



UNITED INDIA INSURANCE COMPANY LIMITED

PACKAGE PBBY (PRAVASI BHARATIYA BIMA YOJANA) POLICY
UIN NO. IRDAI/HLT/UII/P-P/V.I/24/2015-16
POLICY NO.:

<p>PERIOD OF INSURANCE From Hrs of To Midnight of</p>
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Insured

Agent Name :
Agent Code :
Mobile/Landline :
Number/Email :



UNITED INDIA INSURANCE COMPANY LIMITED
PACKAGE PBBY (PRAVASI BHARATIYA BIMA YOJANA) POLICY
UIN NO. IRDAI/HLT/UII/P-P/V.I/24/2015-16

POLICY SCHEDULE

Policy Number			Previous Policy No
Insured Details	Name/ID		
	Tel. (O):	Tel.(R)	Fax
	Email	Mobile	
	Business/Occupation		
Period Of Insurance	From	Hrs of	To
	Midnight of		

Passport No. : _____

Family Member Details

Coverage Details:-

Total Sum Insured: _____ ₹

Premium	:	₹
Service Tax	:	₹
Swachh Bharat Cess	:	₹
Krishi Kalyan Cess	:	₹
Stamp duty	:	₹
Total	:	₹
Receipt Number	:	
Receipt Date	:	
Stax Regn. No.	:	AAACU552CST001

Agency/Broker Code: _____
Dev.Officer Code : _____

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

Date of Proposal and Declaration :

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at on this day of , .

For and On behalf of
United India Insurance Co. Ltd.

Affix Policy
Stamp here.

Duly Constituted Attorney(s)
Underwritten By -

PACKAGE PBBY (PRAVASI BHARATIYA BIMA YOJANA) POLICY

Whereas the Insured named in the Schedule herein has made or caused to be made to United India Insurance Co. Ltd. (hereinafter called "the company") a written proposal (warranting the truth of the statements contained therein) which is the basis of this contract and is deemed to be incorporated herein and has paid to the Company the premium herein stated for the insurance of the risks hereinafter specified occurring during the period stated in the Schedule.

NOW THIS POLICY WITNESSETH that subject to the terms exclusion definitions and conditions contained herein or endorsed or otherwise expressed hereon the Company will indemnify the Insured as hereinafter mentioned.

- A) If at any time during the currency of this policy the Insured person named in the schedule shall sustain any bodily injury resulting solely and directly from accident caused by external violent and visible means and if such injury shall within six calendar months of the occurrence be the sole and direct cause of death or permanent disability leading to loss of employment while in employment abroad then the company shall pay to the nominee in case of death of Insured Person and/or Insured Person in case of permanent disability the capital sum insured of ₹ ()
- B) In case of death of the Insured Person in the country (outside India) in which the insured person is employed during the period stated in the schedule, the company shall reimburse the cost of transportation of dead body to India and one way Air fare in economy class for one attendant upto ₹ () provided the claim for reimbursement is made within ninety days of completion of journey.
- C) If during the period stated in the Schedule the insured person shall contract any disease or suffer from any illness or sustain any bodily injury through accident incur at any Nursing Home/Hospital in India as an inpatient, the Company will pay to the Insured Person the such expenses as are reasonably and necessarily incurred but not exceeding the Sum Insured of ₹ () during the period of insurance.
- D) If the Insured Person falls sick or is declared medically unfit to commence or continue or resume working and the service contract is terminated by the foreign employer within the first six months of commencement of the insurance cover, the Company shall reimburse the actual one-way economy class airfare not exceeding ₹ () provided the grounds for repatriation are certified by the concerned Indian Mission/Post and the original air tickets are submitted.
- E) If the Insured Person has not been received/employed by the employer at his work place on his arrival in abroad or if there is any substantive change in the job/employment contract/agreement to the disadvantage of the Insured Person, or if the employment is prematurely terminated within three months for no fault of the emigrant, the Company shall reimburse one way economy class airfare not exceeding ₹ () provided the grounds for repatriation are certified by the concerned Indian Mission / Post and the Original air tickets are submitted.
- F) If during the period stated in the Schedule the women insured person shall incur Maternity expenses (subject to a waiting period of 9 months) in Hospital / Nursing Home as in-patient in India, the Company shall reimburse the expenses up to ₹ ()
- G) In the event of accidental death or permanent disability of the Insured Person during the policy period, any of the family members of Insured Person such as spouse and two dependent children up to twenty one years of age shall contract any disease or suffer from any illness or sustain any bodily injury through accident during the currency of the policy and incur expenses at any Nursing Home/Hospital in India as an inpatient, the Company shall reimburse not exceeding ₹ () per annum during the period of insurance.

