

The health of Your family is very important to You. When faced with hospitalisation for one or more family members, the medical bills can severely dent Your savings. The cost associated with hospitalisation might be very high and You need to be better prepared for such an emergency.

Buying Medical Insurance for each individual family member can be cumbersome and expensive. What if there is a solution that gives You a single tool to cover Your entire family – all in one?

Bajaj Allianz Family CareFirst presents an innovative yet practical health care plan for everyone in Your family including children and parents. This unique hospitalisation plan gives You a 3-year health cover for Your entire family and allows You to renew the policy after every 3 years to keep Your family covered till the age of 74 years. So no separate accounts, repetitive paperwork or payment adjustments for each member. Secure Your entire family in one shot.

How does the plan work?

The Policy covers hospitalisation expenses ranging from Rs. 1 lac to Rs. 10 lacs. This means, if You opt for a sum assured of Rs. 5 lacs for Your family, You and Your family together can avail up to Rs. 5 lacs every year to meet Your hospitalisation expenses, subject to limits on reimbursement of expenses, waiting period and exclusions as mentioned below.

All the life assureds covered under the policy will be referred to as Member(s).

The proposer or his/her spouse, if included, who so ever is of higher age shall be referred to as Primary Member and all other life assureds as dependent Members.

Children of the Primary Member shall be covered provided they are economically dependent on parent(s) and are not married.

Key Benefits

- + Coverage from 3 months to age 74 with guaranteed renewals
- + 3 year premium guarantee for each policy term
- + Hospitalisation Cover in leading hospitals across the country.
- + 15% discount on premium on every renewal
- + No claim bonus in the form of increase in sum assured @5% every year
- + Day Care Treatment for 125 day care procedures
- + Pre-Hospitalisation and Post-Hospitalisation Benefit
- + Reimbursement of Ambulance expenses
- + Choice to select Health Critical Illness rider
- + Choice to include Your spouse, children and parents
- + Cash Less Service Facility in leading hospitals across the country

Hospitalisation Cover

Following expenses incurred during the hospitalisation (for atleast continuous period of 24 hours) for in-patient treatment would be covered under the policy.

- + Room rent and Boarding expenses
- + Nursing expenses
- + Doctor's fees
- + Operation theatre charges
- + Cost of Anesthesia, Blood, Oxygen, Medicines and Drugs, Diagnostic Materials, X-Ray, Surgical Appliances, any disposable surgical consumables, dialysis, radiotherapy, Artificial Limbs, stents and implants, and pacemaker

Pre-Hospitalisation and Post-Hospitalisation Benefit

A flat benefit of 3% of the reimbursable hospital expenses will be paid on each hospitalisation claim towards pre-hospitalisation and post-hospitalisation expenses.

Ambulance Charges

In case the hospitalisation requires an ambulance, the expenses for ambulance will be reimbursed by Us subject to a maximum reimbursement of Rs. 1,000 for a member in a policy year provided the member is hospitalised for more than 24 continuous hours.

Day Care Treatment

The plan covers 125 illnesses or procedures as mentioned below wherein You don't need to be hospitalised for at least 24 continuous hours; it will be considered as proper hospitalisation.

