

HELPAGE INDIA

Renewal of Group Health Insurance Policy 2025-26 (GHI).

I. About HelpAge India

HelpAge India is a non-profit organization dedicated to serving the elderly population in India. It was established in 1978 and has since been actively involved in various initiatives aimed at improving the quality of life for senior citizens. The organization's programmes are focused on direct interventions in the areas of **Healthcare, Agecare, Livelihoods, Disaster Response, Digital Literacy & Safety**, as well as **Research, Advocacy** and **Awareness** on rights and policies relating to elders.

HELPAGE INDIA invites bids for **Renewal of Group Health Insurance Policy 2025-26 (list of employees and last year policy attached)** as per details, terms and conditions given below:

II. Terms and conditions

1. The agency can be an individual/HUF/Partnership firm/Company incorporated under the laws of India.
2. This RFP is not an offer by HelpAge India, but an invitation to receive responses from the eligible bidders.
3. No agency shall be entitled to submit more than one bid whether jointly or severally. If one does so, all bids wherein the agency has participated shall stand disqualified.
4. The agency shall bear all costs associated with the preparation and submission of bid.
5. The agency must have PAN (Permanent Account Number) and registered with GST and the document for the same is to be attached.
6. HelpAge India reserves the right to accept /reject/ select one or more than one agency and to annul the bidding process any or all bids at any time prior to award of contract without thereby incurring any liability to the affected agency.
7. The supplier should have all valid licenses, approvals, certificates, registration from all statutory authorities like Income Tax/GST/any other relevant and mandatory requirements.
8. Schedule of supply will be provided by HelpAge India while issuing Purchase Order/ email intimation to the selected bidder. In case of delay in supply, penalty will be levied.
9. HelpAge India reserves the right to cancel the contract based on performance without assigning any reason thereof.
10. Evaluation of the bids will be done by Purchase Committee from HelpAge India.
11. HelpAge India management reserves the right to change (increase or reduce) the numbers/units as per its sole discretion and Project requirement.

12. Documents required releasing the payment:

- a. Bill / Invoice mentioning Permanent Account Number of Income Tax Department

- b. Documentary proof of the delivery/ service including E-Way Bill, wherever applicable, as per Purchase order
13. Agencies that will be technically qualified would only be considered for opening of financial bids.
 14. The bidder is expected to examine all instructions, forms, terms and specification in this RFP. Failure to furnish all information required under this RFP or to submit a bid not substantially responsive to this RFP in all respect will be at bidder's risk and shall result in rejection of the bid.
 15. The bidder and their respective officers, employees, agents shall observe the highest standards of ethics dividing the bidding process. HelpAge India has adopted a zero-tolerance policy on gifts and hospitality. Suppliers are therefore requested not to send gifts or offer hospitality to HelpAge India personnel. Notwithstanding anything to the contrary contained herein, HelpAge India shall reject bid without being liable in any manner whatsoever to the bidder if it determines that the bidder has directly or indirectly or through an agent, engaged in corrupts/fraud tent/coercive/undesirable or restrictive practice in the bidding process.
- 16. Indemnity**
- The bidder shall indemnify HelpAge India against all actions, suits, claims and demands brought or made against HelpAge India in respect of anything done or committed to be done by the bidder in execution of or in connection with the work of this contract and against any loss or damage to HelpAge India in consequences to any action or suit being against the selected vendor for anything done or committed to be done in the execution of this contract.
17. The RFP shall be evaluated strictly based on the substantive information/credentials/documentary evidences submitted by the agencies.
 18. The bidder is expected to examine all instruction, forms, terms and specification
 19. HelpAge India Management reserves the Right to award the work to more than one Agency as per requirement. Delivery has to take place in location.
 20. All the bid needs to be submitted via mail only mail id Procurement@helpageindia.org by 24 March 2025.
 21. Agencies would not be allowed to subcontract, partial/full of the work assigned to them. In such case the Management reserves the right to cancel the contract with the agency.
 22. The rate quoted by the agency will be valid for **One Year** from the award of the contract.
 23. Items not meeting the specified requirements has to be returned.

Annexure- 1 Technical Bid Format

(To be filled, sign & stamp by Agency)

A

S No.	Particulars	Remarks	Work Experience
1	Experience with HelpAge India/Govt. Agency/NGO/DevelopmentSector	Yes/No	
2	Experience in similar Type of Product/Service supply	Year	

B

S.No	Particulars	Last 3 Year		
		FY 2020-2021	FY 2021-2022	FY 2022-2023
3	Annual Turnover as per Audited Financials (Copies of the Audited Financials needs to be attached or Turnover Certificate from Chartered Accountant)			

C

S.No	Particulars	Top 5 Client List with value (Rs)	
4	Clientele List		

D

S. No.	Particulars	Details (GST & PAN No.)
5	PAN	
6	GST	

HELPAge INDIA

C-14, Qutab Institutional Area, New Delhi-110062

Annexure- 2: Technical Bid Format

Location -: PAN India basis

	SPECIFICATION (TECHNICAL)	AGENCY'S RESPONSE (in brief)
1.	Supply to be done according to the quantities, specifications, quality, schedule and locations approved by HelpAge India	
2.	The acknowledgement for delivery/services of supply to be submitted as proof along with invoice.	
3.	The agency is capable (as defined in RFP document) and agrees to complete the supply within specified time as agreed upon otherwise penalty clause will be invoked.	
4.	Past experience of the agency in supply of items or similar items, as listed in this RFP. Please give details or provide list of clients to whom similar goods have been supplied.	
5.	Management reserves the right to empanel one or more agency (on the basis of quality consideration/experience of the agency) in addition to rates parameters.	
6.	Constitution of the agency whether Proprietorship/Partnership/Company. Give details of Proprietor/ Partner/Directors.	
7.	For how many years the agency is engaged in similar line of activities.	
8.	Registration certificate with GST need to be submitted along with the technical quotation.	
9.	Penalty clauses will apply as per the company's policy, as per terms of the purchase order: the decision of the HelpAge India shall be final and binding in this regard.	
10.	The final price will remain valid for one year from the award of the Purchase order/ contract	

Please Note:-

- 1. Form must be completed in all respects; incomplete forms may liable to be rejected.**
- 2. The form must be duly stamped & signed by the Authorised signatory**
- 3. The form must be submitted on or before due date and time.**

HELPAGE INDIA

C-14, Qutab Institutional Area, New Delhi-110062

Annexure-3: Financial Bid Format

We are submitting the below quotation for the above after understanding completely the technical specifications and other terms and conditions of the RFP.

	SPECIFICATIONS	AGENCY'S RESPONSE (Agree/Disagree)
1.	Rates will be inclusive of all Taxes/Levies/Packing and Freight Charges etc.	
2.	TDS as applicable will deduced as per Income Tax Act, 1961	
3.	Payment will be made through cheque / NEFT/ RTGS.	
4.	Duly Certified bills along with signed delivery challan will be submitted for every completed supply on monthly basis.	
5.	Payment shall be made in 30 days after submission of original invoice & proof of delivery of goods at our Head Office at Delhi.	
6.	Penalty clauses will apply as defined in the RFP: the decision of the HelpAge India/Project Management shall be final and binding in this regard	

Annexure-4

To be submitted by bidder/Vendor /Tenderer

(On Rs.10 stamp paper)

This has reference to the RFP dated In response to the RFP, we have submitted our technical & financial bids on.....at your email address
In connection with the above bids, we hereby declare as under: -

- i- That we are neither related to any of your Board Members, Officers and other employees nor do we have any financial, commercial or other interests with any of the above persons in any capacity whatsoever.
- ii- That we have submitted the bids in the name of M/S..... and declare that no other bids have been submitted by us in the name of any other firms/companies/proprietors/individuals which comes under the same management and related parties.
- iii- We undertake that:
 - a. All information furnish by us in respect of fulfilment of eligibility criteria and qualification information of the Bid is complete, correct and true.
 - b. All copy of documents, credentials and documents submitted along with this Bid and genuine, authentic, true and valid.
- iv- We undertake that
 - a. We are not involved in any litigation that may have an impact of affecting or compromising the delivery of services as required under this assignment.
 - b. We are not blacklisted by any Central/ State Government/ agency of Central/ State Government of India/Public Sector Undertaking/ any Regulatory Authorities/ Multilateral Funding agency in India for any kind of fraudulent activities.
 - c. No Criminal proceeding are pending against the Proprietor / Partner /Director of the firm/ company (Agency) and also against the firm/ company.
(Indicate any convictions if any against the above persons or Agency.)
 - d. The firm/company has not been declared insolvent, bankrupt, not in receivership, or being wound up, not have its affairs administered by a court or a judicial officer
- v. We hereby undertakes that If any information and document submitted is found to be false/incorrect or we violate any declaration at any stage of contract, HelpAge India has right to cancel my/our Bid and action as deemed fit may be taken against me/us, including termination of the contract, forfeiture of all dues and banning of our firm etc.

We understand that HelpAge India is not bound to accept any bid received against RFP and HelpAge India has right to reject all or any bid without assigning any reason or giving any explanation whatsoever.

Employee Id	Grade Name	Date Of Joining	Age	Date Of Birth	Gender	Location
0013	8	01-05-1996	50	19-03-1974	Female	NEWDELHI
0020	7	20-03-1997	56	24-01-1969	Male	NEWDELHI
0022	7	01-07-1997	53	05-07-1971	Male	NEWDELHI
0023	8	16-05-1996	47	16-06-1977	Male	NEWDELHI
0024	14	16-05-1996	57	16-05-1967	Male	NEWDELHI

0027	14	16-05-1996	53	16-05-1971	Male	NEW DELHI
0029	14	16-05-1996	49	16-05-1975	Male	NEWDELHI
0076	2	01-08-1995	59	02-05-1965	Male	NEWDELHI
0080	4	03-08-1992	55	21-12-1969	Male	NEWDELHI
0084	8	16-09-1996	52	20-03-1972	Female	NEWDELHI
0095	6	10-05-1997	58	09-06-1966	Male	RAIPUR
0104	7	16-05-1994	60	20-06-1964	Male	KOLKATA
0110	8	01-07-1996	58	01-11-1966	Female	KOLKATA
0116	8	01-07-1986	61	16-06-1963	Female	CHENNAI
0155	4	16-12-2004	61	23-07-1963	Male	CHANDIGARH
0159	6	25-03-1991	60	15-08-1964	Female	JAMMU
0162	6	17-07-1997	54	26-03-1970	Male	PATNA
0183	4	05-06-1996	53	31-03-1971	Male	KOCHI
0214	8	01-04-1997	60	22-06-1964	Female	Bangalore CAFA
0215	8	01-07-1997	53	13-08-1971	Male	NEW DELHI
0231	14	01-10-1998	57	10-01-1968	Male	NEWDELHI
0232	14	01-10-1998	54	16-05-1970	Male	NEWDELHI
0261	6	05-10-1998	52	27-04-1972	Female	NEWDELHI
0332	6	02-06-1999	52	05-02-1973	Male	KOCHI
0337	7	01-07-1999	51	27-10-1973	Male	NEWDELHI
0351	8	02-08-1999	51	05-11-1973	Female	NEWDELHI
0375	13	15-12-1999	59	03-06-1965	Male	TITLAGARH
0397	11	03-02-2001	53	06-03-1972	Male	BUXAR
0408	6	03-01-2000	49	11-03-1976	Male	AHMEDABAD
0421	10	20-12-1999	47	29-10-1977	Female	PATALGANGA
0431	11	21-01-2000	58	12-09-1966	Male	PURI
0446	14	01-05-2000	48	01-11-1976	Male	NEWDELHI
0486	4	03-07-2000	50	03-07-1974	Female	NEWDELHI
0511	2	24-08-2000	55	10-04-1969	Female	NEWDELHI
0536	2	14-09-2000	47	26-01-1978	Female	NEWDELHI
0537	9	09-10-2000	49	25-11-1975	Male	NAGPUR
0551	8	01-01-2002	53	03-05-1971	Female	CHENNAI
0595	7	01-04-2001	51	01-08-1973	Male	NEWDELHI
0600	8	01-12-2001	42	28-03-1982	Male	MUMBAI
0604	12	27-03-2001	52	02-03-1973	Male	INDORE
0641	8	01-06-2001	51	22-05-1973	Male	CHENNAI
0669	14	01-07-2001	46	05-08-1978	Male	CHANDIGARH
0670	14	01-07-2001	46	13-01-1979	Male	NEWDELHI
0671	12	01-07-2001	53	10-03-1972	Male	JAIPUR
0676	5	26-07-2001	49	29-01-1976	Male	NEWDELHI
0789	9	01-03-2002	46	04-12-1978	Female	BANGALORE
0815	14	01-04-2002	60	10-05-1964	Male	NEWDELHI
0823	10	01-04-2002	51	09-07-1973	Male	NEWDELHI
0824	6	01-06-2002	44	30-06-1980	Female	CHANDIGARH
0833	6	13-05-2002	50	22-12-1974	Female	BHOPAL
0863	99	01-07-2004	54	18-12-1970	Male	CHETLA
0895	9	01-10-2002	47	19-12-1977	Male	JAIPUR
0896	10	01-10-2002	42	06-07-1982	Male	BHUBANESHWAR
0903	6	18-09-2002	46	02-03-1979	Female	NEW DELHI
0934	5	16-01-2003	55	10-06-1969	Male	BANGALORE
0942	6	03-02-2003	44	25-12-1980	Male	NEWDELHI
0959	4	16-04-2003	56	01-10-1968	Male	CUDDALORE
0986	14	05-08-2003	45	22-10-1979	Male	LUCKNOW
1014	8	26-09-2003	49	13-07-1975	Female	JAMMU
1072	7	17-05-2004	45	16-02-1980	Male	CHENNAI

1114	8	23-08-2004	58	26-02-1967	Male	PUNE
1119	5	06-10-2004	53	06-05-1971	Male	MUMBAI
1142	7	01-12-2004	51	08-07-1973	Male	HYDERABAD
1152	4	09-02-2005	52	24-11-1972	Male	SHIMLA
1192	6	25-04-2005	43	05-01-1982	Male	NEWDELHI
1194	7	15-06-2005	53	30-08-1971	Male	GOA
1206	6	08-06-2005	51	05-04-1973	Male	LUCKNOW
1213	6	01-05-2005	60	05-04-1964	Male	CUDDALORE
1216	4	27-06-2005	57	18-07-1967	Male	CHENNAI
1246	10	16-08-2005	46	18-02-1979	Male	NEWDELHI
1260	13	01-01-2008	51	10-07-1973	Male	CUDDALORE
1316	1	09-01-2006	61	13-07-1963	Female	NEWDELHI
1321	13	25-10-2005	44	13-04-1980	Male	PURI
1355	8	15-04-2006	59	15-01-1966	Female	KOLKATA
1373	9	07-06-2006	49	09-10-1975	Male	PURI
1377	9	01-01-2008	44	08-05-1980	Male	CUDDALORE
1390	8	12-06-2006	39	11-02-1986	Female	MUMBAI
1415	13	22-07-2006	47	13-11-1977	Male	NAVI MUMBAI
1424	5	28-08-2006	51	10-07-1973	Male	NEWDELHI
1431	8	01-01-2008	53	31-05-1971	Male	CUDDALORE
1518	6	21-03-2007	47	02-11-1977	Male	HYDERABAD
1519	5	26-03-2007	51	13-09-1973	Male	KOLKATA
1526	8	16-04-2007	43	12-10-1981	Male	RAIPUR
1574	5	11-07-2007	46	16-08-1978	Male	HYDERABAD
1590	10	23-07-2007	58	15-08-1966	Male	NEWDELHI
1596	12	27-08-2007	52	20-04-1972	Male	AHMEDABAD
1603	99	24-09-2007	64	19-08-1960	Male	Ahmedabad (2nd shift doctor)
1618	7	15-10-2007	47	20-11-1977	Male	HYDERABAD
1620	9	22-10-2007	56	15-10-1968	Female	BHOPAL
1646	9	14-01-2008	42	08-01-1983	Male	NEWDELHI
1669	8	16-04-2008	35	20-08-1989	Male	NEWDELHI
1692	7	01-06-2008	43	05-09-1981	Male	Rabindra Niketan
1716	11	28-07-2008	42	18-06-1982	Male	MUMBAI
1758	4	03-11-2008	47	11-03-1978	Male	AHMEDABAD
1768	10	15-12-2008	44	15-08-1980	Female	NEWDELHI
1775	7	22-12-2008	49	19-01-1976	Female	BANGALORE
1802	12	02-03-2009	42	25-05-1982	Male	MADURAI
1811	10	15-04-2009	41	01-11-1983	Female	NEWDELHI
1817	9	01-05-2009	42	25-03-1982	Female	SHIMLA
1822	7	18-05-2009	40	12-11-1984	Female	NEWDELHI
1827	8	01-06-2009	40	27-04-1984	Male	KOLKATA
1835	12	01-07-2009	42	02-03-1983	Male	CHETLA
1836	9	01-07-2009	43	28-02-1982	Male	CHETLA
1893	13	01-10-2009	59	21-02-1966	Male	LUHRI
1915	8	01-01-2010	49	16-10-1975	Female	CHETLA
1922	9	08-01-2010	45	14-03-1980	Male	BUXAR
1938	6	02-03-2010	37	30-04-1987	Male	NEWDELHI
1951	2	15-04-2010	46	29-01-1979	Female	NEWDELHI
1957	13	01-05-2010	44	02-04-1980	Male	NATPHAJHAKRI
1969	10	01-06-2010	40	03-02-1985	Female	KOCHI
1977	9	03-06-2010	40	05-07-1984	Male	KHIRWERI
1985	9	08-06-2010	51	08-12-1973	Male	VIJAYAWADA
1992	14	17-06-2010	46	02-01-1979	Male	NEWDELHI
1998	9	01-07-2010	46	27-05-1978	Male	KOCHI
2001	11	02-07-2010	42	18-08-1982	Male	CHETLA

2026	8	02-08-2010	48	10-07-1976	Male	NEWDELHI
2033	8	16-08-2010	47	04-09-1977	Male	DEHRADUN
2066	99	18-10-2010	49	31-05-1975	Female	MADURAI
2075	10	01-11-2010	52	14-08-1972	Female	LUCKNOW
2098	13	01-12-2010	52	31-12-1972	Male	BARODA
2107	8	13-12-2010	38	27-01-1987	Female	KOLKATA
2136	4	10-02-2011	49	06-12-1975	Female	NEWDELHI
2145	13	07-02-2011	43	17-10-1981	Male	WARORA
2168	7	01-04-2011	49	19-09-1975	Female	NEWDELHI
2170	13	01-04-2011	48	01-07-1976	Male	RAJAM
2188	6	11-04-2011	39	02-08-1985	Male	NEW DELHI
2191	12	01-04-2011	40	26-03-1984	Female	Gummidipoondi
2196	13	12-04-2011	38	13-06-1986	Male	SHAMSHADABAD
2206	8	02-05-2011	46	18-07-1978	Male	NEWDELHI
2221	8	07-06-2011	55	02-01-1970	Male	Godda
2225	6	20-06-2011	40	15-10-1984	Male	NEWDELHI
2245	9	04-07-2011	57	23-05-1967	Female	NEWDELHI
2255	11	15-07-2011	44	30-12-1980	Female	CHETLA
2280	6	15-09-2011	41	09-03-1984	Female	JAIPUR
2292	11	01-10-2011	38	25-02-1987	Female	LUCKNOW
2295	9	03-10-2011	43	15-08-1981	Male	NEWDELHI
2338	11	14-12-2011	38	27-08-1986	Female	NEW DELHI
2369	5	19-03-2012	61	17-06-1963	Male	NEWDELHI
2370	9	01-03-2012	42	17-11-1982	Female	BHOPAL
2386	14	02-04-2012	55	15-01-1970	Male	NEWDELHI
2387	14	02-04-2012	42	01-01-1983	Male	NEWDELHI
2392	10	01-05-2012	40	11-06-1984	Male	Delhi - DMRC
2423	7	18-06-2012	39	10-03-1986	Female	NEW DELHI
2432	10	02-07-2012	37	15-12-1987	Male	SUPAUL
2433	11	02-07-2012	52	08-08-1972	Male	AMBERNATH
2451	9	16-08-2012	38	18-04-1986	Male	HYDERABAD
2481	5	01-11-2012	40	02-02-1985	Male	DEHRADUN
2501	13	17-12-2012	44	05-06-1980	Male	PATNA
2512	6	16-01-2013	39	29-07-1985	Female	NEWDELHI
2514	6	01-02-2013	49	23-12-1975	Male	SHIMLA
2522	7	01-03-2013	37	06-07-1987	Male	NEWDELHI
2539	10	08-04-2013	48	01-01-1977	Female	HYDERABAD
2540	12	01-04-2013	38	30-05-1986	Male	ANGUL
2544	12	18-04-2013	57	01-01-1968	Male	LEH -OAH
2554	7	01-05-2013	37	21-07-1987	Male	GEWALA
2560	11	01-05-2013	37	22-08-1987	Male	WARORA
2577	11	07-06-2013	35	10-12-1989	Female	LUHRI
2582	12	17-06-2013	43	23-04-1981	Male	DHAULASINDH
2586	9	14-06-2013	41	14-03-1984	Male	LUHRI
2622	7	19-08-2013	42	31-08-1982	Male	BHOPAL
2632	13	02-09-2013	53	05-07-1971	Male	CHENNAI
2650	8	20-09-2013	42	01-03-1983	Male	NEWDELHI
2660	8	07-10-2013	40	15-01-1985	Male	NEWDELHI
2682	99	18-11-2013	42	31-08-1982	Male	GEWALA
2699	7	02-12-2013	36	25-11-1988	Male	PATNA
2700	13	02-12-2013	45	01-02-1980	Male	Dwarka
2707	14	08-01-2014	52	21-11-1972	Male	GURDASPUR
2725	9	05-03-2014	40	21-02-1985	Male	DEVSARI
2729	13	03-03-2014	46	12-02-1979	Male	DEVSARI
2733	12	01-03-2014	33	04-07-1991	Male	DEVSARI

