12. Convalescence, general debility, rest cure, congenital external diseases or defects or anomalies.
13. Intentional self-injury (including but not limited to the use or misuse any intoxicating drugs or alcohol)
14. Ailments requiring treatment due to use or abuse of any substance, drug or alcohol and treatment for de-addiction.
15. Any condition directly or indirectly caused by or associated with Human Immunodeficiency Virus or Variant/mutant viruses and or any syndrome or condition of a similar kind commonly referred to as AIDS.
16. Medical Expenses relating to any hospitalisation primarily and specifically for diagnostic, X-ray or laboratory examinations and investigations.
17. Any claim directly or indirectly caused by or contributed to by nuclear weapons and/or materials.
18. Treatment arising from or traceable to pregnancy and childbirth including caesarian section, and/or any treatment related to pre and postnatal care. (Ectopic pregnancy is covered under the policy)
19. Vaccination or inoculation unless forming a part of post bite treatment.
20. Any fertility, sub fertility or assisted conception operation or sterilization procedure.
21. Vitamins, tonics, nutritional supplements unless forming part of the treatment for injury or disease as certified by the attending Doctor
22. Experimental, unproven or non-standard treatment.
23. Surgery to correct deviated nasal septum and hypertrophied turbinate.
24. Treatment for any other system other than modern medicine (also known as Allopathy)
25. Expenses related to donor screening, treatment, including surgery to remove organs from a donor in the case of transplant surgery.
26. Venereal disease or any sexually transmitted disease or sickness.
27. Weight management services and treatment related to weight reduction programmes including treatment of obesity.
28. Treatment for any mental illness

7: FIRE and BURGLARY (excluding Valuables)

- The householders contents will be covered on the first loss basis as per coverage under the Standard Fire policy (Including earthquake) and burglary policy @ 25% of the value at risk. Any valuable with value more than 5 % of the sum insured in this section is to be specifically declared along with the value at the time of proposing insurance.
- Or at the time of loss the amount payable will be restricted to 5% of the first loss sum insured

What is the entry age under the policy?

- Entry age for proposer/ spouse is 18 yrs – 65yrs.
- Children from 3 Months to 25 years can be covered as dependents under this policy

What will be the renewal age?

Under normal circumstances, lifetime renewal benefit is available under the policy except on the grounds of fraud, misrepresentation or moral hazard

What is the policy period?

This is an annual policy

Who can be covered under the policy?

Self, spouse, dependent children and dependent parents can be covered under the policy.

What are the plans available under the policy?

Regular

Sl No	Product details	Sum Insured (Rs)	Premium	
			Upto 45 yrs	46-55 yrs
1	Hospital Cash	500/30 days		
2	Accidental Hospitalisation	15000		
3	Personal Accident	100000		
4	Fire Insurance	40000		
5	Burglary Insurance	40000		
		Total	675	1017

Silver

Sl No	Product details	Sum Insured (Rs)	Premium	
			Upto 45 yrs	46-55 yrs
1	Health Ensure	50000		
2	Hospital Cash	500/30 days		
3	Personal Accident	100000		
4	Fire Insurance	100000		
5	Burglary Insurance	100000		
		Total	1593	2645

Gold

Sl No	Product details	Sum Insured (Rs)	Premium	
			Upto 45 yrs	46-55 yrs
1	Health Ensure	75000		
2	Personal Accident	200000		
3	Fire Insurance	200000		
4	Burglary Insurance	200000		
5	Critical Illness	100000		
6	Hospital Cash	1000/30 days		
		Total	3335	5820

Platinum

Sl No	Product details	Sum Insured (Rs)	Premium	
			Upto 45 yrs	46-55 yrs
1	Health Ensure	100000		
2	Personal Accident	300000		
3	Fire Insurance	200000		
4	Burglary Insurance	200000		
5	Critical Illness	100000		
6	Hospital Cash	2000/30 days		
7	Education Grant	200000		
		Total	4269	7729

Premium exclusive of Service Tax

**Tax exemption under section 80D on premium paid towards Health Sections(Health Ensure, Critical Illness & Hospital Cash only)

Pre policy medical checkup criteria:

- Waiver of medical tests up to 55years subject to no adverse medical history,
- Medical Tests are mandatory for age 56 years and above (list of medical tests required is as per table below).
- The pre-policy check up would be arranged at our network diagnostic centers.
- The validity of the test reports would be 30 days from date of medical examination.
- If pre-policy check up would be conducted in our network diagnostic centre, 50% of the standard medical tests charges would be reimbursed, subject to acceptance of proposal and policy issuance.