Sl No	Day Care Treatments/Procedures	Sl No	Day Care Treatments/Procedures
1	Surgical debridement of wound	67	Varicose vein stripping or ligation
2	Therapeutic Ascitic Tapping	68	Excision of Dupuytren's contracture
3	Therapeutic Pleural Tapping	69	Carpal tunnel decompression
4	Therapeutic joint Aspiration	70	Arthroscopic therapy
5	Aspiration of an internal abscess under ultrasound guidance	71	Surgery for ligament tear
6	Aspiration of hematoma	72	Surgery for meniscus tear
7	Endoscopic Foreign Body Removal- trachea/ pharynx/bronchus/esophagus/stomach/rectum	73	Surgery for hemoarthrosis/pyoarthrosis
8	True cut Biopsy-Breast/-liver/-kidney-Lymph Node/-Pleura/-lung/-Muscle biopsy/Nerve Biopsy/-Synovial Biopsy/-Bone trephine Biopsy/-pericardial biopsy	74	Removal of fracture pins/nails
9	Sclerotherapy	75	Removal of metal wire
10	Dilation of digestive tract strictures	76	Incision of bone, Septic and aseptic
11	Endoscopic Ultrasonography and biopsy	77	Closed reduction of fracture, subluxation or epiphyseolysis with osetosynthesis
12	Nissen fundoplication for Hiatus Hernia/Gastro esophageal reflux disease	78	Structure and other operations tendons and tendon sheath
13	Endoscopic placement/removal of stents	79	Reduction of dislocation under GA
14	Endoscopic Gastrostomy	80	Cataract Surgery
15	Replacement of Gastrostomy tube	81	Excision of lachrymal cyst
16	Endoscopic polypectomy	82	Excision of pterigium
17	Endoscopic decompression of colon	83	Glaucoma Surgery
18	Therapeutic ERCP	84	Surgery for retinal detachment
19	Brochosopic treatment of bleeding lesion	85	Chalazion Removal (Eye)
20	Brochosopic treatment of fistula/stenting	86	Incision of lachrymal glands
21	Bronchoalveolar lavage & Biopsy	87	Incision of diseased eye lids
22	Tonsillectomy without Adenoidectomy	88	Excision of eye lid granuloma
23	Tonsillectomy with Adenoidectomy	89	Operation on canthus & epicanthus
24	Excision and destruction of lingual tonsil	90	Corrective surgery for entropion & ectropion
25	Myringotomy	91	Corrective surgery for blepharoptosis
26	Myringotomy With Grommet Insertion	92	Foreign body removal from Conjunctiva
27	Myringoplasty/Tympanoplasty	93	Foreign body removal from cornea
28	Antral Wash under LA	94	Incision of cornea
29	Quinsy drainage	95	Foreign body removal from lens of the eye
30	Direct Laryngoscopy With biopsy	96	Foreign body removal from posterior chamber of eye
31	Reduction of nasal fracture	97	Foreign body removal from orbit and eyeball
32	Mastoidectomy	98	Excision of breast lump/Fibro adenoma
33	Removal of tympanic drain	99	Operations on the nipple
34	Reconstruction of middle ear	100	Incision/Drainage of breast abscess
35	Incision of mastoid & middle ear	101	Incision of pilonidal sinus
36	Excision of nose granuloma	102	Local excision of diseased tissue of skin and subcutaneous tissue
37	Therapeutic Phlebotomy	103	Simple restoration of surface continuity of the skin and subcutaneous tissue
38	Haemodialysis /Peritoneal Dialysis	104	Free skin transportation, donor site
39	Chemotherapy	105	Free skin transportation, recipient site
40	Radiotherapy	106	Revision of skin plasty excepting burns / injuries
41	Coronary Angioplasty (PTCA)	107	Destruction of the diseased tissue of the skin and subcutaneous tissue
42	Pericardiocentesis	108	Incision, excision, destruction of the diseased tissue of the tongue
43	Insertion of filter in inferior vena cava	109	Incision and lancing of the salivary gland and salivary duct
44	Insertion of gel foam in artery or vein	110	Resection of Salivary duct
45	Carotid angioplasty	111	Reconstruction of a salivary gland / salivary duct
46	Renal angioplasty	112	External incision and drainage in the region of the mouth, jaw and face
47	Tumor embolisation	113	Incision of hard and soft palate
48	TIPS Procedure for portal hypertension	114	Excision and destruction of the diseased hard and soft palate
49	Endoscopic Drainage of Pseudopancreatic cyst	115	Incision, Excision and destruction in the mouth
50	Lithotripsy	116	Surgery to the floor of mouth
51	PCNS (Percutaneous nephrostomy)	117	Palatoplasty
52	PCNL (Percutaneous nephrolithotomy)	118	Transoral incision and drainage of pharyngeal abscess
53	Suprapubic cystostomy	119	Dilation and curettage, Myomectomy, hysteroscopic or laparoscopic biopsy or removal
54	Trans urethral resection of bladder tumor	120	Vaccination/Inoculation forming a part of post bite treatment
55	Hydrocele surgery	121	Coronary Angiography
56	Epididymectomy	122	Dental surgery due to accident
57	Orchidectomy	123	Any surgery under general anaesthesia requiring OT
58	Hemiorrhaphy	124	Genital surgery
59	Hernioplasty	125	Laparoscopic therapeutic surgeries
60	Incision and Excision of tissue in the perianal region		
61	Surgical treatment of anal fistula		
62	Surgical treatment of hemorrhoids		
63	Sphincterotomy / Fissurectomy		
64	Laparoscopic appendicectomy		
65	Laparoscopic Cholecystectomy		
66	TURP (endoscopic Resection prostate)		

