

CUSTOMER INFORMATION SHEET/ KNOW YOUR POLICY

OneProtect

Instruction to Insured:

1. This document provides key information about your policy. You are advised to go through your policy document and policy schedule
2. As directed by IRDAI (the Authority), insured is required to provide the acknowledgement on receiving the customer information sheet

Sl. No	Title	Description	Policy Clause Number
1	Name of Insurance Product	OneProtect	
2	Policy No	XXXXX	
3	Type of Insurance Product	Both Indemnity and Benefit	
4	Sum Insured Basis	Individual Sum Insured Self - XXXXX Spouse - XXXXX Child 1 - XXXXX Child 2 - XXXXX Child 3 - XXXXX Parent 1 / Parent-in-Law 1 - XXXXX Parent 2 / Parent-in-Law 2 – XXXXX Brother - XXXXX Sister – XXXXX	
5	What am I covered for	Expenses in respect of Accidental Death - 100% of Sum Insured a. Death - Covers death due to accident if the accident is the sole and direct cause of death and occurs within 365 days of the accident date. b. Disappearance - Covers disappearance if the body cannot be located within 365 days after forced landing, stranding, sinking, or wrecking of a conveyance as a passenger or any other acts of God. Accidental Death (Common Carrier) - 200% of Sum Insured or Rs. 10 Crs whichever is lower Accident that occurs during the Policy Period and such Injury solely and directly results in the death of the Insured Person within 365 days from the date of the Accident, where such Death occurs while the Insured Person is a fare paying passenger on a common carrier, Permanent Total Disability - 100% of Sum Insured Covers Total Disability, which is permanent in nature, due to accident if the accident is the sole and direct cause of such Disability and occurs within 365 days of the accident date. Permanent Partial Disability - % of Sum Insured as per table specified in the policy document. Covers Partial Disability, which is permanent in nature, due to accident if the accident is the sole and direct cause of such Disability and occurs within 180 days of the accident date. Ambulance Cost - Upto Rs 25,000 or actuals whichever is lower. Covers Utilization of Ambulance service for transporting insured person to hospital in case of an Accident.	Section 2. Benefits

