

Pramerica Life Dengue Shield

Traditional Fixed Benefit Individual Health Plan



In life, both certainty and uncertainty go parallely but eventually people don't plan uncertain things like sickness. It happens! Moreover, you may have seen people suffering from diseases and must have noticed the strain on their physical, emotional & financial condition. Diseases like dengue also put huge pressure and stress on person's life and put immediate financial stress. We can secure your financial burden due to dengue with this plan.

Presenting Pramerica Life Dengue Shield Traditional Fixed Benefit Individual Health Plan

Pramerica Life Dengue Shield, a solution to cover you against the financial impact of dengue during illness and recovery process. Therefore, go ahead and fight against dengue.

Key Features

- Prompt issuance of policy. No lengthy paperwork required
- Fixed benefits product. No ambiguity on amount and extent of coverage
- Benefit on diagnosis of Dengue fever Irrespective of claims made from any other existing health insurance policy
- Multiple Premium payment options
- Option To cover as many as 6 family members in a single Policy with attractive discounts available

How does the plan work?

This policy requires no lengthy paperwork. All it takes is filling up of a simple application form and a declaration saying you are currently not suffering from dengue fever or showing symptoms of Dengue fever or have suffered from the same in past 1 month. This plan is available with our advisors, at our branches and you can also buy it online.

- You can buy it for yourself or you can cover your family^ members in the same policy under Family cover option.
 As many as 6 members can be covered in one Policy with attractive discounts
- Each member will be entitled for separate Sum Insured and premium will be charged for each member separately
- You have an option to choose Sum Insured from ₹25,000, ₹40,000, or ₹50,000. Only one policy per Life Insured is allowed. ^Family shall include spouse, children, parents, motherin- law and father-in-law of the primary policyholder.

Benefits Payable

On diagnosis of dengue fever (Dengue Haemorrhagic fever and/ or Dengue Shock Syndrome), 100% of chosen Sum Insured will be paid subject to all of the following conditions:

- Decreasing platelet levels- less than 100,000 cells/ mm3 and
- Increasing in hematocrit more than 20% of the highest normal value and
- Immunoglobulins/PCR test showing positive results for Dengue and
- Attending physician's certification for diagnosis of Dengue Haemorrhagic fever and/or Dengue Shock Syndrome and
- Minimum 48 In-patient care consecutive hours of hospitalization in a Hospital for medically necessary treatment of Dengue

There is no maturity benefit payable under this product.

Dengue Fever

A fever which is diagnosed as Dengue Haemorrhagic fever <code>nd/or</code> Dengue Shock Syndrome.

Medical Practitioner

Medical Practitioner means a person who holds a valid registration from the Medical Council of any state of India and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of his license and who is neither the life insured himself nor related to the life insured by blood or marriage.

Hospital

A hospital means any institution established for in-patient care and day care treatment of illness and / or injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registrations and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under

- Has qualified nursing staff under its employment round the clock:
- Has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 inpatient beds in all other places;
- Has qualified medical practitioner(s) in charge round the clock;

- Has a fully equipped operation theatre of its own where surgical procedures are carried out;
- Maintains daily records of patients and makes these accessible to the insurer's authorized personnel

Medically Necessary

Medically necessary treatment is defined as any treatment, tests, medication, or stay in hospital or part of a stay in hospital which

- Is required for the medical management of the illness or injury suffered by the insured;
- Must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- Must have been prescribed by a Medical Practitioner;
- Must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

Eligibility Criteria

Age at Entry##	Minimum: 91 Days						
	Maximum: 65 Years						
Coverage Type	Individual Cover: Single member						
	Family Cover: Maximum 6 members can be covered in a policy						
Policy Term	5 Years						
Premium Payment Terms	Regular Pay, Single Pay						
Sum Insured	₹25,000, ₹40,000 or ₹50,000						
Premium	If you purchase from our advisors or If you purchase this online from any of our branches						online
	Sum Insured	25,000	40,000	50,000	25,000	40,000	50,000
	Regular Premium (₹)	415	550	650	365	500	575
	Single Premium (₹)	1,550	2,100	2,475	1,500	2,050	2,400
Premium Paying Mode	Annual, Semi Annual and Monthly	/ *					

!Premium mentioned are exclusive of Goods & Service tax and applicable cess, are unisex rates and are independent of Life Insured's age

^{*}Monthly mode of premium payment is available only through credit card, direct debit and ECS. In case of non annual modes of premium payment, following modal factors will be applicable

Premium Modes	Factors
Semi-Annual	0.52
Monthly	0.09

Premium Discounts/ Rebates

The Company will offer a discount of 5% on the first year premium in case of Regular Premium and 2% in case of Single Premium for policies if you are an existing policy holder or if you purchase this policy under a Family cover. The Company shall also offer premium discount to PLIL. The discount offered under Family cover option shall be given to each of the member covered under the Family cover option including the primary policyholder.

Waiting Period

There will be a waiting period of 15 days after commencement or revival of the policy, whichever is later. The Company will not entertain any claim arising due to diagnosis within the waiting period under this policy.

Surrender

Policy purchased under Single premium mode will immediately acquire the surrender value. The surrender value will be calculated as 50% of Single Premium paid (excluding taxes, if any)* (Unexpired coverage term in completed months / 60) There is no surrender value available on the policies purchased under regular premium payment mode.

Revival

Revival of a lapsed policy is available up to 5 years from the date of first unpaid premium or till the end of the policy term, whichever is earlier. The revival of the policy shall be subject to the Board approved underwriting policy, as applicable from time to time. The Company rescores the right to obtain additional information before reviving the Policy and also has the right to decide revival of the Policy.