Cash Less Service Facility

- + Cash Less Services (CLS) will help You avail the hospitalisation benefits without any advance payment in the hospital and facilitate quick delivery of services through Network Hospitals (NWH).
- + Third Party Administrators (TPA) of the Company facilitates the Cash Less Services.
- + On issuance of the policy, the TPA will provide the member(s) a photo identification card and a guide book, which would contain a list of NWH, the details explaining the process for application of CLS and hospitalisation intimation form / pre-authorization form to be filled up by Your attending doctor for hospitalisation in NWH.
- + The TPA will maintain 24/7 helpline on toll free number as well as mobile number to facilitate any medical emergency requirement.
- + To avail of the CLS facility all You need to do is to contact the TPA at any of their offices which are convenient to You and submit the hospitalisation intimation form / pre-authorization form.
- + In case of an emergency the member need to produce the photo identification card in NWH to get admission and within 48 hours of hospitalisation You will have to contact the TPA to obtain CLS authorization. If CLS is authorized then Your hospitalisation expenses will directly be settled by the TPA with NWH to the extent it is reimbursable and the balance of the hospitalisation expenses would be settled by You at the time of discharge.

No Claim Bonus

- + If none of the Member claims during the previous policy year, the sum assured under the plan will be increased by an amount equivalent to 5% of the basic sum assured in the subsequent policy year subject to a maximum increase of 25% of the basic sum assured over the duration of the policy including renewals, where the basic sum assured means the sum assured chosen as on policy commencement date.
- + However if a claim is made by any of the Member(s) after this provision has come into force, then the sum assured under the policy will be reduced back to the sum assured chosen as on policy commencement date in the subsequent policy year.

Choices available to You

Health Critical Illness rider

- + This cover provides a lump sum benefit equal to a chosen sum assured on diagnosis of the specified Critical Illnesses irrespective of the status of reimbursement of medical expenses.
- + Only the Primary Member and his/her spouse shall be covered. (Please refer to the Health Critical Illness rider brochure for more details.)

Inclusion of family members

- + On any policy anniversary, You have the option to include Your spouse, parents or children under the family policy.
- + The inclusion of new members in the policy will be subject to underwriting of the new members and the waiting period for new members will apply afresh from the policy anniversary they join the policy.
- + On inclusion of new member(s), the revised premium shall be applicable.

Eligibility

	Minimum	Maximum
Entry Age		
• Primary Member and Spouse of Primary Member	18 years	56 years for a new policy 50 years if health critical illness rider is opted for 71 for a renewed policy
• Parents		68 years for a new policy 71 for a renewed policy
• Children	3 months	18 years
Sum Assured	1,00,000	10,00,000
Maximum Maturity Age at which risk cover expires	74 years for Primary Member, Spouse of Primary member and parents 65 years if health critical illness rider is opted for 21 years for children	
Policy Term	3 years	
Mode	Yearly, Half-Yearly, Quarterly and Monthly	Monthly is permitted only by salary deduction and ECS only.

