

**Policy Booklet**

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## 1 Your Policy Booklet

This is your policy booklet containing the various terms and conditions governing your policy. This policy booklet should be read in conjunction with the policy schedule.

## 2 Definitions

These definitions apply throughout your policy document.

The definitions are listed alphabetically. Items marked with \* alongside are mentioned in your policy schedule.

Expressions	Meanings
1. Age	is the age last birthday i.e. the age is in completed years.
2. Age at entry *	is the age last birthday on the date of proposal.
3. Annualised premium	is the total amount of premium payable in a policy year.
4. Appointee *	is the person who is so named in the proposal form or subsequently changed by Endorsement, who has the right to give a valid discharge to the policy monies.
5. Annual Basic Sum Assured (ABSA) *	is the sum assured on which the benefit amounts depend. This may be different for different years and would be based on the no-claims bonus.
6. Beneficiary	means the person who is a life assured under this policy and in whose respect the claim is lodged and admitted by the company.
7. Birthday	is the conventional birthday. If it is on 29 <sup>th</sup> February, it will be considered as falling on the last day of February.
8. Company *	means SBI Life Insurance Company Limited.
9. Date of Commencement of Policy *	is the start date of the policy.
10. Date of Commencement of Risk *	is the date from which the insurance liability arises.
11. Date of Maturity *	is the date on which the benefits terminate on expiry of the 5 year policy term.
12. Date of Proposal	refers to the date on which the life assured has signed the proposal form.
13. Date of Revival	is the date on which the policy benefits are restored at the conclusion of the revival process.
14. Day	In the context of this policy and for the calculation of the DHCB, ICUB and Surgical Benefit(s) except Day Care Treatment Benefit, a "Day" in hospital and/or in ICU means a period of confinement of full and complete 24 hours. The first cycle of 24 hours, i.e., one day, shall commence at the time of admission to the hospital / ICU and each subsequent day of 24 hours shall be reckoned from the time of completion of the previous cycle of 24 hours. A stay of 12 hours or less shall not be counted as a Day. If the residual time after reckoning the complete number of days is more than 12 hours, then the residual time would be reckoned as one day.
15. Dependent Children	refers to a child/children (natural or legally adopted), who is financially dependent on the primary insured or proposer on the date

	of proposal, date of revival or date of renewal of cover and does not have his / her independent sources of income.
16. Diagnosis	shall mean a process of determining by examination the causes of illness. It is an investigative analysis made by a physician based upon but not limited to radiological, clinical, and histological or laboratory tests acceptable to the Company
17. Endorsement	a change in any of the terms of the policy, agreed to or issued by us, in writing.
18. Family Policy *	is the policy covering more than one life assured. In addition to self, the following relationships can be covered under a family policy: <ul style="list-style-type: none"> <li>o Spouse</li> <li>o Father</li> <li>o Mother</li> <li>o Father In-Law</li> <li>o Mother In-Law</li> <li>o Dependent Children</li> </ul> A family policy can have up to four members including the policyholder.
19. Free-look period	is the period during which the policyholder has the option to return the policy and cancel the contract.
20. Grace period	the specified period of time immediately following the premium due date during which a payment can be made to continue or renew a policy in-force without loss of continuity of benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.
21. Hospital	A hospital means any institution established for in- patient care and day care treatment of sickness and / or injuries and which has been registered as a hospital with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criteria as under: <ul style="list-style-type: none"> <li>- has at least 10 inpatient beds, in those towns having a population of less than 10,00,000 and 15 inpatient beds in all other places;</li> <li>- has qualified nursing staff under its employment round the clock;</li> <li>- has qualified medical practitioner (s) in charge round the clock;</li> <li>- has a fully equipped operation theatre of its own where surgical procedures are carried out</li> <li>- maintains daily records of patients and will make these accessible to the Insurance company's authorized personnel.</li> </ul>
22. Hospitalization	Hospitalization shall mean admission in any hospital in India upon the written advice of a Medical Practitioner for the purpose of Medically Necessary Treatment of an Illness / Sickness or Injury. The date of hospitalization would be reckoned as the date of occurrence of claim.
23. Hospitalization due to Accident	is defined as hospitalization due to bodily injury caused solely by means of a sudden, external, violent, unforeseeable, unintended, and visible event occurring independently of any other cause. The event does not include any Illness, any naturally occurring or degenerative condition, as proved to the satisfaction of the company.
24. Illness	Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function which manifests itself during the Policy Period and requires medical

	treatment. Illness does not mean and this policy does not cover any mental illness or sickness or disease (including but not limited to a psychiatric condition, disorganisation of personality or mind, or emotions or behaviour) even if caused by or aggravated by or related to an Accident or Illness.
25. In-force	is the status of the policy when all the due premiums have been paid.
26. Installment premium *	is the same as 'Premium'.
27. Instrument	cheque, demand draft, pay order or any other approved mode.
28. Intensive Care Unit (ICU)	Intensive care unit means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
29. Life Assured *	is the person / member of the family who is insured in relation to whom the covers is granted.
30. Lifetime of policy	would refer to the multiple 5-year terms of the policy commencing on the date of commencement of policy and running through date of renewals till the termination of the policy.
31. Medically Necessary Treatment	is defined as any treatment, tests, medication, or stay in hospital or part of a stay in hospital which: <ul style="list-style-type: none"> <li>• is required for the medical management of the illness or injury suffered by the insured;</li> <li>• must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;</li> <li>• must have been prescribed by a medical practitioner;</li> </ul> must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
32. Minor	is a person who is yet to reach 18 <sup>th</sup> birthday.
33. Nominee *	the person who is named as the nominee in the proposal form or subsequently changed by endorsement, as per Section 39 of the Insurance Act, 1938, who has the right to give a valid discharge to the policy monies.
34. Non-participating	does not have a share in our profits.
35. Our, Us, We *	SBI Life Insurance Company Limited or its successors. We are regulated by the Insurance Regulatory and Development Authority (IRDA). The registration number allotted by the IRDA is 111.
36. Physician / Medical Practitioner	Physician/ Medical Practitioner shall mean a qualified allopathic medical practitioner holding a valid and subsisting license, granted by the appropriate licensing authority, registered with the Medical Council of India or state medical council, acting within his scope of license and who is not the Life Assured himself and who is not related to the Life(s) Assured by blood or marriage.
37. Policy Anniversary *	Policy Anniversary is the same date each year during the policy term

	as the date of commencement of policy. If the date of commencement is on 29 <sup>th</sup> of February, the policy anniversary will be taken as the last date of February.
38. Policy document *	This policy, a legal contract between the Policyholder and SBI Life Insurance Company Ltd (the Company), which has been issued on the basis of the Proposal Form wherever applicable and the documents evidencing the insurability of the Life(s) Assured. The Policy contract comprises of the Proposal Form, statements, declarations, reports of medical check-ups (if any), endorsements (if any) and any other documents called for by the company and submitted by the Policyholder for processing the proposal, Policy Schedule(s), and the Terms and Conditions (this booklet). The Company agrees to provide the benefits set out in the Policy in consideration of the premiums paid by the Policyholder, and subject to the payment of renewal premiums as and when due and the benefits are always subject to the terms and conditions mentioned herein.
39. Policy Term *	refers to the 5-years from the date of commencement of the policy, during which the contractual benefits are payable.
40. Policy Year	is the period between two consecutive policy anniversaries.
41. Pre-existing condition	Pre-existing condition means any medical condition, illness / sickness or Injury or related condition(s) (e.g. illnesses, symptoms, treatments, pains and surgery), arising or subsisting within 48 months prior to the date of proposal, which the life(s) assured or Policyholder know, knew or could reasonably have been assumed to have known, irrespective of the fact whether any medical treatment or advice was sought, will be deemed to be pre-existing.
42. Premium *	is the contractual amount payable by the policyholder to secure the benefits under the contract.
43. Premium frequency *	Yearly, Half-yearly, Quarterly or Monthly
44. Premium Due Date	is the date on which you have to pay your due premiums, based on the frequency chosen, to keep the policy in-force.
45. Policyholder *	is the owner of the policy and is referred to as the proposer in the proposal form. The policyholder need not necessarily be the same person as the life assured.
46. Premium paying term	is the period, in years, over which premiums are payable.
47. Reasonable and Customary Length of Stay	is the length of stay that the Company determines as the normal range of stay in a Hospital for a specific health-related service or medical procedure. The reasonableness of the length of stay should be seen in the context of medically necessary treatment as defined earlier.
48. Revival	is the process of restoring the benefits under the policy which are otherwise not available due to non-payment of premiums on due dates, resulting in the lapsation of the policy.
49. Revival period	a 60-day period from the end of grace period.
50. Surgical Benefit	is a lump-sum benefit paid on the happening of a Listed Surgery, Non-Listed Surgery and Day Care Surgery / Treatment.
51. Surrender	is the voluntary termination of the contract by the policyholder.

