



IFFCO-TOKIO GENERAL INSURANCE CO. LTD

Regd. Office: IFFCO Sadan, C-1, Distt. Centre, Saket, New Delhi-110017

IFFCO-TOKIO CRITICAL ILLNESS BENEFIT POLICY

UIN: IFFHLIP19036V011920

PROSPECTUS/ SALES LITERATURE

IFFCO-Tokio Critical Illness Benefit Policy has been filed as a benefit policy in order to mitigate the financial hardship of persons who have contracted a critical illness or sustained a critical injury necessitating spending a large sum for taking any treatment, along with maintenance of the family.

COVERAGE

WHAT IS COVERED

IFFCO-Tokio will pay the Sum Insured as mentioned in the schedule, in the event of Insured person being first diagnosed with the following critical illnesses, medical events or undergoing surgical procedures as specifically defined below, during the policy period provided that

1. the critical illness, medical event and surgical procedure first commenced atleast 30 days after the commencement of the policy period (or first policy period in case of renewal without break) and,
2. Insured person survives for a minimum of 28 days from the date of diagnosis and shall only include:

A. The below mentioned Illnesses:

- i) Cancer of specified severity
- ii) Kidney failure requiring regular dialysis
- iii) Multiple Sclerosis with persisting symptoms
- iv) Benign Brain Tumor
- v) Motor Neuron Disease with Permanent Symptoms
- vi) End Stage Lung Failure
- vii) End Stage Liver Failure
- viii) Primary (Idiopathic) Pulmonary Hypertension
- ix) Parkinson's Disease Before The Age Of 50 Years
- x) Alzheimer's Disease Before The Age Of 50 Years

B. The following surgical procedures:

- i) Major Organ (Heart/ Lung/ Liver/ Kidney /Pancreas) or Human Bone Marrow Transplant;

- ii) Open heart replacement or repair of heart valves
- iii) Open chest CABG
- iv) Surgery Of Aorta

C. The following medical events:

- i) Stroke resulting in permanent symptoms
- ii) Permanent Paralysis of Limbs
- iii) Myocardial Infarction (First Heart Attack of specified severity)
- iv) Third Degree Burns
- v) Loss of Speech
- vi) Blindness
- vii) Loss of Limbs
- viii) Deafness
- ix) Coma of Specified Severity
- x) Major Head Trauma
- xi) Muscular Dystrophy

WHAT IS NOT COVERED

IFFCO-Tokio will not pay for:

1. Any claim arising out of a pre-existing condition. Pre-existing or related conditions shall be covered after a waiting period of 48 (Forty eight) months. The said condition must be declared if known by the Insured person at the time of application and must not have been explicitly excluded in the policy.
2. Any claim if treatment is taken from a family member or a treatment taken is not scientifically recognized or self medication.
3. Any claim if Policy holder/ Insured person does not submit a specialist medical certificate from the Medical Practitioner evidencing diagnosis of illness or injury or occurrence of medical event or the undergoing of the medical surgical procedure.
4. Any claim if the diagnosis, treatment or procedure is carried out in any of the hospital(s) specified in the list attached as Annexure "List of Excluded Hospitals" to this Policy, except in case of unforeseen emergency measures to save the insured person's life or measures solely designed to relieve the acute pain. The list of such excluded hospital(s) is dynamic and hence may change from time to time. It is suggested to check our website or contact our call centre/nearest office for updated list of such excluded hospitals before admission.
5. Any external congenital anomaly or birth defects.
6. Any critical Illness which arises or is caused by any one of the following:
 - a) The ingestion of drugs other than those prescribed by Registered Medical practitioner.
 - b) Elective, Cosmetic or plastic surgery

- c) Pregnancy, childbirth and their consequences), any infertility or sub fertility or assisted conception treatment
- d) Birth control procedures and /or Hormone replacement therapy