2737	6	01-04-2014	49	18-11-1975	Male	NEWDELHI
2739	7	02-04-2014	41	03-03-1984	Male	BHUBANESHWAR
2759	13	01-05-2014	47	06-06-1977	Male	Delhi1
2771	10	15-05-2014	49	16-05-1975	Male	BUXAR
2772	13	15-05-2014	39	01-11-1985	Male	BUXAR
2782	5	02-06-2014	55	31-07-1969	Female	BANGALORE
2808	8	01-07-2014	36	06-09-1988	Female	NEWDELHI
2811	11	01-07-2014	50	18-08-1974	Male	NASIK
2813	99	01-07-2014	54	15-05-1970	Male	KHIRWERI
2832	98	07-08-2014	38	03-08-1986	Male	AIIMS
2846	9	21-08-2014	41	10-10-1983	Male	NEWDELHI
2856	13	01-09-2014	35	14-07-1989	Male	JUNAGADH
2857	7	01-09-2014	57	11-04-1967	Male	Chandigarh NHL
2867	9	22-09-2014	39	26-10-1985	Male	NEWDELHI
2871	13	01-10-2014	44	29-04-1980	Male	PATALGANGA
2905	14	10-12-2014	47	23-02-1978	Male	CUDDALORE
2913	5	07-01-2015	46	14-08-1978	Female	BHUBANESHWAR
2920	9	19-01-2015	57	15-06-1967	Male	Dwarka
2928	9	01-02-2015	37	12-07-1987	Male	SOLAN
2935	10	16-02-2015	36	03-08-1988	Male	KHANDWA-1
2936	9	12-02-2015	49	19-02-1976	Female	WARORA
2988	13	08-06-2015	48	20-09-1976	Male	BUXAR
3019	99	01-08-2015	71	20-06-1953	Male	LEH
3043	98	21-09-2015	46	29-04-1978	Female	AIIMS
3057	12	01-10-2015	33	10-06-1991	Male	SHAMSHADABAD
3067	12	02-11-2015	48	23-06-1976	Male	PATIALA
3075	12	01-12-2015	49	12-07-1975	Female	PATNA
3088	9	01-12-2015	40	03-03-1985	Male	Bommasandra
3101	12	01-12-2015	30	25-05-1994	Male	PATNA
3124	10	01-02-2016	38	09-05-1986	Female	LEH
3209	13	16-05-2016	38	19-06-1986	Male	KHIRWERI
3295	12	01-08-2016	32	08-11-1992	Female	Goa II
3298	10	16-08-2016	55	28-05-1969	Male	JODA
3304	9	22-08-2016	50	10-09-1974	Female	MATHURA
3323	9	15-09-2016	34	05-07-1990	Male	LUCKNOW
3371	12	02-11-2016	40	11-11-1984	Male	SARDARSHAHAR
3379	9	15-11-2016	48	06-03-1977	Male	FARAKKA
3380	12	15-11-2016	30	01-01-1995	Male	FARAKKA
3385	6	21-11-2016	53	29-01-1972	Male	CHANDIGARH
3387	10	01-12-2016	43	14-03-1982	Male	KOCHI
3393	13	01-12-2016	40	01-01-1985	Male	FARAKKA
3416	9	16-01-2017	45	20-06-1979	Male	NELAMANGALA
3437	12	01-02-2017	40	20-01-1985	Female	BUXAR
3453	12	14-03-2017	42	09-07-1982	Male	Dhamra
3460	10	20-03-2017	38	20-06-1986	Male	Dhamra II
3468	12	05-04-2017	53	02-07-1971	Male	Dhamra II
3472	13	01-04-2017	34	04-12-1990	Male	Godda
3486	13	12-04-2017	51	22-05-1973	Male	Goa II
3489	13	17-04-2017	37	18-03-1988	Male	Dhamra
3528	12	15-06-2017	32	09-01-1993	Male	CHETLA
3531	12	20-06-2017	37	11-05-1987	Male	RAMANATHAPURAM
3539	14	01-07-2017	43	01-09-1981	Male	GEWALA
3563	9	01-08-2017	37	02-02-1988	Male	JAIPUR
3574	1	22-08-2017	54	29-01-1971	Female	NEWDELHI
3585	10	01-09-2017	36	25-05-1988	Male	NEYVELI

3586	11	01-09-2017	32	10-06-1992	Female	NEYVELI
3587	14	01-09-2017	37	01-03-1988	Female	NEYVELI
3588	14	01-09-2017	49	11-07-1975	Male	NEYVELI
3591	14	01-09-2017	46	14-06-1978	Female	NEYVELI
3597	14	01-09-2017	34	22-08-1990	Female	NEYVELI
3612	99	16-10-2017	36	10-08-1988	Female	Rampur Physio
3622	0	30-10-2017	53	28-08-1971	Male	NEWDELHI
3629	6	13-11-2017	39	01-03-1986	Male	NEWDELHI
3630	7	13-11-2017	47	24-01-1978	Male	PATIALA
3639	14	01-11-2017	37	05-07-1987	Male	GEWALA
3651	9	11-12-2017	55	12-01-1970	Male	DHAULASINDH
3652	14	11-12-2017	55	17-07-1969	Male	NEYVELI
3677	9	17-01-2018	40	20-05-1984	Male	JHANJHARPUR
3685	9	22-01-2018	39	09-10-1985	Male	NATPHAJHAKRI
3688	10	02-01-2018	35	13-01-1990	Male	RAMANATHAPURAM
3716	12	19-03-2018	55	05-03-1970	Male	Dwarka
3717	11	02-04-2018	29	31-01-1996	Male	NEWDELHI
3722	8	09-04-2018	33	03-02-1992	Male	KOLKATA
3750	9	02-05-2018	39	29-05-1985	Male	Neyyattinkara
3755	14	02-05-2018	43	16-05-1981	Female	Neyyattinkara
3761	9	07-05-2018	47	01-06-1977	Male	RAICHUR
3764	13	16-05-2018	47	01-06-1977	Male	RAICHUR
3765	13	01-05-2018	45	30-09-1979	Male	Goa III
3766	13	14-05-2018	34	23-03-1990	Male	Dhamra II
3772	99	01-05-2018	30	30-05-1994	Male	BINDAPUR
3782	10	01-06-2018	37	18-10-1987	Male	Vadipatti
3783	12	01-06-2018	43	19-03-1981	Male	Vadipatti
3794	14	01-06-2018	33	20-01-1992	Female	CUDDALORE
3796	99	13-06-2018	57	10-08-1967	Male	NEW DELHI
3800	10	01-06-2018	35	23-12-1989	Male	TIRUNELVELI
3805	9	15-06-2018	56	22-06-1968	Male	Puri Astitva
3816	9	02-07-2018	32	21-06-1992	Male	Patna_OAH
3818	8	09-07-2018	33	24-10-1991	Female	NEWDELHI
3844	10	01-08-2018	40	31-10-1984	Female	Pune 2
3861	12	01-08-2018	31	08-04-1993	Male	INDORE
3862	11	20-07-2018	37	20-09-1987	Female	Nasik -Agecare
3865	14	01-08-2018	36	31-05-1988	Female	NEYVELI
3868	12	01-08-2018	42	27-06-1982	Female	NEYVELI
3871	10	01-08-2018	32	25-07-1992	Male	Karouli
3878	10	08-08-2018	35	24-05-1989	Male	Asifabad
3880	13	01-08-2018	51	01-07-1973	Male	RAJULA
3891	11	01-09-2018	29	06-08-1995	Male	KURKUMBH
3894	13	01-09-2018	40	18-05-1984	Male	KURKUMBH
3904	11	01-09-2018	44	09-06-1980	Female	Pune 2
3917	13	01-10-2018	61	21-09-1963	Male	Pune 2
3931	13	15-10-2018	30	15-08-1994	Male	AHMEDABAD
3968	10	05-12-2018	37	01-07-1987	Male	SARDARSHAHAR
3969	11	01-12-2018	40	03-05-1984	Female	KANJIKUZHY
3975	13	04-12-2018	45	27-08-1979	Male	NELAMANGALA
3981	10	10-12-2018	32	19-05-1992	Female	VITLAPUR
3988	12	01-01-2019	31	22-02-1994	Female	NEYVELI
3990	10	01-01-2019	61	20-11-1963	Female	ANGUL
4000	9	02-01-2019	30	14-03-1995	Male	DURGAPUR
4001	13	02-01-2019	43	13-03-1982	Male	DURGAPUR
4008	14	01-01-2019	59	09-11-1965	Male	ANGUL

4009	12	02-01-2019	30	03-01-1995	Male	DURGAPUR
4014	12	01-01-2019	39	11-06-1985	Male	ANGUL
4022	13	01-02-2019	32	12-05-1992	Male	ANGUL
4044	12	13-03-2019	31	07-11-1993	Female	NEYVELI
4046	11	11-03-2019	39	05-06-1985	Female	CUDDALORE
4058	14	02-04-2019	39	13-05-1985	Female	GURDASPUR
4082	10	01-05-2019	32	25-03-1992	Male	LUHRI II
4090	10	02-05-2019	33	25-07-1991	Male	Dhamra
4096	6	03-06-2019	50	23-11-1974	Male	MUMBAI
4118	11	01-06-2019	40	30-11-1984	Female	NEWDELHI
4132	12	01-07-2019	53	08-11-1971	Male	NELAMANGALA
4140	98	08-07-2019	35	05-08-1989	Male	AIIMS Rishikesh
4141	98	08-07-2019	44	14-11-1980	Female	AIIMS Rishikesh
4142	98	08-07-2019	45	29-08-1979	Female	AIIMS Rishikesh
4143	98	08-07-2019	27	09-07-1997	Female	AIIMS Rishikesh
4156	12	01-08-2019	42	10-07-1982	Male	Dwarka
4182	10	02-09-2019	41	07-08-1983	Male	AHMEDABAD
4210	10	01-10-2019	38	17-05-1986	Male	KURKUMBH
4233	9	06-11-2019	29	21-09-1995	Male	DASNA
4255	13	04-12-2019	45	24-07-1979	Male	DASNA
4257	12	02-12-2019	46	08-03-1979	Male	Dhamra
4259	9	16-12-2019	36	10-11-1988	Male	GEWALA
4263	13	16-12-2019	41	08-06-1983	Male	GODHRA
4272	13	09-01-2020	32	03-06-1992	Male	NAGAPATTINAM-II
4278	14	01-01-2020	32	02-01-1993	Female	Dhamra
4289	99	13-01-2020	35	28-03-1989	Female	Rampur Physio
4296	14	01-02-2020	30	18-04-1994	Female	CUDDALORE
4310	9	10-02-2020	36	28-06-1988	Male	NASIK
4345	9	01-06-2020	37	13-01-1988	Male	Shimla -SJVNL
4383	13	06-07-2020	44	10-06-1980	Male	SAHARANPUR
4412	10	17-08-2020	37	26-02-1988	Male	RAMPUR
4422	99	17-08-2020	71	02-03-1954	Male	GHOGHAMBA
4437	9	14-09-2020	48	10-07-1976	Female	KORAPUT
4438	12	14-09-2020	30	26-06-1994	Male	PARADEEP
4439	13	14-09-2020	36	14-05-1988	Male	KORAPUT
4459	10	01-10-2020	38	20-07-1986	Female	BHUBANESHWAR
4461	11	01-10-2020	55	01-01-1970	Male	Patna_OAH
4469	10	19-10-2020	38	13-11-1986	Male	MADURAI
4503	13	12-11-2020	37	01-07-1987	Male	TORANAGALLU
4522	99	26-11-2020	73	10-09-1951	Male	TITLAGARH
4531	14	01-12-2020	31	01-01-1994	Male	Patna_OAH
4533	12	01-12-2020	30	27-07-1994	Male	RAICHUR
4547	12	01-12-2020	59	01-01-1966	Female	Patna_OAH
4548	14	01-12-2020	47	01-01-1978	Male	Patna_OAH
4549	12	17-12-2020	25	11-07-1999	Female	SOLAN
4551	10	02-12-2020	36	01-06-1988	Male	TORANAGALLU
4555	13	15-12-2020	48	21-06-1976	Male	DURGAPUR
4562	12	01-01-2021	27	17-11-1997	Male	TORANAGALLU
4573	10	07-01-2021	43	12-10-1981	Male	Chamrajnagar
4581	13	08-01-2021	50	01-06-1974	Male	TORANAGALLU-2
4612	9	02-01-2021	36	01-11-1988	Male	RAIGARH
4631	14	14-01-2021	27	01-01-1998	Male	GURDASPUR
4633	12	01-02-2021	40	17-10-1984	Female	Chamrajnagar
4639	10	01-02-2021	31	04-10-1993	Female	Chandigarh NHL
4641	9	01-02-2021	29	24-11-1995	Female	AHMEDABAD

4642	12	01-02-2021	30	24-08-1994	Female	VADODARA
4643	13	01-02-2021	35	27-11-1989	Male	VADODARA
4653	10	02-02-2021	39	28-11-1985	Male	Chennai-Elders Helpdesk
4681	10	12-02-2021	37	30-05-1987	Male	BANGALORE
4695	4	01-03-2021	40	27-03-1984	Male	NEWDELHI
4698	8	01-03-2021	40	10-02-1985	Female	GURDASPUR
4701	12	01-03-2021	44	30-07-1980	Female	CHENNAI
4702	10	01-03-2021	31	22-07-1993	Male	TRICHY
4713	99	01-03-2021	35	08-01-1990	Male	TIRUNELVELI
4714	12	03-03-2021	30	11-11-1994	Male	KORAPUT
4732	10	15-03-2021	41	01-06-1983	Male	TORANAGALLU-2
4733	8	10-03-2021	33	03-01-1992	Male	LEH -OAH
4736	13	06-03-2021	36	13-05-1988	Male	PARADEEP
4751	13	01-04-2021	37	10-03-1988	Male	ANGUL
4757	13	05-04-2021	36	15-07-1988	Male	SARDARSHAHAR
4763	9	12-04-2021	29	26-08-1995	Female	DURGAPUR
4776	9	01-04-2021	43	16-10-1981	Female	KOLAGHAT
4779	99	04-05-2021	37	14-05-1987	Male	NASIK
4796	9	11-05-2021	39	13-06-1985	Male	NAVI MUMBAI
4799	10	13-05-2021	38	16-05-1986	Male	TITLAGARH
4801	12	01-05-2021	25	09-10-1999	Female	JUNAGADH
4808	99	01-06-2021	70	16-06-1954	Male	GODHRA
4811	99	07-06-2021	45	31-12-1979	Male	Rampur Physio
4824	12	01-06-2021	30	25-07-1994	Male	SARDARSHAHAR
4831	12	01-07-2021	31	29-09-1993	Female	RAMPUR
4854	12	01-07-2021	25	21-08-1999	Male	FARIDABAD
4855	13	01-07-2021	44	01-07-1980	Male	FARIDABAD
4862	10	02-08-2021	44	02-11-1980	Male	NEWDELHI
4877	99	02-08-2021	35	27-04-1989	Female	Jhakri - Physio Center
4878	99	02-08-2021	54	23-06-1970	Female	Dwarka
4883	7	09-08-2021	33	31-10-1991	Female	NEWDELHI
4886	12	02-08-2021	31	06-05-1993	Female	Patna_OAH
4887	14	02-08-2021	47	27-03-1977	Male	Patna_OAH
4892	12	02-08-2021	29	18-03-1996	Female	LEH -OAH
4895	14	02-08-2021	40	04-06-1984	Male	Patna_OAH
4898	14	02-08-2021	39	01-01-1986	Female	Patna_OAH
4902	12	17-08-2021	29	01-08-1995	Male	SAHARANPUR
4904	12	02-08-2021	55	01-01-1970	Female	Patna_OAH
4905	13	06-08-2021	36	06-04-1988	Male	MADURAI
4911	10	02-08-2021	28	02-01-1997	Male	KHURJA
4925	98	01-09-2021	50	26-10-1974	Female	Lucknow -SGPGI
4927	12	01-09-2021	48	12-10-1976	Female	NAVI MUMBAI
4931	13	01-09-2021	39	20-03-1985	Male	Dwarka
4932	10	01-09-2021	38	15-11-1986	Male	ANGUL
4943	7	15-09-2021	47	18-09-1977	Female	NEWDELHI
4974	10	20-09-2021	37	10-06-1987	Male	HOSPET
4980	10	17-09-2021	26	17-12-1998	Male	FARIDABAD
4991	10	01-10-2021	42	05-06-1982	Female	Mahad
4993	13	01-10-2021	37	10-05-1987	Male	Vadipatti
5024	9	12-10-2021	40	27-05-1984	Male	Ahmedabad NHL
5028	7	01-11-2021	35	10-07-1989	Male	NEWDELHI
5036	13	01-11-2021	45	31-03-1979	Male	LEH
5040	99	08-11-2021	27	01-01-1998	Female	GEWALA
5043	10	01-11-2021	50	01-08-1974	Female	BHOPAL
5044	10	01-11-2021	31	05-09-1993	Male	KORBA

5050	13	01-11-2021	48	15-01-1977	Male	ANGUL
5052	13	01-11-2021	47	29-10-1977	Male	SATARA
5063	10	02-12-2021	24	10-02-2001	Male	Ahmedabad NHL
5083	12	01-12-2021	26	10-10-1998	Male	JODA
5110	99	16-12-2021	31	02-08-1993	Male	Pune 2
5113	10	15-12-2021	30	10-06-1994	Male	AMBERNATH
5116	13	01-12-2021	37	12-07-1987	Male	Mandvi
5137	9	29-12-2021	37	10-01-1988	Male	Birbhum
5144	10	23-12-2021	36	20-08-1988	Male	KOLAR
5151	6	10-01-2022	35	27-05-1989	Female	NEWDELHI
5153	7	11-01-2022	34	24-08-1990	Female	NEWDELHI
5156	10	23-12-2021	51	09-05-1973	Male	PARADEEP
5157	99	03-01-2022	32	14-10-1992	Male	Vadipatti
5174	13	18-01-2022	40	17-12-1984	Male	RAMANATHAPURAM
5195	9	09-02-2022	39	05-11-1985	Male	NEWDELHI
5203	12	07-02-2022	31	15-04-1993	Female	NEYVELI
5216	99	01-03-2022	70	01-10-1954	Female	Dwarka
5220	13	01-03-2022	38	10-05-1986	Male	Chamrajnagar
5227	12	10-03-2022	27	01-10-1997	Male	HOSPET
5233	12	10-03-2022	30	20-06-1994	Male	HOSPET
5246	10	01-04-2022	31	30-06-1993	Male	Ahmedabad NHL
5250	99	01-04-2022	28	03-06-1996	Male	TRICHY
5266	13	11-04-2022	46	28-05-1978	Male	SOLAN
5272	13	01-04-2022	28	16-09-1996	Male	JODA
5276	6	04-05-2022	37	20-03-1987	Female	NEWDELHI
5279	14	01-04-2022	52	05-04-1972	Male	LEH -OAH
5281	12	25-04-2022	25	18-06-1999	Female	VITLAPUR
5282	98	27-04-2022	30	25-06-1994	Male	Lucknow -SGPGI
5288	12	02-05-2022	34	24-12-1990	Female	LUHRI II
5292	14	01-05-2022	41	08-08-1983	Male	PATIALA
5294	12	02-05-2022	46	28-04-1978	Female	CHENNAI
5295	99	20-04-2022	29	28-07-1995	Female	Nasik -Agecare
5296	14	11-04-2022	41	11-08-1983	Female	Ahmedabad NHL
5297	98	02-05-2022	27	02-08-1997	Male	RAIPUR-AIIMS
5298	98	02-05-2022	22	21-10-2002	Female	RAIPUR-AIIMS
5306	13	09-05-2022	44	16-03-1981	Male	CHENNAI
5326	10	01-06-2022	34	26-07-1990	Male	RAIPUR
5330	12	01-06-2022	38	08-12-1986	Female	LEH -OAH
5334	10	01-06-2022	32	19-10-1992	Female	JUNAGADH
5339	99	01-06-2022	32	07-05-1992	Female	Neyyattinkara
5345	99	02-06-2022	30	08-12-1994	Female	Bommasandra
5346	10	08-06-2022	34	23-03-1990	Male	RAJULA
5353	13	06-06-2022	31	03-12-1993	Male	AMBERNATH
5354	10	01-06-2022	31	01-06-1993	Male	TUMKUR
5358	99	01-06-2022	49	15-01-1976	Male	MATHURA
5359	99	01-06-2022	34	15-08-1990	Male	KORBA
5364	12	01-06-2022	28	01-01-1997	Male	MATHURA
5367	10	01-06-2022	30	20-08-1994	Male	CHETLA
5371	99	01-06-2022	26	10-07-1998	Male	JODA
5380	13	01-06-2022	34	23-11-1990	Male	TUMKUR
5386	12	15-06-2022	30	15-04-1994	Male	LEH -OAH
5399	12	20-06-2022	32	07-08-1992	Male	GURUGRAM-KBR
5404	13	01-07-2022	35	12-03-1990	Male	ROPAR
5409	99	01-07-2022	30	15-06-1994	Male	GURUGRAM-KBR
5411	13	02-07-2022	36	10-10-1988	Male	GURUGRAM-KBR

5412	9	01-07-2022	27	19-10-1997	Male	RAIPUR
5413	13	01-07-2022	25	26-12-1999	Male	MORBI
5418	10	01-07-2022	29	12-10-1995	Male	HYDERABAD
5419	12	01-07-2022	24	24-10-2000	Male	KHIRWERI
5446	13	04-07-2022	37	04-03-1988	Male	Pune FIS
5456	13	08-07-2022	30	13-07-1994	Male	PUNE-KBR
5457	10	01-07-2022	37	02-07-1987	Male	GURUGRAM-KBR
5459	12	01-07-2022	36	24-04-1988	Male	Asifabad
5460	13	06-07-2022	31	01-01-1994	Male	BELLARY
5463	98	11-07-2022	41	10-07-1983	Male	Lucknow -SGPGI
5465	13	16-07-2022	28	16-10-1996	Male	LUHRI II
5468	13	01-07-2022	56	16-11-1968	Male	AGRA
5469	12	13-07-2022	24	14-07-2000	Male	PUNE-KBR
5471	13	04-07-2022	44	29-09-1980	Male	Bangalore IV
5477	12	01-08-2022	40	01-05-1984	Female	NAGAPATTINAM-Manali MHU
5479	14	01-08-2022	37	03-09-1987	Male	CHENNAI
5484	10	01-08-2022	40	17-07-1984	Male	Tapukara
5487	13	01-08-2022	60	27-06-1964	Male	JAIPUR II
5489	12	01-08-2022	26	05-06-1998	Male	BELLARY
5490	10	03-08-2022	27	03-05-1997	Male	NEWDELHI
5494	10	01-08-2022	28	13-02-1997	Female	VADODARA
5496	10	01-08-2022	54	15-12-1970	Female	Bangalore IV
5499	12	01-08-2022	47	10-04-1977	Female	SOLAN
5501	12	01-08-2022	26	30-05-1998	Male	BELLARY
5506	13	01-08-2022	31	20-06-1993	Male	KOLAR
5509	10	01-08-2022	41	13-04-1983	Female	PARADEEP-II
5510	13	01-08-2022	48	12-03-1977	Male	PARADEEP-II
5511	12	01-08-2022	54	13-08-1970	Male	PARADEEP-II
5513	99	01-08-2022	74	11-09-1950	Male	PARADEEP-II
5519	10	05-08-2022	38	28-11-1986	Female	PUNE-KBR
5520	12	10-08-2022	32	01-04-1992	Female	ROPAR
5526	10	01-09-2022	31	11-03-1994	Male	JHAJJAR
5527	12	01-09-2022	36	07-07-1988	Male	JHAJJAR
5528	13	01-09-2022	40	18-11-1984	Male	JHAJJAR
5532	12	01-09-2022	30	12-07-1994	Female	BADDI
5535	12	01-09-2022	29	30-05-1995	Male	PATIALA
5536	10	08-09-2022	32	06-02-1993	Male	AGRA
5540	10	15-09-2022	27	06-03-1998	Female	NEWDELHI
5543	10	12-09-2022	32	01-01-1993	Male	ROPAR
5545	99	08-09-2022	24	06-09-2000	Female	CUDDALORE
5559	13	01-09-2022	34	10-09-1990	Male	RAIGARH
5566	10	22-09-2022	25	07-05-1999	Female	Chandigarh NHL
5573	10	01-10-2022	49	06-05-1975	Male	Bangalore Triveni MHU
5589	99	10-10-2022	71	22-04-1953	Male	FARIDABAD
5593	10	06-10-2022	39	05-07-1985	Male	BELLARY
5597	10	14-10-2022	25	23-07-1999	Female	Chandigarh NHL
5600	12	14-10-2022	28	29-07-1996	Male	GEWALA
5601	10	12-10-2022	37	03-01-1988	Male	NAGAPATTINAM-Manali MHU
5604	13	01-11-2022	29	07-06-1995	Male	MATHURA
5613	10	01-11-2022	54	06-08-1970	Male	MUMBAI
5615	10	01-11-2022	49	01-07-1975	Male	SHAMSHADABAD
5620	12	01-11-2022	29	20-08-1995	Male	SATARA
5624	99	09-11-2022	37	17-01-1988	Male	Tapukara
5639	12	01-11-2022	41	01-03-1984	Female	Godda
5640	14	01-11-2022	47	26-10-1977	Female	VITLAPUR