The policyholder would be required to pay all outstanding premiums due till the proposed date of revival together with any applicable interest. The unpaid premiums to be paid by the policyholder upon revival shall be based on the corresponding rates i.e. original premium amount for the period when original premium rates were applicable and revised premium amount for the period from the date of revision of premium rates till the date of revival. The rate of interest shall be reset on an annual

^{##}Attained age as on last birthday

basis at the beginning of every financial year (April) and would be determined based on the average of 10-year G-Sec YTM plus 75 bps rounded down to 25 bps. The average of the benchmark would be taken from the previous financial year for the period 1st July to corresponding 31st Dec. The source of information for 10 year GSec rate would be "CCIL".

Are there any tax benefits for availing this plan?

Tax benefits under Section 80(D) of the Income Tax Act will be available as per prevailing tax laws. Tax laws are subject to change. Please consult your tax advisor for details.

Free Look Cancellation

The policyholder will have a period of 15 days (30 days in case of the policy sold through distance marketing mode) from the date of receipt of the Policy terms and conditions to review the same. Where the policyholder disagrees with any of these terms and conditions, the policyholder will have an option to discontinue the Policy stating the reasons for objection. On receipt of the letter, the company will refund the premiums paid, subject to the deduction of proportionate risk premium, any expenses incurred by the Company on insurance medical examination and stamp fee (if any), towards the Policy.

Grace Period

A grace period of 30 days for all modes under Regular Premium payment will be available under this Policy.

The policy will remain in force during the grace period. If the policyholder is diagnosed of Dengue Fever during the Grace Period, the Company will pay the benefit payable after deduction of the Premium due under the Policy. In case any premium remains unpaid at the end of the grace period, the policy shall lapse.

Exclusions

No benefit will be paid in case of following:

- Any Treatment other than for Dengue Haemorrhagic fever and/ or Dengue Shock Syndrome
- Treatment requiring less than 48 hours of hospitalization
- Diagnosis and Treatment outside India
- Dengue Fever that is not diagnosed by a Physician who does not qualify within the definition of Medical Practitioner as defined above
- Any claim arising due to diagnosis of Dengue Fever during the waiting period of 15 days from the date of commencement or revival, whichever is later

Conditions Applicable

• During each Policy year a maximum of 1 claim shall be payable to each life insured and no carry forward to the next year shall be allowed. Similarly, in case of Family cover option, each individual member covered can make maximum of one claim in each policy year and no carry forward to the next policy year will be allowed. However, the cover will continue for each life insured after a claim is made till the end of the policy term or the date on which a claim is made in the last

- policy year, whichever is earlier, subject to payment of all due premiums by the policyholder
- Coverage for a minor shall only be allowed if parents or any other adult family member is covered and adult is the primary policyholder
- For any regular premium payment policy, the premium rates shall be guaranteed for the first 3 years from the date of commencement of this Policy and reviewable thereafter on prior approval from the IRDAI. Any revision in the Premium rates shall be notified to the policyholder at least three months prior to the date of such revision by the Company. Such change in rates will apply both to new as well as existing Policyholders

Assignment

Assignment may be done as per Section 38 of the Insurance Act 1938, as amended from time to time.

Nomination

Nomination shall be as per Section 39 of the Insurance Act, 1938 as amended from time to time.

Section 41 of the Insurance Act 1938 as amended from time to time: Prohibition of rebate

- 1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out 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 liable for penalty which may extend to ten lakhs rupees.

Section 45 of the Insurance Act 1938, as amended from time to time

- 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 nominee(s)/beneficiary(s) 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 nominee(s)/beneficiary(s) 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 nominee(s)/beneficiary(s) 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.

The brochure gives the salient features for the product. Please refer to policy bond for further details of the terms and conditions.

About Pramerica Life Insurance Limited (PLIL)

Pramerica Life Insurance Limited is a joint venture between DHFL Investments Limited (DIL), a wholly-owned subsidiary of Dewan Housing Finance Corporation Ltd. (DHFL) and Prudential International Insurance Holdings, Ltd. (PIIH), a fully owned subsidiary of Prudential Financial, Inc. (PFI), a financial services leader headquartered in the U.S. The life insurance joint venture agreement between the two partners was signed in July 2013.

Pramerica Life Insurance Limited, which was earlier known as DHFL Pramerica Life Insurance Company Limited started operations in India on September 01, 2008 and has a pan India presence through multiple distribution channels which have been customized to address the specific insurance needs of diverse customer segments. The Company is committed to providing protection and quality financial advice to its customers.

For further information on the Company, please visit www.pramericalife.in



TAKE THE DECISION TO PROTECT YOUR FAMILY'S FUTURE TODAY.







This product provides Health Insurance coverage. Pramerica Life Dengue Shield UIN: 140N051V02. Goods & Service Tax and applicable cess will be charged over and above the quoted premium. For more details on risk factors and terms & conditions including policy exclusion, please refer to the detailed plan brochure and policy terms and conditions before concluding a sale.

Pramerica Life Insurance Limited. (Erstwhile DHFL Pramerica Life Insurance Company Limited) CIN: U66000HR2007PLC052028. IRDAI Registration No. 140. Registered Office and Communication Address: 4th Floor, Building No. 9, Tower B, Cyber City, DLF City Phase III, Gurgaon-122002. Website: www.pramericalife.in. The Pramerica Mark displayed belongs to 'The Prudential Insurance Company of America' and is used by Pramerica Life Insurance Limited under license.

DS/B-ENG/19/DEC/V4

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