

HDFC Life Daily Hospi Cash Benefit Rider

A Non-Linked Non-Participating Pure Risk Group Term Micro Life Insurance Product

A safeguard designed to ease the burden of unexpected hospitalization expenses wherein a fixed daily cash benefit will be provided during hospitalization due to illness or injury, guarding you and your family against any distress because of increased financial burden during hospitalization. Daily Hospi Cash Benefit rider will provide you with fixed benefit for each day of hospitalization irrespective of the actual medical cost. Thus, providing you with additional protection at all times. The rider also offers Wellness Benefit.

Salient features under Daily Hospi Cash Benefit Rider-

1. Daily hospitalization expenses for completed period of 24hrs in a predetermined amount for each day of hospitalization as opted from the varied available options- Rs. 500, Rs. 1000, Rs. 2000 and Rs. 5000. One of the available options will be opted by the Master Policyholder (MPH)
2. Intensive Care Unit (ICU)* expenses available for twice the daily fixed benefit for completed period of 24 hours
3. Ambulance benefits* equal to half of daily fixed benefit
4. Number of days available for the rider available are 10 days, 20 days and 30 days, one of which will be opted by the Master Policyholder (MPH)
5. Two plan options available which can be opted by the Master Policyholder (MPH)**
6. < Option to avail Health Management Services to the scheme members from the service providers registered with the company. >

* ICU Benefit and Ambulance Benefit are available under Hospi Cash Plus Plan only

** Only one of the two available plan can be opted

The Daily Hospi Cash Benefit rider will be attached with the Micro product under HDFC Life (like HDFC Life Group Suraksha and HDFC Life Group Jeevan Suraksha)

Cover Term	As per base cover term under Micro and subject to maximum of 5 years.
Minimum age at entry	<u>Group Suraksha</u> - 14 years <u>Group Jeevan Suraksha</u> - Employer Employee Group: 18 years Other Homogeneous Group: 5 years
Maximum age at entry	<u>Group Suraksha</u> - Single Premium: 69 years Limited Premium: 60 years Regular Premium: 68 years <u>Group Jeevan Suraksha</u> - One Year Renewable Policy: 79 years Single Premium Policy: 79 years Regular Premium Policy: 78 years

Minimum Sum Assured	Rs. 5,000
Maximum Sum Assured	Rs. 1,00,000

Note:

1. The Rider Sum Assured shall not exceed the Sum Assured of the base policy to which this rider is attached. This limit shall be governed by extant regulations at the time of opting for this rider.
2. Rider will not be offered if the outstanding term under the base policy is less than minimum policy term (in months) as specified above.
3. Rider will not be offered if the term of the rider exceeds outstanding term under the base policy.

What is the premium payable under this rider?

The rider premium shall be collected in addition to the premium payable under the base policy. The premiums will vary depending upon the option chosen. The premium payment frequency for the rider shall be same as the frequency of the base plan.

Plan Options**How does the Plan work?**

The rider offers two options-

Plan	Plan Name
Plan 1	Hospi Cash
Plan 2	Hospi Cash Plus

How to opt for Plan Options

The rider can be opted under the base policy and will be opted by the Master Policyholder subject to terms & conditions specified under the plan, in the following ways:

- The Master Policyholder can choose any one plan out of the two available.
- Hospi Cash and Hospi Cash Plus cannot be selected together.
- The Master Policyholder needs to opt for this rider at the inception or during the premium payment term of base policy.
- The option once selected can not be changed during the rider term.
- Any rider coverage terminates as soon as the base policy terminates.

Plan Options under the rider

- Plan 1- Hospi Cash benefit

In the event of Accidental Bodily Injury or Illness or Maternity, first occurring or manifesting itself during the Policy Term and causing the Insured's Hospitalisation within the Policy Period, we will pay the daily fixed benefit for each continuous and completed period of 24 hours of Hospitalisation necessitated.

