



MASTER POLICY SCHEDULE-RELIANCE COVID-19 INDEMNITY POLICY

Address of Issuing Office:	Address of Servicing Branch Office:
Policy Issuing Office: Reliance General Insurance Co. Ltd. Reliance Centre, South Wing, 4th Floor, Off. Western Express Highway, Santacruz (East), Mumbai - 400055.	C-1, 3rd Floor, New Krishna Park, Adjutant to Janakpuri Metro Station West, NEW DELHI, NEW DELHI, DELHI - 110018

Details of the Master Policy Holder:	
Master Policy No :	920292028560000168
Date of proposal and declaration:	08 Jun 2020
GSTIN/UIN of Master Policy Holder:	
Master Policy Holder Name	BAJAJ CAPITAL FINANCIAL SERVICES LTD
Correspondence Address of the Master Policy Holder:	MEZZANINE FLOOR, BAJAJ HOUSE 97, NEHRU PLACE NEW DELHI 110019
Master Policy Period:	Policy Start Date: 08/06/2020 Policy End Date: 07/06/2021

Plan Details	
Plan Name	BAJAJ CAPITAL SILVER PLAN
Sum Insured	50000, 100000, 200000, 300000, 500000
Add on Covers Opted	NA

The coverage's under Reliance COVID-19 Indemnity Insurance are listed below:	
Covers	Short Description
Hospitalisation Cover due to Diagnosis of presence of COVID-19	The Company indemnifies the Insured Person up to the Sum Insured, for medical expenses incurred on Hospitalization of Insured Person due to Diagnosis of presence of COVID-19
Pre-Hospitalisation Cover	The Company indemnifies the Insured Person for the medical expenses incurred up to 30 days prior to date of Hospitalization
Post -Hospitalisation Cover	The Company indemnifies the Insured Person for the medical expenses incurred up to 60 days post discharge from the Hospital

Plan Details	
Plan Name	BAJAJ CAPITAL GOLD PLAN
Sum Insured	50000, 100000, 200000, 300000, 500000
Add on Covers Opted	Ambulance Cover Quarantine Cover

The coverage's under Reliance COVID-19 Indemnity Insurance are listed below:	
Covers	Short Description
Hospitalisation Cover due to Diagnosis of presence of COVID-19	The Company indemnifies the Insured Person up to the Sum Insured, for medical expenses incurred on Hospitalization of Insured Person due to Diagnosis of presence of COVID-19
Pre-Hospitalisation Cover	The Company indemnifies the Insured Person for the medical expenses incurred up to 30 days prior to date of Hospitalization
Post -Hospitalisation Cover	The Company indemnifies the Insured Person for the medical expenses incurred up to 60 days post discharge from the Hospital
Quarantine Cover (Add On)	The Company shall pay up to 50% of Sum Insured for medical expenses incurred during Quarantine, starting from the fourth day of Quarantine for a maximum of 15 days during the Policy Period
Ambulance Cover (Add On)	The Company shall pay the Insured Person up to Rs 3500 per Hospitalization for expenses incurred on availing Ambulance services, provided that the Ambulance is availed in relation to Hospitalisation due to Diagnosis of presence of COVID-19

