

A Plan to Fit Your Needs

You constantly strive to provide your loved ones with a future full of happiness and comfort. However, life isn't always predictable. Sometimes, unexpected events can stand in the way of your dreams.

Presenting ICICI Pru iProtect Supreme, a plan designed exclusively for you to help provide financial security for your family, no matter what. It safeguards your family's future against life's uncertainties and also gives you two plan options as per your need.

A Plan to Fit Your Needs

Life Insurance Cover
for financial security
of your family



Choice of two plan options
- With Return of Premium
- Without Return of Premium



Flexible policy term
and premium
payment options



Life Stage Protection
feature to enhance
your Sum Assured
on key milestones
in the Life Assured's life
like marriage, childbirth or
disbursement of Home loan



15% lower premiums
for women customers



Special discounts
for salaried customers



Tax benefits may be
applicable on premiums
paid and benefits
received as per
the prevailing tax laws



Plan at a Glance - Eligibility Criteria to buy the product

Plan Option	Premium Payment Option	Premium Payment Term (in years)	Minimum Policy Term (in years)	Maximum Policy Term (in years)	Min/Max Age at Entry (in years)	Min/Max Age at Maturity (in years)
With Return of Premium and Without Return of Premium	Limited Pay	5	20	85 years minus age at entry	18/55	38/85
		7				
		10				
		15				
		60 years minus age at entry				
	Regular Pay	Equal to Policy Term				

Under both plan options, the available policy term will be in multiple of 1 year between Maximum and Minimum policy term up to age of 85 years.

Minimum Sum Assured: ₹ 50,00,000

Maximum Sum Assured: The maximum sum assured will be as per Board approved underwriting policy

Minimum Premium: Corresponding to the minimum sum assured and applicable premium rates

Maximum Premium: Corresponding to the maximum sum assured and applicable premium rates

Premium Payment Frequency: Annual, Half-Yearly, Monthly

Goods and Services Tax are applicable on premiums as per the prevailing Tax Laws.
The tax laws are subject to amendments from time to time.

Premiums will vary depending on the plan option chosen by you.

Plan options in detail

Life is full of unexpected twists and turns. That's why it's crucial to plan ahead to protect your loved ones. With ICICI Pru iProtect Supreme, you can prepare for life's uncertainties by securing a life cover. If the person who is covered in the policy known as the Life Assured, passes away or becomes terminally ill, whichever is earlier, an amount known as the Death Benefit will be paid to the claimant.

This gives the family of the Life Assured the comfort of financial safety net to be able to meet future financial goals even if the Life Assured is not around.

Under both the plan options provided all due premiums have been paid, the Death Benefit payable to the claimant will be higher of

- 7 times Annualized Premium,
- 105% of the Total Premiums Paid up to the date of death or of diagnosis of terminal illness, whichever is earlier and
- Sum Assured opted by you

Where,

- Annualized premium shall be the premium amount payable in a year excluding the taxes, rider premiums, underwriting extra premiums and loadings for modal premiums.
- Total Premiums Paid means the total of all the premium paid under the base product, excluding any extra premium, and taxes, if collected explicitly.

You have the option to choose any one of the two plan options listed below. Your premiums and benefits will be determined by the plan option you select. Once chosen, your plan option cannot be changed.

1

With Return of Premium

Under this option, in the event of earlier of death or terminal illness of the Life Assured during the policy term, Death Benefit will be paid out as described above as per death benefit payout option. Upon survival of Life Assured till the date of maturity, you will receive a maturity benefit equal to 100% of total premiums paid. In the event of death of the Life Assured or where the Life Assured is diagnosed with Terminal Illness on the Date of Maturity then only Maturity Benefit if applicable will be payable and no death benefit shall be payable.

Let us understand how this plan option works using illustrations,

Mr. Kumar, a 35-year-old male, wants to cover his loved ones with a savings/term plan with sum assured of ₹ 2 Crores for 40 years. Mr. Kumar is a salaried professional and his annual income is ₹ 25 Lakhs per annum. He chooses to pay premiums for 10 years. He maintains a good lifestyle and is a healthy, non-smoker life. Mr. Kumar wants to opt for Return of Premium plan option.

Scenario 1: How Death Benefit works

Mr. Kumar pays premium of ₹ 86,578 in the 1st year and ₹ 1,01,856 from 2nd year onwards for 9 years

Mr. Kumar passes away or suffers from terminal illness - Claimant receives ₹ 2 Cr as Death Benefit payout.



Year 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 38 39 40

Jan 15, 2024

Jan 14, 2064



← Life cover of ₹ 2 Cr throughout the policy term →

Total Premiums Paid: ₹ 10,03,282[^]

[^]Goods and Services tax and cesses (if any) will be charged extra, as per applicable rates.

Scenario 2: How Maturity Benefit works

Mr. Kumar pays premium of ₹ 86,578 in the 1st year and ₹ 1,01,856 from 2nd year onwards for 9 years

Mr. Kumar survives till the Date of Maturity and receives ₹ 10,03,282 as Maturity Benefit



Year 0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 38 39 40

Jan 15, 2024

Jan 15, 2064



← Life cover of ₹ 2 Cr throughout the policy term →

Total Premiums Paid: ₹ 10,03,282[^]

[^]Goods and Services tax and cesses (if any) will be charged extra, as per applicable rates.

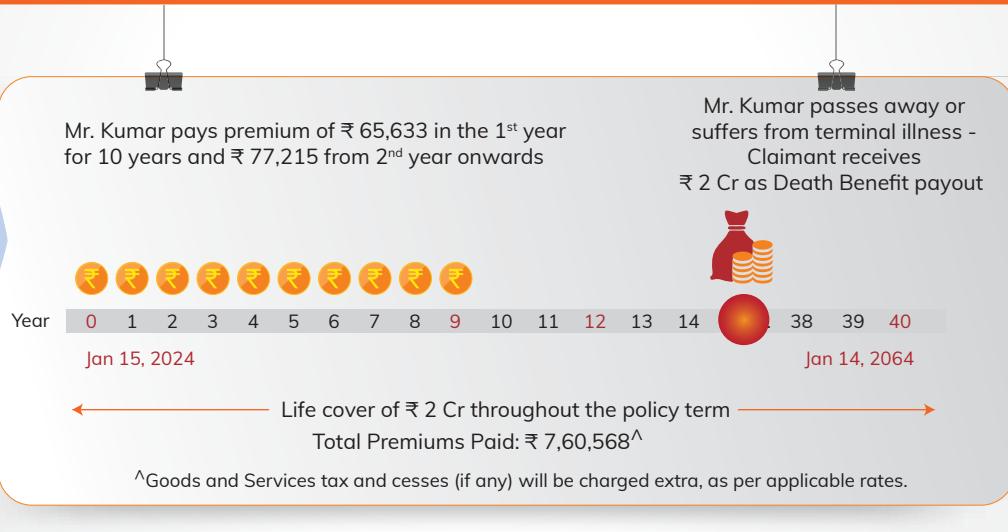


2 > Without Return of Premium

Under this option, in the event of earlier death or terminal illness of the Life Assured during the policy term, Death Benefit will be paid out as described above as per the death benefit payout option. Unlike the previous option, this option does not provide any Maturity Benefit. In the event of death of the Life Assured or where the Life Assured is diagnosed with Terminal Illness on the Date of Maturity both Death and Maturity Benefit will not be payable.

However, the premiums for this plan option are different from the previous one.

Let us say Mr. Kumar from the previous example, now opts for Without Return of Premium option.



On payment of maturity benefit (if any), the policy will terminate and all rights, benefits and interests under the policy will stand extinguished. The Death Benefit amount may be taxable as per the prevailing tax laws.

Death Benefit as Income option

You/the Claimant can choose to receive death benefit as lump sum or in the form of income over 5 years. You/the Claimant can also choose if some amount is required as lump sum and the remaining as income over 5 years.

How does this work?

Select the following:



Payment frequency: Choose to receive income either yearly, half-yearly, quarterly or monthly.



Proportion of death benefit: Choose whether full or part (<100%) of the Death Benefit is required as income. The balance amount, if any, will be paid in lump sum at the time of acceptance of the claim.

When to choose?

You can opt for this facility at the inception of the policy or your claimant can opt it at the time of registration of claim. No additional premium is payable for this option. At any time during the instalment payment phase, the claimant can choose to terminate the instalment payment in exchange for a lump-sum, in which case, the lump-sum payable shall be equal to the discounted value of all the future instalments due.

How is the income computed?

Please refer to clause 6 of terms and conditions for more information on instalment calculation.

What's more?

Life stage protection

Responsibilities change with time and your protection cover should match those responsibilities. ICICI Pru iProtect Supreme offers the flexibility to increase the level of protection for the Life Assured at key life stages of his/ her marriage, disbursement of home loan and/or child birth/ adoption of child, provided the Policy is In-Force.

The Sum Assured can be increased on any one or all of the below events during the Policy Term, subject to underwriting as per the Board -approved underwriting policy.

The maximum additional Sum Assured (applicable for Death Benefit) that can be availed under the named events (each event can be exercised only once) are tabulated as below:

Event	Additional Sum Assured (percentage of original Sum Assured)
Marriage	50%
Birth / Legal adoption of 1 st child	25%
Birth / Legal adoption of 2 nd child	25%
Disbursement of Home loan	100%

The increase in Sum Assured is applicable to base Sum Assured and not to any rider Sum Assured if opted for.

On exercising this option, You will have to pay an additional Premium for the additional Sum Assured for the outstanding Policy Term based on the Life Assured's then attained age, measured on last birthday basis. Hence the future premium payable by You on exercising this option will be the sum of original Premium and additional Premium(s) including applicable taxes.

No additional processing fee is chargeable for this option.

Upon opting for this feature, Premium will be recalculated based on the increased Sum Assured and outstanding policy term. This option can be exercised subject to:

- Minimum policy term (which is 20 years) available at the time of exercising this feature,
- Life Assured being less than 50 years of age at the time of the event.
- Total Sum assured after increase should not exceed the lower of the maximum permissible Sum Assured under this product, and that permitted as per the Board Approved Underwriting Policy.
- If any rider is attached to the Policy and the Rider Benefit has been paid during the Policy term, then this option cannot be exercised.
- The Company reserves its right to not increase the Sum Assured or offer a reduced Sum Assured as per the Board Approved Underwriting Policy.
- Such increase needs to be exercised by You within 6 months of the event and will be effective from the Policy Anniversary when the additional premium also becomes due to be paid for the first time.

Life Stage Protection feature will not be applicable if “With Return of Premium” plan option is chosen.

Salaried Discount:

A discount on first year's premium (excluding rider premiums, underwriting extra premiums and taxes) will be offered to salaried customers. This discount will be as follows:

Premium Payment Option	Discount
Limited Pay	15%
Regular Pay	12.5%

Surrender Benefit

At any stage after payment of one years' premium, the policy will acquire a surrender value. Once the policy has acquired a surrender value and if you are not able to continue with your policy, a surrender value will be payable.

Surrender Value will be calculated as follows:

For With Return of Premium option:

On policy surrender, we will pay Surrender Value equal to the higher of the following will be payable:

- Guaranteed Surrender Value (GSV)
- Special Surrender Value (SSV)

Guaranteed Surrender Value is defined as: GSV factor X Total Premiums Paid. GSV factors shall be as follows:

Policy Year of Surrender	GSV Factor
1	15%
2	30%
3	35%
4 to 7	50%
8 to (Policy Term less 2)	$50\% + 40\% \times (\text{Policy Year} - 7) / (\text{Policy Term} - 8)$
(Policy Term less 1) to Policy Term	90%

Special Surrender Value is defined as Maturity SSV factor X Paid-up Maturity Benefit + Unexpired Risk Premium Value X Risk Premium Factor.

Where, Unexpired Risk Premium Value shall be as follows:

- For Limited Pay: Unexpired Risk Premium Value= $25\% \times [\text{Number of months for which premiums are paid} / (\text{Premium Payment Term} \times 12)] \times [1 - (\text{Policy Month of surrender} - 1) / (\text{Policy Term} \times 12)] \times \text{Total Premiums Paid.}$
- For Regular Pay: Unexpired Risk Premium Value = 0

The SSV factors shall be reviewed annually based on the prevailing yield on 10 Year G-Sec and the underlying experience and may be revised upwards or downwards.

For Without Return of Premium option:

On policy surrender, the following Unexpired risk premium value will be payable:

- Limited Pay
 - If one full year's premium is not paid, Unexpired risk premium value = 0
 - If one full year's premium has been paid, then the Unexpired risk premium value = $25\% \times [\text{Number of months for which premiums are paid} / (\text{Premium Payment Term} \times 12)] \times [1 - (\text{Policy Month of surrender} - 1) / (\text{Policy Term} \times 12)] \times \text{Total Premiums Paid.}$
- Regular Pay
Unexpired risk premium value = 0

On payment of the Surrender Value, the policy will terminate and all rights, benefits and interests under the policy will stand extinguished.

Non-Payment of Premiums: What happens if you stop paying your premiums?

It is recommended that you pay all premiums for the period selected to be able to enjoy the comfort of financial safety with life cover throughout the policy term. However, if you stop paying premiums before the policy has acquired a surrender value then, the policy shall lapse and the cover will cease.

If you stop paying premiums before the end of the premium payment term and the policy has acquired a surrender value then, the policy shall become a paid-up policy and paid-up benefits will continue as described below:

Please note: Paid-up Benefits will be applicable only to “With Return of Premium” option.

A. Paid-up Death Benefit

In the event of earlier death or terminal illness of the Life Assured during the policy term, the Paid-Up Death Benefit will be payable.

Paid-Up Death Benefit is higher of:

- 105% of the Total Premiums Paid up to the date of death or diagnosis of terminal illness or
- Sum Assured X {number of months for which premiums are paid / (12 X Premium Payment Term)}

On payment of Paid-up Death Benefit the policy will terminate and all rights, benefits and interests under the policy will stand extinguished.

In the event of death of the Life Assured or where the Life Assured is diagnosed with Terminal Illness on the Date of Maturity for a Paid-up policy:

- With Return of Premium option: only the Paid-Up Maturity Benefit (if applicable) is payable and the Paid - up Death Benefit shall not be payable.
- Without Return of Premium option: Both Paid-up Death and Paid-up Maturity Benefit shall not become payable.

B. Paid-up Maturity Benefit

On survival of the Life Assured till the end of the policy term, the paid-up Maturity benefit will be payable at maturity.

Where Paid-up Maturity Benefit = 100% X Total premiums paid, till the date policy becomes Paid-up.

On payment of Paid-up maturity benefit, the policy will terminate and all rights, benefits and interests under the policy will stand extinguished.

For Without Return of Premium option if the policy has acquired Surrender Value, Unexpired risk premium value will be payable. Unexpired risk premium value is :

- Limited Pay: Unexpired risk premium value = 25% X [Number of months for which premiums are paid / (Premium Payment Term X 12)] X [1 – (Policy Month of surrender-1) / (Policy Term X 12)] X Total Premiums Paid
- Regular Pay: Unexpired risk premium value = 0

Revival

On revival of a lapsed or a paid-up policy, the original Death Benefit and Maturity Benefit (if applicable) shall be restored.

You can revive the policy subject to underwriting and the following conditions:

- The application for revival is made within 5 years from the due date of the first unpaid premium and before the termination date of the policy. Revival will be based on the prevailing Board approved underwriting policy.
- You should furnish, at your own expense, satisfactory evidence of health of the Life Assured as required by the prevailing Board approved underwriting policy.
- The arrears of premiums together with interest at such rate as we may charge for late payment of premiums are paid.
- Revival interest rates will be set monthly based on the prevailing yield on 10 year Government Securities and is equal to 150 basis points over the yield. The yield on 10 year Government Securities will be sourced from www.bloomberg.com. The revival interest rate for June 2025 is 7.86% p.a. compounded half- yearly.
- The revival interest rate will be reviewed on the 15th day of every month by us based on the 10-year G-Sec yield of one day prior to such review.
- We reserve the right to refuse to re-instate the policy. The revival will take effect only if it specifically communicated by us.
- Any change in revival conditions will be subject to prior approval from IRDAI and will be disclosed to you
- On revival of a lapsed or a Paid-up Policy, the original Death Benefit and Maturity Benefit (if applicable) shall be restored

Loan

- Loan will be available only for With Return of Premium plan option.
- Loans are available once the policy has attained a Surrender Value.
- Loan amount of up to 80% of Surrender Value can be availed.
- For other than in-force and fully paid-up policies, if the outstanding loan amount including interest exceeds the surrender value, the policy will be foreclosed after giving intimation and reasonable opportunity to the policyholder to continue the policy.
- In the event of failure to repay the outstanding loan amount with interest by the required date, the policy will be foreclosed, the policy will terminate, and all rights, benefits and interests under the policy will stand extinguished. An in-force and fully paid-up policy will not be foreclosed.
- Before any benefits are paid out, loan outstanding together with the interest thereon if any will be deducted and the balance amount will be payable.
- The policy shall be assigned to the company for the purpose of availing the loan feature.
- Applicable interest rate will be equal to 150 basis points in addition to the prevailing yield on 10 year Government Securities. The yield on 10-year Government Securities will be sourced from www.bloomberg.com. The loan interest rate for June 2025 is 7.86% p.a. compounded half-yearly.
- The loan interest rate will be reviewed on the 15th day of every month by the company based on the 10-year G-Sec yield of one day prior to such review.
- The basis for computing loan interest will be reviewed from time to time and may be revised subject to the prior approval of the IRDAI.

Terms & Conditions

1. Suicide clause: In case of death due to suicide within 12 months:
 - from the date of commencement of risk of the policy, the nominee or beneficiary shall be entitled to higher of 80% of the total premiums paid till the date of death or surrender value as available on date of death, provided the policy is in force or
 - from the date of revival of the policy the nominee or beneficiary shall be entitled to an amount which is higher of 80% of the total premiums paid till the date of death or the surrender value as available on the date of death.

On payment of this all rights, benefits and interests under the policy will stand extinguished.
 2. Free look period: On receipt of the policy document, whether received electronically or otherwise, you have an option to review the policy terms and conditions. If You are not satisfied or have any disagreement with the terms and conditions of the Policy or otherwise and have not made any claim, the Policy Document needs to be returned to the Company with reasons for cancellation within 30 days from the date of receipt of the Policy Document
 3. Proportionate risk premium for the period of cover
The policy shall terminate on payment of this amount and all rights, benefits and interests under this policy will stand extinguished.
 4. Life stage protection: The policy has to be in force at the time of availing this feature. This feature needs to be exercised within 6 months from the date of the event and only if no claim for any benefit under the policy has been admitted. This feature is available to the Life Assured underwritten as a standard life at the time of inception of the policy. The insured life has to be less than 50 years of age at the time of opting for this feature. This feature is available for Regular Pay policies only.
 5. Terminal Illness: A Life Assured shall be regarded as Terminally Ill only if that Life Assured is diagnosed as suffering from a condition which, in the opinion of two independent medical practitioners' specializing in treatment of such illness, is highly likely to lead to death within 6 months. The terminal illness must be diagnosed and confirmed by medical practitioners registered with the Indian Medical Association and approved by us. We reserve the right for independent assessment.
 6. Medical Practitioner: A Medical Practitioner is 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. The Medical Practitioner
- Stamp duty under the policy,
 - Expenses borne by the Company on medical examination, if any

should neither be the insured person(s) himself nor related to the insured person(s) by blood or marriage nor share the same residence as the Life Assured.

6. Death Benefit as Income Options:

If you or the Claimant choose to receive the Death Benefit or a part of it as instalments over 5 years, the instalment amount shall be calculated such that the present value of instalments, computed as on date of death using a given interest rate, shall equal the amount of death benefit chosen to be taken as instalments under the policy. Such instalment amount shall be a level amount and once chosen shall remain fixed over the instalment period.

The discount rate used to compute the instalment amount shall be equal to the annualized yield on 10-year G-Sec (rounded down to nearest 25bps) less 100 basis points. The yield on 10-year Government Securities will be sourced from www.bloomberg.com. This rate will be reviewed twice every year on 1st of June and 1st of December. At any time during the instalment payment phase, the claimant can choose to terminate the instalment payment in exchange for a lump sum, in which case, the lump-sum payable shall be equal to the discounted value of all the future instalments due. The interest rate used to calculate the discounted value will be that as applicable on date of termination, using the above-mentioned formula.

7. Tax benefits: Tax benefits may be available as per prevailing tax laws. Tax benefits under the policy are subject to prevailing conditions and provisions of the Income Tax Act, 1961. Goods and Services Tax and Cesses, if any, will be charged extra as per applicable rates. The tax laws are subject to amendments made thereto

from time to time. Please consult your tax advisor for details.

8. Grace period: The grace period for payment of premium is 15 days for monthly mode of premium payment and 30 days for other frequencies of premium payment, commencing from the premium due date. The life cover continues during the grace period. In case of death or Terminal Illness of Life Assured during the grace period, applicable Death Benefit will be payable.

9. Lapsation:

With Return of Premium option

If any premium instalment is not paid within the grace period before the policy acquires a surrender value then the policy shall lapse, and the cover will cease. If the policy is not revived within the revival period, then the policy shall foreclose without any benefits payable and all rights and benefits under the policy shall stand extinguished.

If any premium instalment is not paid within the grace period any time after the policy acquires a surrender value then the policy shall become a paid-up policy and benefits will continue.

Without Return of Premium option

If any premium instalment is not paid within the grace period then the policy shall lapse, and the cover will cease. If the policy is not revived within the revival period, then the surrender value(if payable) and computed as on date of premium discontinuance shall become payable on the earliest of the following events:

- Event of death or diagnosis of terminal illness (whichever happens first) of the Life Assured,
- End of revival period, and

- Maturity date.
Post payment of such surrender value (if any), then the policy shall foreclose and all rights and benefits under the policy shall stand extinguished.
10. Renewal Premium in Advance: Collection of renewal premium shall be allowed, provided the premium is collected within the same financial year. However, where the renewal premium due in one financial year is being collected in advance in earlier financial year, insurers may collect the same for a maximum period of three months in advance of the due date of the premium. The renewal premium so collected in advance shall only be adjusted on the due date of the premium.
11. Change of frequency of premium payment: change in mode of premium payment is allowed during the Premium Payment Term, but shall be effective only from next Policy Anniversary. The modal loading will be applicable for new mode of premium payment option chosen.
12. Modal loadings: Loadings for various modes of premium payment are given below
- | Premium paying frequency | Modal Loading (as a % of Premium) |
|--------------------------|-----------------------------------|
| Monthly | 2.5% |
| Half-yearly | 1.25% |
| Yearly | 0% |
13. Nomination: Nomination in the Policy will be governed by Section 39 of the Insurance Act, 1938 as amended from time to time. For more details on this section, please refer to our website.
14. Assignment: Assignment shall be as per Section 38 of the Insurance Act, 1938 as amended from time to time. For more details on this section, please refer to our website.
15. Section 41 of the Insurance Act, 1938 as amended from time to time: In accordance to the Section 41 of the Insurance Act, 1938 as amended from time to time, no person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
- Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ten lakh rupees.
16. Policies where Policyholder and Life Assured are different individuals: If the Policyholder and the Life Assured are different, then in the event of death of the Policyholder and upon subsequent intimation of the death with the Company the policy shall vest on the Life Assured. Thereafter, the Life Assured shall become the Policyholder and will be entitled to all benefits and subject to all liabilities as per the terms and conditions of the policy. The Life Assured cum Policyholder can register due nomination as per Section 39 of the Insurance Act, 1938 as amended from time to time.
17. The product is also available for sale through online mode.
18. Section 45 of the Insurance Act, 1938, as amended from time to time: 1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of

the policy or the date of the rider to the policy, whichever is later. 2) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based. 3) Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer: Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive. 4) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based: Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the

ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation. 5) Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the Life Insured was incorrectly stated in the proposal.

