

Rural Accident Insurance Policy - Micro Insurance Product (Group)
Policy Wording

B Preamble

Royal Sundaram General Insurance Co. Limited (hereinafter called “the Company”), having received a Proposal and the premium from the Proposer and the said Proposal, Declaration signed by You and/or information given over telephone to our tele-agent by You and Annexure thereto together with any statement, report or other document leading to the issue of this Policy, which form the basis of this contract, do, by this Policy agree, subject to the terms and conditions as set out in the Schedule with all its Parts, that on proof to the satisfaction of the Company, of the compensation having become payable, as set out in Part I of the Schedule, upon the happening of an event, to pay the Sum Insured/ appropriate Benefit.

C Definitions

The terms defined below have the meanings ascribed to them wherever they appear in this Policy and, where appropriate, references to the singular include references to the plural, references to the male include the female and references to any statutory enactment include subsequent changes to the same:

C.1 Standard Definitions

C.1.1 Accident

An accident is a sudden, unforeseen and involuntary event caused by external, visible and violent means.

C.1.2 Grace Period

Grace period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of preexisting diseases. Coverage is not available for the period for which no premium is received

C.1.3 Hospital

A hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under:

- i. has qualified nursing staff under its employment round the clock;
- ii. has at least 10 in-patient beds in towns having a population of less than ten lakhs and at least 15 in-patient beds in all other places;
- iii. has qualified medical practitioner(s) in charge round the clock;
- iv. has a fully equipped operation theatre of its own where surgical procedures are carried out;
- v. maintains daily records of patients and makes these accessible to the insurance company’s authorized personnel.

C.1.4 Hospitalization

Hospitalisation means admission in a Hospital for a minimum period of 24 consecutive In patient Care hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

C.1.5 Medical expenses

Medical Expenses means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than



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would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.

C.1.6 Injury

Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.

C.1.7 ICU Charges

ICU (Intensive Care Unit) Charges means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivists charges.

C.1.8 Medically Necessary:

Medically necessary treatment is defined as any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:

- is required for the medical management of the illness or injury suffered by the insured
- must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- must have been prescribed by a medical practitioner,
- must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

C.1.9 Medical Practitioner

A Medical Practitioner means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy setup by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of licence. It excludes the treatment by a doctor who is an immediate family member i.e. self, spouse, children and parents)

C.1.10 Renewal

Renewal means the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.

C.1.11 Subrogation

Subrogation shall mean the right of the insurer to assume the rights of the insured person to recover expenses paid out under the policy that may be recovered from any other source.

C.2 Specific Definitions

C.2.1 Insured

Insured person means the persons named in the schedule and his family members as included and declared in the schedule.

C.2.2 Company/We/Our/Insurer/Us

Royal Sundaram General Insurance Co Limited.

C.2.3 Contribution

Contribution is essentially the right of an insurer to call upon other insurers, liable to the same insured, to share the cost of an indemnity claim on a ratable proportion.



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C.2.4 Hazardous or Adventurous Sports

Hazardous or Adventurous Sports means participation 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.

C.2.5 Period of Insurance & cover Inception date.

Period of Insurance means the period shown in the Schedule and cover inception date as per terms stated under the schedule.

C.2.6 Third Party Administrator (TPA)

Third Party Administrator (TPA) means a Company registered with the Authority, and engaged by an insurer, for a fee or by whatever name called and as may be mentioned in the health services agreement, for providing health services.

D. BENEFITS COVERED UNDER THE POLICY

WHEREAS the insured named in the schedule hereto has made to ROYAL SUNDARAM GENERAL INSURANCE CO LIMITED (herein after called the company), a proposal and declaration which shall be the basis of this contract and deemed to be incorporated herein

NOW THIS POLICY OF INSURANCE WITNESSETH THAT, the company hereby agrees, subject to the terms and conditions contained herein or endorsed, that if after payment of the premium the insured person shall sustain bodily injury resulting in death or other specified disablement or incur expenses on hospitalisation of the insured person occurring during the period of insurance the company will pay the benefits specified herein for the cover opted or reimburse the expenses as the case may be but in any case not exceeding the sum insured set opposite thereto respectively.

