TATA AIA
LIFE INSURANCE

Protection solutions

Tata AIA Life Insurance

Non-Linked Comprehensive Protection Rider

A Non-Linked, Non- Participating Individual Health Rider



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About Tata AIA Life

Tata AIA Life Insurance Company Limited (Tata AIA Life) is a joint venture company, formed by Tata Sons Ltd. and AIA Group Ltd (AIA). Tata AIA Life combines Tata's pre-eminent leadership position in India and AIA's presence as the largest, independent listed pan-Asia Life Insurance Group in the world spanning 18 markets in Asia Pacific. Tata Sons holds a majority stake (51 per cent) in the Company and AIA holds 49 per cent through an AIA International Limited. Tata AIA Life Insurance Company Limited was licensed to operate in India on February 12, 2001 and started operations on April 1, 2001.

Tata AIA Life Insurance Company Limited (IRDAI Regn. No.110) CIN: U66010MH2000PLC128403. **Registered & Corporate Office:** 14th Floor, Tower A, Peninsula Business Park, Senapati Bapat Marg, Lower Parel, Mumbai - 400013. Trade logo displayed above belongs to Tata Sons Ltd and AIA Group Ltd. and is used by Tata AIA Life Insurance Company Ltd under a license. For any information including cancellation, claims and complaints, please contact our Insurance Advisor / Intermediary or visit Tata AIA Life's nearest branch office or call **1-860-266-9966** (local charges apply) or write to us at **customercare@tataaia.com.** Visit us at: **www.tataaia.com**.

Unique Reference Number: **L&C/Advt/2024/Oct/2899** • UIN: **110B033V04**

Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider

We all work hard to achieve our dreams and provide our family with the best of everything. However, as the saying goes, "Life is what happens when we are busy making other plans". All of a sudden, an unexpected event such as an accident or a health issue can affect our income, drain our savings, place financial burden on our family and ruin our dreams.

While life may have its own plan for us, we need to have a plan in place to handle any challenge that is thrown at us. Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider is one such solution that can help you plan for the various contingencies that you may come across. It covers various risks such as death, disability due to accident, a range of critical Illnesses, terminal illness etc thus providing all round protection to you and your family.

Why Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider?

- **Enhanced Protection:** Choice of one or more Benefit Options (risk covers) including death, accidental death /disability and illness
- **Need based benefit payout:** Flexibility to receive benefit as combination of lump sum or income for fixed period, Income till survival of partner or Waiver of Premium.
- **Cover you loved ones:** The rider allows you to extend protection to your loved ones too under the same plan
- **Option to receive return of balance premiums on maturity**
- **Income Tax Benefits** as per the prevailing tax laws.

What am I Covered for under this rider?

The Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider offers coverage against a range of risks. You may opt for coverage against one or more risks as per your needs. A summary of the risks covered is as given below

Benefit Option	Brief description of risk covered
Term Benefit with Accelerated Terminal Illness (T&TI)	Benefit paid on earlier of Death or diagnosis ofTerminal Illness
Accidental Death Benefit (ADB)	Death due to Accident
Accidental Total and Permanent Disability Benefit (ATPD)	Total and Permanent Disability due to Accident
CritiCare Plus Benefit (CPB)	40 Critical Illness including Cancer and Cardiac conditions
CritiCare Benefit (CB)	40 Critical Illness including Cancer and Cardiac conditions

Premium will vary depending upon the option chosen.

1. Term Benefit with Accelerated Terminal Illness

The Insured Amount under this option is payable on earlier of death or diagnosis of Terminal illness of the Life Insured.

2. Accidental Death Benefit

The Insured Amount under this Benefit Option will be payable in the event of the death of the Life Insured due to an accident within the Benefit Option Term, provided the death occurs within 180 days from the accident.

Double Benefit

The benefit payable will be doubled if the death due to accident occurs under any of the following circumstances:

1. While the Insured is riding as a fare paying passenger on commercially licensed public land transportation over an established route such as a bus, tram or train. A taxi or any form of transport chartered for private travel is excluded.
2. While the Insured is in an elevator car (elevators in mines, rigs and on construction sites excluded) duly certified to carry passengers; or
3. As a direct result of the burning of the following public buildings only: theatre, cinema, public auditorium, hotel, school and hospital.
4. When the Insured is on a commercial passenger airline on a regular scheduled passenger trip over its established passenger route.

   The benefit will be payable if the accident occurs within the Benefit Option term even if the death occurs beyond the Benefit Option term (however within 180 days of the accident)

3. Accidental Total and Permanent Disability Benefit

The Insured Amount under this Benefit Option will be payable in the event of the Total and Permanent Disability of the Life Insured due to an accident within the Benefit Option Term, provided the disability occurs within 180 days from that accident.

Double Benefit

The benefit payable will be doubled if the disability due to accident occurs under any of the following circumstances:

1. While the Insured is riding as a fare paying passenger on commercially licensed public land transportation over an established route such as a bus, tram or train. A taxi or any form of transport chartered for private travel is excluded.
2. While the Insured is in an elevator car (elevators in mines, rigs and on construction sites excluded) duly certified to carry passengers; or
3. As a direct result of the burning of the following public buildings only: theatre, cinema, public auditorium, hotel, school and hospital.
4. When the Insured is on a commercial passenger airline on a regular scheduled passenger trip over its established passenger route.

