## Future Generali India Insurance Co. Ltd. Unit No. 801 & 802, Tower C, 247 Embassy Park, LBS Marg, Vikhroli (West), Mumbai - 400083, www.futuregenerali.in

To,

Alok Kumar Pandey, PAYTM Payments Bank Limited Base Policy A-6 V J BUSINESS TOWER, SECTOR 125, , GAUTAM BUDDHA NAGAR, UTTAR PRADESH, Gautam Buddha Nagar-201303

Dear Insured,

Claim No: 121335237

Insurer Claim No: Insurer Member Id: FGH1690296B

Patient Name : Premsudha Mishra Policy Holder Name : PAYTM Payments Bank Limited Base Policy

Claimed Amount: 50994 Final Diagnosis: Typhoid fever, unspecified

MAID: 4040436072 Hospital Name/City: Care Hospital

**DOA**: 27 Mar 2024 **DOD**: 01 Apr 2024

Subject: Denial of claim 121335237 under FGH-12-23-7002814-00-000

We refer to your claim submitted for Reimbursement of Hospitalisation expenses to Medi Assist Insurance TPA Pvt Ltd. On scrutiny of the Claim documents, we observe that the claim is not admissible in view of the following:

We have received claim documents for, claimant Mrs. Premsudha Mishra - 35 Yrs admitted at Care Hospital hospital from 27 Mar 2024 to 01 Apr 2024 with the complaints of Typhoid fever, unspecified covered under Group Future Generali India Insurance policy since 02 Apr 2022 On verification of the case and the hospitalization documents, multiple discrepancies are noted. Hence the claim stands repudiated under Clause III.19 We regret our inability to admit this liability under the present policy conditions. We also reserve the right to repudiate the claim under any other ground/s available to us subsequently.

The denial clause/s with description is/are reproduced below for your ready reference:

Clause	Description
v.3.6	6. 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.

Since the claim does not fall within the purview of the Policy terms conditions, we regret our inability to admit the claim. If you have any other information or documents to substantiate admissibility of the claim, please provide the same within 15 days of receipt of this letter.

a) In case of any grievance relating to servicing the policy, you may submit in writing to the policy issuing office or Regional Office of the Insurance Company for redressal. If the Grievance remains un addressed, you may contact Head Office of the Insurance Company at fgcare@futuregenerali.in

b) If you are still not satisfied with the reply of the Insurance Company, you may approach the Insurance Ombudsman, established by the Central Government for redressal of grievance. The Insurance Ombudsman is empowered to adjudicate on personal line insurance claims up to Rs.30 lacs. Detailed process along with list of Ombudsman offices are available at <a href="https://www.cioins.co.in">https://www.cioins.co.in</a>.

Authorized Signatory,

Future Generali India Insurance Co. Ltd.