The company will pay the insured as hereinafter mentioned:

I. Death only Cover:

If at any time during the currency of this policy, the insured person shall sustain any bodily injury, resulting solely and directly from accident, caused by external, violent and visible means and if such injury shall within six calendar months of its occurrence be the sole and direct cause of the death of the insured person, then the company shall pay the nominee the capital sum insured stated in the schedule hereto.

II. Standard cover:

If at any time during the currency of this policy, the insured person shall sustain any bodily injury, resulting solely and directly from accident caused by external, violent and visible means and if such injury shall within six calendar months of its occurrence be the sole and direct cause of the death/ disablement of the insured person then the company shall pay to the insured or his nominee as the case may be as said herein after.

(A) 100% of the Sum Insured set forth under accident cover for :-

- (i) Death or
- (ii) Total and irrecoverable loss of sight of both eyes, or
- (iii) Total and irrecoverable loss of use of both hand or both feet, or
- (iv) Total and irrecoverable loss of one entire hand and one entire foot or
- (v) Such loss or sight of one eye & one entire hand/foot

(B) 50% of the sum insured set forth under accident cover for

- (i) The total and irrecoverable loss of sight of one eye or use of one limb
- (ii) The total and irrecoverable loss of use of one entire hand or one entire foot

(C) If such injury shall within six calendar months, as a direct consequence thereof, permanently totally and

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absolutely, disable the insured from engaging in any employment or occupation of any description whatsoever, then a lump sum equal to hundred percent (100%) of the capital sum insured.

III. Comprehensive Cover:

If the insured person sustains any bodily injury, resulting solely and directly from accident caused by external, violent and visible means, then the company shall pay as per clauses of (A) or (B) or (C) above to the insured or his nominee as the case may be. If such injury shall, within six calendar months of its occurrence, be the sole and direct cause of the total and irrecoverable loss of use or the actual loss of or physical separation of the following, then the percentage of the capital sum insured as indicated below shall be payable.

Percentage of Capital Sum Insured

(i) Loss of toes all	20
Great-both phalanges	5
Great-one phalanx	2
other than great, if more than	
one toe lost each	1
(ii) Loss of hearing - born ears	50
(iii) Loss of hearing one ear	15
(iv) Loss of four fingers and thumb	
of one hand	40
(v) Loss of four fingers	35
(vi) Loss of thumb-both phalanges	25
one phalanx	10
(vii) Loss of index finger - three phalanges	10
two phalanges	8
one phalanx	4
(viii) Loss of middle finger-three phalanges	6
two phalanges	4
one phalanx	2
(ix) Loss of ring finger-three phalanges	5
two phalanges	4
one phalanx	2
(x) Loss of little finger-three phalanges	4
two phalanges	3
one phalanx	2
(xi) Loss of metacarpal	
First or second (additional)	3
Third four or fifth (additional)	2
(xii) Any other permanent partial disablement as assessed by the doctor.	

HOSPITALISATION COVER

If at any time during the currency of this policy the insured, having opted for the additional hospitalisation cover and paid the premium, shall sustain any bodily injury, resulting solely and directly from accident caused by external violent and visible means and if such injury shall be the sole and direct cause of the admission of the insured person at any nursing home or hospital in India, then the company shall reimburse the hospitalisation expenses, reasonably and necessarily incurred in respect thereof but not exceeding the limit stated under the policy schedule for this cover in any one period of insurance.

The company will reimburse the hospital expenses provided only when such accidental injury as defined earlier shall require the insured, upon the advice of a qualified medical practitioner, to incur medical/ Surgical expenses at any nursing home / hospital in India.



