

Secure yourself against unexpected hospital bills



Birla Sun Life Insurance

Hospital Plus Plan

A fixed benefit health plan



Birla Sun Life
Insurance



INTRODUCING BSLI HOSPITAL PLUS PLAN

You always want to provide the best medical care and facilities to your loved ones in the event that any of them need to be hospitalized. We understand that you would like to spend time caring for your loved ones rather than worry about paying the hospital bills.

Presenting the BSLI Hospital Plus Plan, an easy to purchase plan that provides you with a fixed cash amount in the event of a hospitalization.

KEY FEATURES OF THE PLAN

BSLI Hospital Plus Plan is a comprehensive plan as it takes care of your worries due to hospitalization. This helps you sleep peacefully at night while we take care of your worries

- **Simple and Quick:** hassle free sales process to buy this plan
- **Fixed cash on Hospitalization:** irrespective of actual costs and paid in addition to any other medical plans
- **Choice of Benefit:** flexibility of choosing from 4 Benefit Options to suit your needs
- **Family Cover:** cover for a family, but without any limit on aggregate payments
- **Tax benefit:** as per section 80 D of the Income Tax Act, 1961
- **Accidental hospitalization:** Additional benefit in case of hospitalization due to an accident

ELIGIBILITY

This policy is available to an individual (known as the proposer) or to the proposer and his family as family cover (when spouse, up to 2 dependent children and/or dependent parents or parents-in-laws of proposer are added as lives insured). The oldest aged insured person will be the principal life insured and the other insured persons (if any) will be secondary lives. A maximum of 4 adults (up to 2 parents and up to 2 grandparents) and 2 children can be covered under the plan.

Entry Age (age last birthday)	Adult: 18 – 65 years (age last birthday); Child : 3 months to 17 years (age last birthday)
Max Renewable Age	Adult : 95 years, Dependent Child : 17 years (age last birthday)
Policy Term	5 years guaranteed renewable
Premium Paying Term	Regular Pay (guaranteed renewable every 5 years)
Sum Assured	Under Benefit Option A = Rs.75,000 per life Under Benefit Option B = Rs.225,000 per life Under Benefit Option C = Rs.375,000 per life Under Benefit Option D = Rs.562,500 per life For life aged above 50 years (age last birthday) at the original policy inception date only Benefit Option A, B or C is allowed.

Minimum Premium	Benefit Option A= Rs. 1,225 - For age band 18-25, For 1 adult Benefit Option B= Rs. 2,874 - For age band 18-25, For 1 adult Benefit Option C= Rs. 4,523 - For age band 18-25, For 1 adult Benefit Option D= Rs. 6,585 - For age band 18-25, For 1 adult
Maximum Premium	Benefit Option A= Rs. 4,699 - For age band 63-65, For 1 adult Benefit Option B= Rs. 13,298 - For age band 63-65, For 1 adult Benefit Option C= Rs. 21,896 - For age band 63-65, For 1 adult Benefit Option D= Rs. 13,725 - For age band 46-50, For 1 adult
Premium Frequency	Annual and Monthly (ECS only)

Following different combinations are allowed under this policy:

	Proposer	Spouse	Child	Parents/In Laws ¹
Entry Age (in Years)	18-65	18-65	0.3-17	18-65
	Self	-	-	-
Life Insured	Self	Spouse	-	-
	Self	Spouse	Children	
	Self	Spouse	Children	Parents/In Laws
	Self	-	Children	-
	Self	Spouse	-	Parents/In Laws
	Self	-	Children	Parents/In Laws
	Self	-	-	Parents/In Laws
	-	Spouse	-	-
	-	Spouse	Children	-
	-	Spouse	Children	Parents/In Laws
	-	Spouse	-	Parents/In Laws
	-	-	Children	Parents/In Laws
	-	-	-	Parents/In Laws

¹Combination of one parent and one parent-in-law is not allowed.

The highest aged person is the principal life insured and all other lives are secondary lives insured. The premiums will be calculated on individual life basis.

YOUR PLAN BENEFITS

You can claim the following benefits in case of hospitalization for a medically necessary treatment of an illness or injury of a Life Insured under this policy.

There are 4 Benefit options available under this policy. The benefit amount varies depending upon the reason for hospital admission, the period of stay and benefit option selected

Benefit Option once chosen cannot be changed during the five year term; though at renewal the policyholder may opt to change the Benefit Option subject to the then prevailing Board-approved Underwriting Policy

Daily Hospitalization Cash Benefit (DHCB)

On the hospitalization of a Life Insured for a period of more than 48 hours, you will receive the Daily Hospitalization Cash Benefit (DHCB) per life for each Day in Hospital retrospectively.