Age of the person to be insured	Sum Insured	Medical Examination
Up to 45 years	All Sum Insured options	No Medical Tests*
46 and above	All Sum Insured options	Medical Tests required as listed below: Full Medical Report, CBC, Urine R, ECG, Lipid profile, Fasting BSL, HbA1c, SGOT, SGPT, Sr Creatinine, GGTP

*Subject to no adverse medical history

Free Look Period

If you are not satisfied with policy coverage, terms and conditions, You have the option of canceling the policy within 15 days of receipt of the first policy documents, provided there has been no claim.
Free Look Period is not applicable for renewal policies.

Renewal & Cancellation

i. Under normal circumstances, renewal will not be refused except on the grounds of Your moral hazard, misrepresentation or fraud
ii. In case of Our own renewal a grace period of 30 days is permissible and the Policy will be considered as continuous for the purpose of all waiting periods . Any medical expenses incurred as a result of disease condition/ Accident contracted during the break period will not be admissible under the policy.
iii. For renewals received after completion of 30 days grace period, a fresh application of health insurance should be submitted to Us, it would be processed as per a new business proposal.
iv. After the completion of maximum renewal age of dependent children, the policy would be renewed for lifetime. However a separate proposal form should be submitted to us at the time of renewal with the insured member as proposer. Suitable credit of ontinuity/waiting periods for all the previous policy years would be extended in the new policy, provided the policy has been maintained without a break.
v. Premium payable on renewal and on subsequent continuation of cover are subject to change with prior approval from IRDA.
vi. We may cancel this insurance by giving You at least 15 days written notice, and if no claim has been made then We shall refund a pro-rata premium for the unexpired Policy Period. Under normal circumstances, policy will not be cancelled except for reasons of non-disclosure while proposing for insurance and /or lodging any fraudulent claim .
vii. You may cancel this insurance by giving Us at least 15 days written notice, and if no claim has been made then the We shall refund premium on short term rates for the unexpired Policy Period as per the rates detailed below

Period on Risk	% of Annual Premium Refunded
Upto 1 month	75%
Exceeding 1 month and upto 3 months	50%
Exceeding 3 months and upto 6 months	25%
Exceeding 6 months	Nil

Grace period

- In case of our own renewal a grace period of 30 days is permissible and the Policy will be considered as continuous for the purpose of Specific waiting periods under the policy.
- Any medical expenses incurred as a result of disease condition/ Accident contracted during the break period will not be admissible under the policy.

When can I Change my Plan?

- Change of plan can be done only at renewals.
- For change of plan, fresh proposal form along with the renewal notice should be submitted

Portability Conditions

- As per the Portability Guidelines issued by IRDA, If you are insured under any other health insurance policy of Non life insurer you can transfer to United Sampoorna Suraksha Policy with all your accrued benefits after due allowances for waiting periods and enjoy all the available benefits of Health Assist Insurance Policy
- The pre-policy medical examination requirements and provisions for such cases shall remain similar to non-portable cases

Revision/ Modification of the policy:

There is a possibility of revision/ modification of terms, conditions, coverages and/or premiums of this product at any time in future, with appropriate approval from IRDA. In such an event of revision/modification of the product, intimation shall be set out to all the existing insured members at least 3 months prior to the date of such revision/modification comes into the effect

Withdrawal of Policy

There is possibility of withdrawal of this product at any time in future with appropriate approval from IRDA, as We reserve Our right to do so with a intimation of 3 months to all the existing insured members. In such an event of withdrawal of this product, at the time of Your seeking renewal of this Policy, You can choose, among Our available similar and closely similar Health insurance products. Upon Your so choosing Our new product, You will be charged the Premium as per Our Underwriting Policy for such chosen new product, as approved by IRDA.