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Provided always that

1. This Insurance shall not apply in so far as it applies to a female for expenses incurred in respect of any condition arising from or traceable to any disease of the organs of generation, malignant disease of mammary gland, pregnancy, childbirth, abortion or miscarriage or any complications and/or sequels arising from the foregoing, unless otherwise provided hereafter.
2. The Company shall not be liable to make any payment under this Policy in respect of
 - (a) disease, injury, death or disablement directly or indirectly due to war, invasion, act of foreign enemy, hostilities or war like operation (whether war be declared or not) or civil commotion or rebellion, military, naval or air service or breach of law, hunting, steeple chasing, revolution, insurrection, mutiny, engaging in aviation other than a passenger (fare paying or otherwise) in any licensed standard type of aircraft.
 - (b) circumcision or strictures or vaccination or inoculation or change of life or beauty treatment of any description or dental or eye treatment or intentional self injury or insanity of dissipation or nervous breakdown (which expression shall cover also general disability "run down" conditions and general "overhaul") or venereal disease or intemperance or the use of intoxicating drugs or liquors or any diseased, injury, death or disablement directly or indirectly due to any one or more of them.
 - (c) subject otherwise to the terms, Exceptions, Conditions and limitations of this Policy.

E. EXCLUSIONS:

We shall not be liable under this Policy for any claim in connection with or in respect of the following:

E.1 Standard Exclusions

The company shall not be liable under this policy for:-

- E.1.1 Payment of compensation in respect of death, injury or disablement (a) from intentional self-injury, suicide or attempted suicide (b) whilst under the influence of intoxicating liquor or drugs (c) 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 or otherwise) (d) Whilst racing on wheels, hunting, Big game shooting, Mountaineering or whilst engaged in Winter sports skiing & Ice Hockey. (e) Directly or indirectly caused by disease or insanity (f) Arising or resulting from the insured committing any breach of the law with criminal intent.
- E.1.2 Payment of compensation in respect of death injury or disablement due to or arising out of or directly or indirectly connected with or traceable to: 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, Restrains and detainment.
- E.1.3 Payment of compensation in respect of death or bodily injury or any disease or illness:
 - (a) Directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radio activity from any nuclear fuel or from any 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 weapons material.
- E.1.4 Pregnancy exclusion clause. The insurance under this policy shall not extend to cover death or disablement or Hospitalisation expenses resulting directly or indirectly from pregnancy or in consequence thereof.

E.2 Specific Exclusions

E.2.1. Specific exclusions for accidental cover:

The company shall not be liable under this policy for: -

- I. Compensation under more than one of the foregoing sub clauses in respect of the same period
- II. Any other payment after a claim under one of the sub clauses (A) or (B) or (C) has been admitted and



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become payable.

- III. 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.

E.2.2 Specific exclusions for hospitalisation:

The company shall not be liable to make any payment under this policy in respect of any expenses incurred in connection with or in respect of:

- (i) Treatment not connected to the accidental injury, e.g., any medical expenses incurred on general check-up and or to investigate / treat for existing disability.
- (ii) Treatment of illness/disease or any disorders other than arising out of accidental injury.
- (iii) Hospitalisation expenses beyond the stipulated limit stated under the policy schedule for one policy period.
- (iv) Abortion or miscarriage or any complication and or sequel there from unless arising out of accident.
- (v) Dental treatment or surgery of any kind unless necessitated by an accident.
- (vi) Any treatment other than Allopathy

E.2.3 List of optional items as given in the Annexure-IV attached to this Policy

F. General Terms and Clauses

1. Notice: Every notice and communication to the Company required by this Policy shall be in writing to the office of Company through which this insurance is effected.
2. Free Look in: At the inception of the policy you will be allowed a period of 15 days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable. If you have not made any claim during the free look period, you will be entitled to the following, provided no claim has been settled or lodged for the period the policy has been in force:
 - a) A refund of the premium paid less stamp duty charges or;
 - b) where the risk has already commenced and the option of return of the policy is exercised, a deduction towards the proportionate risk premium for period on cover or;
 - c) Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.
3. Upon the happening of any event which may give rise to a claim under this policy, written notice with full particulars must be given to the company immediately. In case of death, written notice also of the death must, unless reasonable cause is shown, be given before interment, cremation and in any case within one calendar month after the death. In the event of loss of sight or amputation of limbs, written notice thereof must also be given within one calendar month after such loss of sight or amputation.
For hospitalisation expenses, claim must be filed within 85 days after discharge from the hospital or Nursing Home and the insured person shall obtain and furnish the company all original bills, receipts and other documents upon which a claim is based.