(Double benefit shall be applicable only if benefit payout is lump-sum and/or income.)

The benefit will be payable if the accident occurs within the Benefit Option Term even if the disability occurs beyond the Benefit Option term (however within 180 days of the accident)

4. Criticare Plus Benefit

The Insured Amount under the Benefit Option is payable if the Life Insured survives for a period of 30 days following the first diagnosis of any of the covered illness or undergoing of the covered procedure. .

The benefit will be payable only upon first occurrence of any of the conditions covered under this benefit during the lifetime of the Life Insured. The conditions covered under this benefit are given below.

No	Illness / Procedure
	Cancer:
1	Cancer of Specified Severity
	Cardiac Conditions:
2	Cardiomyopathy (of specified severity)
3	Heart transplant
4	Major surgery of Aorta
5	Myocardial Infarction (First Heart Attack of specified severity)
6	Open Chest CABG (Coronary Artery Bypass Graft)
7	Open Heart Replacement or Repair of Heart Valves
8	Primary (Idiopathic) Pulmonary Hypertension
9	Stroke resulting into permanent symptoms
	Critical Illness:
10	Alzheimer's Disease
11	Apallic Syndrome
12	Aplastic Anaemia
13	Bacterial Meningitis
14	Benign Brain Tumor
15	Blindness
16	Chronic Recurrent Pancreatitis
17	Coma of Specified Severity
18	Creutzfeldt-Jacob disease
19	Deafness
20	Encephalitis
21	End Stage Liver Failure
22	End Stage Lung Failure
23	Fulminant Viral Hepatitis
24	Kidney Failure requiring Regular Dialysis
25	Loss of Independent Existence
26	Loss of limbs
27	Loss of Speech
28	Major Head Trauma

No	Illness / Procedure
29	Major Organ (less heart)/ Bone Marrow Transplant
30	Medullary Cystic Kidney Disease
31	Motor Neuron Disease with Permanent Symptoms
32	Multiple Sclerosis with Persisting Symptoms
33	Muscular Dystrophy
34	Parkinson's Disease
35	Permanent Paralysis of Limbs
36	Poliomyelitis
37	Progressive Scleroderma
38	Severe Rheumatoid Arthritis
39	SLE with Renal Involvement
40	Third Degree Burns

Please refer 'Definitions and Exclusions Annexure' for definitions of major illness covered, exclusions etc.

5. Criticare Benefit

The Insured Amount under the Benefit Option is payable on the first diagnosis of any of the covered illness or undergoing of the covered procedures by the Life Insured

The Criticare Benefit is an accelerated Benefit and it accelerates the payout of the base plan death benefit on occurrence of the insured event.

Premium payment on account of Criticare Benefit will cease after payout of Criticare Benefit. The base plan will continue with the Sum Assured reduced by the extent of the Criticare Benefit paid. If Criticare Benefit paid exhausts to the Death Benefit under the base plan, the base policy will terminate on payment of the Criticare Benefit.

The benefit will be payable only upon first occurrence of any of the conditions covered under this benefit during the lifetime of the Life Insured. The conditions covered under this benefit are as given under the 'Criticare Plus Benefit' above.

The Insured Amount under any Benefit Option, however, shall be payable only if the base plan is in force. The benefit under the above Benefit Options is payable only once during the term of the Benefit Option and the Benefit Option terminates on occurrence of the insured event or expiry of the Benefit Option term. In case policy holder has chosen multiple Benefit Options and he/she has claimed under a particular Benefit Option, premium payment for the respective Benefit Option ceases and coverage under other Benefit Options shall continue to remain in force.

Below is a table of valid combinations of benefit options that can be chosen by the policy holder

Benefit option	T&TI	ADB	ATPD	CPB	CB
T&TI	na	✓	✓	✓	✓
ADB	✓	na	✓	✓	✓
ATPD	✓	✓	na	✓	✓
CPB	✓	✓	✓	na	×
CB	✓	✓	✓	×	na

What if no eventuality occurs till the end of the term?

The rider also offers the flexibility to choose the Return of Balance Premium (ROP) benefit option at inception, available for following benefit options:

1. Term Benefit with Accelerated Terminal Illness (T&TI)
2. Accidental Death Benefit (ADB)
3. Accidental Total and Permanent Disability Benefit (ATPD)

With this option, an amount equal to the Total Premiums Paid (excluding loading for modal premiums) towards the respective Benefit Option, less any claim amount already paid out under the respective benefit option, shall be payable at the end of the Benefit Option term, provided the Benefit Option is not terminated.

You can choose to opt for the ROP option with one or more Benefit options, however this option can be chosen only at inception of the Benefit Option and cannot be changed thereafter.

Lives Covered:

With this rider you can opt for coverage on one or more of your loved ones under the same plan subject to insurable interest and as per the Board Approved Underwriting Policy (BAUP). eg: cover can be opted on spouse/child/parent/parent-in-law or sibling of the policy holder under the base plan subject to board approved underwriting policy.