52. Underwriting	is the process of classification of lives into appropriate homogeneous groups based on the risks covered. Based on underwriting, a decision on acceptance of cover as well as an appropriate premium is taken.
53. You *	The person named as the policyholder.

### 3 Abbreviations

We have used the following abbreviations in the document.

Abbreviation	Stands for
ABSA	Annual Basic Sum Assured
DHCB	Daily Hospitalization Cash Benefit
ICU	Intensive Care Unit
ICUB	Intensive Care Unit Benefit
ECS	Electronic Clearance System
IRDA	Insurance Regulatory and Development Authority
NCB	No Claim Bonus
Rs.	Indian Rupees
UIN	Unique Identification Number, allotted by IRDA for this product
TPA	Third Party Administrator

These abbreviations bear the meanings assigned to them elsewhere in the Policy Booklet.

### 4 Policy Benefits

In the event of any of the life assured being hospitalized for a Medical Necessary Treatment for any illness / sickness or injury, we will pay either one or some or all, of the following benefits, as applicable, for a Reasonable and Customary length of stay. The benefits payable would be fixed in amount based on the number of days of hospitalization or the nature of the medical treatment / surgery and may not have any direct bearing on the actual amount spent on such treatment.

#### 4.1 Daily Hospital Cash Benefit (DHCB):

- 4.1.1 We will pay Daily Hospital Cash Benefit (DHCB) for each completed day of Hospitalization. DHCB is defined as 1% of Annual Basic Sum Assured (ABSA).
- 4.1.2 Life assured is eligible for a maximum of 30 days in the first policy year and 100 days each in subsequent policy years towards DHCB.
- 4.1.3 The unclaimed balance of the ABSA, if any, will not be carried forward to future policy years.

## **4.2 Intensive Care Unit Benefit (ICUB):**

- 4.2.1** We will pay Intensive Care Unit Benefit (ICUB) for each completed day in ICU. ICUB is defined as 2% of ABSA.
- 4.2.2** Life assured is eligible for a maximum of 15 days in the first policy year and 50 days each in the subsequent policy years towards ICUB.
- 4.2.3** If during the period of hospitalization the life assured is admitted partly in ICU and partly outside the ICU but within the Hospital, then, the ICUB will be payable for the completed days spent in ICU and DHCB will be paid for the remaining period of stay.
- 4.2.4** Any particular day of hospitalization will either be considered as a day spent in normal room or a day spent in ICU but not both. We shall pay either the DHCB or the ICUB and not both for a given day of admission.
- 4.2.5** The unclaimed balance of the ABSA, if any, will not be carried forward to future policy years.

## **4.3 Recuperation Benefit:**

- 4.3.1** In the event of the life assured being hospitalized for a continuous period of 10 days or more due to the same ailment or due to the same event of accident and is discharged alive from the hospital, we will pay a Recuperation Benefit of 2% of ABSA.
- 4.3.2** We will pay this benefit irrespective of whether the life assured is admitted to one or more hospitals during one and the same episode as long as there is no break between the two hospitalizations.
- 4.3.3** The unclaimed Recuperation Benefit, if any, cannot be carried forward to the next policy year.
- 4.3.4** In case of hospitalization in more than one hospital for the same episode, we shall reckon the period of stay from the date of admission in the first hospital to the date of discharge from the last hospital provided there is no break in the periods.

## **4.4 Listed Surgical Benefit:**

- 4.4.1** We will pay Listed Surgical Benefit for undergoing a listed surgical procedure depending on the grade of the surgery. The grade-wise list of surgeries is provided at the end of this document.
- 4.4.2** We reserve the right to modify the list of surgeries from time to time, subject to IRDA's approval. We shall inform you of the same.
- 4.4.3** The surgeries covered are classified into different grades based on the type and severity – Grade I, Grade II, Grade III and Grade IV.
- 4.4.4** The benefit payable under Listed Surgical Benefit is 25% of ABSA for surgeries under Grade I, 50% of ABSA for surgeries under Grade II, 75% of ABSA for surgeries under Grade III and 100% of ABSA for surgeries under Grade IV.
- 4.4.5** This benefit is payable only if life assured is hospitalized for at least a day for undergoing listed surgical procedure.
- 4.4.6** The unclaimed balance of the ABSA, if any, will not be carried forward to future policy years.

## **4.5 Non-Listed Surgical Benefit:**

- 4.5.1** In the event of the life assured being hospitalized for a surgical procedure which is not listed under the list of surgeries falling within the scope of Listed Surgical Benefit, we will pay a Non-Listed Surgical Benefit of 7.5% of ABSA.
- 4.5.2** This benefit is payable only if life assured is hospitalized for at least a day for undergoing the surgical procedure.
- 4.5.3** The unclaimed balance of the ABSA cannot be carried forward to the next policy year.



**4.6 Day Care Benefit:**

- 4.6.1 In the event of the life assured undergoing a listed Day Care Surgery, we will pay a Day Care Benefit of 10% of ABSA. Hospitalisation for 24 hours is not mandatory for day care benefit.
- 4.6.2 The list of surgeries covered under Day Care Treatment benefit is provided at the end of this document.
- 4.6.3 We reserve the right to modify the list of surgeries from time to time, subject to IRDA's approval. We shall inform you the same.
- 4.6.4 The unclaimed balance of the ABSA cannot be carried forward to the next policy year.

**4.7 Limits on Benefit payable:**

**4.7.1 Annual Limit:**

- 4.7.1.1 The total claim in the first policy year in aggregate under DHCB and ICUB, put together shall not exceed 30% of ABSA. For each of the subsequent policy years, the total claim shall not exceed the ABSA.
- 4.7.1.2 The total claim in a policy year in aggregate under Listed Surgical Benefit, Non-Listed Surgical Benefit and Day Care Benefit, put together shall not exceed ABSA.
- 4.7.1.3 The Non-Listed Surgical Benefit would be payable for 2 procedures in a policy year.
- 4.7.1.4 The Recuperating Benefit would be payable only once during a policy year.

**4.7.2 Lifetime Limit:**

- 4.7.2.1 The total claim during the lifetime of the policy, in aggregate under DHCB and ICUB, put together shall not exceed 360% of the ABSA.
- 4.7.2.2 The total claim during the lifetime of the policy, in aggregate under Listed Surgical Benefit, Non-Listed Surgical Benefit and Day Care Benefit, put together shall not exceed 300% of the ABSA.
- 4.7.2.3 The Non-Listed Surgical Benefit would be payable for a maximum of 10 procedures during the lifetime of the policy.
- 4.7.2.4 The Recuperating Benefit would be payable for a maximum of 4 times during the lifetime of the policy.