DEFINITIONS:

1. Death by accident: Death caused by outward, violent and visible means would include death arising out of or traceable to slipping and/or falling from the mountain terrain; biting by insects, snakes and/or animals; drowning washing away in floods, landslides, rock slides, earthquake, cyclone and other convulsions of nature and/or calamities; murder and terrorist activities.
2. Permanent Disablement: permanently totally and absolutely disable the Insured Person from engaging in any employment or occupation of any description whatsoever resulting solely and directly from accident caused by outward violent and visible means.
3. HOSPITAL / NURSING HOME means any institution in India established for indoor care and treatment of sickness and injuries and which either: has been registered as a Hospital or Nursing Home with the local authorities and is under the supervision of a registered and qualified Medical Practitioner or Should comply with minimum criteria as under:-
 - i) It should have at least 15 inpatient beds.(in C class towns 10 beds)
 - ii) Fully equipped operation theatre of its own wherever surgical operations are carried out.
 - iii) Fully qualified Nursing Staff under its employment round the clock.
 - iv) Fully qualified Doctor (s) should be in-charge round the clock.

The term ' Hospital / Nursing Home ' shall not include an establishment which is a place of rest, a place for the aged, a place for drug-addicts or place of alcoholics a hotel or a similar place.

Expenses on Hospitalisation for minimum period of 24 hours are admissible. However, this time limit is not applied to specific treatments, i.e, Dialysis, Chemotherapy, Radiotherapy; Eye Surgery, Dental Surgery, Lithotripsy (Kidney Stone removal), D&C, Tonsillectomy taken in the Hospital / Nursing Home and the Insured is discharged on the same day, the treatment will be considered to be taken under hospitalisation Benefit. This condition will also not apply in case of stay in hospital of less than 24 hours provided

- a) The treatment is such that it necessitates hospitalisation and the procedure involves specialised infrastructural facilities available in hospitals.
- b) Due to technological advances hospitalisation is required for less than 24 hours only.

4. ANY ONE ILLNESS:-Any one illness will be deemed to mean continuous period of illness and it includes relapse within 45 days from the date of discharge from the Hospital / Nursing Home where treatment has been taken. Occurrence of the same illness after a lapse of 45 days as stated above will be considered as fresh illness for the purpose of this policy.

EXCLUSIONS:

Provided always that the Company shall not be liable under this policy for:

1. Payment of compensation in respect of death or permanent disability of the Insured Person directly or indirectly arising out of or contributed to by or traceable to any accidents occurred prior to the date of commencement of this policy.
2. Payment of compensation in respect of death or permanent disability of Insured Person due to or arising out of :
 - a) Intentional self injury, suicide or attempted suicide
 - b) Whilst under the influence of intoxicating liquor or drugs
 - c) Whilst racing on wheel, Hunting Big game shooting, Mountaineering, or whilst engaged in winter sports, skiing & Ice Hockey
 - d) Directly or indirectly caused by insanity
 - e) Arising or resulting from the insured committing any breach of law with criminal intent
 - f) Directly or indirectly connected with or traceable to War, invasion, act of foreign enemy, hostilities or warlike operations (whether war be declared or not) Civil war, rebellion, revolution, insurrection, Mutiny, Military or usurped power, seizure, capture, arrests restraints and detentions of all kings, princes and people of whatever nation, condition or quality whatsoever
 - g) Directly or indirectly caused by or contributed to by or arising from or traceable to ionising radiation or contamination by radio-activity from any source whatsoever or from nuclear weapons material.
3. Payment / reimbursement of expenses whatsoever incurred by any Insured Person/family members in connection with or in respect of:
 - a) Any pre-existing illness
 - b) Any Disease contracted within 30 days of inception of cover
 - c) Cataract, Benign, Prostatic, Hypertrophy, Hysterectomy for Menorrhagia, or Fibromyoma, Hernia, Hydrocele, Congenital internal disease, Fistula in anus, piles, Sinusitis and related disorders during first year of operation of cover.
 - d) Domiciliary Hospitalisation
 - e) Circumcision unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to an accident, vaccination or inoculation or change of life or cosmetic or aesthetic treatment of any description, plastic surgery other than as may be necessitated due to an accident or as a part of any illness.
 - f) Cost of spectacles and contact lenses, hearing aids.
 - g) Dental treatment or surgery of any kind unless requiring hospitalisation.
 - h) Convalescence, general debility; run-down condition or rest cure, Congenital external disease or defects or anomalies, Sterility, Venereal disease, intentional self injury and use of intoxication drugs / alcohol
 - i) All expenses arising out of any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus Type III (HTLB - III) or lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variation Deficiency Syndrome or any syndrome or condition of a similar kind commonly referred to as AIDS.
 - j) Charges incurred at Hospital or Nursing Home primarily for diagnosis x-ray or Laboratory examinations or other diagnostic studies not consistent with or incidental to the diagnosis and treatment of positive existence of presence of any ailment, sickness or injury, for which confinement is required at a Hospital / Nursing Home
 - k) Expenses on vitamins and tonics unless forming part of treatment for injury or diseases as certified by the attending physician
 - l) Treatment arising from or traceable to pregnancy (including voluntary termination of pregnancy) and childbirth, (including caesarian section).

However maternity expenses incurred by the women emigrant insured person in a Hospital/Nursing Home as in patient in India are payable as per benefit (F) in operative clause and subject to:

- a) a waiting period of 9 months from the date of commencement of cover.
- b) eligibility for first two children and /or operations

- m) Naturopathy Treatment

CONDITIONS:

1. Upon the happening of any event which may give rise to a claim under this Policy the Insured shall forthwith give notice thereof to the Company. Unless reasonable cause is shown the insured shall, within one calendar month after the event which may give rise to a claim under the Policy, give written notice to the Company with full particulars of the claim.
2. Cover automatically ceases in case of death of the Insured Person.
3. Proof satisfactory to the Company shall be furnished of all matters upon which a claim is based within the space of fourteen days after demand in writing. Any medical or other agent of the Company shall be allowed to make a post-mortem examination of the body of the deceased Insured Person.
4. The Company shall not be liable to make any payment under this Policy in respect of any claim if such claim be in any manner fraudulent or supported by any fraudulent statement or device whether by the Insured or by any person on behalf of the Insured.
5. The Company may at any time cancel the Policy on grounds of misrepresentation, fraud, non-disclosure of material fact or non-cooperation by the insured by sending fifteen days notice in writing by Registered A/D to the insured at his last known address in which case the Company shall return to the insured a proportion of the last premium corresponding to the unexpired period of insurance if no claim has been paid under the policy. The insured may at any time cancel this policy and in such event the Company shall allow refund of premium at Company's short period rates provided no claim has occurred upto the date of cancellation.
6. If the Insured shall at any time during the continuance of the Policy be insured against similar scheme with one or more insurers all the benefits under this policy shall be proportionately restricted to such amount which the sum insured of the policy bears to the highest sum insured for a corresponding benefit in any of the policies.
7. If any dispute or difference shall arise as to the quantum to be paid under this policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/ difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as herein before provided, if the Company has disputed or not accepted liability under or in respect of this Policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.

8. It is also hereby further expressly agreed and declared that if the Company shall disclaim liability to the Insured for any claim hereunder and such claim shall not, within 12 calendar months from the date of such disclaimer have been made the subject matter of a suit in a court of law then the claim shall for all purpose be deemed to have been abandoned and shall not thereafter be recoverable hereunder.