The documents should be sent to:

Health Claims Department

M/s.Royal Sundaram General Insurance Co.Limited.,

Corporate Office: "Vishranthi Melaram Towers",

No.2/319, Rajiv Gandhi Salai (OMR),

Karapakkam, Chennai 600 097

Ph: 91-44- 71177117 Fax: 91-44- 7113 7114

4. Proof satisfactory to the company shall be furnished on all mater upon which a claim is based. Any medical or other representative of the company shall be allowed to examine the insured on the occurrence of any alleged injury or



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disablement when and so often as the same may reasonably be required on behalf the company and in the event of death to make post-mortem examination of the body of the insured. Such evidence as the company may from time to time require shall be furnished and the post - mortem examination report, be furnished within the space of fourteen days after demand in writing. In the event of claim in respect of loss of sight, the insured shall undergo at the insured's expenses such operation or treatment as the company may reasonably deem desirable.

Provided that in the case of claim by death or permanent total disablement all sums payable hereunder shall be payable only on the delivery of this policy cancelled and discharged. In the case of permanent partial disablement all sums payable hereunder shall be payable on the delivery of this policy for reduction of the sum insured by the amount admissible under the claim. Benefits payable under this policy will be paid within 85 days of the receipt of last necessary document. At the time of claim settlement, Company may insist on KYC documents of the Proposer as per the relevant AML guidelines in force

5. Where the insured has opted for specified cover and effected payment of premium for that portion only then the company is liable to pay as per the provision defined under the particular cover only and not anything beyond.
6. The Company shall be liable to pay any interest at 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed, for sums paid or payable under this Policy, upon acceptance of an offer of settlement by the insured but there is delay in payment beyond 7 days the date of acceptance.
7. Persons whilst engaged in Hazardous or Adventure sports.
8. List of optional items as given in the Annexure-IV attached to this Policy in respect of Medical Expenses extension cover.
9. The company shall not be liable to make any payment under this policy in respect of any claim, if such claim be in any manner fraudulent or supported by any fraudulent statement or device, whether by the insured or by any person on behalf of the insured.
10. (a) The insured shall give immediate notice to the company of any change in his business or occupation.
(b) The insured shall on tendering any premium for the renewal of the policy give notice in writing to the company of any disease, physical defect or infirmity with which the insured person has become affected since the payment
11. The Company, on grounds of mis-representation, fraud, non-disclosure of material facts or non-cooperation of the insured, may terminate this Policy by giving 14 days' notice in writing, provided that the Company shall in that case return to the Insured the then last paid premium less a pro-rata part thereof for the portion of the current insurance period which shall have expired. Such notice shall be deemed sufficiently given if posted by Registered post acknowledgement due and addressed to the Insured at the address last registered in the Company's books and shall be deemed to have been received by the Insured at the time when the same would be delivered.

In the event of cancellation on the grounds of noncooperation, the company shall be liable to repay on demand a rate able proportion of the premium for the unexpired term from the date of cancellation.

OR the policy may be cancelled at any time by the Insured by giving 15 days' notice in writing under a Registered Post Acknowledgement Due.

PROVIDED no claim has arisen under the within mentioned Policy prior to the receipt of such notice by the Company, the Insured would be entitled to the return of premium less premium at Company's short period rates for the period the policy has been in force.



