

Xtend: Endorsement Document

Xtend is an add-on which can be endorsed along with the Base Plan only and cannot be bought in isolation or as a separate product. The add-on shall be available only if it is specifically mentioned in Your Base Plan's Policy Schedule.

All waiting periods, permanent exclusions, definitions, claims procedure and general terms & conditions applicable to the Base Plan will apply to this add-on as well unless, otherwise stated.

Please Note: Any claim under any of the benefits mentioned in this add-on endorsement policy will only be admissible when it qualifies according to the terms, conditions and exclusions of the Base Plan.

1. Benefits

1.1. Cash-Bag+:

For each claim free year get an amount equal to 10% of the premium to be paid on 1st Renewal and 5% thereafter on each renewal from 2nd renewal onwards.

Get an additional 10% on the Accumulated Cash-Bag+ amount in a block of every 3 years.

Now, refer your friends and family, and with every conversion into Niva Bupa Policy, earn 10% (only on one time purchase) of the premium your friend has paid, as Cash-bag+!

All this Accumulated amount can be used for OPD, pay for deductibles, pay for co-payment, Non-payable items and pay premiums. This optional benefit can be accessed through our Mobile App.

Note:

- Deductibles, Co-Payments can only be paid for claims under the Product with which the Add-on is opted for.
- Only the premium for the Product with which the Add-on is opted for, can be paid for using this Cash-Bag+
- Claims under Cash-Bag+ will not impact Booster+, Booster, No Claim Bonus, Lock the Clock, Lock the clock+ (If applicable)

1.2. NivaBupaOne

Your access to NivaBupaOne- Our Premium Club. The membership enables you to get access to an executive health check-up (Annexure I) and get fast-track priority for claims and policy services- because your time matters.

Annual Health Checkup (Cashless Only), Annual Health Checkup (Cashless + Reimbursement), and NivaBupa One cannot be opted together.

1.3. ElderOne

From friendly check-ins to helping with life's little needs. Opt for benefits for Senior Citizens.

- Regular virtual check-ins
- Community engagement (Virtual) - webinars, sessions, activities.
- Dedicated elder care relationship manager: your one stop for all Elder needs.
- Regular virtual updates to family members
- Complete assessment of the Senior Citizen premise for "Fall risk assessments"
- Regular check-ins (in-person)
- Virtual mental health sessions
- Cognitive Health Screening
- On call/virtual Support in curating travel plans and booking assistance
- "Care Concierge Desk" which will help provide discounts on services like, arrange for Bedside care taker, Home Nursing services, Doctor Home Visits, Wound Dressing Services, Medical Equipment's at Home - Medical bed, oxygen, wheelchair, airbed etc.

Note:

- This benefit is applicable only through our network.
- This benefit can be opted for seniors (anyone 56 years and above) insured within the policy or parents/parents-in laws of the proposer not insured in the policy.

- Visit by Care managers will be for up to 1 hour
- **All waiting periods and exclusions will apply to this benefit.**
- **This benefit is applicable only in India.**

1.4. Annual Health Checkup (Cashless Only)

Available once every Policy Year, from day 1 of the policy. The tests MUST be booked through our digital assets (e.g. Mobile App). This benefit is available ONLY on cashless and no re-imbursement is allowed.

Note:

- If you undergo multiple tests, make sure that all these are done within 7 days.
- All Packages are mentioned in Annexure I and will be applicable as chosen by you.
- Annual Health Checkup (Cashless Only), Annual Health Checkup (Cashless + Reimbursement), and NivaBupaOne cannot be opted together.

1.5. Annual Health Checkup (Cashless + Reimbursement)

Available once every Policy Year, from day 1 of the policy. The tests MUST be booked through our digital assets (e.g. Mobile App). This benefit is available on cashless and re-imbursement basis.

Note:

- If you undergo multiple tests, make sure that all these are done within 7 days.
- All Packages are mentioned in Annexure I and will be applicable as chosen by you.
- Annual Health Checkup (Cashless Only), Annual Health Checkup (Cashless + Reimbursement), and NivaBupaOne cannot be opted together.

1.6. HeadsUp

You Call We Guide.

Reach us 48 hours before for any hospitalization and get treated for the informed illness/surgery at our recommended network provider (For emergency: inform us within 24 hrs of admission).

A 20% Co-payment will apply if either the treatment is taken for some other illness/surgery as informed earlier, or/and treatment is taken outside the recommended network provider, and/or if not informed within 24hr of admission.

Note: This will ONLY apply to Expenses in reaching a hospital, Expenses During Hospitalization, Expenses Before & After Hospitalization, Home Care/Domiciliary & Organ Donor.

