

**HOSPITAL CASH COVER -ADD ON COVER FOR STANDALONE MOTOR OD  
FUTURE SECURE TWO WHEELER POLICY –ADDON WORDING**

**a. Accidental hospital cash cover for the Insured**

In consideration of the payment of an additional premium, the Company will pay a Daily Allowance as specified and shown in the Policy Schedule up to a maximum period of 30 (thirty) days for the Insured's Period of Confinement in a hospital out of accidental injuries sustained by the Insured in direct connection with the Insured Vehicle, or whilst mounting and dismounting from or travelling in the Insured Vehicle and caused by violent accidental external and visible means, **subject to event of a loss admissible under the terms and condition of the Policy.** The Company will pay such Daily Allowance for each day of the Period of Confinement due to the said accidental injuries subject to the deductible and the following conditions:

- A. The accident occurs within the Republic of India.
- B. The Period of Confinement must be medically necessary and recommended by a physician, for treatment of the accidental injuries sustained during the above mentioned accident only.
- C. The total Period of Confinement will be subject to a deductible of one day.
- D. The benefits can be utilized only once during the Policy Period.

**Definitions:**

- A. **Daily Allowance** - means the amount payable for each day spent in the hospital.
- B. **Period of Confinement** - means a period of consecutive days of confinement as an inpatient, caused by an accidental injury in direct relation of the Insured Vehicle. However, successive confinements as an inpatient caused by or attributable to the same accident, or injury, are considered to be part of the same Period of Confinement.

**Exclusions:**

Coverage under this Endorsement section shall not cover:

- A. hospitalization due to any disease or sickness; or pregnancy and resulting childbirth, miscarriage or diseases of female reproductive system .
- B. routine physical examination and pre-existing disease, if any.
- C. elective cosmetic or plastic surgery, except as a result of an Injury caused by a covered accident while the Policy is in force.
- D. Any mental, nervous or emotional disorder or rest cures.
- E. intentional self injury, attempted suicide.
- F. any accident or injury happening whilst such person is under the influence of intoxicating liquor or drugs.

It is understood and agreed that the Policy is hereby amended as indicated above, i.e, that all the other terms, conditions and exclusions of the Policy remain unchanged.

**b. Hospital Cash cover for the immediate family of the Insured**

In consideration of the payment of an additional premium, the Company will pay a Daily Allowance as specified and shown in the Policy Schedule upto a maximum period of 30 (thirty )days for the Period of Confinement in a hospital out of accidental injuries sustained by the Immediate Family

members (hereinafter referred to as Insured Persons) in direct connection with the Insured Vehicle, or whilst mounting and dismounting from or travelling in the Insured Vehicle and caused by violent accidental external and visible means, **subject to event of a loss admissible under the terms and condition of the Policy**. The Company will pay a Daily Allowance for each day of the Insured Person/s' Period of Confinement in a hospital due to accident or injury subject to the deductible and following conditions,

- A. The accident occurs within the Republic of India.
- B. The Period of Confinement must be medically necessary and recommended by a physician, for treatment of the accidental injuries sustained during the abovementioned accident only.
- C. The total Period of Confinement will be subject to a deductible of one day.
- D. The benefits can be utilized only once during the Policy Period.

**Definitions:**

**Immediate Family** – means, spouse, children, parents or parents-in-law of the insured travelling by the Insured Vehicle, who is/are neither the Owner Driver of the Insured Vehicle or its Paid Driver. The number of such Immediate Family members covered should be less than or equal to the Registered Carrying Capacity of the insured vehicle.

**Daily Allowance** - means the amount payable for each day spent in the hospital.

**Period of Confinement** - means a period of consecutive days of confinement as an inpatient caused by an accident or injury. However, successive confinements as an inpatient caused by or attributable to the same accident or injury, are considered to be part of the same Period of Confinement.

**Exclusions:**

Coverage under this Endorsement shall not cover:

- A. hospitalisation due to any disease or sickness; or pregnancy and resulting childbirth, miscarriage or disease of the female reproductive system.
- B. routine physical examination and pre-existing disease, if any.
- C. elective cosmetic or plastic surgery, except as a result of an injury caused by a covered accident while the Policy is in force.
- D. Any mental, nervous or emotional disorders or rest cures.
- E. intentional self injury, attempted suicide.
- F. any accident or injury happening whilst such person is under the influence of intoxicating liquor or drugs.

**Provided that**

Such Allowance shall be payable to or with the approval of the Insured named in the Policy directly to the Insured Person or his/her legal representative(s), whose receipt shall be a full discharge in respect of the injury of such Insured Person.

It is understood and agreed that the Policy is hereby amended as indicated above, i.e., that all the other terms, conditions and exclusions of the Policy remain unchanged.

