CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

This document provides key information about your policy. You are also advised to go through your policy document.

S.No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product/Policy	HDFC ERGO Travel India	NA
2	Policy number	Policy number shall be as on Policy Schedule issued post policy issuance	NA
3	Type of Insurance Product/ Policy	Both Indemnity and Benefit	NA
4	Sum Insured	• Individual Sum Insured -Where each member has a separate sum insured under the policy), or Sum Insured shall be as opted and the same will be mentioned in your Policy Schedule	NA
5	Policy Coverage (What the policy covers?)	**Base Covers:** Coverages in force for the Insured Persons shall be as per the plan opted. **Emergency Medical Expenses-** The Company shall indemnify the Medical Expenses incurred during the period of insurance for an Emergency Care Hospitalization. **Personal Accident-** Lump Sum payment in the event of an Accidental Death and/or Permanent Disablement within twelve months from the date of occurrence of an Injury solely and directly due to an Accident occurring during period of insurance. **Personal Liability-** Reimbursement for the Insured Person against actual legal liability in event of Damages for Accidental Injury or property damage to third parties period of	 2.1.A 2.2 2.3 2.4

		insurance. **Bounced Booking (Accommodation)-** Reimbursement for the actual additional expenses / cost incurred for alternative accommodation in the event of the confirmed accommodation booking at the place of stay during period of insurance.	2.5
		Emergency Hotel Accommodation for Immediate Family Members-Reimbursement for hotel accommodation charges necessarily incurred by an Immediate Family Member in the place of Hospitalization in event of Illness or Injury suffered by the Insured Person during period of insurance solely which directly requires the Hospitalization.	2.6
		Home Burglary (Except Cash and Jewelry)- Reimbursement for claims made in event of loss of or damage to contents of the Insured Person's place of residence in India caused by actual or attempted Burglary and/or Robbery during the Period of Insurance.	2.7
		Hotel Cancellation- Reimbursement in event for any cancellation charges related to the accommodation booked in advance in a hotel or guest house for solely and directly due specified reasons.	2.8
		Compassionate Visit-Reimbursement for the actual expenses necessarily incurred for a return (two-way) direct route economy class airfare within India for an Immediate Family Member to the place of Hospitalization of the Insured Person	2.9
		Theft of Personal Effects - Reimbursement for loss incurred due to theft of his/her laptop, tablet, hand-baggage during period of insurance.	2.10
		Identity Document Theft- Reimbursement for loses his/her original identity proof document (Driving license, PAN card, Aadhaar or Voter ID card) on account of theft occurring during period of insurance.	2.1.B.1

		Optional Covers Under 2.1.A: **OPD Expenses for Illness or Injury** -Indemnify for expenses towards OPD Medical expensed event of illness and injury to Insured Person during the period of insurance **Emergency Medical Evacuation-** The Company shall indemnify the reasonable costs necessarily incurred for the Medical Evacuation of the Insured Person period of insurance. in an Emergency through an Ambulance or any other transportation and evacuation services **Repatriation of Mortal Remains-** Reimbursement for the costs of transporting the mortal remains of the deceased Insured Person back to the City of Residence	2.1.B.2 2.1.B.3
6	Exclusions (what the policy does not cover)	**3.1. Standard Exclusions** The company shall not be liable to make any payment in respect of the following: a. Any claim relating to events occurring before the commencement of the cover or otherwise outside of the period of insurance, unless stated otherwise in a particular benefit. b. Any claim relating to expenses incurred for the treatment of pre-existing disease / conditions / illness / injury, except for cases where proximate cause of loss is an accident. c. Treatment if that be the sole reason or one of the reasons for the insured/insured person's travel and temporary stay. d. Any claim if the insured/insured person • Is traveling against the advice of a physician; • Is receiving, or is on a waiting list to receive, specified medical treatment	3.1.a 3.1.b 3.1.c 3.1.d

		declared in the Medical Practitioner's report or certificate; • Has received terminal prognosis for a medical condition. • Is taking part in a naval, military or air force operation • Is traveling to any country for which his/her visa is not allotted.	
		e. Any claim arising out of an illness or injury that the insured/insured person has caused intentionally or by committing a crime or as a result of drunkenness or addiction.	3.1.e
		f. Any claim arising out of sporting activities if that involves training or participation in competitions of professional or semi-professional sports.	3.1.f
		g. Expenses related to any treatment necessitated due to participation as a professional in Hazardous or Adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.	3.1.g
		h. Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider which have been specifically excluded by the Company and as disclosed on our website are not admissible. However, in case of life-threatening situations or following an accident, expenses up to the stage of stabilization are payable.Any Illness or Injury directly or indirectly resulting or arising from or occurring during the commission of any breach of any law by the Insured Person with any criminal intent.	3.1.h 3.1.i
		i. Treatment taken from anyone who is not a Medical Practitioner or from a	