IF Tiered Network (Benefit/Addon) is opted/applicable in the base policy, then HeadsUp Benefit cannot be opted.

1.7. Personal Accident

1.7.1. Accidental Death (AD)

In event of unfortunate demise of the insured within 365 days from the date of the Accident, within the Policy Period, we will pay the Sum Insured.

The Personal accident benefit will terminate after the Accidental Death benefit is paid for.

1.7.2. Permanent Total Disability

If the Insured Person suffers Permanent Total Disability, within 365 days from the date of the Accident, within the Policy Period, we will pay the benefit as per the below Table

Condition for Permanent Total Disability	% of Accidental Death Sum Insured
Complete & Irrecoverable loss of: <ul style="list-style-type: none"> • Any 2 Limbs • Sight of both eyes • Speech & hearing of both Ears • Combination of One Limb & Sight of One Eye 	125%
Complete & Irrecoverable loss of: <ul style="list-style-type: none"> • 1 Limb 	50%

- Sight of 1 Eye

- a. Complete & Irrecoverable loss of limb means physical separation or complete loss of functionality of the limb, within 365 days from the date of the Accident. This will include Paralysis including Paraplegia, Quadriplegia with loss of functional use of limb.

The Personal accident benefit will terminate after the Permanent Total Disability benefit is paid for.

1.7.3. Permanent Partial Disability

- a. If the Insured Person suffers a Permanent Partial Disability, within 365 days from the date of the Accident, within the Policy Period, we will pay the benefit as per the below Table.

Condition for Permanent Partial Disability	% of Accidental Death Sum Insured
Each arm at the shoulder joint	70%
Each arm to a point above elbow joint	65%
Each arm below elbow joint	50%
Each hand at the wrist	50%
Each Thumb	20%
Each Index Finger	10%
Each other Finger	5%
Each leg above center of the femur	70%
Each leg up to a point below the femur	65%
Each leg to a point below the knee	50%
Each foot at the ankle	40%
Each big toe	5%
Each other toe	2%
Each eye	50%
Hearing in each ear	30%
Sense of smell	10%
Sense of taste	5%

- b. If a Permanent Partial Disability loss is not mentioned in the table above, then we will internally assess the degree of disablement and determine the amount of payment to be made.

- c. If there is more than one Permanent Partial Disability loss, then the total claim amount put together for all losses will not exceed the total Accidental Death Sum Insured opted. Once Total Sum Insured is paid, the policy will lapse.

1.8. Personal Accident (Lite)

1.8.1. Accidental Death (AD)

In event of unfortunate demise of the insured within 365 days from the date of the Accident, within the Policy Period, we will pay the Sum Insured.

The Personal accident (Lite) benefit will terminate after the Accidental Death benefit is paid for.

1.9. Personal Accident (Pro)

1.9.1. Accidental Death (AD)

In event of unfortunate demise of the insured within 365 days from the date of the Accident, within the Policy Period, we will pay the Sum Insured.

The Personal accident (Pro) benefit will terminate after the Accidental Death benefit is paid for.

1.9.2. Permanent Total Disability

If the Insured Person suffers Permanent Total Disability, within 365 days from the date of the Accident, within the Policy Period, we will pay the benefit as per the below Table

Condition for Permanent Total Disability	% of Accidental Death Sum Insured
Complete & Irrecoverable loss of:	125%
• Any 2 Limbs	

<ul style="list-style-type: none"> Sight of both eyes Speech & hearing of both Ears Combination of One Limb & Sight of One Eye 	
Complete & Irrecoverable loss of: <ul style="list-style-type: none"> 1 Limb Sight of 1 Eye 	50%

- b. Complete & Irrecoverable loss of limb means physical separation or complete loss of functionality of the limb, within 365 days from the date of the Accident. This will include Paralysis including Paraplegia, Quadriplegia with loss of functional use of limb.

The Personal accident benefit will terminate after the Permanent Total Disability benefit is paid for.

1.9.3. Permanent Partial Disability

- d. If the Insured Person suffers a Permanent Partial Disability, within 365 days from the date of the Accident, within the Policy Period, we will pay the benefit as per the below Table.

Condition for Permanent Partial Disability	% of Accidental Death Sum Insured
Each arm at the shoulder joint	70%
Each arm to a point above elbow joint	65%
Each arm below elbow joint	50%
Each hand at the wrist	50%
Each Thumb	20%
Each Index Finger	10%
Each other Finger	5%
Each leg above center of the femur	70%
Each leg up to a point below the femur	65%
Each leg to a point below the knee	50%
Each foot at the ankle	40%
Each big toe	5%
Each other toe	2%
Each eye	50%
Hearing in each ear	30%
Sense of smell	10%
Sense of taste	5%

- e. If a Permanent Partial Disability loss is not mentioned in the table above, then we will internally assess the degree of disablement and determine the amount of payment to be made.

