

## **MEDICAL EXPENSE EXTENSION**

UIN NO. IRDAN149RP0002V02201213/A0001V01202021

### **What is covered:**

In consideration of the payment of an additional premium by the Insured as mentioned in the schedule and realization thereof by Us, it is hereby understood and agreed subject to the terms, conditions, exclusions and limitations that We will cover the Hospitalization medical expenses incurred by the insured person(s) for treatment required as a result of an accident in the insured vehicle during the policy period. Our maximum liability under this cover will be as per the limit mentioned against this cover in the Policy Schedule. Following medical expenses will be covered:

- a) Medical Practitioners', anesthetist's. Surgeon's and other specialists' fees
- b) Room Rent and other boarding charges
- c) ICU Charges
- d) Operation theatre charges
- e) Diagnostic procedures' charges
- f) Medicines, drugs and other consumables as prescribed by the Medical Practitioner
- g) Qualified Nurses' charges
- h) Intravenous fluids, blood transfusion, injection administration charges
- i) Anesthesia charges, Blood, Oxygen, operation theatre charges, surgical appliances
- j) The cost of prosthetics and other devices or equipment if implanted internally during a Surgical Procedure

### **Limit of coverage:**

Sum Insured specified against this Add on is available to each such insured person separately. This limit is our maximum liability per insured person per policy year. Claim will be payable under this add on for all such person and total liability of the insurer shall

not in the aggregate exceed the sum insured specified in policy schedule against this add on during any one period of insurance in respect of all such person.

Option 1 :

1. Actual expenses incurred, or
2. 10% of the Capital Sum Insured or
3. 25% of the admissible Personal Accident claim amount, whichever shall be less.

Option 2 :

1. Actual expenses incurred, or
2. 20% of CSI, or
3. 40% of the admissible Personal Accident Claim amount, whichever shall be less

### **Definition:**

- a. **Accident** means sudden, unforeseen and involuntary event caused by external visible and violent means.
- b. **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 Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) of the said act Or complies with all minimum criteria as under:
  - i) Has qualified nursing staff under its employment round the clock;
  - ii) has qualified medical practitioner(s) in charge round the clock;
  - iv) has a fully equipped operation theatre of its own where surgical procedures are carried out;
  - v) maintains daily records of patients and makes these accessible to the insurance company's authorized personnel:
- c. **Hospitalization** means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.
- d. **Inpatient care** means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.
- e. **Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner
- f. **Insured person(s)** includes Owner driver, Unnamed passenger(s) and the paid driver, where unnamed passenger(s) means a person or persons travelling by the insured vehicle, who is/are neither the Owner Driver of the insured vehicle or its Paid Driver. The number of such Un-named Passengers

- covered should be equal to the Registered Carrying Capacity of the insured vehicle.
- g. **Medical Expenses** means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.
  - h. **ICU (Intensive Care Unit) Charges** means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges.
  - i. **Surgery or Surgical Procedure:** Surgery or Surgical Procedure means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.
  - j. **Medical Practitioner:** Medical Practitioner means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy setup by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.
  - k. **Medically Necessary Treatment:** Medically necessary treatment means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:
    - i) is required for the medical management of the illness or injury suffered by the insured;
    - ii) must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
    - iii) must have been prescribed by a medical practitioner;
    - iv) must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
- L. Unproven/Experimental treatment:** Unproven/Experimental treatment means the treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.

### Conditions Applicable:

- 1) This cover is applicable only if Personal Accident cover for the respective insured person under section 3 of Indian Motor Tariff has been opted in the base policy.

- 2) The Claim under this extension cover will be applicable only if the claim is admissible under section 1 of the base policy.
- 3) This cover is applicable for treatment in India only.
- 4) All claim under this benefits will be settled on reimbursement basis only.

### **Specific Exclusions:**

We will not be liable to pay a claim under this Add on cover in case of any claims arising out of or related to the following:

1. No. of persons/passengers in the vehicle at the time of occurrence of such injury were more than the same as specified in the registration certificate.
2. Death or injury directly or indirectly wholly or in part arising or resulting from traceable to intentional self-injury suicide or attempted suicide.
3. An accident happening whilst such driver person is under the influence of intoxicating liquor or drugs or
4. Claim with respect to Driver person in case of accident arising due to over speeding beyond the limits as defined by the road authority
5. Injury directly or indirectly caused by or arising from or attributable to war, invasion, act of foreign enemy, war like operation (whether war be declared or not), terrorism acts, nuclear weapon.
6. Any expense on treatment of Insured Person as outpatient only
7. Any expense on Naturopathy, non-allopathic treatment and/or any experimental or unproven treatment.
8. Any expense related to Injury suffered whilst engaged in adventurous sports - para-jumping, rock climbing, mountaineering, motor racing, horse racing or deep-sea diving.

### **Necessary claim documents:**

- 1) Duly Completed and signed Claim Form
- 2) Attested copy of FIR/ Panchanama / Inquest Panchanama.
- 3) Complete medical records/reports including investigation /Lab reports (X-Ray, MRI etc.) in case of disability claim.
- 4) Post mortem report, if conducted.
- 5) Discharge summary, Pharmacy bills , Medical Practitioner reports,  
Any other documents as requested by Claims Department which is/are relevant to the coverage under the policy.

We, at Our own expense, shall have the right and opportunity of Your medical examination through Our appointed agents whose details will be notified to You when and as often as We may reasonably require during the pendency of a claim hereunder. Your or Your estate's compliance with the need for such examination is a condition precedent to establishing liability under the Policy.

**Claim intimation & Submission:**

Preliminary intimation of claim with particulars relating to Policy Number, name of the Insured Person in respect of whom claim is made, nature of Illness/Injury and name and address of the attending Hospital, must be provided to Us at least 72 hours before admission to the Hospital in case of planned Hospitalization, and within 24 hours of admission in the Hospital, in case of Emergency Hospitalization.

The claim form, all claim documents along with the attending Medical Practitioner's certificate duly filled and signed in all respects with the above mentioned claim documents will be submitted by claimant, at his/her own expenses, to Us not later than 30 days from the date of discharge from the Hospital.

We may provide condonation in delay in intimation and claim document submission from timelines as specified above, only in case where You can satisfy Us that such delay was due to reasons beyond the control of the insured.

**Claim payment:**

The benefit shall be payable only with the approval of the Insured named in the Policy and directly to the injured person or his/her legal representative(s), whose receipt shall be a full discharge in respect of the injury of such person. Claim will be paid or rejected within the 30 days from the date of document submission and within the 45 days in case of investigation.

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.

**Subject otherwise to the terms exceptions condition & limitations of the base policy.**