Limits on reimbursement of expenses

- + In a policy year, Our total liability towards reimbursement of medical expense including any other benefit payment under the policy shall be limited to the sum assured.
- + If hospitalisation is due to the following Illnesses/Ailments/Procedures/Group of Illnesses, We will reimburse 95% of medical expenses subject to maximum reimbursement limit per member as given below in the table:

Sl. No	Illnesses/Ailments/Procedures/Group of Illnesses	The lower of:	
		% of sum assured	Lump sum in Rs.
1.	Cataract	12%	25,000
2.	Knee replacement	50%	1,50,000
3.	Hip replacement	50%	1,75,000
4.	Miscarriage (as a result of an accident) or Ectopic Pregnancy	Not Applicable	30,000

- + If hospitalisation has taken place due to Illnesses/Ailments/Procedures/Group of Illnesses other than those listed above, then We will reimburse 95% of following expenses :

Room rent and boarding expenses per day	Maximum 1.5% of sum assured for non intensive care unit (ICU) and 3% of sum assured for intensive care unit (ICU) Room rent and boarding expenses would include Registered Medical Officer charges, administration charges for IV Fluids/Blood Transfusion/Injections
Doctor's Fee	Maximum 25% of the total medical expenses incurred on in-patient treatment
Other	Actual expenses on Operation theatre Actual expenses on Nursing Actual expenses on Anesthesia, blood, oxygen, medicines and drugs, diagnostic materials, x-ray, surgical appliances, any disposable surgical consumables, dialysis, radiotherapy, Cardiac Pacemaker, Artificial limbs, stents and implants

Grace Period, Lapse & Reinstatement

- + If any installment premium is not received in full by the due date, We shall allow a grace period of 15 days under all premium payment modes for premium to be received in full. If premium is not received within the grace period, then the policy will lapse without acquiring any surrender value or paid up value.
- + If hospitalisation of the Member(s) occurs during this grace period, the policy would be treated as inforce and We will deduct unpaid premium due as at the date of payment from any benefit payable to the policyholder.
- + A lapsed policy may be revived within 30 days of the due date of the first unpaid premium subject to medical examination if required by Us, at Your expense, and payment of outstanding premiums. The revival of the policy may be on the terms then prevailing rather than those that applied at the policy commencement date or at subsequent renewal date. If the policy is not revived within 30 days from the due date of first unpaid premium, then at the expiry of the 30 days, the policy shall be terminated without any residual/ surrender value.

Renewals:

- + The policy can be renewed within 30 days after the expiry of the current policy term at the premium rates and terms & conditions prevailing at the time of renewal.
- + On every renewal, where renewal occurs within 30 days after the expiry of the previous policy term, a 15% discount will be provided on the premium applicable to the new policy. The discount rate might change in future subject to IRDA approval.
- + If the proposed sum assured for renewal is more than the existing sum assured, then renewal of the policy would be subject to the member(s) satisfying Our underwriting requirements. The Company shall have right to refuse such increase in the sum assured.
- + Your right to renew the policy shall expire at the end of 30 days after the expiry of the previous policy term.

Exclusion for Hospitalisation Benefit

We shall not be liable to make any payment if hospitalisation or medical expenses or claims are attributable to or based on or arise out of or are directly or indirectly connected to any of the following:

- + Hospitalisation and hospital services not recommended and approved by a doctor;
- + Expenses which are not actual and medically necessary;
- + Treatment for weight reduction or weight improvement;

