1. **Brief Description:**

Scope of Cover:

Secure Mind in the age group of 20-50 years

**Coverage for Group Secure mind:**

1. Death / Permanent total disability due to accident within the policy period
2. First Diagnosis/Occurrence of Major medical illness / events and Procedures
3. Loss of job cover

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| --- | --- | --- |
| GROUP SECURE MIND | | |
| **Age Group** | **Coverage** | **SI Basis** |
| 20 - 50 Years | Benefit A: Major Medical illness & Procedure | Fixed(Sum Insured) |
| Benefit B: Personal Accident |
| 20-50 Years | Benefit C : Loss of job cover | Maximum of 3 EMIs |

1. **Product Contours:**

* + 1. **Major medical illness:** The Company will pay the Sum Insured if during the Policy Period the Insured is found to have a major medical illness, medical event or undergo surgical procedure as specifically defined below whose signs or symptoms first commence more than 90 days after the commencement of period of insurance

**a. First diagnosis of below mentioned illness**

* + - * Cancer of specified severity
      * Kidney failure requiring regular dialysis
      * Multiple Sclerosis with persistent symptoms
      * Benign Brain tumor
      * Parkinson’s disease before the age of 50 years
      * Alzheimer’s disease before the age of 50 years
      * End stage liver disease

**b**. **Undergoing for the first time of following surgical procedures**

* + - * major organ/ bone marrow transplant
      * open heart replacement or repair of heart valves
      * open chest CABG
      * Surgery of aorta

**c**. **Occurrence for the first time of following medical events**

* + - * Stroke resulting in permanent symptoms
      * Permanent Paralysis of limbs
      * First Heart Attack of specified severity
      * Major burns
      * Loss of speech
      * Deafness
      * Coma of specified severity
    1. **Death Due to an Accident:**

The Death of the Insured Person is within a period of twelve months from the date of bodily injury (caused within the period of insurance), and such bodily injury is the sole and direct cause of the death of the Insured Person

* + 1. **Permanent Total Disability due to an Accident:**

Covers bodily injury (caused within the period of insurance) resulting solely and directly from accident, caused by external, violent and visible means If such injury shall within twelve months of its occurrence be the sole and direct cause of the total and irrecoverable loss of Sight of both eyes, or of the actual loss by physical separation of two entire hands or two entire feet, or one entire hand and one entire foot, or loss of use of both hands and both feet or of one hand and one foot without physical separation.

iii. Loss of job

Insured event in relation to any insured shall mean termination from employment of the insured or his dismissal, temporary suspension or retrenchment from employment imposed on him by the employer during the period of insurance as per the employers rules and regulations or executed/implemented by the employer in compliance of any law for the time being in force or any directives by any public authority.

1. **General Exclusions:**

1. From intentional self-injury, suicide or attempted suicide
2. Whilst under the influence of intoxicating liquor or drugs
3. Directly or indirectly caused by venereal disease or AIDS or AIDS related complex syndrome(ARCS)
4. Directly or indirectly caused by contributed to or aggravated or prolonged by childbirth or pregnancy or in consequence thereof.Due to or arising out of any act of invasion, war, act of foreign enemy, hostilities ,rebellion, revolution, seizure, capture, arrests, restraints and detainments, and all kinds of terrorism
5. Directly or indirectly caused by or contributed to by or arising from ionizing radiation or contamination from radioactivity from any nuclear fuel or nuclear waste.
6. Directly or indirectly caused by or contributed to by or arising from nuclear weapon materials
7. Arising out of or resulting directly or indirectly while serving in any branch of military or armed forces of any country during war or war like.
8. Any injury, sickness or disease for which medical care, treatment, or advice was recommended by or received from a Doctor or from which the Insured Person suffered or which was present before the commencement of the Period of Insurance.

**4. Product exclusions:**

* + 1. **Major medical illness**:

1. In connection with any pre-existing condition which would establish that the Insured Person contracted any of the major medical illness or has been diagnosed to have contracted or has shown symptoms whether or not he had knowledge of symptoms of having contracted any of the major medical illness at any time before commencement of the Insurance granted under this policy.
2. If the insured does not submit a medical certificate from the doctor evidencing diagnosis of illness or injury or occurrence of medical event or undergoing of the medical procedure.
3. Any of the major medical illness being diagnosed to have been contracted within the first three months of the inception of the policy.
4. Any congenital illness or condition

ii**. Death/ permanent total disability due to accident**

a) Mounting into, dismounting from or traveling in any aircraft other than as a fare paying passenger on a scheduled flight

b) The company will not be liable to pay under more than one category specified (death or permanent total disability)

c) payment of compensation with respect to death or disability arising out of engaging in or participating in adventure sports including but not limited to winter sports, parachuting/ skydiving, bungee jumping, scuba diving, hand gliding etc

iii**. Loss of job**

a) the company is not liable to pay for termination, temporary suspension, retrenchment from employment being attributed to any dishonesty, fraud or poor performance, violation of employers rules

b) the company is not liable to pay in connection with self employed persons, any job which is temporary , seasonal , casual or contractual in nature, any job which is voluntary in nature.

c) the company shall not be liable to pay for any unemployment at the time of inception of period of insurance or arising within first 90 days of inception of period of insurance.

**The general and product exclusion specified are only an indicative list, for complete list refer to policy wordings**

1. **Expiry of the policy:**

The policy expires on occurrence of any of the following

* + 1. Payment of claim under any of the covers (Critical Illness, Accidental Death and Permanent Total Disability) provided to the insured.
    2. In case of fraud, misrepresentation.