**4.8 Surrender Benefits:**

There is no surrender benefit payable under this policy.

**4.9 Death Benefit:**

There is no death benefit payable under this policy.

**4.10 Maturity Benefit:**

There is no maturity benefit payable under this policy.

**5 Non-forfeiture Benefits**

- 5.1 There is no paid-up value under this policy
- 5.2 There is no surrender value under this policy.

## **6 Premiums**

- 6.1** You have to pay the premiums on the premium due dates or during the grace period.
- 6.2** You have to pay the premiums even if you do not receive renewal premium notice.
- 6.3** You will be liable to pay all applicable taxes and other statutory levies as levied by the Government and other statutory authorities from time to time.
- 6.4** If we receive any amount in excess of the required premium and statutory levies, we will refund the excess without any interest on the excess amount.
- 6.5** If we receive any amount less than the required premium and statutory levies, we will not process the same till you pay the deficit. We will not pay any interest on this amount.
- 6.6** In the case of addition of new life(s) assured to a policy during the policy term, the premium collected for the newly added life(s) assured will only be guaranteed up to the end of the remaining policy term of the first member.

## **7 Renewability**

- 7.1** Your policy will be renewed subject to payment of applicable premium with no underwriting at the time of renewal.
- 7.2** You will have a period of 30 days from the date of maturity to pay the applicable premium and levies.
- 7.3** Cover would not be available for the period for which premium is not received.
- 7.4** If you do not pay the applicable premium and levies within the 30 day period, your policy will terminate.
- 7.5** Premium rates are subject to change on renewal.
- 7.6** You should pay the premium corresponding to the age on renewal.
- 7.7** The revised premium rates would be based on the experience of this portfolio of business.
- 7.8** We will offer a discount of 2.5% on the applicable premium rates.
- 7.9** Any such change in premium rate will be subject to prior approval from IRDA.

## **8 Addition of a new life assured to a Family Policy**

- 8.1** You may add a family member at the time of policy renewal at the end of the then current 5-year term.
- 8.2** You may also add a family member during the policy term.
  - 8.2.1** The cover would be offered from the policy anniversary following the acceptance of cover.
  - 8.2.2** The reason for the addition should be due to marriage or birth / legal adoption of a child during the policy term.
  - 8.2.3** You should request us for this within 90 days from the date of event or at the next policy anniversary.
  - 8.2.4** You will have to submit proof of the event (marriage, birth or adoption).
- 8.3** You should submit an application form and other underwriting requirements.
- 8.4** The premium rate for the new life(s) assured will be as per then applicable premium rates and will be guaranteed till the expiry of the then current 5-year term.
- 8.5** We will calculate Family rebate or the revised family rebate on the addition of the family member.

## **9 Removal of a life assured from a Family Policy**

- 9.1** You may choose to remove a life(s) assured from your family policy during or at the time of policy renewal. On receipt of intimation for the removal of a family member from the family policy, the cover for the member would stop from the next policy anniversary. You should continue to pay the premium for the balance of the policy year.
- 9.2** We will recalculate the instalment premium from the next policy anniversary for the continuing members by re-applying the family rebate.

- 9.3 The revised premiums would take effect from the next policy anniversary.  
 9.4 The family rebate will be as per the following table:

No of members covered under a policy	Rebate (expressed as a % of total tabular premium for all lives covered under a policy)
1	0%
2	5%
3	7.5%
4	10%

## 10 Exclusions

### 10.1 Waiting Period exclusion

- 10.1.1** We shall not pay for any claims arising due to Hospitalization for any Illness / Sickness within the first 30 days from the date of commencement of risk or 30 days from the date of revival except for those arising out of accident(s).

### 10.2 Permanent exclusions

No benefits are available hereunder and no payment will be made by us for any claim for any benefit under this Policy on account of Hospitalization directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- 10.2.1** Self afflicted injuries or conditions (including attempted suicide) and/or conditions/ailments arising out of the use or misuse of any drugs or alcohol or intoxicants of any kind or banned substance.
- 10.2.2** Any sexually transmitted diseases or any condition directly or indirectly caused to or associated with Human Immuno Deficiency (HIV) Virus or any Syndrome or condition of a similar kind commonly referred to as AIDS.
- 10.2.3** War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, acts of terrorism, insurrection military or usurped power of civil commotion or loot or pillage in connection herewith.
- 10.2.4** Police personnel, Naval or military operations(including duties of peace time) of the armed forces or air force and participation in operations requiring the use of arms or which are ordered by military authorities for combating terrorists, rebels and the like.
- 10.2.5** Injury directly or indirectly arising from high risk activities or sports including but not limited to engaging in or taking part in: mountaineering, rock climbing, hunting, potholing, parachuting, parasailing, bungee jumping, canoeing, hang-gliding, hot balloon aviation, daring feats or stunts, driving or riding in any kind of race, scuba diving, skiing, tobogganing, sledging and ice skating.
- 10.2.6** Treatment for injury or illness caused while engaged in criminal or unlawful activities or while resisting arrest.
- 10.2.7** Hospitalization arising out of nuclear disaster, radioactive contamination or chemical radiation and/or release of nuclear or atomic energy; and diseases/injuries arising out of or in connection with the same.
- 10.2.8** Non-allopathic methods of surgery and treatment
- 10.2.9** Hospitalization arising from any psycho-geriatric or psychiatric condition, insanity, mental or nervous breakdown, study and treatment of sleep apnoea, speech therapy, nutritional counselling, hospitalization due to any condition where no active management of the condition is involved or rest cures.
- 10.2.10** Any diagnosis or treatment arising from or traceable to pregnancy -, childbirth including caesarean section, medical termination of pregnancy and/or any treatment related to pre and post natal care of the mother or the new born / Birth control procedures, hospitalization in case of maternity / pregnancy / childbirth / infertility / sterility / erectile dysfunction / impotency/ miscarriage / abortion / contraception / circumcision and any complications of these events. However, this exclusion will not apply to Ectopic Pregnancy.

- 10.2.11** Hospitalization for the sole purpose of physiotherapy or any ailment for which hospitalization is not warranted due to advancement in medical technology.
- 10.2.12** Any treatment not performed by a Physician / Surgeon, registered with the Medical Council of India / State medical council or any treatment of experimental, investigational or pharmacological regimen in nature.
- 10.2.13** Hospitalization primarily for investigatory purpose, diagnosis, X-ray examination, general physical or routine medical examination, OPD procedures and treatments, vaccinations, diagnosis, screening and investigation, preventive medical check-up, / medicines, treatments / examinations specifically for weight reduction or gain or private nursing.
- 10.2.14** Circumcision, vaccination, cosmetic or aesthetic treatments of any description, change of gender surgery, plastic surgery (unless such plastic surgery is necessary for the treatment of Illness or Accidental Bodily Injury as a direct result of the insured event), treatment directly or indirectly related to sterility.
- 10.2.15** Hospitalization where life assured is admitted as a donor for organ transplant.
- 10.2.16** Hospitalization / Surgery for correction of birth defects or congenital anomalies.
- 10.2.17** Dental treatment or surgery of any kind unless necessitated by Accidental Bodily Injury.
- 10.2.18** Hospitalization for treatments for smoking cessation programs and treatment of nicotine addiction
- 10.2.19** Hospitalization for refractive surgery on eye (laser surgery for correction of sight) / LASIK (laser-assisted in situ keratomileusis).
- 10.2.20** Hospitalization for removal of implants done prior to date of commencement of Policy.
- 10.2.21** Hospitalization for rest-cure and Rehabilitation.
- 10.2.22** Sex change or treatment related to sex change, which results from, or is in any way associated with or any complications arising from sex change procedures.
- 10.2.23** Admission to a hospital outside the geographical limits of India.