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SHORT PERIOD RATES:

Period (not exceeding)	Proportion of premium
1 month(85 days)	25% of annual rate
3 months	50% of annual rate
6 months	75% of annual rate
Exceeding 6 months	Full annual premium

12. Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post, or E-mail to the policy issuing office at the address specified in the Schedule or to the Company at Royal Sundaram General Insurance Co Limited "Vishranthi Melaram Towers", No.2/319, Rajiv Gandhi Salai (OMR), Karapakkam, Chennai 600 097 Ph: 91-44- 71177117 Fax: 91-44- 7113 7114 Notice and instructions will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery, post or e-mail.
13. Renewal shall not be denied other than on grounds of moral hazard, misrepresentation and fraud. In respect of any applications for renewal received by Us, the Policy may be renewed and in such event the renewal premium shall be paid to the Company on or before the date of expiry of the Policy and in any case not later than 85 days from the date of expiry of the current policy. However, any hospitalization happening during the grace period is not covered & company is not liable for any expenses incurred on that hospitalization. If policy is renewed within 85 days from the due date of renewal, policy cover will be considered continuous in terms of credit gained by the insured person(S) for pre-existing conditions and time bound exclusions.

The Company shall not be bound to give notice that such renewal premium is due. A policy that is sought to be renewed after the grace period of 85 days will be underwritten as a fresh Policy. Insurer will be free to offer any of the similar products available with them.

The product / plan may be withdrawn at any time, by giving a notice of 3 months to the Proposer by Courier / Registered Post / Acknowledgement due post at the address recorded / updated in the policy. When the policy is withdrawn, the product / plan shall not be available for renewal at the due date. However, the cover under such policy shall continue till the expiry date shown in the schedule of the policy. In the event of withdrawal of a product, Company shall offer similar alternative product from its currently marketed product suites.

14. If any dispute or difference shall arise as to the quantum to be paid under the policy (liability being otherwise admitted) such difference shall be independently of all other questions, be referred to the decision of a sole arbitrator to be appointed in writing by the parties to or if they cannot agree upon a single arbitrator within 85 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties of the dispute or difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable as herein before provided, if the company has disputed or not accepted liability under or in respect of this policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.



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It is also hereby further expressly agreed and declared that if the company shall disclaim liability to the insured for any claim hereunder and such claim shall not within twelve calendar months from the date of such disclaimer have been made the subject matter of a suit in a court of law or pending reference before ombudsman, then the claim shall for all purpose be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

15. Due observance and fulfillment of the terms and conditions of this policy (which conditions and all endorsements hereon 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.

Grievances

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

- i. Website: <https://www.royalsundaram.in/customer-request>
- ii. Toll free: 1860 258 0000, 1860 425 0000
- iii. E-mail: customer.services@royalsundaram.in
- iv. Sr. Citizen can email us at : seniorcitizengrievances@royalsundaram.in
- v. Fax : 91-44-7113 7114
- vi. Courier:

Grievance Redressal Unit
 Royal Sundaram General Insurance Co. Limited
 Vishranthi Melaram Towers,
 No.2/319, Rajiv Gandhi Salai (OMR)
 Karapakkam, Chennai – 600097

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance. If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at

Mr. T M Shyamsunder

Grievance Redressal Officer

Royal Sundaram General Insurance Co. Limited
 Vishranthi Melaram Towers,
 No.2/319, Rajiv Gandhi Salai (OMR)
 Karapakkam, Chennai – 600097

For updated details of grievance officer, kindly refer the link <http://www.royalsundaram.in>

If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017.

Insurance Ombudsman addresses given in Annexure A.

Grievance may also be lodged at IRDAI Integrated Grievance Management System - <https://ligms.irda.gov.in>

The contact details of the Insurance Ombudsman offices are as below-

Annexure - A

Office Details	Jurisdiction of Office Union Territory, District	Date Of Taking Charge
AHMEDABAD - Shri Kuldeep Singh Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@ecoi.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.	03/10/2019

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BENGALURU - Smt. Neerja Shah Office of the Insurance Ombudsman, Jeevan Soudha Building,PID No. 57-27-N- 19 Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@ecoi.co.in	Karnataka.	23/04/2018
BHOPAL - Shri Guru Saran Shrivastava Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@ecoi.co.in	Madhya Pradesh Chattisgarh.	24/05/2018
BHUBANESHWAR - Shri Suresh Chandra Panda Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in	Orissa.	11/09/2019
CHANDIGARH - Dr. Dinesh Kumar Verma Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@ecoi.co.in	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh.	16/04/2018
CHENNAI - Shri M. Vasantha Krishna Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@ecoi.co.in	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).	03/05/2018
DELHI - Shri Sudhir Krishna Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@ecoi.co.in	Delhi.	12/09/2019



