SURAKSHA AUR BHAROSA DONO

Critical Illness Insurance Policy

PROSPECTUS

Your greatest wealth is your health & everybody has differing levels of control over their own wellbeing. Life follows no fixed plan and sudden critical illness or bodily injury can sometimes leave you financially hurt and highly stressed. SBI General Critical Illness Insurance Policy insures you against thirteen most important critical illnesses. Should you ever be diagnosed with one of these (subject to the conditions of the policy), we will provide you with a fixed sum, irrespective of your actual medical expenses! Thus helping you bear the heavy cost of your treatment and ensure you to stay financially stable at all times

A. KEY FEATURES OF THE POLICY

At any point of time during the term of the policy, if a covered person under the policy is diagnosed with any of the 13 critical illnesses as mentioned below, the benefit shall be payable, only if the Insured is alive for a period of more than or equal to 28 days (or as specifically stated period of time in any of the definitions given in policy wording) from the date of the first diagnosis of the Critical illness/ Undergoing surgical procedures for the first time.

1. Cancer of Specified Severity
2. Open Chest CABG
3. Aorta Graft Surgery
4. Open Heart Replacement or Repair of Heart Valves
5. Stroke Resulting in Permanent Symptoms
6. First Heart Attack of Specified Severity
7. Kidney Failure Requiring Regular Dialysis
8. Primary Pulmonary Arterial Hypertension
9. Major Organ/ Bone Marrow Transplant
10. Multiple Sclerosis with Persisting Symptoms
11. Coma of Specified Severity
12. Total Blindness
13. Permanent Paralysis of Limbs

Exclusions:

No benefit shall be paid for the following circumstances, for the following conditions/ tests/ treatments and/or any Critical Illness directly or indirectly arising thereof or there from:

1. Benefits will not be available for any Pre- Existing Diseases or related condition(s) or any complications arising thereof for which Insured has been diagnosed, received medical treatment, had signs and / or symptoms, prior to inception of Insured's first Policy, unless such a condition is stated in the Proposal form and specifically accepted by the Insurer and endorsed thereon.
2. Insurer shall not be liable to make any payment under this Policy in connection with or in respect of any Insured Event during the Waiting Period as defined under the Policy.
3. Any diseases causing the death of the Insured within the stipulated Survival Period, measured from the date of incidence of the illness.
4. Any medical procedure or treatment, which is not medically necessary or not performed by a Medical Practitioner.
5. Any congenital Illness/Conditions.
6. Any Covered Critical Illness arising from Birth control procedures and/or hormone replacement therapy and any complications arising thereof from.
7. Any treatment/surgery for change of sex or any cosmetic surgery or treatment/surgery /complications/illness arising as a consequence thereof.
8. Any Covered Critical Illness arising from Treatment by a family member and self-medication or any treatment that is NOT scientifically recognized and any complications arising thereof / there from.
9. Any Covered Critical Illness arising from Treatment with alternative medicines like Ayurvedic, Homeopathy & Unani, acupuncture, acupressure, osteopath, naturopathy, chiropractic, reflexology, aromatherapy and like and any complications arising thereof / there from.
10. Attempted suicide (whether sane or insane) or intentionally self inflicted Injury or Illness.
11. Sexually transmitted conditions, mental or nervous disorder, , Acquired Immune Deficiency Syndrome (AIDS), Human Immune deficiency Virus (HIV) infection
12. Use/Abuse of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Medical Practitioner and taken as prescribed

13. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, strikes
14. Participation in winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sport for which Insured is untrained;
15. Infections (except pyogenic infections which shall occur through an Accidental cut or wound) or any other kind of Disease
16. Failure to seek or follow medical advice following the diagnosis of any illness/disease/injury.
17. Serving in any branch of the Military or Armed Forces of any country, whether in peace or War
18. Participation in a criminal or unlawful act with a criminal intent.
19. Nuclear contamination, the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.
20. Genetic disorders and stem cell implantation / surgery/storage.

WHO CAN TAKE THIS POLICY

Any person who is a resident of India and aged between of 18 Years to 65 years can take this policy, however there is no exit age applicable to this policy. This policy is available on Individual basis only.