		<p>Accidental Hospitalization Expenses - Upto 20% of Sum Insured or Rs 5L or actual whichever is lower. Covers 24 hrs Accidental Hospitalisation as an inpatient upto the hospitalisation limit specified in the policy schedule.</p> <p>Funeral Benefits and Repatriation of Remains - 1% of Sum Insured subject to maximum Rs 50,000 Covers the expenses related to Funeral and transportation of mortal remains from place of accident to residence.</p> <p>Hospital Daily Cash - 0.5% of the Sum Insured or maximum Rs 10,000 per day whichever is lower subject to maximum upto 30 days. Provides per day benefit for the period of Hospitalization due to accident upto a maximum of 30 days.</p> <p>Cost Of Crutches/Wheelchair - 5% of Sum Insured or actuals subject to maximum of 1Lakh. Covers the cost of crutches/wheelchair necessitated due the disability caused by the Accidental Dismemberment, Permanent Total Disability or Permanent Partial Disability.</p> <p>Cost of Artificial Limbs - 10% of Sum Insured or actual expenses incurred subject to maximum 1Lakh. Covers the cost of artificial limbs necessitated due the disability caused by the.</p> <p style="text-align: center;">Optional Covers</p> <p>Coma Benefit - 10% of the Sum Insured upto Rs 5Lakh whichever is lower. Covers comatose due to accident if the accident is the sole and direct cause of death and occurs within 30 days of the accident date.</p> <p>Burns - % specified in the policy document subject to maximum Rs 10 Lakh Covers bodily injury which results in burns due to accident, provided Injury to You results in one of the losses shown in the Schedule of Injuries</p> <p>Broken Bones - % specified in the policy document subject to maximum Rs 10 Lakh Covers bodily injury which results in Broken Bones due to accident, provided Injury to You results in one of the losses shown in the Schedule of Injuries</p> <p>Temporary Total Disablement - 1% of Sum Insured or Rs 50,000 per week or actuals whichever is lower upto 104 weeks. A Weekly Allowance would be paid to the Insured to compensate loss of salary due to a disability caused by accident.</p> <p>Accidental Hospitalization Expenses (Medex - Global) - Upto 30% of Sum Insured or Rs 10Lakh or actual whichever is lower. On availing this option, We will pay Medical Expenses under Accidental Hospitalization Expenses (Medex) section, incurred anywhere in world.</p> <p>Accident Insurance Renewal Premium – For Sum Insured Rs 5Lakh. In the event, Claim for Insured Policy Holder becomes admissible under Accidental Death Cover, We will pay the amount equivalent to the Renewal premium of the Coverage for all other Insured Person covered in the same policy as mentioned in the Policy Schedule.</p> <p>Chauffeur Benefit - Upto 1% of Sum Insured or Rs 5,000 per day whichever is lower upto 10 days. If Insured Person sustains Injury during the Policy Period which results in Temporary Total Disablement, We will indemnify the Insured Person</p>	
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	<p>towards daily cost of hire of a transportation or hire a driver to maintain the mobility of Insured Person.</p> <p>Parental Care Benefit - 10% of Sum Insured or subject to maximum Rs10Lakh per policy for maximum 2 parents whichever is lower. If a claim is accepted under AD, we will pay Lumpsum benefit for dependent parents.</p> <p>Purchase of Blood - Actuals or maximum Rs 5,000 whichever is lower. If We have accepted a valid claim under AD, PTD, PPD or TTD, We will reimburse expenses incurred in purchasing blood through a Hospital or lawful blood bank for the required medical or surgical treatment of the Insured Person following an Accident.</p> <p>Family Transportation - Actuals or maximum Rs 50,000 whichever is lower. If a claim under AD or PTD is accepted, We will reimburse expenses incurred in transporting one Immediate Family Member to the Hospital.</p> <p>Modification of Residence/Vehicle - Actuals or maximum Rs2.5 Lakh whichever is lower. If We have accepted a claim under PTD, reasonable expenses incurred to modify the Insured Person's residential accommodation or the Insured Person's vehicle will be covered.</p> <p>Adventure Sports - 100% Sum Insured. Benefit in case of Accidental death sustained during the policy period whilst the Insured is engaged in adventure sports in a non-professional capacity and under the supervision of a trained professional upto sum insured as defined in policy schedule.</p> <p>Adventure Sports - 100% Sum Insured. Benefit in case of Accidental Death and Permanent Total Disability sustained during the policy period whilst the Insured is engaged in adventure sports in a non-professional capacity and under the supervision of a trained professional upto sum insured as defined in policy schedule.</p> <p>Emergency Air Ambulance Charges - Actuals or maximum Rs 5 Lakh whichever is lower. Expenses incurred on transportation of airplane or helicopter Insured Person to a Hospital for treatment in case of an Emergency due to accident</p> <p>Transportation of Imported Medicine - Actuals or max Rs. 20000 whichever is lower. If We have accepted a valid claim under AD, PTD, PPD or TTD, We will reimburse expenses incurred on freight charges for importing medicines to India, provided that such medicines are not available in the India and medically necessary.</p> <p>Marriage fund for Children -10% of the Sum Insured subject to maximum Rs10 Lakh per policy whichever is lower. If We have accepted a claim under Accidental Death or Permanent Total Disability (PTD), then We will in addition pay the Sum Insured towards the marriage expenses for unmarried Dependent Children</p> <p>Convalescence Benefit - Lumpsum payment of Rs.50,000 if inpatient hospitalisation for accidental injuries exceeds 30 days; Rs1Lakh for 45 days & Rs2Lakh for 60 days Lumpsum benefit provided once for each Policy year during Policy Period, in case of Hospitalisation of consecutive days or more.</p> <p>Loss of Income - 0.5% of the Sum Insured or Rs 20,000 or actuals per week whichever is lower maximum upto 52 weeks.If the Insured Person</p>	
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		<p>Enhanced Temporary Total Disablement - 1% of Sum Insured or Rs 1,00,000 per week or actuals whichever is lower upto 104 weeks. A Weekly Allowance would be paid to the Insured to compensate loss of salary due to a disability caused by accident.</p> <p>Enhanced Loss of Income - 0.5% of the Sum Insured or Rs 50,000 or actuals per week whichever is lower maximum upto 52 weeks. If the Insured Person suffers an Injury solely and directly due to an Accident occurring during the Policy Period that disables the Insured Person from engaging in any employment or occupation on a temporary basis and hence loss of income, then We shall pay the weekly amount as specified in the Schedule for the duration that the temporary total disablement continues.</p>	
6	Exclusions	<p>Specific Exclusions</p> <ul style="list-style-type: none"> • Injury or treatment related to addictive conditions and disorders resulting from any kind of substance abuse or misuse including alcohol abuse or misuse. • Participation in Adventure Sports. • Insured person committing any breach of law with criminal intent or participation in any riots, civil commotion, or felony. • Any intentional self-injury, suicide or attempted suicide, insanity, or stress • Congenital Anomaly whether Internal Congenital Anomaly or External Congenital Anomaly, congenital internal or external diseases, defects or in consequence thereof. • Bacterial infections (except pyogenic infection which occurs through a cut or wound due to Accident). • Condition resulting due to any disease or infection unless arising directly and solely due to accident • Any change of profession after inception of policy which results in increase in risk, unless declared by insured person and accepted & endorsed by Us. 	Section 3

