

**CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LIMITED**Registered Office: 2<sup>nd</sup> Floor, "DARE House", 2, N.S.C. Bose Road, Chennai – 600 001.

Toll free: 1800 208 9100, T: +91 (0) 44 4044 5400, F: +91 (0) 44 4044 5550

E: [customercare@cholams.murugappa.com](mailto:customercare@cholams.murugappa.com); website: [www.cholainsurance.com](http://www.cholainsurance.com)

IRDA Regn. No.123; PAN AABCC6633K CIN U66030TN2001PLC047977

**GROUP DOMESTIC TRAVEL INSURANCE**

CHOTGDP23004V012223

Policy Wordings

**7. COVERAGE - OPTIONAL COVERS**

Notwithstanding anything to the contrary contained in the Policy, In consideration of payment of additional premium, the policy is extended to cover the optional covers listed below upto the Sum Insured's shown within the Policy Schedule/Certificate.

Endorsement no.	Optional Covers (on payment of additional premium)
1	Emergency Medical Expenses – Illness / Disease
2	Emergency Medical Evacuation & Repatriation of Mortal remains
3	Pre existing condition in Life Threatening Situation
4	Personal Accident Covers-Common Carrier
5	Dental Treatment Expenses
6	Daily Allowance in case of Hospitalization
7	Daily Allowance in case of Non - Hospitalization
8	Compassionate Visit
9	Hijack Distress Allowance (Airways)
10	Child Escort
11	Total Loss of checked in Baggage (Airways)
11A	Total Loss of checked in Baggage on Benefit Basis (Airways)
12	Delay of Checked-in Baggage (Airways)
12A	Delay of Checked-in Baggage on Benefit Basis (Airways)
13	Trip Cancellation
13A	Trip Cancellation on Benefit basis
14	Trip Interruption
14A	Trip Interruption on Benefit basis
15	Missed Connection (Airways)
15A	Missed Connection on Benefit basis (Airways)
16	Trip Delay (Airways)
16A	Trip Delay on Benefit basis (Airways)
17	Emergency accommodation due to Trip Delay (Airways)
18	Flight Delay (Airlines)
18A	Flight Delay (Airlines) on Benefit basis
19	Over Booked-Common Carrier (Airways)
19A	Over Booked-Common Carrier on Benefit basis (Airways)
20	Bounced Hotel booking
21	Travel Inconvenience
21	Travel Inconvenience on Benefit basis
22	Travel Service Supplier Insolvency
23	Car Rental Excess Insurance
24	Personal Liability
25	Legal expenses
26	Home Burglary Insurance (Contents)
27	Chola MS Bharat Griha Raksha Policy
28	Financial Emergency Assistance

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28A	Financial Emergency Assistance on Benefit basis
29	Pet Care
30	Sports Equipment cover
31	Adventure Sports
32	Cruise cover
33	Debit / Credit Card – Fraud
34	Loss of Gadgets
35	Alternate Employee/Substitute Employee Expenses
36	Loss of Deposit or Cancellation (Hotel & Airline)
37	Travel Loan Secure
38	Mobility Aids Allowance
39	Travel with Pet cover
40	Missed Departure
40A	Missed Departure on Benefit basis
41	Flight Diversion & Cancellation
41A	Flight Diversion & Cancellation on Benefit basis
42	Baggage Delay in Common carrier
42A	Baggage Delay in Common carrier on Benefit basis
43	Baggage Loss in Common carrier
43A	Baggage Loss in Common carrier on Benefit basis (Airways)
44	Loss of baggage and Personal Belongings
45	Terrorism cover
46	Key Replacement
47	Loss of Documents
48	Change Fee Coverage
49	Cyber Security
50	Identity Theft
51	Carrier Cancellation
51A	Carrier Cancellation on Benefit basis
52	Digital Camera Insurance
53	All Risk Cancellation
54	Automatic Extension for 7 Days

**Endorsement no. 1. EMERGENCY MEDICAL EXPENSES-ILLNESS/DISEASES:****a. Coverage:**

The policy shall reimburse to the insured the Reasonable and Customary Charges for Emergency Medical Expenses incurred in the Republic of India by insured for immediate medical services as an in-patient due to any covered illness or disease contracted by an insured and which does not relate to his / her past medical history up to the maximum Sum Insured and for policy period as stated in the policy schedule. The treatment shall cover the following.