An additional 100% of the chosen Daily Hospitalization Cash Benefit (DHCB) per life is paid for each Day of stay in the intensive care unit (ICU), provided the life assured qualifies for the Daily Hospitalization Cash Benefit (DHCB).

Accidental Hospitalization Benefit

On the hospitalization of a Life Insured due to an accident, you will receive Accidental Hospitalization Benefit in addition to DHCB, provided the life insured qualifies for the Daily Hospitalization Cash Benefit (DHCB).

Recuperative Benefit

On the hospitalization of a Life Insured for consecutive 10 days or more and where the Daily Hospitalization Cash Benefit is payable by us for the same hospitalization, a lump sum amount will be paid as Recuperative Benefit per life after being discharged from the hospital. This benefit will be equivalent to the Daily Hospitalization Benefit payable for one day only as per the Benefit Option chosen.

Recuperative Benefit will only be payable once in each policy year during the policy term and is payable irrespective of whether the life insured is admitted to one or more hospitals during one and the same episode.

Benefits at a glance

You can choose any one Benefit Option; each option has fixed benefits per life basis as given below:

Benefit	Benefits (per life) under			
	Benefit Option A	Benefit Option B	Benefit Option C	Benefit Option D*
Sum Assured	Rs. 75,000	Rs. 2,25,000	Rs. 3,75,000	Rs. 5,62,500
Daily Hospitalization	Rs. 1,000 per Day	Rs. 3,000 per Day	Rs. 5,000 per Day	Rs. 7,500 per Day
Cash Benefit (DHCB)				
In Intensive Care Unit (ICU)	Additional Amount equal to DHCB			
Accidental Hospitalization Benefit (AHB)#	Rs. 1,000 per Day	Rs. 3,000 per Day	Rs. 5,000 per Day	Rs. 7,500 per Day
Recuperative Benefit (RB)#	Rs. 1,000	Rs. 3,000	Rs. 5,000	Rs. 7,500

*These benefits are in addition to DHCB and are applicable only if DHCB is payable for the event.

*This benefit option D will not be available if proposer and/or any of the family members is above age 50 years (age last birthday) at the original policy inception date. Maximum Sum Assured for age above 50 years (age last birthday) is Rs.375,000 per life at the original policy inception date (under Benefit Option C).

Sample cases for Benefit Option A

Sample Case(a)	Sample Case (b)	Sample Case (c)
Hospitalization for Typhoid for 5 days	Hospitalization for Malaria for 12 days (out of 12 days in hospital first 3 days in ICU)	Hospitalization due to accident for 6 days
Total Benefit = Rs. 5,000	Total Benefit = Rs. 16,000	Total Benefit = Rs. 12,000
Daily Hospitalization Cash Benefit for 5 days - Other hospitalization starting from day 1 @ Rs. 1,000 per day	Daily Hospitalization Cash Benefit for 12 days - Other hospitalization 9 days @ Rs. 1,000 per day + ICU 3 days @ Rs. 2,000 (1,000 for DHCB + 1,000 for ICU) per day + Recuperation Benefit Rs. 1,000 lump sum	Daily Hospitalization Cash Benefit for 6 days - Other hospitalization starting from day 1 @ Rs. 1,000 per day + Accidental Hospitalization Benefit for 6 days @ Rs. 1,000 per day starting from day 1

Maximum Benefit Limits

This plan has a maximum limit per policy per life on total benefits we will pay within one policy year and during the policy term.

The aggregate of all benefits payable in respect of any individual life in any one policy year will not exceed the amounts specified below.

Annual Benefit Limit (per life)	Benefit Option A	Benefit Option B	Benefit Option C	Benefit Option D
DHCB + ICU	Rs. 64,000	Rs. 1,92,000	Rs. 3,20,000	Rs. 4,80,000
AHB	Rs. 10,000	Rs. 30,000	Rs. 50,000	Rs. 75,000
RB	Rs. 1,000	Rs. 3,000	Rs. 5,000	Rs. 7,500

Policy Term Limit (per life)	Benefit Option A	Benefit Option B	Benefit Option C	Benefit Option D
DHCB + ICU	Rs. 3,00,000	Rs. 9,00,000	Rs. 15,00,000	Rs. 22,50,000
AHB	Rs. 30,000	Rs. 90,000	Rs. 1,50,000	Rs. 2,25,000
RB	Rs. 5,000	Rs. 15,000	Rs. 25,000	Rs. 37,500

These limits will be restored on each renewal of the policy after expiry of the policy term.