Note : *This product is specially designed for customers of United Bank of India . In the event of this product being discontinued we will offer continuity for health insurance if the insured person opts for any health insurance policy with us (for a similar type of Health cover) provided there is no break in the coverage . The premiums applicable would be as per the product opted.

**In case of a claim being paid under Section 1 Critical Illness Section 2 Personal Accident (Death /PTD) and Section 4 Education Grant ,the cover under the respective sections ceases .However the premium for the packaged product remains unchanged.

UNITED BANK OF INDIA

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Get yourself and your family covered by United Sampoorna Suraksha Policy today and sleep easy.

- Cashless facility offered through network hospitals of Bajaj Allianz only.
- Cashless facility at 3300+ Network hospitals PAN India.
- Special discounts and offers through our value added providers.*

To know more visit our website, Website: www.bajajallianz.com or get in touch with Email: wellness.HAT@bajajallianz.co.in ;24*7 helpline number: 1800-103-2529 (toll free) / 020-30305858

Network Hospital & Value Added service Provider list is provisional & subject to change based on the review of the providers

Disclaimer: The above information is only indicative in nature. For details of the coverage & exclusions please contact our nearest office.

Contact Details
Bajaj Allianz General Insurance Company Limited,
G.E. Plaza, Airport Road, Yerawada, Pune - 411 006.
Tel: (020) 6602 6666. Fax: (020) 6602 6667.
www.bajajallianz.com

For any queries please contact:

BSNL/MTNL (Toll Free)	Bharati Mobile & Landline (Toll Free)	Other (Chargeble)
1800 22 5858	1800 102 5858	<Prefix City Code> 3030 5858

Email: info@bajajallianz.co.in

*Cashless facility is available only under Health Guard Section.

United Bank of India is licensed corporate Agent [bearing License No.: 1587006] of Bajaj Allianz General Insurance Company Ltd. [IRDA registration No. 113]. The benefits/features of products are indicative and for more details on risk factors and Terms and Conditions please read sales brochure concluding a sale.

UBI-Sampoorna Suraksha/V002/w.e.f.01st October 2013
Insurance is the subject matter of the solicitation
UIN: IRDA/NL-HLT/BAGI/P-H/V.I/407/13-14 BJAZ-B-U-0002/5-Jun-17

Bajaj Allianz

United Sampoorna Suraksha Policy

Making you feel Safe & Secure

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Relationship Beyond Insurance

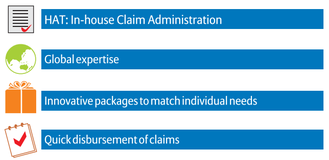
UNITED BANK OF INDIA

CIN: U66010PN2000PLC015329
UIN: IRDA/NL-HLT/BAGI/P-H/V.I/407/13-14

Bajaj Allianz

Bajaj Allianz General Insurance Company Limited is a joint venture between Bajaj Finserv Limited (recently demerged from Bajaj Auto Limited) and Allianz SE. Both enjoy a reputation of expertise, stability and strength. This joint venture company incorporates global expertise with local experience. The comprehensive, innovative solutions combine the technical expertise and experience of more than 110 year old Allianz SE, and indepth market knowledge and good will of Bajaj.
Competitive pricing and quick honest response have earned the company the customer's trust and market leadership in a very short time.

The Bajaj Allianz Advantage



What are the Sections under the United Sampoorna Suraksha policy?

1. Critical Illness
2. Personal Accident
3. Education Grant
4. Accidental Hospitalisation
5. Hospital Cash
6. Health Ensure
7. Fire contents (Excluding Valuables)
8. Burglary and Theft

1. Critical Illness cover

On diagnosis of a listed critical illness and after completion of 30 days survival period, a lumpsum benefit amount (as per the plan opted) is paid to the insured member.

This section covers below 10 Critical Illnesses.

1. First Heart Attack (Myocardial Infarction)
2. Open Chest CABG (Coronary Artery Disease Requiring Surgery)
3. Stroke Resulting in Permanent Symptoms
4. Cancer of Specified Severity
5. Kidney Failure Requiring Regular Dialysis
6. Major Organ Transplantation
7. Multiple Sclerosis with Persisting Symptoms
8. Surgery of Aorta
9. Primary Pulmonary Arterial Hypertension
10. Permanent Paralysis of Limbs

What are the exclusions under this section?