### **10.3 Pre-Existing Conditions**

- 10.3.1** Pre-existing condition means any medical condition, illness / sickness or Injury or related condition(s) (e.g. illnesses, symptoms, treatments, pains and surgery), arising or subsisting within 48 months prior to the date of proposal, which the life(s) assured or Policyholder know, knew or could reasonably have been assumed to have known such conditions, irrespective of the fact whether any medical treatment or advice was sought, will be deemed to be pre-existing.
- 10.3.2** Hospitalization for pre-existing conditions and their complications are not covered unless declared by the applicant and explicitly accepted by us.
- 10.3.3** Pre-existing conditions declared at the time of proposal and explicitly accepted by us shall be covered after the first 2 policy years provided the life assured is continuously covered under the policy for the first 2 policy years.
- 10.3.4** These conditions would apply individually to all the lives assured under the family policy.

### **10.4 Two-year Exclusion for Specific Ailments**

- 10.4.1** The following conditions will be excluded for 2 years from the date of commencement of risk of each life(s) assured and will apply to each life(s) assured. These conditions shall be covered after 2 years from the date of commencement of risk, provided the life assured is continuously covered under the policy for 2 years:
  - 10.4.1.1** All internal & external benign tumours, cysts, polyps of any kind including benign breast lumps
  - 10.4.1.2** Benign Ear, Nose, Throat disorders
  - 10.4.1.3** Benign Prostate hypertrophy
  - 10.4.1.4** Cataract & age related eye ailments
  - 10.4.1.5** Gastric / Duodenal Ulcer
  - 10.4.1.6** Hernia of all types
  - 10.4.1.7** Hydrocele

- 10.4.1.8** Hysterectomy, Prolapsed uterus, Dysfunctional uterine bleeding / D&C
- 10.4.1.9** Polycystic Ovarian Diseases
- 10.4.1.10** Piles/ Hemorrhoids, Fissure and Fistula in Anus
- 10.4.1.11** Pilonidal Sinus, Sinusitis and related disorders
- 10.4.1.12** Prolapse Inter Vertebral Disc unless arising from accident
- 10.4.1.13** Stone in Gall Bladder & Bile duct
- 10.4.1.14** Stones in Urinary Systems/Dialysis for Renal Failure
- 10.4.1.15** Varicose Veins and Varicose Ulcers
- 10.4.1.16** Age related Osteoarthritis & Osteoporosis
- 10.4.1.17** Joint Replacements due to Degenerative Conditions

## 11 Misstatement of Age

- 11.1** If we find that the correct age of any of the life assured(s) is different from that mentioned in the proposal form, we will check the eligibility for the cover, as on the date of commencement.
- 11.2** If eligible,
- 11.2.1** If the correct age is higher,
- 11.2.1.1** We will call for the difference in premium along with interest at the then prevailing rate.
  - 11.2.1.2** In case of non-payment of difference in premium within the stipulated time, the policy shall stand cancelled ab-initio. You will also forfeit the premiums paid. We shall not be liable for any claim under this policy.
  - 11.2.1.3** The applicable rate of interest will be declared by the company from time to time.
- 11.2.2** If the correct age is lower,
- 11.2.2.1** We will adjust the surplus premium towards subsequent premiums payable. However, in such case, we will not pay any interest on the adjusted amount.
- 11.2.3** If not eligible,
- 11.2.3.1** We will terminate your policy.
  - 11.2.3.2** You will forfeit the premiums paid.
  - 11.2.3.3** We shall not be liable for any claim under this policy.

## 12 No Claim Bonus

- 12.1** For each life assured under the policy, if there is no claim during any policy year, the ABSA would be enhanced by a simple 5% of the ABSA applicable at the commencement of cover.
- 12.2** The increase would be subject to a maximum of 50% of the ABSA at policy commencement. The premium would however remain the same for the life assured(s), till renewal of this policy. However, after renewal, premium will be charged based on the age, ABSA at policy commencement and at the then applicable premium table.
- 12.3** For each life assured, in the event of any claim reported for a policy year and accepted by us, the ABSA shall decrease by 10% on the next policy anniversary. However, the ABSA shall never be reduced below the ABSA at policy commencement.
- 12.4** All benefits i.e. DHCB, ICUB, Recuperation Benefit, Day Care and Surgical Benefit(s), will be increased / decreased as per the change in ABSA.
- 12.5** The increase / decrease in ABSA will be on a life assured basis and not on policy basis and will be based on each life assureds' claim history.
- 12.6** At the time of renewal, the no claim bonus will be granted only for the original plan being continued.
- 12.7** If a policy is not renewed or if the cover for a life assured is not renewed, the no claim bonus for the policy or for the family member(s) covered under a policy, shall not be available at the time of taking another policy.

- 12.8 Non-acceptance of your claim would not affect your NCB.level.  
12.9 The decrease in ABSA would be done even if one of the available benefits is claimed.

### 13 Claims

- 13.1 The policyholder/nominee/legal heir or any of the life(s) assured should intimate the claim in writing stating at least the policy number and the nature of the illness/claim.
- 13.2 We will require the following documents :
- 13.2.1 Copy of policy document
  - 13.2.2 Claim form
  - 13.2.3 Treating doctor's certificate
  - 13.2.4 Attested Copy of the Discharge card, indoor case papers, final hospital bill and all medical investigation reports, documents related to hospitalizations
  - 13.2.5 Any other document as the TPA / company may require depending on type / cause of claim
  - 13.2.6 Identity Proof of the policyholder
  - 13.2.7 Age Proof of the life assured
  - 13.2.8 PAN card copy of the Policyholder (for online policies)
  - 13.2.9 Direct Credit Mandate of the Policyholder
- 13.3 We will pay the claim amount to the Policyholder.
- 13.4 If the Policy Holder dies, we will pay any outstanding benefit
- 13.4.1 To the nominee
  - 13.4.2 To the legal heir, if nomination is not valid
- 13.5 If the Policy Holder otherwise is not in a position to receive the benefit, we will pay the benefit to nominee / legal heir.
- 13.6 Any hospitalization should be intimated to us at least 48 hours before the hospitalization in case of planned hospitalization or within 24-hours in case of emergency hospitalization. The claim should be intimated to us, within 30 days from the date of discharge from hospital.
- 13.7 However, without prejudice, in case of delay in intimation beyond the stipulated period, we, at our sole discretion, may condone such delay and examine the admissibility or otherwise of the claim, if such delay is proved to be for reasons beyond the control of the policyholder/nominee / legal heir.
- 13.8 Once a claim is accepted, we would not accept any claim incurred earlier than the recently accepted claim.

### 14 General Terms

#### 14.1 Free-look period

- 14.1.1 If you have purchased the policy through distance marketing channel, you have 30 days from the date of the receipt of this policy document to review its terms and conditions. If you are not satisfied, you can return the policy stating the reasons for objection.
- 14.1.2 If you have purchased the policy through a channel other than distance marketing, you have 15 days from the date of the receipt of this policy document to review its terms and conditions. If you are not satisfied, you can return the policy stating the reasons for objection.
- 14.1.3 You cannot return the policy after you have made a claim.
- 14.1.4 We shall refund you the amount arrived as per the following formula:  
  
Premium  
*Plus* Corresponding Service Tax and Cess  
*Minus* Proportionate Risk Premium along with the corresponding Service Tax and Cess,  
proportionate to the period you were covered

*Minus Cost of Stamp Duty,  
Minus Medical Expenses, if any*

- 14.1.5** You cannot revive, reinstate or restore your policy once you have returned your policy.
- 14.1.6** We will not pay any benefit under your policy after we receive the free-look cancellation request.

## **14.2 Grace period**

- 14.2.1** You can pay your premiums within a grace period of 30 days from the due dates for premium frequencies of yearly, half-yearly and quarterly and within a grace period of 15 days from the due dates for premium frequencies of monthly.
- 14.2.2** Coverage is not available for the period for which no premium is received.

