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6. The benefit applicable under this Section shall be in addition to the benefits applicable under optional cover-Personal Accident - Common Carrier for Accidental Death and Permanent Total Disability, if opted.

Endorsement no.5 – DENTAL TREATMENT EXPENSES:

a. Coverage

The Policy shall reimburse to the Insured/Insured Person expenses incurred in respect of acute anesthetic treatment of a natural tooth or teeth during a trip as an Inpatient or as an out-patient arising from an accidental injury, but not exceeding the Sum Insured specified in the Policy Certificate.

b. Specific Exclusions Applicable to Dental Treatment Expenses:

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 reasonably be delayed until the Insured/ Insured Person's return. The question of what can or what cannot be reasonably delayed will be decided jointly by the treating Dentist and the Assistance Service Provider.
- 2. Treatment of orthopaedic, degenerative or oncological diseases,
- 3. Charges in excess of reasonable and customary charges as per the determination by the Assistance Service Provider.
- 4. Cementing or Fixation of tooth or teeth bridge/s.
- 5. Treatment relating to the removal of physical flaws or anomalies (cosmetic treatment or 'plastic' surgery in any form or manner).
- 6. 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, and long-term nursing care, custodial care and treatment related alcoholism and drug dependency.
- 7. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

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.6 – DAILY ALLOWANCE IN CASE OF HOSPITALISATION:

a. Coverage

The Policy will pay a fixed daily allowance upto a maximum no. of days as mentioned in the policy Schedule/Certificate, in the event of hospitalization of the Insured/Insured Person due to an emergency accident or illness arising out of other than pre-exiting diseases beyond a specified number of days as mentioned in the Policy Schedule as deductible, for which a valid claim is admissible under the Policy whilst on a trip.

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.

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b. Special Exclusions applicable to Daily Allowance in case of Hospitalisation:

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:

- 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.7 – DAILY ALLOWANCE IN CASE OF NON-HOSPITALISATION:

a. Coverage

The Policy will pay a fixed allowance upto a maximum no. of days as specified in the Policy Schedule/Certificate, if an insured is treated for any injury / illness on OPD basis and his condition forbids him from travelling back to his original and usual place of residence and is confined to a location as medically suggested by the Medical Practitioner, then the insured will be paid the amount as specified in the policy schedule/certificate per day.

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.

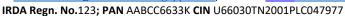
b. Special Exclusions to Daily Allowance in case of Non-Hospitalisation:

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:

- 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. 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).
- 3. Treatment 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
- 4. Any treatment relating to the insured person's pregnancy, childbirth or the consequences of either

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completed.

- 5. 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
- 6. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Endorsement no.8 – COMPASSIONATE VISIT:

a. Coverage

In the event the Insured / Insured Person is hospitalized for more than five (5) consecutive days due to an emergency accident or illness arising out of other than pre-existing diseases for which a valid claim is admissible under Base cover-Emergency Accidental Hospitalization or optional cover, Emergency Medical Expenses – Illness / Disease (if opted) and his/her medical condition forbids repatriation and no adult member of his/her immediate family is present, the Company / Assistance Service Provider, after obtaining confirmation of need for a companion from the attending Medical Practitioner will provide:

- a) a return trip economy class air ticket, or first class railway ticket, to allow one immediate family member, to be at his/ her bedside for the duration of stay in the Hospital; and
- b) expenses towards stay of the immediate family member during such compassionate visit.

The policy will also reimburse the cost of return fare for the insured to visit his/her native place in India, in the unfortunate event of the immediate family member (spouse, dependent children, parents) being hospitalized for more than five (5 consecutive days in India or in the event of death of the immediate family member (spouse, dependent children or parents).

The Company's liability for round trip ticket and the expenses relating to this benefit shall be as per the coverage and the limits of Sum Insured specified in the Policy Schedule/Certificate.

This benefit is over and above the Base Sum Insured.

b. Special Exclusions applicable to Compassionate Visit:

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:

- 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

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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.9 – HIJACK DISTRESS ALLOWANCE (AIRWAYS):

a. Coverage

This Section provides for payment of an allowance in the event of hijack of a common carrier in which the Insured/Insured Person is traveling on a trip covered under this Policy as specified in the Policy Schedule/certificate.