19. Policy Servicing and Grievance Handling Mechanism: For any clarification or assistance, You may contact Our advisor or call Our customer service representative (between 10.00 a.m. to 7.00 p.m, Monday to Saturday; excluding national holidays) on the numbers mentioned on the reverse of the Policy folder or on Our website: www.iciciprulife.com. For updated contact details, We request You to regularly check Our website. If You do not receive any resolution from Us or if You are not satisfied with Our resolution, You may get in touch with Our designated grievance redressal officer (GRO) at gro@iciciprulife.com or 1800-2660.

Address:

ICICI Prudential Life Insurance Company Limited,
Unit 901A & 901B, 9th Floor, Prism Towers,
Mindspace Link Road, Goregaon West,
Mumbai – 400104.

For more details, please refer to the "Grievance Redressal" section on www.iciciprulife.com. If You do not receive any resolution or if You are not satisfied with the resolution provided by the GRO, You may escalate the matter to Our internal grievance redressal committee at the address mentioned below:

ICICI Prudential Life Insurance Co. Ltd.

Unit 901A & 901B, 9th Floor, Prism Towers,
Mindspace Link Road, Goregaon West,
Mumbai – 400104, Maharashtra.

If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach Policyholders' Protection and Grievance Redressal Department, the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (BIMA BHAROSA SHIKAYAT NIVARAN KENDRA)

155255 (or) 1800 4254 732

Email ID: complaints@irdai.gov.in

Address for communication for complaints by

fax/paper:

Policyholders' Protection and Grievance Redressal Department – Grievance Redressal Cell

Insurance Regulatory and Development Authority of India Survey No. 115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad, Telangana State – 500032

You can also register your complaint online at bimabharosa.irdai.gov.in.

This is subject to change from time to time. Refer

<https://www.iciciprulife.com/services/grievance-redressal.html> for more details.



Retirement is a time where you can finally reap the rewards of your life's hard work. It is a journey, where you are the driver, and the road ahead is full of possibilities. Just like a GPS helps you navigate unfamiliar routes, financial planning serves as your post-retired life's GPS, guiding you through your golden years. With proper planning, your retirement can be full of travel, pursuing hobbies, and much more, all without the limitations of money. It ensures that medical expenses and unexpected emergencies don't divert you from the path you've set for yourself.

To make this journey even more secure and fulfilling, we present ICICI Prudential Gold Pension Savings (GPS). This is a savings-oriented participating pension plan designed to be your financial navigator. It helps you save in your working years to build a retirement corpus, preparing you for a life that meets the GOLD standard in your golden years.

Salient features that make
ICICI Pru Gold Pension Savings
suitable for you



Build a corpus

With an assured benefit of 105% of total premiums paid and a possible upside through declaration of bonuses, build a corpus for your retirement.



Complimentary health check-up

Avail periodic complimentary health check-up on later of completing 3 policy years and on attaining 50 years of age.



Accumulate bonuses

From the first policy year, you can accumulate bonuses to grow your retirement pot.



Emergency access to funds

The product gives you the flexibility to withdraw part of your retirement pot in case of major life events or illnesses.



Re-plan your pension start date

Option to defer receiving the policy proceeds on vesting till the age of 75 years and instead continue to grow the accumulated vesting corpus at a reverse repo linked rate.



Faster policy issuance

Faster policy issuance provided you submit required documents and on your confirmation of good health.



Tax benefits

Tax benefits shall be applicable on premiums paid and benefits received as per prevailing tax laws.



Plan at a glance – Eligibility criteria to buy the product

Premium Payment Term (PPT)	Min/ Max Policy Term (PT)	Min/ Max Age at Entry	Min/ Max Age at Vesting	Min/ Max Premium
Single pay: One year				Minimum – Single pay: ₹ 50,000
Limited pay: 2 years to 15 years	10 years / 40 years	18 years / 70 years	40* years / 80 years	Limited/ Regular pay: ₹ 50,000 p.a.** Maximum – Subject to internal company guidelines (Board Approved Underwriting Policy)
Regular pay: 10 years to 40 years				

*55 years last birthday for policies sourced from overseas pension fund (HMRC, UK).

Premium Payment Frequency: Yearly, Half-Yearly, Monthly, Single pay

**Applicable Goods and Services Tax will be taken separately, as per applicable rates. The tax laws are subject to amendments from time to time.



Planning for Retirement

Set a goal: Think about what you want to do during your retirement years and to plan for it, you need to have a goal in mind.

Save regularly: To achieve your goal, you need to do disciplined savings to have a financially secured retired life.

Choose how to pay: You can choose to pay premiums once, for a limited time or regularly for the whole term.

Start accumulating for your retirement: As you continue to pay your premiums, you may earn Regular Bonuses (an amount that the company may declare as a bonus) throughout the policy term, starting from the first policy year.



Features of ICICI Pru Gold Pension Savings in detail

Regular Bonuses, if declared, shall vest on the subsequent policy anniversary, and are guaranteed to be paid to you based on policy terms & conditions.

Vested Bonuses shall accumulate monthly within the policy at a benchmark-linked rate. The accumulation of vested bonuses shall continue until the policy is terminated. Refer Clause 10 under Terms & Conditions section of this document for more details.

In case of major life events or illnesses, you may encash up to 25% of Total Premiums Paid over the lifetime of this policy as Special Withdrawals, whilst keeping the Policy in-force. Please refer to the section "Special Withdrawals" for more details.

1. Vesting Benefit

On survival of the Life Assured (the person whose life is covered under this policy) till the end of the policy term, you will get a benefit known as the Vesting Benefit, which will be equal to the sum of:

- Assured Benefit on Vesting, which is equal to 105% of sum of Total Premiums Paid, plus
- Accumulating Cash Bonus (if any), less total amount of part encashment done using the Special Withdrawal feature, plus
- Terminal Bonus (if declared).

Total Premiums Paid means the total of all the premium(s) received, excluding any extra premium, any rider premium and taxes.

Regular Bonus, if declared, will be declared as a proportion of Single or Annualized Premium and may vary by age, premium payment term & policy term.

Single Premium is the premium payable for a single pay policy as chosen by you, excluding taxes, rider premiums, underwriting extra premiums and loading for modal premiums, if any. Annualized Premium is the premium amount payable in a year excluding taxes, rider premiums, underwriting extra premium and loadings for modal premium, if any.

For details on Bonuses, please refer Clause 6 under Terms & Conditions mentioned below.

To understand this benefit in greater detail, let us take an example.

Illustration:

Mr. Rishabh, a 40-year-old, wants to save for his retirement. He decides to pay the premium of ₹ 1,00,000 every year for 10 years and wants a retirement corpus at the age of 60 years, i.e. a policy term of 20 years.

Mr. Rishabh pays¹ ₹ 1,00,000 p.a. for 10 years = total of ₹ 10,00,000



Years	0	1	2	3	4	5	6	7	8	9	20
	40	41	42	43	44	45	46	47	48	49	60

Jan 1, 2023

Jan 1, 2043

(Date of vesting)

Accumulating Cash Bonus



*Regular Bonus (RB), if declared, vests on the subsequent policy anniversary and accumulates at a benchmark-linked rate. **Loyalty Accumulation (LA) is the excess of Accumulating Cash Bonus over the total amount of vested bonus.



Terminal Bonus



Vesting Benefit

(105% of Total Premiums Paid,
+
Accumulating Cash Bonus (if any)
+
Terminal Bonus, if declared)

Benefits payable ²	Assumed at 4% p.a.	Assumed at 8% p.a.
Accumulating Cash Bonus (A)	₹ 20,186	₹ 5,06,034
Assured Benefit on Vesting (B)	₹ 10,50,000	₹ 10,50,000
Terminal Bonus (C)	₹ 5,99,926	₹ 13,86,025
Total Vesting Benefit (A+B+C)	₹ 16,70,112	₹ 29,42,058

¹GST applicable on premium will be charged extra as per prevailing tax laws. ²For variable benefits, the illustrations on this page will show two different rates of assumed future investment returns. These assumed rates of return are not guaranteed, and they are not the upper or lower limits of what you might get back.

On vesting, to utilize the Vesting Benefit, Mr. Rishabh may:

- (i) Utilize the entire Vesting Benefit to purchase immediate annuity or deferred annuity from us at the then prevailing annuity rate. He shall have an option to purchase immediate annuity or deferred annuity from another insurer at the then prevailing rate by utilizing not more than 50%, of the proceeds of the policy net of commutation , OR
- (ii) Commute/ withdraw up to 60% of the entire vesting benefit and utilize the balance amount to purchase immediate annuity or deferred annuity from us at the then prevailing annuity rate. He shall have an option to purchase immediate annuity or deferred annuity from another insurer at the then prevailing rate , by utilizing not more than 50%, of the proceeds of the policy net of commutation.

Please refer clause 11B under Terms & Conditions for more details.

What's more?

Mr. Rishabh shall have an option to postpone the vesting date up to a maximum age of 75 years (last birthday) on the date of vesting. He may opt for this feature if he postpones his retirement to a later date.

Please refer the section "Additional features" for details.

2. Death Benefit:

If the person whose life is covered by this policy passes away during the term of the policy, the Death Benefit (insurance cover amount) payable will be equal to:

- Assured Benefit on Death (i.e. equal to 105% of sum of Total Premiums Paid), plus
- Accumulating Cash Bonus (if any), less total amount of part encashment done using the Special Withdrawal feature, plus
- Interim Bonus (if declared), plus
- Terminal Bonus (if declared)

The Claimant can receive this death benefit either as a lumpsum or choose to annuitize the same.

Please refer Clause 11A of the Terms & Conditions mentioned below for details.

In the event of death of the Life Assured on the Vesting Date, only the Vesting Benefit (if applicable) is payable, and the Death Benefit shall not be payable.

The Interim Bonus will be computed as below:

Interim Bonus = $n/12 * \text{Interim Bonus Rate} * \text{Single or Annualized Premium}$

where, n is equal to completed policy months since last policy anniversary as on date of death.



Additional features

Your pension plan should align with your retirement goals and enable you to utilize the money when you want and the way you want. Keeping this in mind, the following flexibilities are available under the product:

In the accumulation phase (i.e. during the policy term):

1. Special Withdrawal:

Along with the need for a corpus to take care of your retirement goals, it is also essential to have access to funds to take care of major life events and/or unplanned expenses.

This option allows you to encash up to 25% of the Total Premiums Paid over the lifetime of your policy, during the policy term, subject to the following:

- 1) The first withdrawal will be permitted after completion of 3 years from the date of commencement of risk.
- 2) The minimum amount of any withdrawal allowed is ₹ 5,000.
- 3) The maximum withdrawal permitted at any time shall not exceed the lower of:
 - Value of Accumulating Cash Bonus as on the date of request; and
 - 25% of the Total Premiums Paid as on the date of request, less the amount previously withdrawn (if any) as Special Withdrawals.
- 4) You will be permitted to make a withdrawal for a maximum of 3 times during the policy term.
- 5) Withdrawals are allowed for the following:
 - (i) Higher education of Life Assured's children (including a legally adopted child)
 - (ii) Marriage of Life Assured's children (including a legally adopted child)
 - (iii) Purchase or construction of a residential house or flat in Life Assured's own name or in a joint name with his/her legally wedded spouse. However, if the Life assured already owns a residential house or flat (other than ancestral property), no partial withdrawal shall be permitted.
 - (iv) Treatment of critical illnesses: of self or spouse, or dependent children, including legally adopted children.
 - (v) To meet medical and incidental expenses arising from disability or incapacitation suffered by the Life Assured.
 - (vi) Expenses incurred by the life assured for skill development/re-skilling or any other self-development activities.
 - (vii) Expenses incurred by the Life assured for the establishment of her/his own venture or any start-ups.
 - (viii) Any other reason as per the IRDAI Circular/ Guidelines/ Regulations issued from time to time.

Illustration:

Mr. Rishabh from the above illustration wishes to withdraw funds to pay for down payment of his first home, on the 15th policy anniversary. He has paid a premium of ₹ 1,00,000 every year for 10 years.

Accumulating Cash Bonus in 15th year ¹	Assumed at 4% p.a.	Assumed at 8% p.a.
	₹ 14,458	₹ 3,22,499
25% of total premiums paid as on date of withdrawal	₹ 2,50,000	
Maximum withdrawable amount	₹ 14,458	₹ 2,50,000

¹For variable benefits, the illustrations on this page will show two different rates of assumed future investment returns. These assumed rates of return are not guaranteed, and they are not the upper or lower limits of what you might get back.

You can make this withdrawal by submitting a request to us citing the applicable clause under which the request is being made, along with a certificate from a registered medical practitioner and/ or appropriate hospital records in case the underlying cause is health related.

The amount of Special Withdrawal done by you shall be construed as preponement of the commuted portion of the Surrender/ Vesting Benefit and will be adjusted later in the calculation of maximum commuted portion at the time of Surrender/ Vesting, as mentioned under Clause 11, Terms & Conditions.

2. Policy loan

In times of need, you may avail a loan from your policy, after it acquires a Surrender Value and subject to following terms & conditions:

- a. Loans are available provided a positive surrender value is payable under the policy at the time of disbursement of the same.
- b. Loan Amount up to 80% of the Surrender Value can be availed.
- c. For other than in-force and fully paid-up policies, if the outstanding loan amount including interest exceeds the Surrender Value, the policy will be foreclosed. You shall be given due intimation/ notice prior to the policy foreclosure as a reasonable opportunity for continuing the policy. On Foreclosure, the Policy will terminate, and all rights, benefits and interests under the policy will stand extinguished.
- d. For inforce and/or fully paid-up policy, the policy can't be foreclosed on the ground of outstanding loan amount including interest exceeding the surrender value.
- e. Before any benefits are paid out, loan outstanding together with the interest thereon if any will be deducted and the balance amount will be payable.
- f. For availing this feature of Loan, the policy shall be assigned to the Company.
- g. Applicable interest rate will be equal to 1.5% in addition to prevailing yield on 10-year Government Securities.

The yield on 10-year Government Securities will be sourced from www.bloomberg.com. The loan interest rate for August 2024 is 8.36% p.a. compounded half-yearly.

- h. The loan interest rate will be reviewed monthly by Us and any change in the interest rate shall be effective from 15th of the month. The basis for computing loan interest will be reviewed from time to time and may be revised subject to the prior approval of the IRDAI.

In the annuitization (income) phase (i.e. after the policy term):

3. Postponement of vesting date:

You have an option to postpone the vesting date of the policy (date on which you will get Vesting Benefit from your policy). The minimum deferral can be of one month and maximum can be up to your age of 75 years (last birthday). You can opt for this feature once during the policy term any time before the last 2 policy months of the policy term.

If you choose this option, we shall enhance the Vesting Benefit as computed on the original vesting date on a monthly compounded basis by the Reverse Repo Rate (published by the Reserve Bank of India (RBI) on its website). Please refer Clause 12 of Terms & Conditions for more details.

Once the postponement period is over, or on request to terminate the postponement period early (whichever is earlier), you can take accumulated value of the Vesting Benefit as on the date of claim as per policy vesting provisions described under Clause 11 of Terms & Conditions.

In case of death of the Life Assured during the postponement period, the Claimant can take accumulated value of the Vesting Benefit as on the date of claim as per the death annuitization provisions described under Clause 11A of Terms & Conditions.



Silver's Benefit

Under this benefit, the Life Assured may avail a periodic complimentary health check-up, subject to the following eligibility conditions:

- a) The benefit can be exercised after:
 - At least 3 policy years elapsing from date of commencement of risk; and
 - If the age of Life Assured is 50 years or above as on date of request to avail the health check-up option.
- b) The number of times the Life Assured will be permitted to avail this benefit shall be:
 - Limited to once in any policy year; and
 - Limited to maximum 3 times over the entire policy term.
- c) All due premiums must have been paid as on date of every request to exercise of this benefit.

Note:

- a) This Value Added Service is completely optional for the Life Assured to avail subject to the eligibility conditions stated above.
- b) This is a standalone feature and has no correlation with any of the other Policy terms and conditions including the benefits applicable and premium payable under this policy
- c) The Company shall not levy any additional Premiums for providing this benefit.
- d) The Life Assured may exercise his/ her own discretion to avail the services.
- e) The health check-up services shall be provided by third party service provider(s) as per their prevailing terms and conditions. The Company merely acts as a facilitator of these services to the Life Assured.
- f) The Company shall not be liable for any services or actions of these third party services providers including but not limited to deficiency in services/ malpractices/ negligence/ lapses or otherwise.
- g) This Benefit is subject to the availability of suitable service provider(s) at Your location.
- h) The details of Health check-up Services offered by the Company and the list of service providers shall be as mentioned on the official website of the Company. Before availing You are requested to check the official website for the updated list of services and service providers.
- i) The Company reserves the right to modify or discontinue the VAS or change the service provider(s) at any time without any further intimation.



What happens if you stop paying your premiums?

It is recommended that you pay all premiums for the period selected to be able to enjoy all policy benefits. However, at any stage if you stop paying premiums for a limited pay or a regular pay policy, the following shall be applicable:

- i) i) If any premium remains unpaid after the expiry of the grace period and before the policyholder has paid at least one full year's premium, then the policy will lapse. If you do not revive the lapsed policy by the end of revival period, it will terminate, and no benefits will be payable.
- ii) ii) If any premium remains unpaid after the expiry of the grace period and after the policyholder has paid at least one full year's then the policy is said to have become "paid-up". A Paid-up policy is one where you are entitled to get benefits, but the benefits will be lower than full benefits, since you would have paid lesser than the total premiums supposed to be paid.

Please read the section on Policy Revival mentioned below, which specifies how one can pay due premiums and revive the benefits of the policy.

- iii) Paid-up benefits are as explained below:

Paid-up Vesting benefit:

Upon survival of the Life Assured at the end of the policy term, you will get a Paid-up Vesting Benefit equal to the sum of

- Assured Benefit on Vesting (i.e. equal to 105% of sum of Total Premiums paid), plus
- Accumulating Cash Bonus (if any), less total amount of part encashment done using the Special Withdrawal feature, plus
- Contingent Terminal Bonus (if declared)

Paid-up Death benefit:

On death during the policy term, Claimant will get a benefit equal to:

- Assured Benefit on Death (i.e. equal to 105% of sum of Total Premiums paid), plus
- Accumulating Cash Bonus (if any), less total amount of part encashment done using the Special Withdrawal feature, plus
- Contingent Terminal Bonus (if declared)

On payment of this benefit as per provisions mentioned under clause 11 of Terms & Conditions, the policy will terminate and all rights, benefits and interests under the policy will stand extinguished.

In the event of death of the Life Assured on the Vesting Date while the policy is in paid up-status, only the Vesting Benefit (if applicable) is payable, and the paid up Death Benefit shall not be payable.



Policy revival

You can revive your policy benefits for their full value within five years from the due date of the first unpaid premium by paying all due premiums together with interest before the termination date of the policy subject to underwriting and the following conditions:

- The application for revival is made within 5 years from the due date of the first unpaid premium or before the end of the policy term, whichever is earlier. Revival will be based on the prevailing Board approved underwriting policy.
- You furnish, at your own expense, satisfactory evidence of health of the Life Assured as required by the prevailing Board approved underwriting policy.
- The arrears of premiums together with interest at such rate as the Company may charge for late payment of premiums are paid. Revival interest rate will be equal to 1.5% in addition to the prevailing yield on 10-year Government Securities. The yield on 10-year Government Securities will be sourced from www.bloomberg.com. The revival interest rate for August 2024 is 8.36% p.a. compounded half-yearly.
- The revival interest rate will be reviewed on the 15th day of every month by the company based on the 10-year G-Sec yield of one day prior to such review.

The revival of the policy may be on terms different from those applicable to the policy before premiums were discontinued; for example, extra mortality premiums or charges may be applicable. The revival will take effect only if it is specifically communicated by the Company to you. The Company reserves the right to refuse to revive the policy.

On revival of a lapsed or a paid-up policy, all benefits under the policy will be restored. All past Regular Bonuses (if declared) that would have otherwise vested to a premium paying policy during the period the policy was either lapsed or paid-up, will vest based on the policy anniversaries elapsed and will be accumulated at the past respective applicable accumulation rates. The Contingent Terminal Bonus (if any) attached to the policy will be reversed.

Any change in revival conditions will be subject to prior approval from IRDAI and will be disclosed to policyholders.



Surrender

It is recommended that you continue with your policy to avail all benefits.

However, for limited and regular pay policies you can surrender the policy any time after payment of at least one full policy year's premium(s). Prior to receipt of one full year's premium, no surrender value is payable.

For single pay policies, you can Surrender the policy immediately from the date of commencement of risk.

Surrender of the policy can only be done after at least one full years' premium is paid.

On policy surrender, a Surrender Value equal to the higher of the following will be payable:

- Guaranteed Surrender Value (GSV)
- Special Surrender Value (SSV)

Surrender is allowed only during the policy term. On payment of Surrender Value, the policy will terminate and all rights, benefits and interests under the policy will stand extinguished.

Surrender Value can be received as per the annuitization provision mentioned in Clause 11C of the Terms & Conditions below.

Guaranteed Surrender Value

GSV will be calculated as follows:

$$\text{GSV} = \text{GSV Factor} \times \{\text{Total Premiums Paid} + \text{Accumulating Cash Bonus (if any)}\}$$

GSV factors for Non-Single Pay shall be as follows:

Policy Year of Surrender	GSV factor
1	15%
2	30%
3	35%
4 to 7	50%
8 to (Policy Term less 2)	$50\% + 40\% \times (\text{Policy Year} - 7) \div (\text{Policy Term} - 8)$
Policy Term less 1 to Policy Term	90%

GSV factors for Single Pay shall be as follows:

Policy Year of Surrender	GSV Factor
1	75%
2	75%
3	75%
4 to Policy Term	90%

Special Surrender Value

SSV will be calculated as follows:

$\text{SSV} = \text{SSV Factor} \times 105\% \times \text{Total Premiums Paid}$, plus Accumulating Cash Bonus(if any)}, less total amount of partial encashment done using the Special Withdrawal feature, plus Terminal Bonus (applicable for premium paying or fully paid-up policies) or Contingent Terminal Bonus (applicable for paid-up policies), if declared.

For more details on the surrender benefit, please refer to the policy document



Access to benefit payouts if the policy is purchased as QROPS (Qualifying Recognized Overseas Pension Scheme), through transfer of UK tax relieved assets

1. Benefits on vesting: If this product is purchased as QROPS through transfer of UK tax relieved assets, access to benefits from the policy proceeds both in the form of tax-free commutation and annuitization, would be restricted till the life assured attains 55 years of age or vesting age, whichever is later.
2. Non-forfeiture benefits: If this product is purchased as QROPS through transfer of UK tax relieved assets, access to benefits from the policy proceeds in the form of either Special Withdrawal, or tax-free commutation/ annuitization on surrender, would be restricted till the life assured attains 55 years of age, except where Critical III Health condition** is diagnosed.

**Critical III Health condition is where a recognized medical practitioner has provided a written certificate confirming the member is expected to live for less than one year.