5652	13	01-12-2022	55	01-06-1969	Male	HAZIRA
5653	12	01-12-2022	30	01-07-1994	Female	HAZIRA
5655	13	01-12-2022	44	02-12-1980	Male	CHETLA
5656	10	01-12-2022	34	25-09-1990	Male	DEHRADUN
5659	10	05-12-2022	26	20-05-1998	Female	BHOPAL
5664	10	06-12-2022	47	24-10-1977	Male	Goa II
5667	99	05-12-2022	24	24-06-2000	Male	DEHRADUN
5673	99	06-12-2022	29	25-08-1995	Male	KURKUMBH
5675	10	05-12-2022	39	24-02-1986	Male	CUDDALORE
5676	13	01-12-2022	31	06-07-1993	Male	TIRUPATI
5681	10	09-12-2022	34	07-05-1990	Male	BHOPAL
5682	10	08-12-2022	25	26-05-1999	Male	MUMBAI
5683	12	01-12-2022	34	21-08-1990	Male	BARMER
5685	13	12-12-2022	29	08-09-1995	Male	BARMER
5686	12	07-12-2022	28	11-07-1996	Female	Dhamra
5687	10	08-12-2022	27	25-12-1997	Female	Dhamra
5688	12	08-12-2022	24	11-08-2000	Female	Dhamra
5693	12	01-12-2022	36	14-08-1988	Female	LEH
5695	12	01-12-2022	32	19-06-1992	Female	CUDDALORE
5697	13	01-12-2022	44	01-06-1980	Male	Kalburgi 2
5698	12	01-12-2022	50	24-04-1974	Male	Kalburgi 2
5700	99	01-12-2022	30	15-05-1994	Male	RAJULA
5705	10	01-12-2022	50	01-06-1974	Male	Kalburgi 2
5706	12	14-12-2022	42	20-02-1983	Female	CUDDALORE
5709	10	02-01-2023	39	16-08-1985	Male	Manapparai
5712	99	02-01-2023	72	11-04-1952	Male	DASNA
5725	12	01-02-2023	37	20-10-1987	Female	BARODA
5730	13	10-02-2023	47	10-06-1977	Male	Vilathikulam
5731	9	10-02-2023	29	15-06-1995	Female	NEWDELHI
5733	10	16-02-2023	32	28-05-1992	Female	Shimla II
5734	13	16-02-2023	38	02-04-1986	Male	Shimla II
5735	99	16-02-2023	68	28-07-1956	Male	Shimla II
5737	12	13-02-2023	43	19-04-1981	Male	Vilathikulam
5738	99	15-02-2023	28	15-04-1996	Male	JUNAGADH
5740	10	20-02-2023	38	14-12-1986	Male	PATNA
5741	12	01-03-2023	31	10-04-1993	Male	Shimla II
5742	10	01-03-2023	25	01-08-1999	Male	BARMER - II
5743	12	01-03-2023	35	01-07-1989	Male	BARMER - II
5747	99	09-03-2023	48	30-09-1976	Male	DURGAPUR
5758	10	01-04-2023	25	15-05-1999	Female	NEWDELHI
5761	99	01-04-2023	28	20-07-1996	Male	JHAJJAR
5762	10	01-04-2023	28	02-08-1996	Female	GOA
5764	1	10-04-2023	49	30-07-1975	Male	NEWDELHI
5766	13	03-04-2023	38	07-11-1986	Male	RAMPUR
5771	13	03-04-2023	52	23-02-1973	Male	GURDASPUR
5774	99	01-04-2023	31	22-01-1994	Female	PRAYAGRAJ
5779	12	12-04-2023	32	27-07-1992	Female	Mahad
5780	12	01-04-2023	27	18-08-1997	Female	MORBI
5781	12	01-04-2023	34	16-02-1991	Female	Lote
5790	10	19-04-2023	33	08-01-1992	Male	CHANDIGARH
5796	8	01-05-2023	28	20-07-1996	Male	NEWDELHI
5797	8	27-04-2023	33	04-05-1991	Male	NEWDELHI
5798	9	01-05-2023	31	16-02-1994	Male	NEWDELHI
5799	7	01-05-2023	37	04-05-1987	Female	NEWDELHI
5801	99	01-05-2023	69	01-07-1955	Male	BARODA

5808	9	08-05-2023	29	02-07-1995	Male	NEWDELHI
5809	10	01-05-2023	31	16-02-1994	Female	SATARA
5811	13	01-05-2023	51	01-06-1973	Male	VITLAPUR
5812	13	01-05-2023	29	11-03-1996	Male	JHARSUGUDA
5813	12	01-05-2023	30	04-08-1994	Female	JHARSUGUDA
5824	10	15-05-2023	27	03-02-1998	Male	DEHRADUN
5831	10	01-06-2023	34	08-12-1990	Male	RAJPURA
5838	9	07-06-2023	26	01-03-1999	Female	Mayurbhanj
5848	12	07-06-2023	25	15-06-1999	Male	JHARSUGUDA
5850	12	01-06-2023	25	15-06-1999	Male	TORANAGALLU-2
5851	13	15-06-2023	47	21-02-1978	Male	AVADI
5854	10	19-06-2023	34	07-07-1990	Female	COIMBATORE
5855	12	19-06-2023	55	15-06-1969	Male	COIMBATORE
5856	13	19-06-2023	50	20-05-1974	Male	COIMBATORE
5858	12	16-06-2023	32	10-12-1992	Female	Goa II
5859	10	01-06-2023	31	09-06-1993	Female	Bangalore -WEIR
5860	12	01-06-2023	31	29-06-1993	Female	Bangalore -WEIR
5861	12	05-06-2023	30	16-01-1995	Male	GURDASPUR
5863	99	03-07-2023	28	18-09-1996	Female	AVADI
5868	10	03-07-2023	36	08-04-1988	Male	NEW DELHI
5872	12	01-07-2023	51	30-07-1973	Male	TRICHY
5877	10	01-07-2023	50	05-06-1974	Male	Patna_OAH
5880	13	01-07-2023	27	21-07-1997	Male	TRICHY
5886	13	14-07-2023	48	04-07-1976	Male	BADDI
5889	10	17-07-2023	28	11-08-1996	Male	Vilathikulam
5894	10	20-07-2023	31	02-03-1994	Male	PAURI
5895	99	01-07-2023	64	01-07-1960	Female	Goa - Palliative Care
5897	12	01-07-2023	28	18-10-1996	Female	Goa - Palliative Care
5899	10	01-07-2023	25	01-11-1999	Female	Goa - Palliative Care
5901	12	01-07-2023	22	03-09-2002	Female	Goa - Palliative Care
5906	12	01-08-2023	23	04-09-2001	Male	UDAIPUR
5907	10	01-08-2023	29	22-04-1995	Male	Godda
5908	12	01-08-2023	35	10-01-1990	Male	RAIGARH II
5910	12	01-08-2023	38	11-04-1986	Female	Manapparai
5917	99	01-08-2023	39	04-07-1985	Male	Godda
5918	99	01-08-2023	32	08-03-1993	Male	Godda
5920	12	01-08-2023	25	01-08-1999	Male	AGRA
5921	10	01-08-2023	61	24-02-1964	Male	BARMER
5922	10	07-08-2023	41	19-11-1983	Female	JAIPUR
5924	8	07-08-2023	43	10-01-1982	Female	NEWDELHI
5926	12	01-08-2023	32	10-07-1992	Female	TIRUPATI
5932	12	01-08-2023	28	21-09-1996	Female	KORBA
5933	9	21-08-2023	43	01-01-1982	Male	DHAR
5934	8	21-08-2023	38	06-01-1987	Male	NEWDELHI
5938	10	01-09-2023	31	17-06-1993	Male	SHIMLA
5940	10	01-09-2023	41	19-04-1983	Male	Karjat
5941	14	01-09-2023	33	22-06-1991	Female	CUDDALORE
5942	9	01-09-2023	46	20-11-1978	Male	GEWALA
5943	99	22-08-2023	25	15-08-1999	Female	Dhamra
5948	10	01-09-2023	28	03-09-1996	Female	Nalukettu
5949	12	04-09-2023	23	24-07-2001	Female	AHMEDABAD
5950	10	01-09-2023	36	31-07-1988	Male	RAJAM
5958	99	01-09-2023	33	24-07-1991	Male	SHAMSHADABAD
5959	4	11-09-2023	56	02-03-1969	Female	MUMBAI
5960	10	14-09-2023	38	22-01-1987	Male	Sandur_Bellary

5965	13	18-09-2023	53	01-01-1972	Male	HAZARIBAGH
5967	10	21-09-2023	24	14-07-2000	Female	CHETLA
5968	10	03-10-2023	30	17-09-1994	Male	GEWALA
5969	10	01-10-2023	27	25-12-1997	Male	PATNA
5971	10	04-10-2023	24	23-05-2000	Female	NEW DELHI
5976	99	28-09-2023	30	18-03-1995	Female	Goa - Palliative Care
5977	99	04-10-2023	74	01-04-1950	Male	PATNA
5979	99	09-10-2023	30	03-04-1994	Male	Vilathikulam
5980	99	03-10-2023	31	01-06-1993	Male	RAIGARH
5982	10	03-10-2023	42	01-02-1983	Male	GEWALA
5983	12	03-10-2023	37	03-03-1988	Female	HAZARIBAGH
5984	12	03-10-2023	29	10-06-1995	Male	RAIGARH
5985	12	09-10-2023	25	02-07-1999	Female	GEWALA
5988	10	06-10-2023	42	27-07-1982	Male	BHOPAL
5989	10	05-10-2023	36	09-03-1989	Male	Tirla
5990	10	05-10-2023	35	12-10-1989	Male	DHAR
5991	10	04-10-2023	30	22-10-1994	Male	INDORE
5993	13	05-10-2023	50	01-02-1975	Male	DHAR
5996	10	12-10-2023	25	20-07-1999	Male	NAGAPATTINAM-II
5997	13	13-10-2023	34	17-07-1990	Male	NAGAPATTINAM-Manali MHU
5999	99	03-10-2023	65	17-12-1959	Male	NELAMANGALA
6007	12	06-10-2023	30	15-06-1994	Male	Mayurbhanj
6008	13	03-10-2023	32	15-07-1992	Male	GEWALA
6011	7	13-10-2023	32	01-06-1992	Male	HYDERABAD
6013	12	03-10-2023	58	01-06-1966	Male	Bangalore IV
6014	10	17-10-2023	40	18-01-1985	Female	GURDASPUR
6017	12	03-10-2023	25	01-06-1999	Female	TORANAGALLU
6018	12	03-10-2023	28	09-11-1996	Male	CUDDALORE
6023	99	16-10-2023	69	09-11-1955	Male	SOLAN
6027	99	16-10-2023	29	28-03-1995	Female	RAMANATHAPURAM
6029	7	03-11-2023	51	18-11-1973	Male	BHOPAL
6030	0	06-11-2023	48	27-07-1976	Male	NEWDELHI
6032	12	01-11-2023	25	18-07-1999	Male	SINGRAULI
6038	99	01-11-2023	26	30-03-1998	Male	NAGAPATTINAM-Manali MHU
6040	99	03-10-2023	26	06-05-1998	Female	VADODARA
6043	99	06-11-2023	25	04-11-1999	Female	Jaipur Agecare
6044	99	07-11-2023	29	19-05-1995	Male	DHAR
6049	6	16-11-2023	39	26-06-1985	Male	NEWDELHI
6050	12	01-11-2023	25	06-09-1999	Female	RAIGARH- HOME CARE
6051	12	01-11-2023	23	13-08-2001	Female	PATALGANGA
6052	12	06-11-2023	26	21-04-1998	Female	NATPHAJHAKRI
6054	10	01-11-2023	38	12-08-1986	Male	BILASPUR
6055	12	01-11-2023	26	16-03-1999	Male	BILASPUR
6056	13	01-11-2023	29	14-06-1995	Male	BILASPUR
6058	14	01-11-2023	34	30-07-1990	Female	PONDICHERRY JIPMER 1
6062	99	01-11-2023	27	04-05-1997	Male	Sandur_Bellary
6065	12	01-11-2023	38	13-06-1986	Female	KOLAR
6067	13	01-11-2023	33	06-06-1991	Male	Sandur_Bellary
6068	10	02-11-2023	29	23-10-1995	Female	BARODA
6071	12	01-12-2023	23	13-01-2002	Female	Mandvi
6072	10	01-12-2023	29	31-05-1995	Male	PALI
6076	13	01-12-2023	36	01-01-1989	Male	Karjat
6077	12	02-12-2023	33	17-11-1991	Female	Lucknow -SGPGI
6079	12	01-12-2023	28	17-10-1996	Male	Sandur_Bellary
6080	1	01-12-2023	51	20-03-1973	Male	NEWDELHI

6081	99	01-12-2023	71	31-08-1953	Male	AMBERNATH
6083	99	06-11-2023	26	12-12-1998	Male	BARMER - II
6090	12	11-12-2023	30	06-11-1994	Male	PALI
6091	98	01-12-2023	29	20-06-1995	Male	PONDICHERRY JIPMER 1
6092	13	11-12-2023	26	07-07-1998	Male	PALI
6097	12	05-12-2023	21	12-08-2003	Male	RAJULA
6099	14	01-12-2023	44	09-12-1980	Female	PONDICHERRY JIPMER 1
6100	10	01-12-2023	48	10-11-1976	Male	SIMHADRI
6101	12	01-12-2023	40	30-08-1984	Male	SIMHADRI
6102	13	01-12-2023	24	16-11-2000	Male	SIMHADRI
6104	99	11-12-2023	31	07-08-1993	Male	UDAIPUR
6105	10	11-12-2023	36	11-02-1989	Male	GAYA
6107	12	01-12-2023	49	01-07-1975	Male	ANGUL
6123	12	05-01-2024	30	15-03-1995	Male	TITLAGARH
6125	10	01-01-2024	41	28-01-1984	Male	TIRUPATI
6129	13	08-01-2024	28	06-05-1996	Male	Mayurbhanj
6132	12	02-01-2024	35	15-11-1989	Female	GAYA
6133	12	11-01-2024	23	23-10-2001	Female	GODHRA
6134	12	03-01-2024	33	23-01-1992	Male	CUDDALORE
6135	12	01-01-2024	25	11-07-1999	Male	JHAJJAR
6136	12	15-01-2024	25	28-04-1999	Male	DASNA
6143	99	18-01-2024	27	01-11-1997	Female	NAVI MUMBAI
6147	99	08-01-2024	33	03-05-1991	Male	SARDARSHAHAR
6150	12	02-01-2024	30	31-07-1994	Male	BIJAPUR
6153	14	02-01-2024	38	07-06-1986	Female	NEYVELI
6159	99	01-02-2024	28	14-11-1996	Male	DURGAPUR
6162	10	01-02-2024	40	02-06-1984	Male	BIJAPUR
6165	99	01-02-2024	29	01-03-1996	Male	CUDDALORE
6166	10	02-02-2024	26	07-05-1998	Female	Goa III
6167	12	01-02-2024	27	09-03-1998	Male	KORBA
6168	13	01-02-2024	44	20-06-1980	Male	DHAULASINDH
6173	10	01-02-2024	30	28-09-1994	Female	NADAVAYAL
6174	12	01-02-2024	26	06-07-1998	Male	TORANAGALLU-2
6180	13	01-02-2024	46	01-01-1979	Male	Kadi
6181	14	01-02-2024	25	16-09-1999	Male	NEYVELI
6187	99	01-02-2024	32	29-07-1992	Male	PARADEEP
6191	13	20-02-2024	45	13-02-1980	Male	NASIK
6194	12	01-02-2024	38	16-01-1987	Female	GHOGHAMBA
6201	8	07-03-2024	27	29-07-1997	Male	NEWDELHI
6203	12	04-03-2024	23	26-04-2001	Male	BARMER - II
6204	10	01-03-2024	28	19-09-1996	Male	PURULIA
6205	12	04-03-2024	49	30-06-1975	Male	DURGAPUR
6206	8	05-03-2024	41	07-05-1983	Male	CHAMOLI
6207	8	04-03-2024	42	11-03-1983	Male	Dehradun Hills
6212	99	01-03-2024	25	12-06-1999	Male	Nalukettu
6213	10	11-03-2024	30	29-12-1994	Male	Gummidipoondi
6216	99	12-03-2024	29	12-12-1995	Male	ROPAR
6219	12	07-03-2024	25	22-04-1999	Male	PURULIA
6220	10	15-03-2024	53	15-02-1972	Male	ANGUL
6222	8	01-03-2024	31	26-05-1993	Male	CUDDALORE
6225	99	03-04-2024	28	19-10-1996	Female	Manapparai
6227	12	01-04-2024	40	02-02-1985	Female	PALGHAR
6228	10	01-04-2024	35	17-12-1989	Male	CHENNAI
6231	12	01-04-2024	29	04-04-1995	Male	DHAR
6232	13	01-04-2024	34	02-02-1991	Male	Manapparai

6233	13	01-04-2024	28	06-09-1996	Male	PALGHAR
6237	99	05-04-2024	24	31-01-2001	Female	DEHRADUN
6239	10	06-04-2024	36	25-02-1989	Male	SINGRAULI
6243	13	01-04-2024	26	07-06-1998	Male	BARMER - II
6248	99	05-04-2024	29	09-10-1995	Male	KORAPUT
6250	99	01-04-2024	68	24-09-1956	Male	BADDI
6251	99	15-04-2024	30	30-04-1994	Female	CUDDALORE
6253	14	01-04-2024	32	23-06-1992	Male	PRAYAGRAJ
6254	8	15-04-2024	33	19-09-1991	Male	PAURI
6255	10	18-04-2024	31	09-04-1993	Male	Borigumma
6256	13	15-04-2024	30	11-09-1994	Male	Borigumma
6257	12	01-04-2024	36	01-07-1988	Male	RAJAM
6259	13	15-04-2024	38	01-07-1986	Male	Bommasandra
6263	12	15-04-2024	23	22-03-2001	Female	Borigumma
6266	10	01-04-2024	25	24-02-2000	Male	GODHRA
6267	12	01-05-2024	60	18-06-1964	Male	Bangalore Triveni MHU
6269	12	01-05-2024	25	28-05-1999	Male	PONDICHERRY JIPMER 1
6270	12	01-05-2024	24	19-05-2000	Female	KORBA-II
6271	12	01-04-2024	25	20-08-1999	Female	Goa - Palliative Care
6272	9	01-04-2024	52	26-08-1972	Female	Goa - Palliative Care
6273	10	01-05-2024	26	05-01-1999	Female	Mayurbhanj
6274	6	06-05-2024	45	17-10-1979	Male	LUCKNOW
6277	99	22-04-2024	29	04-02-1996	Male	Dhamra
6278	99	06-05-2024	24	21-09-2000	Female	PAURI
6279	12	01-05-2024	28	08-01-1997	Female	TUMKUR
6280	10	01-05-2024	32	15-05-1992	Male	UDAIPUR
6281	99	01-04-2024	25	02-03-2000	Female	Goa - Palliative Care
6283	99	15-05-2024	34	10-10-1990	Male	BILASPUR
6285	99	22-04-2024	27	13-01-1998	Male	Dhamra II
6289	13	15-05-2024	42	02-06-1982	Male	Mahad
6290	13	01-05-2024	30	01-01-1995	Male	SINGRAULI
6291	11	03-05-2024	45	16-03-1980	Male	Dehradun Hills
6292	12	06-05-2024	31	07-01-1994	Male	Nandapur
6293	13	06-05-2024	33	17-06-1991	Male	Nandapur
6296	99	06-05-2024	29	21-04-1995	Male	BARMER
6297	10	20-05-2024	32	23-04-1992	Male	Mandapam
6299	12	20-05-2024	29	16-03-1996	Male	Patna_OAH
6300	4	03-06-2024	51	07-10-1973	Male	PATNA
6301	9	03-06-2024	34	18-03-1991	Female	NEWDELHI
6302	13	01-06-2024	52	15-05-1972	Male	Nalukettu
6303	12	01-06-2024	33	25-02-1992	Male	Patna_OAH
6304	12	03-06-2024	25	06-05-1999	Female	Mandapam
6307	99	03-06-2024	34	08-06-1990	Male	Mandapam
6309	13	01-06-2024	24	09-07-2000	Male	Naitwar Mori
6311	10	10-06-2024	30	18-08-1994	Male	HAZARIBAGH
6313	9	04-06-2024	31	02-12-1993	Male	BHOPAL
6314	12	01-06-2024	27	21-03-1997	Female	CUDDALORE
6315	10	01-06-2024	23	16-09-2001	Female	Ahmedabad NHL
6316	10	01-06-2024	32	16-01-1993	Female	Ahmedabad NHL
6323	13	06-06-2024	34	20-08-1990	Male	FATEHPUR
6324	11	01-06-2024	27	10-06-1997	Female	PAURI
6325	10	03-06-2024	43	13-11-1981	Male	MOGA
6326	13	03-06-2024	45	15-07-1979	Male	MOGA
6329	12	03-06-2024	28	28-08-1996	Female	MOGA
6330	10	06-06-2024	22	28-07-2002	Male	FATEHPUR