Premiums

The premiums under the policy are to be paid on a regular basis for the whole policy tenure. The premiums will be guaranteed for five policy years. On each renewal date after a policy term of 5 years, the premium rate would be determined at the then prevailing age of the life insured/s. The company reserves the right to review the current premium rates. Any change in the premium rates will take place subject to prior approval from the Insurance Regulatory and Development Authority of India (IRDAI) and after giving you adequate notice in advance.

Your premium can be paid annually or monthly, subject to our then current administrative rules. The premium due will be equal to the annual premium multiplied by:

- 1.000 if paid annually;
- 0.090 if paid monthly.

Discount of 10% for Benefit Option A & B and 5% for Benefit Option C & D in premium rates for principal life insured will be applied to get premium rates for secondary life insured/s.

Sample annual premium table

Age Band	Principal Life Insured			
	Benefit Option	Benefit Option	Benefit Option	Benefit Option
	A	B	C	D
31-35	1,424	3,472	5,520	8,080
36-40	1,542	3,827	6,111	8,966

Service Tax & Education Cess and any other applicable taxes will be added to your premium and levied as per the then extant tax laws. The above mentioned rates are applicable to the principal life insured only.

For every additional life insured under family cover option, the rates above are discounted as follows:

- 10% discount will be offered on above premium table for benefit option A and B
- 5% discount will be offered on above premium table for benefit option C and D



OTHER INFORMATION

Death Benefits

There is no death benefit payable under this plan.

On death of the principal life insured, the cover for the principal life insured will terminate and the oldest person covered under the policy will become the principal life insured and the policy will continue.

On death of any of the lives insured or a deletion request, the cover for the relevant life will terminate with the premium being reduced accordingly for the deceased/excluded life insured from the next premium due date and the cover for remaining insured lives will continue. A new premium rate for the remaining lives will be determined on next renewal date after the expiry of the current term of the policy in relation to the new principal life and secondary lives only.

Maturity Benefits

There is no maturity benefit payable under this plan.

Furthermore, this plan does not provide for any surrender value or policy loans.

Waiting Period

A waiting period of 90 days from the date of issue of the policy is applicable for all benefits payable under this cover except for claims due to any accident. This is not applicable at policy renewal but waiting period is applicable if policy is reinstated or renewed after the expiry of the grace period.

Midterm Inclusions

You will not be allowed any midterm inclusions during the policy term. Joining due to new birth, adoption or marriage will only be allowed at the next policy anniversary; subject to the number of lives insured not exceeding 4 adults or 2 children. Joining will be subject to the underwriting process as at policy issuance.

Policy and Age Limits

On exhaustion of maximum benefit limit either for a policy year or for policy term, benefits under the policy will cease for rest of the policy year or policy term respectively for that particular life.