3. Cancellation in the Free-look period: If this product is purchased as QROPS through transfer of UK tax relieved assets, the proceeds from cancellation in Free-look period shall only be transferred back to the fund house from where the money was received.
4. Overseas Transfer Charge: In the event of applicable tax charge arising as a result of an overseas transfer (His Majesty Revenue & Customs (HMRC) – policy paper – The overseas transfer charge – guidance, published 8th March 2017) for which the Scheme Manager i.e. ICICI Prudential Life Insurance Company may become liable, the insurer shall deduct an amount only to the extent of the applicable tax charge from the transfer-in amount and remit the same to HMRC.
5. Tax Liability: The payments by ICICI Prudential Life Insurance Company would be subject to withholding of taxes, as may be applicable, and any tax liability that might arise to the policyholder due to the transfer would have to be solely borne by the policyholder.

The above terms and conditions are applicable as of October 2023. In case the rules change in future, such amended rules shall become applicable from the effective date of change so that this plan remains valid as a QROPS product.



Termination of the Policy

We will terminate the policy on the occurrence of any of the below mentioned conditions if:

- (i) You surrender the policy.
- (ii) The policy lapses on account of non-payment of first full years' premium(s) and has not been revived within the revival period.
- (iii) On payment of Vesting Benefit.
- (iv) On payment of Death Benefit.
- (v) On cancellation of the policy by the Company.
- (vi) On payment of free look cancellation proceeds.



Terms & Conditions

1. Suicide clause: In case of death due to suicide within 12 months from the date of commencement of risk under the policy or from the date of revival of the policy, as applicable, the Claimant shall be entitled to at least 80% of the total premiums paid till the date of death or the Surrender Value available as on the date of death whichever is higher, provided the policy is in force. The Policy will terminate on making such a payment and all rights, benefits and interests under the Policy will stand extinguished.
2. Free look period: On receipt of the Policy Document, whether received electronically or otherwise, You have an option to review the policy terms and conditions. If You are not satisfied or have any disagreement with the terms and conditions of the Policy or otherwise and have not made any claim, the Policy Document needs to be returned to the Company with reasons for cancellation within 30 days from the date of receipt of the Policy Document.

On cancellation of the policy during the free look period, we will return the premium subject to the deduction of:

- a. Stamp duty under the policy,
- b. Expenses borne by the Company on medical examination, if any
- c. Proportionate risk premium for the period of cover

The policy shall terminate on payment of this amount and all rights, benefits and interests under this policy will stand extinguished.

3. Tax Benefits: Tax benefits may be available as per prevailing tax laws. Tax benefits under the policy are subject to conditions under provisions of the Income Tax Act, 1961. Goods and Services Tax and Cesses, if any, will be charged extra as per prevailing rates. Tax laws are subject to amendments made thereto from time to time. Please consult your tax advisor for more details.
4. Grace Period: If the policyholder is unable to pay an installment premium by the due date, a grace period of 15 days will be given for payment of due installment premium for monthly frequency, and 30 days will be given for payment of due installment premium for any other frequency commencing from the premium due date. The life cover continues during the grace period. In case of Death of Life Assured during the grace period, the Company will pay the applicable Death Benefit.
5. Sample Illustrations: The dates shown in the illustrations in this document are only indicative and the actual benefits will be paid out within a period of one week from the stated dates. The total premium mentioned in the illustrations in this document is exclusive of Goods and Services tax and cesses, if any. All ages mentioned are calculated as 'age as on last birthday'.
6. Bonuses:

Bonuses will be applied through the simple bonus method.

Regular Bonuses may be declared annually throughout the policy term and will be expressed as a proportion of the Single Premium or Annualized Premium.

An Interim Bonus may also be payable (if declared) at the time of death benefit payout during the inter-valuation period i.e. the period between two consecutive bonus declarations provided the policy is in force.

A separate Terminal Bonus may be declared, and will be payable on death, surrender and vesting, respectively, for a premium paying or a fully paid policy.

Contingent Terminal Bonus may only explicitly accrue to policies that become Paid-up. The Contingent Terminal Bonus (if declared) may accrue to the policy at the time of policy becoming paid-up and will be payable to these policies on termination due to death, surrender or vesting (whichever happens first).

Such bonuses are non-guaranteed in nature and declaration of the same are at the discretion of the Company, and whilst the company intends to declare bonuses every year, it is possible that it may not declare any bonus for a given year. However, once

declared, the bonus shall become guaranteed to be paid in accordance with the benefits offered under the product. The bonus rates declared (if any) may vary, as per discretion of the company, by:

- The contingency such as survival, death, surrender or vesting; and/or
- The policy status either In-force with no outstanding due premiums or in-force as Paid-up policy.

The Contingent Terminal Bonus would be reversed on revival.

Once a policy becomes a paid-up policy, no future regular or terminal bonuses shall be payable.

7. Alterations: Premium, premium payment term and policy term chosen at inception of policy cannot be changed. You have the flexibility to change the frequency of premium payment on policy anniversary.
8. Payment of premiums: A fully paid policy is a policy for which all premiums have been paid, as per the premium payment term selected, and no further premiums are due. A premium paying policy is policy for which all due premiums have been paid till date, but future premiums are payable for the rest of the premium payment term.
9. 9. Renewal Premium in Advance: Collection of renewal premium in advance shall be allowed within the same financial year for the premium due in that financial year. Provided, the premium due in one financial year may be collected in advance in earlier financial year for a maximum period of three months in advance of the due date of the premium. The renewal premium so collected in advance shall only be adjusted on the due date of the premium.
10. Accumulating Cash Bonus: Regular bonuses (if declared) are vested on the policy anniversary. The vested bonuses shall accumulate monthly within the policy at a benchmark-linked rate.

The annual benchmark-linked rate declared shall be the 10-year G-sec (sourced from www.bloomberg.com) less 1% as on 31st March of the year of declaration of regular bonus. This declared rate will be applicable for any accumulation of vested bonuses between 1st May of the calendar year in which the rate is declared and 30th April of the subsequent calendar year. The current accumulation rate based on the 10-year G-sec as of 31st March 2024 is 6.18% compounding annually.

The accumulation of vested bonus shall continue under an in-force as well as a paid-up policy, till the policy is not terminated due to death, surrender or vesting.

The total accumulated value of vested bonuses at the rate described above will be referred to as Accumulating Cash Bonus at a given point of time.

11. Annuitization of policy proceeds:

A. On death of the Life Assured:

- a) On death of the Life Assured, the Claimant can exercise any of the following options:
 - (i) Utilize entire proceeds of the policy or a part thereof for purchasing an immediate annuity or deferred annuity at the then prevailing rate.. OR
 - (ii) Withdraw the entire proceeds of the policy as lumpsum.
- b) In case the Claimant does not opt for any of the aforementioned options in the death claim registration form, then the Company shall exercise the default payout option as outlined below:
 - The Claimant shall receive the entire Policy proceeds as lumpsum.

B. On policy vesting:

- a) On the Vesting Date, the Policyholder can exercise any one of the following options:
 - (i) To utilize the entire Vesting Benefit to purchase an immediate annuity or deferred annuity policy from us at the then prevailing annuity rate. The Policyholder shall have an option to purchase an immediate annuity or deferred annuity from another insurer at the then prevailing rate to the extent of percentage, as stipulated by the Authority, by utilizing not more than 50% of the proceeds of the policy net of commutation; OR

- (ii) To commute/ withdraw up to 60% of the entire Vesting Benefit and utilize the balance amount to purchase an immediate annuity or deferred annuity from us at the then prevailing annuity rate. The Policyholder shall have an option to purchase immediate annuity or deferred annuity from another insurer at the then prevailing rate by utilizing not more than 50% of the proceeds of the policy net of commutation.
- b) In case any Special Withdrawals have been done during the Policy Term, then the maximum permissible amount that can be commuted from Vesting Benefit will be arrived by the formula $[60\% * V - 40\% * S]$, subject to minimum of zero.

Here V = total policy proceeds as on the Vesting Date; and S = total amount of Special Withdrawals done during the Policy Term.

The remaining amount of the Vesting Benefit will have to be annuitized as per the provisions outlined above.

Let's understand this through an example. Let's assume that due to a condition listed above under "Special Withdrawals", the policyholder has withdrawn ₹ 20,000 and on date of vesting, gets a Vesting Benefit of ₹ 1,00,000. He wishes to commute 60% of Vesting Benefit as a lump sum and annuitize the remaining 40% corpus.

Vesting benefit (V)	₹ 1,00,000
Special withdrawal (S) during the policy term	₹ 20,000
Commutated lump sum % chosen	60%
Annuitization %	40%
Commutable lump sum as per % chosen	₹ 60,000
Annuitization corpus	₹ 40,000
Lump sum commutation allowed after Special Withdrawal ($60\%*V - 40\%*S$)	₹ 52,000

- c) If no mandate is chosen by you before Vesting Date, the Company shall exercise the default payout option as outlined below, assuming "V" is the total policy proceeds as on the Vesting Date and "S" is the total amount of Special Withdrawals done over the policy term:

At the Vesting Date of the policy:

- (i) You shall receive an amount $60\%*V - 40\%*S$ commuted as lumpsum; and
- (ii) We shall invest the balance amount in "Single Life annuity with Return of Purchase Price" option of an Immediate Annuity plan of ICICI Prudential Life Insurance Company Limited with level annuity being paid annually in arrears. Here, Purchase Price will mean the net amount (before any applicable taxes) used to purchase the immediate annuity plan.

C. On policy surrender:

- a) On Surrender, the Policyholder can exercise any one of the following options:
 - (i) To utilize the entire Surrender Benefit to purchase an immediate annuity or deferred annuity policy from us at the then prevailing annuity rate. The Policyholder shall have an option to purchase an immediate annuity or deferred annuity from another insurer at the then prevailing rate to the extent of percentage by utilizing not more than 50% of the proceeds of the policy net of commutation; OR
 - (ii) To commute/ withdraw up to 60% of the entire Surrender Benefit and utilize the balance amount to purchase an immediate annuity or deferred annuity from us at the then prevailing annuity rate. The Policyholder shall have an option to purchase immediate annuity or deferred annuity from another insurer at the then prevailing rate by utilizing not more than 50% of the proceeds of the policy net of commutation.

- b) In case any Special Withdrawals have been done during the Policy Term, then the maximum permissible amount that can be commuted from the Surrender Benefit will be arrived by the formula $[60\% * V - 40\% * S]$, subject to minimum of zero.

Here V = total policy proceeds as at the time of Surrender; and S = total amount of Special Withdrawals done during the Policy Term.

The remaining amount of the Surrender Benefit will have to be annuitized as per provisions outlined above.

- c) If no mandate is chosen by You at the time of submission of surrender request, the Company shall exercise the default payout option as outlined below, assuming "V" is the total policy proceeds as at the time of surrender and "S" is the total amount of Special Withdrawals done over the policy term:

Upon Surrender of the policy:

- (i) You shall receive $60\% * V - 40\% * S$ as a commuted lumpsum; and
- (ii) Balance amount shall be invested in "Single Life annuity with Return of Purchase Price" option of an Immediate Annuity plan of ICICI Prudential Life Insurance Company Limited with level annuity being paid annually in arrears. Here, Purchase Price will mean the net amount (before any applicable taxes) used to purchase the immediate annuity plan.

In case the proceeds of the policy either on death, surrender or vesting, are not sufficient to purchase minimum annuity as defined in clause 5 of Schedule I of IRDAI (Insurance Product) Regulations, 2024 , as amended from time to time, such proceeds of the policy may be paid to the claimant as lump sum.

12. Postponement of vesting date: You may opt for this feature by sending a request any time before the last 2 policy months of the policy term. This facility will be given only once during the policy term. No premiums will be payable during such postponement period.

The Reverse Repo Rate used for enhancing the Vesting Benefit during the postponement period will be reviewed twice every year and will be aligned with the latest reverse-repo rate published on RBI's website as on 1st of June or 1st of December, whichever is the latest date. The current Reverse Repo Rate as of 1st of June 2024 is 3.35% p.a. Any change in the reference rate used will be subject to prior approval from IRDAI and will be disclosed to you.

13. Online sale: The product is also available for sale through online mode.

14. Modal loading: For monthly and half-yearly modes of premium payments, additional loadings will be applied to both the base premium and the extra mortality premium. The additional loadings, expressed as a percentage of the annual premium will be as given below.

Mode of Premium Payment	Loading (% of Annual Premium)
Monthly	4.5%
Half-yearly	2.5%
Yearly, Single Pay	Nil

15. Nomination: Nomination shall be as per Section 39 of the Insurance Act, 1938 as amended from time to time. For more details on this section, please refer to our website.

16. Assignment: Assignment shall be as per Section 38 of the Insurance Act, 1938 as amended from time to time. For more details on this section, please refer to our website.

17. Section 41: In accordance with Section 41 of the Insurance Act, 1938 as amended from time to time, no person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ten lakh rupees.

18. Section 45: 1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later. 2) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based. 3) Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer: Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive. 4) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based: Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation. 5) Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the Life Insured was incorrectly stated in the proposal.

In case of fraud or misstatement, the policy shall be cancelled immediately by paying the Surrender Value, subject to the fraud or misstatement being established by the Company in accordance with Section 45 of the Insurance Act, 1938 as amended from time to time.

19. Policy Servicing and Grievance Handling Mechanism: For any clarification or assistance, You may contact Our advisor or call Our customer service representative (between 10.00 a.m. to 7.00 p.m, Monday to Saturday; excluding national holidays) on the numbers mentioned on the reverse of the Policy folder or on Our website: www.iciciprulife.com. For updated contact details, We request You to regularly check Our website. If You do not receive any resolution from Us or if You are not satisfied with Our resolution, You may get in touch with Our designated grievance redressal officer (GRO) at gro@iciciprulife.com or 1800-2660.

Address:

ICICI Prudential Life Insurance Company Limited,
Ground Floor & Upper Basement, Unit No. 1A & 2A,
Raheja Tipco Plaza Rani Sati Marg,
Malad (East) Mumbai-400097.

For more details, please refer to the "Grievance Redressal" section on www.iciciprulife.com. If You do not receive any resolution or if You are not satisfied with the resolution provided by the GRO, You may escalate the matter to Our internal grievance redressal committee at the address mentioned below:

ICICI Prudential Life Insurance Co. Ltd.
Ground Floor & Upper Basement Unit No. 1A & 2A,
Raheja Tipco Plaza, Rani Sati Marg,
Malad (East), Mumbai- 40009, Maharashtra.

If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach Policyholders' Protection and Grievance Redressal Department, the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (BIMA BHAROSA SHIKAYAT NIVARAN KENDRA)

155255 (or) 1800 4254 732

Email ID: complaints@irdai.gov.in

Address for communication for complaints by fax/paper:

Policyholders' Protection and Grievance Redressal Department – Grievance Redressal Cell

Insurance Regulatory and Development Authority of India

Survey No. 115/1, Financial District, Nanakramguda, Gachibowli,

Hyderabad, Telangana State – 500032

You can also register your complaint online at bimabharosa.irdai.gov.in.

This is subject to change from time to time.

Refer <https://www.iciciprulife.com/services/grievance-redressal.html> for more details

What makes ICICI Pru Gold suitable for you?



Protection through **life cover** with policy term up to 99 years of age



Income up to 99 years of age, with option to start receiving income immediately or after a few years as per your needs. This income will be a combination of Guaranteed^{\$} Income and income linked to bonus declaration



Option to **accumulate/withdraw income any time or adjust future premiums from the income thus accumulated**



Option to get **Guaranteed^{\$} boosters after every 5 years** to boost your savings with Immediate Income with Booster plan variant



Option to **receive income instantly** on policy issuance



Tax benefits may be applicable on premiums paid and benefits received as per prevailing tax laws

^{\$}In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

Plan at a glance

Plan Variants	Premium Payment Term (PPT) (in years)	Min/Max Policy Term (PT) (in years)	Min/Max Age at Entry (in years)	Min/Max Age at Maturity (in years)	Min/Max Annualized Premium
Immediate Income	5	30/99	0/50	30/99	₹50,000 p.a.*/ Subject to Board Approved Under-writing Policy
	6		0/55		
	7 to 12		0/60		
Immediate Income with Booster	6	30/99	0/50	30/99	₹50,000 p.a.*/ Subject to Board Approved Under-writing Policy
	7		0/55		
	8 to 12		0/60		
Deferred Income	7	30/99	0/50	30/99	₹50,000 p.a.*/ Subject to Board Approved Under-writing Policy
	8		0/55		
	9 to 12		0/60		

*Applicable Goods and Services Tax will be charged separately, as per applicable rates. The tax laws are subject to amendments from time to time.

The minimum Basic Sum Assured on Death will correspond to the minimum annualized premium and vary by the Death Benefit multiple as per age of entry of the Life Assured. The maximum Basic Sum Assured on Death will be subject to board approved underwriting policy.

Premium Payment Frequency: Yearly, Half-Yearly, Monthly

Premium and Benefits will vary depending upon the plan variant chosen.

Benefits in detail

This policy comes with 3 different plan variants that you can choose from. Read on to understand the benefits that you will receive under each of these options:



Plan Variant 1: Immediate Income

Under this option, starting from the first policy year, you will receive a regular income (Survival Benefit) on the respective due dates, subject to the policy being in-force and realization of all due premium(s) by the company.

This **regular income** will comprise the following:

- Guaranteed^{\$} Income (GI) and
- Income which will be linked to Bonus, if declared; referred to as Cash Bonus (CB)

You will receive this income till the date of maturity, death, surrender or lapse of the policy, whichever happens first.

You can read more about policy benefits on lapsation, death and surrender in upcoming clauses in the document: "What happens if you stop paying premiums?", "Death Benefit(Insurance cover amount)", and "Surrender" respectively.

The annual GI and CB, if declared will be a percentage of Annualized Premium respectively and may vary by age, premium payment term and annualized premium. The GI and CB will be computed as:

- Annual Guaranteed^{\$} Income = Guaranteed^{\$} Income rate multiplied by Annualized Premium (This is set at inception of the policy and remains guaranteed to be paid every year/month throughout the Income Term)
- Cash Bonus = Cash Bonus rate multiplied by Annualized Premium

For details on Bonuses, please refer Clause 7 under Terms and Conditions mentioned below.

Further, at the end of the policy term, you will get a lump sum benefit (known as the **Maturity Benefit**) which will be equal to

- Sum Assured on Maturity (i.e. equal to sum of all Annualized Premiums payable), plus
- A lump sum benefit which is linked to Bonus, if declared, and is paid out on policy termination; referred to as Terminal Bonus (if declared)

Annualized Premium is the premium amount payable in a year, excluding the taxes, rider premiums, underwriting extra premium and loadings for modal premium, if any

^{\$}In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

To understand this variant in greater detail, let us take an example.

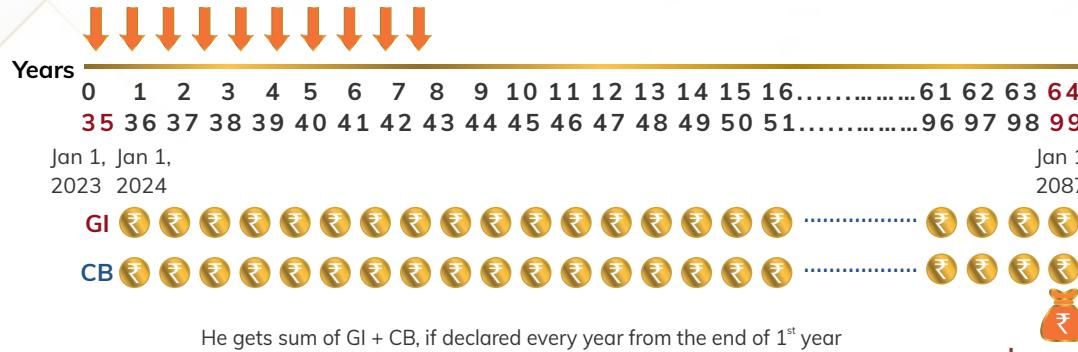
Illustration:



Mr. Animesh, a 35 year old, wants to save for his son's regular expenses. He decides to pay the premium of ₹ 1,00,000 every year for 10 years and chooses to take life insurance cover till the age of 99 years.

The Bonuses in the product are not guaranteed in nature and the Company may declare these at its discretion. For the purpose of this illustration, we have assumed two different rates of returns, 4% p.a. and 8% p.a. and these are not the upper or lower limits that Mr. Animesh may receive as benefits.

Mr. Animesh pays¹ ₹ 1,00,000 p.a. for 10 years = total of ₹ 10,00,000



Lump sum

(Sum Assured on Maturity + Terminal bonus,
if declared is paid out at maturity)

Benefits payable	Assumed at 4% p.a.	Assumed at 8% p.a.
Guaranteed ² Income ² (GI) (A)	₹ 12,500	₹ 12,500
Cash Bonus ³ (CB, if declared) (B)	₹ 8,750	₹ 24,500
Total Income (A + B)	₹ 21,250	₹37,000
Sum Assured on Maturity ² (C)	₹ 10,00,000	₹ 10,00,000
Terminal Bonus ³ , if declared (D)	₹ 36,12,662	₹ 1,56,20,908
Total Maturity Benefit (C+D)	₹ 46,12,662	₹1,66,20,908

¹ GST applicable on premium will be charged extra as per prevailing tax laws.

² Some benefits are guaranteed and some benefits are variable with returns based on future investment performance. The guaranteed benefits are clearly marked as "guaranteed" in the illustration on this page.

³ For variable benefits, the illustrations on this page will show two different rates of assumed future investment returns. These assumed rates of return are not guaranteed and they are not the upper or lower limits of what you might get back.

⁴ In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

In the illustration above, it is assumed that Mr. Animesh has opted to receive the income annually in arrears. He also has the flexibility to receive this income annually in advance and monthly in arrears. Please refer to Clause 14 under Terms and Conditions for details on the income payout frequencies.

The regular income is paid to Mr. Animesh on the policy anniversary. However, he also has the option to receive the income on any Special Date as per his choice by opting for Save the Date feature. The Special Date could be any date of his choice like his birthday, marriage anniversary or any other date. Please read Clause 1 Save the Date, under Additional flexibilities for more details.

What's more?

At any given time, Mr. Animesh can choose to accumulate the regular income (GI + CB) or a part of them, instead of receiving the same as periodic payments. As and when Mr. Animesh desires, he can withdraw the accumulated amount or he can use this accumulated amount to adjust any of his remaining future premiums against the accumulated amount. Please read Clause 2 Savings Wallet, under Additional flexibilities for more details.



Plan Variant 2: Immediate Income with Booster

While your plan may be to receive a regular flow of income every year, it will always be a delight to get something in addition. Hence, under this variant, while you will enjoy regular income similar to option 1 from the first policy year, you will also receive a benefit (known as Guaranteed^{\$} Booster) every 5th policy year, subject to the policy being in-force and realization of all due premium(s) by the company.. This Annual Guaranteed^{\$} Booster will be equal to 100% of the Guaranteed^{\$} Income, as applicable for the year of payment.

To sum it up, you will receive the sum of

- Guaranteed^{\$} Income (GI)
- Guaranteed^{\$} Booster (GB), and
- Cash Bonus, if declared (CB)

You will receive these benefits till the date of maturity, death, surrender or lapse of the policy, whichever happens first.