6331	99	06-06-2024	49	02-08-1975	Male	RAJAM
6333	10	20-06-2024	29	15-06-1995	Male	NEWDELHI
6334	99	01-07-2024	32	12-04-1992	Male	BUXAR
6336	12	01-07-2024	23	28-10-2001	Male	RAJPURA
6338	8	08-07-2024	24	10-09-2000	Female	NEWDELHI
6340	13	01-07-2024	30	10-07-1994	Male	KORBA-II
6341	14	04-07-2024	32	10-08-1992	Male	SHIMLA
6342	12	01-07-2024	27	04-08-1997	Female	BADDI
6344	10	02-07-2024	24	20-02-2001	Female	BHOPAL
6345	12	01-07-2024	32	05-12-1992	Female	Tirla
6346	10	05-07-2024	35	13-06-1989	Male	JHARSUGUDA
6347	13	01-07-2024	33	25-05-1991	Male	Mandapam
6350	10	08-07-2024	41	08-05-1983	Male	Ahmedabad NHL
6351	7	11-07-2024	53	19-03-1971	Male	BANGALORE
6352	10	02-07-2024	38	04-02-1987	Female	BHOPAL
6353	12	03-07-2024	24	08-07-2000	Male	MOGA
6354	99	01-07-2024	72	17-06-1952	Male	HAZARIBAGH
6355	13	16-07-2024	30	28-12-1994	Male	CHAMBA
6356	10	16-07-2024	27	17-05-1997	Male	CHAMBA
6358	13	10-07-2024	29	29-11-1995	Male	Dighi
6359	12	10-07-2024	24	06-05-2000	Female	Dighi
6361	99	01-07-2024	23	01-09-2001	Female	DEHRADUN
6363	12	16-07-2024	22	25-12-2002	Female	ROPAR
6364	12	19-07-2024	23	03-02-2002	Male	CHAMBA
6367	10	22-07-2024	28	19-08-1996	Female	PALGHAR
6368	10	18-07-2024	23	18-05-2001	Female	BHOPAL
6370	99	01-08-2024	25	17-04-1999	Male	NADAVAYAL
6371	99	01-08-2024	27	11-06-1997	Male	JAIPUR
6376	12	01-08-2024	24	20-06-2000	Male	JAIPUR
6377	13	01-08-2024	35	10-01-1990	Male	Tapukara
6381	11	01-08-2024	39	10-07-1985	Male	Dehradun Hills
6382	10	05-08-2024	29	08-10-1995	Female	Dighi
6383	10	01-08-2024	28	15-12-1996	Male	Hyderabad- Helpline
6388	13	02-08-2024	44	20-05-1980	Male	RAJPURA
6389	99	05-08-2024	41	04-01-1984	Male	BUXAR
6391	99	01-08-2024	27	27-03-1997	Male	PATALGANGA
6393	10	01-08-2024	44	12-03-1981	Male	Gatanji Taluka
6394	12	01-08-2024	27	24-03-1997	Male	KORBA-II
6395	13	01-08-2024	24	28-12-2000	Male	KORBA
6396	8	12-08-2024	47	19-03-1977	Female	CHENNAI
6397	10	12-08-2024	25	20-03-1999	Male	CHENNAI
6399	8	12-08-2024	42	19-07-1982	Male	AHMEDABAD
6400	99	01-08-2024	23	09-04-2001	Female	Mayurbhanj
6401	10	12-08-2024	35	19-07-1989	Female	Mandvi
6402	12	14-08-2024	24	01-07-2000	Female	Manapparai
6404	99	16-08-2024	29	27-01-1996	Female	Nandapur
6407	13	01-08-2024	45	01-01-1980	Male	PURULIA
6408	12	20-08-2024	27	11-09-1997	Male	RAJULA
6409	12	16-08-2024	25	22-12-1999	Male	JUNAGADH
6410	13	16-08-2024	50	07-11-1974	Male	CHENNAI
6411	10	20-08-2024	27	25-12-1997	Male	GOA
6412	99	16-08-2024	28	16-10-1996	Male	RAICHUR
6414	99	12-08-2024	30	19-01-1995	Male	PURI
6415	99	02-09-2024	32	05-10-1992	Male	Dhamra
6416	99	02-09-2024	22	11-01-2003	Female	Goa - Palliative Care

6417	10	02-09-2024	25	15-11-1999	Male	Bawal
6418	12	02-09-2024	23	01-01-2002	Male	FATEHPUR
6419	11	02-09-2024	38	05-04-1986	Male	PAURI
6421	10	01-09-2024	24	20-08-2000	Male	CUDDALORE
6422	10	01-09-2024	27	18-05-1997	Male	Naitwar Mori
6423	12	01-09-2024	23	01-05-2001	Male	Naitwar Mori
6424	13	02-09-2024	30	02-10-1994	Male	Tamnar
6425	10	05-09-2024	35	03-07-1989	Male	Gangavaram
6429	10	09-09-2024	38	27-07-1986	Male	Mandapam - Dhairy Project Office
6430	12	09-09-2024	22	16-06-2002	Female	NAGAPATTINAM-II
6431	99	02-09-2024	70	03-05-1954	Male	Bawal
6432	99	02-09-2024	28	30-07-1996	Male	MORBI
6434	99	16-09-2024	30	31-10-1994	Female	CHENNAI
6436	99	02-09-2024	30	04-05-1994	Male	Dhamra 3
6439	13	11-09-2024	26	08-12-1998	Male	DEHRADUN
6440	12	02-09-2024	25	29-05-1999	Female	Goa - Palliative Care
6441	12	17-09-2024	27	23-02-1998	Female	Goa - Palliative Care
6442	13	04-09-2024	28	09-05-1996	Male	Dhamra 3
6443	10	01-10-2024	31	20-07-1993	Male	Dhamra 3
6446	99	01-10-2024	25	11-04-1999	Female	TIRUPATI
6447	99	01-10-2024	28	20-12-1996	Male	KOLAR
6450	99	01-10-2024	36	08-04-1988	Male	KORBA-II
6451	99	01-10-2024	26	13-01-1999	Male	Gangavaram
6452	99	01-10-2024	24	10-12-2000	Male	Rajpura PTC
6453	10	07-10-2024	25	14-07-1999	Male	VITLAPUR
6454	10	07-10-2024	24	28-04-2000	Male	JAIPUR
6455	12	01-10-2024	28	07-06-1996	Female	Dholnara
6456	12	01-10-2024	32	10-03-1993	Male	Gangavaram
6458	12	01-10-2024	27	09-06-1997	Male	Dhamra 3
6459	12	04-10-2024	24	26-07-2000	Male	GURDASPUR
6460	12	01-10-2024	27	20-08-1997	Male	TIRUNELVELI
6461	13	08-10-2024	32	04-07-1992	Male	TIRUNELVELI
6462	99	08-10-2024	28	09-09-1996	Male	WARORA
6463	99	08-10-2024	28	29-06-1996	Male	PUNE-KBR
6465	99	01-10-2024	28	15-07-1996	Female	ANGUL
6466	99	01-10-2024	26	15-06-1998	Male	ANGUL
6467	10	01-10-2024	30	10-01-1995	Male	Dholnara
6468	13	01-10-2024	34	13-09-1990	Male	Dholnara
6469	99	17-10-2024	26	06-07-1998	Male	SAHARANPUR
6470	99	01-10-2024	26	10-08-1998	Male	VITLAPUR
6471	99	01-10-2024	26	02-04-1998	Female	VITLAPUR
6473	12	11-10-2024	23	14-03-2002	Female	Mandvi
6474	12	11-10-2024	26	28-03-1998	Female	Goa III
6476	10	18-10-2024	32	13-06-1992	Female	BHUBANESHWAR
6478	10	18-10-2024	25	13-05-1999	Female	GEWALA
6479	10	04-11-2024	40	15-07-1984	Male	NEWDELHI
6481	99	28-10-2024	28	12-02-1997	Male	RAJPURA
6482	99	04-11-2024	27	27-08-1997	Male	Naitwar Mori
6483	99	01-11-2024	26	10-07-1998	Male	Kalburgi 2
6484	8	06-11-2024	31	15-03-1994	Female	NEWDELHI
6485	10	01-11-2024	22	07-10-2002	Male	RAIPUR
6486	99	21-10-2024	25	02-04-1999	Male	FATEHPUR
6487	10	01-11-2024	31	04-04-1993	Male	AVADI
6488	13	01-11-2024	25	03-06-1999	Male	Gummidipoondi

6489	10	06-11-2024	26	31-10-1998	Male	CHENNAI
6490	13	01-11-2024	41	06-04-1983	Male	Asifabad
6491	10	07-11-2024	35	28-10-1989	Male	SHIMLA
6492	10	01-11-2024	25	12-07-1999	Male	KOCHI
6493	12	04-11-2024	43	08-06-1981	Male	Sandur_Bellary
6494	10	01-11-2024	32	01-08-1992	Male	KORBA-II
6495	10	12-11-2024	27	10-01-1998	Male	LUCKNOW
6496	10	11-11-2024	24	21-07-2000	Male	HYDERABAD
6497	10	01-11-2024	37	29-10-1987	Female	Lote
6498	99	11-11-2024	25	03-05-1999	Female	Goa II
6499	99	15-11-2024	24	06-08-2000	Male	Tumkur -II
6504	99	11-11-2024	70	12-04-1954	Male	SRINAGAR
6505	99	11-11-2024	41	04-04-1983	Male	SRINAGAR
6506	8	06-11-2024	56	29-10-1968	Male	SRINAGAR
6507	12	11-11-2024	26	01-11-1998	Female	SRINAGAR
6508	10	11-11-2024	26	10-02-1999	Male	SRINAGAR
6509	10	19-11-2024	25	16-09-1999	Male	CHENNAI
6510	10	18-11-2024	31	20-12-1993	Male	HAZARIBAGH
6511	10	18-11-2024	21	10-07-2003	Male	HAZARIBAGH
6512	12	13-11-2024	25	27-08-1999	Male	RAJPURA
6513	10	19-11-2024	28	17-06-1996	Male	FIROZEPUR
6514	10	20-11-2024	25	14-07-1999	Female	JAIPUR
6515	8	21-11-2024	42	01-10-1982	Male	NEWDELHI
6516	10	20-11-2024	48	29-07-1976	Male	BHOPAL
6517	10	20-11-2024	31	28-10-1993	Male	PATNA
6518	10	18-11-2024	42	15-05-1982	Male	Balrampur
6520	99	21-11-2024	29	01-04-1995	Male	Kayathar
6521	99	19-11-2024	30	21-08-1994	Male	PATIALA
6522	99	02-12-2024	28	12-08-1996	Male	INDORE
6524	99	02-12-2024	31	23-09-1993	Male	Vadipatti
6525	10	02-12-2024	36	09-06-1988	Female	Vadipatti
6526	10	02-12-2024	27	22-04-1997	Female	Vadipatti
6527	10	02-12-2024	30	31-12-1994	Female	Ramanathapuram-Tele Health
6528	10	02-12-2024	26	11-01-1999	Female	Ramanathapuram-Tele Health
6529	10	02-12-2024	36	02-05-1988	Female	NAGAPATTINAM
6530	10	02-12-2024	28	15-07-1996	Female	NAGAPATTINAM
6532	13	02-12-2024	44	23-04-1980	Male	Kayathar
6533	10	02-12-2024	29	21-09-1995	Male	JAISALMER
6534	10	02-12-2024	31	05-07-1993	Male	SIROHI
6535	10	02-12-2024	25	12-08-1999	Male	SIROHI
6536	10	02-12-2024	23	01-01-2002	Male	PATNA
6537	10	02-12-2024	43	01-04-1981	Female	CHANDIGARH
6538	10	02-12-2024	44	27-06-1980	Male	PATHANKOT
6539	10	02-12-2024	32	10-02-1993	Male	DHAR
6540	10	02-12-2024	27	16-03-1998	Male	DHAR
6541	10	02-12-2024	21	11-07-2003	Female	NEW DELHI
6542	98	02-12-2024	33	09-07-1991	Female	Chennai-Elders Helpdesk
6543	10	02-12-2024	34	20-08-1990	Male	BANGALORE
6544	99	02-12-2024	67	22-11-1957	Female	BHOPAL
6546	99	02-12-2024	32	02-10-1992	Male	Paravada
6547	10	02-12-2024	34	10-11-1990	Female	PATIALA
6548	10	05-12-2024	22	15-03-2003	Female	DEHRADUN
6549	10	02-12-2024	35	23-11-1989	Male	SRINAGAR
6550	14	02-12-2024	27	12-10-1997	Male	SRINAGAR
6551	10	02-12-2024	21	25-06-2003	Male	PATIALA

6554	10	02-12-2024	31	16-04-1993	Male	Asifabad
6555	10	02-12-2024	29	23-06-1995	Male	Asifabad
6556	10	02-12-2024	33	05-08-1991	Male	Choutuppall
6557	10	02-12-2024	32	18-06-1992	Male	Choutuppall
6558	10	02-12-2024	23	31-08-2001	Female	Paravada
6559	10	02-12-2024	34	12-06-1990	Male	Paravada
6560	10	02-12-2024	25	03-07-1999	Male	Sankili
6561	10	02-12-2024	37	08-07-1987	Female	Sankili
6562	99	03-12-2024	29	02-09-1995	Male	GEWALA
6564	10	02-12-2024	30	16-02-1995	Male	PATHANKOT
6566	10	02-12-2024	24	08-03-2001	Male	Balrampur
6569	98	02-12-2024	36	04-03-1989	Male	Hyderabad - HelpDesk
6570	98	02-12-2024	26	09-07-1998	Female	Hyderabad - HelpDesk
6571	98	02-12-2024	25	05-06-1999	Female	Hyderabad - HelpDesk
6572	10	11-12-2024	30	04-06-1994	Female	TIRUNELVELI
6573	12	02-12-2024	27	04-06-1997	Female	Kayathar
6574	10	09-12-2024	30	13-12-1994	Female	Tumkur -II
6575	12	16-12-2024	23	02-03-2002	Male	GEWALA
6577	99	02-12-2024	30	04-07-1994	Male	Dholnara
6579	98	02-12-2024	23	26-01-2002	Female	Hyderabad - HelpDesk
6581	10	09-12-2024	41	26-06-1983	Female	PALI
6582	13	11-12-2024	32	03-04-1992	Male	Kawai Driver
6583	12	02-12-2024	34	02-01-1991	Male	KAWAI
6584	10	11-12-2024	29	28-03-1995	Male	KAWAI
6586	14	02-12-2024	36	07-04-1988	Female	NEYVELI
6587	10	01-12-2024	24	15-03-2001	Female	Goa - Palliative Care
6588	13	02-12-2024	56	15-06-1968	Male	Goa - Palliative Care
6589	10	02-12-2024	34	24-10-1990	Male	PAURI
6590	12	02-12-2024	37	28-05-1987	Female	Tumkur -II
6591	10	02-12-2024	30	22-10-1994	Male	CHITRADURGA
6593	99	19-12-2024	35	08-01-1990	Male	Prayagraj -MHU
6594	99	19-12-2024	28	07-12-1996	Male	Agra 2
6595	12	17-12-2024	27	05-05-1997	Female	Karjat
6596	10	18-12-2024	25	01-04-1999	Male	VARANASI
6597	13	18-12-2024	32	15-06-1992	Male	VARANASI
6598	12	19-12-2024	23	20-07-2001	Male	VARANASI
6599	12	19-12-2024	26	27-08-1998	Male	VARANASI
6601	12	19-12-2024	21	07-02-2004	Male	Prayagraj -MHU
6602	10	19-12-2024	28	16-10-1996	Male	Prayagraj -MHU
6603	12	19-12-2024	22	10-06-2002	Male	Agra 2
6606	8	19-12-2024	44	25-06-1980	Male	JAIPUR
6607	8	02-01-2025	32	04-01-1993	Male	NEWDELHI
6608	10	03-01-2025	26	25-12-1998	Male	SAHARANPUR
6609	99	02-12-2024	27	04-01-1998	Female	TORANAGALLU
6612	99	03-01-2025	27	04-10-1997	Male	NAGAPATTINAM-II
6613	99	30-12-2024	28	15-02-1997	Male	JAIPUR
6614	99	21-12-2024	27	02-02-1998	Male	FARAKKA
6615	98	01-01-2025	27	20-05-1997	Male	Chennai-Elders Helpdesk
6616	12	02-01-2025	31	17-03-1994	Female	AVADI
6617	13	01-01-2025	20	06-04-2004	Male	Tumkur -II
6618	13	01-01-2025	21	04-05-2003	Male	Bangalore Triveni MHU
6619	12	01-01-2025	21	24-09-2003	Male	PALI
6620	12	02-01-2025	31	27-08-1993	Male	SAHARANPUR
6621	12	03-01-2025	36	03-11-1988	Male	SAHARANPUR
6622	12	02-01-2025	33	15-06-1991	Female	SAHARANPUR

6623	12	02-01-2025	28	16-01-1997	Male	SAHARANPUR
6624	12	06-01-2025	39	07-07-1985	Male	Prayagraj -MHU
6625	98	02-01-2025	31	24-08-1993	Male	LEH -HelpDesk
6626	98	02-01-2025	27	07-06-1997	Male	LEH -HelpDesk
6627	98	02-01-2025	25	13-03-2000	Female	LEH -HelpDesk
6628	12	06-01-2025	25	19-03-1999	Male	GEWALA
6629	10	06-01-2025	38	25-07-1986	Male	CHAMOLI
6630	10	06-01-2025	31	28-06-1993	Male	CHAMOLI
6631	10	03-01-2025	26	07-05-1998	Male	MIRZAPUR
6632	99	01-01-2025	26	10-08-1998	Male	Mandvi
6633	99	01-01-2025	25	28-05-1999	Male	Kadi
6634	99	16-01-2025	27	10-10-1997	Male	KAWAI
6636	99	03-01-2025	73	10-01-1952	Male	MIRZAPUR
6637	12	03-01-2025	23	03-07-2001	Male	MIRZAPUR
6638	13	03-01-2025	26	07-07-1998	Male	MIRZAPUR
6639	12	10-01-2025	34	01-07-1990	Male	Jaipur Bassi Block
6640	12	10-01-2025	41	20-08-1983	Male	Jaipur Jhotwara Block
6641	12	10-01-2025	23	04-05-2001	Male	UDAIPUR
6642	12	10-01-2025	49	08-05-1975	Female	Jaipur Sanganer Block
6643	12	01-01-2025	21	01-06-2003	Female	Kadi
6644	9	01-01-2025	30	10-12-1994	Female	Goa - Medical College
6645	10	01-01-2025	40	09-09-1984	Male	DHAR
6646	10	04-01-2025	27	15-06-1997	Male	Mayurbhanj
6647	8	02-01-2025	36	02-03-1989	Male	RAIGARH- HOME CARE
6648	10	02-01-2025	30	08-11-1994	Male	Tamnar
6650	99	02-01-2025	29	22-05-1995	Male	AGRA
6651	99	09-01-2025	28	14-02-1997	Male	Borigumma
6653	99	06-01-2025	25	15-06-1999	Male	Chamrajnagar
6654	99	02-12-2024	26	14-06-1998	Male	Bangalore Agecare
6655	10	15-01-2025	34	28-07-1990	Male	GANDHIDHAM
6656	13	20-01-2025	29	01-05-1995	Male	GANDHIDHAM
6658	10	20-01-2025	23	30-03-2001	Male	SOLAN-Shivalik
6659	9	14-01-2025	35	31-03-1989	Female	Goa - Medical College
6660	14	02-01-2025	35	06-03-1990	Female	CUDDALORE
6661	12	16-01-2025	31	17-01-1994	Female	RAIPUR
6662	99	16-01-2025	32	18-08-1992	Male	JHARSUGUDA
6663	12	21-01-2025	29	15-07-1995	Male	Jaipur Amber Block
6665	99	27-01-2025	30	07-10-1994	Male	Gummidipoondi
6666	99	20-01-2025	27	11-10-1997	Male	SATARA
6667	99	01-02-2025	27	01-10-1997	Male	SOLAN-Shivalik
6668	99	27-01-2025	25	30-04-1999	Female	KANJIKUZHLY
6669	99	01-02-2025	25	12-08-1999	Male	DHAR
6670	10	01-02-2025	34	04-10-1990	Male	FIROZEPUR
6671	12	04-02-2025	24	20-08-2000	Male	SOLAN-Shivalik
6672	13	01-02-2025	37	17-07-1987	Male	SOLAN-Shivalik
6673	98	03-02-2025	27	04-10-1997	Female	LEH -HelpDesk
6674	10	01-02-2025	28	20-11-1996	Female	TIRUNELVELI
6675	12	01-02-2025	32	20-11-1992	Female	INDORE
6676	12	05-02-2025	23	31-12-2001	Female	Godda
6677	9	03-02-2025	23	28-12-2001	Female	AHMEDABAD
6678	14	01-02-2025	23	01-01-2002	Male	GEWALA
6679	13	01-02-2025	20	01-06-2004	Male	Bangalore -EXXON
6680	99	01-02-2025	30	20-08-1994	Male	SINGRAULI
6681	99	03-02-2025	40	28-01-1985	Female	LUCKNOW
6682	99	01-02-2025	27	10-09-1997	Male	BELLARY

6683	99	10-02-2025	24	28-12-2000	Male	CUDDALORE
6684	12	10-02-2025	22	28-08-2002	Male	Agra 2
6685	10	03-02-2025	32	23-08-1992	Female	PAURI
6686	12	03-02-2025	33	10-10-1991	Male	DEHRADUN
6687	12	01-02-2025	27	14-09-1997	Female	Bommasandra
6688	13	01-02-2025	30	21-10-1994	Male	CHITRADURGA
6689	10	01-02-2025	29	15-01-1996	Male	GEWALA
6690	12	10-02-2025	25	27-02-2000	Male	RAIGARH- HOME CARE
6691	13	01-02-2025	28	09-08-1996	Male	RAIGARH II
6692	99	13-02-2025	67	05-10-1957	Male	SIMHADRI
6693	13	06-02-2025	42	06-06-1982	Male	Bawal
6694	10	17-02-2025	21	16-05-2003	Female	AHMEDABAD
6695	12	01-02-2025	32	06-11-1992	Male	CHITRADURGA
6696	12	01-02-2025	38	15-06-1986	Male	CHITRADURGA
6697	10	14-02-2025	48	09-08-1976	Female	Nandapur
6698	99	10-02-2025	32	06-01-1993	Female	Bangalore Agecare
6699	99	01-02-2025	28	15-02-1997	Male	TUMKUR
6700	10	04-03-2025	37	20-03-1987	Female	Agra 2
6701	10	03-03-2025	32	20-08-1992	Male	GHOGHAMBA
6702	99	03-03-2025	30	18-03-1995	Male	CHENNAI
6703	99	03-03-2025	29	27-01-1996	Female	NAGAPATTINAM
6704	99	03-03-2025	28	15-02-1997	Female	COIMBATORE
6705	99	01-03-2025	72	17-10-1952	Male	ANGUL
6706	10	10-03-2025	31	15-05-1993	Male	CHENNAI
6707	13	01-03-2025	25	10-08-1999	Male	Prayagraj -MHU
6708	10	11-03-2025	25	13-07-1999	Male	Mayurbhanj -Kusumi
6709	99	01-03-2025	27	11-08-1997	Female	BIJAPUR
6710	10	10-03-2025	24	03-11-2000	Male	BANGALORE
6711	12	12-03-2025	29	05-04-1995	Male	MOGA
6712	98	04-03-2025	32	30-04-1992	Male	GREATER NOIDA - JIIMS
6713	98	04-03-2025	24	10-11-2000	Male	GREATER NOIDA - JIIMS
6714	98	04-03-2025	30	08-02-1995	Female	GREATER NOIDA - JIIMS
6715	10	01-03-2025	34	09-12-1990	Male	Shrawasti
6716	10	01-03-2025	24	04-05-2000	Male	Shrawasti
6717	12	12-03-2025	28	12-09-1996	Male	VARANASI
6718	12	15-03-2025	22	21-06-2002	Male	PRAYAGRAJ
6719	12	01-03-2025	22	07-05-2002	Female	Tamnar
6720	98	17-03-2025	42	01-10-1982	Female	AIIMS - BHOPAL
6721	98	17-03-2025	39	21-06-1985	Female	AIIMS - BHOPAL
6722	98	17-03-2025	29	01-01-1996	Male	AIIMS - BHOPAL
6723	12	10-03-2025	25	18-06-1999	Female	PALI

HDFC ERGO General Insurance Company Limited



April 05, 2024

HELPPAGE INDIA

C-14 QUTUB INSTITUTIONAL AREA INDIA NEW DELHI
SOUTH DELHI DELHI - 110016

Dear Customer,

Sub: HDFC ERGO Group Health Insurance Policy No: 2999205350618801000

We thank you for having preferred us for your *Insurance* requirements. We at HDFC ERGO believe "*Insurance*" not only to be an assurance to indemnify in the event of unfortunate circumstances, but one that signifies protection and support you can count on when you need it most.