For 'CritiCare Benefit', the Life Insured under the Benefit Option must be the same as Life Insured under the base plan.

What are the Rider Benefit Payout Options under the rider?

You can choose to receive the rider benefits as a

1. Combination of Lump sum and income for a fixed income period chosen

You can choose to receive the benefit payout as either:

- Lump sum benefit OR
- Income for the income period chosen (up to 10 years) OR
- Combination of lump sum and income for the income period chosen (up to 10 years)

The lumpsum amount will be paid on occurrence of the insured event while the income will be paid starting from the date of occurrence of insured event at a frequency (Annual / Half Yearly / Quarterly / Monthly) and for the income period chosen. Any accrued income, due before intimation of claim, will be paid along with the first payout under this option. The payment frequency can't be changed once the regular income commences.

The regular income instalments for frequencies other than annual shall be as specified below, where the Yearly Income below refers to the regular income payable in respect of annual frequency:

Frequency	Income Instalment (per frequency)
Half-yearly	98% of Yearly Income x 1/2
Quarterly	97% of Yearly Income x 1/4
Monthly	96% of Yearly Income x 1/12

The 'Insured Amount' payable under each benefit option shall be:

Highest of:

- 11 times the Annualised Premium^ for Limited Pay/Regular Pay and 1.25 times for Single Premium^ for the respective benefit option
- 105% of Total Premiums Paid (excluding loading for modal premiums) as up to the date of incidence of underlying insured event
- Sum Assured under Benefit Option

^excluding the underwriting extra premiums, modal loading and applicable taxes, cess or levies (if any) charged under the applicable benefit option.

Where the Insured Amount is higher than the Sum Assured under Benefit Option, the excess amount shall be paid in lump sum.

The Sum Assured under the Benefit Option will be the sum of - (i) Lump sum and (ii) present value all future yearly income streams – chosen under the respective benefit option.

(For the purpose of premium calculation, sum assured for the income portion will be computed as the discounted value of the yearly income stream using a discount rate of 4% p.a.)

The nominee also has an option to receive the commuted value of the future income bene¬fits as a lumpsum, discounted at the higher of (4.00%, SBI domestic term deposit rate for '5 years and up to 10 years' + 2.00%).

In case of a Reduced Paid-up policy, the regular income payable shall be based on the adjusted Yearly Income defined as: (Number of Premiums paid under benefit option / Number of Premiums payable under benefit option) * Yearly Income applicable at the time of Reduced Paid-Up.

2. **Income till survival of chosen dependent partner(s) (Partner Care)**

Under this option, on occurrence of the insured event a regular income is paid to the dependent partner/s covered under the payout option. This payout option is referred to as **Partner Care.**

A maximum of two partners between ages 45 years and 90 years (both last birthday) can be chosen at the time of purchase to receive the regular income. It shall be ensured that there is insurable interest between the 'Life Insured' under the Benefit Option and the chosen partner/s.

The regular income shall be paid in arrears as per the chosen payment frequency from the date of occurrence of insured event as specified in table below. Any accrued income, due before intimation, will be paid along with first payout under this option. The income shall continue till the last surviving partner dies or reaches age 100 (last birthday), whichever happens first.

The income frequencies can be either Annual, Half Yearly, Quarterly or Monthly as chosen by you and cannot be changed once the regular income commences.

The regular income instalments shall be as specified below, where the Yearly Income below refers to the regular income payable in respect of annual frequency:

Frequency	Annuity Instalment (per frequency)	Regular income pay-out commences after
Annual	100% of Yearly Income	one year from the date of occurrence of insured event.
Half-yearly	98% of Yearly Income x 1/2	6 months from the date of occurrence of insured event.
Quarterly	97% of Yearly Income x 1/4	3 months from the date of occurrence of insured event.
Monthly	96% of Yearly Income x 1/12	one month from the date of occurrence of insured event.

The 'Insured Amount' shall be equal to the Sum Assured under the Benefit Option.

The Sum Assured under the Benefit Option shall be the expected present value of the contingent yearly income streams payable on occurrence of the insured event based on the yearly income chosen.

The regular income shall be triggered only once during the term of the benefit option.

In case of a Reduced Paid-up policy, the regular income payable shall be based on the adjusted Yearly Income defined as: (Number of Premiums paid under benefit option / Number of Premiums payable under benefit option) * Yearly Income applicable at the time of Reduced Paid-Up.

3. Waiver of future premiums

Under this option, on occurrence of the insured event, all future premiums that would have been payable under the base plan and associated other benefit options/riders shall be waived throughout the rest of the premium payment term of the base plan/benefit options/riders or until the termination of the base plan/benefit options/riders, whichever is earlier.

The contingent event can be based either on the life of:

- Life Insured of the base plan where the proposer and base plan life insured are the same person: **WoP Option**
- Proposer of the base plan where the proposer is different from the base plan life insured: **Payor Option**

Under this payout choice, the benefit term and the premium payment term of the benefit option shall be same as the outstanding premium payment term of the base policy, subject to maximum age at maturity. Thus the Benefit Option shall terminate once the premium payment term is over.