Plan Details	
Plan Name	BAJAJ CAPITAL DIAMOND PLAN
Sum Insured	50000, 100000, 200000, 300000, 500000
Add on Covers Opted	Ambulance Cover Convalescence Cover Daily Cash—Without Quarantine Cover Quarantine Cover
Daily Cash—Without Quarantine Cover (Per Day amount in Rs)	500, 1000, 2000, 3000
Convalescence Cover (amount in Rs)	5000, 10000, 20000, 30000
The coverage's under Reliance COVID-19 Indemnity Insurance are listed below:	
Covers	Short Description
Hospitalisation Cover due to Diagnosis of presence of COVID-19	The Company indemnifies the Insured Person up to the Sum Insured, for medical expenses incurred on Hospitalization of Insured Person due to Diagnosis of presence of COVID-19
Pre-Hospitalisation Cover	The Company indemnifies the Insured Person for the medical expenses incurred up to 30 days prior to date of Hospitalization
Post -Hospitalisation Cover	The Company indemnifies the Insured Person for the medical expenses incurred up to 60 days post discharge from the Hospital
Quarantine Cover (Add On)	The Company shall pay up to 50% of Sum Insured for medical expenses incurred during Quarantine, starting from the fourth day of Quarantine for a maximum of 15 days during the Policy Period
Ambulance Cover (Add On)	The Company shall pay the Insured Person up to Rs 3500 per Hospitalization for expenses incurred on availing Ambulance services, provided that the Ambulance is availed in relation to Hospitalisation due to Diagnosis of presence of COVID-19
Daily Cash—Without Quarantine Cover (Add On)	The Company shall pay Insured Person an opted per day daily cash for each 24 hours of Hospitalization starting from second consecutive day of Hospitalization or fourth day of Quarantine for a maximum of 30 days
Convalescence Cover (Add On)	The Company shall pay the Insured Person a lumpsum opted payout to the surviving Insured Person for a minimum 14 days of Hospitalization
Plan Details	
Plan Name	BAJAJ CAPITAL DIAMOND PLUS PLAN
Sum Insured	50000, 100000, 200000, 300000, 500000
Add on Covers Opted	Ambulance Cover Convalescence Cover Daily Cash—Without Quarantine Cover Quarantine Cover Travel Exclusion Removal Cover
Daily Cash—Without Quarantine Cover (Per Day amount in Rs)	500, 1000, 2000, 3000
Convalescence Cover (amount in Rs)	5000, 10000, 20000, 30000
The coverage's under Reliance COVID-19 Indemnity Insurance are listed below:	
Covers	Short Description
Hospitalisation Cover due to Diagnosis of presence of COVID-19	The Company indemnifies the Insured Person up to the Sum Insured, for medical expenses incurred on Hospitalization of Insured Person due to Diagnosis of presence of COVID-19
Pre-Hospitalisation Cover	The Company indemnifies the Insured Person for the medical expenses incurred up to 30 days prior to date of Hospitalization
Post -Hospitalisation Cover	The Company indemnifies the Insured Person for the medical expenses incurred up to 60 days post discharge from the Hospital
Quarantine Cover (Add On)	The Company shall pay up to 50% of Sum Insured for medical expenses incurred during Quarantine, starting from the fourth day of Quarantine for a maximum of 15 days during the Policy Period



Ambulance Cover (Add On)	The Company shall pay the Insured Person up to Rs 3500 per Hospitalization for expenses incurred on availing Ambulance services, provided that the Ambulance is availed in relation to Hospitalisation due to Diagnosis of presence of COVID-19
Daily Cash—Without Quarantine Cover (Add On)	The Company shall pay Insured Person an opted per day daily cash for each 24 hours of Hospitalization starting from second consecutive day of Hospitalization or fourth day of Quarantine for a maximum of 30 days
Convalescence Cover (Add On)	The Company shall pay the Insured Person a lumpsum opted payout to the surviving Insured Person for a minimum 14 days of Hospitalization
Travel Exclusion Removal Cover (Add On)	Waiver of travel restriction for Hospitalization Cover The Insured Person shall be eligible for claim under Hospitalization Cover even if he/she has travelled to the travel-restricted countries specified in Annexure-1 of the Policy Wording in the 45 days immediately preceding the Certificate Period Start Date

Specific Condition

A. Master Policy will be provided basis below declaration, I hereby confirm that,
i. Neither me nor my any family member or close associate is suffering from COVID-19 or Quarantined /I or we have not met any COVID-19 affected person in last 15 days
ii. I am not living with and sharing the same address as that of person(s) who is/were Diagnosed with COVID-19 or Quarantined
iii. Have Not travelled to international destination in 45 day immediately preceding the Certificate Period Start Date (This is not applicable for Plan Palladium)
B. Maximum Cumulative Sum Insured allowed for single person cannot be greater than 5,00,000 under multiple policies.
C. Kindly be noted, this master policy is provided basis declaration that product will be provided to only Customers of captioned organization and cannot be marketed in open market as well as employee employer relationship. Company reserves right to verify relationship at any point of time. If no relationship is found, then claim will not be honoured and liability lies on intermediary.
Any one of (i) Hospitalisation Cover or (iv) Quarantine Cover will be payable at a time
The total amount payable under Covers (i),(ii),(iii),(iv) shall not exceed 100% of the Sum Insured