1. In-patient treatment in a local hospital at the place where the Insured is staying at the time of the event;
2. X-ray, diagnostic tests and all reasonable costs towards diagnostic methods and treatment during hospitalisation

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3. Radiotherapy, heat therapy, physiotherapy or photo therapy and other such treatment prescribed by a Medical Practitioner requiring in-patient hospitalisation;
4. If any disease/ illness during the period necessitate curative treatment beyond duration of this insurance, the Company's liability to pay benefits within the scope of this Policy under this cover shall extend automatically for a further period of 7 days insofar as it can be proved that transportation home is not possible. Assistance Service Provider must be notified immediately as soon as it is known that Insured / Insured Person is unfit to return to home town /home. If any new disease / illness/injury is contracted beyond duration of this Policy, treatment for the same will not be covered.

A Deductible as mentioned in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

This benefit is over and above the Base Sum Insured.

**b. Special Exclusions to Emergency Medical Expenses – Illness/Diseases:**

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured/ Insured Person for:

1. Treatment which could be reasonably delayed until Insured/Insured Person's return to his /her place of permanent residence. The question of what can or what cannot be reasonably delayed will be decided jointly by the treating Medical Practitioner and the Company and shall be in accordance with accepted standards of medical care.
2. Charges in excess of reasonable and customary charges incurred for emergency treatment on account of an insured event.
3. Treatment relating to the removal of physical flaws or anomalies (cosmetic treatment or plastic surgery in any form or manner unless medically required as part of treatment for accidents and burns).
4. Expenses incurred in connection with rest or recuperation at a spa, health resort, sanatorium, convalescence home, rehabilitation measures, private duty nursing, respite care, domiciliary care, long-term nursing care, custodial care and treatment related alcoholism and drug dependency
5. Any cost relating to the insured person's pregnancy, childbirth or the consequences of either completed.
6. Any health check-ups or examinations or measures primarily carried out for diagnostic or investigative reasons for any purpose other than treatment related to an Accident
7. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

**Endorsement no. 2 – EMERGENCY MEDICAL EVACUATION & REPATRIATION OF MORTAL REMAINS:****a. Coverage****i. Emergency Medical Evacuation:**

The Policy shall reimburse reasonable transportation charges of the Insured Person during the policy period due to an emergency accident arising out of other than pre-existing diseases and if such transportation has been prescribed by the Medical Practitioner of Assistance Service Provider.

- (a) From a Hospital where the insured was treated to another nearest hospital, provided
  1. such transportation is medically necessary
  2. such medical services provided at a Hospital where the Insured Person is situated are not satisfactory
  3. Our Assistance Company has agreed to the reimbursement of the cost of transportation in advance of the transportation, and has arranged the same.

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(b) From a Hospital where the insured was last treated to the Insured Person's usual place of residence.

**ii. Repatriation of Mortal Remains:**

In the event of accidental death of the Insured/ Insured Person due to an accident, the Company shall reimburse the costs of transporting the mortal remains of the deceased Insured/Insured Person back to his/her usual place of residence within India or the cost of local burial or cremation anywhere in INDIA where the accidental death occurred.

The deductible in respect of this benefit will be applicable for each and every claim separately and shall be of an amount as specified in the Policy Schedule.

This benefit is over and above the Base Sum Insured

**Endorsement no.3 – PRE-EXISTING CONDITION IN LIFE THREATENING SITUATION:**

**a. Coverage**

If the Insured / Insured Person contracts any disease or illness during the Policy period requiring life-saving unforeseen emergency measures for treating such illness or disease and which requires In-Patient treatment at a Hospital in an ICU due to any pre-existing condition, the Company will reimburse the medical expenses incurred for Hospitalization to the Insured/Insured Person. The treatment for these emergency measures would be paid till the Insured/Insured Person becomes medically stable, as ascertained by the treating Medical Practitioner of the hospital. All further medical costs to maintain medically stable state would have to be borne by the Insured/Insured Person;

A Deductible as mentioned in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

This benefit is over and above the Base Sum Insured.