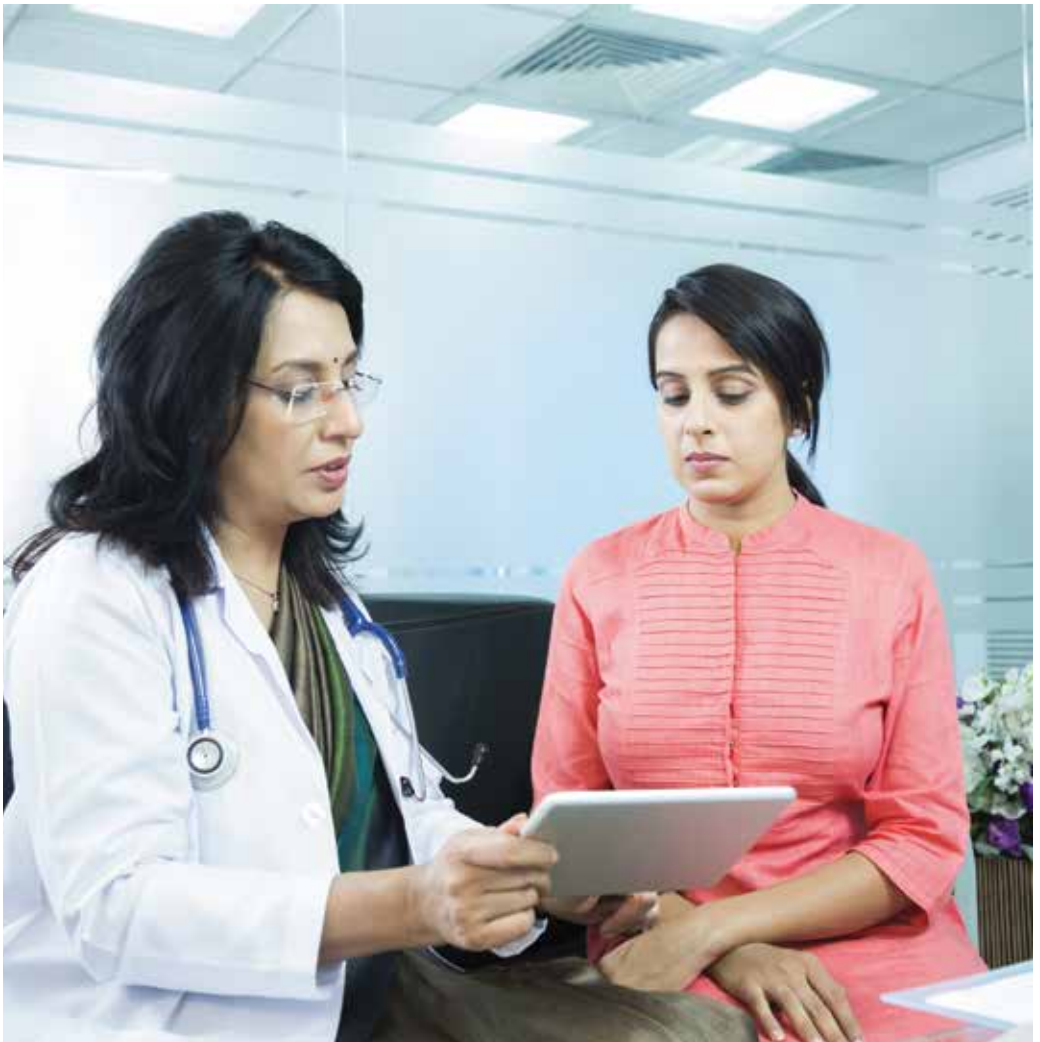
When the principal life insured reaches age 100 last birthday or dependent child reaches age 22 last birthday, the cover for that life will continue until the completion of that policy year, thereafter it shall terminate. In the former case, the next highest aged insured person will become the principal life insured and the cover for remaining lives will continue.

On death of any of the lives insured or a deletion request, the cover for the relevant life will terminate with the premium being reduced accordingly for the deceased/excluded life insured from the next premium due date and the cover for remaining insured lives will continue. New premium rates for the remaining lives will be determined on next renewal date after the expiry of the current term of the policy in relation to the new principal life and secondary lives only.

Claim Settlement

You pay all hospitalization bills directly and submit the claim documents to us or to a Third Party Administrator (TPA) post discharge. Once we approve of the claim, the benefit amount payable under your policy will be transferred to your account through a NEFT payout/transfer.

Valid claims will be payable only if hospitalization has occurred in India.



TERMS & CONDITIONS

Free-Look Period

You will have the right to return your policy to us within 15 days (30 days in case the policy is issued under the provisions of IRDAI Guidelines on Distance Marketing (2) of Insurance products) from the date of receipt of the policy. We will refund the premium paid once we receive your written notice of cancellation (along with reasons thereof) together with the original policy documents. Depending on our then current administration rules, we will deduct the proportionate risk premium for the period of cover and expenditures incurred by us on medical examination of the life insured (if any) and the stamp duty charges at the time of issuing the policy in accordance to IRDAI(Protection of Policyholders Interest) Regulations, 2002.

Further free-look periods on the same terms will be granted at each subsequent renewal date.

(2) Distance Marketing includes every activity of solicitation (including lead generation) and sale of insurance products through voice mode, SMS electronic mode, physical mode (like postal mail) or any other means of communication other than in person.

Grace Period

If you are unable to pay the premium by the due date, you will be given a grace period of 30 days during which time all insurance under your policy will continue. If you do not pay the premium within the grace period, then all insurance under the policy will cease immediately and the policy will be deemed lapsed and terminated. The lapse date is the date the first unpaid premium was due.