The 'Insured Amount' shall be equal to the Sum Assured under the Benefit Option.

Sum Assured under Benefit Option shall be equal to the outstanding premium under the base plan and riders (if any) at inception of the rider benefit option.

Waiver of future premium as benefit payout option is available only as a Regular Pay and without Return of Balance Premium

A summary of the payout options available with the various Benefit Options is given below:

Benefit Options / Benefit Payout Options	T&TI	ADB	ATPD	CPB	CB
Combination of Lump sum and income for a fixed income period chosen	✓	✓	✓	✓	✓
Income till survival of chosen dependant partner(s)	✓	✓	✓	✓	×
Waiver of future premiums	✓	×	✓	✓	×

Definitions for Benefits Payable:

The following definitions have been used:

"Insured Amount" and **"Sum Assured under Benefit Option"** shall vary depending on the chosen Benefit Payout Option and has been defined in the respective Benefit Payout options above.

In case the waiver of future premium benefit pay-out has triggered for any of the conditions, the premiums waived during this period shall be added to the premiums paid by the policyholder for the calculation of the "Insured amount" for that condition.

'Rider Sum Assured' is the maximum of all 'Sum Assured under Benefit Option' for the respective Benefit options chosen by the policyholder.

'Annualized Premium' shall be the premium payable in a year chosen by the policyholder for a particular Benefit Option, excluding the taxes, underwriting extra premiums, loading for modal premiums, if any.

'Total Premiums Paid' means total of all the premium paid under the respective benefit option, excluding any extra premium and taxes, if collected explicitly

The Annualized Premium and Total Premium Paid shall be derived separately for each benefit option.

'Benefit Option Term' is the duration for which coverage is available under a particular Benefit Option

'Return of Balance Premium' is the 'Total Premiums Paid' (excluding loading for modal premiums) towards the respective Benefit Option, less any claim amount already paid out under the respective Benefit Option. In case the waiver of future premium benefit pay-out has triggered for any of the above conditions, the premiums waived during this period shall be added to the premiums paid by the policyholder for the calculation of the Return of Balance Premium for that condition.

'Life Insured' refers to the life covered under the respective Benefit Option

How can we enhance protection using this rider?

You may choose to opt for any one or more Benefit Options on yourself and/or one or more of your loved ones as per your protection needs.

Renewability option at Maturity

Upon maturity, policyholders with CritiCare and CritiCare Plus benefit options, along with any applicable add-on benefits, have the opportunity to extend their coverage. They can renew their policy for an additional five years, up to the maximum maturity age, by paying the required premiums as per the Board Approved Underwriting Policy (BAUP). To be eligible for this extension, the policy must be active with all due premiums paid. Policyholders can choose a new policy term and premium payment term of five years, within the specified limits. The benefits, including any add-ons, will continue based on the existing coverage at the time of extension. However, if a claim has already been made, the policy term cannot be extended. Death, maturity, and surrender benefits will remain as per the original terms. The additional premiums will be calculated based on the life assured's age at the time of extension, the chosen policy term, premium payment term, and the applicable premium rate. No policy alterations, except for changes in policy term or premium payment term, will be allowed at the time of extension.

Who can opt for coverage under this Rider?

You can opt for coverage under the various Benefit options of the Rider provided you meet the following Eligibility Criteria:

Benefit option	Minimum Entry age (years)	Maximum Entry age (years)	Maximum Maturity age (years)	Sum Assured (₹) under the Benefit Option^	
				Minimum	Maximum
T&TI	18	65	85	500,000	Subject to board approved underwriting policy*
ADB	18	65	85	100,000	
ATPD	18	65	85	100,000	
CPB	18	65	75	200,000	
CB	18	65	75	200,000	

- All ages are as on last birthday and are applicable to the life insured under the Benefit Option.
- *Maximum Sum Assured for the individual Benefit Options is subject to board approved underwriting policy, however Rider Sum Assured cannot exceed the Death Benefit at inception under the Base Plan
- ^The minimum 'Sum Assured under the Benefit Option' given above is for the Benefit Payout Option - "Combination of lump-sum and income for a fixed income period chosen". For the Benefit Payout Option "Income till survival of chosen dependent partner(s)" the minimum yearly income shall be ₹ 12,000. For Benefit Payout option "Waiver of future premiums", the sum assured shall be equal to the outstanding premium under the base plan and riders (if any) at inception of the rider benefit option.