**Endorsement no.4 – PERSONAL ACCIDENT COVERS - COMMON CARRIER (AD & PTD):**

**a. Coverage**

The Policy will pay up to the limit of the Sum Insured for this benefit as specified in the Policy Schedule if accidental injury to the Insured/Insured Person results in loss of life or permanent total disablement while riding as a passenger (but not as a pilot operator or member of the crew) in or on, boarding or alighting from any common carrier provided that, this benefit shall also not apply while the Insured/Insured Person is riding in or on, or boarding or alighting from, any civilian aircraft that does not hold a current /or is piloted by a person who does not hold a current and valid certificate of competency of a rating authorizing him to pilot such aircraft.

**b. Special Exclusions applicable to Personal Accident Covers-Common Carrier (AD&PTD):**

The Company shall not be liable to make any payment under this benefit in respect of the following:

1. Any existing physical disability.
2. Accidents due to sleep disorders, hypnosis, tolerance and / or withdrawal symptoms due to intake of psychoactive drugs, stimulants, sedatives, narcotics, hallucinogens.
3. Damage to health caused by curative measures, radiation, Infection, poisoning except where these arise

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from an accident.

4. Any payment under this benefit whereby the Company's liability would exceed the sum payable in the event of accidental death.
5. Any other claim after a claim for accidental death has been admitted by the Company and becomes payable.
6. Any claim which arises out of an accident connected with the operation of an aircraft (Including Cabin Crew) or which occurs during parachuting except when the Insured/Insured Person is flying as a Fare Paying passenger in a multi-engine, scheduled commercial aircraft or Air Charter company.
7. Payment of compensation in respect of accidental death, injury or disablement of the Insured/Insured Person from;
  - a. intentional self-injury, suicide, or attempted suicide.
  - b. whilst under the influence of intoxication, liquor or drugs.
  - c. arising or resulting from the insured/insured person committing any breach of law with criminal intent or participating in an actual or attempted felony, riot, crime, misdemeanour or civil commotion.
  - d. whilst engaging in speed contest or racing of any kind, hunting, bungee jumping, parasailing, ballooning, skydiving, paragliding, hand gliding, mountaineering or rock climbing, potholing, abseiling, deep sea diving, polo, snow and ice sports, etc. unless specifically covered and duly mentioned in the Policy Schedule.
8. Any consequential loss or damage cost or expense of whatsoever nature.
9. Accidental Death or disablement resulting, directly caused by, contributed to or aggravated or prolonged by childbirth, maternity or pregnancy or in consequence thereof, venereal disease or infirmity.
10. Payment of compensation in respect of accidental death, injury or disablement of the Insured/Insured Person, due to or arising out of or directly connected with or traceable to act of terrorism or terrorist activities.
11. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

**c. Special Conditions applicable to Personal Accident Covers-Common Carrier (AD&PTD):**

1. In the event of partial loss or impairment of the function of one of the above parts of the body or senses, the appropriate proportion of the percentage as stated in the "Table of Benefits" will be considered for payment.
2. If the accident impairs a number of physical or mental functions, the degree of disablement given in the Table of Benefits will be added together, but the amount payable shall not exceed 100% of the Sum Insured as specified in the Policy Schedule.
3. If the accident affects parts of the body or senses whose loss or inability to function is not dealt with above, the governing factor in determining the benefit amount in such a case will be the degree to which the normal physical or mental capabilities are impaired, solely from a medical point of view, as ascertained by a Medical Practitioner or a panel of doctor of the company or Assistance Service Provider.
4. In the event of permanent disablement, the Insured/Insured Person will be under obligation:
  - a. To have himself/herself examined by the Medical Practitioners appointed by the Company/Assistance Service Provider and the Company will pay the costs thereof
  - b. To authorize Medical Practitioner providing treatment or giving expert opinion and any other authority to supply the Company any information that may be required on the condition of the Insured/Insured Person.
5. If the above obligations are not met with due to whatsoever reason, the Company shall be relieved of its liability to compensate under this benefit.