- Eye tests, refractive errors of the eyes and the provision of appliances, including spectacles, lenses, hearing aids and wheelchairs;
- Any dental care or surgery of cosmetic nature, extraction of impacted tooth/teeth, orthodontics or orthognathic surgery, or temporomandibular joint disorder except as necessitated by an accidental injury;
- Diagnostic tests for infertility, treatment for infertility or impotency, sex change or any treatment related to it, abortion, sterilization and contraception including any complications relating thereto.
- Treatment arising from pregnancy, which shall include childbirth or miscarriage (except as a result of an accident), excepting Ectopic pregnancy.
- Treatment for congenital conditions, including physical defects present from birth;
- Charges for seeing a general practitioner, routine health checks, precautionary services, acupuncture and inoculation, referral fee to family physician and charges for telephone, television, newspapers and other ineligible non-medical items whilst as an In-Patient or undergoing surgery including but not limited to;
 - Expenses on irrelevant investigations / treatment
 - External / durable medical or non-medical equipments of any kind used for diagnosis/ treatment including CPAP, CAPD, infusion pump etc.
 - Devices like walker, crutches, belts, collars, caps, splints, slings, braces, stockings, diabetic footwear, glucometer, thermometer and similar related items and any medical equipment which could be used at home subsequently
 - Personal comfort / convenience items like maid servant (attendant), barber, beauty services, diet charges, baby food, cosmetics, napkins, toiletries, guest services etc.
 - Any kind of service charges, surcharges, admission fees, registration charges etc levied by the hospital
- Hospitalisation primarily for diagnosis, X-ray examinations, general physical or medical check-up not followed by active treatment during the hospitalisation period;
- Stay in hospital for domestic reason where no active regular treatment is given by specialist medical practitioner
- Experimental or unproven procedures or treatments, devices or pharmacological regimens of any description (not recognized by Indian Medical Council)
- Non prescribed drugs or medical supplies
- Treatment under any system other than allopathic.
- Treatment arising from any geriatric, psycho-geriatric or psychiatric condition, insanity, mental or nervous breakdown / disorder or "rest cures";
- Expenses for services received in convalescent home and nursing homes, nature cure clinics and similar establishments;
- Treatment directly or indirectly arising from alcoholism or drug abuse and any illness or accidental physical injury which may be suffered after consumption of intoxication liquors or drugs;
- Treatment directly or indirectly arising from or consequent upon war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, terrorism, rebellion, active participation in strikes, riots or civil commotion, revolution, insurrection or military or usurped power, and full-time service in any of the armed forces;
- Acquired Immune Deficiency Syndrome (AIDS) and all illnesses or diseases caused by or related to the Human Immuno-Deficiency Virus
- Sexually transmitted diseases
- Expenses for services or treatment which are paid for by any other party or which are claimable under workmen's compensation insurance; In such case, We will reimburse the difference between the expenses that would have been reimbursable by Us had there been no other party or workmen's compensation insurance involved and the amount already reimbursed or reimbursable by other party or by workmen's compensation insurance.
- Cosmetic or plastic surgery except to the extent that such surgery is necessary for the repair of damage caused solely by accidental injuries; treatment of xanthelesema, syringoma, acne and alopecia;
- Study and treatment of sleep apnoea;
- Deliberate exposure to exceptional danger (except in an attempt to save human life);
- Nuclear disaster, radioactive contamination and/or release of nuclear or atomic energy;
- Injuries arising out of or in connection with
 - Commando or bomb disposal duties or training, active military and police duties such as maintenance of civil order, engagement in hostilities, whether war be declared or not, and travel by military aircraft or waterborne vessel; or
 - Military duties of a peace-time nature, namely normal training range work and military exercises.
- Treatment for accidental physical injury or illness caused by intentionally self-inflicted injuries; or any attempts at suicide while sane or insane;
- Treatment for accidental physical injury or illness caused by violation or attempted violation of the law, or resistance to arrest;

- Treatment for accidental physical injury or illness caused by professional sports, racing of any kind, scuba diving, aerial sports, activities such as hand-gliding, ballooning, and any other hazardous activities or sports unless agreed by special endorsement;
- Cost of procurement of a replacement organ, transportation costs of the replacement organ and associated administration costs and all costs incurred by the donor;
- Associated with the failure of seeking timely medical advice in order to circumvent the waiting period or other conditions and restrictions applied by Us.
- Circumcision unless necessary for treatment of a disease or necessitated due to an accident
- Medical expenses incurred due to Ventral/ Incisional Hernia unless We have paid the first operation
- Diagnosis, hospitalisation and/or treatment within the Waiting Period as listed below:

Illnesses/ Ailments/ Diseases or Treatment/ Surgeries/ Procedures	Waiting period
Any Illnesses/ Ailments/ Diseases or Treatment/ Surgeries/ Procedures	30 days
Tonsillectomy, Cancer of any kind	One Year
Kidney Stone/ Ureteric Stone/ Lithotripsy, Cataract, Hysterectomy, Cholelithiasis, Cholecholelithiasis, surgery of Gall Bladder and Bile ducts excluding Malignancy, surgery of Benign Prostatic Hypertrophy, Hernia (Inguinal), Haemorrhoids, Anal Fissure, Fistula-in-anus, Exploratory Laparotomy, Lapchole, diagnostic Laparoscopy, any Gynaecological disease, Hydrocoele, Fibroids	Two Years

- Waiting period means the initial period from the date of commencement of policy or the date of revival of the policy during which the Member(s) is required to wait for the risk cover to commence for the listed illnesses or treatments.
- Waiting period is not applicable in case of hospitalisation / surgery due to an accident.

The waiting period would be reduced for renewed policy by the number of years the member(s) have been insured with Us under this plan or under Our similar plan, provided the policy is renewed within 30 days after the expiry of the previous policy term.

Illnesses / Treatments covered only after First Renewal*:

- We shall reimburse the expenses for the hospitalization due to Tympanoplasty; Valve Replacement; Valvotomy, Cerebral Haemorrhage; Angiographies, Angioplasty (with or without stent), Coronary Artery Bypass Graft unless post accident only if they take place after the date of first renewal*.
- We shall reimburse the expenses for the hospitalization due to Total Knee Replacement, Total Hip Replacement, Diskectomy, Arthroscopy unless post accident for each of these treatments/surgeries/procedures or for Pelvic Inflammatory Disease, Varicose Veins, Diabetes with or without high blood pressure and its complications, direct results of or accompanied by it, Chronic Renal Failure, only if they take place after one year from the date of first renewal*.
- We shall reimburse the expenses for the hospitalization due to any treatments/surgeries/procedures taking place due to any pre-existing illnesses/ailments / diseases only if such treatments/surgeries/procedures take place after one year from the date of first renewal*. The pre-existing disease shall not include any congenital disease or deformity.

* First Renewal will be due after 3 years from the commencement of the policy

Claim Admission:

- For a claim to be admitted under this policy, the member(s) should be hospitalised as an In-patient for a continuous period of more than 24 hrs. However, this time limit is not applicable in case of day care treatments.
- If You have got authorization by the Third Party Administrators (TPA) for Cash Less Services (CLS), then Your reimbursable hospitalisation expenses would be directly settled with Network Hospitals (NWH), else if Your CLS is disapproved or You are hospitalised in non-NWH, We shall pay You the reimbursable expenses within 7 days of You making the claim and submitting all the required documents as desired by Us to Our office.
- You would require to submit all documents and information including but not limited to original policy, all medical reports, original bills & receipts, investigation reports, treatment papers, discharge card, Hospital Summary, Doctors Certificate containing diagnosis and treatment details within 60 days of discharge from the hospital.

Tax Benefits

The premium paid under this plan will be eligible for tax benefits under Section 80D of the Income Tax Act, 1961.

15 days Free Look Period:

Within 15 days from the date of receipt of the policy, You have the option to review the terms and conditions and return the policy, if You disagree to any of the terms and conditions, stating the reasons for Your objections. You will be entitled to a refund of the premium paid, subject only to a deduction of a proportionate risk premium for the period on cover and the expenses incurred on medical examination and stamp duty charges.