The policy can be reinstated for its full coverage within two years from the first unpaid premium due date. This can be done as per board approved underwriting policy subject to satisfactory completion of fresh underwriting and a 90-day waiting period will be applied from the date of revival on the same terms as at original policy issue.

Renewal after 5 years

At the end of the policy term, you will have option to renew the policy for another term of 5 years. On policy renewal date, the premium rates as applicable to then attained age of life insured/s will be applicable. We reserve the right to revise the premium rates at the time of renewal subject to prior IRDAI approval.

We will intimate about the revised premium amount for each life insured 60 days prior to the policy renewal date.

You will be given a period of 30 days after the completion of 5 years during which time all insurance under your policy will continue. If you do not pay the premium within those 30 days, then all insurance under the policy will cease immediately and the policy will be deemed lapsed and terminated.

The policy can be reinstated for its full coverage within two years from the first unpaid premium due date. This can be done as per board approved underwriting policy subject to satisfactory completion of fresh underwriting and a 90-day waiting period will be applied from the date of revival on the same terms as at original policy issue.

Service Tax and Education Cess

Service Tax and other levies, as applicable, will be extra and levied as per the extant tax laws

Tax Benefit

The premium paid by you to insure yourself and/or your family and parents, is eligible for tax benefit as per Section 80D of the Income Tax Act, 1961.

Tax benefits are available as per the extant tax laws and are subject to change from time to time. You are advised to consult your independent tax consultant.

Nomination

Allowed as per the provisions of Section 39 of the Insurance Act, 1938 as amended from time to time.

For more details on the nomination, please refer to our website www.insurance.birlasunlife.com

Assignment

Assignment not allowed under this plan

Section 41 of the Insurance Act, 1938

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take 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 punishable with a fine which may extend to ten lac rupees.

Fraud and Misrepresentation

As per provisions of Section 45 of the Insurance Act, 1938 as amended from time to time. For more details on Section 45 of the Insurance Act, 1938 please refer to our website www.insurance.birlasunlife.com

IMPORTANT DEFINITIONS

“day” in Hospital – means a period of a full 24 hours during a period of confinement. The first Day of confinement shall commence at the time of admission to the Hospital and each subsequent Day shall commence 24 hours after the commencement of the previous Day. In the event of the time of discharge of the Life Insured from the Hospital being more than 12 hours, but less than 24 hours from the end of the previous Day, then the Day of discharge shall also be regarded as a Day.

“hospital” means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registrations and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under:

- Has qualified nursing staff under its employment round the clock;
- Has at least 10 inpatient beds, in those towns having a population of less than 10,00,000 and atleast 15 inpatient beds in all other places;
- Has qualified **medical practitioner(s)** in charge round the clock;
- Has a fully equipped operation theatre of its own where surgical procedures are carried out;
- Maintains daily records of patients and makes these accessible to the Insurer’s authorized personnel.

“intensive care unit (ICU)” 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.

“medically necessary” treatment is defined as any treatment, tests, medication, or stay in hospital or part of a stay in hospital which

- is required for the medical management of the illness or injury suffered by the insured;
- must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- must have been prescribed by a medical practitioner;
- must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

“hospitalization” means admission in hospital for a minimum period of 24 In-patient care consecutive hours except for specified procedures/ treatments, where such admission could be for a period less than 24 consecutive hours.

”pre-existing disease” means any condition, ailment or injury or related condition(s) for which you had signs or symptoms, and/or were diagnosed, and/or received medical advice/treatment within 48 months to prior to the first policy issued by the insurer.

Supporting definitions

“An accident” is a sudden, unforeseen and involuntary event caused by external, visible and violent means.

“injury” means accidental physical bodily harm excluding **illness** or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a **medical practitioner**.

“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.

“acute condition” means any disease, **illness** or **injury** that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/illness/injury which leads to full recovery

“medical bills” any bill/receipt issued by a chemist or a hospital as an evidence of life insured incurring medical expenses or cost towards any treatment in a hospital while the policy is in effect. Such medical expenses would include costs of medical tests, medicines (Allopathic/Ayurvedic/homeopathy), consultation fees for physician/surgeon, dental/ ophthalmic/ orthopedic treatments, room rent and boarding expenses in a hospital and any other health related expenses.