Just like the previous plan variant, at the end of the policy term, you will get a lump sum benefit at the end of the policy term equal to the

- Sum Assured on Maturity (i.e. equal to sum of all Annualized Premiums payable), plus
- Terminal Bonus (if declared)

Annualized Premium is the premium amount payable in a year, excluding the taxes, rider premiums, underwriting extra premium and loadings for modal premium, if any

^{\$}In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

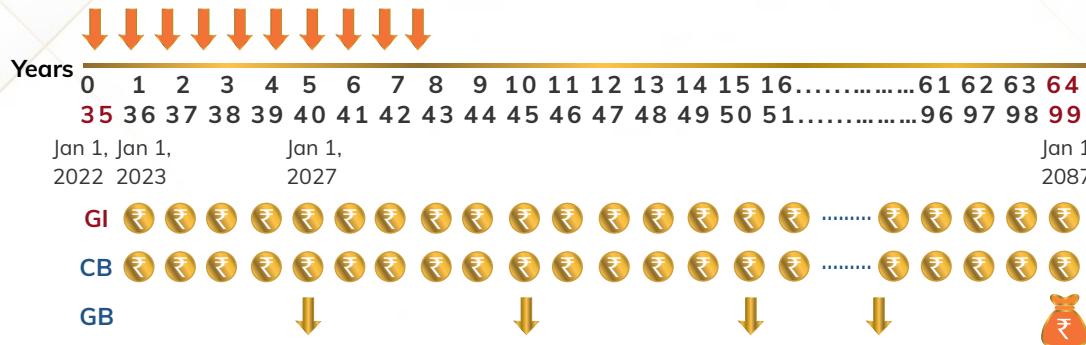
To understand this variant in greater detail, let us take an example.

Illustration:



Let's say Mr. Animesh from the previous example now pays the premium of ₹ 1,00,000 every year for 10 years and takes life insurance cover till age 99 years with Immediate Income with Booster plan variant.

Mr. Animesh pays¹ ₹ 1,00,000 p.a. for 10 years = total of ₹ 10,00,000



He gets sum of GI + CB, if declared every year from the end of 1st year
and GB every 5 years

Lump sum
(Sum Assured on Maturity + Terminal bonus,
if declared is paid out at maturity)

Benefits payable	Assumed at 4% p.a.	Assumed at 8% p.a.
Guaranteed ² Income ² (GI) (A)	₹ 12,500	₹ 12,500
Cash Bonus ³ (CB), if declared (B)	₹ 7,000	₹ 23,500
Total Income (A+B)	₹ 19,500	₹ 36,000
Guaranteed ² Booster ² (GB) (C)	₹ 12,500	₹ 12,500
Sum Assured on Maturity ² (D)	₹ 10,00,000	₹ 10,00,000
Terminal Bonus ³ , if declared (E)	₹ 36,27,090	₹ 1,37,40,894
Total Maturity Benefit (D+E)	₹ 46,27,090	₹ 1,47,40,894

¹ GST applicable on premium will be charged extra as per prevailing tax laws.

² Some benefits are guaranteed and some benefits are variable with returns based on future investment performance. The guaranteed benefits are clearly marked as "guaranteed" in the illustration on this page.

³ For variable benefits, the illustrations on this page will show two different rates of assumed future investment returns. These assumed rates of return are not guaranteed and they are not the upper or lower limits of what you might get back.

⁴ In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

Just like plan variant 1, the following flexibilities are available with Mr. Animesh in this variant too:

- a. In the above example, Mr. Animesh has opted to receive the income "annually in arrears". He also has the flexibility to receive this income "annually in advance" or "monthly in arrears".
- b. Choosing Save the Date to receive income on any Special Date
- c. Option to accumulate/withdraw income (GI +CB) along with Guaranteed^{\$} Boosters (GB) and/or adjust the accumulated amount against future premiums using Savings Wallet



Plan Variant 3: Deferred Income

Under this option too, similar to option 1, you will receive regular income in the form of Guaranteed Income and Cash Bonus, if declared, on the respective due dates, subject to the policy being in-force and realization of all due premium(s) by the company.. However, here you can choose to start receiving the benefits after a few years (known as the deferment period) instead of starting immediately, as per your income requirements. You can start this income as early as 2nd policy year or as late as Premium Payment Term plus 1 year.

You will receive this income till the date of maturity, death, surrender or lapse of the policy, whichever happens first.

Similar to the other plan variants, at the end of the policy term, you will get a lump sum benefit at the end of the policy term equal to the

- Sum Assured on Maturity (i.e. equal to sum of all Annualized Premiums payable), plus
- Terminal Bonus (if declared)

Annualized Premium is the premium amount payable in a year, excluding the taxes, rider premiums, underwriting extra premium and loadings for modal premium, if any

To understand this variant in greater detail, let us take an example.

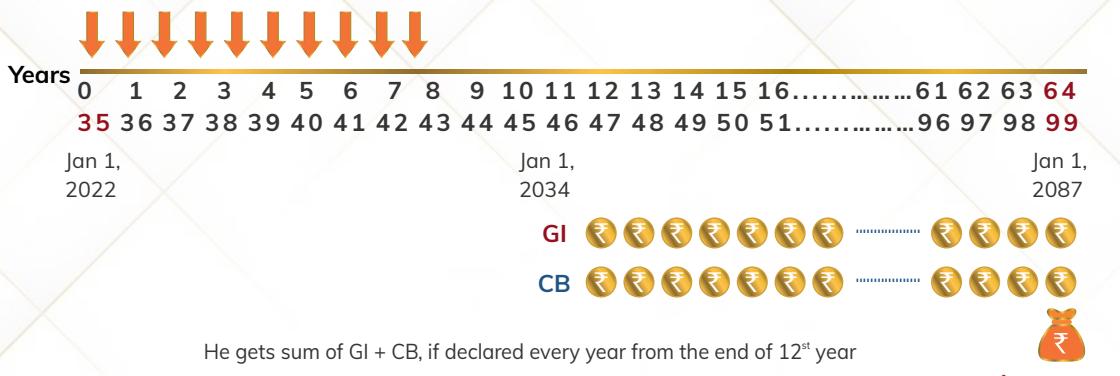
Illustration:



Mr. Rishabh a 35 year old, plans to pay the premium of ₹ 2,00,000 every year for 10 years. He wants to start receiving income from 12th year and hence he chooses a deferment period of 11 years and life insurance cover till age 99 years.

^{\$}In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

Mr. Rishabh pays¹ ₹ 2,00,000 p.a. for 10 years = total of ₹ 20,00,000



He gets sum of GI + CB, if declared every year from the end of 12th year

(Sum Assured on Maturity + Terminal bonus,
if declared is paid out at maturity)

Benefits payable	Assumed at 4% p.a.	Assumed at 8% p.a.
Guaranteed ² Income ² (GI) (A)	₹ 69,500	₹ 69,500
Cash Bonus ³ (CB), if declared (B)	₹ 19,500	₹ 1,37,500
Total Income (A+B)	₹ 89,000	₹ 2,07,000
Sum Assured on Maturity ² (C)	₹ 20,00,000	₹ 20,00,000
Terminal Bonus ³ , if declared (D)	₹ 45,10,090	₹ 14,266,741
Total Maturity Benefit (C+D)	₹ 65,10,090	₹ 1,62,66,741

¹ GST applicable on premium will be charged extra as per prevailing tax laws.

² Some benefits are guaranteed and some benefits are variable with returns based on future investment performance. The guaranteed benefits are clearly marked as "guaranteed" in the illustration on this page.

³ For variable benefits, the illustrations on this page will show two different rates of assumed future investment returns. These assumed rates of return are not guaranteed and they are not the upper or lower limits of what you might get back.

Just like above plan variants, the following flexibilities are available with Mr. Rishabh in this variant too:

- a. In the above example, Mr. Rishabh has opted to receive the income "annually in arrears". He also has the flexibility to receive this income "monthly in arrears".
- b. Choosing Save the Date to receive income on any Special Date
- c. Option to accumulate/withdraw income (GI +CB) and/or adjust the accumulated amount against future premiums using Savings Wallet

⁴ In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.



Death Benefit (Insurance cover amount):

For all the three plan variants discussed above, If the person whose life is covered by this policy (known as the Life Assured) passes away, during the policy term, the Death Benefit (insurance cover amount) will be paid out as a lump sum to the person specified (known as the Claimant) in the policy.

Death Benefit is equal to:

- a. Sum Assured on Death, plus
- b. Interim Survival Benefit (if any), plus*
- c. Terminal Bonus (if declared)

Where, the Sum Assured on Death is the highest of:

- 7 times the Annualized Premium,
- 105% of the Total Premiums Paid as on the Date of Death
- Death Benefit multiple (as given in Appendix I) times Annualized Premium.

Annualized Premium is the premium amount payable in a year excluding the taxes, rider premiums, underwriting extra premium and loadings for modal premium, if any.

Total Premiums Paid means the total of all the premiums paid under this base product, excluding any extra premium, and taxes, if collected explicitly

In the event of death of the Life Assured on the Date of Maturity, then only the last Guaranteed Income, Cash Bonus (if declared) and Maturity Benefit (if applicable) is payable, and the Death Benefit shall not be payable.

*The Interim Survival Benefit is applicable where Survival Benefit is payable Annually in Arrears and shall be computed in the following manner:

- For "Immediate Income" and "Deferred Income" variants:

Interim Survival Benefit = $(\text{Interim Cash Bonus Rate} * \text{Annualized Premium} + \text{Guaranteed}^{\$} \text{ Income}) * \text{Months elapsed since last Survival Benefit payout date} / 12$

- For "Immediate Income with Booster" variant:

Interim Survival Benefit = $(\text{Interim Cash Bonus Rate} * \text{Annualized Premium} + \text{Guaranteed}^{\$} \text{ Income} + \text{Guaranteed}^{\$} \text{ Booster}) * \text{Months elapsed since last Survival Benefit payout date} / 12$, where the Guaranteed^{\$} Booster will be applicable in case death happens in the policy year when the same is payable.

For policies issued on minor's life, the date of commencement of risk will be the date of commencement of the policy.

^{*}In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

Additional Flexibilities

We understand that your financial plan needs to align with your goals and hence should enable you to utilize your money whenever you want and exactly the way you want! Keeping this in mind, the following flexibilities are available under all the three plan variants:



1. Save the Date:

While planning your future goals, you would want to keep in mind the specific needs of your loved ones and customize your plan accordingly.

If You have opted for annual premium payment frequency, then You can choose to receive the Survival Benefits annually on any one 'Special Date', during the policy year prior to the policy anniversary, as per your choice. The benefit will be paid within seven working days of realization of the respective Policy Year's premium (if due) by Us or on this chosen date every year, whichever is later through the income term till policy termination.

In case you opt for a Special Date, the Survival Benefit payable each year would be adjusted by multiplying the amount with the following Save the Date factors, varying by the policy month in which the Special Date falls.

Save The Date factors					
Policy Month	Factor	Policy Month	Factor	Policy Month	Factor
1	92%	5	94%	9	97%
2	93%	6	95%	10	98%
3	93%	7	96%	11	98%
4	94%	8	96%	12	99%

In case you have selected the "Immediate Income with Booster" plan variant at inception where you will receive Guaranteed Booster (GB) benefit as part of the Survival Benefit, then the same shall be paid (adjusted as above) on the Special date in the policy year when it is due.

This option needs to be selected at policy inception and cannot be changed during the Policy Term.

*In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.



2. Savings Wallet:

You may have planned for a goal which would have required benefits to continue for the chosen time-frame, but your needs at times change with changing life stages.

As you would have previously read in the ‘Benefits in detail’ section about Savings Wallet, this feature gives you the flexibility to realign your benefits as per your changing needs. You have an option to accumulate the benefits instead of taking as payment during the policy term. You can opt in for this feature through explicit consent vide request submitted to the Company, whereby the Survival Benefit when due will be transferred to your Savings Wallet. Upon crediting the Survival Benefit in the Savings Wallet on the due date, the Survival Benefit will be deemed to have been paid and amount within the Savings Wallet will be non-participating in nature. This option can be opted for and opted out at any time during the Income Term

This option to accumulate Survival Benefit can be availed for both in-force as well as paid-up policies. At any point of time, you will be able to check the balance available in your wallet.

The money within the wallet will be accumulated daily at an interest rate linked to the Reverse Repo Rate published by Reserve Bank of India (RBI). The interest rate used for accumulation under this feature will be reviewed twice every year on 1st of June and 1st of December, and will be set equal to Reverse Repo Rate published on RBI's website as on the review date. The current Reverse Repo Rate as at December 1, 2024 is 3.35% p.a. Any change in bases used for determination of applicable interest rate will be subject to prior approval from IRDAI and will be disclosed to policyholders.

You will also have an option to withdraw, completely or partially, the balance in the wallet anytime during the Income Term.

You have the option to utilize the balance in the Savings Wallet to offset any premiums due to be paid during the premium payment term. The same has to be provided to Us as a request prior to the premium due date. Upon receipt of such request and confirmation of the same, We shall automatically deduct the authorized amount on the premium due date from the Savings Wallet. If the amount available for offset is not sufficient to adjust the due premium, the balance due premium shall remain payable as on the premium due date. We shall recognize the settlement of due premium only after receipt of the same in full.

In case the balance in the wallet is not withdrawn completely during the income term, such balance will be paid along with the benefit to the claimant at the time of termination of the Policy on death, surrender or maturity, whichever happens first. On payment of this benefit, the policy will terminate.

Additional benefits:



Higher Premium Benefit

You will receive something extra for contributing more towards your savings goals. As your commitment towards savings increases, you will receive an additional benefit every year. This additional benefit is expressed as additional guaranteed^{\$} income rate and is % of Annualized Premium, provided in the table below:

Annualized Premium	Additional rate
₹ 50,000	0.00%
₹ 100,000	0.25%
₹ 200,000	0.50%
₹ 300,000	0.50%
₹ 500,000	0.75%
>= ₹ 1,000,000	0.75%

For premiums in between band thresholds (i.e. premiums that fall between two adjacent Annualized Premiums mentioned in table above), the additional rate will be linearly interpolated. The additional benefit will be applicable for Guaranteed^{\$} Income and Guaranteed^{\$} Booster, if any.

^{\$}In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

Policy loan

You can take a policy loan after your policy acquires a surrender value.

- a. Loans are available provided a positive surrender value is payable under the policy at the time of disbursement of the same.
- b. Loan amount up to 80% of the surrender value can be availed from the Company.
- c. For other than in-force and fully paid policies, if the outstanding loan amount including interest exceeds the surrender value, the policy will be foreclosed . The policyholder shall be given due intimation/ notice prior to the policy foreclosure as a reasonable opportunity for continuing the policy. On Foreclosure, the Policy will terminate, and all rights, benefits and interests under the policy will stand extinguished.
- d. For inforce and/or fully paid-up policy, the policy can't be foreclosed on the ground of outstanding loan amount including interest exceeding the surrender value.
- e. For availing this feature of loan, the policy shall be assigned to Company
- f. Before any benefits are paid out, loan outstanding together with the interest thereon if any will be deducted and the balance amount will be payable.
- g. Applicable interest rate will be equal to 1.5% in addition to prevailing yield on 10 year Government Securities. The yield on 10 year Government Securities will be sourced from www.bloomberg.com. The loan interest rate for January 2025 is 8.32% p.a. compounded half-yearly.
- h. The loan interest rate will be reviewed monthly by Us and any change in the interest rate shall be effective from 15th of the month.
- i. The basis for computing loan interest will be reviewed from time to time and may be revised subject to the prior approval of the IRDAI.



What happens if you stop paying your premiums?

It is recommended that you pay all premiums for the period selected to be able to enjoy all policy benefits. However, at any stage if you stop paying premiums the following shall be applicable:

- I) If you have not paid premium of at least one full policy year then the policy will lapse on expiry of grace period. If you do not revive the lapsed policy by the end of revival period, it will terminate and no benefits will be payable.
- II) If you stop paying premiums after you paid premiums for first full year, your policy is said to have become “paid-up”. A paid-up policy is one where you are entitled to get benefits, but the benefits will be lower than full benefits, since you would have paid lesser than the total premiums supposed to be paid.

Please read the section on Policy Revival mentioned below, which specifies how one can pay due premiums and revive the benefits of the policy.

- III) Paid-up benefits are as explained below:

- a. Paid-up Death Benefit:

On death during the policy term, the paid-up Sum Assured on Death and Interim Paid-up Survival Benefit* (if any) plus Contingent Terminal Bonus, if declared, will be payable.

Paid-up Sum Assured on Death = Higher of {Sum Assured on Death X {number of months for which premiums are paid / (12 X Premium Payment Term)}}, 105% of Total premiums paid}

*The Interim Paid-up Survival Benefit will be computed as below:

- For “Immediate Income” and “Deferred Income” variants:

Interim Paid-up Survival Benefit = Paid-up GI * Months elapsed since last Survival Benefit payout date / 12

- For “Immediate Income with Booster” variant:

Interim Paid-up Survival Benefit = (Paid-up GI + Paid-up GB) * Months elapsed since last Survival Benefit payout date / 12, where the Paid-up GB will be applicable in case death happens in the policy year when the same is payable. In the event of death of the Life Assured on the Date of Maturity, then only the last Paid - Up Guaranteed Income and Paid - up Maturity Benefit (if applicable) is payable, and the Paid – Up Death Benefit shall not be payable.



b. Paid-up Survival Benefit:

On survival of the Life Assured, on the respective due dates of the payment during the Income Term, paid-up survival benefit in the form of paid-up GI will be payable as per the prevailing income payment frequency after the Policy has become Paid-up, till termination of the policy due to death, surrender or maturity, whichever happens first. The frequency of paid-up GI will be as chosen by You.

Paid-up GI = Annual GI X {number of months for which premiums are paid / (12 X Premium Payment Term)} X Survival Benefit modal factor / Survival Benefit frequency factor

In case you have selected the “Immediate Income with Booster” plan variant at inception where you will receive Guaranteed[§] Booster (GB), then the same shall be paid in the form of paid-up GB in the policy years' when it is due to be paid otherwise.

Paid-up GB = Annual GB X {number of months for which premiums are paid / (12 X Premium Payment Term)} X Survival Benefit modal factor / Survival Benefit frequency factor.

The first payment of paid-up GI (and paid-up GB, if due) benefit(s) will be made after the Policy converting to reduced paid-up status or due date of payment, whichever is later. Subsequently, each paid-up GI (and Paid-up GB, if due) payment(s) will be made on the respective due dates, as per the income payment frequency chosen.

c. Paid-up Maturity Benefit::

On survival of the life assured till the end of the policy term, for a paid-up policy, the following will be payable:

Maturity Benefit is the sum of

- Paid-up Sum Assured on Maturity, plus
- Contingent Terminal Bonus (if declared).

Paid-up Sum Assured on Maturity = Sum Assured on Maturity X {number of months for which premiums are paid / (12 X Premium Payment Term)}

- iv) On revival of a lapsed policy, all benefits under the policy will be restored. All applicable Survival Benefits (GI, CB (if declared) and GB, if any) since premium discontinuance up to the date of revival shall become payable to you.
- v) In addition, on revival of a paid-up policy, the paid-up Sum Assured on Death, paid-up Sum Assured on Maturity and paid-up Survival Benefit will be restored to the original Sum Assured on Death, Sum Assured on Maturity and Survival Benefit, respectively. In addition, the difference between the Paid-up Survival Benefit already paid out during the revival period and the Survival Benefit for a premium paying or fully paid policy (as applicable) will also be payable to you. The above will include all applicable Cash Bonuses (or Fixed Cash Income, if applicable) declared since premium discontinuance up to the date of revival. The Contingent Terminal Bonus (if any) attached to the policy will be reversed.

[§]In all plan options, guarantee is in the form of ‘Guaranteed income’ as regular income and ‘Sum assured on maturity’ as a part of Maturity Benefit. Additionally, in ‘Immediate Income with booster’ plan option, the ‘Guaranteed booster’ also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

Policy revival

You can revive your policy benefits for their full value within five years from the due date of the first unpaid premium by paying all due premiums together with interest before the termination date of the policy subject to underwriting and the following conditions:

A policy which has discontinued payment of premium may be revived subject to underwriting and the following conditions:

- The application for revival is made within 5 years from the due date of the first unpaid premium or the policy term, whichever is earlier. Revival will be based on the prevailing Board approved underwriting policy.
- You furnish, at your own expense, satisfactory evidence of health of the Life Assured as required by the prevailing Board approved underwriting policy.
- The arrears of premiums together with interest at such rate as the Company may charge for late payment of premiums are paid. Revival interest rate will be equal to 1.5% in addition to the prevailing yield on 10 year Government Securities. The yield on 10 year Government Securities will be sourced from www.bloomberg.com. The revival interest rate for January 2025 is 8.32% p.a. compounded half-yearly.
- The revival interest rate will be reviewed on the 15th day of every month by the company based on the 10-year G-Sec yield of one day prior to such review.



The revival of the policy may be on terms different from those applicable to the policy before premiums were discontinued; for example, extra mortality premiums or charges may be applicable. The revival will take effect only if it is specifically communicated by the Company to you. The Company reserves the right to refuse to revive the policy.

Any change in revival conditions will be subject to prior approval from IRDAI and will be disclosed to policyholders.

Surrender

You can surrender the policy any time after payment of at least one full policy year's premium(s). Prior to receipt of one full year's premium, no surrender value is payable.

If any premium remains unpaid after the expiry of the grace period and at least one full policy years' premium has not been paid the policy's status shall be altered to lapsed status and the insurance cover will cease. No benefits are payable under a lapsed policy.

If any premium remains unpaid after the expiry of the grace period and at least one full policy years' premium has been paid the policy's status shall be altered to paid-up status. Once a policy is altered to paid-up status, benefits under the policy shall get reduced as described later in this Section.

On policy surrender, a Surrender Value equal to the higher of the following will be payable:

- Guaranteed^{\$} Surrender Value (GSV)
- Special Surrender Value (SSV)

On payment of Surrender Value the policy will terminate and all rights, benefits and interests under the policy will stand extinguished.

Guaranteed^{\$} Surrender Value

GSV will be calculated as follows:

GSV = GSV Factor X Total Premiums Paid, less Survival Benefits (if any) paid till date, subject to a minimum of zero.

For details on GSV factors for total premiums paid, please refer Clause 16 under Terms and Conditions below.

All the factors applicable to Guaranteed^{\$} Surrender Value calculation are guaranteed^{\$} throughout the policy term.

For more details on Special Surrender Value and surrender benefit, please refer to the policy document.

^{\$}In all plan options, guarantee is in the form of 'Guaranteed income' as regular income and 'Sum assured on maturity' as a part of Maturity Benefit. Additionally, in 'Immediate Income with booster' plan option, the 'Guaranteed booster' also forms a part of guaranteed benefits. Guaranteed returns are payable subject to all due premiums being paid and survival of the life assured.

Terms & Conditions

1. **Suicide clause:** In case of death due to suicide within 12 months from the date of commencement of risk under the policy or from the date of revival of the policy, as applicable, the Claimant shall be entitled to at least 80% of the total premiums paid till the date of death or the surrender value available as on the date of death whichever is higher, provided the policy is in force. In case any survival benefits have already been paid out, such amount already paid out shall be deducted from the amount payable on such death. The Policy will terminate on making such a payment and all rights, benefits and interests under the Policy will stand extinguished.
2. **Free look period:** On receipt of the Policy Document, whether received electronically or otherwise, You have an option to review the policy terms and conditions. If You are not satisfied or have any disagreement with the terms and conditions of the Policy or otherwise and have not made any claim, the Policy Document needs to be returned to the Company with reasons for cancellation within 30 days from the date of receipt of the Policy Document

- On cancellation of the policy during the free look period, we will return the premium subject to the deduction of:
 - a. Stamp duty under the policy,
 - b. Expenses borne by the Company on medical examination, if any
 - c. Proportionate risk premium for the period of cover

In case any survival benefits have already been paid out, such amount already paid out shall be deducted from the amount payable on free-look cancellation.