## **14.3 Policy loan**

Your policy will not be eligible for any loans.

## **14.4 Assignment**

We do not permit assignment under this policy.

## **14.5 Participation in profits**

Your policy does not participate in our profits.

## **14.6 Taxation**

- 14.6.1** You are liable to pay service tax, cess and other statutory levies as per the applicable rates along with the premium.
- 14.6.2** Taxes and statutory levies may change and would be subject to future changes in taxation laws.

## **14.7 Date formats**

Unless otherwise stated, all dates described and used in the policy schedule are in dd/mm/yyyy formats.

## **14.8 Electronic transactions**

We shall accept premiums and pay benefits through any approved modes including electronic transfers.

## **14.9 Revival**

You can revive your policy during its revival period of 60 days from the end of grace period. Such revivals will be subject to the following:

- 14.9.1** No claim shall be admissible for any hospitalization, occurring during the revival period
- 14.9.2** On revival a fresh 30-days waiting period shall be applicable from the date of revival.
- 14.9.3** We shall not reset the 2-year exclusion period for pre-existing conditions or the 2-year exclusion period for specific ailments.
- 14.9.4** You have to submit Good Health Declaration and satisfy other underwriting requirements, if any.
- 14.9.5** We may accept or reject your revival request. We will inform you the same. Your cover would recommence only after we confirm the same.
- 14.9.6** You have to pay all the outstanding premiums at the time of revival, along with applicable interest rate, prevailing at the time of revival.
- 14.9.7** If the policy is not revived during the revival period, the policy and all the benefits under the policy will cease.

**14.9.8** You cannot revive after the end of revival period and the policy terminates.

#### **14.10 Nomination**

**14.10.1** You have to make a nomination as per provisions of Section 39 of the Insurance Act, 1938.

**14.10.2** You can change the existing nominee during the term of the policy.

**14.10.3** Nomination is for the entire policy and not for a part of the policy.

**14.10.4** We do not express any opinion on the validity or accept any responsibility in respect of any nomination you make.

**14.10.5** The information regarding nomination or change of nomination is to be sent in writing to us.

#### **14.11 Non-Disclosure**

**14.11.1** We have issued your policy based on your statement in your proposal form, personal statement, medical reports and any other documents.

**14.11.2** If we find that any of this information is inaccurate or false or you have withheld any material information, we shall declare your policy null and void but subject to Section 45 of the Insurance Act 1938.

**14.11.3** In such event, we will not pay any benefit and we will also not return the amount you have paid. We also reserve the right to recover the claim amount already paid to you.

#### **14.12 Right to decline full or part of the claim**

**14.12.1** If, based on the documents submitted, at the time of making the claim or documents subsequently called for or based on information from any other reliable source, we have evidence to conclude that the hospitalization or the Day Care Treatment, was for condition not medically necessary or if reasonable and customary length of stay has been exceeded in the hospital or the ICU, we reserve the right to decline the claim in full or in part as deemed necessary from the evidence that is available.

## **15 Termination**

### **15.1 Termination or stoppage of cover**

The cover will end on the earliest of the following:

**15.1.1** If you have not paid the premiums when due

**15.1.2** On the next policy anniversary date, for the member being removed for reasons other than death

**15.1.3** On the date of death of life assured

**15.1.4** The date on which your policy terminates

**15.1.5** The date on which we receive free-look cancellation request.

### **15.2 Termination of your policy**

Your policy will terminate:

**15.2.1** On the death of all the life(s) assured covered under the policy

**15.2.2** At the end of 30 days from date of maturity, if the policy is not renewed

**15.2.3** At the end of the revival period, if you have not revived

**15.2.4** On the payment of free-look cancellation amount

**15.2.5** If we believe that you or any insured person or anyone acting on your behalf or on if we believe that you or any insured person or anyone acting on your behalf or on behalf of an insured person has acted in a dishonest or fraudulent manner under or in relation to this policy or the continuance of the policy poses a moral hazard then we may terminate this policy upon 30 days notice without refund of premium.



## 16 Notices

- 16.1** We will communicate to you in writing and deliver the correspondence by hand, post, facsimile, e-mail or any other approved mode.
- 16.2** We will send correspondence to the mailing address you have provided in the proposal form or to the changed address.
- 16.3** You should also communicate in writing and deliver the correspondence by hand, post, facsimile, e-mail or any other approved mode.
- 16.4** All your correspondence should be addressed to:  
SBI Life Insurance Company Limited,  
Central Processing Centre,  
Kapas Bhawan, Sector – 10,  
CBD Belapur,  
Navi Mumbai – 400 614.  
Telephone: No + 91 - 022 - 6645 6241  
Fax No. : + 91 - 022 – 6645 6655  
E-mail: [info@sbilife.co.in](mailto:info@sbilife.co.in)
- 16.5** It is important that you keep us informed of your changed address and any other communication details.

## 17 Complaints

### 17.1 Grievance Redressal procedure

- 17.1.1** If you have any query, complaint or grievance, you may approach any of our offices.
- 17.1.2** You can also call us on our toll-free number.
- 17.1.3** If you are not satisfied with our decision or have not received any response within 10 working days, you may write to us at:  
Head – Client Relationship,  
SBI Life Insurance Company Limited  
Central Processing Centre,  
Kapas Bhawan, Sector – 10,  
CBD Belapur,  
Navi Mumbai – 400 614.  
Telephone: +91 - 022 – 6645 6241  
Fax: +91 - 022 – 6645 6655  
Email Id: [info@sbilife.co.in](mailto:info@sbilife.co.in)
- 17.1.4** In case you are not satisfied with our decision and the issue pertains to provision 12 (1) of the Redressal of Public Grievances Rules, 1998, you may approach the Insurance Ombudsman. You can make the complaint to the Ombudsman as per provision 13 of the said rules. The relevant provisions have been mentioned in the section ‘Relevant Statutes’.
- 17.1.5** The address of the Insurance Ombudsman and the Redressal of Public Grievances Rules, 1998, are, available on the website of IRDA, <http://www.irdaindia.org> and in our website <http://www.sbilife.co.in>. The address of the ombudsman at Mumbai is:  
Office of the Insurance Ombudsman (Maharashtra and Goa)  
3rd Floor, Jeevan Seva Annexe,  
S.V. Road, Santa Cruz (W),  
Mumbai – 400 054.  
Telephone No.: +91 – 22 – 2610 6928  
Fax No. : +91 – 22 – 2610 6052  
E-mail: [ombudsmanmumbai@gmail.com](mailto:ombudsmanmumbai@gmail.com)

17.1.6 We have also enclosed a list of addresses of insurance ombudsmen.

## 18 Relevant Statutes

### 18.1 Governing laws and jurisdiction

This is subject to prevailing Indian Laws. Any dispute that may arise in connection with this shall be subject to the jurisdiction of the competent Courts of Mumbai.

### 18.2 Section 41 of the Insurance Act 1938

(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 prospectus or tables of the insurer.

**Provided** that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a *bona fide* insurance agent employed by the insurer.

(2) Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

### 18.3 Section 45 of the Insurance Act 1938

No policy of Life Insurance effected before the commencement of this Act shall after the expiry of two years from the date of commencement of this Act and no policy of Life Insurance effected after the coming into force of this Act shall, after the expiry of two years from the date on which it was effected, be called in question by an insurer on the ground that a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the policy, was inaccurate or false, unless the insurer shows that such statements was on a material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the Policyholder and that the Policyholder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose; Provided that 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

### 18.4 Provision 12 (1) of Redressal of Public Grievances Rules, 1998

The Ombudsman may receive and consider

- (a) Complaints under Rule 13
- (b) Any partial or total repudiation of claims by an insurer
- (c) Any dispute in regard to premium paid or payable in terms of the policy
- (d) Any dispute on the legal construction of the policy, insofar as such disputes relate to claims
- (e) Delay in settlement of claims
- (f) Non-issue of any insurance document to customers after receipt of premium

### 18.5 Provision 13 of Redressal of Public Grievances Rules, 1998

- (1) any person who has a grievance against an insurer, may himself or through his legal heirs make a complaint in writing to the Ombudsman within whose jurisdiction the branch or office of the insurer complained against is located.