The Insurance Policy enclosed is a written agreement providing confirmation of our responsibility towards you that puts insurance coverage into effect against stipulated perils.

The Policy has been designed so as to augment the key facets and aims to provide information in a clear cut manner.

Please note that the policy has been issued based on the information contained in the proposal form and / or documents received from you or your representative / broker. Where the proposal form is not received, information obtained from you or your representative / broker, whether orally or otherwise, is captured in the policy document.

If you wish to contact us in reference to your existing policy and /or other general insurance solutions been offered by us, you may write to our correspondence address as mentioned below. Alternatively, you may visit our website www.hdfcergo.com. To enable us to serve you better, you are requested to quote your Policy Number in all correspondences.

Thanking you once again for choosing HDFC ERGO General Insurance Company Limited and looking forward to many more years of association.

Yours sincerely,

Authorized Signatory

Insurance is the subject matter of solicitation



HDFC ERGO GROUP HEALTH INSURANCE POLICY

SCHEDULE

Policy No: 2999205350618801000

Issued at Mumbai

- Item 1. Name of the Policyholder : HELPAGE INDIA
- Item 2. Intermediary Name : KALPANA SHARMA
- Item 3. Date of Proposal Form : April 02, 2024
- Item 4. Mailing address of the Policyholder : C-14 QUTUB INSTITUTIONAL AREA INDIA NEW DELHI SOUTH DELHI DELHI - 110016
- Item 5. GSTIN State : DELHI
- Item 6. State Code : 07
- Item 7. GSTIN : NA
- Item 8. Policy Period : From 00:01 hours: April 02, 2024
To (Midnight) : April 01, 2025
- Item 9. Operative Time : 24 Hours
- Item 10. Territory of Insurance : India
- Item 11. Annual Premium :
- Item 12. Premium & Coverage Statement : Refer to Page 5
- 12.1 Premium Details
- 12.2 Details of Insured Persons Covered
- 12.3 Details of Third Party Administrator
- Item 13. Extensions Opted
- 13.1 Basis of Sum Insured – Individual
- 13.2 If on Floater Sum Insured basis -Family Definition - Employee,
- 13.3 Maternity Benefit Extension – Not Covered
- 13.4 Waiting Period:
- First thirty (30) days - Not Applicable
 - One (1) year for specified diseases - Not Applicable
 - Forty eight (48) months for Pre-existing condition - Not Applicable



Item 14. Special Conditions

- 14.1 Domiciliary Hospitalisation Coverage: Not Applicable
- 14.2 Pre & Post Hospitalization expenses are covered for 30 & 60 days respectively.
- 14.3 Room rent restriction – Applicable
- Normal Room – 2% of Sum Insured per day
 - Intensive Care Unit – 4% of Sum Insured per day
- Room rent and all other related charges covered in accordance with room rent restriction or actual, whichever is less. In the event of a person getting admitted in higher category, the related charges will be pro-rated to the eligible room rent limit. All other related charges will among other things include OT Charges, Doctors Charges, Nursing charges, Diagnostics and the same will be payable as per room rent entitlement.
- 14.4 Ambulance charges payable upto 1% of Sum Insured subject to max. upto Rs. 2K per claim for insured's transportation to nearest hospital on physician's advice
- 14.5 Cochlear Implant is covered upto 50% of Sum Insured
- 14.6 Covid – 19 shall be covered from day 1
- 14.7 Increase in SI for promotion:- Increase in sum Insured will apply from the date of promotion. This would be done only once during the policy period for all employees at one go. All conditions for which claims have already been incurred prior to date of enhancement, the enhanced sum insured will not be applicable. No claims for enhanced sum insured will be entertained for conditions contracted between policy inception date of sum insured enhancement date
- 14.8 Claim disbursement /Payment will be issued in employee name / account
- 14.9 All Modern Treatments are covered as per IRDA Guidelines up to 50% of sum Insured
- 14.10 Claim servicing of the policy will be done by SAFEWAY INSURANCE TPA PVT. LTD..
- 14.11 Maximum Age for Employee, Spouse and Dependent Parents/Dependant Siblings shall be 80 years and dependent children shall be covered upto 21 years or upto 25 years if the child is in full time education. (subject to their coverage in the policy)
- 14.12 Additions and deletions of employee will be done on prorata basis from day 1 for additions subject to sufficient CD balance being maintained. Addition of an Employee must be intimated within 30 days from the date of joining.
- 14.13 Dependents to be declared at the time of inception of the policy. No midterm inclusion of dependents allowed except for spouse after marriage and child by birth. Addition of family members must be intimated within 30 days after marriage or child birth.
- 14.14 It shall be a condition precedent to the Company's liability under this policy that all supporting documents relating to the claim must be submitted within thirty (30) days from the date of discharge from the hospital. In case of post-hospitalization treatment days, all claim documents should be submitted to the TPA within seven (7) days after completion of such treatment.
- 14.15 Surcharges, service charges, miscellaneous charges, and other non treatment related expenses are not payable.
- 14.16 No individual can be covered more than once in the policy – specifically if an employee and spouse are working for the same organization both cannot cover each other and cannot cover the same set of parents. In case at the time of claim it is found that the member is covered twice a deletion endorsement of member will be effected to remove that member there will be no refund for such deletions.
- 14.17 The aforementioned is renewal for Policy No. 2999205350618800000.

HDFC ERGO General Insurance Company Limited



Subject otherwise to terms, conditions & exclusions HDFC ERGO Group Health Insurance Policy.

Signed for and on behalf of HDFC ERGO General Insurance Company Limited, on **April 05, 2024**

A Sharma

Authorized Signatory

Goods and Service Tax Registration No – 07AABCL5045N1ZA

The contract will be cancelled ab initio in case; the consideration under the policy is not realized.

The stamp duty of Rs. 1.00 (Rupee One Only) paid by Demand Draft, vide Receipt/Challan no Order Certificate NO. LOA/ENF-1/CSD/34/2023/ (Validity Period Dt. 28/12/2023 to Dt. 31/12/2026) /6045 Date 27/Dec/2023 as prescribed in (Government of Maharashtra)

Branch: GROUND FLOOR,EROS TOWER OPP. NEHRU PLACE METRO STATION, Delhi 110019.

Intermediary Code: 200418099541

Intermediary Name: KALPANA SHARMA



Premium & Coverage Statement

(Item. 12 of Schedule, Attached to and forming part of Policy No: 2999205350618801000)

12.1 Premium Details

8. Premium Payable:	
Net Premium	
Add: GST 18%	
Total Amount Payable	

Invoice Number: 205350618801000

SAC Code: 9971

Note: "Goods and Services Tax for this invoice is not payable under reverse charge basis"

"I/ We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule"

"This is with reference to the KYC norms prescribed by the Authority, whereby this policy is being issued relying on the undertaking / power of attorney / letter of authorisation / Board resolution provided by the authorized signatory of your Entity. Should the signatory be not authorized to provide such a declaration, please inform the Company within 15 days from the date of receipt of this policy"

12.2 Details of Insured Persons Covered

Summary of Lives Covered

Sum Insured	0-35	36-45	46-55	56-65	66-70	71-75	>76	Total No. of Lives
	497	271	170	53	17	9	0	1017
Grand Total	497	271	170	53	17	9	0	1017

12.3 Details of Claims Administrator

Name and Address of Claims Administrator

SAFeway INSURANCE TPA PVT. LTD.

Address: 815, Vishwa Sadan, District Centre, Janakpuri, New Delhi-110058

HelpLine No - 18001025671
 Tollfree No - 18001025671
 Contact No: - 18001025671
 Fax: 011-41425672

Authorization related issues (request, extension, enhancement, etc)
Pre-auth:Mail ID - info@safewaytpa.in

Network Service Provider related issues
NSP Mail ID: networking@safewaytpa.in

Claim related issues (intimation, status, query, payments, dispatch, etc)
Claims Mail ID: intimation@safewaytpa.in, query@safewaytpa.in

Policy No. 2999205350618801000

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HDFC ERGO GROUP HEALTH INSURANCE POLICY

Operating Clause

We will provide Insurance coverage to the **Insured Person(s)** under this **Policy** up to **Sum Insured** including **Restore/Double Restore, Cumulative Bonus** as applicable and subject to waiting periods, limits, Sub-limits, **Co-payment, Deductible, Aggregate Deductible** as specified in Schedule of Coverage on the **Policy Schedule/Certificate of Insurance**. The **Policy** is based on statements, disclosures, declarations made in the Proposal form/Enrollment form and Medical reports.

Certain words used in the Coverage description have specific meanings which are mentioned in Definitions and which impacts the Coverage. All such words are mentioned in **Bold** to enable **You** to identify that the particular word has a specific meaning for which **You** need to refer Section - D, Definitions.

A. Coverages

I. Hospitalization Expenses

We will pay under below listed Covers on **Medically Necessary Hospitalization** of an **Insured Person** due to **Illness** or **Injury** sustained or contracted during the **Period of Insurance** subject to terms and conditions as listed below.

a. Medical Expenses

- i. **Room Rent** and boarding charges
- ii. **Intensive Care Unit** charges
- iii. Consultation fees & Nursing charges
- iv. Anesthesia, blood, oxygen, operation theatre charges, surgical appliances charges
- v. Medicines, drugs, and consumables
- vi. Diagnostic procedures related to admissible hospitalization claim
- vii. The Cost of prosthetic and other Medical devices or equipment if implanted internally during a Surgical Procedure.

b. Pre-Hospitalization Medical Expenses Cover

We will pay for the **Pre-Hospitalization Medical Expenses** incurred during the 30 days immediately before **Hospitalization** of an **Insured Person**.

c. Post-Hospitalization Medical Expenses Cover

We will pay for the **Post-Hospitalization Medical Expenses** incurred upto 60 days from the date **Insured Person** is discharged from **Hospital**.

d. Domiciliary Hospitalization

We will pay the **Medical Expenses** incurred on **Domiciliary Hospitalization** of the **Insured Person** prescribed by treating **Medical Practitioner**.

e. Organ Donor Expenses

We will pay **Medical Expenses** covered under Section A.I.a towards organ donor's **Hospitalization** for harvesting of the donated organ where an **Insured Person** is the recipient subject to condition that;

- i. The organ donor is any person whose organ has been made available in accordance and in compliance with The Transplantation of Human Organ (amendment) Act, 2011, Transplantation of Human Organs and Tissues Rules, 2014 and other applicable Laws and/or Regulations.
- ii. **Hospitalization** Claim under Section A.1 is admissible under the coverage for the **Insured Person**
- iii. The Organ Donor's **Pre-Hospitalization** and **Post-Hospitalization Medical Expenses** are excluded under the **Policy**.
- iv. Any other **Medical Expenses** or **Hospitalization** consequent to the harvesting is excluded under the Coverage.

f. Day Care Procedures

We will pay for the **Medical Expenses** under Section A.I.a on **Hospitalization** of **Insured Person** in **Hospital** or **Day Care Centre** for **Day Care Treatment**.

g. Road Ambulance Cover

For each admissible Claim under Section A.I.a and A.I.f, we will pay for expenses incurred on Road Ambulance Services if **Insured Person** is required;

- i. to be transferred to the nearest **Hospital** following an emergency (namely a sudden, urgent, unexpected occurrence or event, bodily alteration or occasion requiring immediate medical attention)
- ii. or from one **Hospital** to another **Hospital**
- iii. or from **Hospital** to Home (within same City) following **Hospitalization**

II. Optional Covers

Insuring Clause

In consideration of payment of additional Premium or reduction in the Premium as applicable, it is hereby declared and agreed that **We** will pay/restrict the **Medical Expenses** under below listed Covers subject to waiting periods and limits as specified in the Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

Subject to otherwise all other terms, conditions, exclusions and waiting periods applicable to the **Policy**. These Covers are optional and applicable only if opted for and up to the **Sum Insured** or limits mentioned on the Schedule of Coverage in the **Policy Schedule**/Certificate of Insurance.

1. Pre-Existing Disease Waiting Period Modification Option

On availing this option, **Waiting Periods** listed under Section B.I.i shall stand modified as mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance. All other terms and Conditions of the **Policy** shall remain unaltered.

2. Specific Illness Waiting Period Modification Option

On availing this option, **Waiting Periods** listed under Section B.I.ii shall stand modified as mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

All other terms and Conditions of the Policy shall remain unaltered.

3. Modification of General Waiting Period

On availing this option, **Waiting Periods** listed under Section B.I.iii shall stand modified as mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

All other terms and Conditions of the Policy shall remain unaltered.

4. Modification of Pre and Post Hospitalization Medical Expenses

On availing this option, **Pre and Post Hospitalization Medical Expenses** limit specified under Section A.I.b and A.I.c respectively shall stand modified as mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

All other terms and Conditions of the Policy shall remain unaltered.

5. Room Rent and ICU Modification Option

On availing this option, **Room Rent** and **ICU** limits under Section A.I. shall stand modified as mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

Proportionate Deduction

In case **Room Rent** during **Hospitalization** of **Insured Person** exceeds the aforesaid limits, the reimbursement/payment of **Room Rent** charges including all **Associated Medical Expenses** incurred at **Hospital** shall be affected in the same proportion as the admissible rate per day bears to the actual rate per day of **Room Rent** charges. This condition is not applicable in respect of **Hospitals** where differential billing for **Associated Medical Expenses** is not followed based on Room Rent.

6. Road Ambulance Modification Option

On availing this option, Road Ambulance limit specified under Section A.I. shall stand modified as mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

7. Hospital Cash

i. Hospital Cash

If **Insured Person** contracts **Illness** or sustains **Injury** during **Period of Insurance**, which results in **Medically Necessary**.

- i. **Hospitalization**
- ii. **Domiciliary Hospitalization**
- iii. **Hospitalization for Alternative Treatments**

of an **Insured Person** within India, we will pay per day **Sum Insured** as specified in the Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance subject to maximum number of benefit days for each continuous and completed period of 24 hours of such **Hospitalization**.

The payment is subject to **Time Deductible** specified in the Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

ii. Specific Conditions applicable to Hospital Cash

For the purpose of application of **Time Deductible**, successive **Hospital** stays with less than sixty days between each one for a same cause, shall be deemed as one **Hospitalization** event.

8. Preventive Health Check Up

We will indemnify the **Insured Person** towards the cost of **Preventive Health Check - Up**, up to the limit mentioned on the Schedule of Coverage in the **Policy Schedule**/Certificate of Insurance.

Other terms and Conditions applicable to this Coverage

- The Coverage will be applicable as per the eligibility as mentioned on the Schedule of Coverage in the **Policy Schedule**/Certificate of Insurance.
- In case of Annual Eligibility, the percentage and limit will be calculated on expiring Coverage **Sum Insured** and will be only applicable to **Insured Person** covered under expiring Coverage, subject to no claim under Base Coverage.
- In case of Eligibility at the end of each block of continuous three years, the percentage and limit will be calculated on Average **Sum Insured** during block of three years and will be only applicable to **Insured Person** covered for all previous 3 years.
- Claim under this Cover does not impact the **Sum Insured** or the eligibility for **Cumulative Bonus**.
- The test reports received under this Coverage will not be utilized for re-underwriting the expiring coverage of **Insured Person**

9. Co-Payment

On availing this option, **Co-Payment** as mentioned in the Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance will be applied on each and every admissible claim.

10. Alternative Treatment

We will pay **Medical Expenses** covered under Section A.I, on **Medically Necessary Hospitalization of Insured Person** in **Ayush Hospital** upto the limit mentioned in the Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance for following **Alternative Treatments** prescribed by **Medical Practitioner**:

- Ayurvedic
- Unani
- Siddha
- Homeopathy

11. Deletion of Domiciliary Hospitalization

On availing this option, Domiciliary Hospitalization under Section A.I. shall stand deleted under the **Policy**.

12. Second Medical Opinion for Major Illness

We will pay expenses incurred towards **Second Medical Opinion** availed from **Medical Practitioner** in respect of **Major Illness** listed below through our **Network Provider**.

The Coverage under this benefit shall cease to exist upon availing Second Opinion for any one **Major Illness** as listed below.

Major Illness Covered			
1	Cancer of specified severity	5	Major Organ/Bone Marrow Transplant
2	Open Chest CABG	6	Multiple Sclerosis with Persisting Symptoms
3	Myocardial Infarction (First Heart Attack of specific severity)	7	Permanent Paralysis of Limbs

4	Kidney Failure requiring regular dialysis	8	Stroke resulting in Permanent Symptoms
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Disclaimer -Second Medical Opinion Services are being offered by Network providers through its portal/mail/App or what so ever electronic form to Policyholders/Insured of HDFC ERGO HEALTH INSURANCE LIMITED. In no event shall HDFC ERGO be liable for any direct, indirect, punitive, incidental, special consequential damages or any other damages whatsoever caused to the Policyholders/Insured of HDFC ERGO while receiving the services from Network providers.

13. Restore Benefit

Instant addition of 100% Base **Sum Insured** on complete or partial utilization of **Your** existing **Sum Insured** and **Cumulative Bonus** (if applicable) during the **Policy Year**. The Total amount (Base **Sum Insured**, **Cumulative Bonus** and **Restore Sum Insured**) will be available to all Insured Persons for all claims under the Coverage during the current **Policy Year** and subject to the condition that single claim in a **Policy Year** cannot exceed the sum of Base **Sum Insured**, and the **Cumulative Bonus** (if applicable).

Conditions for Restore benefit:

- a. The **Sum Insured** will be restored only once in a **Policy Year**.
- b. If the Restored **Sum Insured** is not utilized in a **Policy Year**, it will expire.

In case of a Family Floater Policy, **Restore Sum Insured** will be available on floater basis for all Insured Persons in the **Policy**.

14. Double Restore Benefit

- i. Instant addition of 100% Base **Sum Insured** on complete or partial utilization of **Your** existing **Policy Sum Insured** and **Cumulative Bonus** (if applicable) during the **Policy Year**. The Total amount (Base **Sum Insured**, **Cumulative Bonus** and **Restore Sum Insured** when added) will be available to all Insured Persons for all claims under the Coverage during the current **Policy Year** and subject to the condition that single claim in a **Policy Year** cannot exceed the sum of Base **Sum Insured** and the **Cumulative Bonus** (if applicable).
- ii. Post complete utilization of **Your** Base **Sum Insured** and **Cumulative Bonus** (if applicable), if **You** partially or completely utilize your **Restore Sum Insured** (as given in above), another 100% of Base **Sum Insured** would be added to **Your** Restored **Sum Insured** available to all Insured Persons for claims under the Coverage during the current **Policy Year** and subject to the condition that single claim in a **Policy Year** cannot exceed the Base **Sum Insured**.

Conditions for Double Restore benefit:

- a. The Restore or Double Restore **Sum Insured** will be applied only once for the **Insured Person** during a **Policy Year**
- b. If the Restore or Double Restore **Sum Insured** is not utilized in a **Policy Year**, it shall not be carried forward to any subsequent **Policy Year**.
- c. In case of a Family Floater Policy, **Restore or Double Restore Sum Insured** will be available on floater basis for all Insured Persons in the **Policy**.
- d. The Restore or Double Restore **Sum Insured** can be used for claims made by the Insured Person in respect of the benefits stated in Section A.1

15. Cumulative Bonus

On each continuous **Renewal** of the Coverage with **Us**, **We** will apply percentage of Base **Sum Insured** as specified in the Schedule of Coverage in the **Policy Schedule**/Certificate of Insurance under expiring Cover as **Cumulative Bonus** in the Coverage provided that;

- i. There has been no claim under the Coverage in expiring year.

- ii. **Cumulative Bonus** will be reduced at the same rate as accrued in the event of admissible Claim under the Coverage.
- iii. **Cumulative Bonus** can be accumulated upto the limit mentioned in the Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.
- iv. **Cumulative Bonus** applied will be applicable only to **Insured Person(s)** covered under the expiring Coverage and who continue to remain insured on **Renewal**.

16. Maternity Cover

We will pay **Maternity Expenses** to the **Insured Person** under Section A.I.a, incurred during the **Policy Period**. The Coverage is subject to the waiting periods and limits as mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

On opting this cover, General Exclusion xv) under Section B.II. What is not Covered stands deleted.

We will not make payment for any claim in respect of any **Insured Person** caused by, arising from or attributable to any of the following unless expressly stated to the contrary in the **Policy**

- i. **Pre-Hospitalization and Post-Hospitalization Medical Expenses** are not payable under this cover.
- ii. We will not pay any expenses related to ectopic pregnancy under this cover. Ectopic pregnancy will be covered as a part of expenses under Section A.I only.
- iii. Treatment for impotency, treatment to effect infertility, surrogate or vicarious pregnancy, voluntary termination of pregnancy, procedures to assist birth control, contraceptive supplies.

17. Pre and Post Natal Expenses

On availing this option, We will pay **Medical Expenses** incurred during **Pre** and **Post Natal** period upto the limits mentioned in the Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

18. Baby Cover from Day 1

We will pay **Medical Expenses** incurred towards **Medically Necessary Treatment** of a **Newborn Baby**, as advised by the treating **Medical Practitioner**, up to the limit mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

19. Infertility Cover

We will pay **Medical Expenses** under Section A.I.a incurred for infertility treatment, assisted reproductive treatments undertaken by Insured Person on advice of a **Medical Practitioner**, up to the limit mentioned in Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance. This cover is applicable for both Male and Female **Insured Person**.

On opting this cover, General Exclusion xiv) under Section B.II - What is not Covered stands deleted.

20. Personal Accident Cover

- i. Accidental Death

We will pay the **Sum Insured**, as specified in the Schedule of Coverage on **Policy Schedule**/Certificate of Insurance, if **Insured Person** sustains **Injury** during the **Period of Insurance**, which shall within twelve months of its occurrence be the sole and direct cause of Death of **Insured Person**.

a. Disappearance

We will pay the **Sum Insured** in the event if Insured Person's body cannot be located within 365 Days;

- a. after the forced landing, stranding, sinking or wrecking of a conveyance in which **Insured Person** was known to be a passenger during **Period of Insurance** or;
- b. after and as a result of any **Catastrophic Event** during **Period of Insurance**

it shall be deemed, subject to all other terms and provisions of the Policy, that **Insured Person** shall have suffered Death due to **Accident** under the Coverage.

If at any time, after the payment of the **Accidental** death benefit, it is discovered that the **Insured Person** is still alive, claims settled in respect of Disappearance benefit shall be reimbursed in full to the **Company**.