The policy shall terminate on payment of this amount and all rights, benefits and interests under this policy will stand extinguished.

3. **Tax Benefits:** Tax benefits may be available as per prevailing tax laws. Tax benefits under the policy are subject to conditions under provisions of the Income Tax Act, 1961. Goods and Services Tax and Cesses, if any, will be charged extra as per prevailing rates. Tax laws are subject to amendments made thereto from time to time. Please consult your tax advisor for more details.
4. **Grace Period:** If the policyholder is unable to pay an installment premium by the due date, a grace period of 15 days will be given for payment of due installment premium for monthly frequency, and 30 days will be given for payment of due installment premium for any other frequency commencing from the premium due date. The life cover continues during the grace period. In case of Death of Life Assured during the grace period, the Company will pay the applicable Death Benefit.

If the premium is not paid within the grace period before payment of at least one full policy years' premium the policy shall lapse, no benefits will be payable and the cover will cease. If the policy is not revived within the Revival Period then the policy shall be foreclosed and all rights and benefits under the policy shall be terminated.

5. The payout dates shown in the illustrations in this document are only indicative and the actual payouts will be within a period of one week from the stated dates. The total premium mentioned in the illustrations in this document is exclusive of Goods and Services tax and cesses, if any.
6. All ages mentioned are calculated as 'age as on last birthday'.
7. **Bonuses:**

Bonuses will be applied through the simple bonus method.

Cash Bonuses may be declared annually throughout the policy term for all three variants, and will be expressed as a proportion

of the Annualized Premium. For each variant, an Interim Cash Bonus may also be payable (if declared) at the time of death benefit payout during the inter-valuation period. For a new policy sold with Date of Commencement of Risk on or after April 1 in any financial year, there may not be any Cash Bonus rate declared for such policies when the Survival Benefit becomes due to be paid. In such circumstances, the Company will pay a fixed cash income benefit in lieu of Cash Bonus. This fixed cash income benefit will be based on a non-participating Cash Income rate (declared by the Company annually in advance and same as the cash bonus rate declared) and once declared shall remain guaranteed to be paid as part of Survival Benefit as and when it is due. Such payments in the form of fixed benefit shall continue till a Cash Bonus rate (as applicable for the policy) is declared and the Cash Bonus benefit, if declared, becomes payable at the next benefit due date.

A separate Terminal Bonus may be declared under each variant, and will be payable on death, surrender and maturity, respectively, for a premium paying or a fully paid policy.

Such bonuses are non-guaranteed in nature and declaration of the same are at the discretion of the Company, and whilst the company intends to declare bonuses every year, it is possible that it may not declare any bonus for a given year. However, once declared, the bonus shall become guaranteed to be paid in accordance with the benefits offered under the product. The bonus rates declared (if any) may vary, as per discretion of the company, by:

- The contingency such as survival, death, surrender or maturity; and/or
- The policy status either in-force with no outstanding due premiums or in-force as reduced paid-up policy. The latter will be in the form of Contingent Terminal Bonus (if declared).

Contingent Terminal Bonus may only explicitly accrue to policies that become paid-up, if at least one full years' premiums is paid. The Contingent Terminal Bonus (if declared) will accrue to the policy at the time of policy becoming paid up and will be payable to these policies on termination due to death, surrender or maturity (whichever happens first).

The Contingent Terminal Bonus would be reversed on revival. Once a policy becomes a paid-up policy, no future cash or terminal bonuses shall be payable.

8. Premium, premium payment term, policy term and deferment period (if any) chosen at inception of policy cannot be changed. You have the flexibility to change the frequency of premium payment on policy anniversary.
9. A fully paid policy is a policy for which all premiums have been paid, as per the premium payment term selected, and no further premiums are due. A premium paying policy is policy for which all due premiums have been paid till date, but future premiums are payable for the rest of the premium payment term.
10. **Renewal Premium in advance:** Collection of renewal premium in advance shall be allowed within the same financial year for the premium due in that financial year. Provided, the premium due in one financial year may be collected in advance in earlier financial year for a maximum period of three months in advance of the due date of the premium. The renewal premium so collected in advance shall only be adjusted on the due date of the premium.
11. **Policy on the Life of a Minor:** If the policy has been taken on the life of a minor, on attaining the age of majority i.e. 18 years, the policy will vest on him/her. Thereafter, the Life Assured shall become the policyholder who will then be entitled to all the benefits and subject to all liabilities as per the terms and conditions of the policy. The Life Assured cum Policyholder can register due nomination as per Section 39 of the Insurance Act, 1938 as amended from time to time. However, if the policy is assigned during the minority of the Life Assured, then the vesting of the policy shall be kept in abeyance till the assignment is valid and effective
12. **Policies where Policyholder and Life Assured are different individuals:** If the Policyholder and the Life Assured are different, then in the event of death of the Policyholder and upon subsequent intimation of the death with the Company:

- majority. Upon attaining the age of majority the policy ownership shall be changed according to Clause 11 mentioned above;
 - If the Life Assured is major: the policy shall vest on the Life Assured. Thereafter, the Life Assured shall become the Policyholder and will be entitled to all benefits and subject to all liabilities as per the terms and conditions of the policy. The Life Assured cum Policyholder can register due nomination as per Section 39 of the Insurance Act, 1938 as amended from time to time.
- 13.** The product is also available for sale through online mode.
- 14.** All survival benefits shall be paid Annually in Arrears by default. If the policyholder has opted for annual premium payment frequency, then the policyholder have additional options to receive the survival benefits i.e. "Monthly in arrears" or "Annually in Advance" depending upon the plan option chosen:
- For Immediate Income and Immediate Income with Booster Options:
 - If you have chosen a non-annual premium payment frequency, then the survival benefit will be payable at the end of every Policy Year ("Annual in Arrears") provided the policy is In-force on the date of payment. This shall be the default option.
 - If have chosen an annual premium payment frequency, then You have two additional options to receive the survival benefits i.e. "Monthly in arrears" or "Annually in Advance" The option chosen by You is as mentioned in the Policy Schedule:
 - Monthly in arrears:** If this frequency is opted by You, then You shall receive the survival benefits at the end of each policy month (i.e. due date) during the income term commencing from the income start date. During the premium payment term, any survival benefits (if due) will be paid out within seven working days of realisation of each policy year's premium by the company or on the due date, whichever is later. Post premium payment term, such survival benefits (if due) will be paid out on the respective due dates.
 - Annual in advance:** If this frequency is opted by you, then You will receive the survival benefit at the beginning of each policy year (i.e. due date) during the income term commencing from the income start date for the income term. In case income term starts from the first policy year, such survival benefit will be paid out within seven working days of realization of the first year's premium by the company post issuance of the policy. For any subsequent policy year during the premium payment term, such survival benefits (if due) will be paid out within seven working days of realization of the respective policy year's renewal premium by the Company or on the due date, whichever is later. Post premium payment term, such survival benefits (if due) will be paid out on the respective due dates.
 - In the event premium payment frequency is changed by you from an annual to a non-annual mode during the premium payment term, then the survival benefits payment frequency will be altered by us such that all future survival benefits payments will be paid at the end of respective policy years (i.e. "Annually in Arrears/ default option") effective from the same policy anniversary on which the premium frequency change takes effect.

Following Survival Benefits modal factors would apply on the annual Survival Benefit (as defined in section above) depending on the income frequency chosen by the policyholder. Any change in modal factor will be subject to prior approval from IRDAI.

Frequency	Survival Benefit Frequency factor	Survival Benefit Modal
Monthly in arrears	12	96%
Annual in Advance	1	92%
Annual in Arrears	1	100%

Instalment Survival Benefit will be calculated as Annual Survival Benefit* Survival Benefit modal factor ÷ Survival Benefit frequency factor.

15. For monthly and half-yearly modes of premium payments, additional loadings will be applied to both the base premium and the extra mortality premium. The additional loadings, expressed as a percentage of the annual premium will be as given below.

Mode of Premium Payment	Loading (% of Annualized Premium)
Monthly	4.5%
Half-yearly	2.5%
Yearly	Nil

16. GSV factors:

Policy Year of Surrender	GSV factor
1	15%
2	30%
3	35%
4 to 7	50%
8 to (Policy Term less 2)	$50\% + 40\% \times (\text{Policy Year} - 7) \div (\text{Policy Term} - 8)$
Policy Term less 1 to Policy Term	90%

17. Nomination: Nomination shall be as per Section 39 of the Insurance Act, 1938 as amended from time to time. For more details on this section, please refer to our website.

18. Assignment: Assignment shall be as per Section 38 of the Insurance Act, 1938 as amended from time to time. For more details on this section, please refer to our website.

19. Section 41: In accordance with Section 41 of the Insurance Act, 1938 as amended from time to time, no person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

20. Section 45: 1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later. 2) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based. 3) Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact

was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such misstatement or suppression of a material fact are within the knowledge of the insurer: Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive. 4) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based: Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation. 5) Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the Life Insured was incorrectly stated in the proposal.

In case of fraud or misstatement, the policy shall be cancelled immediately by paying the surrender value, subject to the fraud or misstatement being established by the Company in accordance with Section 45 of the Insurance Act, 1938 as amended from time to time.

21. For further details, please refer to the policy document and the benefit illustration.

22. Policy Servicing and Grievance Handling Mechanism: For any clarification or assistance, You may contact Our advisor or call Our customer service representative (between 10.00 a.m. to 7.00 p.m, Monday to Saturday; excluding national holidays) on the numbers mentioned on the reverse of the Policy folder or on Our website: www.iciciprulife.com. For updated contact details, We request You to regularly check Our website. If You do not receive any resolution from Us or if You are not satisfied with Our resolution, You may get in touch with Our designated grievance redressal officer (GRO) at gro@iciciprulife.com or 1800-2660.

Address:

Unit 901A & 901B, 9th floor, Prism Towers,
Mindspace Link Road, Goregaon West,
Mumbai-400063, Maharashtra

For more details, please refer to the "Grievance Redressal" section on www.iciciprulife.com. If You do not receive any resolution or if You are not satisfied with the resolution provided by the GRO, You may escalate the matter to Our internal grievance redressal committee at the address mentioned below:

ICICI Prudential Life Insurance Co. Ltd.
Unit 901A & 901B, 9th floor, Prism Towers,
Mindspace Link Road, Goregaon West,
Mumbai-400063, Maharashtra

If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach Policyholders' Protection and Grievance Redressal Department, the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (BIMA BHAROSA SHIKAYAT NIVARAN KENDRA)
155255 (or) 1800 4254 732
Email ID: complaints@irdai.gov.in

Address for communication for complaints by fax/paper:

Policyholders' Protection and Grievance Redressal Department – Grievance Redressal Cell

Insurance Regulatory and Development Authority of India

Survey No. 115/1, Financial District, Nanakramguda, Gachibowli,

Hyderabad, Telangana State – 500032

You can also register your complaint online at bimabharosa.irdai.gov.in.

This is subject to change from time to time.

Refer <https://www.iciciprulife.com/services/grievance-redressal.html> for more details.

Appendix I: Death Benefit Multiples

Age	Multiple	Age	Multiple	Age	Multiple	Age	Multiple
≤ 5	15.0	17	13.8	29	12.6	41	11.4
6	14.9	18	13.7	30	12.5	42	11.3
7	14.8	19	13.6	31	12.4	43	11.2
8	14.7	20	13.5	32	12.3	44	11.1
9	14.6	21	13.4	33	12.2	45	11.0
10	14.5	22	13.3	34	12.1	46	10.9
11	14.4	23	13.2	35	12.0	47	10.8
12	14.3	24	13.1	36	11.9	48	10.7
13	14.2	25	13.0	37	11.8	49	10.6
14	14.1	26	12.9	38	11.7	≥ 50	10.5
15	14.0	27	12.8	39	11.6		
16	13.9	28	12.7	40	11.5		

A Plan to Fit Your Needs

You are the pillar of your family, holding everything together with love, care, and unshakable strength. Balancing numerous responsibilities- family commitments, work deadlines, and maintaining a social life, can often leave little time to focus on your own well-being. While the health of your family, spouse, and children may take priority, it is equally important to prioritize your own health. After all, your well-being is the foundation that supports everything you do.

At ICICI Prudential Life Insurance Co. Ltd., we understand that as a woman, you often prioritize the needs of your loved ones above your own, sometimes at the expense of your own well-being. That's why we are here to support and safeguard your needs, ensuring you are always protected. With ICICI Pru Wish we offer coverage for women-specific critical illnesses where critical illness means any illness, medical event or surgical procedure as specifically defined under Vital Care Benefit, Surgical Care Benefit and Maternity Care Benefit and whose signs or symptoms first commenced post the specified Waiting Period after the Date of Commencement of Risk. With this plan we aim to make your Wish for good health come true!

Salient features that make ICICI Pru Wish suitable for you



Comprehensive coverage against women specific critical illnesses and surgeries



Cover for surgeries resulting from specific illnesses



Fixed lump sum pay-out on diagnosis of any of the covered critical illnesses



Premium remains guaranteed* throughout the coverage term



Coverage for pregnancy complications and newborn complications through Maternity Care Benefit under Health Care Plus plan option



Premium Sabbatical Benefit which allows you to get one full year's premium holiday, while enjoying full policy benefits

*In case discount is applicable on 1st year premium, the premiums from 2nd year onwards will change accordingly.

Plan at a Glance- Eligibility Criteria to buy the product

Benefit option	Coverage Term (CT) & Premium Payment Term (PPT) (years)	Entry Age (years)	Maximum Cover ceasing age (years)										
Vital Care benefit and Surgical Care benefit	<p>Regular pay: Coverage term: Minimum: 8; Maximum: 30 PPT: Equal to the policy term</p> <p>Limited Pay:</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <th>Coverage Term</th> <th>PPT</th> </tr> <tr> <td>15</td> <td>10</td> </tr> <tr> <td>20</td> <td>10, 15</td> </tr> <tr> <td>25</td> <td>10, 15</td> </tr> <tr> <td>30</td> <td>10, 15</td> </tr> </table>	Coverage Term	PPT	15	10	20	10, 15	25	10, 15	30	10, 15	Minimum: 21 years Maximum: 55 years	75 Years;
Coverage Term	PPT												
15	10												
20	10, 15												
25	10, 15												
30	10, 15												
Maternity care benefit	<p>Regular pay: Coverage term: Minimum: 8; Maximum: 24</p> <p>Limited Pay: Minimum of (45 minus Entry age, PPT of Vital care benefit chosen at inception) PPT for both Regular & Limited pay will be the same as that of Vital Care Benefit, subject to life assured attaining 45 years of age. In which case PPT will be 45 minus age at entry.</p>	Minimum: 21 years Maximum: 37 years	45 Years;										

All references to age in the table are as on age as on last birthday.

The coverage term for Maternity Care benefit will always be less than or equal to coverage term for Vital Care and Surgical Care subject to minimum and maximum coverage term allowed as per above limits

Minimum Vital Care Sum Assured: ₹10,00,000

Maximum Vital Care Sum Assured: ₹50,00,000

Minimum Annualized Premium: ₹5,000

Maximum Premium: Corresponding to the maximum sum assured mentioned above

Premium Payment Frequency: Annual, Half-Yearly, Monthly

Goods and Services Tax is applicable on premiums as per the prevailing Tax Laws. The tax laws are subject to amendments from time to time.

***Annualized Premium** means the premium amount payable in a year, excluding the taxes, underwriting extra premiums and loadings for modal premiums, if any.

The product is available for sale through online mode.

Plan options in detail

ICICI Pru Wish offers two Plan Options i.e. Health Care Plan Option and Health Care Plus Plan Option. The Policyholders can choose from the following two options depending on their need:

- i. Health Care Plan Option provides cover against the Minor and Major Critical Illnesses under Vital Care Benefit and against Surgeries under Surgical Care Benefit. The list of Critical Illnesses and Surgeries are mentioned later in this section.
- ii. Health Care Plus Plan Option provides the Vital Care and Surgical Care Benefit and an additional Maternity Care Benefit which covers the maternity and childbirth related complications. The detailed list of Critical illnesses covered under Maternity Care Benefit is mentioned later in this section.

Premium will vary depending upon the Plan option chosen

Plan Option chosen at the time of inception cannot be altered any time during the Coverage Term

1. Health Care option

This Plan Option provides two types of Benefits options i.e. Vital Care Benefit and Surgical Care Benefit to the Life Assured during the Coverage Term. The terms and conditions applicable for the respective Benefit Options are as mentioned below:

1.1

Vital Care Benefit

Under this Benefit Option, the Life Assured is covered for Minor and Major critical illness conditions mentioned in Table 1 and Table 2 below. On diagnosis of any of the Major or Minor Conditions during the Coverage Term whilst the policy is in-force, the percentage of Vital Care Sum Assured as mentioned in the Table 1 and Table 2 will be paid to the Claimant. In order for a Minor or a Major Condition to be valid it should satisfy the terms and conditions of the Critical Illnesses as referred under Annexure 1.

i. Minor Conditions: Table 1 shows the list of Minor Conditions covered under Vital Care Benefit

Table 1: Minor Conditions covered under Vital Care Benefit:

Critical Illness (CI) Covered	Benefit payable on diagnosis of the condition
1 Carcinoma In Situ (CIS) of the Breast, Cervix Uteri	Lower of: <ul style="list-style-type: none">• 50% of Vital Care Sum Assured• 100% of Vital Care Sum Assured less any claims already paid for Minor Conditions
2 Osteoporotic fractures of the hip and vertebra treated with surgery	Lower of: <ul style="list-style-type: none">• 10% of Vital Care Sum Assured• 100% of Vital Care Sum Assured less any claims already paid for Minor Conditions
3 Urinary Incontinence requiring Surgical Repair	
4 Uterine Prolapse	
5 Pelvic floor dysfunction treated with Hysterectomy	
6 Thyroid disorders causing Thyroid Storm treated in ICU	

- a. In the event Life Assured is diagnosed with any of the above listed Minor Conditions during the Coverage Term, whilst the policy is in-force, then the percentage of Vital Care Sum Assured as mentioned in above Table 1 will be paid to the Claimant.
- b. Upon acceptance of a Minor Condition claim by the Company, the Vital Care Sum Assured shall be reduced to the extent of the claim(s) paid under Minor Condition.
- c. The Company shall process claims for other Minor Conditions so long as the Vital Care Sum Assured is completely exhausted, and the claims being raised are for unique Minor Conditions.
- d. Upon complete exhaustion of the Vital Care Sum Assured then Vital Care Benefit shall terminate with all rights and benefits thereunder.
- e. Once a claim has been paid for a specific Minor Condition, no further claims shall be honoured by the Company for the same Minor Condition.
- f. Upon termination of the Vital Care Benefit, the Policy shall continue only for the Surgical Procedures mentioned under Clause 1.2 (b) for a period of 365 days (within the Coverage Term) commencing from the date of diagnosis of the Minor Condition which led to exhaustion of the Vital Care Sum Assured.
- g. This cover will only pay one claim per qualifying "surgical procedure" with reference to Minor Conditions Urinary Incontinence requiring Surgical Repair, Uterine Prolapse and Pelvic floor dysfunction treated with Hysterectomy. If a hysterectomy has been carried out under any of these conditions, regardless of the need for the procedure, no other benefits which require a hysterectomy are eligible to be claimed.
- h. A Cooling-off Period will be applicable in case of diagnosis of consecutive Minor Conditions. A Cooling-Off Period shall not be applicable in the case of diagnosis of any claim for a Major Condition following a Minor Condition claim. In case of diagnosis of a Minor Condition during Cooling off period, the claim will not be admissible.

ii. Major Conditions: Table 2 shows the list of Major Conditions covered under Vital Care Benefit

Table 2: Major Conditions covered under Vital Care Benefit

	Critical Illness Covered	Benefit payable on diagnosis of the condition
Major CI	1 Major cancers (of Breast, Cervix Uteri, Uterus, Fallopian tube, Ovary, Vagina, Vulva)	
	2 Myocardial Infarction (First Heart Attack of specific severity)	100% of Vital Care Sum Assured less any Minor Critical Illness claim already paid
	3 Stroke resulting in permanent symptoms	
	4 Systemic Lupus Erythematosus with Lupus Nephritis	
	5 Rheumatoid Arthritis	

a.In the event, the Life Assured is diagnosed with the any of the Major Conditions listed above in Table 2 during the Coverage Term, whilst the Policy is In-Force, then the Vital Care Sum Assured as may be applicable at the time of diagnosis will be paid to the Claimant. Thereafter, Vital Care Benefit will be terminated with all rights and benefits thereunder.

b.Upon exhaustion of the 100% of Sum Assured under Vital Care Benefit, the Policy shall continue only for the Surgical Procedures mentioned under Clause 1.2 (b) for a period of 365 days (within the Coverage Term) commencing from the date of diagnosis of the Major Condition which led to exhaustion of the Vital Care Sum Assured.

c.There can only be one claim for any of the Major Conditions covered under the Vital Care Benefit.

iii.In the event the Life Assured is diagnosed with any of the covered Minor or Major Conditions on the Date of Maturity then Vital Care Sum Assured shall not be payable and the Vital Care Benefit shall terminate with all rights and benefits thereunder.

1.2 Surgical Care Benefit: Under this Benefit, the Life Assured is covered only for the Surgical Procedures mentioned under Table 3.

Table 3: Surgical procedures covered under the plan

	Surgical procedures covered	Amount payable
Additional surgery cover	1 Breast Reconstructive Surgery following a Mastectomy	
	2 Skin grafting due to major burns*	
	3 Radical Vulvectomy required due to a malignant/ Invasive condition	100% of Surgical Care Sum Assured
	4 Radical hysterectomy required due to a malignant/ Invasive condition	
	5 Total Pelvic Exenteration required due to a malignant/ invasive condition	
	6 Hysterectomy required due to a malignant/ invasive condition	
	7 Mastectomy required due to a malignant/ invasive condition	40% of Surgical Care Sum Assured
	8 Complicated repair of a Vaginal Fistula	
	9 Bilateral or Unilateral Breast Lumpectomy due to a malignant condition or carcinoma in situ	

*The major burns referred in Serial No 2 above is required to occur during Coverage Term to make it an eligible claim.

- a. Under this benefit only one claim for the surgical procedures covered can be made. The percentage of Surgical Care Sum Assured payable against each surgery is provided in the Table 3 above.
- b. In the event the Life Assured undergoes with any of the surgeries listed from Serial number 1 – 5 in Table 3, then the Surgical Care Benefit shall terminate upon payment of the 100% of Surgical Care Sum Assured. And in the event the Life Assured undergoes with any of the surgeries listed from Serial number 6 – 9 in Table 3, then the Surgical Care Benefit shall terminate upon payment of the 40% of Surgical Care Sum Assured.
- c. If Surgical Care Benefit claim is made before 100% of the Vital Care Sum Assured is exhausted: In the event, the Life Assured undergoes any of the covered Surgical Procedures during the Coverage Term, whilst the policy is in-force, the percentage of Surgical Care Sum Assured applicable for the Surgical Procedures as shown in Table 3 will be paid. Upon payment of the respective Surgical Care Sum Assured, the Surgical Benefit shall terminate with all rights and benefits thereunder.
- d. If Surgical Care Benefit claim is made after 100% of the Vital Care Sum Assured is exhausted:
You can claim the Surgical Care Benefit if you undergo surgery for any of the following conditions within 365 days from the date of diagnosis of the latest Minor or Major Condition (which led to exhausting the Vital Care Sum Assured), provided that the 365-day period falls within the Coverage Term:
 - Only Surgeries under Surgical Care Benefit listed in Table 3, linked to Minor or Major condition that lead to the exhaustion of the Vital Care Benefit
 - Skin grafting due to major burns*; or
 - Complicated repair of a Vaginal Fistula

*The major burns referred in the above condition is required to occur during Coverage Term to make it an eligible claim.

