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Anju Kadam / Entrepreneur

## PROTECTING your surgical expenses now with an extra cover

### Aditya Birla Sun Life Insurance Surgical Care Rider

- Option to choose benefit from Rs 3,000 to Rs 30,000
- Lump sum benefit up to 50 times of chosen benefit in case of major surgery

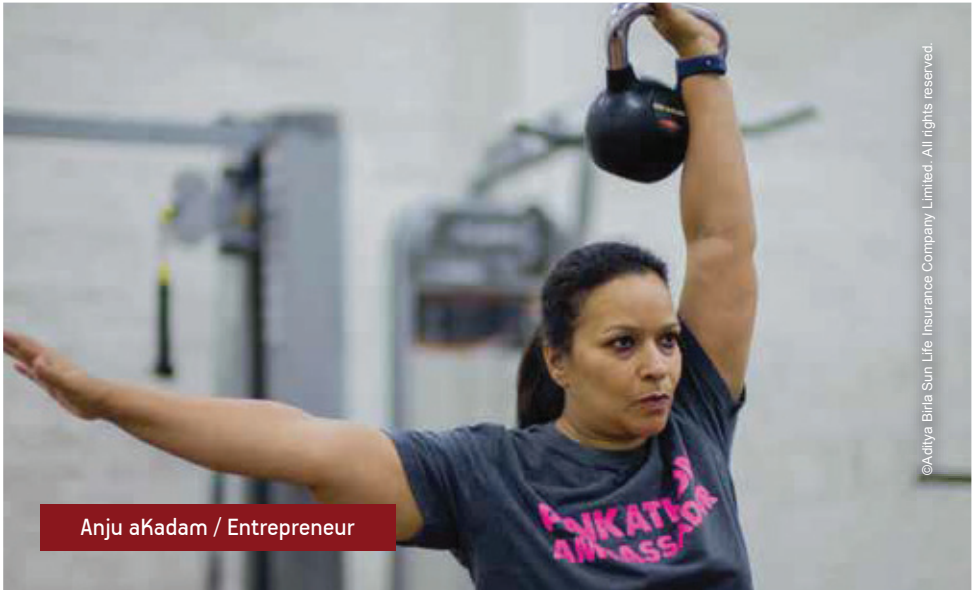
#### Life Insurance

Aditya Birla Sun Life Insurance Company Ltd.  
(A subsidiary of Aditya Birla Capital Ltd.)



**ADITYA BIRLA  
CAPITAL**

1800-270-7000



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We all hope to go through life without any health problems, but we all know the importance of planning for such eventualities. If and when that time comes, the high costs of hospitalisation and surgeries should be the least of your concerns. ABSLI Surgical Care Rider ensures the only thing your family has to think at that hour is about you.

Eligibility Criteria	
Minimum rider Sum Assured	₹ 150,000
Maximum rider Sum Assured	Lower of the sum assured of base plan or ₹ 1,500,000
Maximum premium	Depends on the age, gender and sum assured Maximum up to 30% of the base premium
Minimum Entry Age#	18 years (age last birthday)
Maximum Entry Age#	65 years (age last birthday)
Maximum Maturity Age#	70 years
Terms allowed	Same as the premium paying term of the base plan or till the attained age 70 years of the life insured, whichever is earlier. 5-52 years
Premium paying terms allowed	Regular pay
Waiting Period	90 days

## Benefits

The policyholder can opt for this rider only at policy issue. Once opted for, the rider cannot be deleted.

The policyholder will choose the benefit amount. The minimum benefit amount is Rs.3,000 and the maximum benefit amount is Rs. 30,000. The rider sum assured is 50 times this benefit amount.

If the life insured is hospitalized for undergoing Medically Necessary surgery in India for a minimum period of 24 hrs and actually undergoing that surgery a lump sum benefit will be paid depending on below mentioned type of surgery.

a) **Major surgery** -In case the surgery directly involves brain, heart (including coronary arteries), liver or lung the benefit amount will be five times the chosen benefit amount.

b) **Other surgery**-For any other valid surgical hospitalization the benefit will be equal to the chosen benefit amount.

Should more than one surgery be performed during single hospitalisation, then claim for the highest benefit amount would be paid.