“medical practitioner” means a person who holds a valid registration from the Medical Council of any state of India and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of his license and who is neither the life insured himself nor related to the life insured by blood or marriage

EXCLUSIONS

- Pre-Existing Illness
 - a. Pre-Existing Diseases unless there is full disclosure of the illnesses and accepted by BSLI as per Board-approved Underwriting Policy. For the purpose of this exclusion the Pre-existing Illness shall not include any congenital disease or deformity. Where there has been full disclosure of the illnesses and accepted by BSLI as per Board-approved Underwriting Policy, the waiting period for such illnesses shall be lesser of 90 days from the risk commencement date or 48 months from the date of occurrence of that pre-existing illness as specified in Section 17 of Schedule I of the Health Insurance Regulation, 2013;
- Hospitalization which is not medically necessary (as defined earlier).
- Elective surgery or treatment which is not medically necessary;
- Treatment for weight reduction or weight improvement regardless of whether the same is caused (directly or indirectly) by a medical condition; Study and treatment of sleep apnoea;
- Any dental care or surgery of cosmetic nature, extraction of impacted tooth/teeth, orthodontics or orthognathic surgery, or temporo-mandibular joint disorder except as necessitated by an accidental injury;
- Treatment for infertility or impotency, sex change or any treatment related to it, abortion, sterilization and contraception including any complications relating thereto;
- Hospitalization for treatment arising from pregnancy and it's complications which shall include childbirth or miscarriage and ectopic pregnancy;
- Hospitalization primarily for diagnosis, X-ray examinations, general physical or medical check-up not followed by active treatment during the hospitalization period;
- Stay in hospital where no active treatment is given by specialist medical practitioner (as defined earlier); *where active treatment means treatment which is Medically Necessary and is directed to the cure of the disease or injury*
- Experimental or unproven procedures or treatments, devices or pharmacological regimens of any description (not recognized by Indian Medical Council) or hospitalization for treatment under any system other than allopathy;
 - a. Here, **Experimental or unproven procedure and treatment** means any treatment, including drug Experimental therapy, which is not based on established medical practice in India
- Treatment of any mental or psychiatric condition e.g. insanity, mental or nervous breakdown / disorder, depression, dementia, Alzheimer's disease bi-polar disorders, schizophrenia
- Treatment at institutions that do not fall within the scope of hospitals which include places

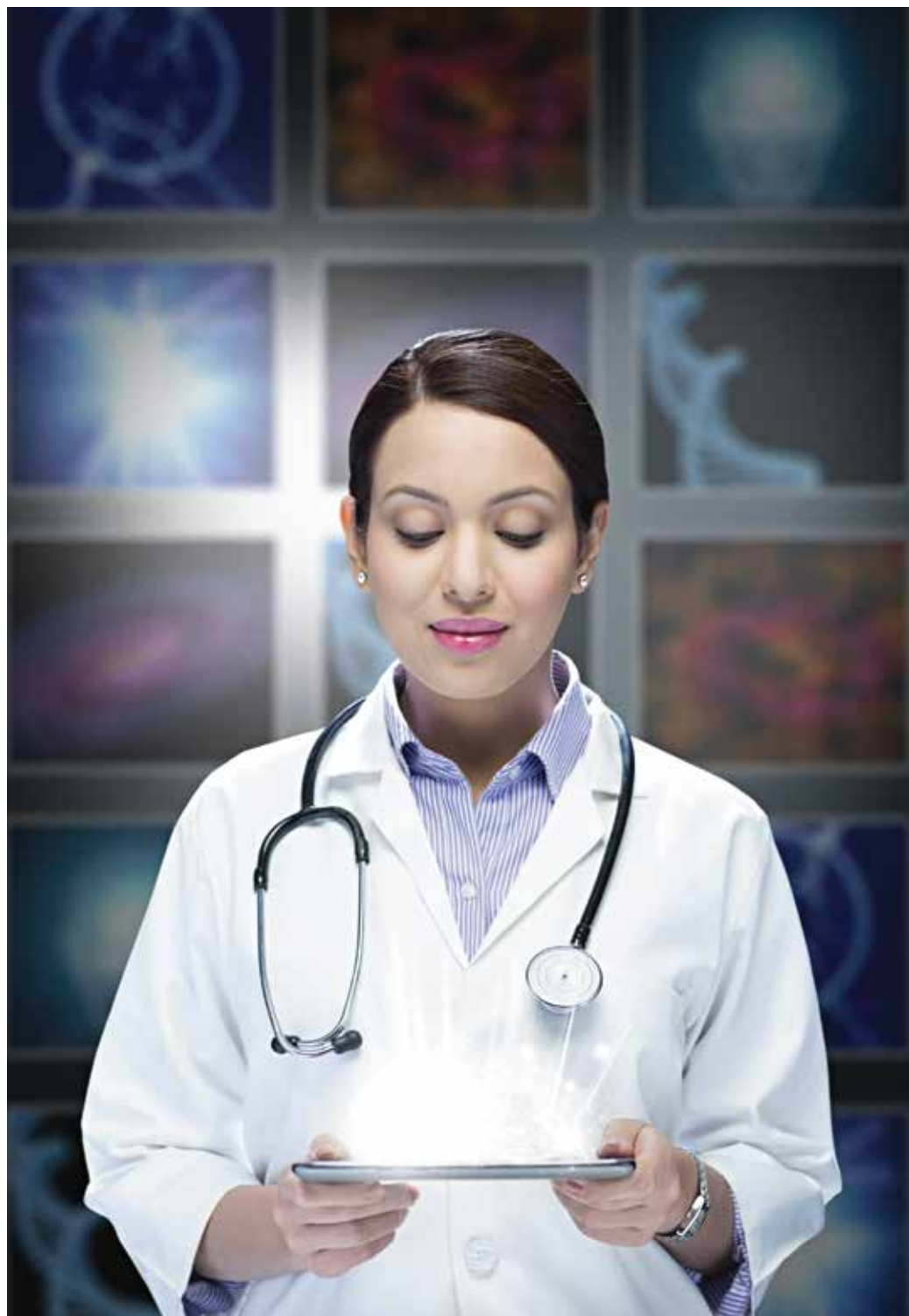
for rest cures, convalescence cures, custodial care in a sanatorium. Homes for persons declared incapable of managing their own affairs, homes for the aged, alcoholics, drug addicts, mentally-disturbed persons and persons in need of care.