Benefit Option Term and Premium Payment Options: Coverage under the various Benefit Options are as available for a Benefit Option Term as follows:

Single Pay:

Benefit Option / Benefit Option Term	Without Return of Balance Premium Option		With Return of Balance Premium Option	
	Minimum (month)	Maximum (year)	Minimum (year)	Maximum (year)
Term Benefit with Accelerated Terminal Illness	12	67	10	67
Accidental Death Benefit	12	67	10	67
Accidental Total and Permanent Disability Benefit	12	67	10	67
Criticare Plus Benefit	12	5	NA	NA
Criticare Benefit	12	5	NA	NA

Regular Pay:

Benefit Option / Benefit Option Term	Without Return of Balance Premium Option		With Return of Balance Premium Option	
	Minimum (month)	Maximum (year)	Minimum (year)	Maximum (year)
Term Benefit with Accelerated Terminal Illness	13	67	10	67

Benefit Option / Benefit Option Term	Without Return of Balance Premium Option		With Return of Balance Premium Option	
	Minimum (month)	Maximum (year)	Minimum (year)	Maximum (year)
Accidental Death Benefit	13	67	10	67
Accidental Total and Permanent Disability Benefit	13	67	10	67
Criticare Plus Benefit	13	5	NA	NA
Criticare Benefit	13	5	NA	NA

Limited Pay

Benefit Option / Benefit Option Term	Without Return of Balance Premium Option		With Return of Balance Premium Option	
	Minimum (month)	Maximum (year)	Minimum (year)	Maximum (year)
Term Benefit with Accelerated Terminal Illness	14	67	10	67
Accidental Death Benefit	14	67	10	67
Accidental Total and Permanent Disability Benefit	14	67	10	67
Criticare Plus Benefit	14	5	NA	NA
Criticare Benefit	14	5	NA	NA

The Benefit Option Term shall not exceed the outstanding policy term of the base plan. The Benefit Option will terminate on the life insured attaining the maximum age at maturity of the Benefit Option

The premium payment term for without return of balance premium option:

Premium Payment Option	Premium Payment Term	
	Minimum	Maximum
Single Pay	1	1
Limited Pay	13 months	Benefit Option Term minus 1 month
Regular Pay (premium payment term same as the Benefit Option Term)	13 months	Same as Benefit Option Term

The premium payment term for with return of balance premium option:

Premium Payment Option	Premium Payment Term	
	Minimum	Maximum
Single Pay	1	1
Limited Pay	5 years	Benefit Option Term minus 1 months

Premium Payment Option	Premium Payment Term	
	Minimum	Maximum
Regular Pay (premium payment term same as the Benefit Option Term)	10 years	Same as Benefit Option Term

Premium Payment Mode: Same as the Premium Payment Mode of the base plan (Single, Annual, Half-yearly, Quarterly, Monthly).

Waiting period:

'Waiting Period' means a period during which specified diseases/treatments which have been diagnosed and/or have received medical advice/treatment are not covered. This is applicable for the covered conditions under 'Criticare Benefit' and 'Criticare Plus Benefit' only.

In the event of occurrence of any of the scenarios mentioned above, during the waiting period,

- No benefit shall be payable
- the premiums paid under the respective Benefit Option during the waiting period will be refunded without any interest
- the Benefit Option shall terminate and no future premiums and benefits shall be payable

The waiting period of 90 days shall be applicable from later of

- Risk Commencement Date (if Benefit Option is opted at inception)
- Policy anniversary at which Benefit Option is opted (if Benefit Option is opted at the policy anniversary)
- Date of revival (in case of revival of the Benefit Option)

What if I don't pay the premiums?

If any premium for a non-single pay Benefit option remains unpaid at the end of the Grace Period, the Benefit Option shall lapse/be converted to a reduced paid-up from the due date of the first unpaid premium. The following is the treatment under various scenarios:

Cover Continuance		
Premium Paying options (PPT)	**Before 2 years'** (in case of Without Return of Balance Premium Option) **or 1 years'** (in case of With Return of Balance Premium Option) **premium paid**	**After 2 years'** (in case of Without Return of Balance Premium Option) **or 1 years'** (in case of With Return of Balance Premium Option) **premium paid**
Without Return of balance premium		
Regular Pay / Limited Pay	Cover ceases to exist	Cover ceases to exist
With Return of balance premium		
Regular Pay / Limited Pay	Cover ceases to exist	Cover continues with Reduced Paid-Up Sum Assured

PPT	Treatment during and at the end of Revival Period	Treatment post revival period and at Maturity
Without Return of balance premium		
Regular Pay	No amount is payable	No amount is payable
Limited Pay	Surrender Value# is paid out in case • Policyholder terminates the contract • On Expiry of Revival Period or at maturity, whichever is earlier	No amount is payable as benefit option is terminated by the end of the revival period
With Return of balance premium		
Regular Pay	• Reduced Paid-Up Sum Assured^ is payable in case of claim • Surrender Value# is payable	• Reduced Paid-Up Sum Assured^ is payable in case of claim • Total Return of balance premiums* is payable at maturity
Limited Pay	• Reduced Paid-Up Sum Assured^ is payable in case of claim • Surrender Value# is payable	• Reduced Paid-Up Sum Assured^ is payable in case of claim • Total Return of balance premiums* is payable at maturity

#Surrender Value is as defined in the 'Surrender Benefit' section below

^Reduced Paid-Up Sum Assured (Adjusted Yearly income in case of Partner Care) is as defined in the 'Reduced Paid-Up Benefit' section below.

*Return of balance premiums as defined in the 'Definitions for Benefits Payable' section above.

Revival:

If a premium is in default beyond the Grace Period and subject to the Policy and Benefit Option not having been surrendered, it may be revived, within the Revival Period applicable to the base product after the due date of first unpaid premium and before the date of maturity, subject to:

(i) Policyholder's written application for revival;

(ii) production of Insured's current health certificate and other evidence of insurability, satisfactory to the Company; and

(iii) Payment of all overdue premiums with interest.