Specific Exclusions

1. Waiting Period: The Policy shall not cover Hospitalization or Quarantine within 15 days of Certificate Period Start Date.
2. Co-habitation: No claim shall be payable where the Insured Person was living with and sharing the same address as that of person(s) who were Diagnosed with COVID-19 or Quarantined at the time of Proposal.
3. Unauthorized Testing center: Testing done at a Diagnostic center other than the ones authorized by the Union Health Ministry of India. shall not be recognized under this Policy.
4. Out of India: Diagnosis and/or Treatment taken outside India is not covered.
5. Undefined Conditions: Treatment taken for any condition or disease other than COVID-19 is not covered
6. Self-Quarantine: Self-Quarantine is not covered.
7. Negative or Inconclusive Reports: If the test report is negative or if Insured Person is 'Patients under investigation' (PUI) with inconclusive reports, no claim will be admissible under Hospitalization Cover of this Policy.
8. Breach of law (Code: Excl 10): Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.
9. Cluster Containment operations carried out by State or Central Government to contain the spread of SARS-CoV2 virus. Any self-isolation as a result of such Cluster Containment operations will not be considered as Quarantine and is not covered under this Policy.
10. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a Medical Practitioner as part of Hospitalization claim or day care procedure (Code:Excl14):
11. Domiciliary/OPD Treatment: Any expenses incurred on Domiciliary Hospitalization and OPD treatment.
12. Excluded Providers (Code: Excl 11): Expenses incurred towards treatment in any Hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website / notified to the Policyholders/Certificate Holders are not admissible. However, in case of life threatening situations or following an accident, expenses up to the stage of stabilization are payable but not the complete claim. (For updated and detailed list of Excluded Providers refer website- www.reliancegeneral.co.in)
13. Investigation & Evaluation (Code: Excl04)
14. Expenses related to any admission primarily for diagnostics and evaluation purposes
15. Any diagnostic expenses which are not related or not incidental to the current Diagnosis and treatment are excluded
16. Lockdown: Lockdown means an emergency protocol that prevents people from leaving an area or a state of isolation or restricted access instituted as a security measure by the Government. Any self-isolation as a result of such Lockdown will not be considered as Quarantine and is not covered under this Policy.
17. Willful Act/Negligence: Willful acts or willful gross negligence of the Insured Person.
18. Unproven Treatments-Code (Code: Excl 16): Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.
19. All Standard terms and conditions of product are applicable.

Claims Notification:

Notice of communication to be given in respect of claim to:



Name:	Reliance Rcare
Address:	Reliance General Insurance. No. 1-89/3/B/40 to 42/ks/301, 3rd floor, Krishe Block Krishe Sapphire, Madhapur, Hyderabad - 500081.
City:	Hyderabad
Website :	www.reliancegeneral.co.in
Customer Care No. :	1800 3009 (Toll Free) / 022-41112600
Email id :	rgicl.rcarehealth@relianceada.com
GSTIN:;,SAC: , Description of services:	
Consolidated Stamp Duty Paid with Receipt No.CSD/337/2020/864/2020 Dated 2/27/2020 Not Applicable for the State of Jammu & Kashmir	

Grievance Clause:-
For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at (022) 4890 3009 or may write an email at rgicl.services@relianceada.com. In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irda.gov.in or on company website www.reliancegeneral.co.in or on www.gbic.co.in. The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located. Smt. Sandhya Baliga Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23239633 / 23237532 Fax: 011 - 23230858 Email: bimalokpal.delhi@gbic.co.in

IRDAI / (IGMS/Call Centre):

Through IGMS, Insured can register the complaint online and track its status. For registration please visit IRDAI website www.irdai.gov.in.
Toll free number: 1800 4254 732
Timings: 8 AM to 8 PM -- (Monday to Saturday)

Ombudsman:

In case you/insured person are not satisfied with our decision/resolution, you may approach the Insurance Ombudsman
This document shall be treated as a Tax Invoice as per Rule 9(2) of the Goods and Services Tax Invoice Rules

Contact Details	
Reliance General Insurance Company Limited	
Name of the Co-Ordinator	
Contact No.	
Email	
Claims Administration: Reliance R Care	
Toll Free No(24 hours)	1800 3009
E-mail id	rgicl.rcarehealth@relianceada.com
Address	Reliance General Insurance. No. 1-89/3/B/40 to 42/ks/301, 3rd floor, Krishi Block Krishi Sapphire, Madhapur, Hyderabad-500081
Settlement Type	Cashless ,Reimbursement
Claim Payment to be made to	Insured Person/Certificate Holder
Please Note:	
- In the event of non-realization of premium, this policy document automatically stands cancelled from inception, irrespective of whether a separate communication is sent or not	
For any assistance with claims, please contact us on 18003009(tollfree)and 39898282(localchargesapply) or emailusat@services.rgicl@relianceada.com	
- In witness whereof this policy has been signed at on this 08 Jun 2020.	



**GENERAL
INSURANCE**
A RELIANCE CAPITAL COMPANY

reliancegeneral.co.in
(Toll Free) 1800 3009
(022) 4890 3009

For Reliance General Insurance Company Limited

Authorized Signatory

Agent Code/Name:	13BRG142 / BAJAJ CAPITAL INSURANCE BROKING LTD
Agent Contact No:	8448108666