- f. If there is more than one Permanent Partial Disability loss, then the total claim amount put together for all losses will not exceed the total Accidental Death Sum Insured opted. Once Total Sum Insured is paid, the policy will lapse.

1.4.4. Accidental OPD

If the Insured Person sustains an Accidental Injury then we will cover expenses incurred on Outpatient (OPD) treatment of the Insured.

Outpatient Expenses includes ONLY:

- Procedures that require less than 24 hours of hospitalization. This excludes day care treatment.
- Diagnostic Tests for Accident related injury or procedure
- Vaccinations/Vaccinations for Animal Bites
- Plaster cast and/or crutches

1.10. Hospital Daily Cash

We will pay for an Insured, an additional fixed amount for each day's hospitalization for maximum up to 30 days. One day is considered as 24 continuous hours of continuous hospitalization. We will pay this if we have paid for Expenses during hospitalization in the policy.

1.11. Wellconsult+

Opt for Complete wellness and Out-patient benefits.

- **Tele/Video Consultation** with General Practitioners.
- **Physical Consultations** with Specialists & General Practitioner.
- **Prescribed Diagnostics**
- **Prescribed Pharmacy**
- **Dental Procedures.**
- **Ophthalmological Consultations**
- **Prescribed Physiotherapy Consultations**
- Online sessions on **Emotional Wellness**. Can be availed only through our Partner network.
- **Diet and Nutrition Coaching**. Can be availed only through our Partner network.
- Artificial Intelligence lead Smart Fitness Coaching. Can be availed only through our Partner network.
- Access to Global online content on wellness through our Partner network
- Access to **Gym memberships** on our Partner network.

Note:

- All benefits are as per limits mentioned in your policy schedule.
- Claims under WellConsult+ will not impact Booster+, Lock the Clock, Lock the Clock+, Booster, No Claim Bonus (if applicable in the base policy)
- We will not pay for specialist consultation for Maternity and OPD Procedures.
- Any cosmetic Dental (like and not limited to Dentures- Removable (complete/partial), Fixed partial dentures, Invisible Aligners (Without retainers), Removable Retainers, Fixed Retainers, Essix retainer, Space maintainers) & Ophthalmological (like and not limited to cataract, eye surgery, biometry, laser, eyesight correction surgery) procedures are not covered.
- All waiting periods and exclusions will apply to this benefit.
- Reimbursement is also allowed for Tele/Video Consultations, Physical Consultations, Prescribed Diagnostics, Prescribed Pharmacy, Dental Procedures, Ophthalmological Consultation, Prescribed Physiotherapy Consultations. Flat 20% co-payment will apply in case of Reimbursement.
- This benefit is applicable only in India.

1.12. Borderless

Get emergency or planned treatments anywhere in the world. Choose from a range of co-payments options 0%, 20%, 30%, 40% & 50%

Note:

- The consumer can be diagnosed anywhere in the world and can go for treatments anywhere in the world.
- This benefit is available under cashless and reimbursement.
- The following benefits will be considered for Borderless also: Expenses in reaching a Hospital, Expenses during Hospitalization, Expenses before and after hospitalization, Organ Donor.
- Lock the clock Benefit will be impacted, if a claim is paid under this benefit.
- This optional benefit is not available to Non-Indian citizens & people who are not permanent residents of India.
- We will cover up to standard private room only.
- Borderless and Borderless for Specific Illness cannot be opted together.

1.13. Borderless for Specific Illness

Get planned treatments for these specific list of illnesses anywhere in the world.

S. No.	Specified Illness
1	Cancer
2	Myocardial Infarction (First Heart Attack of specific severity)
3	Open Chest CABG
4	Major Organ/Bone Marrow Transplant
5	Stroke Resulting in Permanent Symptoms

6	Surgery of Aorta
7	Angioplasty
8	Primary (Idiopathic) Pulmonary Hypertension
9	Brain Surgery

Choose from a range of co-payments options 0%, 20%, 30%, 40% & 50%

Note:

- The symptoms of the Specified Illness should first occur or manifest itself during the Policy Period and after completion of the 90 day from the inception of the First Policy with Us.
- The Specified Illness is diagnosed by a Medical Practitioner within India during the Policy Period and after completion of the 90 day from the inception of the First Policy with Us.
- This benefit is available under cashless and reimbursement.
- The following benefits will be considered for Borderless Specified Illness also: Expenses in reaching a Hospital, Expenses during Hospitalization, Expenses before and after hospitalization, Organ Donor.
- Lock the Clock Benefit will be impacted, if a claim is paid under this benefit.
- Borderless and Borderless for Specific Illness cannot be opted together.
- We will cover up to standard private room only.
- This optional benefit is not available to Non-Indian citizens & people who are not permanent residents of India.