Why Bajaj Allianz Life Insurance?

Bajaj Allianz Life Insurance Company Limited is a union between Allianz SE, the world's leading insurer and Bajaj Auto, one of India's most respected names. Allianz SE is a leading insurance conglomerate globally and one of the largest asset managers in the world, managing assets worth over a Trillion Euros (over Rs. 55,00,000 crores). At Bajaj Allianz, we realize that you seek an insurer you can trust your hard earned money with. Allianz SE has more than 110 years of financial experience in over 70 countries and Bajaj Auto, trusted for over 55 years in the Indian market, are committed to offering you financial solutions that provide all the security you need for your family and yourself.

At Bajaj Allianz, customer delight is our guiding principle. Ensuring world class solutions by offering you customized products with transparent benefits supported by the best technology is our business philosophy.

Prohibition of Rebate: Section 41 of the Insurance Act, 1938 states:

- 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.
- Any person making default in complying with the provision of this section shall be punishable with a fine that may extend to five hundred rupees.

This product brochure gives the salient features of the plan only. The policy document is the conclusive evidence of the contract, and provides in detail all the conditions, exclusions related to the 'Bajaj Allianz Family CareFirst' Plan.

Role of T.P.A. MediCare Services

MediCare TPA Services (Pvt) Ltd is the Third Party Administrator associated with Bajaj Allianz Life Insurance Co. Ltd. to provide you with customized, high-quality health benefits like Cash Less facilities etc. They are currently administering benefits for more than 1 Million members nationwide with their presence in 55+ cities in India with skilled and trained manpower headed by strong management teams to facilitate TRANSPARENT information EXCHANGE. On issuance of the Health card, you would be provided with a guidebook which has a pre authorization form to be filled up by your attending doctor for hospitalisation at empanelled medical institutions and the details of how to go about the Cash Less Service in case of planned as well as emergency hospitalisation. Medicare TPA will maintain a 24/7 Helpline on Tollfree as well as mobile numbers to facilitate any medical emergency requirements.

Contact Details:

Bajaj Allianz Life Insurance Company Limited

- G.E. Plaza, Airport Road, Yerawada, Pune - 411 006.
Tel : (020) 6602 6777. Fax : (020) 6602 6789. **SMS CARE @ 56070**
- Macmet House, 5th Floor, 10B, O.C. Ganguly Sarani, Kolkata 700 020

Medicare T.P.A. Services (I) Pvt. Ltd.
6 Bishop Lefroy Road, Paul Mansion, Kolkata – 700 020
Toll free No : 1800-345-1234 (For Emergency Hospitalisation only)
Help line No : 98302-16666 Tel : 033-2280 9791/2280 9510/2281 2826/2281 2827
Fax: 033-2247 6233
Email : medicaretpa@vsnl.net Website : www.medicaretpa.com

Toll free	BSNL	Tata	Bharti	Reliance
	1800 233 7272	1800 209 7272	1800 103 7272	1800 3000 7272

For any other Tel. : 020-30587888	Standard STD charges apply	email : life@bajajallianz.co.in chat : bajajallianzlife.co.in/chat url : www.bajajallianzlife.co.in
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For More Information

For more details, kindly consult our "Insurance Consultant" or call us today on the numbers mentioned above.

This brochure should be read in conjunction with the Benefit Illustration and Policy Terms and Conditions. Please ask for a copy of the same along with the quotation.

SECTION 45

No Policy of life insurance effected after the coming into force of this Act shall, after the expiry of two years from the date on which it was effected, be called in question by an insurer on the ground that a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the policy, was inaccurate or false, unless the insurer shows that such statement was on a material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the policy-holder and that the policy holder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose.

Unique Identification Number (UIN) : 116N061V01 Health Critical Illness Rider (UIN) : 116B020V01

Insurance is the subject matter of the solicitation.

HealthCare
Individual



Family CareFirst

Bajaj Allianz Family CareFirst

A medical policy that puts your health care first

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