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GUWAHATI - Shri Kiriti .B. Saha Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@ecoi.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.	02/05/2018
HYDERABAD - Shri I. Suresh Babu Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 67504123 / 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@ecoi.co.in	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.	11/06/2018
JAIPUR - Smt. Sandhya Baliga Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: Bimalokpal.jaipur@ecoi.co.in	Rajasthan.	13/04/2018
ERNAKULAM - Ms. Poonam Bodra Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@ecoi.co.in	Kerala, Lakshadweep, Mahe-a part of Pondicherry.	07/11/2018
KOLKATA - Shri P. K. Rath Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@ecoi.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.	30/09/2019
LUCKNOW -Shri Justice Anil Kumar Srivastava Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@ecoi.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.	11/09/2019

**Rural Accident Insurance Policy - Micro Insurance Product (Group)**

MUMBAI - Shri Milind A. Kharat Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@ecoi.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.	04/05/2018
NOIDA - Shri Chandra Shekhar Prasad Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddha Nagar, U.P-201301. Tel.: 0120-2514250 / 2514252 / 2514253 Email: bimalokpal.noida@ecoi.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanoj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.	17/09/2019
PATNA - Shri N. K. Singh Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@ecoi.co.in	Bihar, Jharkhand.	09/10/2019
PUNE - Shri/Smt Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune - 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@ecoi.co.in		

OFFICE OF THE GOVERNING BODY OF INSURANCE COUNCIL**EXECUTIVE COUNCIL OF INSURERS,**

3rd Floor, Jeevan Seva Annexe,

S. V. Road, Santacruz (W), Mumbai - 400 054.

Tel.: 022 - 26106889 / 671 / 980

Fax: 022 - 26106949 Email: inscoun@ecoi.co.in

Shri M.M.L. Verma, Secretary General

Smt Moushumi Mukherji, Secretary

In respect of hospitalization, the costs that are to be subsumed into the Room Charges are provided in Annexure-B attached to this Policy; the costs that are to be subsumed into the specific procedure charges are provided in Annexure-C attached to this Policy; the costs that are to be subsumed into the costs of treatments are provided in Annexure-D attached to this Policy.

**Rural Accident Insurance Policy - Micro Insurance Product (Group)****Annexure – B**

Costs that are to be subsumed into the Room Rent Charges	
Sl. No.	Item
1	BABY CHARGES (UNLESS SPECIFIED/INDICATED)
2	HAND WASH
3	SHOE COVER
4	CAPS
5	CRADLE CHARGES
6	COMB
7	EAU-DE-COLOGNE / ROOM FRESHNERS
8	FOOT COVER
9	GOWN
10	SLIPPERS
11	TISSUE PAPER
12	TOOTH PASTE
13	TOOTH BRUSH
14	BED PAN
15	FACE MASK
16	FLEXI MASK
17	HAND HOLDER
18	SPUTUM CUP
19	DISINFECTANT LOTIONS
20	LUXURY TAX
21	HVAC
22	HOUSE KEEPING CHARGES
23	AIR CONDITIONER CHARGES
24	IM IV INJECTION CHARGES
25	CLEAN SHEET
26	BLANKET/WARMER BLANKET
27	ADMISSION KIT
28	DIABETIC CHART CHARGES
29	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES
30	DISCHARGE PROCEDURE CHARGES
31	DAILY CHART CHARGES
32	ENTRANCE PASS / VISITORS PASS CHARGES
33	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE
34	FILE OPENING CHARGES
35	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)
36	PATIENT IDENTIFICATION BAND / NAME TAG
37	PULSEOXYMETER CHARGES



Rural Accident Insurance Policy - Micro Insurance Product (Group)