- Admission to a nursing home or home for the care of the aged unless related to the treatment of an acute condition;
- Treatment directly or indirectly arising from alcohol, drug or substance abuse and any illness or accidental physical injury which may be suffered after consumption of intoxicating substances, liquors or drugs;
- Treatment directly or indirectly arising from or consequent upon war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, terrorism, rebellion, active participation in strikes, riots or civil commotion, revolution, insurrection or military or usurped power;
- Sexually transmitted diseases or Acquired Immune Deficiency Syndrome (AIDS) and all illnesses or diseases caused by or related to the Human Immuno-deficiency Virus;
- Cosmetic or plastic surgery except to the extent that such surgery is necessary for the repair of damage caused solely by accidental injuries; treatment of xanthelesema, syringoma, acne and alopecia; circumcision unless necessary for treatment of a disease or necessitated due to an accident;
- Nuclear disaster, radioactive contamination and/or release of nuclear or atomic energy;
- Treatment for accidental physical injury or illness caused by intentionally self-inflicted injuries; or any attempts of suicide while sane or insane; or deliberate exposure to exceptional danger (except in an attempt to save human life);
- Treatment for accidental physical injury or illness caused by violation or attempted violation of the law with criminal intent;
- Treatment for accidental physical injury or illness caused by professional sports, racing of any kind, scuba diving, aerial sports, activities such as hand-gliding, ballooning, and any other hazardous activities or sports unless agreed by special endorsement;
- Hospitalization where the life insured is a donor for any organ transplant;
- Any hospitalization outside of Republic of India

The Company shall not be liable to make any payment, if hospitalization or claims are attributable to, or based on, or arise out of, or are directly or indirectly connected to any of the following:

- Hospitalization and/or treatment within the waiting period or
- hospitalization and/or treatment following the diagnosis within the waiting period.

Where the cause of claim is an accident, no such waiting period applies.



About Birla Sun Life Insurance

Birla Sun Life Insurance Company Limited (BSLI) is a joint venture between the Aditya Birla Nuvo Limited, a leading Indian conglomerate, and Sun Life Financial Inc., one of the leading international financial services organisations from Canada. BSLI ranked 4th in India among the private life insurers in terms of annual premium equivalent, with a market share of 7.9% for the 6 months ended 30th September 2015. During this period, BSLI ranked as #1 private life insurer in the group segment with 22.4% new business market share [Source: IRDAI, www.irda.gov.in]. It reported an Embedded Value of Rs. 3,260 Crore as on 31st March 2015 and Value of New Business margin at 14.1% for 2014-15. During 2014-15, it recorded a gross premium income of Rs. 5,233 Crore, registering a y-o-y growth of 8% and posted a net profit of Rs. 285 Crore. Its assets under Management at Rs. 30,291 Crore as on 30th September, 2015 grew year-on-year by 10%. BSLI has a nation-wide distribution presence through 489 branches, 3 bancassurance partners, over 55,000 direct selling agents and more than 150 corporate agents and brokers. BSLI is meeting its growth capital and solvency requirements through internal accruals and has not required any capital infusion during past five years. The company offers a complete range of protection solutions, children's future solutions, wealth with protection solutions, health and wellness solutions, retirement solutions and savings with protection solutions. For more information, please visit www.insurance.birlasunlife.com.