			Medical Practitioner who is practicing outside the discipline for which he is licensed or any kind of self-medication.	
			j. Charges incurred in connection with cost of spectacles and contact lenses, hearing aids, routine eye and ear examinations, laser surgery for correction of refractory errors, dentures, artificial teeth and all other similar external appliances and or devices whether for diagnosis or treatment.	3.1.j
			k. Unproven / Experimental Treatment which are not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any Illness for which confinement is required at a Hospital. Any Illness or treatment which is a result or a consequence of undergoing such experimental or unproven treatment.	3.1.k 3.1.l
			l. Weight management services and treatment, vitamins and tonics related to weight control programmers, services and supplies including treatment of obesity (including morbid obesity).	3.1.m
			m. Any treatment related to sleep disorder or sleep apnea syndrome, general debility convalescence, cure, rest cure, health hydros, nature cure clinics, sanatorium treatment, rehabilitation measures, private duty nursing, respite care, long-term nursing care, custodial care or any treatment in an establishment that is not a Hospital.	3.1.n 3.1.o
			n. Aesthetic treatment, cosmetic surgery and plastic surgery or related treatment of any description, including any complication arising from these treatments, other than as may be necessitated due to an Injury.	3.1.p 3.1.q
			o. Any treatment or surgery for change of	

		sex or gender reassignments including any complication arising from these treatments. p. Circumcision unless necessary for treatment of an Illness or as may be necessitated due to an Accident. q. All expenses related to donor screening, treatment, including surgery to remove organs from the donor, in case of transplant surgery. r. Charges incurred at a Hospital 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 Illness or Injury, for which in-patient care or a day care procedure is required. s. War or any act of war, invasion, act of foreign enemy, (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts t. Stem cell implantation, harvesting, storage or any kind of treatment using stem cells. u. Nuclear, chemical or biological attack or weapons, contributed to, caused by, resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense. For the purpose of this exclusion: • Nuclear attack or weapons means the use of any nuclear weapon or device or waste or combustion of nuclear fuel or the emission, discharge, dispersal, release or escape of fissile or fusion material emitting a level of radioactivity capable of causing any Illness,	3.1.r 3.1.s 3.1.t

		incapacitating disablement or death. • Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any Illness, incapacitating disablement or death. • Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) micro-organisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any Illness, incapacitating disablement or death. In addition to the foregoing, any loss, claim or expense of whatsoever nature directly or indirectly arising out of, contributed to, caused by, resulting from, or in connection with any action taken in controlling, preventing, suppressing, minimizing or in any way relating to the above is also excluded. v. Any act of terrorism which means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organization(s) or governments(s), committed for political, religious, ideological, or ethnic purposes or reasons including the intention to influence any government and / or to put the public, or any section of the public, in fear, w. Any claim arising from damage to any property or any loss or expense whatsoever resulting or arising from or any consequential loss, directly or indirectly, caused by or contributed to or	3.1.u 3.1.v 3.1.w 3.1.x 3.1.y

		arising from: a. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or b. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof. x. Impairment of an Insured Person's intellectual faculties by abuse of stimulants or depressants. y. Any treatment or part of a treatment that is not of a reasonable charge and not Medically Necessary. Drugs or treatments which are not supported by a prescription. z. Any procedure or diagnostic test for gender detection of foetus/unborn child. **Specific Exclusions** **<u>Exclusions specific to Section 2.1- 'Emergency Medical Expenses & its Optional Covers'</u>** The Company shall not be liable to make any payment under this benefit, unless expressly stated to the contrary in the Policy Schedule/Certificate of Insurance: a. Medical treatment taken if that is the sole reason or one of the reasons for the trip. b. Any treatment or Medical Expenses incurred for any Illness which is a Pre-Existing Disease, except for cases where proximate cause of loss is an accident. c. Radiotherapy and Chemotherapy charges. d. Rest or recuperation at a spa or health resort, sanatorium, convalescence	3.1.z 2.1