SPECIFIC CONDITIONS

1. The policy will provide one time benefit for the critical illnesses defined above under 'What is Covered' in a single policy period.
2. The policy is available on individual basis.
3. For policies where all the members of the family are covered in a single policy, separate Sum Insured shall be applicable for each member.
4. In case of an admissible claim for any insured person, the policy will terminate for him/her for the remaining policy period. The policy shall remain active for other members covered in the policy.
5. Any critical illness/medical event/surgical procedure attributable to an Act of Terrorism stands covered.
6. No medical check-up upto 50 years, subject to proposal form having no adverse medical declaration.
7. Wherever required, Insured person(s) has to undergo a Pre-policy check-up. If such a proposal is accepted and policy has been issued, We would reimburse 50% cost of the diagnostic test charges.
8. The premium paid is exempt under Section 80D of the Income Tax Act.

GENERAL EXCLUSIONS

(WHAT IS NOT COVERED BY THE WHOLE POLICY)

IFFCO-Tokio will not be liable for

1. **Existing loss** - Any existing loss, injury or accident which occurred before the commencement of the policy.
2. **Willful Act or Gross Negligence** – Injury, disease or damage due to willful act including attempting suicide or intentional self-injury.
3. Any claim arising or resulting from Insured person(s) committing any breach of law or ordinance or non-compliance of any statutory provision with or without criminal or malicious intent.
4. Any claim where the cause of illness /accident is intoxication or addiction or overdose of drugs (except as medically prescribed) or narcotics/ alcohol by the Insured.

5. Any claim if the Insured person is taking part in a naval, military, airforce or law enforcement operation.
6. Any claim arising out of sporting risk in so far as they involve, the training or participation in competitions of professional or semi professional sportsmen or women.
7. **Adventure Activities/ sports** – Any critical illness/medical event/surgical procedure arising out of any Adventure activities/ sports.
8. **War Risk** - Damage as a consequence of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, confiscation, nationalisation, civil commotion or loot or pillage in connection therewith.
9. **Nuclear Risk** - Any loss to property, consequential loss, legal liability or bodily injury, illness, disease directly or indirectly caused by or contributed to by or arising from
 - a) ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
 - b) the radioactive, toxic, explosive or hazardous properties of any nuclear assembly or nuclear component.
10. **Consequential Loss** – Any consequential or indirect loss or expenses arising out of or related to any insured event.

GENERAL CONDITIONS

(These conditions apply to the whole Policy)

1. **CANCELLATION** - IFFCO-Tokio may cancel the policy on grounds of fraud, moral hazard or misrepresentation or non-cooperation by the Policy holder by sending 15 (fifteen) days notice under recorded delivery to the Policy holder at his/her last known address and in such event, IFFCO-Tokio will return to the Policy holder, except in case of fraud or illegality on Policy holder's part, the premium paid less the pro rata portion thereof for the period the Policy has been in force. The refund shall be calculated on pro rata basis as per the following formula:

$$R = \frac{(365 * k) - n}{(365 * k)} * P$$

where,

R = Refund on the policy

k = 1/ 2/ 3 years (policy duration)

n = total number of days of policy in force
P = Premium paid by the insured

Policy holder may cancel this Policy by sending 15 (fifteen) days written notice to IFFCO-Tokio. IFFCO-Tokio will then allow a refund after retaining the premium based on short period table as defined below.

Refund Percentage Cancellation date upto (x months) from Policy start date	Policy Tenure		
	1 year	2 years	3 years
Post free-lookup period and Upto 1 month	75%	87%	91%
Upto 3 month	50%	74%	82%
Upto 6 month	25%	61.5%	72.5%
Upto 12 month	0%	48.5%	64.5%
Upto 15 month	NA	24.5%	47%
Upto 18 month	NA	12%	38.5%
Upto 24 month	NA	0%	30%
Upto 30 month	NA	NA	8%
Beyond 30 months	NA	NA	0%

This refund of premium is subject to the condition that no claim has been preferred on IFFCO-Tokio.