The policyholder can claim maximum 10 times of the chosen benefit amount in any policy year. The claim can be any combination of major or/and other surgery. The accumulated claim during the policy term will be restricted to the rider sum assured. Thus,

Annual limit of claim under this policy: 10 times the chosen benefit amount

Policy limit of claim under this policy: 50 times the chosen benefit amount

The premium would be paid fully till the end of the premium paying term or till 100% of the sum assured is paid. Once 100% of the sum assured is paid, the cover for the rider shall cease.

A waiting period of 90 days is applicable for all benefits payable under this rider from the policy effective date or the effective date the policy is revived, whichever is the later, during which time no benefit will be payable. Specific waiting periods of 2 years from policy inception date or revival date for conditions mentioned below will apply for all benefits.

- Hernia Repair
- Corrective procedure for gall stones
- Corrective procedure for kidney or urinary tract stones
- Discectomy, laminectomy
- Hemi / Partial thyroidectomy
- Corrective procedure for anal fistula or anal fissure
- Removal of uterus, fallopian tubes and/or ovaries, except for malignancy
- Corrective procedure for fibroids, uterine prolapse, or dysfunctional uterine bleeding
- Corrective procedures for haemorrhoids
- Cataract & Joint replacement surgeries

## Surrender Benefit



There is no surrender value, paid-up value or loan available under this rider. On surrender of the base plan no rider benefit will be paid. On base plan being paid-up, rider benefit will cease immediately.

### Definitions-

**“Hospitalization “** means admission in hospital for minimum period of 24 In patient care consecutive hours except for procedures / treatments mentioned under exclusions.

#### **“Hospital”**

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

- Has at least 10 inpatient beds, in those towns having a population of less than 10,00,000 and 15 inpatient beds in all other places;
- Has qualified nursing staff under its employment round the clock;
- 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; and
- Maintains daily records of patients and will make these accessible to us.

**“Surgery / Surgical Procedure “**means manual and/or operative procedure(s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a medical practitioner.

**“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.

**“Pre-existing condition “** means any condition, ailment or injury or related condition(s) for which life assured 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.

**“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.

**“Medical Practitioner”** means a person who holds a valid registration from the Medical Council of any state or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of his license. The medical practitioner should not be the insured or a close relative of the insured

## Exclusions

The life insured will not be entitled to any benefits if the surgery is directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- Any pre-existing disease. Pre-existing Disease means any condition, ailment, injury or disease:
  - a) That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or its revival, whichever is later, or
  - b) For which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the rider or its latest revival date, whichever is later
- Any Sexually Transmitted Diseases
- Attempted suicide or self inflicted injury, irrespective of the mental condition
- Hazardous sports or activities included but not limited to bungee jumping, mountaineering, etc.
- Any flying activity other than as a bonafide passenger
- Under the influence of alcohol, drugs or any substance not prescribed by a Registered Medical Practitioner or as a result of abuse from any of these substances
- War, terrorism, riots, civil commotion, strikes, civil war or service in the military or paramilitary forces of a country at war
- Criminal, unlawful or illegal activity participation
- Exposure to radioactive or nuclear fuel
- Treatment taken outside India
- Circumcision, any cosmetic procedures or plastic surgery

- Pregnancy, childbirth or their complications, abortion, medical termination of pregnancy, infertility or sex change operation
- Organ donation (as a donor)
- Rehabilitation or convalescent care or length beyond customary length of stay
- Congenital conditions, genetic disorders or birth defects
- Dental treatment except if arising from an accident
- Non-Allopathic treatment
- Purely investigative procedure not resulting in any treatment or elective procedures or unreasonable failure to seek medical advice
- Study and treatment of sleep apnoea
- Deliberate exposure to exceptional danger (except in an attempt to save human life)
- Any surgery performed within 90 days from the start of coverage or the revival date.

### **Premium Paying Modes**

Policy premiums can be paid yearly, half yearly, quarterly or monthly and this will be same as for base plan. Any premium rebate or modal factors will also be same as the base plan.

### **Termination**

You are not allowed to opt out of the rider once availed. However, the rider benefit will cease immediately if the base plan is terminated or when the total claims paid equals 100% of the rider sum assured. The rider benefit will also cease when the reinstatement period ends, no rider benefit shall be payable during reinstatement period for such policies.

### **Free-Look , Grace Period & Reinstatement**

Client will have a Free-Look period, Grace Period and Reinstatement period as per the rules of the base plan.

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# ADITYA BIRLA CAPITAL

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