- Plan 2- Hospi Cash Plus benefit

In the event of Accidental Bodily Injury or Illness or Maternity first occurring or manifesting itself during the Policy Term and causing the Insured's Hospitalisation within the Policy Period, we will pay (for all below as per the plan and limits defined):

1. **Hospitalisation Benefit:** The daily fixed benefit for each continuous and completed period of 24 hours of Hospitalisation necessitated
2. **ICU Benefit:** Two times the daily fixed benefit for completed period of 24 hours required to be spent by the Insured in the Intensive Care Unit of a Hospital during any period of Hospitalisation necessitated. This benefit can be availed only once during the entire policy term.
3. **Ambulance Benefit:** Additional benefit equal to 50% of per day Hospitalization benefit will be payable to the Member as Ambulance benefit. This benefit can be availed only once during the entire policy term

Benefit Table-

Benefit details*	Plan 1- Hospi Cash		Plan 2- Hospi Cash Plus	
	Min	Max	Min	Max
Hospitalisation Benefit (per day) (Options- ₹500/₹1000/₹2000/₹5000) (₹) (per day benefit to be opted by the MPH)	500	5,000	500	5,000
No. of days (Options- 10/20/30 days) ^ (one of the three available options to be opted by the MPH)	10	30	10	30
Benefit/Sum Assured per life (₹)**	5,000	1,00,000	5,000	1,00,000
Ambulance Benefit (once per policy term.) (50% of per day benefit) (₹)	NA	NA	250	2,500
ICU Benefit*** ((₹) for once per policy term)(200% of per day benefit) (₹)	NA	NA	1,000	10,000

*The Master Policyholder can choose any one of the above two options along with HDFC Life Group Suraksha and HDFC Life Group Jeevan Suraksha.

**Under Group Suraksha, if member has opted for Accidental Death Benefit along with Hospi Cash/ Hospi Cash Plus, total Sum Assured including Accidental Death Benefit option cannot exceed ₹2,00,000.

***ICU Benefit and Ambulance Benefit will only be paid once per policy term and up to the maximum admissible limit as specified under Plan 2.

What is the benefits under Health Management Services that is offered in the Rider?

Provided the policy is in-force and all premiums are paid up-to-date, the Members will have the option to take Health Management Services such as medical second opinion, medical case management, medical consultation, etc. from the service providers registered with the company. These wellness services can help the life assured to get correct diagnosis of a medical condition and to procure appropriate illness care.

Which products can this Rider be offered with?

The rider will be available to policyholders of withdrawn/current/subsequently modified, versions of below base products:

Sr No	Product	UINs
1.	HDFC Life Group Suraksha	101N135V03
2.	HDFC Life Group Jeevan Suraksha	101N113V06

Is there any Maturity benefit?

There is no maturity benefit available under this rider.

Is there any Death Benefit?

There is no death benefit available under this rider.

What is the grace period?

Grace Period of 30 days, where the mode of payment of Premium is annual, half-yearly, quarterly and 15 days in case of monthly mode, is allowed for the payment of each renewal premium after the first premium. The rider is considered to be in-force with the risk cover during the grace period without any interruption.

Can I Surrender the Benefit?

Surrender value shall be payable subject to following conditions:

No Surrender value shall be payable with respect to Life Assured for whom valid claims are made during coverage period.

For Single Premium credit linked plan, surrender value as given below shall get immediately acquired-

$$70\% * \text{Single Premium} * (1 - M/P)$$

Where,

M- Elapsed months since coverage inception, any part of month shall be counted as full
P- Policy Term in months

Single Premium will be net of taxes

What are the revival conditions?

In case of lapsed Rider, the same can be revived in accordance to the procedure laid under the Master Policy. However, this Rider document cannot be revived independent of the Master Policy. No amount of the benefit under this rider shall be payable where the date of death of the Scheme Member due to accident is on or after the Lapsing Date.

What is the procedure for renewal of this rider?