2. **AUTOMATIC TERMINATION OF INSURANCE-**

The coverage for the Insured Person(s) shall automatically terminate in the case of his/ her (Insured Person) demise or exhaustion of Sum Insured. However, the cover shall continue for the remaining Insured Persons till the end of Policy Period. The other insured persons may also apply to renew the policy. In case, the other insured person is minor, the policy shall be renewed only through any one of his/her natural guardian or guardian appointed by court. All relevant particulars in respect of such person (including his/her relationship with the insured person) must be submitted to the company along with the application.

Provided no claim has been made, and termination takes place on account of death the insured person, due to reasons apart from what stands covered under the policy, pro-rata refund of premium of the deceased insured person for the balance period of the policy will be effective.

3. **RENEWAL-** This Policy shall ordinarily be renewable for lifelong only by mutual consent except justified on grounds such as mis-representation, fraud, moral hazard or non co-operation by the Insured/ Insured person and subject to payment in advance of the total premium at the rate in force at the time of renewal and subject to the Policy is renewed within the Grace period of 30 days from date of Expiry.

Unless renewed as herein provided, this Policy shall automatically terminate at the expiry of the period for which premium has already been paid.

Sum Insured can be modified at the time of renewal for which fresh proposal form will be required to be submitted. In case of enhancement of Sum insured at renewal, waiting periods will apply afresh for the enhanced sum insured.

In case of an admissible claim for any insured person, the option for renewal shall not be available for him/ her. The policy shall be renewable by mutual consent for all the other Insured person(s) covered in the policy.

4. **FREE LOOKUP PERIOD** – The free look period shall be applicable at the inception of the policy and
 - 1) The insured will be allowed a period of at least 15 days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable.
 - 2) If the insured has not made any claim during the free look period, the insured shall be entitled to—
 - a) A refund of the premium paid less any expenses incurred by the insurer on medical examination of the insured persons and the stamp duty charges or;
 - b) where the risk has already commenced and the option of return of the policy is exercised by the policyholder, a deduction towards the proportionate risk premium for period on cover or;
 - c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period;
5. **CHANGE IN CIRCUMSTANCES** – Policy holder/ Insured person must inform IFFCO-Tokio, as soon as reasonably possible, of any change in information Policy holder has provided to IFFCO-Tokio about himself/ herself/ Insured person(s) and their occupation, which may affect the insurance cover provided. Policy holder/ Insured person must also notify IFFCO-Tokio about any alteration made or change in information as described aforesaid whereby risk of damage or Accident is increased. In case of such alteration or changes made and not accepted by IFFCO-Tokio in writing, all covers under this Policy shall cease.
6. **CLAIM SERVICING:** Claims will be directly serviced by IFFCO TOKIO without any Third party administrator.
7. **CLAIM PROCEDURE AND REQUIREMENTS** - An event, which gives rise to a claim or might become a claim under the Policy, must be reported to IFFCO-Tokio as soon as possible.

A written statement of the claim will be required and a Claim Form will be provided. This written statement of claim along with supporting documentation must be delivered to IFFCO-Tokio within 45 (forty five) days of occurrence of Insured event.

If any person is claiming against the Policy holder or its employees or Insured person(s), every letter, claim writ, summon, process information or any verbal notice of claim shall be forwarded to IFFCO-Tokio without delay. Policy holder, Insured person or any person on his/her behalf must not attempt to negotiate any claim, nor admit or repudiate any claim without IFFCO-Tokio's consent. Policy holder/ Insured person(s) shall give all possible assistance to enable IFFCO-Tokio to settle or resist any claim or to institute proceedings.

8. IFFCO-Tokio is entitled to:
 - i) Receive all necessary information, proof of occurrence of Insured event and assistance from the Policy holder/ Insured person and from any other person seeking benefit under this Policy.
 - ii) Inspect the medical hospitalization records, investigate the facts and examine the Insured person.
9. Policy holder/ Insured person shall assist and not hinder or prevent IFFCO-Tokio or its representatives in pursuance of their duties for ascertaining the admissibility of the claim under the Policy.
10. In case of any inconsistency in the terms and conditions in the policy wordings vis-a-vis the information contained in the Policy Schedule, the information contained in the Policy schedule shall prevail.