About Aditya Birla Financial Services Group

Aditya Birla Financial Services Group (ABFSG) ranks among the top 5 fund managers in India (excluding LIC) with an AUM of INR 181,916 Crore as on 30th September 2015. Having a strong presence across the life insurance, asset management, private equity, general insurance broking, wealth management, broking, online personal finance, housing finance, pension fund management and NBFC, ABFSG is committed to serve the end-to-end financial services needs of its retail and corporate customers. ABFSG is in the process of seeking a licence from IRDAI for launching health Insurance business in a joint venture with MMI Group of South Africa. For the half year ended 30th September 2015, ABFSG reported consolidated revenue from these businesses at Rs. 4,166 Crore and earnings before tax of Rs. 502 Crore. Anchored by about 11,500 employees and trusted by over 7.4 million customers, ABFSG has a nationwide reach through 1,350 points of presence and about 112,000 agents / channel partners. For more information, please visit www.abfsg.com.

About Aditya Birla Nuvo Ltd.

Aditya Birla Nuvo is a USD 4.4 billion conglomerate operating in the services and the manufacturing sectors, where it commands a leadership position. Its service sector businesses include Financial Services, Fashion & Lifestyle and Telecom. It is a leading player in Linen, Agri, Rayon and Insulators businesses. ABNL is foraying into the Health Insurance and the Solar Power businesses. It has received an in-principle approval from Reserve Bank of India to set up a Payments Bank in joint venture with Idea Cellular. For more information please visit www.adityabirlanuvo.com.

Aditya Birla Nuvo is a part of the Aditya Birla Group, a USD 41 billion Indian multinational. The Aditya Birla Group is in the league of Fortune 500. Anchored by an extraordinary force of over 120,000 employees, belonging to 42 nationalities, the Aditya Birla Group operates in 36 countries across the globe. Over 50 per cent of its revenues flow from its overseas operations. For more information please visit www.adityabirla.com.

About Sun Life Financial

Celebrating 150 years in 2015, Sun Life Financial is a leading international financial services organization providing a diverse range of protection and wealth products and services to individuals and corporate customers. Sun Life Financial and its partners have operations in a number of markets worldwide, including Canada, the United States, the United Kingdom, Ireland, Hong Kong, the Philippines, Japan, Indonesia, India, China, Australia, Singapore, Vietnam, Malaysia and Bermuda. As of September 30, 2015, the Sun Life Financial group of companies had total assets under management of C\$846 billion. For more information please visit www.sunlife.com.

Sun Life Financial Inc. trades on the Toronto (TSX), New York (NYSE) and Philippine (PSE) stock exchanges under the ticker symbol SLF.

RISK FACTORS AND DISCLAIMERS

This policy is underwritten by Birla Sun Life Insurance Company Limited (BSLI). This is a traditional health insurance plan. All terms & conditions are guaranteed throughout the policy term. Service Tax and Education Cess and any other applicable taxes will be added (extra) to your premium and levied as per extant tax laws. This brochure contains only the salient features of the plan. For further details please refer to the policy contract. Tax benefits are subject to changes in the tax laws. For more details and clarification call your BSLI Insurance Advisor or visit our website and see how we can help in making your dreams come true.

IRDAI hereby clarifies to the public that:

- IRDAI or its officials do not involve in activities like sale of any kind of insurance or financial products nor invest premiums
- IRDAI does not announce any bonus.

Public receiving such phone calls are requested to lodge a police complaint along with details of phone call and number.

Birla Sun Life Insurance provides a wide range of solutions to cater to your specific needs. To know more about our various solutions and the products offered under each, we invite you to visit our website, or contact our advisor.

Call: 1800-270-7000

www.insurance.birlasunlife.com



Birla Sun Life
Insurance

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