1.14. Third Medical Opinion

If you are not satisfied with the second medical opinion, should you want a third medical opinion from another specialist or super specialist in the panel, we will facilitate the same through our empaneled partner. We will pay for it. You can take the third medical opinion for as many conditions as you want in a policy year.

1.15. Second Medical Opinion-Express

Once in a Policy year, you can choose to take a second medical opinion from any Medical Practitioner. Through our partners we can help you get a second opinion from some of the most reputed doctors in the country.

Note: This benefit is applicable, only if the second medical opinion is asked for within 48 hours of hospitalization.

1.16. Medical Equipment

If you opt for this benefit, we will pay for medically necessary equipment needed for you to resume normal living post injury due to Accident.

Note:

- The Accident has to occur within the policy period.
- The devices must be Medically Necessary for Treatment and prescribed by a Medical Practitioner.
- **We will cover this, if we have paid a claim under Expenses in reaching the hospital, Expenses During Hospital, Expenses Before and After a Hospitalization, Home Care/Domiciliary, Personal Accident, Personal Accident (Lite), Personal Accident (Pro).**
- For the purpose of this benefit, **Medical Equipment** means artificial devices replacing body parts including but not limiting to artificial limbs or eyes, orthopedic braces, intra-ocular lenses, spectacles, hearing aids, dentures, artificial teeth and durable medical equipment such as wheelchair, crutches, hospital beds, traction equipment, Walkers, tri-cycles.

1.17. Emotional Wellness for Adults

Online sessions on Emotional Wellness. Can be availed only through our Partner network

1.18. Mind Wellness Counselling

Online sessions on Emotional, Mental and Mind Wellness. Can be availed only through our Partner network

1.19. Sexual Health Wellness

Online sessions on Sexual Health Wellness can be availed. only through our Partner network. This benefit is only for Adults in the policy.

1.20. Health Risk Assessment

You can take an overall online health assessment on our App, and be updated about your lifestyle and health.

1.21. Wellness for Women

Wellness that understands a woman's need.

1. Personalized Content on our Mobile App
2. Community you can interact with in a safe environment
3. Trackers, toolkits and health monitoring
4. Stress Management sessions
5. Access to Special Sections like Ayurvedic Setu for fertility, Garbh Sanskar for pregnancy, parenting tool kit, Stress management for PCOS/menopause.
6. Medical repository
7. Recorded sessions and webinars
8. Live Webinars
9. Dedicated Personal Coach
10. Special Courses like Ayurvedic tool-kit for fertility, Labour and birth for pregnancy, Parenting at different ages for Parents, Breast feeding for new born care, Coping stress management across all ages.
11. Online consults with our specialists
12. Online Yoga, Dance, Strength Training

Note:

- All waiting periods and exclusions will apply to this benefit
- This benefit is applicable only in India.
- This benefit is applicable only through our network.

1.22. EyeGuard

Opt for benefits for eye care and vision protection.

1. Prescription Glasses
2. Non-Prescription Sunglasses
3. Basic eye checkup on our partner network
4. Ophthalmologist consultations on our partner network
5. Additional discounts on eye surgeries on our partner network.

Note:

- All waiting periods and exclusions will apply to this benefit
- This benefit is applicable only through our Partner network.
- Benefits on eyewear can be availed only once during the policy year. Unused benefits would not be carried forward
- Non- Prescription glasses can only be availed if Prescription Glasses are not availed. Contact lenses are not covered.
- This benefit is applicable only in India.

1.23. Live-Fit

Optional benefits, that keep you fit, active and healthy!

1. Diet and Nutrition Coaching.
2. Artificial Intelligence lead Smart Fitness Coaching.
3. Access to workout classes across the Globe.
4. Access to Gym memberships.
5. Access to in –App activity Tracking (Steps, Meals, wearable integration), Health and Wellness content.

Note:

- This benefit is applicable only through our Partner network.
- This benefit is applicable only in India.
- All waiting periods and exclusions will apply to this benefit

1.24. Accident Care

The Insured Person may avail below services, from Our Partner network by reaching us through our mobile application/website or call center.