Any evidence of insurability and medical requirements requested at the time of revival will be based on the prevailing underwriting guidelines duly approved by the Board. The revival will be based on the health declaration by the life insured and the Board approved underwriting policy.

The interest rate applicable on revival should be the same as that applicable in the base plan

If the base policy had lapsed, on revival of the base policy on repayment of all due premium within the revival period, the Benefit Option will get revived along with the base policy. The

Benefit Option cannot be revived independently and can only be revived along with the revival of the base policy.

Any revival shall only cover loss or insured event which occurs after the revival date subject to the waiting period applicable for the respective Benefit Option. Upon revival of the Benefit Option, all benefits shall be restored and be applicable with effect from the date of revival.

If the rider is not revived along with the base policy, the rider shall be terminated by paying any residual surrender value as on the date of revival of the base policy and revival of such terminated rider will not be allowed at a later stage.

Reduced Paid-Up Benefit:

The Benefit Option will be converted into a Reduced Paid-up in scenarios as described in the table above, provided the base plan is in force. Reduced paid up policies can be revived within the Revival period mentioned in the base product, from the due date of first unpaid premium by payment of all due premiums together with interest as mentioned in the 'Revival' section above. Once the Benefit Option becomes reduced paid up, the coverage will continue to be in reduced paid-up status with the Insured Amount re-set to the Reduced Paid Up Sum Assured under the Benefit Option.

Reduced Paid-Up Sum Assured under Benefit Option is defined as (Number of Premiums paid under Benefit Option / Number of Premiums payable under Benefit Option) X Sum Assured under the Benefit Option

If the Benefit Payout option chosen is Partner Care, the regular income payable shall be based on the adjusted Yearly Income defined as: (Number of Premiums paid under benefit option / Number of Premiums payable under benefit option) * Yearly Income applicable at the time of Reduced Paid-Up.

In case the policy is reduced paid up, Maturity Benefit will only be paid if the Policyholder has opted for a Return of Premium option. The maturity amount will be the total return of balance premiums as defined under the 'Definitions for Benefits Payable' section above.

Surrender/ Unexpired Risk Premium Benefit:

It is advisable to continue the policy till the chosen term. However, due to some unfavorable circumstances if the policy cannot be continued with and needs to be surrendered, the Surrender Benefit (Higher of GSV or SSV), as applicable under the following scenarios will be payable:

The surrender value shall be equal to the higher of the Guaranteed Surrender Value (GSV) and the Special Surrender Value (SSV).

Guaranteed Surrender Value (GSV):

- **Without Return of Balance Premium**

  Not Applicable.

- **With Return of Balance Premium**

  The company guarantees a minimum non-negative surrender value which is equal to (GSV factor x Total Premiums paid (excluding loading for modal premiums and discount)) up to the date of surrender.

The SSV will be defined as follows:

- **Without Return of Balance Premium**
  - **Single Pay:**

    The SSV shall be payable immediately after the policy is issued. The SSV/ Unexpired Risk Premium Value shall be computed using the following formula:

    75% * (sum of premiums paid) * (1 – premium paying term / benefit option term) * (Balance benefit option term / benefit option term)
  - **Regular Pay:**

    Not Applicable
  - **Limited Pay:**

    The Unexpired Risk Premium Value (UPRV) shall be payable on completion of one policy year, provided one full years' premium is paid. The UPRV shall be computed using the following formula:

    75% * (sum of premiums paid) * (1 – premium paying term / benefit option term) * (Balance benefit option term / benefit option term).
- **With Return of Balance Premium**

  In case of a Single Pay (SP) option, the SSV shall be payable immediately after the policy is issued. For other cases, the SSV shall be payable on completion of one policy year, provided one full years' premium is paid.
  - **Term Benefit (TB) –** SSV_Maturity * 100% of Total Premiums paid (excluding loading for modal premiums and discount) + SSV_TB * TB SA * (Number of Premiums Paid / Number of Premiums Payable).
  - **Accidental Total and Permanent Disability (ATPD) –** SSV_Maturity * 100% of Total Premiums paid (excluding loading for modal premiums and discount) + SSV_ATPD * ATPD SA * (Number of Premiums Paid / Number of Premiums Payable).
  - **Accidental Death Benefit (ADB) –** SSV_Maturity * 100% of Total Premiums paid (excluding loading for modal premiums and discount) + SSV_ADB * ADB SA * (Number of Premiums Paid / Number of Premiums Payable).

Any or all of the benefit options alone may be surrendered / discontinued separately or it gets surrendered / discontinued if the base product is surrendered / discontinued or made paid-up.

No surrender benefit is payable if the total claim/s value paid exceeds the total premiums paid by the Policyholder.

For Surrender Value factors, please refer the Policy Document on our website: www.tataaia.com. Company may review this Special Surrender Value factor from time to time based on the experience and any change in SSV factors will be subject to prior approval of IRDAI.