1. Any Critical Illness for which care, treatment, or advice was recommended by or received from a Physician, or which first manifested itself or was contracted before the start of the Policy Period, or for which a claim has or could have been made under any earlier policy.
2. Any Critical Illness diagnosed within the first 90 days of the date of commencement of the Policy is excluded. This exclusion shall not apply to an Insured for whom coverage has been renewed by the Named Insured, without a break, for subsequent years.
3. Any sexually transmitted diseases or any condition directly or indirectly caused by or associated with Human T-Cell Lymphotropic Virus type III (III LB III) or Lymphadinopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS.
4. Treatment arising from or traceable to pregnancy, childbirth postpartum complications including but not limited to caesarian section, birth defects and congenital anomalies.
5. Occupational diseases.
6. War, whether war be declared or not, invasion, act of foreign enemy, hostilities, civil war, insurrection, terrorism or terrorist acts or activities, rebellion, revolution, mutiny, military or usurped power, riot, strike, lockout, military or popular uprising, civil commotion, martial law or loot, sack or pillage in connection therewith, confiscation or destruction by any government or public authority or any act or condition incidental to any of the above.
7. Naval or military operations of the armed forces or airforce and participation in operations requiring the use of arms or which are ordered by military authorities for combating terrorists, rebels and the like.
8. Any natural peril (including but not limited to storm, tempest, avalanche, earthquake, volcanic eruptions, hurricane, or any other kind of natural hazard).
9. Radioactive contamination.
10. Consequential losses of any kind, be they by way of loss of profit, loss of opportunity, loss of gain, business interruption, market loss or otherwise, or any claims arising out of loss of a pure financial nature such as loss of goodwill or any legal liability of any kind whatsoever.
11. Intentional self-injury and/or the use or misuse of intoxicating drugs and/or alcohol.

2. Personal Accident Section

Personal Accident section covers Death Permanent Total disability, Permanent Partial disability caused due to accidental injury.

- Death – 100% of Sum Insured, as per plan opted
- Permanent Total Disability (PTD) – Highest compensation of 125% of Sum Insured, as per plan opted
- Permanent Partial Disability (PPD) - As per the table given below

An arm at the shoulder joint	70%
An arm above the elbow joint	65 %
An arm beneath the elbow joint	60 %
A hand at the wrist	55 %
A thumb	20 %
An index finger	10 %
Any other finger	5 %
A leg above mid-thigh	70 %
A leg up to mid-thigh	60 %
A leg up to beneath the knee	50 %
A leg up to mid-calf	45 %
A foot at the ankle	40 %
A large toe	5 %
Any other toe	2 %
An eye	50 %
Hearing of one ear	30 %
Hearing of both ears	75 %
Sense of smell	10 %
Sense of taste	5 %

- Transportation of mortal remains – lower of Rs.5,000/- and 2% of the sums assured shown under the schedule

3. Accidental Hospitalisation Section

If case of hospitalisation for a minimum period of 24 hrs due to accidental Bodily Injury, the Policy Pays Reasonable and Customary Medical Expenses incurred upto a maximum sum
insured as per plan opted.

4. Education Grant Section

(Payable in case of Accidental Death and Permanent Total Disability)

- In case of an accidental death or Permanent Total Disability of the insured person, the sum insured would be payable towards the continuing education of the deceased's child/children.
- The claim would be payable to the nominee under this section.

EXCLUSION SPECIFIC TO SECTIONS PERSONAL ACCIDENT /ACCIDENTAL HOSPITALISATION/ EDUCATION GRANT

No indemnity is available hereunder and no payment will be made by the Company for any Claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