PERIOD OF INSURANCE

Critical illness policy can either be issued for 1 Year or 3 Years; the policy with 3 year term can be renewed/offered till the age of 57 years only. Beyond 57 years of age, all renewals for existing 1 year/3 year policies will be allowed for 1 year term only. Short period policy requests will not be considered.

FIXING OF SUM INSURED

- Minimum Sum Insured: INR 200, 000
- Maximum Sum Insured: INR 5, 000,000
- The maximum sum insured would be restricted to 60 months gross income for the Insured or maximum of INR 5,000,000/- provided, Insured is the earning member of the family and in such cases, we may insist for income proof, if required. In case of non earning Insured sum insured would be restricted to 50% of Sum Insured based on Proposer Income maximum up to 10 lacs. Wherever the sum insured is in fraction of a Lac, it would be at the discretion of the insurer to decide on the sum insured under the policy.
- The Maximum Sum Insured would be restricted to INR 1,500,000/- for insured persons aged 60 and above and taking a policy with us for the first time, unless specifically agreed by Insurer.
- Based on Medical history, Sum Insured & age, the proposer may have to undergo a Medical Examination. For proposed insured persons who are aged above 45 years, the acceptance of proposal is subject to a satisfactory medical examination as per our company's requirements, irrespective of sum insured chosen and whether it is a fresh proposal or rollover/renewal from another insurer.
- The applicant is expected to disclose all existing policies and all applications that are being processed for Critical Illness cover with SBI General and with other Insurers in the Indian market. The maximum insurance that can be granted to any individual is INR 5,000,000 including all policies and applications irrespective of whether they are with SBI General or other insurers in the Indian market.
- Medical Examination will be required for acceptance of the Proposal based on the Medical history, Sum Insured & age of the proposer as per our guidelines. For all persons aged 45 and above, medical examination is compulsory, irrespective of the sum insured opted and pre-acceptance medical tests at the cost of the proposer. However, if the proposal is accepted the Insurer will reimburse 50% of the cost incurred towards the medical tests so undertaken at the advice of the insurer.

PREMIUM

The premium rates (excluding service tax) applicable to respective sum insured, age, policy duration and gender under Critical Illness policy are shown below:

Premium in INR for 1 Lakh Sum Insured - 1 Year Product - Male										
Age Band	18 -25	26 -30	31 - 35	36 - 40	41 - 45	46- 50	51 - 55	56 - 60	61 - 65	66 -70
Premium	85	119	213	498	919	1,723	3,006	4,796	6,841	8,942

Age Band	71- 75	76 - 80	76 - 80	81 - 85	86 - 90	91 - 95	96 - 100	101 - 105	106 - 110	111 - 115
Premium	11,524	14,404	18,006	22,507	28,134	35,167	43,959	54,949	68,686	85,857

Premium in INR for 1 Lakh Sum Insured - 1 Year Product - Female										
Age Band	18 -25	26 -30	31 - 35	36 - 40	41 - 45	46- 50	51 - 55	56 - 60	61 - 65	66 -70
Premium	73	123	233	386	630	930	1,436	2,220	3,184	4,087
Age Band	71- 75	76 - 80	76 - 80	81 - 85	86 - 90	91 - 95	96 - 100	101 - 105	106 - 110	111 - 115
Premium	5,421	7,318	9,880	13,338	18,006	24,308	30,385	37,982	47,477	59,347

Premium in INR for 1 Lakh Sum Insured - 3 Year Product - Male										
Age Band	18 -25	26 -30	31 - 35	36 - 40	41 - 45	46- 50	51 - 55	56 - 60	61 - 65	66 -70
Premium	221	337	599	1,351	2,546	4,848	8,494	13,435	19,003	26,909
Age Band	71- 75	76 - 80	76 - 80	81 - 85	86 - 90	91 - 95	96 - 100	101 - 105	106 - 110	111 - 115
Premium	34,267	42,834	53,542	66,928	83,660	1,04,575	1,30,718	1,63,398	2,04,248	2,55,309