Termination

The Benefit Option/s opted under this rider shall automatically terminate on the occurrence of the earliest of the following:

a. End of term of the respective health benefit option; or

b. Payment of surrender value of the respective health benefit option or the base plan; or

c. On the payment of 100% of the benefit or commencement of Income Benefit payment under the respective Benefit option under the Rider or the date of intimation of repudiation of the claim; or

d. Free Look Cancellation of respective health benefit option or base plan by the policyholder; or

e. If the base policy along with Benefit Option is not revived within revival period of the base policy; or

f. On the Maturity/Expiry Date or the date on which the base Policy is surrendered, converted into reduced paid-up (when the Benefit Option has not acquired Surrender Value), terminated or cancelled for any reason; or

g. On cancellation/ termination of the respective health benefit option or base plan by Us on grounds of misrepresentation, fraud or non- disclosure established in terms of Section 45 of the Insurance Act, 1938 as amended from time to time.

Additional Features:

Medical Second Opinion: The life insured may avail Second Opinion / Personal Medical Case Management services from service providers affiliated to/registered with the Tata AIA Life Insurance Co. Ltd. The services are expected to assist the life insured to ascertain correct diagnosis of a medical condition and obtain due care for the life insured in case of illness.

These services are subject to:

- the availability of a suitable service provider;
- primary diagnosis has been done by a registered medical practitioner as may be authorized by a competent statutory authority; and
- the eligibility of the Life Insured as may be determined by the Company from time to time.

- **Free Look Period:** You have a period of 30 (Thirty) days from the date of receipt of the document for the Benefit Option to review the terms and conditions of the Benefit

Option under the rider. If you disagree to any of the terms or conditions, you have the option to return the original documents to us, by stating the objections/reasons for such disagreement. Upon return, the Benefit Option will terminate forthwith and all rights, benefits and interests under the Benefit Option in the Rider will cease immediately. We will only refund the Premiums for the respective Benefit Option received by us, after deducting the proportionate risk premium for the period of cover, charges of stamp duty paid and the expenses incurred on medical examination of the Life Insured, if any.

- The clauses covering Incontestability, Fraud & Non-Disclosure, Misstatement of Age & Gender and Exclusions will be the same as in the base policy.
- **Policy Loan:** Loan is not available against this rider
- **Grace Period:** The Grace Period applicable to this (non-single pay) rider will be same as that applicable to the Base Plan. All benefit options selected under this rider will remain in force during this period. If the full premium for the Benefit Option (non single pay) for the first 2 years from the risk commencement date under the Benefit Option, remains unpaid at the end of the grace period the Benefit Option shall lapse from the due date of the first unpaid premium for the Benefit Option. If any claim occurs during the grace period, any due premium (without interest) of the Benefit Option for the policy year in which the insured event has occurred will be deducted from the claim pay out. At renewability, the policyholder shall be offered a grace period of 30 days. The insurance coverage shall cease to exist till the date of receipt of renewal premium during the grace period.
- **Nomination:** Nomination for the Benefit Option shall be as per provisions of Section 39 of the Insurance Act, 1938 as amended from time to time.
- **Assignment:** Assignment for the Benefit Option shall be as per the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time and prevailing regulations.
- All Premiums, Charges, and interest payable under the policy are exclusive of applicable taxes, duties, surcharge, cesses or levies which will be entirely borne/ paid by the Policyholder, in addition to the payment of such Premium, charges or interest. Tata AIA Life shall have the right to claim, deduct, adjust, recover the amount of any applicable tax or imposition, levied by any statutory or administrative body, from the benefits payable under the Policy.
- **Tax benefits:** Tax benefits and liabilities under the Policy are subject to prevailing tax laws. Tax laws and the benefits arising thereunder are subject to change. The Policyholder is advised to seek an opinion of tax advisor in relation to the tax benefits and liabilities applicable.

Definitions and Exclusions:

Please refer 'Definitions and Exclusions Annexure' on our website (www.tataaia.com) for Generic definitions and definitions of illnesses covered under the rider

Details of the Exclusions applicable under the various 'Health Benefit options' are given below

Event	Exclusion
Term Benefit with Accelerated Terminal Illness (T&TI)	**Suicide Exclusion:** In case of death due to suicide within 12 months from the date of commencement of risk under the policy or from the date of revival of the policy, as applicable, the nominee or beneficiary of the policyholder shall be entitled to at least 80% of the total premiums paid till the date of death or the surrender value available as on the date of death whichever is higher, provided the policy is in force. No other claim would be entertained by the Company except the refund of 80% Total Premiums Paid or the acquired surrender value, as applicable. Apart from Suicide exclusion detailed above, no other exclusion is applicable in the event of death. **Terminal Illness Exclusion:** The Life Insured will not be entitled to any Terminal Illness benefit if it is caused directly or indirectly due to or occasioned, accelerated or aggravated by intentional self-inflicted injury or attempted suicide, whether medically sane or insane.
Accidental Death Benefit (ADB)	Accidental Death Benefit shall not be payable for any losses caused directly or indirectly, wholly or partly, by any one of the following occurrences: • Death as a result of any disease or infection • Death arising due to any condition other than death solely and directly as a result of an accident • Any Pre-existing condition or Disability arising out of a Pre-existing Diseases or any complication arising therefrom. Wherever the proximate cause is accident which has occurred after the rider inception date, this exclusion shall not apply.