**c. Hospital Cash cover for the Paid Driver of the Insured Vehicle**

In consideration of the payment of an additional premium, the Company will pay a Daily Allowance as specified and shown in the Policy Schedule upto a maximum period of 30 (thirty ) days for the Insured Vehicle's Paid Driver's Period of Confinement in a hospital out of accidental injuries sustained by the Paid Driver in direct connection with the Insured Vehicle, or whilst mounting and dismounting from or driving the Insured Vehicle and caused by violent accidental external and visible means, **subject to event of a loss admissible under the terms and condition of the Policy**. The Company will pay the Daily Allowance for each day of the Paid Driver's Period of Confinement in a hospital due to accident or injury subject to the deductible and following conditions

- A. The accident occurs within the Republic of India.
- B. The Period of Confinement must be medically necessary and recommended by a physician, for treatment of the accidental injuries sustained during the abovementioned accident only.
- C. The total Period of Confinement will be subject to a deductible of one day.
- D. The benefits can be utilized only once during the Policy Period.

**Definitions:**

**Daily Benefit** - means the amount payable for each day spent in the hospital.

**Period of Confinement** - means a period of consecutive days of confinement as an inpatient caused by an accident or injury. However, successive confinements as an inpatient caused by or attributable to the same accident or injury, are considered to be part of the same Period of Confinement.

**Exclusions:**

Coverage under this Endorsement shall not cover:

- A. hospitalisation due to any disease or sickness; or pregnancy and resulting childbirth, miscarriage or diseases of the female reproduction system.
- B. routine physical examination and pre-existing disease, if any.
- C. elective cosmetic or plastic surgery, except as a result of an Injury caused by a covered Accident while our policy is in force.
- D. Any mental, nervous or emotional disorders or rest cures.
- E. intentional self injury, attempted suicide.
- F. any accident or injury happening whilst such Paid Driver is under the influence of intoxicating liquor or drugs.

**Provided that**

such Allowance shall be payable only with the approval of the Insured named in the Policy directly to the injured Paid Driver or his/her legal representative(s), whose receipt shall be a full discharge in respect of the injury of such Paid Driver.

It is understood and agreed that the Policy is hereby amended as indicated above, i.e., that all the other terms, conditions and exclusions of the Policy remain unchanged.

**d. Hospital Cash cover for the unnamed passenger of the Insured Vehicle**

In consideration of the payment of an additional premium, the Company will pay a Daily Allowance as specified and shown in the Policy Schedule upto a maximum period of 30 (thirty) days for the Period of Confinement in a hospital out of accidental injuries sustained by the unnamed passengers of the Insured Vehicle in direct connection with the Insured Vehicle, or whilst mounting and

dismounting from or travelling in the Insured Vehicle and caused by violent accidental external and visible means, **subject to event of a loss admissible under the terms and condition of the Policy.** The Company will pay the Daily Allowance for each day the unnamed passenger's the Period of Confinement in a hospital due to accident or injury subject to the deductible and following conditions.

- A. The accident occurs within the Republic of India.
- B. The Period of Confinement must be medically necessary and recommended by a physician, for treatment of the accidental injuries sustained during the abovementioned accident only.
- C. The total Period of Confinement will be subject to a deductible of one day.
- D. The benefits can be utilized only once during the Policy Period.

**Definitions:**

**Daily Benefit** - means the amount payable for each day spent in the hospital.

**Period of Confinement** - means a period of consecutive days of confinement as an inpatient caused by an accident or injury. However, successive confinements as an inpatient caused by or attributable to the same accident or injury, are considered to be part of the same Period of Confinement.

**Exclusions:**

Coverage under this Endorsement shall not cover:

- A. hospitalisation due to any disease or sickness; or pregnancy and resulting childbirth, miscarriage or diseases of the female reproduction system.
- B. routine physical examination and pre-existing disease, if any.
- C. elective cosmetic or plastic surgery, except as a result of an injury caused by a covered Accident while our policy is in force.
- D. Any mental, nervous or emotional disorders or rest cures.
- E. intentional self-injury, attempted suicide.
- F. any accident or injury happening whilst such Paid Driver is under the influence of intoxicating liquor or drugs.
- G. any accident or injury happening whilst more than...\*\* persons/passengers were in the vehicle insured at the time of occurrence of the accident or injury.

**Provided that**

such Allowance shall be payable only with the approval of the Insured named in the Policy directly to the injured Paid Driver or his/her legal representative(s), whose receipt shall be a full discharge in respect of the injury of such Paid Driver.

It is understood and agreed that the Policy is hereby amended as indicated above, i.e., that all the other terms, conditions and exclusions of the Policy remain unchanged.

**Applicable to:** Two Wheeler