The Rider cannot be renewed independent of the Master Policy. The Rider can be renewed by paying the Rider

Premium subject to the following conditions:

- the Premium due on the Master Policy is paid, and
- satisfactory evidence of health is provided as per the Board Approved Underwriting Policy (BAUP).

Waiting Period

General Waiting Period- 30 days

Waiting Period for maternity related claims- 12 months

Exclusions

- Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof
- Expenses related to sterility and infertility. This includes:
 - a) Any type of contraception, sterilization
 - b) Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
 - c) Gestational Surrogacy
 - d) Reversal of sterilization
- Treatment for any other system other than modern medicine (also known as Allopathy).
- Dental treatment or Dental surgery of any kind unless as a result of Accidental Injury to natural teeth and also requiring hospitalization
- Pre-natal and post-natal expenses including expenses for the new born baby will be out of the scope of the rider benefit.

Terms & Conditions

(i) Free-look Period:

- The policyholder shall have the option of cancelling the rider, stating the reasons thereof, by returning the Rider Document to company, within 30 days from the date of receipt of the rider, whether received electronically or otherwise in case policyholder is not agreeable to any rider terms and conditions.
- The rider can be cancelled in the free-look period even if the base policy to which it is attached is continued.
- The rider shall be automatically cancelled if the base policy to which it is attached is cancelled.
- If rider is cancelled along with the base policy, on receipt of letter along with original policy documents, the company shall arrange to refund the rider premiums paid by policyholder, subject to deduction of the proportionate risk premium for the period on cover and the expenses incurred for medical examination (if any) and stamp duty, (if any). This would be in addition to the refund under the base policy as per applicable terms and conditions.
- If rider is cancelled independently of the base policy then the rider premium will be returned, subject to deduction of the proportionate risk premium for the period on cover and the expenses incurred for medical examination (if any) and stamp duty, (if any).
- A rider once cancelled shall not be revived, reinstated or restored at any point of time and a new proposal will have to be made for a new rider.

Cancellation after the free look period

- The rider can be cancelled at any time during its rider term. Upon such a cancellation, the rider will lapse and the surrender value (if any) will be payable.
- The rider shall be automatically cancelled if the base policy to which it is attached is cancelled.

(ii) Alterations: Rider term and rider sum assured cannot be altered. The premium payment frequency of the rider can be changed if the premium payment frequency on the base product is changed. The premium payment frequency of the rider cannot be changed independently from the base policy. The option once selected cannot be changed.

(iii) Addition/Deletion of Options: The following Addition/Removal of options are available to the policyholder subject to Board Approved Underwriting Policy (BAUP):

- a) If not opted at inception of the base policy, the policyholder may opt for the rider during the premium paying term of base policy.
- b) At any base policy anniversary, the policyholder can opt out/terminate their existing rider.

(iv) The rider is available for purchase online via company website along with the base plan. The discount applicable on the premium rates when the rider is purchased (Online via website) shall be same as per discount applicable in base plan. In case the base plan offers higher benefit instead, an equivalent discount will be offered on the rider premium rates.

(v) Assignment and Transfer: This Rider cannot be assigned independently. However the Rider Policy can be assigned along with the Base Policy as per Section 38 of the Insurance Act, 1938 as amended from time to time. The simplified version of the provisions of section 38 is enclosed in Rider Policy Document for your reference.

(vi) Nomination: Nomination for this Rider shall be as per the Nomination Schedule under the Main Policy as per section 39 of the Insurance Act, 1938 as amended from time to time. The simplified version of the provisions of section 39 is enclosed in Rider Policy Document for your reference.

(vii) Prohibition of Rebates: In accordance with Section 41 of the Insurance Act, 1938 as amended from time to time:

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 prospectuses or tables of the insurer. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

(viii) Non-Disclosure: In accordance with Section 45 of the Insurance Act, 1938 as amended from time to time:

1. No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later.
2. A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in

- writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based.
3. Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer: Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.
 4. A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based: Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation.
 5. 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.