11. **PORTABILITY –**

The Portability of health insurance policies shall be governed by the Health Insurance Regulation, 2016 dated 12th July, 2016. For more information, please refer to the page no.41 on the following URL of the IRDA website:

https://www.irdai.gov.in/ADMINCMS/cms/frnGeneral_Layout.aspx?page=PageNo2908&flag=1

The salient features mentioning the rights and obligations of the insurer and insured are as follows:

- a) A policyholder desirous of porting his policy to another insurance company shall apply to such insurance company, to port the entire policy along with all the members of the family, if any, at least 45 days before the premium renewal date of his/her existing policy.
- b) Insurer may not be liable to offer portability if policyholder fails to approach the new insurer at least 45 days before the premium renewal date.
- c) Portability shall be opted by the policyholder only as stated in (a) above and not during the currency of the policy.
- d) In case insurer is willing to consider the proposal for portability even if the policyholder fails to approach insurer at least 45 days before the renewal date, it may be free to do so.
- e) Where the outcome of acceptance of portability is still waiting from the new insurer on the date of renewal:

- i. The existing policy shall be allowed to extend, if requested by the policyholder, for the short period by accepting a pro- rate premium for such short period, which shall be of at least one month and
 - ii. Shall not cancel existing policy until such time a confirmed policy from new insurer is received or at the specific written request of the insured.
 - iii. The new insurer, in all such cases, shall reckon the date of the commencement of risk to match with date of expiry of the short period, wherever relevant.
 - iv. If for any reason the insured intends to continue the policy further with the existing insurer, it shall be allowed to continue by charging a regular premium and without imposing any new condition.
12. **FRAUD** - If a claim is fraudulent on account of fraudulent means or action used by the Policy holder, its employee, Insured person or his/her Family, all benefits and rights under this Policy shall be forfeited.
13. **ARBITRATION** - If any dispute or difference shall arise as to the quantum to be paid under the policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of the sole arbitrator to be appointed in writing by the parties to or if they cannot agree upon a single arbitrator within 30 (thirty) days of any party invoking arbitration the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by two such arbitrators and arbitration shall be conducted under and in accordance with the provisions of the arbitration and conciliation act, 1996. It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as herein before provided, if IFFCO-Tokio have disputed or not accepted liability under or in respect of this policy. It is understood, however, that Policy holder shall have the right at all times during currency of the policy to communicate only, with the leading or issuing office in all matters pertaining to this insurance.
14. **DISCLAIMER CLAUSE** - If IFFCO-Tokio shall disclaim its liability in any claim, and such claim shall not have been made the subject matter of a suit in a court of law within 12 (twelve) months from the date of disclaimer, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable under this Policy.
15. All claims shall be settled in India in Indian Rupees.
16. The provision of this Policy shall be governed by the laws of India for the time being in force. The parties hereto unconditionally subject to the jurisdiction of the Courts in India.
17. **WITHDRAWAL & ALTERATION OF POLICY CONDITIONS**-The policy terms and conditions may undergo alteration as per the IRDA Regulation. However the same shall be duly notified to the Policy holder at least three months prior to the date when such alteration or revision comes

into effect by registered post at Policy holder's last declared correspondence address. The timeliness for revision in terms and rates shall be as per the IRDA Regulation.

A product may be withdrawn with the prior approval of the Authority and information of withdrawal shall be given to Policy holder in advance as per the IRDA guidelines with details of options provided by IFFCO-Tokio. If IFFCO-Tokio do not receive Policy holder's response on the intimation of withdrawal, the existing product shall be withdrawn on the renewal date and Policy holder shall have to take a new policy available with IFFCO-Tokio, subject to terms & conditions.