1. **ICU @Home:** In case of Permanent Total Disability, Permanent Partial Disability, and if recommended by the treating doctor, we will cover expenses for ICU at home. This includes services like General Nurse, Nursing Attendant, Physiotherapy, e-monitoring, Medical Equipment like syringe pumps, Oxygen concentrator, IV stand, DVT pump.
2. **Nursing Care at Home:** In case of Permanent Total Disability, Permanent Partial Disability. We will cover 12 hour/day and/or 24hr/day nursing services as prescribed by the treating doctor. This includes services of General Nurse or Nursing Attendant.
3. **Blood Transfusion:** In case of Permanent Total Disability, Permanent Partial Disability, and if recommended by the treating doctor, we will cover expenses for Blood Transfusion at home.
4. **Physiotherapy:** In case of Permanent Total Disability, Permanent Partial Disability, and if recommended by the treating doctor, we will cover expenses for Physiotherapy at home.
5. **Single nurse procedural visit:** In case of Permanent Total Disability, Permanent Partial Disability, and if recommended by the treating doctor, we will cover expenses for nurse visits for following procedures: Injection administration visit – Subcut/IM, Large Wound Dressing, Suppository application, RT insertion, Enema application, VACC dressing, Cannula Insertion, Urinary Catheterization, Small Wound Dressing.
6. **Financial Guidance:** in case of Accidental Death, we will offer one session with financial expert to provide investment guidance.

Note:

We will pay for this if a claim is paid under Personal Accident, Personal Accident (Pro), Personal Accident (Lite), or claim for Accident is paid under Expenses for Reaching Hospital, Expenses During Hospitalization, Expenses Before and After a Hospitalization, Home Care/Domiciliary, Organ Donor.

1.25. Health Vouchers

Opt for Vouchers and download the app! Use this for a variety of health related services and benefits like condition management programs, consultations with specialists, access to health content etc. available right on the app.

Note: Download Niva Bupa or Approved partner apps by Niva Bupa

1.26. Critical Illness

We will pay if you get any of the critical illness mentioned in Annexure II

Note:

- The Critical Illness first occurs and is diagnosed by a Medical Practitioner within India during the Policy Period and after completion of the 90 day from the inception of the First Policy with Us.
- The Insured Person should survive for a minimum of 30 days, post the diagnosis of critical illness.
- This benefit will only be given once in the lifetime of the consumer.

1.27. Compassionate Visit

If you are hospitalized for more than 10 consecutive days, we will pay for the economy class air ticket/railway return ticket for your immediate family member.

Note:

- Ticket will be to & fro, from the place of residence of the immediate family member.
- This applies, when the place of residence of the immediate family member and the place of residence of the Insured member is different.
- "Immediate Family member" means the Insured's Spouse, Children, Parents, and Parents-in-law.

1.28. Pre- Hospitalization Modification

You can choose to reduce or increase the number of days under Pre-Hospitalization.

NOTE: This can only available at the time of buying the policy and cannot be opted/modified/removed at renewal

1.29. Post- Hospitalization Modification

You can choose to reduce or increase the number of days under Post-Hospitalization.

NOTE: This can only available at the time of buying the policy and cannot be opted/modified/removed at renewal

1.30. Flight-Mode:

If you are a traveler and travel outside India, then you can choose to pause your policy for a maximum of 30 days in a Policy year. The coverage of the policy will be extended by the number of days you paused it for.

Note:

- This optional benefit is not available to Non-Indian citizens & people who are not permanent residents of India.
- The information (like and not limited to date of travel, proof of tickets, visa) to pause the cover should be given 48 hours before the start of the travel date.
- You need to inform us if In case you return earlier.
- If the return to India is later than 30 days after the pause was activated, the coverage shall automatically resume after 30 days irrespective of actual return date.
- If out of all members who travelled, only one or some members return to India earlier than the notified date, then the coverages shall resume from the earliest date of return to India.
- This benefit cannot be offered with International Travel Cover, Borderless or Borderless with specified illness

1.31. Initial Wait Period Modification

You can choose to reduce the Initial Wait Period.

NOTE: This can only available at the time of buying the policy and cannot be opted/modified/removed at renewal

1.32. Vaccination Cover

We will pay for the following vaccinations through our Providers. We will pay for these vaccinations once in a policy year.

S.No	Vaccination Name
1	Influenza
2	Pneumonia
3	Cervical Cancer
4	Hepatitis B
5	Typhoid
6	BCG
7	OPV + IPV 1
8	DPT
9	Haemophilus influenzae type B
10	Tetanus
11	Rota
12	MMR
13	Hepatitis A

1.33. Convalescence Benefit

We will pay a fixed amount, if you are hospitalized continuously for more than 10 days

Note:

- We will pay this benefit, if we have paid for Expenses in reaching a Hospital, Expenses during Hospitalization, Expenses before and after hospitalization, Home Care / Domiciliary Treatment, Organ Donor.
- This will be paid only once in the lifetime of the consumer.

1.34. Dependent Accommodation Benefit

If you are continuously hospitalized for more than 10 days, we will pay a per day benefit for the Immediate family member who is you get better at the hospital. This will be paid maximum up to 10 days.