Annexure – C

Costs that are to be subsumed into Specific Procedure Charges	
Sl. No.	Item
1	HAIR REMOVAL CREAM
2	DISPOSABLES RAZORS CHARGES (for site preparations)
3	EYE PAD
4	EYE SHEILD
5	CAMERA COVER
6	DVD, CD CHARGES
7	GAUSE SOFT
8	GAUZE
9	WARD AND THEATRE BOOKING CHARGES
10	ARTHROSCOPY AND ENDOSCOPY INSTRUMENTS
11	MICROSCOPE COVER
12	SURGICAL BLADES, HARMONICSCALPEL,SHAVER
13	SURGICAL DRILL
14	EYE KIT
15	EYE DRAPE
16	X-RAY FILM
17	BOYLES APPARATUS CHARGES
18	COTTON
19	COTTON BANDAGE
20	SURGICAL TAPE
21	APRON
22	TORNIQUET
23	ORTHOBUNDLE, GYNAEC BUNDLE

Annexure - D

Costs that are to be subsumed into Costs of treatment	
Sl. No.	Item
1	ADMISSION/REGISTRATION CHARGES
2	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE
3	URINE CONTAINER
4	BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES
5	BIPAP MACHINE
6	CPAP/ CAPD EQUIPMENTS
7	INFUSION PUMP– COST
8	HYDROGEN PEROXIDE\SPIRIT\ DISINFECTANTS ETC
9	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES- DIET CHARGES
10	HIV KIT
11	ANTISEPTIC MOUTHWASH
12	LOZENGES
13	MOUTH PAINT
14	VACCINATION CHARGES
15	ALCOHOL SWABES
16	SCRUB SOLUTION/STERILLIUM
17	Glucometer& Strips
18	URINE BAG

Rural Accident Insurance Policy - Micro Insurance Product (Group)

Annexure-IV – List of Optional items	
Sl No.	Item
1	BABY FOOD
2	BABY UTILITIES CHARGES
3	BEAUTY SERVICES
4	BELTS/ BRACES
5	BUDS
6	COLD PACK/HOT PACK
7	CARRY BAGS
8	EMAIL / INTERNET CHARGES
9	FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL)
10	LEGGINGS
11	LAUNDRY CHARGES
12	MINERAL WATER
13	SANITARY PAD
14	TELEPHONE CHARGES
15	GUEST SERVICES
16	CREPE BANDAGE
17	DIAPER OF ANY TYPE
18	EYELET COLLAR
19	SLINGS
20	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES
21	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED
22	Television Charges
23	SURCHARGES
24	ATTENDANT CHARGES
25	EXTRA DIET OF PATIENT (OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)
26	BIRTH CERTIFICATE
27	CERTIFICATE CHARGES
28	COURIER CHARGES
29	CONVEYANCE CHARGES
30	MEDICAL CERTIFICATE
31	MEDICAL RECORDS
32	PHOTOCOPIES CHARGES
33	MORTUARY CHARGES
34	WALKING AIDS CHARGES
35	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)
36	SPACER
37	SPIROMETRE
38	NEBULIZER KIT

**Rural Accident Insurance Policy - Micro Insurance Product (Group)**

39	STEAM INHALER
40	ARMSLING
41	THERMOMETER
42	CERVICAL COLLAR
43	SPLINT
44	DIABETIC FOOT WEAR
45	KNEE BRACES (LONG/ SHORT/ HINGED)
46	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER
47	LUMBO SACRAL BELT
48	NIMBUS BED OR WATER OR AIR BED CHARGES
49	AMBULANCE COLLAR
50	AMBULANCE EQUIPMENT
51	ABDOMINAL BINDER
52	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES
53	SUGAR FREE Tablets
54	CREAMS POWDERS LOTIONS (Toiletries are not payable, only prescribed medical pharmaceuticals payable)
55	ECG ELECTRODES
56	GLOVES
57	NEBULISATION KIT
58	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]
59	KIDNEY TRAY
60	MASK
61	OUNCE GLASS
62	OXYGEN MASK
63	PELVIC TRACTION BELT
64	PAN CAN
65	TROLLY COVER
66	UROMETER, URINE JUG
67	AMBULANCE
68	VASOFIX SAFETY