		<ul style="list-style-type: none"> • Any change of profession after Inception Date which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Policy Schedule. • Medical or Surgical Procedure except as necessarily required, solely and directly as a result of an Accident • Any sexually transmitted disease • Related to or traceable to Pregnancy or childbirth • Whilst mounting into, or dismounting from or traveling in any balloon or aircraft other than as a passenger (fare-paying or otherwise) in any scheduled airlines in the world or in any aircraft whether privately owned or chartered or operated by scheduled airlines • Insured person operating or learning to operate any aircraft or performing duties as member of crew on any aircraft or scheduled airlines or any airline personnel • War or war like operations, Civil War, invasion, act of foreign enemies, revolution, insurrection, mutiny, terrorism, military or usurped power, seizure, capture, arrest, restraint, or detainment, confiscation, or nationalisation or requisition by or under the order of any government or public authority. • Any act of Nuclear, Chemical, Biological Terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss • Radioactive, chemical, nuclear contamination, or ionizing radiation • Any insured person's participation or involvement in any branch of naval, air force or military operations or any paramilitary forces. • Any payment in case of more than one claim under the Policy during any one Policy Period by which Our maximum liability in that period would exceed the Sum Insured. This would not apply to payments made under the Optional Covers. • Certification by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's family. • Any expenses (other than as mentioned therein) specified in List of Non-Medical Expenses as set out in Annexure • Existing diseases disclosed by the Insured Person (in line with Chapter IV, Guidelines on standardization of Exclusions in Health Insurance Contracts, 2019), provided the same is applied at the underwriting and consented by You/ Insured Person. <p>Note: The above is a partial list of the policy exclusions. Please refer to the policy wording for the complete list of exclusions.</p>	
7	Waiting Period	<ul style="list-style-type: none"> • Not Applicable 	
8	Financial limits of coverage	<ul style="list-style-type: none"> • Benefit wise Reimbursement of covered accidental medical expenses up to specified limit as mentioned above. • Benefit wise Payout of lump sum benefit amount or payment of covered expenses up to specified limit as mentioned above 	
9	Claims / Claims Procedure	<p>Intimation of Claim: If any injury is suffered or any condition happens which may give rise to Claim under this Policy, Insured person or any one acting on his behalf shall notify Us immediately.</p> <ul style="list-style-type: none"> • The claim can be intimated to the Call Centre on 1800 266 3202 	Section 4