18. **PAYMENT OF PREMIUM** - The premium payable shall be paid in advance before commencement of risk. No receipt for premium shall be valid except on IFFCO-Tokio's official form signed by its duly authorized official. In similar way, no waiver of any terms, provision, conditions and endorsements of this policy shall be valid unless made in writing and signed by its authorized official.

19. **GRIEVANCE OR COMPLAINT** - You may register a grievance or complaint by visiting Our website www.iffcotokio.co.in You may also contact the offices from where You have bought the policy or the grievance officer who can be reached at Our corporate office.

Grievance Department details are as mentioned below:

E-Mail ID: chiefgrievanceofficer@iffcotokio.co.in

Address: IFFCO-Tokio General Insurance Company Limited.

IFFCO TOWER – II

Plot No.3, Sector-29, Gurgaon

Haryana-122001

POINTS TO REMEMBER –

1. The policy can be issued to Insured and his/her family. Family means Self, Spouse, Children, Parents, Parents-in-laws, Brothers and Sisters.
2. Minimum Entry Age –
 - a. Child – 3 years
 - b. Adult – 18 years
3. Maximum Entry Age –
 - a. Child – 23 years
 - b. Adult -65 years
4. Exit Age for child – 24 years (in case of a 1 year policy where the child entered at 23 years of age), 25 years (in case of a 2 year policy where the child entered at 23 years of age) and 26 year (in case of a 3 year policy where the child entered at 23 years of age). The dependent child, post the exit age shall have the option to migrate to an independent policy. We would

allow suitable credits for all the previous policy years to his/her new policy, provided the policy where he/she was a dependent child had been maintained without a break.

5. Maximum Renewable Age for adult – Lifelong
6. Sum Insured – Rs 1 lac/ 2lac/ 3 lac/ 4 lac/ 5 lac/ 7.5 lac/ 10 lac/ 15 lac/ 20 lac/ 25 lac/ 30 lac/ 50 lac/ 75 lac/ 1 crore
7. Period of Insurance – 1 year/ 2 years/ 3 years
8. Pre-policy Health Checkup –No medical check-up upto 50 years, subject to proposal form having no adverse medical declaration. Wherever required, Insured person(s) has to undergo a Pre-policy check-up. If such a proposal is accepted and policy has been issued, We would reimburse 50% cost of the diagnostic test charges.
9. Grace Period – 30 days from the date of expiry to renew the policy.
10. Midterm revision of sum insured shall not be available in the policy.



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RATING CHART

Year 1 Premium

Age/SI	1,00,000	2,00,000	3,00,000	4,00,000	5,00,000	7,50,000	10,00,000	15,00,000	20,00,000	25,00,000	30,00,000	50,00,000	75,00,000	1,00,00,000
<25	257	513	770	1,026	1,283	1,924	2,566	3,849	5,131	6,414	7,697	12,828	19,243	25,657
25-35	326	651	977	1,302	1,628	2,442	3,256	4,884	6,511	8,139	9,767	16,278	24,418	32,557
36-40	422	844	1,266	1,687	2,109	3,164	4,219	6,328	8,437	10,546	12,656	21,093	31,639	42,186
41-45	775	1,551	2,326	3,102	3,877	5,816	7,755	11,632	15,510	19,387	23,265	38,774	58,162	77,549
46-50	1,500	3,000	4,500	6,000	7,500	11,250	15,000	22,500	30,000	37,500	45,000	75,000	1,12,500	1,50,000
51-55	2,377	4,754	7,131	9,509	11,886	17,829	23,771	35,657	47,543	59,428	71,314	1,18,857	1,78,285	2,37,714
56-60	4,003	8,006	12,010	16,013	20,016	30,024	40,032	60,049	80,065	1,00,081	1,20,097	2,00,162	3,00,244	4,00,325
61-65	5,551	11,101	16,652	22,203	27,753	41,630	55,506	83,260	1,11,013	1,38,766	1,66,519	2,77,532	4,16,298	5,55,063
>65	7,708	15,417	23,125	30,834	38,542	57,813	77,084	1,15,626	1,54,168	1,92,710	2,31,252	3,85,421	5,78,131	7,70,841