Note:

- We will pay this benefit, if we have paid for Expenses in reaching a Hospital, Expenses during Hospitalization, Expenses before and after hospitalization, Home Care / Domiciliary Treatment, Organ Donor.
- “Immediate Family member” means the Insured’s Spouse, Children, Parents, and Parents-in-law.
- We will pay for one immediate family member only.

1.35. International Travel Cover

The following coverage under this benefit is provided outside India. The coverage under this benefit commences when the Insured Person first boards the common carrier by which it is intended that the Insured Person shall finally leave India and expires automatically on the earliest of:

- The Insured Person’s return to India; or
- Policy Period end date; or
- The expiry of 45 days per trip starting from the date of journey

A. Emergency Hospitalization

We will pay for Hospitalization until you reach a Medically Stable Condition during the Policy Period on Cashless Facility basis only provided that:

- The Hospitalization is Medically Necessary and follows the written advice of the treating Medical Practitioner.
- The Insured Person is required to be admitted in a Hospital in an Emergency when the Insured Person is outside India, but within those regions specified in the Policy Schedule.

- B. Emergency medical evacuation:** When an adequate medical facility is not available proximate to the Insured Person, as determined by the Insured Person’s attending physician and agreed by Us / Our Service Provider, We/Our Service Provider will arrange and pay for ambulance services under appropriate medical supervision on Cashless Facility basis only, by an appropriate mode of transport as decided by Us / Our Service Provider’s consulting physician and patient’s attending physician to the nearest medical facility capable of providing the required care.

C. OPD cover

We will pay for Out-patient Treatment only on reimbursement basis. A 20% co-payment will apply.

D. Loss of Passport

We will pay for the cost of obtaining a new or a duplicate passport, if you lose your passport in foreign land.

E. Loss of checked-in baggage

We will pay if you lose your entire checked-in baggage in a common carrier. Our liability is up to the maximum amount mentioned in your policy, irrespective of the number of bags lost. A 20% co-payment will apply. We will pay for this benefit only in reimbursement basis.

We will not pay, if we have already paid for delayed in checked-in baggage.

F. Delay of checked-in baggage

We will pay through reimbursement only, If the check-in baggage is delayed (reasons other than detention or confiscation of the baggage by the common carrier or customs or any government or other agencies) by more than 12 hours from your arrival at the place of destination.

We will not pay, if we have already paid for Loss of Checked-in baggage.

- G. Return of mortal remains:** In the unfortunate event of death, we will arrange with Only Our Providers, the return of the mortal remains to an authorized funeral home or to the legal residence of the Insured.

H. Trip Cancellation

We will pay you, if you cancel your trip for any of the following reason.

- Death or minimum 24Hr hospitalization of your immediate family member or traveling companion or You.
- Your presence is required by judicial authority during the period of insurance.
- You are unable to start your trip due to any natural disaster declared by the appropriate government authority

- Due to unexpected strike, riot or Civil commotion at Your destination or hometown or departure city.
- Loss of passport in case of international trips.
- Compulsory quarantine or prevention of travel by Government of India.

Note:

- We will cover only travel ticket and accommodation costs.
- Any cancellation due to Hospitalization resulting from pre-existing disease, Childbirth, Pregnancy or related medical complications to You, your immediate family or traveling companion.
- Failure to start the journey due to rejection of VISA.

I. Trip interruption

We will pay for additional travel costs (in the same class as original booking) if you cannot use your return ticket and/or unused accommodation costs that insured person has paid and cannot get back, if your trip was interrupted due to the following reasons, and you had to return before the trip completion.

- Death or minimum 24Hr hospitalization of your immediate family member or traveling companion or You
- You are unable to start your trip due to any natural disaster declared by the appropriate government authority.
- The common carrier which you boarded as a passenger is hijacked.
- Due to unexpected strike, riot or Civil commotion at place of visit other than your hometown.
- Due to compulsory quarantine or prevention of travel by government

Note:

- We will reimburse additional travel costs (in the same class as original booking) if you cannot use your return ticket
- We will not pay in case, any claim which was not authorized by our Medical Emergency Assistance provider before you returned home.
- Any abandonment due to Hospitalization due to a pre-existing disease, Childbirth, Pregnancy or related medical complications to You, your immediate family or traveling companion.
- Any claim for Trip interruption where there is no valid claim for Emergency In-patient medical treatment or Emergency In-patient medical treatment with OPD.

