



**THE ORIENTAL INSURANCE COMPANY LIMITED,**  
**Regd. Office: Oriental House, P.B. No. 7037, A-25/27, Asaf Ali Road, New**  
**Delhi - 110 002**

## **ORIENTAL CRITICAL ILLNESS POLICY**

### **SALES LITERATURE**

#### **1. What is Oriental Critical Illness Policy?**

Oriental Critical illness policy is a fixed benefit insurance plan. The policy pays a lump sum amount on diagnosis of any of covered 22 critical illness.

#### **2. Who can benefit from Critical Illness insurance Policy?**

Anyone and everyone stands to benefit from buying a Critical Illness Policy. The modern day hectic lifestyle is a harbinger of lifestyle related illnesses including critical illnesses like cancer, heart attack, stroke etc.

A critical illness can reduce the ability of patients to earn due to patient being often sick and home bound. The reduced ability to work in some cases leads to not being able to work at all. This triggers a financial crisis. To prevent such situations, one can opt for a critical illness policy.

#### **3. Do I need a Critical Illness policy if I have a Health Insurance Cover?**

Yes, a Health insurance policy would cover your hospitalization expenses and other related medical expenditure, however in case of a critical Illness you may need more than that. The treatment can be long and ongoing which may need more monetary support. The lump sum amount provided by Oriental Critical Illness policy can shield you against such financial burden.

#### **4. Who should buy Critical Illness Insurance Policy?**

The following set of people should be especially benefit from a Critical Illness Policy:-

- i. Those with a history of critical Illness in their family.
- ii. Primary earning members of the family.
- iii. Persons having high-pressure jobs.
- iv. Persons over the age of 40 years.

#### **5. What does this Plan cover?**

This policy covers 22 Critical Illnesses. It provides 100% Sum Insured on diagnosis of a covered Critical Illness.

**6. What are the key features of the Oriental Critical Illness Policy?**

This policy covers major critical illnesses which are usually excluded from a standard health insurance policy. It provides a lump sum to the insured upon the diagnosis of the covered illness. For Oriental critical illness insurance plan, no medical is required up to 45 years of age.

**7. Who can buy this Policy?**

Any person between the ages of 18 to 65 years (both ends inclusive) may buy the policy in respect of self and / or eligible family members.

**8. Is there any age limit for taking this policy?**

The minimum entry age is 18 years and maximum entry age is 65 years.

**9. What is the term of the policy?**

The policy is available as per insured's option for a policy period of one year OR as a long term policy for a policy period of three years term.

**10. How long is my policy valid for?**

We offer you an option of buying our Critical Illness policy for 1 year and 3 years term. The policy is thereafter renewable lifelong and you can renew your policy at the end of each policy term.

**11. What are the documents required for this policy?**

Generally, identity proof, age proof and address proof are required. Additionally, specific documents may be required in case the insurance buyer need to undergo medical tests.

**12. Is there a waiting period under the policy?**

Yes, there is a waiting period of ninety (90) days to get the claim.

**13. Is there any survival period?**

Yes, insured should survive for a minimum period of thirty (30) days post the diagnosis for illnesses listed in the policy schedule to get the claim.

**14. What are the sum insured slabs available?**

The Sum Insured slabs available under the policy are:-

For Insured age upto 50 years - Minimum Rs. 2.0 lacs and maximum Rs. 50.0 lacs.

In multiples of Rs.2.0 lacs upto Rs.20.0 lacs, and thereafter, in multiples of Rs.5.0 lacs upto Rs.50.0 lacs.

For Insured age above 50 years- Minimum Sum Insured is Rs.2.0 lakhs, and maximum Rs.20.0 lacs, in multiples of Rs.2.0 lakhs.

#### **15. How many Plans are available under the Oriental critical Illness Policy?**

Oriental Critical Illness policy is available under two plans:-

**Plan A-** Covers 11 listed illnesses.

**Plan B-** Covers 22 listed illnesses (including Plan A).

#### **16. Who are the family members that can be covered in the policy?**

Family consists of the following:-

- i. Self/proposer,
- ii. His/her legally wedded spouse,
- iii. Dependent Children (i.e. natural or legally adopted) between the age 18 years to 25 years.
- iv. Parents / Parents- in-law (either of them),
- v. Unmarried siblings, if financially dependent on the proposer.

#### **17. Until what age can I renew my Policy?**

We offer lifetime renewability for this health plan, subject to payment of premium and fulfillment of other policy terms.

#### **18. Can I change my Sum Insured?**

- i. Sum Insured can be changed (increased/ decreased) only at the time of Renewal, subject to discretion of the Company.
- ii. Increase in SI shall be allowed by one slab at a time.
- iii. Increase in Sum Insured is allowed in policies where there are no claims reported in two successive policy years.