(2) the complaint shall be in writing duly signed by the complainant or through his legal heirs and shall state clearly the name and address of the complainant, the name of the branch or office of the insurer against which the complaint is made, the fact giving rise to complaint supported by documents, if any, relied on by the complainant, the nature and extent of the loss caused to the complainant and the relief sought from the Ombudsman.

(3) no complaint to the Ombudsman shall lie unless –

(a) the complainants had before making a complaint to the Ombudsman made a written representation to the insurer named in the complaint and either insurer had rejected the complaint or the complainant had not received any reply within a period of one month after the insurer concerned received his representation or the complainant is not satisfied with the reply given to him by the insurer.

(b) the complaint is made not later than one year after the insurer had rejected the representation or sent his final reply on the representation of the complainant, and

(c) the complaint is not on the same subject matter, for which any proceedings before any Court, or Consumer Forum or Arbitrator is pending or were so earlier.



We request you to read this Policy Booklet along with the Policy Schedule. If you find any errors, please return the policy for effecting corrections.

\*\*\*\*\*End of Policy Booklet\*\*\*\*\*

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**Annexure A: Listed Surgeries**

Sr. No.	Procedure Name	% of ABSA payable
<b>Surgeries On The Eyes</b>		
1	Corneal Transplantation and keratoprosthesis	25%
2	Discision of lens and capsulotomy	25%
3	Fixation of the retina by sealing (plombage)	25%
4	Fixation of the retina by cerclage of the eyeball	25%
5	Other operations for fixation of retina	25%
6	Excision and destruction of diseased tissue of the retina	25%
7	Excision and destruction of diseased tissue of the choroid	25%
8	Removal of the eyeball (enucleation)	25%
9	Operations on the optic nerve	25%
<b>Surgeries On The Blood Vessels</b>		
10	Patchplasty of blood vessels	50%
11	Repair of blood vessels with prosthetic or venous graft	75%
12	Repair of blood vessels without prosthetic or venous graft	75%
13	Ligature and partial occlusion of vena cava	75%
14	Vascular reconstruction (bypass) procedures to improve circulation of lower limbs	75%
15	Vascular reconstruction (bypass) procedures to improve circulation of upper limbs	75%
16	Stenting of blood vessels	75%
17	Repair of poplital anurism	75%
18	Carotid endarterectomy	75%
19	Insertion of an intra-abdominal venous shunt	75%
20	Insertion of an arteriovenous shunt	75%
21	Operations on the carotid body	75%
22	Operations on other paraganglia	75%
<b>Surgeries On Veins</b>		
23	Open removal of thrombus from vein	25%
<b>Surgeries On Endocrine Glands</b>		
24	Incision in the region of the thyroid	25%
25	Hemithyroidectomy	25%
26	Other partial thyroid resection	25%
27	Thyroidectomy	25%
28	Partial parathyroid gland resection	25%
29	Parathyroidectomy	25%
30	Partial adrenalectomy	25%
31	Bilateral adrenalectomy	25%
32	Other operations on the adrenals	25%
33	Excision and resection of diseasedtissue of the pineal body	25%
34	Other operations on the pituitary	25%
35	Excision and resection of the thymus	25%
36	Excision and resection of diseased tissue of the pituitary	75%
<b>Surgeries On The Pharynx, Larynx And Trachea</b>		
37	Excision and destruction of diseased tissue of the pharynx	25%
38	Excision and destruction of diseased tissue of the larynx	25%
39	Hemilaryngectomy	25%
40	Other partial laryngectomy	25%
41	Laryngectomy	25%
42	Temporary tracheostomy	25%
43	Permanent tracheostomy	25%
44	Excision, resection and destruction of diseased tissue of the trachea (including endoscopic)	25%
45	Pharyngotomy	75%

46	Pharyngoplasty	75%
47	Reconstruction of the pharynx	75%
48	Reconstruction of the larynx	75%
49	Reconstruction of the trachea	75%
<b>Surgeries On The Renal Tract</b>		
50	Percutaneous-transrenal nephrotomy	25%
51	Percutaneous-transrenal nephrostomy	25%
52	Open surgical nephrotomy	25%
53	Open surgical nephrostomy	25%
54	Open surgical pyelotomy	25%
55	Open surgical pyelostomy	25%
56	Uretero-ureterostomy	25%
57	Intubated ureterostomy	25%
58	Ureteric resection and ureterectomy	25%
59	Cutaneous urinary diversion by ureterocutaneostomy (incontinent stoma)	25%
60	Cutaneous urinary diversion with gut conduit (incontinent stoma)	25%
61	Cutaneous urinary diversion with gut reservoir (continent stoma)	25%
62	Internal urinary diversion through the gut	25%
63	Reconstruction of ureter	25%
64	Transurethral incision, excision, destruction and resection of diseased tissue of the urinary bladder	25%
65	Surgical excision and destruction of diseased tissue of the urinary bladder	25%
66	Partial urinary bladder resection	25%
67	Open surgical urethrotomy and urethroscopy	25%
68	Excision, destruction & resection of diseased tissue of the urethra	25%
69	Urethrectomy as a separate procedure	25%
70	Reconstruction of the urethra	25%
71	Transurethral incision of diseased tissue of the urethra	25%
72	Incision and excision of retroperitoneal tissue	25%
73	Tightening of the Urethrovesical tissue	25%
74	Therapeutic endoscopic operations on calculus of kidney	25%
75	Excision and destruction of diseased tissue of the kidney	75%
76	Partial resection of the kidney	75%
77	Nephrectomy	75%
78	Reimplantation of the kidney	75%
79	Cystectomy	75%
80	Replacement of urinary bladder	75%
<b>Surgeries On The Skin And Subcutaneous Tissues</b>		
81	Radical and extensive excision of diseased tissue in the skin and subcutaneous tissues	25%
82	Flap operations to relax contracture of skin	25%
83	Free flap plasty	75%
84	Tissue expander surgery	75%
<b>Surgeries On The Heart</b>		
85	Pericardiotomy and cardiomy	50%
86	Excision and destruction of diseased tissue of the pericardium and pericardiectomy	50%
87	Revascularisation of the heart	75%
88	Excision and destruction of diseased tissue of the heart	75%
89	Reconstruction of the pericardium and heart	75%
90	Implantation and removal of a cardiac mechanical assist device, open surgery	75%
<b>Surgeries On The Jaw And Facial Bones</b>		
91	Arthroplasty of mandibular joint	75%
92	Plastic reconstruction of maxilla	75%
93	Plastic reconstruction of mandible	75%
94	Osteotomy to displace lower face	75%
95	Osteotomy to displace the mid-face	75%