- e. The Surgical Care Benefit shall terminate on the earlier of:
 - On payment of the applicable claim amount in case of a claim under Surgical Care Benefit; or
 - On the expiry of 365 days from the date of diagnosis of the latest Minor or Major Condition which has resulted in the termination of the Vital Care Benefit.

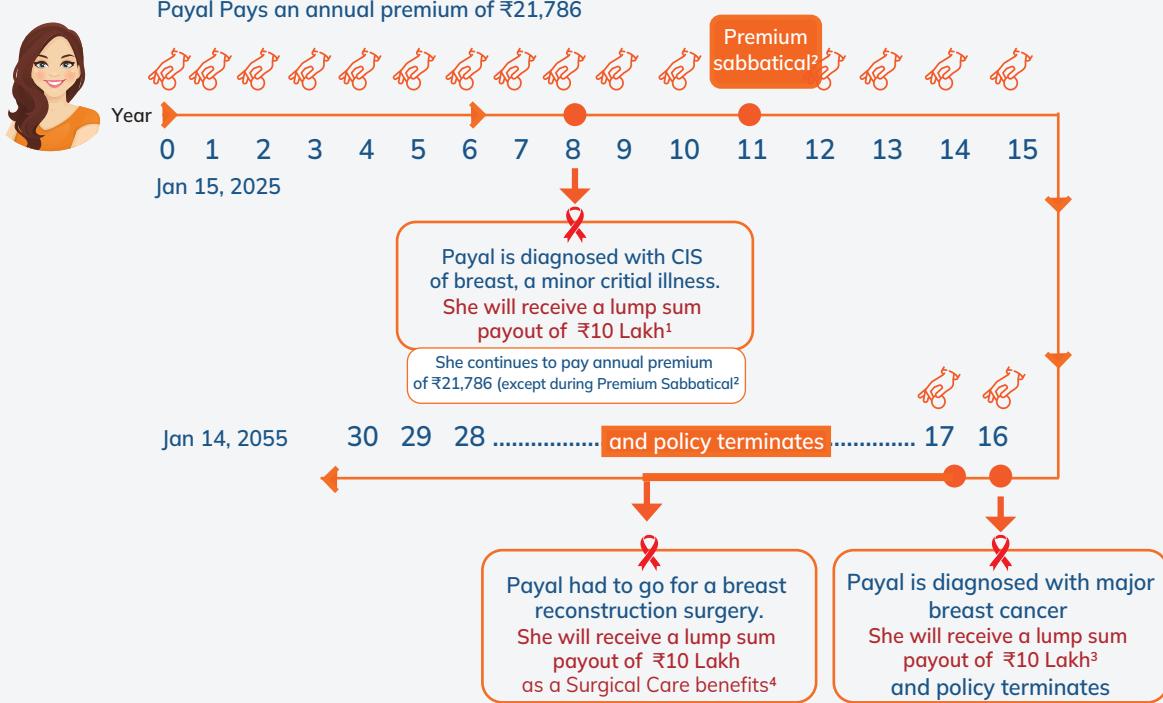
- f. In the event, Life Assured undergoes any listed Surgical Procedures on the Date of Maturity then the Surgical Benefit Sum Assured shall not be payable and the Surgical Care Benefit shall terminate with all rights and benefits thereunder.
 - g. In case the Surgical Care Benefit terminates before Vital Care Benefit, the Vital Care Benefit will continue with the total instalment premium reduced to the extent of the instalment premium for Surgical benefit.
 - h. The payouts made under Vital Care Benefit will not affect the Sum Assured of Surgical Care Benefit.
-

How does Vital Care and Surgical Care work?

Illustration 1:



Payal is a 25-year-old working woman who wants to ensure that in case of any unforeseen event her health-related expenses are taken care of. She decides to purchase Health Care Option under ICICI Pru Wish plan for herself. She opts for a Regular pay policy with coverage term of 30 years for a Sum Assured of Rs. 20 Lakh. Here, the Surgical Care Benefit will be Rs. 10 Lakh, which will be additional to the Vital Care Sum Assured.



¹Goods and Services tax (if any) will be charged extra, as per applicable rates.

1. On diagnosis of CIS of the breast, a minor critical illness, 50% of Vital Care Sum Assured, i.e., ₹10,00,000 will be paid out to Payal.
2. Payal took a break from work thus she opted for a premium sabbatical, which will waive off 1 year's premium for her.
3. Payal gets diagnosed with major breast cancer in 16th year. She will receive the remaining of the Vital Care benefit of ₹10,00,000. The policy will terminate with all its benefits except for the Surgical Care Benefit continuing for next 365 days provided 365 days period falls within Coverage Term.
4. Due to breast cancer, she had to go for breast reconstruction surgery. A Surgical Care Benefit of ₹10,00,000. The Surgical Care benefit will terminate.

2. Health Care Plus

Under this Plan Option, in addition to the Vital Care Benefit and Surgical Care Benefit as mentioned in Clause 1 of this document, the Life Assured shall also be covered for Maternity Care Benefit. Maternity Care Benefit covered under this Plan Option shall also include the below listed Pregnancy Complications and Newborn Complications/Congenital illnesses.

2.1 Maternity Care Benefit:

- a. Under Maternity Care Benefit, upon diagnosis of any of the covered Critical Illnesses /procedures shown in Table 4 below, during the applicable Coverage Term while the Policy is In-force, the Maternity Care Sum Assured will be payable to the Claimant, thereafter the Maternity Care Benefit shall terminate with all rights and benefits thereunder.
- b. Only one claim for one condition for Maternity Care Benefit can be made post which the Maternity Care Benefit shall terminate.

Table 4: Maternity complications and Congenital Illnesses covered under the plan

Benefit	Critical illness / surgical procedure	Benefits as a % of Maternity Care Sum Assured
Pregnancy complications	1 Uterine rupture	100% of Maternity Care Sum Assured
	2 Ectopic pregnancy	
	3 Eclampsia	
	4 Molar pregnancy	
	5 Disseminated Intravascular Coagulation	
	6 Postpartum Haemorrhage requiring Hysterectomy	
	7 Placenta Increta / Percreta'	
	8 HELLP syndrome	
	9 Choriocarcinoma	

Congenital illness or Newborn Complications	10 Down's syndrome	100% of Maternity and Child Care cover
	11 Spina bifida	
	12 Oesophageal atresia and tracheoesophageal Fistula	
	13 Anal atresia	
	14 Cleft palate	
	15 Club feet	
	16 Tetralogy of Fallot	
	17 Transposition of great vessels	
	18 Patent ductus arteriosus	
	19 Total anomalous pulmonary venous return (TAPVR)	
	20 Tricuspid atresia	
	21 Atrial Septal Defect	
	22 Ventricular Septal Defect	

- c. The payouts made under Surgical Care Benefit and Vital Care Benefit will not affect the Sum Assured of Maternity Care Benefit.
- d. Upon termination of the Vital Care Benefit (i.e., upon exhaustion of 100% of Vital Care Sum Assured) no claim for a Maternity Care Benefit shall be admissible and the Maternity Care Benefit shall terminate. This is applicable even if no claims have been made under the Maternity Care Benefit.
- e. In case the Maternity Care Benefit terminates before Vital Care Benefit, the Policy shall continue with Vital Care Benefit and Surgical Care Benefit (if not exhausted earlier) for the remaining applicable Coverage Term. The Total Instalment Premium payable for the Policy thereafter will reduce to the extent of the premium applicable for Maternity Care Benefit.
- f. In the event of diagnosis of any of the covered Critical Illnesses on the Date of Maturity (applicable for Maternity Care Benefit), then the Maternity Care Sum Assured shall not be payable and the Benefit shall terminate with all rights and benefits thereunder.

No Benefit will be payable on death of Life Assured or the Newborn child (if case Health Care Plus Option is chosen) under this Policy

How Maternity Care Benefit will work?

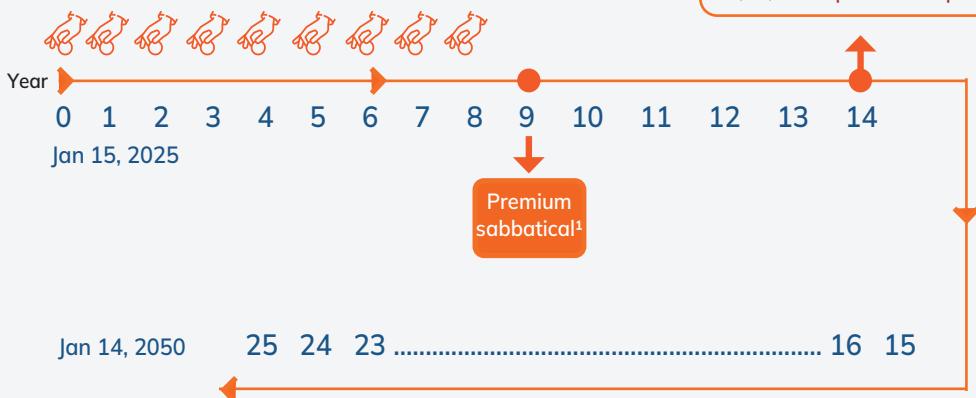
Illustration 2:



Mrs. Kumar is a 25-year-old working woman. She purchases the Health Care Plus plan for herself and opts for a Premium Payment Term of 10 years along with coverage term of 25 years with a Vital Care Sum Assured of ₹20,00,000.



Mrs. Kumar pays premium of ₹49,903 for 10 years
Total Premiums Paid: ₹ 4,49,127



[^]Goods and Services tax (if any) will be charged extra, as per applicable rates.

1. Mrs. Kumar did not take any premium sabbatical during the premium payment term, thus last year's premium is waived off.
2. Mrs. Kumar conceives during the coverage term, but unfortunately, encounters an Ectopic Pregnancy where she has to undergo an immediate surgical removal of the complete fallopian tube. Maternity Care Benefit will be paid out to her. On claiming this benefit, Maternity Care benefit will terminate.

Premium Sabbatical

This product provides you with the flexibility to stop paying your premiums for one policy year anytime during the premium payment term by opting for Premium Sabbatical. Policy will be considered as In-force during Premium Sabbatical Year. This option can be availed only once during the entire Premium Payment Term.

The following terms and conditions are applicable for Premium Sabbatical:

- In order to avail Premium Sabbatical, You will have to submit a written request to Us and will be effective only upon specific communication by Us.
 - This option has to be availed by You at least 15 days prior to the Policy Anniversary of the Policy Year during which you wish to waive off premiums payable.
 - Once opted Premium Sabbatical will commence only from the immediate Policy Anniversary and will be applicable for one full Policy Year.
 - If the frequency is Monthly or Half- yearly then the premiums will have to be paid till the upcoming Policy Anniversary from when the Premium Sabbatical commences.
 - In case of non-payment of premium either on the premium due date or within the Grace Period after Policy Anniversary on which the Premium Sabbatical Year comes to an end then the Policy shall lapse and You may revive the Policy during the Revival Period.
 - If You do not avail this benefit anytime during the Premium Payment Term, the Company will waive off the premium payable for the last year of the Premium Payment Term.
-

Surrender Benefit

You can Surrender the policy any time after payment of at least one full year's Premiums. Prior to receipt of one full year's premium, no surrender value is payable.

On Policy Surrender, Surrender Value equal to Unexpired Risk Premium Value will be payable to the Claimant provided no claims have been paid out in the Policy.

Limited Pay

i For Vital Care Benefit and Surgical Care Benefit:

If one full year's premium is not paid, Unexpired risk premium value = 0

Unexpired risk premium value = $25\% \times [\text{Number of months for which premiums are paid} / (\text{PPT}_{VTL} \times 12)] \times [1 - (\text{Policy Month of surrender} - 1) / (\text{CT}_{VTL} \times 12)] \times \text{Total Premiums Paid for Vital Care benefit and Surgical Care benefit.}$

ii For Maternity Care Benefit:

If one full year's Premium is not paid, Unexpired Risk Premium Value = 0.

Unexpired risk premium value = $25\% \times [\text{Number of months for which premiums are paid} / (\text{PPT}_{MT} \times 12)] \times [1 - (\text{Policy Month of surrender} - 1) / (\text{CT}_{MT} \times 12)] \times \text{Total Premiums Paid for Maternity Care benefit}$

In Health Care Plus Option, you do not have the option to surrender only Maternity Care Benefit and to continue with Vital Care and Surgical Care Benefit.

Surrender Value payable under Health Care Plus will be a Sum of Surrender Value calculated for Vital Care Benefit and Surgical Care Benefit and Maternity Care Benefit as mentioned above.

Where,

PPT= Premium Payment Term | CT = Coverage Term | MT= Maternity Care | VTL= Vital Care

Regular Pay

There will be no Surrender Value applicable for Regular Pay policies.

On payment of the Surrender Value, the policy will terminate and all rights, benefits and interests under the policy will stand extinguished.

Revival

A Policy which has lapsed for nonpayment of premium, within the grace period, may be revived subject to underwriting and the following conditions:

- a) The application for revival is made within five years from the due date of the first unpaid premium and before the Date of Maturity of the respective Benefit Option. Revival will be based on the prevailing Board approved underwriting policy.
- b) Policyholder has to furnish, at their own expense, satisfactory evidence of the Life Assured's health as required by the Company.
- c) The arrears of Premiums together with interest at such rate as the Company may charge for late payment of premiums are paid.
- d) Revival interest rates will be set monthly based on the prevailing yield on 10-year Government Securities and is equal to 150 basis points over the yield. The yield on 10 year Government Securities will be sourced from www.bloomberg.com. The revival interest rate for November 2024 is 8.36% p.a. compounded half-yearly.
- e) The revival interest rate will be reviewed on the 15th day of every month by the company based on the 10-year G-Sec yield of one day prior to such review.
- f) The revival of the Policy may be on terms different from those applicable to the Policy before premiums were discontinued; for example, extra mortality premiums or charges may be applicable. The Company reserves the right to refuse to revive the Policy. The revival will take effect only if it is specifically communicated by the Company to the Policyholder.
- g) Any change in revival conditions will be subject to prior approval from IRDAI and will be disclosed to policyholders.

Policy may be revived for the lower of the Sum Assured as applicable on the date of premium discontinuance or the reduced Sum Assured as approved during the Revival.

Terms & Conditions

1. No Benefit will be payable on death of Life Assured or the New Born child (if case Health Care Plus Option is chosen) under this Policy.
2. Suicide clause: Not Applicable
3. Loan: Not Applicable
4. Waiting Period is defined as the period commencing from Date of Commencement of Risk or date of revival whichever is later.

No Benefit will be payable if the Life Assured is diagnosed with any of the Critical Illnesses or any signs or symptoms related to any Critical Illness which arises within the Waiting Period. The Waiting Period for the respective Benefit Options are mentioned below:

Name of Cover or Plan or Option	Waiting Period
Vital Care	90 Days
Surgical Care	90 Days
Maternity Care Benefit	365 Days

5. Cooling off period: A cooling-off period will apply in case of diagnosis of consecutive Minor Conditions. Cooling off period means a consecutive period of 180 days commencing from the date of diagnosis of one Minor Condition to the date of diagnosis of a subsequent Minor Condition. In case of diagnosis of a Minor Condition during Cooling off period, the claim will not be admissible.

6. Survival Period: The Survival Period is defined as a period of 14 days commencing from the date of first diagnosis of covered Critical Illness Condition that the Life Assured or the newborn child under the Maternity

Care Benefit has to survive to be eligible for receiving the benefit amount covered under this Policy.

No benefit will be payable if Life Assured or the new born child under the Maternity Care Benefit does not survive during this period.

7. Free look period: On receipt of the policy document, whether received electronically or otherwise, You have an option to review the policy terms and conditions. If You are not satisfied or have any disagreement with the terms and conditions of the Policy or otherwise and have not made any claim, the Policy Document needs to be returned to the Company with reasons for cancellation within 30 days from the date of receipt of the Policy Document. We will refund the premium paid after deduction of Stamp duty, proportionate risk premium for the period of cover and the expenses borne by Us on medical tests, if any. The Policy shall terminate on payment of this amount and all rights, benefits and interests under this Policy will stand extinguished.

8. Exclusions:

The Life Assured will not be entitled for any benefit if the covered conditions fall within the exclusions mentioned below. These exclusions apply in addition to the exclusions specified in the definitions mentioned in Annexure 1.

1. Pre-existing Disease means any condition, ailment, injury or disease: -
 - i. That is/are diagnosed by a physician not more than 36 months prior to the date of commencement of the risk of the policy issued by

- Us or its reinstatement or,
- ii. For which medical advice or treatment was recommended by, or received from, a physician not more than 36 months prior to the Date of Commencement of the risk of the Policy issued by Us or its reinstatement.
2. For any medical condition or medical procedure resulting directly or indirectly from self-inflicted injuries, attempted suicide.
3. Any external congenital anomaly: Congenital anomaly which is in the visible and accessible parts of the body. Congenital Anomaly means a condition which is present since birth, and which is abnormal with reference to form, structure or position.
4. For any medical condition or any medical procedure arising from the donation of any of the life assured's organs.
5. Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.
6. For any medical condition or any medical procedure arising from nuclear contamination; the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.
7. Treatment for injury or illness caused by avocations or activities such as hunting, mountaineering, steeple chasing, professional sports, racing of any kind, scuba diving, aerial sports, activities such as hand-gliding, ballooning, deliberate exposure to exceptional danger.
8. Participation by the life assured in a criminal or unlawful act.
9. Taking part in any naval, military or air force operation during peace time.
10. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, strikes.
11. Participation by the life assured in any flying activity, except as a bona fide, fare-paying passenger, pilot, air crew of a recognized airline on regular routes and on a scheduled timetable.
12. Service in the armed forces, or any police organization, of any country at war or service in any force of an international body.
13. No benefit shall be paid for any pregnancy complications and any congenital anomalies covered under the Maternity Care benefits if the pregnancy results from fertility treatment such as assisted reproduction services including artificial insemination, advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI and Gestational surrogacy.
- 9. Tax benefits:** Premiums and the benefits under the policy, will be subject to the taxes and other statutory levies as may be applicable from time to time.
- The Policyholder will be required to pay goods and services tax, cess or any other form of taxes or charges or levies as per the prevailing laws, regulations and other financial enactments as may exist from time to time, wherever applicable.
- All benefits payable under the policy are subject to the tax laws and other financial enactments as they exist from time to time.
- All provisions stated in this Policy are subject to the

current guidelines issued by the Regulator as on date. All future guidelines that may be issued by the Regulator from time to time may also be applicable to this Policy.

10. **Grace period:** If you are unable to pay an instalment premium by the due date, you will be given a Grace Period of 15 days for payment of due instalment premium if You have chosen monthly frequency, and 30 days for payment of due instalment premium if You have chosen any other frequency, commencing from the Premium due date. The applicable cover continues during the Grace Period. In case of diagnosis of any of the covered conditions/ undergoing any covered surgery of Life Assured during the Grace Period, We will pay the applicable Benefit.

11. **Lapsation:**

If any premium instalment is not paid within the grace period, then the policy shall lapse, and the cover will cease. If the policy is not revived within the revival period, then the surrender value (if applicable, computed as on date of premium discontinuance), if any, shall become payable on the earliest of the following events:

- Event of death of the Life Assured within the revival period,
- End of the revival period, and
- Date of Maturity.

Post payment of such surrender value (if any), then the policy shall foreclose and all rights and benefits under the policy shall stand extinguished.

12. **Renewal Premium in Advance:** Collection of renewal premium in advance shall be allowed within the

same financial year for the premium due in that financial year,. However, where the renewal premium due in one financial year is being collected in advance in earlier financial year, Company may collect the same for a maximum period of three months in advance of the due date of the premium. The renewal premium so collected in advance shall only be adjusted on the due date of the premium.

13. **Change of frequency of premium payment:** You have the flexibility to change the frequency of premium payment on policy anniversary.
14. **Modal loadings:** Loadings for various modes of premium payment are given below

Premium paying frequency	Modal Loading (as a % of Annualized Premium)
Yearly	0%
Half-yearly	1.25%
Monthly	2.50%

15. **Nomination:** Nomination in the Policy will be governed by Section 39 of the Insurance Act, 1938 as amended from time to time. For more details on this section, please refer to our website.
16. **Section 41 of the Insurance Act, 1938 as amended from time to time:** In accordance to the Section 41 of the Insurance Act, 1938 as amended from time to time, no person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out

or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to ten lakh rupees.

- 17. Policies where Policyholder and Life Assured are different individuals:** If the Policyholder and the Life Assured are different, then in the event of death of the Policyholder and upon subsequent intimation of the death with the Company, the policy shall vest on the Life Assured. Thereafter, the Life Assured shall become the Policyholder and will be entitled to all benefits and subject to all liabilities as per the terms and conditions of the policy. The Life Assured cum Policyholder can register due nomination as per Section 39 of the Insurance Act, 1938 as amended from time to time.

We hereby agree to pay the appropriate benefits under the Policy subject to:

- a) Our satisfaction of the benefits having become payable on the happening of an event as per the Policy terms and conditions,
 - b) The title of the said person or persons claiming payment,
18. The product is also available for sale through online mode.
- 19. Policy Servicing and Grievance Handling Mechanism:** For any clarification or assistance, You may contact Our advisor or call Our customer service representative (between 10.00 a.m. to 7.00 p.m., Monday to Saturday; excluding national

holidays) on the numbers mentioned on the reverse of the Policy folder or on Our website: www.iciciprulife.com. For updated contact details, We request You to regularly check Our website. If You do not receive any resolution from Us or if You are not satisfied with Our resolution, You may get in touch with Our designated grievance redressal officer (GRO) at gro@iciciprulife.com or 1800-2660.

Address:

ICICI Prudential Life Insurance Company Limited,
Ground Floor & Upper Basement, Unit No. 1A & 2A,
Raheja Tipco Plaza Rani Sati Marg,
Malad (East) Mumbai-400097.

The concerns of senior citizens will be resolved on priority ensuring there is a speedy disposal of the grievances.

For more details, please refer to the "Grievance Redressal" section on www.iciciprulife.com. If You do not receive any resolution or if You are not satisfied with the resolution provided by the GRO, You may escalate the matter to Our internal grievance redressal committee at the address mentioned below:

ICICI Prudential Life Insurance Co. Ltd.
Ground Floor & Upper Basement Unit No. 1A & 2A,
Raheja Tipco Plaza, Rani Sati Marg,
Malad (East), Mumbai- 40009, Maharashtra.