Specific Conditions applicable to Accidental Death

The Coverage under this Section terminates on admissibility of Claim equal to the **Sum Insured**

ii. Permanent Disablement

If **Insured Person** sustains **Injury** during **Period of Insurance**, which shall within twelve (12) months of its occurrence be the sole and direct cause of Permanent Disablement, we will pay in accordance to the Benefit table below upto maximum of **Sum Insured** as mentioned in the **Schedule of Coverage** on the **Policy Schedule/Certificate of Insurance** provided such disablement is certified by the **Medical Practitioner**

i. Benefit Table A

S.No	The Disablement	% of Base Sum Insured Payable
1	Permanent Total Disablement	100%
2	Permanent and incurable insanity	100%
3	Permanent Total Loss of two Limbs (physical severance of Limbs)	100%
4	Permanent Total Loss of Sight in both eyes	100%
5	Permanent Total Loss of Sight of one eye and one Limb (physical severance of Limbs)	100%
6	Permanent Total Loss of Speech	100%
7	Complete removal of the lower jaw	100%
8	Permanent Total Loss of Mastication	100%
9	Permanent Total Loss of the central nervous system or the thorax and all abdominal organs resulting in the complete inability to engage in any job and the inability to carry out Daily Activities essential to life without full time assistance	100%
10	Permanent Total Loss of Hearing in both ears	75%
11	Permanent Total Loss of one Limb (physical severance of Limbs)	50%
12	Permanent Total Loss of Sight of one eye	50%

ii. Benefit Table B

S.No	The Disablement	% of Base Sum Insured Payable
1	Permanent Total Disablement	100%
2	Permanent and incurable insanity	100%
3	Permanent Total Loss of two Limbs (physical severance or the total and permanent loss of use of such Limb)	100%
4	Permanent Total Loss of Sight in both eyes	100%
5	Permanent Total Loss of Sight of one eye and one Limb (physical severance or the total and permanent loss of use of such Limb)	100%
6	Permanent Total Loss of Speech	100%
7	Complete removal of the lower jaw	100%
8	Permanent Total Loss of Mastication	100%
9	Permanent Total Loss of the central nervous system or the thorax and all abdominal organs resulting in the complete inability to engage in any job and the inability to carry out Daily Activities essential to life without full time assistance	100%
10	Permanent Total Loss of Hearing in both ears	75%
11	Permanent Total Loss of one Limb (physical severance or the total and permanent loss of use of such Limb)	50%
12	Permanent Total Loss of Sight of one eye	50%

iii. Benefit Table C

S.No	The Disablement	% of Base Sum Insured Payable
1	Permanent Total Disablement	100%
2	Permanent and incurable insanity	100%
3	Permanent Total Loss of two Limbs (physical severance or the total and permanent loss of use)	100%
4	Permanent Total Loss of Sight in both eyes	100%
5	Permanent Total Loss of Sight of one eye and one Limb (physical severance or the total and permanent loss of use)	100%
6	Permanent Total Loss of Speech	100%
7	Complete removal of the lower jaw	100%
8	Permanent Total Loss of Mastication	100%
9	Permanent Total Loss of the central nervous system or the thorax and all abdominal organs resulting in the complete inability to engage in any job and the inability to carry out Daily Activities essential to life without full time assistance	100%
10	Permanent Total Loss of Hearing in both ears	75%
11	Permanent Total Loss of one Limb (physical severance or the total and permanent loss of use)	50%
12	Permanent Total Loss of Sight of one eye	50%
13	Permanent Total Loss of Hearing in one ear	15%
14	Permanent Total Loss of the lens in one eye	25%
15	Permanent Total Loss of use of four fingers and thumb of either hand	40%
16	Permanent Total Loss of use of four fingers of either hand	20%

17	Permanent Total Loss of use of one thumb of either hand:	
a)	Both joints	20%
b)	One joint	10%
18	Permanent Total Loss of one finger of either hand:	
a)	Three joints	5%
b)	Two joints	4%
c)	One joint	2%
19	Permanent Total Loss of use of toes:	
a)	All - one foot	15%
b)	Big - both joints	5%
c)	<i>Big - one joint</i>	2%
d)	Other than Big - each toe	2%
20	Established non-union of fractured leg or kneecap	10%
21	Shortening of leg by at least 5 cms.	8%
22	Ankylosis of the elbow, hip or knee	20%

iv. Benefit Table D

S.No	The Disablement	% of Base Sum Insured Payable
1	Permanent Total Disablement	100%
2	Permanent and incurable insanity	100%
3	Permanent Total Loss of two Limbs (physical severance or the total and permanent loss of use)	100%
4	Permanent Total Loss of Sight in both eyes	100%
5	Permanent Total Loss of Sight of one eye and one Limb	100%
6	Permanent Total Loss of Speech	100%
7	Complete removal of the lower jaw	100%
8	Permanent Total Loss of Mastication	100%
9	Permanent Total Loss of the central nervous system or the thorax and all abdominal organs resulting in the complete inability to engage in any job and the inability to carry out Daily Activities essential to life without full time assistance	100%
10	Permanent Total Loss of Hearing in both ears	75%
11	Permanent Total Loss of one Limb (physical severance or the total and permanent loss of use)	50%
12	Permanent Total Loss of Sight of one eye	50%
13	Permanent Total Loss of Hearing in one ear	15%
14	Permanent Total Loss of the lens in one eye	25%
15	Permanent Total Loss of use of four fingers and thumb of either hand	40%
16	Permanent Total Loss of use of four fingers of either hand	20%
17	Permanent Total Loss of use of one thumb of either hand:	
a)	Both joints	20%
b)	One joint	10%
18	Permanent Total Loss of one finger of either hand:	
a)	Three joints	5%
b)	Two joints	4%

c)	One joint	2%
19	Permanent Total Loss of use of toes:	
a)	All - one foot	15%
b)	Big - both joints	5%
c)	<i>Big - one joint</i>	2%
d)	Other than Big - each toe	2%
20	Established non-union of fractured leg or kneecap	10%
21	Shortening of leg by at least 5 cms.	8%
22	Ankylosis of the elbow, hip or knee	20%
23	Permanent disablement not otherwise provided for under Items 2-22 inclusive up to a maximum of	75%

Terms and Conditions applicable to Permanent Disablement

- i. Ankylosis of the fingers (other than thumb and forefinger) and of the toes (other than the big toe) shall be limited to fifty percent (50%) of the **Base Sum Insured** subject to maximum of **Sum Insured** payable for the loss of the said members.
- ii. Benefit under item 23 of Table D shall be determined by the independent **Medical Practitioner** who will certify the percentage of **Base Sum Insured** payable taking into consideration the nature of the **Injury** and disability in conjunction with the stated percentages **Base Sum Insured** for more specific injuries shown in the Table of Benefits.
- iii. Any claim amount admissible/paid during the year will reduce the **Sum Insured** payable for the Cover in respect of subsequent claims.
- iv. The Coverage under this Section terminates on admissibility of Claim(s) equal to the **Sum Insured**. The Company's liability during the lifetime of the Policy will not exceed the **Base Sum Insured** in respect of the Cover.
- v. The total amount payable in respect of more than one disablement due to the same **Injury** is arrived at by adding together the various percentages of **Base Sum Insured** shown in the Table of Benefits subject to maximum of **Sum Insured**.

21. Corporate Buffer

On availing this option, We will provide for a Corporate Buffer up to the limits and terms as specified in the **Policy Schedule**/Certificate of Insurance provided that;

1. All other terms and conditions of the Policy shall remain unaltered
2. The coverage under this benefit will be applicable for **Insured Persons** who have exhausted their **Sum Insured** limits

22. OPD Cover

We will pay the **Medical Expenses** incurred by the Insured Person during **Period of Insurance** for a **Medically necessary OPD treatment** up to the limits and in accordance with terms as specified in the Schedule of Coverage on the **Policy Schedule**/Certificate of Insurance.

On opting this cover, General Exclusion xxx) under Section B.II - What is not Covered, stands deleted.

23. Aggregate Deductible

On availing this option, the **Insured Person** shall bear an amount equal to the **Aggregate Deductible** specified in the **Schedule of Coverage** on **Policy Schedule**/Certificate of Insurance for all admissible claim amounts assessed by Us in respect of all claims made by **Insured Person** in a **Policy Year**. The

liability of the Company to pay the admissible Claim under that **Policy Year** will commence only once **Aggregate Deductible** has been exhausted.

24. Disease Capping

On availing this option, claims under Section A.I.a, for specified **Illnesses** will be admissible up to maximum of Sub-limits as mentioned in the Schedule of Coverage on the Policy Schedule.

25. Double Sum Insured for Critical Illness

We will increase the **Sum Insured** for an **Insured Person** by 100% if he is diagnosed as suffering from below listed **Critical Illness** under this Coverage, provided that:

- i) The **Insured Person** is first diagnosed as suffering from a **Critical Illness** during the **Period of Insurance**, and
- ii) The benefit is utilised only by the **Insured Person** diagnosed with the **Critical Illness**, and
- iii) We have accepted an inpatient hospitalisation claim under in-patient treatment benefit

Critical Illness Covered			
1	Cancer of specified severity	3	Major Organ/Bone Marrow Transplant
2	Myocardial Infarction (First Heart Attack of specific severity)	4	Stroke resulting in Permanent Symptoms

26. Critical Illness (Benefit Based)

We will pay **Sum Insured** as specified on the Schedule of Coverage in the **Policy Schedule/Certificate of Insurance** under this Cover, if **Insured Person** suffers from **Critical Illnesses** listed below, whose diagnosis first commence/occurs after the applicable waiting period from commencement of first **Policy with Us**, subject to the following:

- i. **Waiting Period** - The coverage is subject to a waiting period of 90 days from the date of inception of the first **Policy** with us.
- ii. **Survival Period** - The **Insured Person** survives at least 30 days following such diagnosis.
- iii. The coverage under this benefit shall cease to exist upon occurrence of any one **Critical Illness** covered for which claim is admitted by **Us**. However, **Insured Person** continues to remain insured under rest of the covers in the **Policy**. The other **Insured Persons** (if any) will continue to be covered under this cover if opted.
- iv. This cover is offered only on Individual **Sum Insured** basis.

Critical Illness Covered			
1	Cancer of specified severity	7	Major Organ/Bone Marrow Transplant
2	Open Chest CABG	8	Stroke resulting in permanent symptoms
3	Myocardial Infarction ((First Heart Attack of specific severity)	9	Multiple Sclerosis with Persisting Symptoms
4	Open Heart Replacement or Repair of Heart Valves	10	Permanent Paralysis of Limbs
5	Kidney Failure requiring regular dialysis	11	Motor Neuron Disease with Permanent Symptoms
6	Coma of Specified Severity	12	Major Head Trauma

B**What is Not Covered**

We will not make payment for any claim in respect of any **Insured Person** caused by, arising from or attributable to any of the following unless expressly stated to the contrary in the **Policy**

I. Waiting Periods

Claims under the Policy are covered subject to Waiting Period as specified below:

i) Pre-existing Diseases – Code – Excl01

- a) Expenses related to the treatment of a **pre-existing disease** (PED) and its direct complications shall be excluded until the expiry of 48 months of continuous coverage after the date of inception of the first policy with insurer.
- b) In case of enhancement of **Sum Insured** the exclusion shall apply afresh to the extent of sum of **Sum Insured** increase.
- c) If the **Insured Person** is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations, then waiting period for the same would be reduced to the extent of prior coverage.
- d) Coverage under the **Policy** after the expiry of 48 months for any **pre-existing disease** is subject to the same being declared at the time of application and accepted by Insurer.

ii) Specified Disease/Procedure waiting period- Code - Excl02

- a) Expenses related to the treatment of the listed Conditions, surgeries/treatments shall be excluded until the expiry of 12 months of continuous coverage after the date of inception of the first **Policy** with us. This exclusion shall not be applicable for claims arising due to an **Accident**.
- b) In case of enhancement of sum insured the exclusion shall apply afresh to the extent of **Sum Insured** increase.
- c) If any of the specified disease/procedure falls under the waiting period specified for **Pre-existing diseases**, then the longer of the two waiting periods shall apply.
- d) The waiting period for listed conditions shall apply even if contracted after the **Policy** or declared and accepted without a specific exclusion.
- e) If the **Insured Person** is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.

Illnesses

Internal Congenital diseases	Non infective Arthritis	Pilonidal sinus
Diseases of gall bladder including cholecystitis	calculus diseases of Urogenital system e.g.Kidneystone,Urinary Bladder Stone	Benign tumors, cysts, nodules, polyps including breast lumps
Pancreatitis	Ulcer and erosion of stomach and duodenum	Polycystic ovarian diseases
All forms of Cirrhosis	Gastro Esophageal Reflux Disorder (GERD)	Sinusitis, Rhinitis
Perineal Abscesses	Perianal Abscesses	Skin tumors
Cataract	Fissure/fistula in anus, Haemorrhoids including Gout and rheumatism	Tonsillitis
Osteoarthritis and osteoporosis	Fibroids (fibromyoma)	Benign Hyperplasia of Prostate

Surgical Procedures

Adenoidectomy, tonsillectomy	Tympanoplasty, Mastoidectomy	Hernia
Dilatation and curettage (D&C)	Nasal concha resection	Surgery for prolapsed inter vertebral disc
Myomectomy for fibroids	Surgery of Genito urinary system	Surgery for varicose veins and varicose ulcers
Surgery on prostate	Cholecystectomy	Surgery for Perianal Abscesses
Hydrocele/Rectocele	Joint replacement surgeries	Surgery for Nasal septum deviation
Ligament, Tendon and Meniscal tear	Prolapsed Uterus	Rectal Prolapse
Endometriosis	Retinal detachment	Glaucoma
Varicocele	Hysterectomy	Fissurectomy, Haemorrhoidectomy, Fistulectomy, ENT surgeries
Nasal polypectomy		

iii) **30-day waiting period - Code - Excl03**

- a) Expenses related to the treatment of any illness within 30 days from the first **Policy** commencement date shall be excluded except claims arising due to an **Accident**, provided the same are covered.
- b) This exclusion shall not, however, apply if the **Insured Person** has continuous coverage for more than twelve months.
- c) The within referred waiting period is made applicable to the enhanced **Sum Insured** in the event of granting higher **Sum Insured** subsequently.

iv) A waiting period of 48 months shall apply for all Claims under Maternity Cover (Section A.II.16)

v) A waiting period of 48 months shall apply for all Claims under OPD Cover (Section A.II.22)

II. Permanent Exclusions

We will not make any payment for any claim in respect of any **Insured Person** caused by, arising from or attributable to any of the following unless expressly stated to the contrary in this **Policy**:

- i. **Investigation & Evaluation: Code Excl04**
 - a. Expenses related to any admission primarily for diagnostic and evaluation purposes only are excluded.
 - b. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.
- ii. **Rest Cure, rehabilitation and respite care: Code – Excl05:** Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:
 - a. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons.
 - b. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.
- iii. **Obesity/Weight control: Code – Excl06:** Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions:
 - a. Surgery to be conducted is upon the advice of the doctor
 - b. The surgery/procedure conducted should be supported by clinical protocols

- c. The member has to be 18 years of age or older and
- d. Body Mass Index (BMI)
 - a. Greater than or equal to 40 or,
 - b. Greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
 - 1. Obesity related cardiomyopathy
 - 2. coronary heart disease
 - 3. severe sleep apnoea
 - 4. uncontrolled type2 diabetes
- iv. **Change-of-Gender treatments:** Code – Excl07:Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.
- v. **Cosmetic or plastic surgery:** Code – Excl08:Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of **Medically Necessary Treatment** to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending **Medical Practitioner**.
- vi. **Hazardous or Adventure Sports:** Code – Excl09– 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.
- vii. **Breach of Law:**Code – Excl10 - Expenses for treatment directly arising from or consequent upon any **Insured Person** committing or attempting to commit a breach of law with criminal intent.
- viii. **Excluded Providers-** Code – Excl11 Expenses incurred towards treatment in any hospital or by any **Medical Practitioner** or any other provider specifically excluded by the **Insurer** and disclosed in its website/notified to the policyholders are not admissible. However, in case of **life threatening situations** or following an **Accident**, expenses up to the stage of stabilization are payable but not the complete claim.
- ix. Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. Code – Excl12
- x. Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons.Code – Excl13
- xi. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a **Medical Practitioner** as part of **Hospitalization** claim or day care procedure.Code – Excl14
- xii. Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptries.Code – Excl15
- xiii. **Unproven Treatments–** Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.Code – Excl16
- xiv. **Sterility and Infertility –**Code – Excl17 -Expenses related to sterility and infertility. This includes:
 - a. Any type of contraception, sterilization
 - b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
 - c. Gestational Surrogacy
 - d. Reversal of sterilization
- xv. **Maternity:**Code – Excl18
 - a. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy.

- b. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the **Policy** period.
- xvi. 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, **Nuclear, Chemical or Biological** attack or weapons, radiation of any kind.
- xvii. Aggregate Deductible - We are not liable for Claims/Claim amount falling within **Aggregate Deductible** limit if opted and as mentioned on the Schedule of Coverage in the **PolicySchedule/Certificate of Insurance**.
- xviii. Any **Insured Person** committing or attempting to commit intentional self-injury or attempted suicide or suicide while mentally sound or unsound.
- xix. Any **Insured Person's** participation or involvement in naval, military or air force operation.
- xx. Investigative treatment for Sleep-apnoea, General debility or exhaustion ("run-down condition").
- xxi. Congenital external diseases, defects or anomalies,
- xxii. Stem cell harvesting.
- xxiii. 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).
- xxiv. Circumcisions (unless necessitated by **Illness or Injury** and forming part of treatment).
- xxv. Any Convalescence, sanatorium treatment, private duty nursing or long-term nursing care.
- xxvi. Preventive care, and other nutritional and electrolyte supplements, unless certified to be required by the attending Medical Practitioner as a direct consequence of an otherwise covered claim.
- xxvii. Vaccination including inoculation and immunisations (Except post Animal bite treatment),
- xxviii. **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 and also available at www.hdfcergo.com
- xxix. OPD treatment
- xxx. The provision or fitting of hearing aids, spectacles or contact lenses.
- xxxi. 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.
- xxxii. Any treatment or part of a treatment that is not of a Reasonable and Customary charge, not Medically Necessary; treatments or drugs not supported by a prescription.
- xxxiii. 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, wheelchairs, crutches, and oxygen concentrator for bronchial asthma/ COPD conditions, cost of cochlear implant(s) unless necessitated by an Accident. Exhaustive list of Non-Medical expenses is attached and also available on www.hdfcergo.com
- xxxiv. Any Claim arising due to Non-disclosure of **Pre-existing Illness** or Material fact as sought to be declared on the Proposal form.

C Claims Procedure

1. Notification of a Claim

Procedure	Cashless Hospitalization		Reimbursement Claims
	Emergencies	Planned	
Claim Intimation You shall intimate the Claims to us through any available mode of communication as specified in the Policy, Health Card or our Website			
Claim Intimation Timelines	Within 24 hours of the Emergency Hospitalization	At least 72 hours prior to the planned Hospitalization	Within 48 hours of admission or before discharge from the Hospital, whichever is earlier
Claim Intimation Timelines for Critical Illness related claims	Within 15 days of the diagnosis of Critical Illness or Hospitalization		
Particulars to be provided to us for claim notification	<ol style="list-style-type: none"> 1. The health card issued by Us 2. KYC documents 3. The Policy Number 4. Name of the Policyholder 5. Name and address of Insured Person in respect of whom the request is being made 6. Nature of the Illness/Injury and the treatment/Surgery required 7. Name and address of the attending Medical Practitioner 8. Hospital where treatment/Surgery is proposed to be taken or /Hospital where the Insured person is admitted 9. Proposed /Actual Date of admission 10. NEFT details & cancelled cheque of Claimant or Nominee (in case claimant expired), Provide legal heir certificate in case nominee is minor. 		
<i>Claims documents to be submitted for Hospital Cash</i>	<ol style="list-style-type: none"> 1. Copy of Discharge Summary / Discharge Certificate along with time of admission and discharge for Hospital cash benefit 2. First consultation letter from treating Medical Practitioner 3. Certificate from treating Medical Practitioner, specifying the duration and aetiology 4. MLC/FIR copy/ certificate regarding abuse of Alcohol/intoxicating agent if applicable 		
Claims Documents to be submitted for Critical Illness related claims	<ol style="list-style-type: none"> 1. Copy of Discharge Summary / Discharge Certificate / Death Certificate (in case insured expired); 2. First consultation letter from treating Medical Practitioner 3. Medical certificate confirming diagnosis, and the treatment from Medical Practitioner 4. certificate from treating Medical Practitioner, specifying the duration and etiology 5. OT Notes in case of Surgery 6. Medical certificate from treating Medical Practitioner specifying the diagnosis and need for the surgery 7. MLC/FIR copy/ certificate regarding abuse of Alcohol/intoxicating agent if applicable 		

	<p>8. All pathological/Histopathological and radiological Investigation Reports</p> <p>9. NEFT details & cancelled cheque of Claimant or Nominee (in case claimant expired), Provide legal heir certificate in case nominee is minor.</p> <p>Provide KYC (Know your customer) form along with photocopy of any one of following KYC documents for all claims amounting to Rs 1 lakh and above (Aadhaar Card, Passport, Driving License Voter ID, etc)</p> <p>We may require the Insured Person to undergo medical examination by Medical Practitioner authorized by Us to obtain an independent medical opinion for the processing of the claim. Any cost towards such medical examination will be borne by Us.</p>	
<p>Claims documents and procedure for Second Medical Opinion</p>	<p>1. Duly filled claim form along with the copy of all medical reports including investigation reports and discharge summary (if any)</p> <p>2. Select Our network Medical Practitioner from whom you would prefer to take the second opinion. (Please refer our Website or call at 24X 7 toll free line to obtain the list of Our panel doctors).</p> <p>3. On receipt of the complete set of documents, We will forward the same to the concerned doctor.</p> <p>4. The Second Opinion shall be forwarded to the member within 15 working days of receipt of the complete set of documents.</p>	
<p><i>Claims documents to be submitted for Accidental Death</i></p>	<p>1. Medical Practitioner's Report</p> <p>2. Medico Legal Certificate</p> <p>3. Death certificate</p> <p>4. Postmortem if conducted/FSL (Forensic science laboratory) report - To check for drug abuse/intoxication</p> <p>5. MLC/FIR copy/ certificate regarding abuse of Alcohol/intoxicating agent if applicable</p>	
<p><i>Claims documents to be submitted for Permanent Disablement</i></p>	<p>1. Medical Practitioner's Report</p> <p>2. Medico Legal Certificate</p> <p>3. Investigation Reports like Laboratory test, X-rays and reports essential of confirmation of the Injury;</p> <p>4. Disability certificate from a government certified Medical Practitioner or government Hospital confirming the extent and nature of disability.</p> <p>5. Discharge summary from the Hospital Medical reports, case histories, investigation reports, treatment papers as applicable.</p> <p>6. Letter from treating Medical Practitioner mentioning the reason and date for disablement and confirming the disablement.</p> <p>7. MLC/FIR copy/ certificate regarding abuse of Alcohol/intoxicating agent if applicable</p>	
<p>Particulars to be provided for pre-authorization</p>	<p>i. Policy Number</p> <p>ii. Name of the Insured person(s)</p> <p>iii. Nature of disease/Illness/Injury</p> <p>iv. Name and address of the attending Medical Practitioner/Hospital</p> <p>v. Date of admission & probable</p>	<p>Not Applicable</p>

	date of discharge vi. Approximate Claim Expenses	
	Any other relevant information as required	
Process for pre-authorization	On receipt of duly filled pre authorization form and other details, We may; <ul style="list-style-type: none"> Issue the authorization letter specifying the sanctioned amount, limitation, and non-payable items, if applicable Or <ul style="list-style-type: none"> Reject the request for pre-authorization specifying reasons for the rejection. 	Not Applicable
List of Claim documents	Not Applicable	As enlisted below
Condonation of Delay	If the claim is not notified/ or submitted to Us within the specified time limits, then We shall be provided the reasons for the delay in writing. We will condone such delay on merits where the delay has been proved to be for reasons beyond the claimant's control	

2. List of documents for Reimbursement Claims

- i. Completely filled claim form, duly signed (by claimant/proposer) and stamped (by Hospital).
- ii. Government approved Photo ID & Age Proof
- iii. Copy of claim intimation letter / reference of Claim Intimation Number in the absence of main claim documents
- iv. Copy of the Hospital's Registration Certificate/Hospital Registration number in case of **Hospitalization** in any non-network hospital of HDFC ERGO Health Insurance Limited or certificate from **Hospital** authorities providing facilities available including number of beds.
- v. Discharge Card / Day Care Summary / Transfer Summary
- vi. Final hospital bill with all deposit and final payment receipt and refund receipt(s), if advance amount refunded
- vii. Invoice with payment receipt and implant stickers for all implants used during surgeries e.g. lens sticker and invoice in cataract Surgery, stent invoice and sticker in Angioplasty Surgery.
- viii. All previous consultation papers indicating history and treatment details for current **Illness** and advice for current hospitalization.
- ix. All diagnostic reports (including imaging and laboratory) along with prescription by **Medical Practitioner** and invoice / bill with receipt from diagnostic centre
- x. All medicine / pharmacy bills along with prescription by **Medical Practitioner**
- xi. MLC / FIR Copy – in **Accidental** cases only
- xii. History of alcohol consumption or any intoxication certified by first treating doctor in case of accidental cases.