#### **19. Can I change the Plan from Plan A to Plan B?**

- i. Change of Plan, from Plan A to Plan B is allowed only at the time of renewal, subject to four years of continuous coverage with the Company and no claim reported under the Policy.
- ii. For change of plan, medical reports are required to be submitted with respect to each insured person aged forty five years and above.

#### **20. Is there a cashless facility under the Critical Illness policy?**

There is no cashless facility under this cover as we make lump sum payment up to the sum insured. The received amount can be used by you for any hospitalization or other expenses.

**21. Is there a death benefit under this policy?**

On first diagnosis of the covered illness, we will provide a lump sum amount of sum insured after a survival period of 30 days. There is no death benefit provided.

**22. After what age are pre-insurance Medical tests required ?**

All persons of age 45 years and above must complete the medical examination report. The proposer whose medical test is conducted and for whom the company grants an insurance cover under this policy and whose name specifically appears as Insured person in the schedule, the company shall reimburse 50% of the cost of such medical tests..

Medical tests would be as follows:

1. Complete Blood count
2. Fasting Blood Sugar
3. ESR
4. Serum Creatinine
5. SGPT
6. Urine Routine
7. ECG
8. Medical Examination Report with BP recordings – By a medical practitioner.

In addition, from case to case, as per individual medical history, one might have to go for any other test as may be suggested by the Company.

Medical reports up to 30 days prior to the date of proposal, are only valid.

**23. Do I get re-imburement for the cost of Pre-insurance Medical tests done?**

In case of fresh proposals, 50% of the cost of Medical Check-up shall be reimbursed by the Company only on acceptance of the proposal.

**24. Are there any other discounts available under this policy?**

Yes, following discounts are available under the policy:-

- |    |                                 |     |
|----|---------------------------------|-----|
| 1. | Family Discount                 | 10% |
| 2. | Online digital payment discount | 10% |

For the detailed information, please refer clause 8.9 of policy document.

**25. Does this policy provide benefit of Second Medical Opinion?**

Yes, in addition to lump sum benefit upto 100% sum insured on diagnosis of listed critical illnesses, the policy also provides for Medical Second Opinion benefit up to 1% of the sum insured in a policy period subject to maximum of Rs.10,000/- for Sum Insured upto Rs. 20 lacs and Rs.20,000/- for Sum Insured upto Rs.50 lacs.

**26. Can I return the policy if on receiving the documents I find the terms & conditions unsatisfactory?**

Yes. The policy provides for a 'Free look period' of 15 days from the date you receive the policy document, only if you have not made any claim. This means within this period you can return the policy. Proportionate premium, after deducting (i) the expenses incurred and (ii) the risk premium (if the Policy has already started), will be refunded. Free look period is applicable only for fresh policies and not on renewals.

**27. Do I get any grace period for renewal of the policy?**

Yes. A grace period of 30 days from the date of expiry of the policy is available within which period you can renew the policy. However, no coverage will be available for the break period.

**28. Will the premium and the terms of the policy remain same on renewal?**

The premium rates and the terms & conditions of the policy may be modified on renewal (after due approval from the Insurance Regulatory and Development Authority of India-IRDAI) for which you will be informed at least three months in advance.

**29. Will this product always remain on your menu?**

May be. However, the product may be withdrawn from the market, but only after obtaining due approval from the IRDAI and you will be informed of other suitable products available, to which you may migrate in case of withdrawal of the product.

**30. Can I port into this policy without losing my continuity benefits earned under the previous Insurer's policy?**

This Policy is subject to Guidelines of IRDAI on Portability under Health Insurance Regulations 2016 and as amended from time to time.

Subject to the above Portability will be allowed only from any other Critical Illness or similar Critical Illness Policy offered by The Oriental Insurance Company Limited or other companies. Porting will not be allowed from any other product.

**31. What are the exclusions under the policy?**

- i. Critical illness contracted or evident through Sign and symptoms within 3 months of the inception date of this policy. This exclusion does not apply for subsequent renewal with the Company without a break.

- ii. Any diseases causing the death of the Insured within the stipulated Survival Period, measured from the date of incidence of the illness.
- iii. Certification / diagnosis from a person not registered as Medical Practitioners under respective medical councils.
- iv. Sex change surgery ,cosmetic surgery & plastic surgery,
- v. Pregnancy ( except ectopic), infertility
- vi. Hazardous or Adventure Sport
- vii. Refractive error, cosmetic dental surgeries
- viii. Unproven Treatments
- ix. Substance abuse, self-inflicted injuries,
- x. Breach of law
- xi. Treatment outside India
- xii. War group perils.
- xiii. Radioactivity

(Note: the above is a partial listing of the policy exclusions. Please refer to the policy clauses for the full listing).