J. Trip Delay

We will pay you, if your trip is delayed for more than 12 consecutive hours from the later of the declared time of departure or expected time of departure due solely and directly to any one of the following:

- Delay due to bad Weather.
- Delay due to a sudden Strike or any other action by employees of the Common Carrier.
- Delay due to equipment failure of the Common Carrier.
- Delay due to operational problem at the Common Carrier end like crew/staff scheduling issues.
- Cancellation or rescheduling done by the Common carrier.

Note:

- We will not pay if any delay is due to reasons, which were made public or known to You at least 6 hours prior to the scheduled departure of the Common Carrier.
- If customer abandons the trip due to delay in departure of scheduled common carrier, then this benefit will not be payable.

K. Compassionate visit:

If Insured is hospitalized for a consecutive 7 days, and someone from immediate family of insured is visiting, then we will reimburse economy class travel cost for one such person

Note:

- Provided there is no other adult traveling companion with insured.

- Provided that no Adult member of your Immediate Family is present at the location of your hospitalization.
- Claim under this benefit will be applicable only if we have accepted claim under emergency inpatient medical treatment section of this policy

L. Medical repatriation:

We will provide through our provider's transportation under medical supervision to your residence or rehabilitation facility if our consulting physician and your medical practitioner determines that the transportation is medically necessary.

1.36. Modern Treatments+

If opted, we will remove the applicable sub-limit from "Modern Treatments" under the benefit "Expenses during Hospitalization" enhancing the limit for the benefit up to Sum Insured. All other conditions for the policy will remain same.

This benefit can only be opted in case of a sub-limit applicable on the Modern Treatment benefit in your base policy.

1.37. Air Ambulance+

If opted, you can avail Air Ambulance up to the specified limit.

Note: This will be paid only if claim for Expenses during hospitalization is paid by us. You must always use a registered air ambulance provider.

1.38. Durable Medical Equipment

If you opt for this benefit, we will pay for renting or purchasing of listed durable medical equipment during the policy year.

Note:

- The devices must be Medically Necessary for Treatment and prescribed by a Medical Practitioner within 30 days of discharge from the hospital.
- **We will cover this, if we have paid a claim under Expenses in reaching the hospital, Expenses During Hospital, Expenses Before and After a Hospitalization, Home Care/Domiciliary, Organ Donor.**
- The Purchase of the durable medical should be done within 30 days of the medical recommendation.

List of Durable Medical Equipment: CPAP Machine, Ventilator, Wheelchair, Prosthetic device, Suction Machine, Commode Chairs, Infusion pump, Continuous Passive motion devices in case of Knee Replacement, Oxygen concentrator.

Durable Medical Equipment Cover and Medical Equipment Cover CANNOT be opted together in the policy.

1.39. Cash-Bag:

For each claim free year get an amount equal to 10% of the premium to be paid on 1st Renewal and 5% thereafter on each renewal from 2nd renewal onwards. Accumulate this amount and use the amount for OPD, pay for deductibles, pay for co-payment, Non-payable items and pay premiums. This optional benefit can be accessed through our Mobile App.

Note:

- Deductibles, Co-Payments can only be paid for claims under the Product with which the Add-on is opted for.
- Only the premium for the Product with which the Add-on is opted for, can be paid for using this Cash-Bag+
- Claims under Cash-Bag+ will not impact Booster+, Booster, No Claim Bonus, Lock the Clock, Lock the clock+ (If applicable)

Cash-Bag+ & Cash-Bag CANNOT be opted together in a policy.

1.40. WellConsult (OPD)

Opt for complete wellness and OPD benefits.

- Tele/Video Consultation on our network.
- Physical Consultations with Specialists & General Practitioner on our network. Flat 20% co-payment in case of reimbursement.

- Prescribed Diagnostics on our Partner network. Flat 20% co-payment in case of re-imburement.
- Prescribed Pharmacy on our Partner network. Flat 20% co-payment in case of re-imburement.
- Online sessions on Emotional Wellness. Can be availed only through our Partner network.
- Diet and Nutrition Coaching. Can be availed only through our Partner network.
- Artificial Intelligence lead Smart Fitness Coaching. Can be availed only through our Partner network.
- Access to Global online content on wellness through our Partner network
- Access to Gym memberships on our Partner network.

Note:

- **All benefits are as per limits mentioned in your policy schedule.**
- **Claims under WellConsult (OPD) will not impact Booster+, Lock the Clock/Lock the Clock+, Booster, No Claim Bonus (If applicable)**
- **We will not pay for Dental and ophthalmological consultations, diagnostics and pharmacy under this benefit.**
- **This benefit is applicable only in India.**

WellConsult+ & WellConsult CANNOT be opted together in a policy.