		home or similar institution. e. Routine physical tests and / or examination of any kind not consistent with or incidental to the diagnosis and treatment of any Illness or Injury either in a Hospital or as an outpatient. f. Physiotherapy expenses or any services provided by chiropractitioner. g. Screening for cancer or mammography. h. Expenses incurred on items as mentioned in 'Annexure B- List of Items for which Coverage is not applicable (Non-Medical Expenses)'. i. Any treatment or surgery for any dental Illness or Injury, unless it requires hospitalization for more than 24 hours. j. Artificial life maintenance, including life support machine used to sustain a person, who has been declared brain dead, or is demonstrating any of the following conditions: • Deep coma and unresponsiveness to all forms of stimulation; or • Absent pupillary light reaction; or • Absent oculovestibular and corneal reflexes; or • Complete apnea. k. Expenses related to sterility and infertility. This includes: • Any type of contraception, sterilization • Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI • Gestational Surrogacy • Reversal of sterilization l. Any treatment arising from or traceable to pregnancy (including voluntary termination), miscarriage (unless due to an Accident), childbirth, maternity (including caesarean section), abortion or complications of any of these. This	

		exclusion shall not apply to ectopic pregnancy, which is proved by diagnostic means and certification by a gynaecologist that it is life threatening. m. Any treatment arising from or traceable to any fertility, infertility, sub fertility or assisted conception procedure or sterilization or procedure, birth control procedures, hormone replacement therapy, contraceptive supplies or services including complications arising due to supplying services or Assisted Reproductive Technology. n. Treatment of all external Congenital Anomalies or Illness or defects or anomalies or treatment relating to external birth defects. o. All preventive care, vaccination, including inoculation and immunizations (except in case of post-bite treatment), vitamins and tonics. p. Any Planned treatments. q. Pre-hospitalization Medical Expenses and/or Post-hospitalization Medical Expenses. r. Deductible - Claims/claim amount falling within Deductible limit, as specified in the Policy Schedule. s. Any Insured Person committing or attempting to commit intentional self-injury or attempted suicide or suicide. t. Any Insured Person's participation or involvement in naval, military or air force operation. u. Investigative treatment for sleep-apnoea, general debility or exhaustion ("run-down condition"). v. Investigative treatments for analysis and adjustments of spinal sub luxation, diagnosis and treatment by manipulation of the skeletal structure or for muscle stimulation by any means	

		except treatment of fractures (excluding hairline fractures) and dislocations of the mandible and extremities. w. Non-Medical expenses such as food charges (other than patient's diet provided by hospital), laundry charges, attendant charges, ambulance collar, ambulance equipment, baby food, baby utility charges and other such items. Full list of Non-Medical Expenses is attached as ANNEXURE B and also available at www.hdfcergo.com. x. Any treatment and associated expenses for alopecia, baldness including corticosteroids and topical immunotherapy wigs, toupees, hair pieces, any non-surgical hair replacement methods, optometric therapy. y. Expenses for Artificial limbs and/or device used for diagnosis or treatment (except when used intra-operatively), prosthesis, corrective devices external durable medical equipment of any kind, like wheelchairs, walker, belts, collar, caps, splints, braces, stockings of any kind, diabetic footwear, glucometer or thermometer, crutches, ambulatory devices, instruments used in treatment of sleep apnea syndrome (C.P.A.P) or continuous ambulatory peritoneal dialysis (C.A.P.D.) and oxygen concentrator for asthmatic condition, cost of cochlear implant(s) unless necessitated by an Accident. z. Any permanent exclusion applied on any medical or physical condition or treatment of an Insured Person as specifically mentioned in the Policy Schedule and as specifically accepted by Policyholder/Insured Person. Such exclusions shall be applied for the	2.3

		condition(s) or treatment(s) that otherwise would have resulted in rejection of insurance coverage under this Policy to such Insured Person as per Company's Underwriting Policy. **<u>Exclusions specific to Section 2.3- 'Personal Liability'</u>** Any Claim in respect of any Insured Person for, arising out of or directly or indirectly due to any of the following shall not be admissible under this Benefit unless expressly stated to the contrary elsewhere in the Policy terms and conditions: a. Liability of the Insured Person in relation to any professional services rendered by him; b. Liability for Injury or damage of any kind whilst the Insured Person is engaged in his business activities or in course of business activities; c. Liability assumed by the Insured Person by an agreement or contract which would not have attached in the absence of such agreement or contract; d. Liability arising out of any Acts of God including but not limited to earthquake, earth-tremor, volcanic eruption, flood, storm, tempest, typhoon, hurricane, tornado, cyclone or other similar acts or convulsions of nature and atmospheric disturbances; e. Fines, penalties, punitive or exemplary damages of any kind; f. Liability arising from the use of any motor vehicle, aircrafts, water crafts and other vehicles; g. Any liability, which is the subject matter of specific insurance elsewhere; h. Any personal liability of the Insured Person towards his family, relations or traveling companions, whether personal	