		<ul style="list-style-type: none"> • Request to provide the policy details while intimating your claim. • The date, time and cause of Incidence must be provided at the time of claim intimation. • Request to intimate the claims as far as possible through our Call Centre and for better controls. <p>Submission of claim: The claim form along with the attending Medical Practitioner's certificate duly filled and signed in all respects with the following claim documents will be submitted to Us not later than 30 days from the date of discharge from the Hospital.</p> <p>Payment of Claim</p> <ul style="list-style-type: none"> • No liability will be admitted, if the claim is fraudulent or supported by fraudulent means. • The Insured Person or any person acting on behalf of the Insured Person, as the case may be, must provide at his/her expense, all the information asked by Us in relation to the claim and he/she must provide all reasonable cooperation and assistance to Us as may be required. • If required, the Insured Person or any person acting on behalf of the Insured Person, as the case may be, must give consent to obtain medical reports from the Medical Practitioner at Our expense • If requested by Us, the Insured Person must agree to be examined by a Medical Practitioner of Our choice and at Our expense • All claims under this Policy shall be payable in Indian Currency. • Claims under this Policy shall be settled or rejected, as the case may be, within 30 days of the receipt of the last necessary document • All claims are to be notified to Us within the timeline set out above. Where the delay in intimation is proved to be genuine and for reasons beyond the control of the Insured Person or nominee specified in the Policy Schedule or the claimant, We may condone such delay and process the claim. Please note that the waiver of the time limit for notice of claim and submission of claim is at Our discretion <p>Upon acceptance of an offer of settlement by the Insured Person or the claimant, as the case may be, the payment of the amount shall be made within 7 days from the date of acceptance. In case of delay in payment, We shall be liable to pay interest at 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by Us.</p> <p>Claim Documents</p> <p>The claims documents as specified in below sections for various covers must be provided to Us within 30 days of occurrence of the event giving rise to a claim under the Policy at Your own/ Insured Person's expenses Where there is a delay in intimation of claim and/or submission of claim documents is proved to be genuine and for reasons beyond the control of the claimant, We may condone such delay and process the claim. We reserve the right to decline such requests for claim process where there is no merit behind such delay. Please refer Annexure for claim documents</p>	
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10	Policy Servicing	<ul style="list-style-type: none"> • Company Officials: In case the Insured Person is aggrieved in any way, the Insured Person may contact Us at: Email: Gro@magma-hdi.co.in Call us at: 1800 266 3202 Address: Equinox Business Park, Tower 3, 2nd Floor, Unit Number 1B & 2B, LBS Marg, Kurla (West), Mumbai – 400070 • IRDAI (Call Centre): Toll Free Number: 155255 (or) 1800 4254 732 Timings: 8 AM to 8 PM -- (Monday to Saturday) <p>Ombudsman: In case You/Insured Person are not satisfied with Our decision/resolution, You may approach the Insurance Ombudsman at the addresses given in Annexure I of the Policy document</p>	Section 4
11	Grievances Complaints	<p>In case of any grievance, the insured person including senior citizen may contact the Company through</p> <p>Website: www.magma-hdi.co.in Toll free: 1800 266 3202 E –mail: Gro@magma-hdi.co.in</p>	Section 4

		<p>Courier: Any of Our branch offices or corporate office during business hours</p> <p>Insured person may also approach the grievance cell at any of the company's branches with the details of grievance.</p> <p>If Insured Person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at:</p> <p>Magma HDI General Insurance Co. Ltd.,</p> <p>Equinox Business Park, Tower 3, 2nd Floor, Unit Number 1B & 2B, LBS Marg, Kurla (West),</p> <p>Mumbai - 400070</p> <p>For updated details of grievance officer, kindly refer the link https://www.magmahdi.com/grievance-redressal.</p> <p>If Insured Person is not satisfied with the redressal of grievance through above methods, insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules, 2017. Detailed process along with list of Ombudsman offices are available at council of Insurance Ombudsman https://www.cioins.co.in/. The contact details of the Insurance Ombudsman offices have been provided as Annexure</p> <p>Grievance may also be lodged at IRDAI Integrated Grievance management System: https://bimabharosa.irdai.gov.in</p>	
12	Things to remember	<ul style="list-style-type: none"> • Free Look: You have a period of 30 days from the date of receipt of the Policy document to review the terms and conditions of this Policy. • Policy Renewal: <p>A health insurance policy shall be renewable provided the product is not withdrawn, except in case of established fraud or non-disclosure or misrepresentation by the Insured.</p> <ul style="list-style-type: none"> • Migration and Portability: You can migrate or port your existing health insurance policy from another company or from existing product of MAGMA HDI General Insurance. <p>For Detailed Guidelines on migration, kindly refer the link https://www.irdai.gov.in/ADMINCMS/cms/whatsNew_Layout.aspx?page=PageNo3987&flag=1</p> <p>For Detailed Guidelines on portability, kindly refer the link https://www.irdai.gov.in/ADMINCMS/cms/whatsNew_Layout.aspx?page=PageNo3987&flag=1</p> <ul style="list-style-type: none"> • Increase in Sum Insured: You can request for increase in Sum Insured at the time of renewal. Acceptance of the same shall be subject to underwriting guidelines • Moratorium Period: <p>After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the insurer on grounds of non-disclosure, misrepresentation,</p>	Section 4

		except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever, the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits.	
13	Your Obligation	<ul style="list-style-type: none"> • Disclosure to Information The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis description or non-disclosure of any material fact by the policyholder. (Explanation: "Material facts" for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk) • Please disclose all pre existing disease/s / diaabilities or conditions before buying a policy. Non-disclosure may affect the claim settlement. 	Section 4
<p>Legal Disclaimer Note: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail https://www.magmahdi.com/downloads.</p>			

Declaration by the Policy holder:

I have read the above and confirm having noted the details.

Place

Date
Holder

Signature of the Policy

Annexure

Benefit Premium Illustration