaration on the proposal form (if any).
- The pre-policy check up would be arranged at our empanelled diagnostic centres.
- The validity of the test reports would be 30 days from date of medical examination.
- If pre-policy check up is conducted in our paneled diagnostic centre, 100% of the standard medical tests charges would be reimbursed, subject to acceptance of proposal and policy issuance

■ **Loading due to adverse Health Conditions?**

- Loading is applicable for the proposals with adverse health conditions, or positive test report findings.
- Minimum 10% to maximum 150% loading on the standard premium rates would be applicable based on declarations on the proposal form and the health status of the proposed insured person.
- The loading is applicable from Commencement Date of the Policy including subsequent renewal with Us
- We will inform You about the applicable risk loading through a counter offer letter.
- You need to revert to Us with consent and premium within 15 days of the issuance of such counter offer letter.

■ **What are the exclusions under the policy?**

I. **Waiting Period**

1. Any Critical Illness diagnosed within the first 90 days of the date of commencement of the Policy is excluded. This exclusion shall not apply to an Insured for whom coverage has been renewed by the Named Insured, without a break, for subsequent years.

II. **General Exclusion**

1. Any Critical Illness for which care, treatment, or advice was recommended by or received from a Physician, or which first manifested itself or was contracted before the start of the Policy Period, or for which a claim has or could have been made under any earlier policy.
2. Any sexually transmitted diseases or any condition directly or indirectly 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. Treatment arising from or traceable to pregnancy, childbirth postpartum complications including but not limited to caesarian section, birth defects and congenital anomalies.
4. Occupational diseases.

5. 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 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.
6. Naval or military operations of the armed forces or airforce and participation in operations requiring the use of arms or which are ordered by military authorities for combating terrorists, rebels and the like.
7. Any natural peril (including but not limited to storm, tempest, avalanche, earthquake, volcanic eruptions, hurricane, or any other kind of natural hazard).
8. Radioactive contamination.
9. Consequential losses of any kind, be they by way of loss of profit, loss of opportunity, loss of gain, business interruption, market loss or otherwise, or any claims arising out of loss of a pure financial nature such as loss of goodwill or any legal liability of any kind whatsoever.
10. Intentional self-injury and/or the use or misuse of intoxicating drugs and/or alcohol.

■ **When can I enhance my Sum Insured under this policy?**

The Insured member can apply for enhancement of Sum Insured at the time of renewal by submitting a fresh proposal form to the company.

■ **Free Look Period**

- You have a period of 30 days from the date of receipt of the first policy document to review the terms and conditions of this Policy. If You have any objections to any of the terms and conditions, You have the option of cancelling the Policy stating the reasons for cancellation. If you have not made any claim during the Free look period, you shall be entitled to refund of premium subject to,
 - a deduction of the expenses incurred by Us on Your medical examination, stamp duty charges, if the risk has not commenced,
 - a deduction of the stamp duty charges, medical examination charges & proportionate risk premium for period on cover, If the risk has commenced
 - a deduction of such proportionate risk premium commensurating with the risk covered during such period ,where only a part of risk has commenced

Free Look Period will not be applicable for renewal Policies.

■ **Condition for renewal of the contract**

- a. Under normal circumstances, lifetime renewal benefit is available under the policy except on the grounds of fraud, misrepresentation or moral hazard or Upon the occurrence of an event of Critical Illness
- b. Upon the occurrence of an event of Critical Illness and (subject to the terms, conditions and exclusions of this Policy) without prejudice to the Company's obligation to make payment, this Policy shall immediately cease to exist with reference to that Insured
- c. For renewals of age 61 years & above the maximum Sum Insured would be ₹5,00,000/- or expiring Sum Insured which ever is lower)
- d. In case of Our own renewal a grace period of 30 days is permissible and the Policy will be considered as continuous for the purpose of waiting period. Any medical expenses incurred as a result of disease condition/ Accident contracted during the break period will not be admissible under the policy.
- e. For renewals received after completion of 30 days grace period, a fresh application of health insurance should be submitted to Us, it would be processed as per a new business proposal.
- f. Premium payable on renewal and on subsequent continuation of cover are subject to change with prior approval from IRDA

■ **Cancellation**

A. **Cancellation by the Policyholder**

The Policyholder can cancel this Policy by providing a written notice of 7 days. In such a case, the Company will refund the premium for the unexpired policy period as detailed below:

1. Cancellation of policy where full premium received at policy inception
 - Annual Policy: The premium refund for the unexpired risk period will be on a pro-rata basis, provided no claim has been made during the policy year.
 - Multi-year Policy:
 - o For any policy year where the risk date has not yet started, the premium will be refunded without any deduction.
 - o For any policy year where the risk has started, the premium will be refunded on a pro-rata basis for that policy year, provided no claim has been made during the policy year and in full for future policy years.
2. Cancellation of policy where Premium Received on Instalment Basis
 - The premium refund for the unexpired risk period will be on a pro-rata basis, provided no claim has been made during the policy year.

