



25. All non-medical Items as per Annexure II.  
26. Any treatment received outside India is not covered under this policy

**What we will not pay in case of Outpatient treatments**

**I. Waiting Period**

1. Cost of spectacles in the first year of the policy. (This cost is payable in the second year of continuous renewal subject to a maximum limit of 25% of the OPD limit.)
2. Cost of dentures in the first two years of the policy. (This cost is payable in the third year of continuous renewal subject to a maximum limit of 25% of the OPD limit.)
3. Cost of hearing aids in the first two years of the policy. (This cost is payable in the third year of continuous renewal subject to a maximum limit of 25% of the OPD limit.)

**II. Specific Exclusion**

1. Any expenses for treatment taken without the doctor advising the same and which is not duly supported by prescriptions.
2. Any expenses for diagnostic tests without the treating doctor's referral.
3. Cost of Annual Health Checkup.
4. Any expenses in excess of the maximum payable under the Outpatient medical expenses limit.

**Special Conditions related to Hospitalisation Section:**

- 10% co-payment applicable for all claims from a non network hospital. Waiver of the co-payment clause is available on payment of 10% of loading on standard premium.
- Our obligation to make payment in respect of surgeries for cataracts (after the expiry of the 2 year waiting period, shall be restricted to 10% of the Sum Insured for each and every claim, subject to a minimum of Rs 12000 (or the actual incurred amount which ever is lower) and maximum of Rs 25000/- for each of You.

**Free Look Period**

The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy.

**Renewal of Policy**

The policy shall ordinarily be renewable except on misrepresentation by the insured person. grounds of fraud, misrepresentation by the insured person.

- The Company shall endeavor to give notice for renewal. However, the Company is not under obligation to give any notice for renewal.
- Renewal shall not be denied on the ground that the insured person had made a claim or claims in the preceding policy years.

- Request for renewal along with requisite premium shall be received by the Company before the end of the policy period.
- At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without break in policy. Coverage is not available during the grace period.
- No loading shall apply on renewals based on individual claims experience

**Cancellation**

- The policyholder may cancel this policy by giving 15days' written notice and in such an event, the Company shall refund premium for the unexpired policy period as detailed below.
- For premium received on annual basis or full premium received at policy inception are as under

Period in Risk	Premium Refund		
	Policy Period 1 Year	Policy Period 2 Year	Policy Period 3 Year
Within 15 Days	As per Free Look Period Condition		
Exceeding 15 days but less than or equal to 1 month	75%	75%	80%
Exceeding 1 month but less than or equal to 3 months	50%	75%	80%
Exceeding 3 months but less than or equal to 6 months	25%	65%	75%
Exceeding 6 months but less than or equal to 12 months	0%	45%	60%
Exceeding 12 months but less than or equal to 15 months	0%	30%	50%
Exceeding 15 months but less than or equal to 18 months	0%	20%	45%
Exceeding 18 months but less than or equal to 24 months	0%	0%	30%
Exceeding 24 months but less than or equal to 27 months	0%	0%	20%
Exceeding 27 months but less than or equal to 30 months	0%	0%	15%
Exceeding 30 months but less than or equal to 36 months	0%	0%	0%

Cancellation grid for premium received on instalment basis and refund is as under  
The premium will be refunded as per the below table:

Period in Risk (From Latest instalment date)	Premium Refund		
	% of Monthly Premium	% of Quarterly Premium	% of Half Yearly Premium
Upto 15 days from 1st Instalment Date	As per Free Look Period Condition		
Exceeding 15 days but less than or equal to 3 months	No Refund		30%
Exceeding 3 months but less than or equal to 6 months			0%

**Note:**

- The first slab of Number of days "within 15 days" in above table is applicable only in case of new business. In case of renewal policies, period is risk "Exceeding 15 days but less than 3 months" should be read as "within 3 months". Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any benefit has been availed by the insured person under the policy.
- The Company may cancel the policy at any time on grounds of misrepresentation non-disclosure of material facts, fraud by the insured person by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud.

**Grace period:**

- In case of our own renewal a grace period of 30 days is permissible and the Policy will be considered as continuous for the purpose of Specific waiting period
- Any medical expenses incurred as a result of disease condition/ Accident contracted during the break period will not be admissible under the policy.

**Portability Conditions**

The insured person will have the option to port the policy to other insurers by applying to such insurer to port the entire policy along with all the members of the family, if any, at least 45 days before, but not earlier than 60 days from the policy renewal date as per IRDAI guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance policy with an Indian General/Health insurer, the proposed insured person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on portability. For Detailed Guidelines on portability, kindly refer the link [https://www.irdai.gov.in/ADMINCMS/cms/Circulars\\_List.aspx?mid=3.2.3](https://www.irdai.gov.in/ADMINCMS/cms/Circulars_List.aspx?mid=3.2.3)

**Migration**

The insured person will have the option to migrate the policy to other health insurance products/plans offered by the company by applying for migration of the policy at least 30 days before the policy renewal date as per IRDAI guidelines on Migration. If such person is presently covered and has been continuously covered without any lapses under any health insurance product/plan offered by the company, the insured person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on migration.

For Detailed Guidelines on migration, kindly refer the link [https://www.irdai.gov.in/ADMINCMS/cms/Circulars\\_List.aspx?mid=3.2.3](https://www.irdai.gov.in/ADMINCMS/cms/Circulars_List.aspx?mid=3.2.3)

**Possibility of Revision of Terms of the Policy Including the Premium Rates**

The Company, with prior approval of IRDAI, may revise or modify the terms of the policy including the premium rates. The insured person shall be notified three months before the changes are effected.

**Withdrawal of Policy**

- In the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the policy.
- Insured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period as per IRDAI guidelines, provided the policy has been maintained without a break.

**Section 41 of Insurance Act 1938**

Section 41 of Insurance Act 1938 as amended by Insurance Laws Amendment Act, 2015 (Prohibition of Rebates): 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 insurers. Any person making default in complying with the provision of this section shall be liable for a penalty which may extend to 10 lakh rupees.

**We also offer following Insurance policies:**



**Benefit Illustration in respect of Policies offered on Floater basis**

Age of the members to be insured	Coverage opted on Individual Basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under as single policy (Sum Insured is available for each member of the family)				Coverage opted on floater basis with overall Sum Insured (Only one sum insured is available for the entire family)			
	Premium	Sum Insured	Premium	Discount	Premium after discount	Sum Insured	Premium or consolidated premium for all members of family	Floater discount if any	Premium after discount	Sum Insured Plan B
18-55 yrs	NA	NA	NA	NA	NA	NA	9,345	NA	200,000	
18-55 yrs	NA	NA	NA	NA	NA	NA				
NA			NA				Total premium when policy is opted on floater basis is <b>Rs 9,345</b> (No discount applicable)			
NA			NA				Sum Insured of Rs 200,000 is available for the entire family			

Note: Premium rates specified in the above illustration shall be standard premium rates without considering any loading. Also, the premium rates shall be exclusive of taxes applicable.

**TRIPLE BENEFIT**

- + Tax Benefits
- + OPD / Hospitalization expenses covered
- + Less Premium

**BAJAJ ALLIANZ GENERAL INSURANCE CO. LTD.**  
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