<b>Surgeries On The Lung And Bronchus</b>		
96	Excision and destruction of diseased tissue of a bronchus	25%
97	Excision and destruction of diseased tissue of the mediastinum	25%
98	Excision and destruction of diseased tissue of the chest wall	25%
99	Atypical lung resection	50%
100	Segmental resection of a lung	50%
101	Simple lobectomy of the lung	50%
102	Simple bilobectomy of the lung	50%
103	Extended lobectomy (unilateral)	75%
104	Extended lobectomy (bilateral)	75%
105	Extended bilobectomy of the lung (unilateral)	75%
106	Extended bilobectomy of the lung (bilateral)	75%
107	Release of adhesions in the lung and chest wall	75%
108	Reconstruction of the lungs and bronchi	75%
<b>Surgeries On The Breast</b>		
109	Partial (breast preserving) excision of the breast and destruction of breast tissue without axillary lymphadenectomy	25%
110	Partial (breast preserving) excision of the breast and destruction of breast tissue with axillary lymphadenectomy	25%
111	Simple Mastectomy without axillary lymphadenectomy	25%
112	Simple Mastectomy with axillary lymphadenectomy	25%
113	Extended mastectomy	25%
<b>Surgeries On The Male Sexual Organs</b>		
114	Open prostatectomy	50%
<b>Surgeries On The Mouth And Face</b>		
115	Total Glossectomy	25%
<b>Surgeries On The Nervous System</b>		
116	Craniotomy through the calvaria/ Burrhole	25%
117	Incision of the skull bones (craniotomy and craniectomy)	25%
118	Excision and destruction of diseased intracranial tissue	25%
119	Excision and destruction of diseased tissue of the skull bones	25%
120	Incision, resection and destruction of the intracranial sections of cranial nerves and ganglia	25%
121	Surgery for brain tumors	25%
122	Access to the craniocervical junction and the cervical spinal column	25%
123	Access to the thoracic spinal column	25%
124	Access to the lumbar spinal column, sacrum and coccyx	25%
125	Incision of the spinal cord and spinal meninges	25%
126	Excision and destruction of diseased tissue of the spinal cord and the spinal meninges	25%
127	Excision and destruction of diseased tissue of nerves	25%
128	Incision, excision, destruction and occlusion of intracranial blood vessels	75%
129	Reconstruction of intracranial blood vessels	75%
130	Operations on intraspinal blood vessels	75%
<b>Surgeries On The Digestive Tract</b>		
131	Oesophagostomy as a separate procedure	25%
132	Local excision and destruction of diseased tissue of the oesophagus	25%
133	Operation on the pylorus	25%
134	Local excision and destruction of diseased gastric tissue (including endoscopy)	25%
135	Extended subtotal gastric resection without systematic lymphadenectomy	25%
136	Extended subtotal gastric resection with systematic lymphadenectomy	25%
137	Extended gastrectomy without systematic lymphadenectomy	25%
138	Local excision and destruction of diseased tissue of the small bowel	25%
139	Endoscopic local excision and destruction of diseased tissue of the small bowel	25%
140	Local excision and destruction of diseased tissue of the large bowel	25%
141	Endoscopic local excision and destruction of diseased tissue of the large bowel	25%

142	Exclusion of a bowel segment as a separate procedure (e.g. with two plastic operations)	25%
143	Partial resection of large bowel (excluding appendisectomy)	25%
144	Bypass anastomosis of bowel	25%
145	Insertion of an enterostomy, double lumen as a separate procedure	25%
146	Insertion of an enterostomy, terminal as a separate procedure	25%
147	Insertion of an enterostomy (protective measure) in the course of another procedure	25%
148	Insertion of other enterostomies	25%
149	Retrodisplacement of a double lumen enterostomy	25%
150	Other reconstruction of the bowel	25%
151	Perianal local excision and destruction of diseased tissue of the rectum	25%
152	Reconstruction of the rectum	25%
153	Anastomosis of the pancreatic duct	25%
154	Opening of the retroperitoneum	25%
155	Excision of gall bladder	25%
156	Open introduction of prosthesis into bile duct	25%
157	Partial oesophageal resection without restoration of continuity	50%
158	Atypical partial gastric resection	50%
159	Partial gastric resection (2/3 resection)	50%
160	Subtotal gastric resection (4/5 resection)	50%
161	(Total) gastrectomy	50%
162	Rectal resection without preservation of the sphincter	50%
163	Partial liver resection	50%
164	Excision of bile duct	50%
165	Total excision of spleen	50%
166	Partial oesophageal resection with restoration of continuity	75%
167	Reconstruction of the oesophageal passage as a separate procedure	75%
168	Extended gastrectomy with systematic lymphadenectomy	75%
169	Resection of small bowel	75%
170	(Total) colectomy and proctocolectomy	75%
171	Extended colon resection with resection of small bowel segments without removal of other neighbouring organs	75%
172	Extended colon resection with resection of small bowel segments and removal of other neighbouring organs	75%
173	Rectal resection with preservation of the sphincter	75%
174	Local excision and destruction of diseased tissue of the liver (atypical liver resection)	75%
175	Anatomical (typical) liver resection	75%
176	Local excision and destruction of diseased tissue of the pancreas	75%
177	Partial resection of the pancreas	75%
<b>Surgeries On The Female Sexual Organs</b>		
178	Bilateral salpingo-oophorectomy and total abdominal hysterectomy	25%
179	Salpingectomy (total)	25%
180	Amputation of the uterine cervix	25%
181	Total hysterectomy	25%
182	Radical cervical stump removal	25%
183	Excision and destruction of diseased tissue of the parametrium	25%
184	Vulvectomy	25%
185	Radical vulvectomy	25%
186	Radical hysterectomy	50%
187	Exenteration (evisceration) of the lesser pelvis	50%
188	Occlusion and (sub)-total removal of vagina	75%
189	Reconstruction of the vulva and the perineum	75%
<b>Traumatological Surgeries And Orthopaedics</b>		
190	Open reduction on fracture of the pelvic brim and pelvic girdle with internal fixation	50%
191	Intervertebral discectomy	50%
192	Intervertebral micro discectomy	50%



193	Spinal decompression procedures	50%
194	Closed reposition of spine with external supporters	50%
195	Vertebral body prosthesis and complex reconstruction on spine (e.g. kyphosis or scoliosis)	50%
196	Bone graft	75%
197	Bone transport	75%
198	Open reduction on multiple fracture in joint area of a tubular bone with internal fixation	75%
199	Open reduction on multiple fracture of small bones and small joints with internal fixation	75%
200	Open reduction on fracture of acetabulum and head of femur with internal fixation and open reposition of dislocated hip	75%
201	Total hip replacement	75%
202	Partial hip replacement	75%
203	Knee replacement	75%
204	Shoulder joint replacement	75%
205	Elbow joint replacement	75%
206	Closed reposition of spine with external fixation	75%
207	Open reposition of spine with internal fixation	75%
208	Spondylodesis	75%
209	Replantation upper limb	75%
210	Replantation lower limb	75%
211	Hind quarter amputation	75%
212	Hemipelvectomy and scapulothoracic disarticulation	75%
<b>Surgeries Covered Under Grade IV</b>		
213	Coronary Artery Bypass grafting	100%
214	Major surgery of Aorta	100%
215	Surgery to remove cerebral tumors (benign or malignant) and space occupying lesions requiring "craniotomy"	100%
216	Repair of Cerebral or Spinal Arterio Venous malformations and Cerebral Aneurysms	100%
217	Open chest surgery for Valve replacement using mechanical prosthesis	100%
218	Major organ transplant ( Lung, Heart, Liver, Renal, Pancreas )	100%
219	Pneumonectomy or pleuropneumoectomy -total lung of one side	100%
220	Total excision of pituitary / pineal glands	100%
221	Pericardectomy done in chronic constrictive pericarditis	100%
222	Total Excision oesophagus and stomach	100%
223	Total pancreatectomy	100%