1. Suicide, attempted suicide or self inflicted injury or illness;
2. Whilst under the influence of intoxicating liquor or drugs;
3. Arising or resulting from the insured person(s) committing any breach of law with a criminal intent .
4. From war (whether declared or not), civil war, invasion, act of foreign enemies, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrest, restraint or detainment, confiscation or nationalisation or requisition of or damage by or under the order of any government or public local authority.
5. Any consequential losses of any kind, and/or any actual or alleged legal liability of the Insured.
6. Whilst engaging in aviation or ballooning, whilst mounting into, dismounting from or travelling in any balloon or aircraft other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world.
7. Any loss suffered by the Insured on account of his participation as the driver, co-driver or passenger of a motor vehicle during motor racing or trial runs.
8. Any loss caused either directly or indirectly by nuclear energy, radiation.
9. Curative treatments or interventions that the Insured performs or has had performed on his body, without medical advice or supervision.
10. Venereal or sexually transmitted disease.
11. HIV (Human Immunodeficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or mutant derivatives or variations thereof however caused.
12. Pregnancy, resulting childbirth, miscarriage, abortion, or complication arising out of any of the foregoing.
13. The Insured's participation in any naval, military or air force operations whether in the form of military exercises or war games or actual engagement with the enemy, whether foreign or domestic.

5. Hospital Cash

- This section pays a daily benefit amount to take care of the incidental expenses during hospitalization period.
- The policy pays a daily allowance as a fixed benefit on hospitalisation as per the Plan selected regardless of the number of confinements to hospital.
- The daily benefit amount is doubled for ICU admissions (Maximum 7 days for each hospitalization).
- The benefit is available for 30 days per policy period.

EXCLUSION SPECIFIC TO SECTION HOSPITAL CASH

We will not pay for claims arising out of or howsoever connected to the following:

1. Pre-existing disease: Any pre-existing disease, for which care, treatment or advice was sought, recommended by or received from a Physician or for which a claim has or could have been made under any earlier policy.
2. Any treatment not performed by a Physician or any treatment of a purely experimental nature.
3. Any and all variants of the condition commonly referred to as Cancer, except in case of invasive malignant melanoma.
4. Any routine or prescribed medical check up or examination. Medical Expenses relating to any hospitalization for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any illness or accidental Bodily Injury for which hospitalization is required.
5. Any Sickness that has been classified as an Epidemic by the Central or State Government.
6. Sickness requiring Hospitalization within the first 30days from the commencement date of the Policy Period unless the Policy is renewed without interruption and with the Company.
7. Without prejudice to Exclusion 1 above, the treatment of cataracts, benign prostatic hypertrophy, hysterectomy, menorrhagia, fibromyoma, D&C, endometriosis, hernia of all types, hydrocele, fistulae, haemorrhoids, fissure in ano, stones in the urinary and biliary systems, surgery on tonsils or sinuses, skin and all internal tumours/cysts/nodules/polyps of any kind including breast lumps, gastric or duodenal ulcer, back ache, prolapsed intervertebral disc during the first year of a series of Daily Hospital Allowance Policies renewed with the Company without interruption.
8. Circumcision, cosmetic or aesthetic treatments of any description change of life surgery or treatment, plastic surgery (unless necessary for the treatment of Illness or accidental Bodily Injury as a direct result of the insured event and performed with in 6 months of the same).
9. Dental treatment or surgery of any kind unless necessitated by Accidental Bodily Injury.
10. Convalescence, general debility, nervous or other breakdown, rest cure, congenital diseases or defect or anomaly, sterility, sterilization or infertility (diagnosis and treatment), any sanatoriums, spa or rest cures or long term care or hospitalization undertaken as a preventive or recuperative measure.
11. Self afflicted injuries or conditions (attempted suicide), and/or the use or misuse of any drugs or alcohol.
12. Any sexually transmitted diseases or any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus type or any Syndrome or condition of a similar kind commonly referred to as AIDS.
13. Any diagnosis or treatment arising from or traceable to pregnancy (whether uterine or extra uterine), childbirth including caesarean section, medical termination of pregnancy and/or any treatment related to pre and post natal care of the mother or the new born.
14. Hospitalization for the sole purpose of physiotherapy or any ailment for which hospitalization is not warranted due to advancement in medical technology
15. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection military or usurped power of civil commotion or loot or pillage in connection herewith.
16. Naval or military operations of the armed forces or air force and participation in operations requiring the use of arms or which are ordered by military authorities for combating terrorists, rebels and the like.
17. Any natural peril (including but not limited to avalanche, earthquake, volcanic eruptions or any kind of natural hazard).
18. Participation in any hazardous sports/ activities like underwater sports, driving in races or rallies , handling of inflammable ,toxins and corrosive substances.
19. Radioactive contamination.
20. Non-allopathic treatment.
21. Consequential losses of any kind, be they by way of loss of profit, loss of opportunity, loss of gain, business interruption, market loss or otherwise, or any claims arising out of loss of a pure financial nature such as loss of goodwill or any legal liability of any kind whatsoever.