- xiii. Copy of Death Summary and copy of Death Certificate (in death claims only)
- xiv. Pre and Post-Operative Imaging reports
- xv. Copy of indoor case papers with nursing sheet detailing medical history of the patient, treatment details, and patient's progress (to be submitted wherever required by the insurer).
- xvi. Invoice for Vaccination and payment receipt
- xvii. KYC documents (in all claims above Rs 1 lakh) - (Ration Card/ Driving License/ Aadhar Card/ Passport /any other Government authorized identity proof of the Claimant carrying name, photograph & address) and duly filled KYC form with 1 signed across passport size coloured photograph of the Claimant ***
- xviii. Duly filled NEFT form with cancelled blank cheque (with IFSC code, A/C number, and name mentioned on cheque leaf)
- xix. Settlement letter(s), copy (-ies) of payment receipts, and entire certified copy of paid claims in case of partial claim settlement from other insurer.

*** In case of death of Insured Person, the same document requirement would be for nominee/legal heir of Insured Person(NOC in favour of 1 or more than 1 undisputedly selected legal heir(s) by remaining legal heir(s).

3. Conditions for obtaining Cashless facility

- i. **Cashless facility** can be availed only at **Our Network Provider**. The complete list of **Network Providers** and empanelled Service Providers is available on **Our** website and can be obtained by contacting **Us**.
- ii. We reserve the right to modify, add or restrict any **Network Provider** for Cashless Facilities at **Our** sole discretion. The same shall be duly updated on **Our** website. **You** shall check the updated list of **Network Providers** before applying for Cashless Claim.
- iii. Pre-authorization is valid for 15 days from date of issuance and if all the details of the **Hospitalization/treatment**, including dates, **Hospital** and locations match with the details as per Cashless authorized.
- iv. **We** will make payment for the Cashless authorized amount directly to the **Network Provider**.
- v. If the claim is not notified to **Us** within the specified time limits, then **We** shall be provided the reasons for the delay in writing. **We** will condone such delay on merits where the delay has been proved to be for reasons beyond the claimant's control

4. Payment of a Claim

- i. If there are any deficiencies in the necessary claim documents which are not met or are partially met, **We** will send a maximum of 3 (three) reminders following which **We** will send a closure letter or make a part-payment if **We** have not received the deficiency documents after 45 days from the date of the initial request for such documents
- ii. The **Company** shall settle or reject a claim, as the case may be, within 30 days from the date of receipt of last necessary document.
- iii. In the case of delay in the payment of a claim, the **Company** shall be liable to pay interest to the **Policyholder/Insured Person** from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the **Bank Rate**.
- iv. However, where the circumstances of a claim warrant an investigation in the opinion of the **Company**, it shall initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document. In such cases, the **Company** shall settle or reject the claim within 45 days from the date of receipt of last necessary document.
- v. In case of delay beyond stipulated 45 days, the **Company** shall be liable to pay interest to the **Policyholder/Insured Person** at a rate 2% above the **Bank Rate** from the date of receipt of last necessary document to the date of payment of claim.
- vi. If **We**, for any reason decide to reject the claim, the reasons regarding the rejection shall be communicated to **You** in writing within 30 days of the receipt of documents.
- vii. If requested by **Us**, at **Our** cost, the **Insured Person** must submit to medical examination by **Our Medical Practitioner** as often as **We** consider reasonable and necessary and **We/Our** representatives must be permitted to inspect the medical and Hospitalization records pertaining to the **Insured Person's** treatment and to investigate the circumstances pertaining to the claim.

- viii. **We** and **Our** representatives must be given all reasonable co-operation in investigating the claim in order to assess **Our** liability and quantum in respect of the claim

D

Definitions

1. Definitions applicable to the Policy

- Def. 1. **Accident** or **Accidental** means a sudden, unforeseen, and involuntary event caused by external, visible and violent means.
- Def. 2. **Adventurous/Hazardous Sports** means any sport or activity involving physical exertion and skill in which an **Insured Person** participates or competes for entertainment or as part of his Profession whether he / she is trained or not.
- Def. 3. **Age** or **Aged** means completed years as at the Policy Commencement Date.
- Def. 4. **Any one illness** means continuous period of **Illness** and includes relapse within 45 days from the date of last consultation with the **Hospital/Nursing Home** where treatment was taken
- Def. 5. **Alternative treatment** means forms of treatments other than treatment “Allopathy” or “modern medicine” and includes Ayurveda, Unani, Siddha and Homeopathy in the Indian context.
- Def. 6. **Aggregate Deductible:** Aggregate deductible is a cost-sharing requirement under a health insurance policy that provides that the Company will not be liable for a specified rupee amount of the covered expenses, which will apply before any benefits are payable by the Company. An Aggregate deductible does not reduce the Sum Insured. The deductible is applicable in aggregate towards hospitalization expenses incurred which are admissible under this Policy (and not excluded) during the policy year by insured person (individual Sum Insured policy) or insured family (in case of floater sum insured policy).
- Def. 7. **Associated Medical Expenses** means consultation fees, charges on Operation theatre, surgical appliances & nursing, and expenses on Anaesthesia, blood, oxygen incurred during Hospitalization of the Insured Person
- Def. 8. **AYUSH HOSPITAL** means an AYUSH Hospital is a healthcare facility wherein medical/surgical/para-surgical treatment procedures and interventions are carried out by AYUSH *Medical Practitioner(s)* comprising of any of the following:
- a. Central or State Government AYUSH Hospital; or
 - b. Teaching hospital attached to AYUSH College recognized by the Central Government /Central Council of Indian Medicine/Central Council for Homeopathy; or
 - c. AYUSH Hospital, standalone or co-located within-patient healthcare facility of any recognized system of medicine, registered with the local authorities, wherever applicable, and is under the supervision of a qualified registered AYUSH *Medical Practitioner* and must comply with all the following criterion:
 - i. Having at least 5 in-patient beds.
 - ii. Having qualified AYUSH *Medical Practitioner* in charge round the clock.
 - iii. Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out.
 - iv. Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative.
- Def. 9. **AYUSH Day Care Centre** means and includes Community Health Centre (CHC), Primary Health Centre (PHC), Dispensary, Clinic, Polyclinic or any such health center which is registered with the local authorities, wherever applicable and having facilities for carrying out treatment procedures and medical or surgical/para-surgical interventions or both under the supervision of

- registered AYUSH *Medical Practitioner(s)* on day care basis without in-patient services and must comply with all the following criterion:
- i. Having qualified registered AYUSH *Medical Practitioner (s)* in charge;
 - ii. Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out;
 - iii. Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative.
- Def. 10. **Bank rate** means the rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due.
- Def. 11. **Base Sum Insured** means the sum shown in the Policy Schedule which represents **Our** maximum liability for respective Cover during the life time of the Policy.
- Def. 12. **Break in Policy** means the period of gap that occurs at the end of the existing policy term, when the premium due for renewal on a given policy is not paid on or before the premium renewal date or within 30 days thereof
- Def. 13. **Biological attack or weapons** 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.
- Def. 14. **Cashless Facility** means a facility extended by the insurer to the insured where the payments, of the costs of treatment undergone by the insured in accordance with the policy terms and conditions, are directly made to the **Network Provider** by the insurer to the extent pre-authorization is approved.
- Def. 15. **Catastrophic Event** means and includes Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Tsunami, Flood, Inundation and Earthquake
- Def. 16. **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.
- Def. 17. **Commencement Date** means the commencement date of the Policy as specified in the **Policy Schedule/Certificate of Insurance**
- Def. 18. **Coma/Comatose State** means a state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all of the following:
- i. no response to external stimuli continuously for at least 96 hours;
 - ii. life support measures are necessary to sustain life; and
 - iii. permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.
 - iv. The condition has to be confirmed by a specialist medical practitioner.
 - v. Coma resulting directly from alcohol or drug abuse is excluded.
- Def. 19. **Condition Precedent** means a policy term or condition upon which the Insurer's liability under the policy is conditional upon
- Def. 20. **Congenital Anomaly** means a condition(s) which is present since birth, and which is abnormal with reference to form, structure, or position.
- a) Internal **Congenital Anomaly: Congenital Anomaly** which is not in the visible and accessible parts of the body.
 - b) External **Congenital Anomaly: Congenital Anomaly** which is in the visible and accessible parts of the body
- Def. 21. **Co-Payment** means a cost sharing requirement under a health insurance policy that provides that the policyholder/insured will bear a specified percentage of the admissible claims amount. A **Co-Payment** does not reduce the Sum Insured
- Def. 22. **Coverage Period** means the Period between the Coverage effective date and the expiry date applicable to Insured Person specified in the **Policy Schedule/Certificate of Insurance**.

- Def. 23. **Cumulative Bonus** means any increase or addition in the Sum Insured granted by the Insurer without an associated increase in premium.
- Def. 24. **Day care Centre** means any institution established for **Day Care Treatment** of Illness and / or injuries or a medical set -up with a **Hospital** and which has been registered with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criterion as under:-
- i. has qualified nursing staff under its employment;
 - ii. has qualified medical practitioner/s in charge;
 - iii. has fully equipped operation theatre of its own where surgical procedures are carried out;
 - iv. maintains daily records of patients and will make these accessible to the insurance company's authorized personnel
- Def. 25. **Day Care Treatment/ Procedures** means those medical treatment, and/or surgical procedure which is undertaken under General or Local Anesthesia in a **Hospital/Day Care Centre** in less than 24 hours because of technological advancement, and which would have otherwise required **Hospitalization** of more than 24 hours, Treatment normally taken on an Out-patient basis is not included in the scope of this definition
- Def. 26. **Deductible** means a cost sharing requirement under a health insurance policy that provides that the Insurer will not be liable for a specified rupee amount in case of indemnity policies and for a specified number of days/hours in case of **Hospital** cash policies, which will apply before any benefits are payable by the insurer. A **Deductible** does not reduce the sum insured.
- Def. 27. **Dependent Child/Children** means living dependent child or children of **Insured Person** up to age of 25 years as on date of **Injury**, including legally adopted and step- children.
- Def. 28. **Dependents** means only the family members listed below:
- a) **Your** legally married spouse as long as she continues to be married to You
 - b) **Your** children Aged between 91 days and 25 years if they are unmarried, still financially dependent on You and have not established their own independent households;
 - c) **Your** natural parents or parents that have legally adopted You, and **Your** parent in laws
- Def. 29. **Dependent Parents** means **Your** natural parents, parents that have legally adopted you or **Your** parents in law.
- Def. 30. **Dental Treatment** means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery
- Def. 31. **Disclosure of information norm** means the policy shall be void and all premiums paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any material fact.
- Def. 32. **Domiciliary Hospitalization** means medical treatment for an **Illness/disease/Injury** which in the normal course would require care and treatment at a **Hospital** but is actually taken while confined at home under any of the following circumstances:
- i. the condition of the patient is such that he/she is not in a condition to be removed to a **Hospital**, or
 - ii. the patient takes treatment at home on account of non-availability of room in a **Hospital**
- Def. 33. **Emergency Care** means management for an **Illness** or injury which results in symptoms which occur suddenly and unexpectedly and requires immediate care by a **Medical Practitioner** to prevent death or serious long-term impairment of the insured person's health.
- Def. 34. **Family Floater** means a Policy described as such in the Policy Schedule where under **You** and **Your** Dependents (Spouse, dependent children, dependent parents/parents in laws) named in the Policy Schedule are insured under this Policy as at the Commencement Date on floater Sum Insured basis.
- Def. 35. **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

- Def. 23. **Cumulative Bonus** means any increase or addition in the Sum Insured granted by the Insurer without an associated increase in premium.
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- i. has qualified nursing staff under its employment;
 - ii. has qualified medical practitioner/s in charge;
 - iii. has fully equipped operation theatre of its own where surgical procedures are carried out;
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- a) **Your** legally married spouse as long as she continues to be married to You
 - b) **Your** children Aged between 91 days and 25 years if they are unmarried, still financially dependent on You and have not established their own independent households;
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- Def. 32. **Domiciliary Hospitalization** means medical treatment for an **Illness/disease/Injury** which in the normal course would require care and treatment at a **Hospital** but is actually taken while confined at home under any of the following circumstances:
- i. the condition of the patient is such that he/she is not in a condition to be removed to a **Hospital**, or
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- Def. 35. **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 pre-existing diseases. Coverage is not available for the period for which no premium is received.
- Def. 36. **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:
 has at least 10 in-patient beds, in towns having a population of less than 10,00,000 and 15 in-patient beds in all other places,
 has qualified nursing staff under its employment round the clock,
 has qualified Medical Practitioner(s) in charge round the clock,
 has a fully equipped operation theatre of its own where surgical procedures are carried out,
 maintains daily records of patients and will make these accessible to the insurance company's authorized personnel.
- Def. 37. **Hospitalization** 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.
- Def. 38. **Illness/Illnesses** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function which manifests itself during the Policy Period and requires medical treatment
 (a) Acute condition - Acute condition is a disease, **Illness** or **Injury** that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/**Illness**/**Injury** which leads to full recovery
 (b) Chronic condition - A chronic condition is defined as a disease, **Illness**, or **Injury** that has one or more of the following characteristics:
 it needs on-going or long-term monitoring through consultations, examinations, check-ups, and /or tests
 it needs on-going or long-term control or relief of symptoms
 it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
 it continues indefinitely
 it recurs or is likely to recur
- Def. 39. **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.
- Def. 40. **Immediate Family** mean an **Insured Person's** Spouse; children; children-in-law, siblings; siblings-in-law; parents; parents-in-law; grandparents; grandchildren; legal guardian, ward, step or adopted children; stepparents; aunts, uncles; nieces, and nephews.
- Def. 41. **In-patient Care** means treatment for which the Insured Person has to stay in a **Hospital** for more than 24 hours for a covered event.
- Def. 42. **Insured Person** means **You** and the persons named in the Policy Schedule who are insured under the Policy.
- Def. 43. **Intensive Care Unit** means an identified section, ward or wing of a **Hospital** which is under the constant supervision of a dedicated Medical Practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
- Def. 44. **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 intensive charges

- Def. 45. **Life threatening situation** shall mean a serious medical condition or symptom resulting from **Injury** or **Illness** which is not **pre-existing disease**, which arises suddenly and unexpectedly, and requires immediate care and treatment by a **Medical Practitioner**, generally received within 24 hours of onset to avoid jeopardy to life or serious long-term impairment of the Insured Person's health, until stabilisation at which time this medical condition or symptom is not considered an Emergency anymore.
- Def. 46. **Material Facts** means all relevant information sought by the Company in the Proposal Form and other connected documents to enable it to take informed decision in the context of underwriting the risk.
- Def. 47. **Maternity Expenses** means
 Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean section incurred during **Hospitalization**).
 Expenses towards lawful medical termination of pregnancy during the policy Period.
- Def. 48. **Medical Advice** means any consultation or advice from a Medical Practitioner including the issue of any prescription or follow up prescription.
- Def. 49. **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 would have been payable if the Insured Person had not been insured and no more than other hospitals or Medical practitioners in the same locality would have charged for the same medical treatment.
- Def. 50. **Medically Necessary treatment** means any treatment, test, medication, or stay in **Hospital** or part of stay in **Hospital** which
 Is required for the medical management of the **Illness** or **Injury** suffered by the Insured Person;
 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.
- Def. 51. **Medical Consultation** is a procedure where a **Medical Practitioner** reviews an Insured Person's medical history, medically examines the Insured Person and makes recommendations as to care and treatment.
- Def. 52. **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 set up 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 license. Medical Practitioner who is sharing the same residence with the Insured person's and is a member of Insured Person's family are not considered as Medical Practitioner under the scope of this Policy.
- Def. 53. **Mental Illness** means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognise reality or ability to meet the ordinary demands of life, mental conditions associated with the abuse of alcohol and drugs, but does not include mental retardation which is a condition of arrested or incomplete development of mind of a person, specially characterised by sub normality of intelligence.
- Def. 54. **Mental Health Establishment** means any health establishment, including Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy establishment, by whatever name called, either

- wholly or partly, meant for the care of persons with mental **Illness**, established, owned, controlled or maintained by the appropriate Government, local authority, trust, whether private or public, corporation, co-operative society, organisation or any other entity or person, where persons with mental **Illness** are admitted and reside at, or kept in, for care, treatment, convalescence and rehabilitation, either temporarily or otherwise; and includes any general **Hospital** or general nursing home established or maintained by the appropriate Government, local authority, trust, whether private or public, corporation, co-operative society, organisation or any other entity or person; but does not include a family residential place where a person with mental **Illness** resides with his relatives or friends;
- Def. 55. **Mental Health Nurse** means a person with a diploma or degree in general nursing or diploma or degree in psychiatric nursing recognised by the Nursing Council of India established under the Nursing Council of India Act, 1947 and registered as such with the relevant nursing council in the State
- Def. 56. **Migration** means, the right accorded to the health insurance policyholders (including all members under family cover and members of group health insurance policy), to transfer the credit gained for pre-existing conditions and time bound exclusions, with the same insurer.
- Def. 57. **new-born Baby** means baby born during the Policy Period and is Aged up to 90 days
- Def. 58. **Network Provider** means Hospitals or health care providers enlisted by an insurer, TPA or jointly by an Insurer and TPA to provide medical services to an insured by a **Cashless facility**.
- Def. 59. **Non-Network** means any **Hospital, Day Care Centre** or other provider that is not part of the Network
- Def. 60. **Non-Medical Expenses** - Are expenses other than those defined as Medical Expenses and which are listed on our website www.hdfcergo.com
- Def. 61. **Notification of Claim** means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication
- Def. 62. **Nuclear attack** 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/ fusion material emitting a level of radioactivity capable of causing any **Illness**, incapacitating disablement, or death.
- Def. 63. **OPD Treatment** -OPD treatment means the one in which the Insured visits a clinic / **Hospital** or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.
- Def. 64. **Period of Insurance** means the period between the Coverage Commencement Date and the Expiry Date specified in the **Policy Schedule**/Certificate of Insurance under the **Policy** with the **Company** under which **Insured Person** is covered.
- Def. 65. **Portability** means, the right accorded to individual health insurance policyholders (including all members under family cover), to transfer the credit gained for pre-existing conditions and time bound exclusions, from one insurer to another insurer.
- Def. 66. **Pre-existing disease** means any condition, ailment, injury or disease:
- i. That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement or
 - ii. For which **Medical advice** or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the policy or its reinstatement.
- Def. 67. **Preventive Health Check-up** -Preventive Health Check-up means a package of medical test(s) undertaken for general assessment of health status, it does not include any diagnostic or investigative medical tests for evaluation of illness or a disease.

- Def. 68. **Policy** means Your statements in the proposal form (which are the basis of this Policy), this policy wording (including endorsements, if any), and the Policy Schedule (as the same may be amended from time to time).
- Def. 69. **Policy Period** means the period between the Commencement Date and the Expiry Date specified in the Policy Schedule. For **Insured Person** it means **Period of Insurance** as specified in the Certificate of Insurance or Endorsement
- Def. 70. **Policy Holder** means Person who has proposed the Policy and in whose name the Policy is issued
- Def. 71. **Policy Schedule** means Schedule attached to and forming part of this Policy mentioning the details of the Insured Persons, the Sum Insured, the period and the limits to which benefits under the Policy are subject to (Schedule of coverage), including any Annexure and/or endorsements, made to or on it from time to time, and if more than one, then the latest in time.
- Def. 72. **Policy Year** means a period of twelve months beginning from the date of commencement of the policy period and ending on the last day of such twelve-month period. For the purpose of subsequent years, policy year shall mean a period of twelve months commencing from the end of the previous policy year and lapsing on the last day of such twelve-month period, till the policy period, as mentioned in the schedule
- Def. 73. **Portability** means, the right accorded to individual health insurance policyholders (including all members under family cover), to transfer the credit gained for pre-existing conditions and time bound exclusions, from one insurer to another insurer.
- Def. 74. **Pre-hospitalization Medical Expenses** means **Medical Expenses** incurred during pre-defined number of days preceding the **Hospitalization** of the Insured Person, provided that:
Such **Medical Expenses** are incurred for the same condition for which the Insured Person's **Hospitalization** was required, and
The In-patient **Hospitalization** claim for such **Hospitalization** is admissible by the Insurance Company
- Def. 75. **Post-hospitalization Medical Expenses** means **Medical Expenses** incurred during pre-defined number of days immediately after the insured person is discharged from the **Hospital** provided that:
Such **Medical Expenses** are for the same condition for which the insured person's **Hospitalization** was required, and
The inpatient **Hospitalization** claim for such **Hospitalization** is admissible by the insurance company.
- Def. 76. **Qualified Nurse** is a person who holds a valid registration from the nursing council of India or the nursing council of any state in India
- Def. 77. **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
- Def. 78. **Room Rent** means the amount charged by a **Hospital** towards Room and Boarding expenses and shall include the **Associated Medical Expenses**
- Def. 79. **Reasonable and Customary Charges** means the charges for services or supplies, which are the standard charges for a specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of **Illness/ Injury** involved.
- Def. 80. **Second Medical Opinion** means a procedure where by upon request of Insured Person, an independent Medical Practitioner reviews and opines on treating Medical Practitioner's recommendation as to care and treatment of Insured Person by reviewing Insured Person's medical status and history
- Def. 81. **Sum Insured** means the sum shown in the Policy Schedule which represents Our maximum liability for each Insured Person for any and all benefits claimed for during the Policy Year, and

in relation to a Family Floater represents Our maximum liability for any and all claims made by You and all of Your Dependents during the Policy Year

- Def. 82. **Sub-limit** means a cost sharing requirement under a health insurance policy in which an insurer would not be liable to pay any amount in excess of the pre-defined limit
- Def. 83. **Surgery or Surgical Procedure** means manual and / or operative procedure (s) required for treatment of an **Illness or Injury**, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a **Hospital or Day Care Centre** by a medical practitioner.
- Def. 84. **Time Deductible** means a cost sharing requirement under a health insurance **Policy** that provides that the Insurer will not be liable for a specified number of days, which will apply before any benefits are payable by the insurer. A **Time Deductible** does not reduce the **Sum Insured**
- Def. 85. **Unproven/Experimental Treatment** is a treatment including drug experimental therapy, which is based on established medical practice in India, is a treatment experimental or unproven.
- Def. 86. **We/Our/Us/Insurer/Company** means the HDFC ERGO Health Insurance Limited
- Def. 87. **You/Your** means the Insured Person named in the Policy Schedule who is insured under the Policy

2. Major/Critical Illnesses – applicable to optional cover 12, 25 and 26 under Section A.II

1. Cancer of specified severity

A malignant tumour characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukaemia, lymphoma and sarcoma.