**Annexure B: Day Care Surgeries**

<b>S. No</b>	<b>Day Care Procedure</b>	<b>% of ABSA payable</b>
	<b>Microsurgical operations on the middle ear</b>	
1	Stapedectomy	10%
2	Revision of a stapedectomy	10%
3	Other operations on the auditory ossicles	10%
4	Myringoplasty (Type -I Tympanoplasty)	10%
5	Tympanoplasty (closure of an eardrum perforation/reconstruction of the auditory ossicles)	10%
6	Revision of a tympanoplasty	10%
7	Other microsurgical operations on the middle ear	10%
	<b>Other operations on the middle &amp; internal ear</b>	
8	Myringotomy	10%
9	Removal of a tympanic drain	10%
10	Incision of the mastoid process and middle ear	10%
11	Mastoidectomy	10%
12	Reconstruction of the middle ear	10%
13	Other excisions of the middle and inner ear	10%
14	Fenestration of the inner ear	10%
15	Revision of a fenestration of the inner ear	10%
16	Incision (opening) and destruction (elimination) of the inner ear	10%
17	Other operations on the middle and inner ear	10%
	<b>Operations on the nose &amp; the nasal sinuses</b>	
18	Excision and destruction of diseased tissue of the nose	10%
19	Operations on the turbinates (nasal concha)	10%
20	Other operations on the nose	10%
21	Nasal sinus aspiration	10%
	<b>Operations on the eyes</b>	
22	Incision of tear glands	10%
23	Other operations on the tear ducts	10%
24	Incision of diseased eyelids	10%
25	Excision and destruction of diseased tissue of the eyelid	10%
26	Photocoagulation of retina for detachment	10%
27	Operations on the canthus and epicanthus	10%
28	Corrective surgery for entropion and ectropion	10%
29	Corrective surgery for blepharoptosis	10%
30	Removal of a foreign body from the conjunctiva	10%
31	Removal of a foreign body from the cornea	10%
32	Incision of the cornea	10%
33	Operations for pterygium	10%
34	Other operations on the cornea	10%
35	Removal of a foreign body from the lens of the eye	10%
36	Removal of a foreign body from the posterior chamber of the eye	10%
37	Removal of a foreign body from the orbit and eyeball	10%
38	Operation of cataract	10%
	<b>Operations on the skin &amp; subcutaneous tissues</b>	10%
39	Incision of a pilonidal sinus	10%

40	Other incisions of the skin and subcutaneous tissues	10%
41	Surgical wound toilet (wound debridement) and removal of diseased tissue of the skin and subcutaneous tissues	10%
42	Local excision of diseased tissue of the skin and subcutaneous tissues	10%
43	Other excisions of the skin and subcutaneous tissues	10%
44	Simple restoration of surface continuity of the skin and subcutaneous tissues	10%
45	Free skin transplantation, donor site	10%
46	Free skin transplantation, recipient site	10%
47	Revision of skin plasty	10%
48	Other restoration and reconstruction of the skin and subcutaneous tissues	10%
49	Chemosurgery to the skin	10%
50	Destruction of diseased tissue in the skin and subcutaneous tissues	10%
	<b>Operations on the tongue</b>	
51	Incision, excision and destruction of diseased tissue of the tongue	10%
52	Partial glossectomy	10%
53	Reconstruction of the tongue	10%
54	Other operations on the tongue	10%
	<b>Operations on the salivary glands &amp; salivary ducts</b>	
55	Incision and lancing of a salivary gland and a salivary duct	10%
56	Excision of diseased tissue of a salivary gland and a salivary duct	10%
57	Resection of a salivary gland	10%
58	Reconstruction of a salivary gland and a salivary duct	10%
59	Other operations on the salivary glands and salivary ducts	10%
	<b>Other operations on the mouth &amp; face</b>	
60	External incision and drainage in the region of the mouth, jaw and face	10%
61	Incision of the hard and soft palate	10%
62	Excision and destruction of diseased hard and soft palate	10%
63	Incision, excision and destruction in the mouth	10%
64	Plastic surgery to the floor of the mouth	10%
65	Other operations in the mouth	
	<b>Operations on the tonsils &amp; adenoids</b>	10%
66	Transoral incision and drainage of a pharyngeal abscess	10%
67	Tonsillectomy without adenoidectomy	10%
68	Tonsillectomy with adenoidectomy	10%
69	Excision and destruction of a lingual tonsil	10%
70	Other operations on the tonsils and adenoids	10%
	<b>Trauma surgery and orthopaedics</b>	
71	Incision on bone, septic and aseptic	10%
72	Closed reduction on fracture, luxation or epiphyseolysis with osteosynthesis	10%
73	Suture and other operations on tendons and tendon sheath	10%
74	Reduction of dislocation under GA	10%
75	Arthroscopic knee aspiration	10%
	<b>Operations on the breast</b>	
76	Incision of the breast	10%
77	Operations on the nipple	10%
	<b>Operations on the digestive tract</b>	
78	Incision and excision of tissue in the perianal region	10%
79	Surgical treatment of anal fistulas	10%
80	Surgical treatment of haemorrhoids	10%
81	Division of the anal sphincter (sphincterotomy)	10%

82	Other operations on the anus	10%
83	Ultrasound guided aspirations	10%
84	Sclerotherapy etc	10%
85	Laparoscopic cholecystectomy	10%
	<b>Operations on the female sexual organs</b>	
86	Incision of the ovary	10%
87	Insufflation of the Fallopian tubes	10%
88	Other operations on the Fallopian tube	10%
89	Dilatation of the cervical canal	10%
90	Conisation of the uterine cervix	10%
91	Other operations on the uterine cervix	10%
92	Incision of the uterus (hysterotomy)	10%
93	Therapeutic curettage	10%
94	Culdotomy	10%
95	Incision of the vagina	10%
96	Local excision and destruction of diseased tissue of the vagina and the pouch of Douglas	10%
97	Incision of the vulva	10%
98	Operations on Bartholin's glands (cyst)	10%
	<b>Operations on the prostate &amp; seminal vesicles</b>	
99	Incision of the prostate	10%
100	Transurethral excision and destruction of prostate tissue	10%
101	Transurethral and percutaneous destruction of prostate tissue	10%
102	Open surgical excision and destruction of prostate tissue	10%
103	Radical prostatovesiculectomy	10%
104	Other excision and destruction of prostate tissue	10%
105	Operations on the seminal vesicles	10%
106	Incision and excision of periprostatic tissue	10%
107	Other operations on the prostate	10%
	<b>Operations on the scrotum &amp; tunica vaginalis testis</b>	
108	Incision of the scrotum and tunica vaginalis testis	10%
109	Operation on a testicular hydrocele	10%
110	Excision and destruction of diseased scrotal tissue	10%
111	Plastic reconstruction of the scrotum and tunica vaginalis testis	10%
112	Other operations on the scrotum and tunica vaginalis testis	10%
	<b>Operations on the testes</b>	
113	Incision of the testes	10%
114	Excision and destruction of diseased tissue of the testes	10%
115	Unilateral orchidectomy	10%
116	Bilateral orchidectomy	10%
117	Reconstruction of the testis	10%
118	Implantation, exchange and removal of a testicular prosthesis	10%
	<b>Operations on the spermatic cord, epididymis und ductus deferens</b>	
119	Surgical treatment of a varicocele and a hydrocele of the spermatic cord	10%
120	Excision in the area of the epididymis	10%
121	Epididymectomy	10%
122	Reconstruction of the spermatic cord	10%
123	Reconstruction of the ductus deferens and epididymis	10%
124	Other operations on the spermatic cord, epididymis and ductus deferens	10%
125	Operations on urethral orifice	10%

	<b>Operations on the penis</b>	
126	Operations on the foreskin	10%
127	Local excision and destruction of diseased tissue of the penis	10%
128	Amputation of the penis	10%
129	Plastic reconstruction of the penis	10%
130	Other operations on the penis	10%
	<b>Operations on the urinary system</b>	
131	Cystoscopical removal of stones	10%
	<b>Other Operations</b>	
132	Lithotripsy	10%
133	Coronary angiography	10%
134	Haemodialysis	10%
135	Radiotherapy for Cancer	10%
136	Cancer Chemotherapy	10%