Premium in INR for 1 Lakh Sum Insured - 3 Year Product - Female										
Age Band	18 -25	26 -30	31 - 35	36 - 40	41 - 45	46- 50	51 - 55	56 - 60	61 - 65	66 -70
Premium	187	346	636	1,100	1,734	2,596	4,007	6,478	9,326	12,310
Age Band	71- 75	76 - 80	76 - 80	81 - 85	86 - 90	91 - 95	96 - 100	101 - 105	106 - 110	111 - 115
Premium	16,066	21,689	29,280	39,528	53,362	72,039	90,049	1,12,561	1,40,701	1,75,877

If we have a policy holder beyond age of 115, we will continue to charge premiums applicable for age of 115

REVISION IN THE SUM INSURED DURING POLICY PERIOD

Midterm revision of Sum Insured is not allowed, Sum Insured changes are allowed only on renewals.

REVISION OF PRODUCT

In case of revision of this product we will communicate to you at least 3 months prior to the revision. Existing policy will continue to remain in force till its expiry, and for existing policyholders the revision will be applicable only from the date of renewal.

LOADING

Loading might be applied for following factors –

Smoking	
Less than 40 cigarettes daily without additional relevant disease	10% loading on the standard rates
Less than 40 cigarettes daily as with additional relevant disease	50% loading on the standard rates
More than 40 cigarettes daily	Decline

Alcoholism	
Social drinking	0% loading on the standard rates
Minor Criticism	50% loading on the standard rates
Major Criticism	Decline

Alcoholism - Terms	
Social drinking	• Occasional moderate alcohol consumption • Regular consumption of harmless quantities of alcohol (consumption of <50 units per week) • Occasional drunkenness at a social event • GGT < 1.5x normal

Alcoholism - Terms	
Minor criticism	• Excessive regular alcohol consumption e.g. more than 4 pints of beer or a bottle of wine per day (7-8 units per day) without evidence of end organ damage (, no withdrawal syndrome • Elevation of GGT < 3x normal
Major criticism	• Repeated alcohol excess to intoxication e.g. frequent sobering up in hospital or at a police station, binge drinking • Those currently drinking more than more than 4 pints of beer or a bottle of wine per day (7-8 units per day) AND suffering from: o GGT > 3x normal o physical changes e.g. liver damage, gastritis, polyneuropathy o psychological disorders e.g. insomnia, mood changes, neuroses o social problems e.g. multiple losses of driving licence, frequent absences from work or loss of job • terms such as "alcoholism"", "delirium" or "alcoholic disease", "withdrawal treatment", "withdrawal syndrome" are used in the records.

TERMINATION OF POLICY

The Critical Illness insurance policy will cease on the earliest of -

a. Payment of first Critical Illness Benefit under this Policy or other Critical Illness Insurance Policy issued by SBI GIC.

b. The date on which the Policy was lapsed by the Insured.

PORTABILITY

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 30 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 is entitled to transfer the credits gained to the extent of the Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting Period for Pre-existing Diseases, Moratorium Period, etc. from the existing Insurer to the acquiring Insurer in the previous Policy.

For Detailed Guidelines on Portability, kindly refer the link-

https://content.sbigeneral.in//uploads/c6a2844dd65446019b130ffbae1fa20f.pdf

MIGRATION

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 at least 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 is entitled to transfer the credits gained to the extent of the Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting Period for Pre-existing Diseases, Moratorium Period etc. in the previous Policy to the Migrated Policy.

For Detailed Guidelines on Migration, kindly refer the link-

https://content.sbigeneral.in//uploads/c6a2844dd65446019b130ffbae1fa20f.pdf

RENEWAL

i. The Policy shall ordinarily be renewable provided the product is not withdrawn, except on grounds of established fraud or non-disclosure or misrepresentation by the Insured Person.

ii. The Company shall endeavor to give notice for Renewal. However, the Company is not under obligation to give any notice for Renewal.

iii. Renewal shall not be denied on the ground that the Insured Person had made a Claim or Claims in the preceding Policy years.

iv. Request for Renewal along with the requisite premium shall be received by the Company before the end of the Policy Period

v. At the end of the Policy Period, the Policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without Break in Policy. Coverage is not available during the Grace Period.

vi. No loading shall apply on Renewals based on individual Claims experience.