The following are excluded:

- i. All tumours which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behaviour, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN - 2 and CIN-3.
- ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- iii. Malignant melanoma that has not caused invasion beyond the epidermis;
- iv. All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- vi. Chronic lymphocytic leukaemia less than RAI stage 3
- vii. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- viii. All Gastro-Intestinal Stromal Tumours histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;
- ix. All tumours in the presence of HIV infection.

2. Open Chest CABG

- I. The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.
- II. The following are excluded:
 - a. Angioplasty and/or any other intra-arterial procedures

3. Myocardial Infarction (First Heart Attack of specified severity)

- I. The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:
 - a. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
 - b. New characteristic electrocardiogram changes
 - c. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.
- II. The following are excluded:
 - a. Other acute Coronary Syndromes
 - b. Any type of angina pectoris
 - c. A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

4. Kidney failure requiring regular dialysis

- I. End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

5. Major Organ/Bone Marrow Transplant

The actual undergoing of a transplant of:

- a. One of the following human organs: lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ,
- b. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

The following are excluded:

- a. Other stem-cell transplants
- b. Where only islets of langerhans are transplanted

6. Multiple Sclerosis with persisting symptoms

- I. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:
 - a. investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
 - b. there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.
- II. Other causes of neurological damage such as SLE and HIV are excluded.

7. Permanent Paralysis of Limbs

- I. Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

8. Stroke resulting in permanent symptoms

- I. Any cerebrovascular incident producing permanent neurological sequelae.
 - a. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolization from an extracranial source.
 - b. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.
- II. The following are excluded:
 - a. Transient ischemic attacks (TIA)
 - b. Traumatic injury of the brain
 - c. Vascular disease affecting only the eye or optic nerve or vestibular functions.

9. Coma of Specified Severity

- I. A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all of the following:
 - i) no response to external stimuli continuously for at least 96 hours;
 - ii) life support measures are necessary to sustain life; and
 - iii) permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.
- II. The condition has to be confirmed by a specialist medical practitioner.
 - a. Coma resulting directly from alcohol or drug abuse is excluded.

10. Open Heart Replacement or Repair of Heart Valves

The actual undergoing of open-heart valve surgery is to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner. Catheter based techniques including but not limited to, balloon valvotomy/valvuloplasty are excluded.

11. Motor Neuron Disease with Permanent Symptoms

Motor neuron disease diagnosed by a specialist medical practitioner as spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis or primary lateral sclerosis. There must be progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. There must be current significant and permanent functional neurological impairment with objective evidence of motor dysfunction that has persisted for a continuous period of at least 3 months.

12. Major Head Trauma

- I. Accidental head injury resulting in permanent Neurological deficit to be assessed no sooner than 3 months from the date of the accident. This diagnosis must be supported by unequivocal findings on Magnetic Resonance Imaging, Computerized Tomography, or other reliable imaging techniques. The accident must be caused solely and directly by accidental, violent, external and visible means and independently of all other causes.
- II. The Accidental Head injury must result in an inability to perform at least three (3) of the following Activities of Daily Living either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word "permanent" shall mean beyond the scope of recovery with current medical knowledge and technology.
- III. The Activities of Daily Living are:
 - i) Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;

- ii) Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
 - iii) Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa;
 - iv) Mobility: the ability to move indoors from room to room on level surfaces;
 - v) Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
 - vi) Feeding: the ability to feed oneself once food has been prepared and made available.
- IV. The following are excluded:
- i) spinal cord injury;

E

General Conditions

1. Non - Disclosure or Misrepresentation

- i. If at the time of issuance of **Policy** or during continuation of the **Policy**, the information provided to Us in the Proposal Form or otherwise, by **You** or the **Insured Person** or anyone acting on behalf of **You** or an **Insured Person**, is found to be incorrect, incomplete, suppressed or not disclosed, wilfully or otherwise, the **Policy** shall be:
 - a) cancelled ab initio from the inception date or the **Renewal** date (as the case may be), or the **Policy** may be modified by **Us** at **Our** sole discretion, upon 15 day notice by sending an endorsement to **Your** address shown in the **Policy Schedule**/Certificate of Insurance, and
 - b) the claim under such **Policy** if any, shall be prejudiced.
- ii. We may also exercise any of the below listed options for the purpose of continuing the health insurance coverage in case of Non-Disclosure/Misrepresentation of **Pre-existing Diseases** subject to your prior consent:
 - a) Permanently exclude the disease/condition and continue with the **Policy**
 - b) Incorporate additional waiting period of not exceeding 4 years for the said undisclosed disease or condition from the date the non-disclosed condition was detected and continue with the **Policy**.
 - c) Levy underwriting loading from the first year of issuance of **Policy** or renewal, whichever is later.

The above options will not prejudice the rights of the **Company** to invoke cancellation under clause 1 i above.

2. Disclosure of Information

The **Policy** shall be void and all premium paid thereon shall be forfeited to the **Company** in the event of misrepresentation, mis description or non-disclosure of any **Material Fact** by the **Policyholder**.

3. Condition Precedent to Admission of Liability

The terms and conditions of the **Policy** must be fulfilled by the **Insured Person** for the **Company** to make any payment for claim(s) arising under the **Policy**.

4. Complete Discharge

Any payment to the **Policyholder, Insured Person** or his/ her nominees or his/ her legal representative or assignee or to the **Hospital**, as the case may be, for any benefit under the **Policy** shall be a valid discharge towards payment of claim by the **Company** to the extent of that amount for the particular claim.

5. Multiple Policies

- i. In case of multiple policies taken by an **Insured Person** during a period from one or more insurers to indemnify treatment costs, the **Insured Person** shall have the right to require a settlement of his/her claim in terms of any of his/her policies. In all such cases the **Insurer** chosen by the **Insured Person** shall be obliged to settle the claim as long as the claim is within the limits of and according to the terms of the chosen **Policy**.
- ii. **Insured Person** having multiple policies shall also have the right to prefer claims under this **Policy** for the amounts disallowed under any other **Policy** / policies even if the sum insured is not exhausted. Then the **Insurer** shall independently settle the claim subject to the terms and conditions of this **Policy**.
- iii. If the amount to be claimed exceeds the **Sum Insured** under a single **Policy**, the **Insured Person** shall have the right to choose **Insurer** from whom he/she wants to claim the balance amount.
- iv. Where an **Insured Person** has policies from more than one **Insurer** to cover the same risk on indemnity basis, the **Insured Person** shall only be indemnified the treatment costs in accordance with the terms and conditions of the chosen **Policy**.

6. Moratorium Period

After completion of eight continuous years under the **Policy**, no look back to be applied. This period of eight years is called as **Moratorium Period**. The moratorium would be applicable for the Sums Insured of the first **Policy** and subsequently completion of 8 continuous years would be applicable from date of enhancement of Sums Insured only on the enhanced limits. After the expiry of **Moratorium Period** no health insurance claim shall be contestable except for proven fraud and permanent exclusions specified in the **Policy** contract. The policies would however be subject to all limits, sub limits, co-payments, deductibles as per the **Policy** contract.

7. Fraud

If any claim made by the **Insured Person**, is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the **Insured Person** or anyone acting on his/her behalf to obtain any benefit under this **Policy**, all benefits under this **Policy** and the premium paid shall be forfeited.

Any amount already paid against claims made under this **Policy** but which are found fraudulent later shall be repaid by all recipient(s)/policyholder(s), who has made that particular claim, who shall be jointly and severally liable for such repayment to the **Insurer**.

For the purpose of this clause, the expression "fraud" means any of the following acts committed by the **Insured Person** or by his agent or the **Hospital/doctor/any other party** acting on behalf of the **Insured Person**, with intent to deceive the **Insurer** or to induce the **Insurer** to issue an insurance **Policy**:

- a) the suggestion, as a fact of that which is not true and which the **Insured Person** does not believe to be true;
- b) the active concealment of a fact by the **Insured Person** having knowledge or belief of the fact;
- c) any other act fitted to deceive; and
- d) any such act or omission as the law specially declares to be fraudulent

The **Company** shall not repudiate the claim and / or forfeit the **Policy** benefits on the ground of fraud, if the **Insured Person** / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such misstatement of or suppression of **Material fact** are within the knowledge of the **Insurer**.

8. Geography

This **Policy** only covers Medical Treatment taken within India.

9. Loadings

- i. **We** may apply loading on the premium, based on the declarations made in the proposal form and the health status, habits and lifestyle, past medical records, and the results of the Pre-Policy medical examination of the persons proposed for insurance.
- ii. The maximum Medical Underwriting loading shall not exceed 100% for each condition and a total of 150% for each **Insured Person**
- iii. Loadings will be applied from Commencement date of the **Policy** including subsequent **Renewal(s)** with **Us** or on increased **Sum Insured**. We will not apply any additional loading on **Your Policy** premium at **Renewal** based on claim experience in **Your Policy**.
- iv. **We** will inform **You** about the proposed loading with time bound exclusion (if any) through a counter offer letter and will issue the **Policy** only on **Your** acceptance within 15 days of the receipt of such counter offer letter. In case, **You** neither accept the counter offer nor revert to **Us** within 15 days, **We** shall cancel **Your** application and refund the premium paid within next 7 days.

10. Renewal of Policy:

The **Company** shall be under no obligation to renew the **Policy/Coverage** on expiry of the period for which premium has been paid. The **Company** reserves the right to offer revised rates, terms and conditions at renewal based on claim experience and a fresh assessment of the risk. This **Policy** may be renewed only by mutual consent and subject to payment in advance of the total premium at the rate in force at the time of renewal. The **Company**, however, shall not be bound to give notice that the **Policy** is due for **Renewal** or to accept any **Renewal** premium. Unless renewed as herein provided, this **Policy** shall automatically terminate at the expiry of the **Policy Period/ Coverage Period**.

11. Grace Period

- i. A **Grace Period** of 30 days is available for Renewal of the Coverage. Any **Illness**, disease or condition contracted during **Grace Period** will not be covered and will be treated as **Pre-existing diseases**.
- ii. For **Renewal** received after completion of **Grace Period**, the Coverage would be considered as fresh without any **Renewal** benefits
- iii. For Policies on instalment basis, Grace Period is available as given below.

Instalment Premium Option	Grace Period applicable
Half Yearly	30 days
Quarterly	30 days
Monthly	15 days

12. Free look period

The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the **Policy**.

The **Insured Person** shall be allowed Free Look period of fifteen days from date of receipt of the **Policy** document to review the terms and conditions of the **Policy**, and to return the same if not acceptable.

If the **Insured** has not made any claim during the Free Look Period, the **Insured** shall be entitled to

- i. a refund of the premium paid less any expenses incurred by the **Company** on medical examination of the **Insured Person** and the stamp duty charges or
- ii. where the risk has already commenced and the option of return of the **Policy** is exercised by the **Insured Person**, a deduction towards the proportionate risk premium for period of cover or
- iii. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

13. 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** will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on **Migration**.

For Detailed Guidelines on Migration, kindly refer the link

https://www.irdai.gov.in/ADMINCMS/cms/frmGuidelines_Layout.aspx?page=PageNo3987

14. 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 45 days before, but not earlier than 60 days from the **Policy** renewal date as per IRDAI guidelines related to **Portability**. If such person is presently covered and has been continuously covered without any lapses under any health insurance **Policy** with an Indian General/Health insurer, the proposed **Insured Person** will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on **Portability**.

For Detailed Guidelines on Portability, kindly refer the link

https://www.irdai.gov.in/ADMINCMS/cms/frmGuidelines_Layout.aspx?page=PageNo3987

15. Endorsements

The following endorsements are permissible during the **Policy Period**:

Non-Financial Endorsements - which do not affect the premium

- i. Minor rectification/correction in name of the Proposer / **Insured Person** (and not the complete name change)
- ii. Rectification in gender of the **Insured Person**
- iii. Rectification in relationship of the **Insured Person** with the Proposer
- iv. Rectification of date of birth of the **Insured Person** (if this does not impact the premium)
- v. Change in the correspondence address of the **Insured Person**/Proposer (if this does not impact the premium)
- vi. Change in Nominee Details
- vii. Change in Height, weight, marital status (if this does not impact the premium)
- viii. Change in bank details
- ix. Any other non-financial endorsement

Financial Endorsements - which result in alteration in premium

- i. Change in Age/date of birth
- ii. Change in Height, weight
- iii. Addition of **Insured Person** (New Born Baby or newly wedded spouse)

- iv. Deletion of **Insured Person** on death or Marital separation
- v. Any other financial endorsement

The **Policyholder/Insured Person** shall apply in a proposal form along with birth Certificate / marriage certificate as the case may be for addition of **Insured person**.

16. Cancellation

- i. The **Policyholder** may cancel this **Policy** by giving 15 days' written notice and in such an event, the **Company** shall refund premium for the unexpired **Policy Period** as detailed below.

For Policies where instalment option is not availed, We will refund premium in accordance with the table below:

Month	% Refund
Up to 1 month	85.0%
Up to 3 month	70.0%
Up to 6 month	45.0%
Up to 12 month	0.0%

For Policies where Premium is paid by instalment, 50% of current instalment premium will be refunded when the current period is less than 6 months in to the **Policy Year**. For instalment after 6 months, no refund will be payable.

Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any benefit has been availed by the **Insured Person** under the **Policy**.

- ii. The **Company** may cancel the **Policy** at any time on grounds of misrepresentation non-disclosure of **Material Facts**, Fraud by the **Insured Person** by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of **Material Facts** or **Fraud**.

17. Premium Payment in Instalments

If the **Insured Person** has opted for Payment of Premium on an instalment basis i.e. Half Yearly, Quarterly or Monthly, as mentioned in the **Policy Schedule/Certificate of Insurance**, the following Conditions shall apply (notwithstanding any terms contrary elsewhere in the **Policy**)

- i. **Grace Period** as mentioned in the table below would be given to pay the instalment premium due for the **Policy**.

Options	Installment Option	Premium	Grace Period applicable
Option 1	Half Yearly		30 days
Option 2	Quarterly		30 days
Option 3	Monthly		15 days

- ii. During such **Grace Period**, coverage will not be available from the due date of instalment premium till the date of receipt of premium by **Company**.
- iii. The **Insured Person** will get the accrued continuity benefit in respect of the "Waiting Periods", "Specific Waiting Periods" in the event of payment of premium within the stipulated **Grace Period**.
- iv. No interest will be charged If the instalment premium is not paid on due date.
- v. In case of instalment premium due not received within the **Grace Period**, the **Policy** will get cancelled.
- vi. In the event of a claim, all subsequent premium installments shall immediately become due and payable.

- vii. The **Company** has the right to recover and deduct all the pending installments from the claim amount due under the **Policy**.

18. Possibility of Revision of Terms of the Policy Including the Premium Rates

The **Company**, with prior approval of IRDAI, may revise or modify the terms of the **Policy** including the premium rates. The **Insured Person** shall be notified three months before the changes are affected.

19. Withdrawal of Policy

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

20. Nomination

The **Policyholder** is required at the inception of the **Policy** to make a nomination for the purpose of payment of claims under the **Policy** in the event of death of the **Policyholder**. Any change of nomination shall be communicated to the **Company** in writing and such change shall be effective only when an endorsement on the **Policy** is made. In the event of death of the **Policyholder**, the **Company** will pay the nominee {as named in the **Policy Schedule/Policy Certificate/Endorsement** (if any)} and in case there is no subsisting nominee, to the legal heirs or legal representatives of the **Policyholder** whose discharge shall be treated as full and final discharge of its liability under the **Policy**.

21. Claim Settlement (provision for Penal Interest)

- i. The **Company** shall settle or reject a claim, as the case may be, within 30 days from the date of receipt of last necessary document.
- ii. In the case of delay in the payment of a claim, the **Company** shall be liable to pay interest to the **Policyholder** from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the **Bank Rate**.
- iii. However, where the circumstances of a claim warrant an investigation in the opinion of the **Company**, it shall initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document. In such cases, the **Company** shall settle or reject the claim within 45 days from the date of receipt of last necessary document.
- iv. In case of delay beyond stipulated 45 days, the **Company** shall be liable to pay interest to the **Policyholder** at a rate 2% above the **Bank Rate** from the date of receipt of last necessary document to the date of payment of claim.

22. Communication & Notice

Policy and any communication related to the **Policy** shall be sent to through electronic modes or to the address of the Insured as recorded in the **Policy**.

F Customer Service & Grievance Redressal Procedure

If you have a grievance that you wish us to redress, you may contact us with the details of your grievance through:

Policy No. **2999205350618801000**

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HDFC ERGO General Insurance Company Limited. IRDAI Reg. No.146. CIN: U66030MH2007PLC177117. Registered & Corporate Office: 1st Floor, HDFC House, 165-166 Backbay Reclamation, H. T. Parekh Marg, Churchgate, Mumbai – 400 020. Customer Experience Management, Customer Happiness Center: D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai - 400078. For Claim/Policy related queries call us at +91 22 6234 6234/+91 120 6234 6234 or Visit Help Section on www.hdfcergo.com for policy copy/tax certificate/make changes/register & track claim. Trade Logo displayed above belongs to HDFC Bank Ltd and ERGO International AG and used by the Company under license. UIN: HDFC ERGO Group Health Insurance-HDFHLGP24095V022324.

- Call Centre : 022-62346234/ 0120-62346234
- Emails - care@hdfcergo.com
- Designated Grievance Officer in each branch.
- Company Website - www.hdfcergo.com
- Courier : Any of our Branch office or corporate office

You may also approach the Complaint & Grievance (C&G) Cell at any of our branches with the details of your grievance during our working hours from Monday to Friday.

If you are not satisfied with our Redressal of your grievance through one of the above methods, you may contact our Head of Customer Service at

The Complaint & Grievance Cell ,
 HDFC ERGO General Insurance Company Ltd.
 Customer Happiness Center,
 D-301, 3rd Floor, Eastern Business District (Magnet Mall),
 LBS Marg, Bhandup (West). MUMBAI - 400078
 State : Maharashtra, City : Mumbai
 Pincode : 400078
 Email: grievance@hdfcergo.com

In case you are not satisfied with the response / resolution given / offered by the C&G cell, then you can write to the Chief Grievance Officer of the Company at the following address

The Chief Grievance Officer
 HDFC ERGO General Insurance Company Limited
 Customer Happiness Center,
 D-301, 3rd Floor, Eastern Business District (Magnet Mall),
 LBS Marg, Bhandup (West). MUMBAI - 400078
 State : Maharashtra, City : Mumbai
 Pincode : 400078
 E Mail: cgo@hdfcergo.com

You may also approach the nearest Insurance Ombudsman for resolution of your grievance. The contact details of Ombudsman offices are mentioned below if your grievance pertains to:

- Insurance claim that has been rejected or dispute of a claim on legal construction of the policy
- Delay in settlement of claim
- Dispute with regard to premium
- Non-receipt of your insurance document

Ombudsman Details

Office Details	Jurisdiction of Office (Union Territory, District)
<p>AHMEDABAD - The Ombudsman Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road,</p>	<p>Gujarat, Dadra & Nagar Haveli, Daman and Diu.</p>

Office Details	Jurisdiction of Office (Union Territory, District)
<p>Ahmedabad - 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@ecoi.co.in</p>	
<p>BENGALURU - The Ombudsman Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru - 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@ecoi.co.in</p>	Karnataka.
<p>BHOPAL - The Ombudsman 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</p>	Madhya Pradesh Chattisgarh.
<p>BHUBANESHWAR - The Ombudsman Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar - 751 009. Tel.: 0674 - 2596461 / 2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in</p>	Orissa.
<p>CHANDIGARH - The Ombudsman 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</p>	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh.
<p>CHENNAI - The Ombudsman Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet,</p>	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).

Office Details	Jurisdiction of Office (Union Territory, District)
<p>CHENNAI - 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@ecoi.co.in</p>	
<p>DELHI - The Ombudsman 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</p>	Delhi.
<p>GUWAHATI - The Ombudsman 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</p>	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
<p>HYDERABAD - The Ombudsman 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</p>	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.
<p>JAIPUR - The Ombudsman 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</p>	Rajasthan.
<p>ERNAKULAM - The Ombudsman Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road,</p>	Kerala, Lakshadweep, Mahe-a part of Pondicherry.

Office Details	Jurisdiction of Office (Union Territory, District)
Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@ecoi.co.in	
KOLKATA - The Ombudsman 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.
LUCKNOW -The Ombudsman 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.
MUMBAI - The Ombudsman 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.
NOIDA - The Ombudsman Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh 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, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PATNA - The Ombudsman	Bihar,

Office Details	Jurisdiction of Office (Union Territory, District)
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	Jharkhand.
PUNE - The Ombudsman 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	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

Annexure I - List of Non-Medical Expenses

S. No.	Item	S. No.	Item
1	BABY FOOD	35	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)
2	BABY UTILITIES CHARGES	36	SPACER
3	BEAUTY SERVICES	37	SPIROMETRE
4	BELTS/ BRACES	38	NEBULIZER KIT
5	BUDS	39	STEAM INHALER
6	COLD PACK/HOT PACK	40	ARMSLING
7	CARRY BAGS	41	THERMOMETER
8	EMAIL / INTERNET CHARGES	42	CERVICAL COLLAR
9	FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL)	43	SPLINT
10	LEGGINGS	44	DIABETIC FOOT WEAR
11	LAUNDRY CHARGES	45	KNEE BRACES (LONG/ SHORT/ HINGED)
12	MINERAL WATER	46	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER
13	SANITARY PAD	47	LUMBO SACRAL BELT
14	TELEPHONE CHARGES	48	NIMBUS BED OR WATER OR AIR BED CHARGES
15	GUEST SERVICES	49	AMBULANCE COLLAR
16	CREPE BANDAGE	50	AMBULANCE EQUIPMENT
17	DIAPER OF ANY TYPE	51	ABDOMINAL BINDER
18	EYELET COLLAR	52	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES
19	SLINGS	53	SUGAR FREE TABLETS
20	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES	54	CREAMS POWDERS LOTIONS (TOILETRIES ARE NOT PAYABLE, ONLY PRESCRIBED MEDICAL PHARMACEUTICALS PAYABLE)

21	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED	55	ECG ELECTRODES
22	TELEVISION CHARGES	56	GLOVES
23	SURCHARGES	57	NEBULISATION KIT
24	ATTENDANT CHARGES	58	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]
25	EXTRA DIET OF PATIENT (OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)	59	KIDNEY TRAY
26	BIRTH CERTIFICATE	60	MASK
27	CERTIFICATE CHARGES	61	OUNCE GLASS
28	COURIER CHARGES	62	OXYGEN MASK
29	CONVEYANCE CHARGES	63	PELVIC TRACTION BELT
30	MEDICAL CERTIFICATE	64	PAN CAN
31	MEDICAL RECORDS	65	TROLLY COVER
32	PHOTOCOPIES CHARGES	66	UROMETER, URINE JUG
33	MORTUARY CHARGES	67	AMBULANCE
34	WALKING AIDS CHARGES	68	VASOFIX SAFETY