

ALLIANZ BAJAJ LIFE INSURANCE COMPANY

HOSPITAL CASH BENEFIT

The daily hospital cash amount shall be at Rs. 4 per Rs. 1000 sum assured subject to a minimum sum assured of Rs. 50000 and maximum sum assured of Rs. 2,50,000 or the basic sum assured, whichever is lower. The hospital cash benefit will only be offered if the issue age of the life assured is not less than 18 (eighteen) and not more than 50 (fifty) years. Coverage shall be provided until the age being the maturity age or 65(sixty five) whichever is earlier.

If the insured person has to stay for more than 72 (seventy two) hours in hospital as a result of injury, sickness or disease, the company reimburses for each full day an amount which is the lower one of:

- (a) 75 % (seventy five percent) of the room charge in hospital;
- (b) the daily hospital cash amount.

For every period of hospitalisation during a policy year, the first three days would not be paid for. The total number of days for which hospital cash would be payable in a policy year would be restricted to 60 (sixty) days in a policy year, irrespective of the number of days of hospitalisation. The benefit period starts after a waiting period of 60 (sixty) days from the commencement of risk or reinstatement of risk. No other expenses apart from room charges as above will be reimbursed.

The amount is reimbursed as a lump sum at the end of the stay in hospital subject to providing satisfactory proof of stay in the hospital and the condition being covered under the policy. The premium rates are not guaranteed and are annually renewable. Where the hospital cash benefit is selected at issue, the policyholder has the option to renew the hospital cash benefit every year at the published rates (subject to IRDA approval) available at the time of renewal. For the renewal coverage there is no waiting period. After electing this option if the policyholder decides not to renew or if his attained age at the time of renewal is 65 (sixty five) or he has received any critical illness benefit, he loses the right to renew the hospital cash benefit, if **he has reduced the sum assured of hospital cash benefit**, he cannot **increase the sum assured of this benefit** in later years.

The hospital cash benefit shall be payable only for hospitalization in hospitals approved by the company. Together with the policy the insured person will receive a list of such approved hospitals. Only claims for stays in these hospitals will be reimbursed except for emergency cases to be decided by the Chief Medical Officer of the company. Intimation of hospitalization should be sent to the company within 15 (fifteen) days of hospitalization through the hospital and by the life assured with supporting evidences. The claim should be received by the company within 15 (fifteen) days of discharge from the hospital. In case of death the nominee can claim the hospitalization benefit as above.

The policyholder/life assured shall approach the listed hospital at his volition. The company disclaims any liability for any consequences of treatment administered in the listed hospitals.

Exclusions

The hospital cash benefit shall not be paid where the hospital confinement is due to:

- (a) Routine eye tests, dental treatment or other examination and/or tests not incidental to the treatment or diagnosis of an injury, sickness or disease;
- (b) War, invasion, civil war, rebellion or riot;
- (c) Pregnancy, miscarriage (except as a result of an accident), impotency, sex change, abortion or birth control;
- (d) Sleep disorder, psychiatric or mental disorder;
- (e) Self-inflicted injuries or attempted suicide while sane or insane;
- (f) AIDS, any AIDS related illness or HIV infection;
- (g) Prostheses, cosmetic surgery or reconstructive surgery unless as a result of an accidental injury;
- (h) Any pre-existing conditions;
- (i) Any injury, sickness or disease received as a result of the insured person committing any breach of law;
- (j) Any injury, sickness or disease received as a result of the insured person being under the influence of alcohol or drugs other than in accordance with the directions of a registered medical practitioner;
- (k) Any injury, sickness or disease received as a result of the insured person taking part in any naval, military or air force operation;
- (l) Any injury, sickness or disease received as a result of the insured person participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- (m) Any injury, sickness or disease received as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger of a recognised airline on regular routes and on a scheduled timetable.

Occupation

The insured must notify the Company in writing as soon as possible and in any case within 10 (ten) days upon a change of occupation.

The new occupation shall be classified according to the underwriting rules of the Company at the time of change.

If either/both of Hospital Cash Benefit and Critical illness Benefit are chosen and:

- the new occupation is in the class of risk which the Company declines for such Benefits, the Critical Illness Benefit and/or Hospital Cash Benefit shall cease as from the date of change of occupation. If the Rider Premiums have been paid the Company shall refund the prorated excess Rider Premiums after adjusting the amount which is required for covering such Rider benefits till the date of change of occupation as per adjustment made. There shall be no retrospective effect of premium refund beyond the policy year in which the occupation change occurs and risk is declined.

- If the new occupation is in a class of lower risk and such change in occupation is informed **after** the policy year when the change in occupation occurs the Company shall refund the difference between the rider premium paid and the rider premium that would have been paid if the lower risk had been charged , such refund shall be made only for such Premium difference for the running policy year in which such change is informed, no backdated refunds shall be paid notwithstanding the fact that occupation change with lower risk occurred earlier than the running policy year .
- If the new occupation is in a class of lower risk and such change in occupation is informed **within** the policy year when the change in occupation occurs then the reduced rider premium shall be applicable from the policy year following the policy year when the change of occupation occurs.
- the new occupation is in a class which the Company accepts but is a higher risk , the Company shall charge revised Premiums for increased risk from the date of commencement of policy year in which the change of occupation occurs irrespective of the time when the Company is informed of such change.
- Where there is failure in notifying the Company and the renewal premium is paid based on the former occupation class and the new occupation is in a class of higher risk, in case of claim the Company shall pay the benefit according to the ratio which the premium paid bears to the premium which would have been paid if the higher risk class had been charged.