Year 2 Premium

Age/SI	1,00,000	2,00,000	3,00,000	4,00,000	5,00,000	7,50,000	10,00,000	15,00,000	20,00,000	25,00,000	30,00,000	50,00,000	75,00,000	1,00,00,000
<25	238	477	715	953	1,191	1,787	2,383	3,574	4,765	5,957	7,148	11,914	17,870	23,827
25-35	302	604	907	1,209	1,511	2,267	3,022	4,533	6,044	7,555	9,066	15,111	22,666	30,221
36-40	391	783	1,174	1,565	1,957	2,935	3,913	5,870	7,827	9,784	11,740	19,567	29,351	39,135
41-45	718	1,435	2,153	2,871	3,589	5,383	7,177	10,766	14,355	17,944	21,532	35,887	53,831	71,775
46-50	1,382	2,763	4,145	5,527	6,909	10,363	13,817	20,726	27,635	34,544	41,452	69,087	1,03,631	1,38,174
51-55	2,177	4,354	6,531	8,708	10,886	16,328	21,771	32,657	43,542	54,428	65,314	1,08,856	1,63,284	2,17,712
56-60	3,627	7,254	10,881	14,508	18,135	27,203	36,271	54,406	72,541	90,676	1,08,812	1,81,353	2,72,029	3,62,705
61-65	4,977	9,954	14,931	19,908	24,885	37,328	49,771	74,656	99,542	1,24,427	1,49,313	2,48,855	3,73,282	4,97,709
>65	6,811	13,623	20,434	27,245	34,057	51,085	68,113	1,02,170	1,36,227	1,70,283	2,04,340	3,40,567	5,10,850	6,81,133

Year 3 Premium

Age/SI	1,00,000	2,00,000	3,00,000	4,00,000	5,00,000	7,50,000	10,00,000	15,00,000	20,00,000	25,00,000	30,00,000	50,00,000	75,00,000	1,00,00,000
<25	221	443	664	885	1,106	1,660	2,213	3,319	4,426	5,532	6,638	11,064	16,596	22,128
25-35	281	561	842	1,122	1,403	2,104	2,805	4,208	5,611	7,013	8,416	14,027	21,040	28,053
36-40	363	726	1,089	1,452	1,815	2,723	3,630	5,446	7,261	9,076	10,891	18,152	27,228	36,305
41-45	664	1,329	1,993	2,657	3,322	4,982	6,643	9,965	13,286	16,608	19,929	33,215	49,823	66,431
46-50	1,273	2,546	3,818	5,091	6,364	9,546	12,728	19,092	25,456	31,820	38,184	63,641	95,461	1,27,281
51-55	1,994	3,988	5,982	7,976	9,970	14,955	19,939	29,909	39,879	49,848	59,818	99,697	1,49,545	1,99,394
56-60	3,286	6,572	9,859	13,145	16,431	24,647	32,862	49,293	65,724	82,155	98,586	1,64,310	2,46,465	3,28,620
61-65	4,463	8,926	13,388	17,851	22,314	33,471	44,628	66,942	89,256	1,11,570	1,33,884	2,23,141	3,34,711	4,46,281
>65	6,019	12,037	18,056	24,075	30,093	45,140	60,187	90,280	1,20,373	1,50,466	1,80,560	3,00,933	4,51,399	6,01,865



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PROHIBITION OF REBATES

Section 41 of the Insurance Act 1938 provides as follows:

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 except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.
2. Any person making default in Company with the provisions of the section shall be punishable with fine which may extend to ten lakh rupees.

Note: Sales literature contains salient features of the product. For exhaustive details on covers, exclusions and conditions, kindly refer Policy Wordings. For all Insurance contracts, Policy Schedule along with Policy Wordings will be considered as contract documents. For more and detailed information regarding policies/ claims, please contact the nearest IFFCO-Tokio Office/ Bima Kendra/ Authorized Company Agent.