Event	Exclusion
Accidental Death Benefit (ADB)	• Suicide, attempted suicide, intentional self-inflicted injury, acts of self-destruction, irrespective of mental condition. • Death arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen • Death arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air-force operation, civil war, public defense, rebellion, revolution, insurrection, military or usurped power. • Death caused by participation of the insured person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable. • Insured Person whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation and is specifically specified in the Policy Schedule. • Working in underground mines, tunnelling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities • Death arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion with criminal intent. • Death arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.

Event	Exclusion
Accidental Total and Permanent Disability Benefit (ATPD)	Accidental Disability Benefit shall be not payable for any losses caused directly or indirectly, wholly or partly, by any one of the following occurrences: • Disablement as a result of any disease or infection • Disablement arising due to any condition other than disablement solely and directly as a result of an accident • Any Pre-existing condition or Disability arising out of a Pre-existing Diseases or any complication arising therefrom. Wherever the proximate cause is accident which has occurred after the rider inception date, this exclusion shall not apply. • If the Disability has not persisted for at least 180 days and is not in the opinion of a medical practitioner, deemed to be permanent. • Attempted suicide, intentional self-inflicted injury, acts of self-destruction, irrespective of mental condition. • Disablement arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen • Disablement arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air-force operation, civil war, public defense, rebellion, revolution, insurrection, military or usurped power. • Disablement caused by participation of the insured person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable. • Insured Person whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation and is specifically specified in the Policy Schedule. • Working in underground mines, tunnelling or explosives, or involving electrical installation with

Event	Exclusion
Accidental Total and Permanent Disability Benefit (ATPD)	high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities • Disablement arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion with criminal intent. • Disablement arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.
CritiCare Benefit (CB) and CritiCare Plus Benefit (CPB)	In addition to the disease specific exclusions given along with definitions of the respective diseases covered under the Benefit Option, no benefit will be payable if death or the illness covered under the policy is caused or aggravated directly or indirectly by any of the following: • Pre-Existing Diseases are not covered. Any pre-existing disease at the time of inception of the policy. • Any investigation or treatment for any Illness, disorder, complication or ailment arising out of or connected with the pre-existing Illness shall be considered part of that pre-existing illness. • No benefits will be payable for any condition(s) which is a direct or indirect result of any pre-existing conditions unless Life Insured has disclosed the same at the time of proposal or date of revival whichever is later and the Company has accepted the same. • Any covered condition which is diagnosed and/or received medical advice/treatment within the waiting period. • Self-inflicted injuries, attempted suicide, insanity, and deliberate participation of the Life Insured in an illegal or criminal act with criminal intent. • Use of intoxicating drugs / alcohol / solvent, taking of drugs except under the direction of a medical practitioner. • Any illness due to an external congenital defect • Engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off pastel skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport, bungee jumping, hand gliding etc. • Any injury, sickness or disease received as a

Event	Exclusion
CritiCare Benefit (CB) and CritiCare Plus Benefit (CPB)	result of aviation (including parachuting or skydiving), gliding or any form of aerial flight other than as a fare-paying passenger or crew on a licensed passenger-carrying commercial aircraft operating on regular routes and on a scheduled timetable unless agreed by special endorsement. • War, invasion, hostilities (whether war is declared or not), civil war, rebellion, terrorist activity, revolution or taking part in a riot or civil commotion, strikes or industrial action. • Any treatment of a donor for the replacement of an organ • Nuclear reaction, Biological, Chemical or Radioactive contamination due to nuclear accident • Diagnosis and treatment outside India. • Ayurvedic, Homeopathy, Unani, herbalist treatment, any other treatments other than Allopathy / western medicines.

Prohibition of Rebates - Section 41 - of the Insurance Act, 1938, as amended from time to time

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

Disclaimer

- Medical Second Opinion / Personal Medical Case Management is an optional service offered to you at no additional cost. You may exercise your own discretion to avail the services and to follow the treatment path suggested by the service provider. These services shall be directly provided by the service provider. The services can be availed only where policy/rider is inforce. All the supporting medical records should be available to avail the service. We reserve the right to discontinue the service or change the service provider at any time. The services are being provided by third party service provider and Tata AIA Life Insurance Company Ltd will not be liable for any liability.
- The brochure is not a contract of insurance. This brochure should be read along with the base product brochure and sales Illustration before concluding a sale. The precise terms and conditions of this plan are specified in the policy contract available on Tata AIA Life website.

- This rider is underwritten by Tata AIA Life Insurance Company Ltd. This rider is not a guaranteed Issuance rider and it will be subject to Company's underwriting and acceptance.
- Riders are not mandatory and are available for a nominal extra cost.
- This Rider can be opted online with applicable products. Please visit us at www.tataaia.com for the same.
- Participation by customers shall be on voluntary basis.

BEWARE OF SPURIOUS PHONE CALLS AND FICTITIOUS/ FRAUDULENT OFFERS

IRDAI or its officials do not involve in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.