1. **Claims Registration Address:**

The completed claim form along with all the required documents have to be sent to below address:

ICICI Lombard General Insurance Company Limited ,ICICI Lombard Health Care, ICICI Bank Tower, Plot No. 12 Financial District, Nanakram Guda, Gachibowli, Hyderabad, Andhra Pradesh, Pin Code: 500032, India

Customer can register claims on the toll free no – 1800-2666 or can mail the details to [customersupport@icicilombard.com](mailto:customersupport@icicilombard.com).

1. **Common list of documents for all Critical Illness:**

1. Certificate from the attending Doctor of the Insured confirming, inter alia,

a. Name of the Insured;

b. Name, date of occurrence and medical details of the Insured Event

c. Confirmation that the Insured Event does not relate to any Pre-Existing Disease or any Illness or Injury which existed within the first 3 months of commencement of Period of Insurance.

2. Certificate, if applicable, from the Bank/Financial Institution stating the amortization schedule, the EMI Amounts, Principal Outstanding, etc.

3. Duly completed claim forms;

4. Original Discharge Certificate/ Card from the hospital/ Doctor;

5. Original investigation test reports, indoor case papers.;

6. Photo ID Proof of proposer/ nominee

7. Address Proof of proposer/ nominee

8. 2 recent coloured passport size photographs of proposer/ nominee

9. Signed NEFT mandate along cancelled cheque copy of proposer/ nominee

10. Policy copy

11. Any other documents as may be required by the Company.

1. **Personal Accident – Death**

1. Duly completed Claim form

2. FIR

3. Panchanama/ Inquest Panchnama

5. Police Final Report/Charge Sheet (Based on FIR)

6. PM Report having remark for FSLR or CA Report, the reports are must

7. Death Certificate issued by the Municipal authority/ Cause of death certificate issued by the hospital

8. Original Policy Certificate

9. Age proof of Insured: Election ID Card / PAN Card/ School Leaving Certificate / Copy of

passport

10. Doctors Report

11. Certificate, if applicable, from the Bank/Financial Institution stating the amortization

schedule, the EMI Amount, Principal Outstanding, etc.

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13. RACT award (In case of Rail Accident)

14. Any other document as required by the Company

1. **Permanent Total Disability**

1. Claim form

2. FIR

3. Panchanama

4. Disability Certificate from civil surgeon or from designated govt./competent authority

5. Hospitalization reports

6. Hospitalization discharge card

7. RACT award (In case of Rail Accident)

8. Police Final Report/Charge Sheet (Based on FIR)

9. Investigation report

10. Policy Certificate

11. Age proof of Insured: Election ID Card / PAN Card/ School Leaving Certificate / Copy of passport

12. Any other document as required by the Company /TPA to investigate the Claim

10. **Loss of job**

1. Claim form

2. Certificate from bank stating amortization schedule, EMI amounts, principal outstanding

3. Certificate from employer confirming termination, dismissal, temporary suspension, retrenchment from employment stating the date and reason for the same

4. Appointment letter

5. Last 3 month salary slips

6. Form 16

7. Contact details of employer

8. Photocopy of the policy

9. Age proof of insured: election ID/PAN card

10. Certificate/ copy of passport

11. Any other relevant document as required.

**Group Personal Accident – add on**

**i. Death Due to an Accident:**

The Death of the Insured Person is within a period of twelve months from the date of bodily injury (caused within the period of insurance), and such bodily injury is the sole and direct cause of the death of the Insured Person

ii. **Accidental Daily Cash Allowance:**

By way of this add-on, the Company will pay the Insured an amount specifically mentioned in the Schedule for each and every completed day of hospitalization on account of Accidental injury as mentioned in policy schedule

iii. **Accidental Hospitalization Expenses:**

This add-on provides coverage for the medical expenses incurred by the insured during hospitalization as an inpatient for more than 24 consecutive hours as a result of an accident as per the SI mentioned in the policy schedule

* 1. **Product Exclusions:**
     1. Death due to an Accident

1. From intentional self-injury, suicide or attempted suicide
2. Whilst under the influence of intoxicating liquor or drugs
3. Directly or indirectly caused by venereal disease or AIDS
4. Directly or indirectly caused by contributed to or aggravated or prolonged by childbirth or pregnancy or in consequence thereof.
5. Mounting into, dismounting from or traveling in any aircraft other than as a fare paying passenger on a scheduled flight
6. Mental disorder or psychosomatic dysfunction
7. Any injury, sickness or disease for which medical care, treatment, or advice was recommended by or received from a Doctor or from which the Insured Person suffered or which was present before the commencement of the Period of Insurance.
8. **Policy parameters:**
   1. Tenure – Upto 1/2/3/4/5 years in case of Group Personal Accident
   2. Maximum age at entry
   * GPA – 65 years
   1. Cover start date: MIS received date or Payment date whichever is later
   2. Premium Computation: The premium for the policy is a function of the applicant’s age and plan chosen.

The age of the applicant will be his completed age as on the date of the Loan Disbursal date

* 1. Policy is based on a one-time premium.

If any declaration of Pre-existing illness is declared by the insured, such proposals will be referred for medical underwriting for acceptance / rejection

**Expiry of the policy**

The policy expires on occurrence of any of the following

* + 1. Payment of claim under any one of the covers (Accidental Death and Permanent Total Disability) provided to the insured.
    2. In case of fraud, misrepresentation.