If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach Policyholders' Protection and Grievance Redressal Department, the Grievance Cell of the Insurance Regulatory and Development Authority of

India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (BIMA BHAROSA
SHIKAYAT NIVARAN KENDRA)
155255 (or) 1800 4254 732
Email ID: complaints@irdai.gov.in

Address for communication for complaints by fax/paper:

Policyholders' Protection and Grievance Redressal Department – Grievance Redressal Cell
Insurance Regulatory and Development Authority of

India
Survey No. 115/1, Financial District, Nanakramguda,
Gachibowli,
Hyderabad, Telangana State – 500032
You can also register your complaint online at bimabharosa.irdai.gov.in.
This is subject to change from time to time. Refer <https://www.iciciprulife.com/services/grievance-redressal.html> for more details.

Annexure I

Critical Illness Conditions

Vital Care Major Conditions:

1) Major Cancer of: Breast, Cervix uteri, uterus, fallopian tube, ovary, vagina or vulva

Malignant Cancer of breast, cervix uteri, uterus, fallopian tube, ovary, vagina or vulva covers primary Cancer of the breast, cervix uteri, uterus, fallopian tube, ovary, vagina, or vulva only.

Cancer is a malignant tumour characterised by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissue. This diagnosis must be supported by histological evidence of malignancy and confirmed by an oncologist or pathologist. The following are excluded:

- Tumours showing the malignant changes of carcinoma in situ and tumours which are histologically described as benign, pre-malignant, borderline malignant, low malignant potential, non-invasive, all grades of dysplasia, all grades of Squamous intraepithelial lesions (HSIL and LSIL), and all grades intra-epithelial neoplasia [CINI, CIN2, CIN3 or VIN 1-3].
- Secondary cancer, which has originated from other organs and spread to the female genital tract and breast.

2) Myocardial Infarction (First Heart Attack of specific 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 history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
- New characteristic electrocardiogram changes
- Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

- Other acute Coronary Syndromes
- Any type of angina pectoris
- A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

3) Stroke resulting in permanent symptoms

- I. Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. 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:
 - i. Transient ischemic attacks (TIA)
 - ii. Traumatic injury of the brain
 - iii. Vascular disease affecting only the eye or optic nerve or vestibular functions.

4) Systemic Lupus Erythematosus with Lupus Nephritis

Multi-system, autoimmune disorder characterized by the development of auto-antibodies, directed against various self-antigens. For purposes of the definition of "Critical Illness", SLE is restricted to only those forms of systemic lupus erythematosus, which involve the kidneys and are characterized as Class III, Class IV, Class V or Class VI lupus nephritis under the Abbreviated International Society of Nephrology/Renal Pathology Society (ISN/RPS) classification of lupus nephritis (2003) below based on renal biopsy. Other forms such as discoid lupus, and those forms with only hematological and joint involvement are specifically excluded.

Abbreviated ISN/RPS classification of lupus nephritis (2003):

Class I - Minimal mesangial lupus nephritis

Class II - Mesangial proliferative lupus nephritis

Class III - Focal lupus nephritis

Class IV - Diffuse segmental (IV-S) or global (IV-G) lupus nephritis

Class V -Membranous lupus nephritis

Class VI - Advanced sclerosing lupus nephritis.

5. Rheumatoid Arthritis

Unequivocal Diagnosis of systemic immune disorder of rheumatoid arthritis where all of the following criteria are met:

- (a) Diagnostic criteria of the American College of Rheumatology for Rheumatoid Arthritis;
- (b) Permanent inability to perform at least two (2) Activities of Daily Living;

- (c) Widespread joint destruction and major clinical deformity of three (3) or more of the following joint areas: hands, wrists, elbows, knees, hips, ankle, cervical spine or feet; and
- (d) The foregoing conditions have been present for at least six (6) months."

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.

Vital Care Minor Conditions:

6) CIS of the Breast, Cervix Uteri

Only CIS of the breast and cervix uteri will be covered. Carcinoma-in-situ means the presence of malignant cancer cells that remain within the cell group from which they arose. It must involve the full thickness of the epithelium but does not cross basement membranes and it does not invade the surrounding tissue or organ.

The diagnosis must be established by histological evidence and to be confirmed by confirmed by an oncologist or pathologist.

All tumors which are histologically described as benign, pre-malignant, borderline malignant, low malignant potential, all grades of dysplasia, all grades of squamous intraepithelial lesion and all grades intra-epithelial neoplasia are excluded except CIN3.

7) Urinary Incontinence requiring Surgical Repair

Urinary Incontinence requiring surgical repair is a condition where all the following conditions are met:

- a) Urinary Incontinence has been diagnosed by a Specialist medical practitioner; and
- b) The insured is under continuous medical treatment for Urinary Incontinence; and
- c) Surgical repair has been undertaken for the sole purpose of correcting the Urinary Incontinence.

Any surgery or procedure which is not purely or solely for treatment of Urinary Incontinence is excluded.

All non-invasive procedures including laser incontinence treatment are also specifically excluded.

This benefit is not payable if Urinary Incontinence was diagnosed before the Date of Commencement of Risk or date of reinstatement (if any) of this benefit. Coverage for this impairment will cease at age seventy (70) or on Date of Maturity, whichever is earlier.

8) Osteoporotic fractures of the hip and vertebra treated with surgery

Osteoporotic fractures of the hip and vertebra treated with surgery refers to osteoporosis requiring invasive surgery as a direct result of a fracture of the vertebra and/or pelvis, performed on the advice of a medical specialist, and is required to repair or replace parts of the vertebrae and/or pelvis.

The diagnosis of Osteoporosis must be confirmed by a specialist medical practitioner supported by a bone density reading which satisfies the WHO definition of Osteoporosis. The WHO Definition of Osteoporosis: Bone Density reading with a T -score of less than -2.5 (i.e., 2.5 standard deviations below the peak bone density of a normal 25 -30-year-old adult).

Only osteoporotic fractures of the hip and/or vertebra after completed surgery is covered. Coverage for this impairment will cease at age seventy (70) or on Date of Maturity, whichever is earlier.

This benefit is not payable if Osteoporosis was diagnosed before the Date of Commencement of Risk or date of reinstatement (if any) of this benefit.

9) Uterine Prolapse

Uterine prolapse is a condition where all of the following diagnostic conditions are met:

Uterine prolapse has been diagnosed by a Specialist Medical Practitioner; and Medically Necessary surgical Hysterectomy has been undertaken for the sole purpose of correcting the loosening of the support muscles and tissues in the pelvic area.

Hysterectomy for any other reason is specifically excluded.

This benefit is not payable if Uterine prolapse Pelvic floor dysfunction was diagnosed before the Date of Commencement of Risk or date of reinstatement (if any) of this benefit.

Coverage for this impairment will cease at age seventy (70) or on Date of Maturity, whichever is earlier.

10) Pelvic floor dysfunction treated with Hysterectomy

Pelvic floor dysfunction treated with Hysterectomy is a condition where all of the following diagnostic conditions are met:

Pelvic floor dysfunction has been diagnosed by a Specialist Medical Practitioner; and Medically Necessary surgical Hysterectomy has been undertaken for the sole purpose of correcting the loosening of the support

muscles and tissues in the pelvic area.

Hysterectomy for any other reason is specifically excluded.

This benefit is not payable if Uterine prolapse Pelvic floor dysfunction was diagnosed before the Date of Commencement of Risk or date of reinstatement (if any) of this benefit.

Coverage for this impairment will cease at age seventy (70) or on Date of Maturity, whichever is earlier.

11) Thyroid disorders causing Thyroid Storm treated in ICU

Thyroid storm, also known as thyrotoxic crisis, is an acute, life-threatening complication of hyperthyroidism that presents with multi-system involvement.

The confirmed diagnosis of a Thyroid Storm based upon the presence of severe and life-threatening symptoms including hyperpyrexia, cardiovascular dysfunction (tachycardia, atrial fibrillation, cardiac failure), altered mentation (agitation, delirium, psychosis, stupor or coma) and gastrointestinal symptoms (nausea, vomiting, abdominal pain) in a patient with biochemical evidence of hyperthyroidism.

Admission in an Intensive Care Unit (ICU) for at least 96 hours is necessary to meet the definition. Diagnosis and evidence has to be certified by the treating endocrinologist or specialist medical practitioner.

Hospitalisation for treating hyperthyroidism other than Thyroid Storm are excluded.

Surgical Care :

1) Breast Reconstructive Surgery following a Mastectomy

Breast reconstructive surgery following a Mastectomy" means the actual undergoing of plastic or reconstructive surgery of the breast following surgical removal of at least one quadrant of the tissue of the breast due to a diagnosis of malignant [invasive breast cancer. The surgical removal of breast tissue must be deemed Medically Necessary by a specialist medical practitioner.

2) Skin grafting due to major burns

Skin grafting due to major burns means the undergoing of skin grafting due to burns resulting in full thickness skin destruction of at least 10% of the body surface area of the life assured. It is necessary for the burns which require skin grafting to occur during the Coverage Term. Correction of facial disfigurement is excluded under this benefit.

3) Radical Vulvectomy required due to a malignant/Invasive condition

Radical vulvectomy means surgical removal of the labia majora, labia minora, clitoris and regional lymph nodes The surgery must be deemed Medically Necessary and carried out by specialist medical practitioner together with histological confirmation.

4) Radical hysterectomy required due to a malignant/ Invasive condition

A radical hysterectomy which includes removal of the uterus, fallopian tubes, wide excision of parametrium, tissues surrounding the upper vagina, and all the pelvic lymph nodes due to gynaecological cancers.

The surgery must be deemed Medically Necessary and carried out by a specialist medical practitioner together with histological confirmation.

5) Total Pelvic Exenteration required due to a malignant /invasive condition

Actual undergoing of excision of the bladder, lower uterus, vagina uterus, adnexa, the pelvic and lower sigmoid colon, pelvic lymph nodes and all the pelvic peritoneum, due to gynaecological cancers. The surgery must be deemed Medically Necessary and carried out by a specialist medical practitioner together with histological confirmation.

6) Hysterectomy required due to a malignant/invasive condition

The removal of the uterus (at least the corpus and cervix or corpus only) with supporting evidence of carcinoma of the uterus, fallopian tube, ovary, vagina or endometrium, advanced cervical carcinoma. The surgery must be deemed Medically Necessary and carried out by a specialist medical practitioner together with histological confirmation.

7) Mastectomy required due to a malignant/invasive condition

Mastectomy means surgical removal of at least one quadrant of the tissue of a breast. The surgery must be deemed Medically Necessary and carried out by a specialist medical practitioner together with histological confirmation.

8) Complicated repair of a Vaginal Fistula

Complicated repair of a vaginal fistula means complicated surgical correction of an abnormal passage between the vagina and an internal organ. The surgery must be deemed Medically Necessary and carried out by a specialist medical practitioner together with histological confirmation.

9) Bilateral or Unilateral Breast Lumpectomy due to a malignant condition or carcinoma in situ

Bilateral or Unilateral Breast Lumpectomy due to a malignant condition or carcinoma in situ" is the removal of a malignant tumour or Carcinoma in situ and surrounding breast tissue from both or Single breast. The surgery must be deemed Medically Necessary and carried out by a specialist medical practitioner together with histological confirmation.

Maternity and Child Care - Pregnancy Complications:

1) Uterine rupture

Rupture of the uterus during pregnancy requiring a hysterectomy and emergency delivery of the foetus by caesarean section. (Hysterectomy must have been performed.

2) Ectopic pregnancy

Pregnancy, in which the fertilized ovum implants in the fallopian tube. The ectopic pregnancy must have required the immediate surgical removal of the complete fallopian tube. The diagnosis must be confirmed with a pathology report. No benefit will be payable for partial salpingectomy and any other forms of treatment for ectopic pregnancy.

3) Eclampsia

Eclampsia is the occurrence of generalized tonic clonic grand mal seizures after the 20th week of pregnancy in a pregnant woman who has also has hypertension, proteinuria, and oedema. Eclampsia must be diagnosed by a Gynaecologist, Obstetrician or specialist medical practitioner. The eclampsia must require the emergency delivery of the foetus and placenta. Seizures due to other causes are excluded. Pre-eclampsia and postpartum eclampsia are excluded.

4) Molar pregnancy

Complete Hydatidiform mole is a form of trophoblastic disease characterized by clusters of hydropic Villi and trophoblastic elements and atypia. The hydatidiform mole must have been diagnosed by a specialist medical practitioner and confirmed with a pathology report. The condition must require a hysterectomy and the same must have been performed.

5) Disseminated Intravascular coagulation

DIC means a life-threatening complication of pregnancy, consisting of a systemic thrombo-hemorrhagic disorder, that is characterised by generalised bleeding and end organ damage.

The diagnosis must be confirmed by a gynaecologist or obstetrician as disseminated intravascular coagulation and supported by laboratory tests showing a combination of significant thrombocytopenia, pro-coagulant activation, fibrinolytic activation and inhibitor consumption. The benefit is payable only if the above condition requires treatment with frozen plasma and platelet concentrates.

6) Postpartum Haemorrhage requiring Hysterectomy

Postpartum Haemorrhage requiring Hysterectomy is the ongoing bleeding secondary to an unresponsive and atonic uterus, a ruptured uterus, or a large cervical laceration extending into the uterus requiring surgical intervention in the form of a urgent hysterectomy and a direct result of post-partum bleeding or damage to the cervix or uterus that cannot be arrested by other means Confirmation of undergoing hysterectomy is required.

7) Placenta Increta / Percreta

Placenta Increta / Percreta refers to the abnormal adherent of the placenta to the myometrium resulting in severe haemorrhage requiring surgical removal of the placenta. The diagnosis of placenta increta or placenta percreta must be established via histological evidence and confirmed by a specialist medical practitioner. Placenta accreta is specifically excluded.

8) HELLP syndrome

HELLP Syndrome is a severe complication of a pregnancy as diagnosed by an obstetrician with evidence of Haemolysis, Elevated Liver enzymes and Low Platelets, which results in foetal death.

9) Choriocarcinoma

Choriocarcinoma means a highly malignant neoplasm derived from placental syncytial trophoblasts which form irregular sheets and cords, with neoplastic cells invading blood vessels. This diagnosis must be supported by histological evidence of malignancy and confirmed by an oncologist or pathologist.

Maternity and Child Care - Congenital illness or New-born Complications:

10) Down's syndrome

Live birth of a baby with Down's syndrome (trisomy 21) as diagnosed by a specialist medical practitioner and proven on chromosomal analysis.

11) Spina bifida

Spina Bifida is a neural tube defect where there is failure of the spine to close properly during pregnancy. There must be a resultant meningocele or meningocele. The spina bifida must also have required corrective surgery. Spina bifida occulta is specifically excluded.

12) Oesophageal atresia and tracheoesophageal Fistula

Tracheo-Esophageal Fistula or Esophageal Atresia refers to Congenital esophageal atresia (EA) represents a failure of the esophagus to develop as a continuous passage.

Instead, it ends as a blind pouch. Tracheo-esophageal fistula (TEF) represents an abnormal opening between the trachea and esophagus. EA and TEF can occur separately or together.

13) Anal atresia

Anal Atresia is an anatomical malformation involving the absence of the anus or the absence of the canal between the rectum and anus. The diagnosis must be made by a specialist medical practitioner and surgery must have been performed to correct the abnormality.

14) Club palate

Cleft Palate/Cleft Lip and Palate is the diagnosis of Cleft Palate and/or Cleft Lip by a specialist medical practitioner. Surgery must have been performed to correct the abnormality.

Payment will be made for cases with cleft palate, or cleft lip and cleft palate. Cleft lip in isolation is specifically excluded.

15) Club feet

Club Feet (Talipes equinovarus) is a congenital abnormality of the lower extremity which consists of plantar flexion, inversion of the heel hindfoot and forefoot and adduction of the forefoot. The benefit will

only be paid if the condition is bilateral.

The diagnosis must be made by a specialist medical practitioner and surgery must have been performed to correct the abnormality. Metatarsus varus or abductus are excluded.

16) Tetralogy of Fallot

Tetralogy of Fallot means an anatomic abnormality with severe or total right ventricular outflow tract obstruction and a ventricular septal defect allowing right ventricular unoxygenated blood to bypass the pulmonary artery and enter the aorta directly. The diagnosis must be confirmed by a cardiologist and supported by an echocardiogram and invasive surgery must have been performed to correct the condition.

17) Transposition of great vessels

"Transposition of the Great Vessels" means complete transposition of the aorta and pulmonary artery such that the right ventricle of the heart pumps blood from the systemic veins into the aorta and the left ventricle pumps blood from the pulmonary veins into the pulmonary artery. The diagnosis must be confirmed by a cardiologist and supported by an echocardiogram, and invasive surgery must have been performed to correct the condition.

18) Patent ductus arteriosus

Patent Ductus Arteriosus refers to the surgical correction for the failure of closure of ductus arteriosus (a foetal vessel connecting the pulmonary artery with the aorta).

The diagnosis must be confirmed by a cardiologist and supported by an echocardiogram and corrective surgery must have been performed to correct the abnormality.

19) Total anomalous pulmonary venous return (TAPVR)

Total anomalous pulmonary venous return is a congenital malformation in which the pulmonary veins do not connect normally to the left atrium, but instead drain abnormally to the right atrium by way of an anomalous connection. Open heart surgery must have taken place to correct the congenital defect.

20) Tricuspid atresia

Tricuspid atresia is a congenital heart condition where there is the absence of any connection between the right atrium and the right ventricle. Open heart surgery must have taken place to correct the congenital defect.

21) Atrial Septal Defect

Atrial Septal Defect means a hole in the partition (septum) between the left and right atrium (upper chambers) of the heart permitting abnormal circulation from the left side of the heart to the right side. The diagnosis must be confirmed by a cardiologist and supported by an echocardiogram and corrective surgery must have been performed to correct the condition.

22) Ventricular Septal Defect

Ventricular Septal Defect" is a hole in the partition (septum) between the left and right ventricle (lower chambers) of the heart permitting the abnormal circulation from the left side of the heart to the right side.

The diagnosis must be confirmed by a cardiologist and supported by an echocardiogram and corrective surgery must have been performed to correct the condition.

Additional supporting definitions:

- **Medical Practitioner**

Medical Practitioner means a person who holds a valid registration from the medical council of any State of India or Medical Council of India or any other such body or Council for Indian Medicine or for homeopathy set up by the Government of India or by a State Government and is thereby entitled to practice medicine within its jurisdiction and is acting within the scope and jurisdiction of his license, provided such Medical Practitioner is not the Life Insured covered under this Policy or the Policyholder or is not a spouse, lineal relative of the Life Insured and/or the Policyholder or a Medical Practitioner employed directly by the Policyholder/Life Insured/ ICICI Prudential Life Insurance Company/ shares the same residence as the Life Assured/ is a member of the Insured Person's Family.

- Permanent Neurological Deficit

Permanent neurological deficit with Persisting Clinical Symptoms is defined as signs and symptoms of dysfunction in the nervous system that are present on clinical examination by a Specialist and expected to last throughout the insured person's life. The following neurological symptoms are covered under this definition: numbness, paralysis, localized weakness, dysarthria (difficulty with speech), aphasia (inability to speak), dysphagia (difficulty in swallowing), visual impairment, difficulty in walking, lack of coordination, tremor, seizures, dementia, cognitive impairment, delirium and coma.

An abnormality seen on brain or other scans without definite related clinical symptoms, neurological signs occurring without symptomatic abnormality such as brisk reflexes without other symptoms and symptoms of psychological or psychiatric origin will not qualify as Permanent neurological deficit with Persisting Clinical Symptoms.

You have made the right choice of protecting your family through a life insurance plan. However, it is always prudent to have an extra safety net.

ICICI Pru Linked Accidental Death and Disability Rider is designed to secure the financial needs of your loved ones in case of your unfortunate demise or a disability due to accident or terminal illness. The Rider will have to be attached to your base policy and it will provide additional sum assured to give you that extra comfort of safety.

What makes

ICICI Pru Linked Accidental Death and Disability Rider suitable for you?



Protection against death, disability due to accident or terminal illness



Flexible payment and rider coverage term combinations



Tax benefits may be available on premiums paid and benefits received as per prevailing tax laws



Under Accidental Death Benefit option, Sum Assured is now available upto three times the Sum Assured on Death at inception for the base policy.

Plan at a glance

Premium Payment Option	Premium Payment Term (PPT) (in years)	Min/Max Coverage Term (in years)	Min/Max Age at Entry (in years)	Min/Max Age at Maturity (in years)	Min/Max Sum Assured	Min/Max Annualized Premium
Single Pay	1	5 to 67	18/65	23/85	Min: ₹ 50K Max: As per Board Approved Underwriting Policy, under each benefit option [#]	Corresponding to the minimum/maximum sum assured
Limited Pay	5 to 66	PPT+1 to 67				
Regular Pay	5 to 67	Equal to PPT				

*Applicable Goods and Services Tax will be taken separately, as per applicable rates. The tax laws are subject to amendments from time to time.

The maximum Sum Assured under each benefit option will be as per Board-approved Underwriting Policy (BAUP), but not exceeding the Sum Assured on Death at inception for the base policy for Accidental Total & Permanent Disability benefit option and Term Booster benefit option and not exceeding three times the Sum Assured on Death at inception for the base policy for Accidental Death benefit option.

Premium Payment Frequency: Single Premium, Yearly, Half-Yearly, Monthly (same as chosen under the Base policy).

Please note: The maximum Rider Premium Payment Term under each of the benefit option(s) (Accidental Death , Accidental Total & Permanent Disability and Term Booster) will be equal to the outstanding Premium Payment Term of the Base policy. The maximum permissible Rider Coverage Term will be equal to the outstanding policy term of the base policy. These will be subject to minimum and maximum conditions mentioned in the table above.

“Coverage Term” means the period in complete years (excluding date of maturity) during which risk cover in respect of the chosen Benefit Option is in effect.

Accidental Death and Accidental Total & Permanent Disability benefit option(s) under this rider can be attached to an applicable base policy at the inception of such policy or at any subsequent policy anniversary during the premium payment term of the base policy, subject to the age restrictions mentioned in the table above. Term Booster Benefit option can be attached to an applicable base policy only at inception of such policy, subject to age restrictions mentioned in the table above.

Premium will vary depending upon the Option chosen.

Benefits in detail

This Rider offers three types of Benefit Options as given below

- Accidental Death Benefit ("ADB")
- Accidental Total and Permanent Disability Benefit ("ATPD")
- Term Booster Benefit

Since this is an Accidental Death and Disability Rider, we have defined 'Accident' as sudden, unforeseen, and involuntary event caused by external, visible and violent means.

A) Accidental Death Benefit (ADB) option

Under this option, if the person whose life is covered by this benefit option (known as the Life Assured) passes away, due to an accidental death which happens within the Coverage term such that death happens 180 days from the date of accident, the sum assured for ADB will be paid out as a lump sum to the person specified (known as the Claimant) in the policy, provided the benefit option is in-force as on the date of the accident. Sum Assured available under Accidental Death Benefit option will be up to three times the Sum Assured on Death at inception for the base policy.

If Accidental Death occurs beyond the Coverage Term, this sum assured will be paid provided the accidental death occurs within 180 days from the date of accident. This is applicable subject to Accident occurring within the Coverage Term and the Benefit Option being in-force as on the date of the accident.

On payment of the Accidental Death Benefit to the Claimant, the cover under this benefit option will terminate and all rights, benefits and interests under the option will stand extinguished.

In the event of an accident on the date of maturity resulting in the death of the Life Assured, Sum Assured for ADB shall not be payable

Illustration:

The below table shows sample annualized premiums for the Accidental Death Benefit Option at different premium payment terms and rider terms for a sum assured of ₹ 10 Lacs.