This is not a comprehensive list of amendments of Insurance Laws (Amendment) Ordinance, 2014 and only a simplified version prepared for general information. Policy Holders are advised to refer to Original Ordinance Gazette Notification dated December 26, 2014 for complete and accurate details.

(ix) Taxes:

Taxes and levies as applicable will be charged. Any taxes, statutory levy becoming applicable in future may become payable by you by any method including by levy of an additional monetary amount in addition to premium and/or charges.

(x) Grievance Redressal Mechanism:

You can contact us at any of the below touchpoints in case of any concern:

Helpline number: 022-68446530 (Call Charges apply) | NRI Helpline number +91 89166 94100 (Call Charges apply)

E-mail Address: service@hdfclife.com | nriservice@hdfclife.com (For NRI customers only)

You can let us know of your concerns/grievances through any of below options:

- **Option 1:** Written letter duly signed by the policyholder at any HDFC Life Branch. There is a Grievance Redressal Officer at the respective branch to address the customer's complaint.
To know more about branch address and timing's you can visit this link: <https://www.hdfclife.com/contact-us#BranchLocator> . Please note, branches are closed on Sundays, national holidays and region-specific public holidays.
- **Option 2:** Write to us from your registered email ID at service@hdfclife.com.

- **Option 3:** Visit us at our website <https://www.hdfclife.com/customer-service/grievance-redressal>

You may refer to the escalation matrix in case there is no response to a grievance within the prescribed timelines.

If you still not satisfied with our response, you may approach the Insurance Ombudsman located in your region.

For more information on our Grievance Redressal Mechanism and the detailed address of the Insurance Ombudsman, please refer Part G of the policy document given to you.

The Linked Insurance products do not offer any liquidity during the first five years of the contract. The policyholder will not be able to surrender/withdraw the monies invested in Linked Insurance Products completely or partially till the end of fifth year. Linked insurance products are different from the traditional insurance products and are subject to the risk factors. HDFC Life Insurance Company Ltd. Is only the name of the Life Insurance Company and HDFC Life Health Plus Rider – Linked is only the name of the linked insurance contract and does not in any way indicate the quality of the contract, its future prospects or returns.

HDFC Life Insurance Company Limited. CIN: L65110MH2000PLC128245. IRDAI Registration No. 101.

The name /letter 'HDFC' in the name/logo of HDFC Life Insurance Company Limited (HDFC Life) belongs to HDFC Bank Limited and is used by HDFC Life under licence from HDFC Bank Limited."

Registered Office: HDFC Life Insurance Company Limited, Lodha Excelus, 13th Floor, Apollo Mills Compound, N.M. Joshi Marg, Mahalaxmi, Mumbai-400 011.

Email: service@hdfclife.com | nriservice@hdfclife.com (For NRI customers only), Tel No: 022-6844-6530 (Call charges apply) (Mon-Sat 10 am to 7 pm). Website: www.hdfclife.com

Life Insurance coverage is available in this product. For more details on risk factors, associated terms and conditions and exclusions please read sales brochure carefully before concluding a sale.

HDFC Life Group Daily Hospi Cash Benefit Rider– A Non-Linked Non Participating Life Group Pure Risk Rider. (UIN No: 101B039V01). This version of the rider brochure invalidates all previous printed versions for this particular plan. This rider brochure is indicative of the terms, warranties, conditions and exclusions contained in the insurance policy. Please know the associated risk and applicable charges from your insurance agent or the intermediary or policy document of the insurer. ARN: XXXXXXX

BEWARE OF SPURIOUS PHONE CALLS AND FICTIOUS/FRAUDULENT OFFERS

IRDAI or its officials do not involve in any activities of insurance business like selling insurance policies, announcing bonus or investment of premiums, refund of amounts. Policyholders or the prospects receiving such phone calls are requested to lodge a police complaint.

HDFC Life Daily Hospi Cash Benefit Rider (UIN: 101B039V01)

Sales Literature

A Non-Linked Non Participating Life Group Pure Risk Rider.



Sample