		or official or commercial; i. Liability resulting from transmission of an Illness by the Insured Person; j. Personal liability arising out of false arrest, wrongful eviction, wrongful detention, defamation, libel or slander or mental trauma, anguish, or shock resulting there from; k. Liability arising out of any infringement of intellectual property rights such as copyright, patent, trademark, registered designs and trade secrets; l. Liability arising from the possession of animals, birds, reptiles or insects and their by-products such as skin, hair, feathers, horns, fur, ivory, bones or eggs; m. Liability arising from the ownership or possession of vehicles, aircrafts or water crafts or activities of the Insured Person involving parachuting, hang-gliding, hot air ballooning or the use of firearms; n. Liability arising from insanity, use or abuse of any intoxicant, alcohol or drugs (except as medically prescribed) or drug addiction; o. Liability arising from any supply of goods or services on the part of the Insured Person; p. Liability arising from any ownership or occupation of land or buildings other than the occupation of any temporary residence; q. Any liability arising from a contingency occurring anywhere in the Country of Residence/City of Residence of the Insured Person; r. Liability arising out of any breach of law or rules or any criminal liability. s. Liability arising out of use or misuse of weapons, including firearms.	2.4 2.6

<table>
<tr>
<td></td>
<td></td>
<td>
t. Any agreed assumption of risk except to the extent that liability would have attached in the absence of such agreement.

<u>Exclusions specific to Section 2.4- ‘Bounced Booking (Accommodation)’</u>

Any Claim in respect of any Insured Person for, arising out of or directly or indirectly due to any of the following shall not be admissible under this Benefit unless expressly stated to the contrary elsewhere in the Policy terms and conditions:
a. If the Insured shall fail to adhere to the rules of the accommodation provider inconnection with reconfirmation of the booking before the date of accommodation as the case may be;
b. In connection with any waitlisted accommodation booking irrespective of whether such bookings have been promised to be confirmed later;
c. If the confirmed accommodation is a personal arrangement or is free of charge;
d. Where the alternative arrangements for the accommodation is provided by the accommodation provider as the case may be within 6 hours from the time of commencement of stay covered by the earlier confirmed accommodation booking.
<u>Exclusions specific to Section 2.6: ‘Home Burglary (Except Cash and Jewelry)’</u>
Any Claim in respect of any Insured Person for, arising out of or directly or indirectly due to any of the following shall not be admissible under this Benefit unless expressly stated to the contrary elsewhere in the Policy terms and conditions:
a. Loss of cash and loss or damage to
</td>
<td>2.9</td>
</tr>
</table>

		jewellery and valuables. b. Loss or damage caused by the Insured Person's and / or Insured Person's employee(s) or agents and / or Insured Person's family member's direct or indirect involvement in the actual or attempted burglary; c. Any loss or damage to, or on account of loss of, livestock, motor vehicles, pedal cycles, money, securities for money, stamp, bullion, deeds, bonds, bills of exchange, promissory notes, stock or share certificates, business books, manuscripts, documents of any kind, ATM debit or credit cards, precious stones, gold bullion; d. Loss or damage to any property/item illegally acquired, kept, stored or property subject to forfeiture in any manner whatsoever **<u>Exclusions specific to Section 2.9- 'Theft of Personal Effect</u>** Any Claim in respect of any Insured Person for, arising out of or directly or indirectly due to any of the following shall not be admissible under this Benefit unless expressly stated to the contrary elsewhere in the Policy terms and conditions: a. Any electrical or mechanical breakdown of the laptop or tablet. b. Any loss of software or data in the laptop or tablet and any consequential loss arising from the same. c. Any loss as a result of any action taken by customs department / Government department. d. Loss of mobile. e. Any loss reported due to the laptop, tablet or hand baggage being left unattended or forgotten by the Insured Person in a public place or public	2.1

		transport, hotel or apartment. **<u>Exclusions specific to Section 2.1.B.1- OPD Expenses for Illness or Injury</u>** Any Claim in respect of any Insured Person for, arising out of or directly or indirectly due to any of the following shall not be admissible under this Benefit unless expressly stated to the contrary elsewhere in the Policy Schedule/Certificate of insurance (i) Medical treatment taken outside the City of Residence if that is the sole reason or one of the reasons for the journey. (ii) Any treatment or Medical Expenses incurred for any Illness which is a Pre-Existing Disease. (iii) Any treatment, which could reasonably be delayed until the Insured Person's return to the City of Residence. (iv) Radiotherapy and Chemotherapy charges. (v) Rest or recuperation at a spa or health resort, sanatorium, convalescence home or similar institution. (vi) Routine physical tests and / or examination of any kind not consistent with or incidental to the diagnosis and treatment of any Illness or Injury either in a Hospital or as an outpatient and any type of vaccination or inoculation if it does not apply to post-bite treatment. (vii) Physiotherapy expenses or any services provided by chiropractitioner. Screening for cancer or mammography.	
7	Waiting period • Time period	Not applicable	