CANCELLATION

Insurer may cancel this insurance by giving Insured at least 15 days written notice and shall refund a pro-rata premium for the unexpired Policy Period. Insured may cancel this insurance by giving Insurer at least 15 days written notice, and if no claim has been made then the Insurer shall refund premium on short term rates for the unexpired Policy Period as per the rates detailed below.

a. **For Policies with 1 year Term:**

Period on risk	Rate of premium refunded
Up to one month	75% of annual rate
Up to three months	50%of annual rate
Up to six months	25% of annual rate
Exceeding six months	Nil

b. **For Policies with 3 years term but cancelled within one year after the free look period:**

Same as above. The computation of the refund would be Total premium received - Premium to be retained (short period rate applied on the premium payable for 1 year policy)

c. **For Policies with 3 years term and cancelled after completion of 1 year:**

The premium refunded would be on pro-rata basis computed as below:

Total premium received*No of days on risk / Total tenure of the policy in days

In the event of a valid claim being made under the Policy and where the Insurer makes the claim payment to the Insured claimant in terms of the Policy, the Critical Illness Insurance Policy terminates immediately on the payment of first Critical Illness benefit under the Policy and renewal shall not be allowed not only for this Policy but also for all other Critical Illness Insurance Policies that the Insured has with the Insurer.

REDRESSAL OF GRIEVANCES

If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows:

Stage 1: Bima Bharosa

You can register your grievances with the regulator using the following link: https://bimabharosa.irdai.gov.in/Home/Home

Stage 2: Head – Customer Care

Alternatively, if you wish to register your grievances directly with us, you may write to the Head – Customer Care. We aim to respond to all Grievances within 7 days. In our initial acknowledgement of receipt letter, we will provide the name and title of the person that is handling your Grievance. This individual will have the authority necessary to investigate and resolve the Grievance.

Email: head.customercare@sbigeneral.in

Toll-Free Number: 1800 102 1111 (Available 24/7)

Stage 3: Grievance Redressal Officer (GRO)

In case, you are still not satisfied with the decision/resolution communicated by the above officer or have not received any response within 5 Business days, you may escalate the matter to the Grievance Redressal Officer (GRO) which will undergo a detailed case investigation, and we aim to resolve the issue within 7 days from the date of receipt of your Grievance at GRO Desk

Email: gro@sbigeneral.in

Phone: 022-45138021

Note: - The Company shall endeavour to maintain the regulatory TAT of 14 days in resolving your grievances.

Stage 4: Escalation to Insurance Ombudsman

If you feel that the response to your Grievance was unsatisfactory, or if you believe your concerns have not been adequately addressed by the company, you may escalate the matter to the Insurance Ombudsman.

Submit your Grievance online: https://www.cioins.co.in/Ombudsman

SURAKSHA AUR BHAROSA DONO

CONTACT US

For any product or service related information or assistance, here's how you can reach Us.

Contact details for Policy Servicing	Contact details for Claim Servicing
SBI General Insurance Company Limited, **Address:** 9th Floor, Wing A & B, Fulcrum, Sahar Road, Andheri (East), Mumbai – 400 099. **Email:** customer.care@sbigeneral.in ; seniorcitizengrievances@sbigeneral.in (for Senior Citizens) **Toll Free number:** 1800 102 1111 (Available 24/7) For agents and intermediaries 1800 22 1111 (Available 24/7) **Website:** www.sbigeneral.in **Fax No:** 1800227244, 18001027244	**Accident & Health claims team,** **SBI General Insurance Company Limited,** **Address:** 9th Floor, Westport, Pan Card Club Road, Baner, Pune, Maharashtra – 411 045. **Email:** sbig.health@sbigeneral.in **Toll Free number:** 1800 210 3366, 1800 210 6366 **Website:** www.sbigeneral.in **Fax No:** +91 20 49334525