1.41. Prolonged Treatment Assistance Cover

If Insured is hospitalized for a consecutive 7 days, then we will pay for the following:

- **Compassionate visit:** Reimburse domestic economy class travel cost for one immediate family of insured is visiting the insured.
 - Ticket will be to & fro, from the place of residence of the immediate family member.
 - This applies, when the place of residence of the immediate family member and the place of residence of the Insured member is different.
 - Provided there is no Adult Immediate Family member is traveling with the Insured.
 - Provided there is no Immediate family member is present at the location of where the hospitalization has happened
 - "Immediate Family member" means the Insured's Spouse, Children, Parents, and Parents-in-law.
 - We will cover this, if we have paid a claim under Expenses in reaching the hospital, Expenses During Hospital, Expenses Before and After a Hospitalization, Home Care/Domiciliary, Organ Donor.

- **Accommodation Benefit:** Reimburse per day benefit for one Immediate family member who is with you to help you get better at the hospital. This will be paid maximum up to 10 days.

Note:

- We will pay this benefit, if we have paid for Expenses in reaching a Hospital, Expenses during Hospitalization, Expenses before and after hospitalization, Home Care / Domiciliary Treatment, Organ Donor.
 - "Immediate Family member" means the Insured's Spouse, Children, Parents, and Parents-in-law.
 - We will pay for one immediate family member only
 - **Convalescence Benefit:** We will pay a fixed amount as mentioned in your policy schedule.
- Note:**
- We will pay this benefit, if we have paid for Expenses in reaching a Hospital, Expenses during Hospitalization, Expenses before and after hospitalization, Home Care / Domiciliary Treatment, Organ Donor.
 - This will be paid only once in the lifetime of the consumer.

ANNEXURE I

S. No.	Test Name	Plan A	Plan B	Plan C	Plan D	NivaBupaOne
1	Calcium	NA	NA	Yes	Yes	Yes
2	Complete blood count (CBC)	Yes	Yes	Yes	Yes	Yes
3	Erythrocyte Sedimentation Rate (ESR)	NA	NA	Yes	Yes	Yes
4	Fasting Blood sugar (FBS)	Yes	Yes	Yes	Yes	Yes
5	HbA1C	Yes	Yes	Yes	Yes	Yes
6	Uric Acid	NA	Yes	NA	NA	NA
7	Serum creatinine	Yes	Yes	NA	NA	Yes
8	Kidney Function Test (KFT)	NA	NA	Yes	Yes	Yes
9	SGOT / SGPT	Yes	NA	NA	NA	NA
10	Liver Function Test (LFT)	NA	Yes	Yes	Yes	Yes
11	Physical Examination (PE)	NA	NA	Yes	Yes	Yes
12	Post prandial blood sugar (PPBS)	NA	NA	NA	NA	Yes
13	Routine Urine Analysis (RUA)	NA	NA	NA	Yes	Yes
14	Sensitized Erythrocyte Lysis (SEL)	NA	NA	NA	Yes	Yes
15	Serum Cholesterol	Yes	NA	NA	NA	NA
16	Lipid Profile	NA	Yes	Yes	Yes	Yes
17	Vitamin D	NA	Yes	Yes	Yes	Yes
18	TSH	Yes	Yes	Yes	NA	NA
19	Thyroid Function Test (TFT)	NA	NA	NA	Yes	Yes
20	Electrocardiogram (ECG)	NA	NA	NA	Yes	Yes
21	X Ray chest	NA	NA	NA	Yes	Yes
22	Ultrasound Test (USG)	NA	NA	NA	Yes	Yes
23	Treadmill test (TMT)	NA	NA	NA	Yes	Yes
24	PSA	NA	NA	NA	Yes	Yes
25	Mammogram	NA	NA	NA	NA	Yes
26	PAP smear of Cervix	NA	NA	NA	NA	Yes
27	Colonoscopy*	NA	NA	NA	NA	Yes
28	Vitamin B12	NA	NA	NA	NA	Yes

ANNEXURE II

S. No.	List of Critical Illness
1	Cancer of Specified Severity
2	Myocardial Infarction (First Heart Attack of specific severity)
3	Open Chest CABG
4	Open Heart Replacement or Repair of Heart Valves
5	Coma of Specified Severity
6	Kidney Failure Requiring Regular Dialysis
7	Stroke Resulting in Permanent Symptoms
8	Major Organ/Bone Marrow Transplant
9	Permanent Paralysis of Limbs
10	Motor Neurone Disease with Permanent Symptoms
11	Multiple Sclerosis with Persisting Symptoms
12	Aplastic Anaemia
13	Bacterial Meningitis
14	Loss of Speech
15	End Stage Liver Disease
16	Deafness
17	End-stage Lung Disease
18	Fulminant Viral Hepatitis
19	Third Degree Burns
20	Muscular Dystrophy