The deductible in respect of this benefit will be applicable for each and every claim separately and shall be of the number of hours the common carrier has been under hijack, as specified in the Policy Schedule/Certificate.

b. Special Exclusions applicable to Hijack Distress Allowance (AIRWAYS):

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

- 1. Any incident where the Insured/Insured Person is suspected to be either principal or an accessory in the hijacking.
- 2. Any claim as a consequence of a change in the regular routes of travel/journey of the common carrier due to traffic, weather, fuel shortage, and technical snag or security reasons.
- 3. Any exclusion mentioned in the 'General Exclusion' section of this Policy.

This benefit is over and above the Base Sum Insured.

Endorsement no.10 – CHILD ESCORT:

a. Coverage

The policy shall reimburse for the travelling expenses of Insured / Insured person's minor children aged below 17 years for return to home town up to the limit of sum Insured as specified in the policy schedule/certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

- If the Insured / Insured person whilst on a Trip in India accompanied with his minor children, dies due to illness or accident covered under the policy.
- Such minor children/s is covered under this travel along with Insured / Insured Person
- Such minor children/s is not accompanied by any other adult family member.

b. Specific Exclusions applicable to Child Escort:

This benefit does not cover any other loss other than those mentioned above under the head "coverage", directly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

This benefit is over and above the Base Sum Insured.

Endorsement no.11 – TOTAL LOSS OF CHECKED-IN BAGGAGE (AIRWAYS):

a. Coverage

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The Policy shall reimburse to the Insured/Insured Person for the total and complete loss of checked-in baggage caused by a Common Carrier (Air) on a trip covered under this Policy, up to the limits specified in the Policy Schedule.

The cover is limited to the travel destinations specified in the main travel ticket from his/her usual place of residence.

In the event of such a total and complete loss of checked-in baggage whilst in the custody of an airline, a Property Irregularity Report (PIR) must be obtained from the airline immediately upon discovery of the loss which must be submitted along with the claim.

This benefit is over and above the Base Sum Insured.

b. Special Exclusions applicable to Total Loss of Checked-in Baggage (Airways):

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

- 1. Valuables and money, all kinds of securities and tickets/passes or any other item(s) not declared to, and agreed to by the Company.
- 2. Loss of property unless a Property Irregularity Report or other report usually issued by common carriers in the event of loss of checked-in baggage has been procured and submitted to the Company.
- 3. Any partial loss of the items contained within the checked-in baggage.
- 4. Items contained within the checked-in baggage, which are valued in excess of INR.5000 without appropriate proof of ownership.
- 5. Losses arising from any delay, detention, confiscation by the customs officials or other public authorities.
- 6. Any exclusion mentioned in the "General Exclusions" section of this Policy.

c. Special Conditions applicable to Total Loss of Checked-in Baggage (Airways):

- The Policy will reimburse the Insured/Insured Person for the market value of the checked-in baggage in the event of total and complete loss of such checked-in baggage caused by a common carrier up to the limits specified in the Policy Schedule/Certificate provided that:
 - a. Maximum amount payable per checked-in baggage, in case more than one bag has been checked-in, is 50% of the applicable Sum Insured. In case of only one bag being checked-in, the amount payable is 100% of the applicable Sum Insured.
 - b. Insured has provided all the documents, reports and other details concerning the loss.
- 2 For the purpose of this benefit, "market value" refers to the sum required to purchase new items of the same kind and quality (which are lost) less an amount representing wear and tear, usage etc., at the time of loss.
- If the Company makes any payment under this benefit, it is a condition that any recovery from any common carrier by the Insured/Insured Person, under the terms of the Convention for the Unification of Certain Rules Relating "Warsaw Convention" shall become the property of the Company.
- The amount payable in respect of any one article, pair or set is limited to the amount as specified in the Policy Schedule/Certificate.
- No partial loss or damage shall become payable. However, total loss of individual unit(s) of baggage shall not be construed as falling within this Special Condition.
- In the event that claims are submitted for total loss of checked-in baggage as well as under the optional covers, Delay of Checked-in Baggage (Airways), Baggage Delay in Common carrier, Baggage Loss in Common carrier (if opted), the higher of the claims shall be payable by the Company in respect of the same item(s) of checked-in baggage during any one period of insurance.