	during which specified diseases/treatments are not covered. • It is counted from the beginning of the policy coverage.		
8	Financial limits coverage of i. Sub-limit (It is a pre- defined limit and the insurance company will not pay any amount in excess of this limit) ii. Deductible (It is a specified amount: - up to which an insurance company will not pay any claim, and - which will be deducted from total claim amount (if claim amount is more than the specified amount)	All benefits in the plan are sub-limited and mentioned in the policy wordings and policy schedule/ Certificate of Insurance.	
9	Claims/Claims Procedure	**A. Details of procedure to be followed for cashless service as well as for reimbursement of claim including pre and post hospitalization in India.** Turn Around Time (TAT) for claims settlement: For Cashless Process:	4.2

		• TAT for preauthorization of cashless facility: Decision on cashless authorization to be provided within 1 hour from the time of receipt of request. • TAT for cashless final bill authorization: Within 3 hours of the receipt of discharge authorization request from the hospital. **B. Procedure for Cashless Claims Outside India:** You shall intimate the Claims to us through any available mode of communication as specified in the Policy, Health Card or our Website. Global Contact No: +800 08250825 (accessible from locations outside India only) Landline no (Chargeable): 0120-4507250 Emailtravelclaims@hdfcergo.com **For Reimbursement Process:** a. TAT for Claim settlement – Within 15 days of claim intimation Provide the details /web link for following: Network Hospital details: https://www.hdfcergo.com/locators/cashless-hospitals-networks Helpline number: https://www.hdfcergo.com/customercare/grievances Call -: 022 6158 2020 / 022 6234 6234 Hospitals which are excluded or from where no claims will be accepted by insurer http://www.hdfcergo.com/docs/default-source/documents/excluded-hospital1.pdf Downloading/getting claim form	

		https://www.hdfcergo.com/download/claim-form	
10	Policy Servicing	Call center number: 91 - 120 - 4507250 (Chargeable) Or visit travelclaims@hdfcergo.com +80008250825 (Add country code before the number while dialing. Example: Dial 01180008250825 since USA country code is 011) For any Emergency Medical Cashless Services, while abroad: Contact: +91-120-6740895 (number is chargeable and accessible 24X7). Details of Company officials: Customer Happiness Center: D-301, 3rd Floor, Eastern Business District LBS Marg, Bhandup (West), Mumbai - 400078	5.1
11	Grievances/Complaints	**In case of any grievance the insured person may contact the Company through:** - **First Point of Contact** : Call us at 022 6158 2020 / 022 6234 6234/www.hdfcergo.com - **Level 1** (For lack of a response or if the response provided does not meet your expectation) : Write to The Complaints & Grievance Cell (C&G Cell) on the address mentioned below / email to grievance@hdfcergo.com / Call on 18002677444 (operational Monday - Saturday 9AM to 6PM) - **Level 2** (If you're not satisfied with the resolution or if no response was received within 15 days) : Write to the Chief Grievance Officer on the address mentioned below / email to cgo@hdfcergo.com - **Level 3** (In case grievance is not resolved at the above escalation levels) : Lodge an online complaint through the website of Council for Insurance Ombudsmen (CIO)	

		www.cioins.co.in - **Senior Citizen Dedicated Helpline**: 022 6158 2026 / seniorcitizen@hdfcergo.com - **Women Dedicated Helpline**: 022 6158 2055 For updated details of grievance officer, kindly refer the link: https://www.hdfcergo.com/customer-voice/grievances Ombudsman: https://bimabharosa.irdai.gov.in/	
12	Things to remember	**Free Look cancellation:** **Policy renewal:** This Policy will terminate at the expiration of the period for which premium has been paid or on the expiration date **Migration and Portability:** **Change in Sum Insured**: **Moratorium Period**:	Not Applicable Not Applicable Not Applicable Not Applicable
13	Your Obligations	Please disclose all pre-existing disease/s or condition/s and fill in the complete details in the proposal form before buying a policy. Non-disclosure may affect the claim settlement.	Not Applicable

Note:
1. Web-link of the product documents: << https://www.hdfcergo.com/download >>
2. In case of any conflict, the terms and conditions mention in the policy document shall prevail.

Declaration by the Policy Holder;

I have read the above and confirm having noted the details.

Place:

Date: (Signature of the Policyholder)