Premium Payment Term (A)	RiderTerm (B)	Annualized Premium (C)	Total Premiums Paid (AXC)
5 years	10 years	940	4,700
6 years	12 years	988	5,928
10 years	12 years	684	6,840
12 years	20 years	923	11,076
20 years	20 years	600	12,000

GST applicable on premium will be charged extra as per prevailing tax laws.

Annualized Premium is the premium amount payable in a year chosen by policyholder, excluding the taxes, underwriting extra premium and loadings for modal premium, if any.

Total Premiums Paid means the total of all the premium received, excluding any extra premium and taxes.

B) Accidental Total and Permanent Disability (ATPD) Benefit option

Under this option, if the person whose life is covered by this benefit option (known as the Life Assured) gets totally, continuously and permanently disabled, due to an accident which happens within the Coverage term of this benefit option such that the disability occurs within 180 days from the date of accident, the Sum Assured for ATPD will be paid out as a lump sum to the person specified (known as Claimant) in the policy.

If Accidental Total and Permanent Disability occurs beyond the Coverage Term, this sum assured will be paid provided the disability occurs within 180 days from the date of accident. This is applicable subject to Accident occurring within the Coverage Term and the Benefit Option being in-force as on the date of the accident.

Accidental Total and Permanent Disability Benefit is payable to the Claimant if the Accidental Total and Permanent disability meets any of the 3 conditions mentioned below.

The disabilities as stated in these Conditions must have continuously lasted, without interruption for at least 180 days and must in the opinion of a Medical Practitioner, be deemed permanent. These disabilities as stated above must also be verified by a Medical Practitioner appointed by the Company. However, for the disabilities mentioned in Condition 1 under sub points j to n (i.e., physical severance), such 180 days period would not be applicable.

In the event of an accident on the Date of Maturity resulting in a total and permanent disability of the life assured, Sum Assured for ATPD shall not be payable.

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 its scope and jurisdiction of license. The Medical Practitioner should neither be the insured person(s) himself nor related to the insured person(s) by blood or marriage, nor share the same residence as the Insured Person.

Condition 1:

The Life Assured suffers the following disabilities due to an Injury/Accident due to which there is total and irrecoverable disability:

- a. Loss of Use of at least two limbs
- b. Loss of Sight of both eyes

- c. Loss of hearing and loss of speech
- d. Loss of Use of four fingers and Thumb of both hands
- e. Loss of Use of one limb and sight of one eye
- f. Loss of Use of one limb and hearing
- g. Loss of Use of one limb and speech
- h. Loss of sight of one eye and speech
- i. Loss of sight of one eye and hearing
- j. Loss by severance of two or more limbs at or above wrists or ankles
- k. Loss by severance of four Fingers and Thumb of both hands
- l. Loss by severance of one limb and sight of one eye
- m. Loss by severance of one limb and hearing
- n. Loss by severance of one limb and speech

Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

Or,

Condition 2:

The Life Assured must be totally incapable of being employed or engaged in any work or any occupation whatsoever for remuneration or profit.

Or,

Condition 3:

The Life Assured must be unable to perform (whether aided or unaided) at least 3 of the following 6 "Activities of Daily Work":

- a. Mobility: The ability to walk a distance of 200 meters on flat ground.
- b. Bending: The ability to bend or kneel to touch the floor and straighten up again and the ability to get into a standard saloon car, and out again.
- c. Climbing: The ability to climb up a flight of 12 stairs and down again, using the handrail if needed.
- d. Lifting: The ability to pick up an object weighing 2kg at table height and hold for 60 seconds before replacing the object on the table.
- e. Writing: The manual dexterity to write legibly using a pen or pencil, or type using a desktop personal computer keyboard.

- f. Blindness: permanent and irreversible – Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

The loss of sight, loss of hearing and loss of speech are defined as follows:

1. Loss of Sight:

- a. Total, permanent and irreversible loss of all vision in at least one eye as a result of an Accident.
- b. The Blindness is evidenced by:
 - i. Corrected visual acuity being 3/60 or less in at least one eye or;
 - ii. The field of vision being less than 10 degrees in at least one eye.
- c. The diagnosis of blindness must be confirmed and must not be correctable by aids or surgical procedure.

2. Loss of Hearing:

Total and irreversible loss of hearing in both ears as a result of an Accident. This diagnosis must be supported by pure tone audiogram test and certified by an Ear, Nose and Throat (ENT) specialist. Total means “the loss of hearing to the extent that the loss is greater than 90 decibels across all frequencies of hearing” in both ears.

3. Loss of Speech:

Total and irrecoverable loss of the ability to speak as a result of injury to the vocal cords due to an Accident. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, Throat (ENT) specialist. The respective benefit options will terminate on payment of ADB or ATPD Sum Assured, as applicable.

On payment of the Accidental Disability Benefit to the Claimant, the cover under for ATPD benefit will terminate and all rights, benefits and interests under the option will stand extinguished.

Illustration:

The below table shows sample annualized premiums for the Accidental Total and Permanent Disability Benefit Option at different premium payment terms and rider terms for a sum assured of ₹ 10 Lacs.

Premium Payment Term (A)	Rider Term (B)	Annualized Premium (C)	Total Premiums Paid (AXC)
5 years	10 years	724	3,620
6 years	12 years	759	4,554
10 years	12 years	525	5,250
12 years	20 years	705	8,460
20 years	20 years	460	9,200

GST applicable on premium will be charged extra as per prevailing tax laws.

Annualized Premium is the premium amount payable in a year chosen by policyholder, excluding the taxes, underwriting extra premium and loadings for modal premium, if any.

Total Premiums Paid means the total of all the premium received, excluding any extra premium and taxes.

C) Term Booster Benefit option

Under this option, if the person whose life is covered by this benefit option (known as the Life Assured) is diagnosed with terminal illness or dies whichever is earlier, within the Coverage Term, then Sum Assured for Term Booster Benefit option will be payable to the Claimant in lump sum provided this benefit option is in-force as on the date of death or terminal illness whichever is earlier.

ii. A life Assured shall be regarded as terminally ill only if that life assured is diagnosed as suffering from a condition which, in the opinion of two independent medical practitioners specializing in treatment of such illness, is highly likely to lead to death within 6 months. The Terminal Illness must be diagnosed and confirmed by Medical Practitioners registered with the Indian Medical Association and approved by the Company. The Company reserves the right to an independent assessment.

iii. On payment of this Term Booster Benefit to the claimant, the cover for Term Booster will terminate and all rights, benefits and interests under this benefit option will stand extinguished.

iv. In the event of death of the Life Assured or if the Life Assured is diagnosed with a Terminal Illness on the date of maturity then the Sum Assured for Term Booster Benefit shall not be payable.

Illustration:

The below table shows sample annualized premiums for the Term Booster Benefit Option at different premium payment terms and rider terms for a sum assured of ₹ 10 Lacs at age 35 for a male.

Premium Payment Term (A)	Rider Term (B)	Annualized Premium (C)	Total Premiums Paid (AXC)
5 years	10 years	1,990	9,950
6 years	12 years	2,023	12,138
10 years	12 years	1,308	13,080
12 years	20 years	1,980	23,760
20 years	20 years	1,367	27,340

GST applicable on premium will be charged extra as per prevailing tax laws.

Annualized Premium is the premium amount payable in a year chosen by policyholder, excluding the taxes, underwriting extra premium and loadings for modal premium, if any.

Total Premiums Paid means the total of all the premium received, excluding any extra premium and taxes.

D. If this rider is opted by you with a combination of more than one benefit option then the continuation of the benefit option/ rider shall be in the following manner:

- i. If this rider has been chosen by you with ADB and ATPD Benefit option only then:
 - a. Upon acceptance of a valid claim under ADB Benefit Option and on payment of the ADB Sum Assured, then the Cover for both ADB and ATPD Benefit Option shall terminate with all rights and benefits there under and the Rider shall cease to exist; and
 - b. Upon acceptance of a valid claim under ATPD benefit option and on payment of ATPD Sum Assured then only the ATPD Benefit shall terminate with all rights and benefits thereunder and the cover for ADB Benefit shall continue with future premiums (if due) payable.
- ii .If this Rider has been chosen by you with ADB and Term Booster Benefit option then:
 - a . Upon acceptance of a valid claim under ADB Benefit Option and Term Booster (on account of accidental death of the Life Assured) and on payment of ADB Sum Assured and Term Booster Sum Assured, then the Cover ADB and Term Booster Benefit shall terminate with all rights and benefits there under and the rider shall cease to exist.
 - b. Upon acceptance of a valid claim under Term Booster Benefit on account of Terminal Illness and on payment of Term Booster Sum Assured then Term Booster Benefit shall terminate with all rights and benefits thereunder. The rider shall continue only for ADB Benefit option and future premiums due (if any) shall be payable.

- c. Upon acceptance of a valid claim under Term Booster on account of Death other than Accidental Death and on payment of Term Booster sum assured, then cover for Term Booster and ADB shall terminate with all rights and benefits thereunder.
- iii. If this rider has been chosen by you with ATPD and Term Booster Benefit option then:
 - a. Upon acceptance of valid claim under ATPD Benefit and on payment of ATPD Sum Assured, then cover for ATPD shall terminate with all rights and benefits thereunder. The Rider shall continue only for Term Booster benefit option with future premiums due (if any) shall be payable.
 - b. Upon acceptance of a valid claim under Term Booster on account of terminal Illness and on payment of Term Booster sum assured then the Term Booster Benefit shall terminate with all rights and benefits thereunder. The rider shall continue only for ATPD Benefit option and future premiums due (if any) shall be payable; and
 - c. Upon acceptance of a valid claim under Term Booster on account of Death and on payment of Term Booster sum assured, then cover for Term Booster and ATPD shall terminate with all rights and benefits thereunder and the rider shall cease to exist.
- iv. If this rider has been chosen by you with all 3 benefit options i.e ADB, ATPD and Term Booster Benefit options then:
 - a. Coverage for ADB, ATPD and Term Booster Benefit options (chosen in any combination) will terminate on death of life Assured, irrespective of the cause of death. Claim on ADB and Term Booster Benefit options will be admissible provided it meets the respective terms and conditions as applicable for each of the option as mentioned above. The ATPD benefit option, if inforce, will terminate without any benefit payout.
 - b. Upon acceptance of a valid claim under ATPD Benefit and on payment of the ATPD Sum Assured to the claimant, then the Cover for ATPD Benefit shall terminate with all rights and benefits thereunder. The rider shall continue only for ADB and Term Booster Benefit options and future premiums for the same (if any) shall be payable; and
 - c. Upon acceptance of a valid claim under Term Booster on account of Terminal Illness and on payment of Term Booster Sum Assured then the Cover for Term Booster Benefit shall terminate with all rights and benefits thereunder. The rider shall continue only for ATPD and ADB Benefit option and future premiums due (if any) shall be payable.

Policy loan

Loan facility is not available under this Rider.

What happens if you stop paying your premiums?

At any stage if you stop paying premiums under the Benefit Option(s) along with the base policy, the Benefit Option(s) will lapse on expiry of grace period (as defined below in Clause 3 under Terms and Conditions). If you do not revive the lapsed Benefit Option(s) along with the base policy by the end of revival period (defined below under 'Revival'), it will terminate after payment of the Unexpired Risk Premium Value, as defined in the Clause below. The Unexpired Risk Premium Value will be paid for the Benefit Option(s) on earlier of:

- Death of the Life Assured within the revival period, or
- At the end of the revival period
- Date of maturity

On revival of any benefit option(s) along with the base policy, the sum assured under the benefit option(s) will be restored to the initial sum assured, provided the request for revival is received with the Coverage Term of the Benefit Option(s).

Unexpired Risk Premium Value

If you surrender the base policy along with the Benefit Option(s) or if you surrender the Benefit Option(s) only by itself, you will receive 'Unexpired Risk Premium Value'.

Unexpired risk premium value for the rider will be calculated as below:

For Single Premium:

Unexpired risk premium value = $25\% \times [1 - (\text{Policy month of surrender} - 1) / (\text{Total Coverage Term} \times 12)] \times \text{Single Premium}$

You will be eligible for unexpired risk premium value post payment of single premium.

For Limited Premium:

Unexpired risk premium value = $25\% \times [\text{Number of months for which premiums are paid} / (\text{Premium Payment Term} \times 12)] \times [1 - (\text{Policy month of surrender} - 1) / (\text{Total Coverage Term} \times 12)] \times \text{Total Premiums paid}$

You will be eligible for unexpired risk premium value post payment of first two full years' premium.

For Regular Premium:

No unexpired risk premium value is payable.

Revival

You can revive the Benefit Option(s) along with the base policy for their full value subject to underwriting and the following conditions:

- Where the request for revival has been received for the Benefit Option(s) along with the base policy
- The revival period applicable for Benefit Option(s) will be same as the revival period applicable to the base policy from the due date of the first unpaid premium and before the termination date of the Benefit Option(s). Revival will be based on the prevailing Board Approved Underwriting Policy.
- The Policyholder furnishes, at his/her own expense, satisfactory evidence of health of the Life Assured if required by the prevailing Board Approved Underwriting Policy.
- The arrears of premiums together with interest at such rate as the Company may charge for late payment of premiums are paid. Revival interest rate will be same as applicable for revival of base policy.

The revival of the Benefit Option(s) may be on terms different from those applicable to the Benefit Option(s) before premiums were discontinued; for example, extra mortality/morbidity premiums or charges may be applicable. The revival will take effect only if it is specifically communicated by the Company to the Policyholder. The Company reserves the right to refuse to revive the Benefit Option(s). Any change in revival conditions will be disclosed to policyholders.

What are the exclusions?

A) The following exclusions shall apply for the Accidental Disability Cover:

1. Disability arising out of a Pre-existing Diseases or any complication arising therefrom.

Pre-existing Disease means any condition, ailment, injury or disease:

- a) That is/are diagnosed by a physician not more than 36 months prior to the date of commencement of the benefit option issued by the insurer or its reinstatement; or
- b) For which medical advice or treatment was recommended by, or received from, a Physician not more than 36 months Prior to the date of commencement of the benefit option issued or its reinstatement.

Coverage under the policy after the expiry of 36 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by the company.

2. Disability caused due to attempted Suicide, intentional self-inflicted injury or acts of self- destruction.
3. Disability caused due to any congenital external diseases, defects or anomalies or in consequence thereof.
4. Disability caused by or arising from Bacterial / Viral infections (except pyogenic infection which occurs through an Accidental cut or wound).
5. Disability arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air-force operation, civil war, Riot, public defense, rebellion, revolution, insurrection, military or usurped power.
6. Disability caused by treatment directly arising from or consequent upon any Life Assured committing or attempting to commit a breach of law with criminal intent.
7. Disability caused by Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.

8. Disability caused by participation of the Life Assured in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
9. Disability of the Life Assured whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation and is specifically specified in the Policy Schedule.
10. Disability caused by engaging in hazardous sports / pastimes, i.e., taking part in (or practicing for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport.
11. Disability arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.
 - a. 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.
 - b. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disablement or death.
12. Certification by a Medical Practitioner who is either the Insured person(s) himself or related to the insured person(s) by blood or marriage or shares the same residence as the Insured Person.

B) The following exclusions shall apply for the Accidental Death Cover:

1. Death caused due to Suicide or attempted Suicide, intentional self-inflicted injury or acts of self-destruction.
2. Death caused by congenital external diseases, defects or anomalies or in consequence thereof
3. Death arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air-force operation, civil war, Riot, public defense, rebellion, revolution, insurrection, military or usurped power.
4. Death caused by treatment directly arising from or consequent upon any Life Assured committing or attempting to commit a breach of law with criminal intent.

5. Death caused by Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.
 6. Death caused by participation of the Life Assured in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
 7. Death of the Life Assured whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation and is specifically specified in the Policy Schedule.
 8. Death caused by engaging in hazardous sports / pastimes, i.e., taking part in (or practicing for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport.
 9. Death arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.
 - a. 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.
 - b. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disablement or death.
- C) We shall not be liable to pay the Benefit, if Accidental Death or Accidental Total and Permanent Disability of the Life Assured occurs after 180 days from the date of accident.
- D) Under Term Booster Benefit option, the life assured will not be entitled to any claim on account of terminal illness if it is caused directly or indirectly due to or occasioned, accelerated or aggravated by intentional self-inflicted injury or attempted suicide, whether medically sane or insane.

Cancellation of the Rider

The benefit option(s) chosen under the rider shall be terminated by Us on the occurrence of any of the below mentioned conditions:

- (i) When the Base Policy to which the Rider is attached terminates upon payment of death benefit
- (ii) When the Base Policy to which this Rider is attached is cancelled, surrendered or terminated due to any reason whatsoever
- (iii) When the coverage under the Base Policy to which the Rider is attached lapses on account of non-payment of premiums and has not been revived within the Coverage Term under the benefit option.
- (iv) When the Benefit Option(s) in this Rider along with the Base Policy has not been revived within the revival period
- (v) Upon expiry of the Coverage Term for each of Benefit Option(s) chosen i.e. on Date of Maturity of the Benefit Options(s)
- (vi) On cancellation of the Rider by the Company for any reason whatsoever
- (vii) On payment of free look cancellation proceeds

Terms & Conditions

1. **Free look period:** On receipt of the rider policy document, whether received electronically or otherwise, You have an option to review the policy terms and conditions. If You are not satisfied or have any disagreement with the terms and conditions of the Policy or otherwise and have not made any claim, the rider Policy Document needs to be returned to the Company with reasons for cancellation within 30 days from the date of receipt of the Policy Document. We will refund the premium paid after deduction of Stamp duty, proportionate risk premium for the period of cover and the expenses borne by Us on medical tests, if any.
The rider will terminate on payment of this amount and all rights, benefits and interests under this policy will stand extinguished.
The rider can be terminated during the Free look period either on its own or along with its base policy. In case the base policy is cancelled within free-look period, Rider will also be automatically cancelled.
2. **Tax Benefits:** Tax benefits may be available on premiums paid and benefits received as per prevailing tax laws. Goods and Services Tax and Cesses, if any, will be charged extra as per prevailing rates. Tax laws are subject to amendments made thereto from time to time. Please consult your tax advisor for more details.
3. **Grace Period:** If the policyholder is unable to pay an installment premium by the due date, a grace period of 15 days will be given for payment of due installment premium for monthly frequency, and 30 days will be given for payment of due installment premium for any other frequency commencing from the premium due date. The cover continues during the grace period. In case the insured event occurs during this period, We will pay the benefit under the applicable Benefit Option(s) subject to terms and conditions as outlined in "Benefits in Detail" and "What are the exclusions".
4. Sum Assured, premium payment term, and coverage term chosen at inception of Rider cannot be changed. You have the flexibility to change the frequency of premium payment on Rider policy anniversary and subject to the premium payment frequency of the Rider being same as that of the Base policy.
5. **Renewal Premium in Advance:** Collection of renewal Premium in advance shall be allowed within the same financial year for the Premium due in that financial year and advance premium for base policy is also collected for the same duration. Provided, the premium due in one financial year is being collected in advance in earlier financial year maximum period of three months in advance from the due date of the premium. The renewal premium so collected in advance shall only be adjusted on the due date of the premium.

6. In case of any contradiction between the terms and conditions of the Base Policy Document and this Rider Document, then:
 - For the benefits payable under the Rider, the Rider Terms and Conditions shall prevail; and
 - For the benefits payable under the Base Policy, the Base Policy Terms and conditions shall prevail
7. If the Life Assured and Policyholder are different individuals, then in the event of death of the Policyholder and subsequent intimation of the death with the Company, the Rider shall vest on the Life Assured. Thereafter, the Life Assured shall become the Policyholder and will be entitled to all benefits and subject to all liabilities as per the terms and conditions of the rider. The Life Assured cum Policyholder can register due nomination as per Section 39 of the Insurance Act, 1938 as amended from time to time.
8. The Rider is also available for sale through online mode.
9. For monthly and half-yearly modes of premium payments, additional loadings will be applied to the base premium and the extra mortality/morbidity premium. The additional loadings, expressed as a percentage of the annual premium will be as given below.

Mode of Premium Payment	Loading (% of Annual Premium)
Yearly	0.0%
Half-yearly	1.25%
Monthly	2.50%

10. **Suicide:**

For term booster benefit option, in case of death of the life assured whether sane or insane, due to suicide within 12 months:

- i. From the date of commencement of risk of the policy, the claimant shall be entitled to higher of 80% of the total premiums paid towards term booster benefit option till the date of death or surrender value pertaining to term booster benefit option, as available on date of death, provided the policy is in force or
- ii. From the date of revival of the policy the claimant of the life Assured shall be entitled to an amount which is higher of 80% of the total premiums paid towards term booster benefit option till the date of death or the surrender value pertaining to term booster benefit option, as available on the date of death.

On payment of this all rights, benefits and interests under the rider will stand extinguished.

11. **Nomination:** Nomination shall be as per Section 39 of the Insurance Act, 1938 as amended from

- time to time. Details of nomination will be as mentioned for the Base Policy. For more details on this section, please refer to our website.
12. **Assignment:** Assignment shall be as per Section 38 of the Insurance Act, 1938 as amended from time to time. For more details on this section, please refer to our website.
 13. **Section 41:** In accordance with Section 41 of the Insurance Act, 1938 as amended from time to time, no person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
 14. **Section 45:** 1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later. 2) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based. 3) Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer: Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive. 4) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based: Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation. 5) Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the Life Insured was incorrectly stated in the proposal.

In case of fraud or misstatement, the policy shall be cancelled immediately by paying the unexpired risk

premium value, subject to the fraud or misstatement being established by the Company in accordance with Section 45 of the Insurance Act, 1938 as amended from time to time.

15. **Policy Servicing and Grievance Handling Mechanism:** For any clarification or assistance, You may contact Our advisor or call Our customer service representative (between 10.00 a.m. to 7.00 p.m., Monday to Saturday; excluding national holidays) on the numbers mentioned on the reverse of the Policy folder or on Our website: www.iciciprulife.com. For updated contact details, We request You to regularly check Our website. If You do not receive any resolution from Us or if You are not satisfied with Our resolution, You may get in touch with Our designated grievance redressal officer (GRO) at gro@iciciprulife.com or 1800 2660.

Address:

ICICI Prudential Life Insurance Company Limited,
Unit 901A & 901B, 9th Floor, Prism Towers,
Mindspace Link Road, Goregaon West,
Mumbai – 400063 ,Maharashtra.

For more details, please refer to the "Grievance Redressal" section on www.iciciprulife.com. If You do not receive any resolution or if You are not satisfied with the resolution provided by the GRO, You may escalate the matter to Our internal grievance redressal committee at the address mentioned below:

ICICI Prudential Life Insurance Company Limited,
Unit 901A & 901B, 9th Floor, Prism Towers,
Mindspace Link Road, Goregaon West,
Mumbai – 400063 ,Maharashtra.

If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach Policyholders' Protection and Grievance Redressal Department, the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (BIMA BHAROSA SHIKAYAT NIVARAN KENDRA)
155255 (or) 1800 4254 732
Email ID: complaints@irdai.gov.in

Address for communication for complaints by fax/paper:
Policyholders' Protection and Grievance Redressal Department – Grievance Redressal Cell
Insurance Regulatory and Development Authority of India
Survey No. 115/1, Financial District, Nanakramguda, Gachibowli,
Hyderabad, Telangana State – 500032

You can also register your complaint online at bimabharosa.irdai.gov.in.

This is subject to change from time to time. Refer <https://www.iciciprulife.com/services/grievance-redressal.html> for more details

16. For further details, please refer to the policy document.