B. Additional Deductions

Notwithstanding the above, if (i) the risk under the Policy has already commenced, or (ii) only a part of the insurance coverage has commenced, and the option of Policy cancellation is exercised by the Policyholder, then expenses incurred by the Company on medical examination of the Policyholder will also be deducted before refunding of premium.

C. Cancellation by the Company

The Company may cancel the Policy at any time on the grounds of misrepresentation, non-disclosure of material facts, or fraud by the Policyholder/insured person, by providing 15 days' written notice. There will be no refund of premium for cancellations on these grounds.

■ Grace period:

- In case of our own renewal a grace period of 30 days is permissible and the Policy will be considered as continuous for the purpose of waiting period.
- Any medical expenses incurred as a result of disease condition/ Accident contracted during the break period will not be admissible under the policy.

■ Portability Conditions

The insured person will have the option to port the policy to other insurers by applying to such insurer to port the entire policy along with all the members of the family, if any, at least 45 days before, but not earlier than 60 days from the policy renewal date as per IRDAI guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance policy with an Indian General/Health insurer, the proposed insured person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on portability.

For Detailed Guidelines on portability, kindly refer the link https://www.irdai.gov.in/ADMINCMS/cms/Circulars_List.aspx?mid=3.2.3

■ Migration of Policy

The insured person will have the option to migrate the policy to other health insurance products/plans offered by the company by applying for migration of the policy atleast 30 days before the policy renewal date as per IRDAI guidelines on Migration. If such person is presently covered and has been continuously covered without any lapses under any health insurance product/plan offered by the company, the insured person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on migration.

For Detailed Guidelines on migration, kindly refer the link https://www.irdai.gov.in/ADMINCMS/cms/Circulars_List.aspx?mid=3.2.3

■ Revision/ Modification of the policy:

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

■ Withdrawal of Policy

- In the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the policy.
- Insured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period. as per IRDAI guidelines, provided the policy has been maintained without a break.

Sum Insured	Age(in years)			
	6years-25years	26-35years	36-40years	41-45years
1,00,000	200	300	550	800
2,00,000	400	600	1,100	1,600
3,00,000	600	900	1,650	2,400
4,00,000	800	1,200	2,200	3,200
5,00,000	1,000	1,500	2,750	4,000
10,00,000	2,000	3,000	5,500	8,000
20,00,000	4,000	6,000	11,000	16,000
30,00,000	6,000	9,000	16,500	24,000
40,00,000	8,000	12,000	22,000	32,000
50,00,000	10,000	15,000	27,500	40,000

Sum Insured	Age(in years)			
	46-50years	51-55years	56-60years	61-65years
1,00,000	1,200	1,750	3,000	3000
2,00,000	2,400	3,500	6,000	6000
3,00,000	3,600	5,250	9,000	9000
4,00,000	4,800	7,000	12,000	12000
5,00,000	6,000	8,750	15,000	15000
10,00,000	12,000	17,500	30,000	NA
20,00,000	24,000	35,000	60,000	NA
30,00,000	36,000	52,500	90,000	NA
40,00,000	48,000	70,000	1,20,000	NA
50,00,000	60,000	87,500	1,50,000	NA

Premiums are exclusive of GST

Section 41 of Insurance Act 1938 as amended by Insurance Laws Amendment Act, 2015 (Prohibition of Rebates)

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurers. Any person making default in complying with the provision of this section shall be liable for a penalty which may extend to 10 lakh rupees.

BAJAJ ALLIANZ GENERAL INSURANCE CO. LTD.
BAJAJ ALLIANZ HOUSE, AIRPORT ROAD, YERAWADA,
PUNE - 411006. IRDA REG NO.: 113.

FOR ANY QUERY (TOLL FREE)
1800-209-0144 / 1800-209-5858

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For more details on risk factors, Terms and Conditions, please read the sales brochure before concluding a sale.

CIN: U66010PN2000PLC015329
UIN: BAJHLIP23208V032223

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BAJAJ ALLIANZ CRITICAL ILLNESS

EXTENDED SECURITY IN CRITICAL TIMES



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