6. Health Ensure Section

- With this section, the member has access to cashless facility in more than 3300 empanelled hospitals across the country subject to terms and conditions of the policy.
- In case the member opts for hospitals other than the empanelled ones the expenses incurred would be reimbursed within 30 days from the date of submission of all documents.
- An amount equivalent to 2% of admissible hospitalization expenses towards pre and post hospitalization medical expenses.
- The policy covers ambulance charges in case of emergency subject to a maximum of Rs 1000 per policy period.
- 130 days care procedures covered subject to terms and conditions.
- Free Health Check UP at Designated Bajaj Allianz Empanelled Diagnostic centre after every 4 claim free policy periods with us (Physician Consultation, ECG, Complete Blood Count, Urine Routine)
- The medical expenses under Health Ensure are covered subject to the following limits

1	Hospitalisation Benefits	Limits
i)	Room, Boarding & Nursing Expenses as provided By the Hospital/ Nursing home including registration and service Charges.	Up to 1% of SI per day
ii)	If admitted into Intensive Care Unit	Up to 2 % of SI per day
	All admissible Claims under (i) & (ii) during the policy period	Up to 30% of SI per illness/injury
2	Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees	Up to 30% of SI per illness/injury
3	Emergency Ambulance charges up to Rs 1000/-, Anesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines & Drugs, Diagnostic Materials and X-ray, Dialysis, Chemotherapy, Radiotherapy, Cost of Pacemaker, Artificial Limbs and any medical expenses incurred which is integral part of the operation	Up to 40% of SI per illness/injury

Exclusions under Health Ensure Section

We will not pay for claims arising out of or howsoever connected to the following:

1. Benefits will not be available for Any condition, ailment or injury or related condition(s) for which you have been diagnosed, received medical treatment, had signs and/ or symptoms, prior to inception of your first policy, until 24 months of continuous coverage have elapsed, after the date of inception of the first policy, with us.
   The above exclusion B1 shall cease to apply if You have maintained a Health Ensure Policy with Us for a continuous period of a full 2 years with out break from the date of Your first Health Ensure Policy with Us.
   In case of enhancement of Sum Insured this Exclusion shall apply afresh only to the extent of the amount by which the limit of indemnity has been increased (i.e. enhanced sum insured) if the policy is a renewal of Health Policy without break in cover.
   We will also not pay for claims arising out of or howsoever connected to the following:
2. Without derogation from B1) above, any Medical Expenses incurred during the first year during which You have the benefit of a Health Ensure Policy with Us in connection with any types of gastric or duodenal ulcers, Surgery of varicose veins and varicose ulcers, hydrocele, undescended testes, congenital internal diseases and surgery for any skin ailment.
   This exclusion period shall apply for a continuous period of a full 2 years from the date of Your first Health EnSure Policy with Us if the above referred illness were present at the time of commencement of the policy and if You had declared such illness at the time of proposing the policy for the first time.
3. Without derogation from B1) above, any Medical Expenses incurred during the first two consecutive annual periods during which You have the benefit of a Health Ensure Policy with Us in connection with any types of cataracts, benign prostatic hypertrophy, hernia of all types, fistulae, haemorrhoids, fissure in ano, dysfunctional uterine bleeding, fibromyoma endometriosis, hysterectomy, stones in the urinary and biliary systems, surgery on ears /tonsils /adenoids /paranasal sinuses, Surgery on all internal or external tumours /cysts /nodules /polyps of any kind including breast lumps.
4. Any Medical Expenses incurred during the first four consecutive annual periods during which You have the benefit of a Health EnSure Policy with Us in connection with treatment of Gout and rheumatism, surgery for prolapsed inter vertebral disc and joint replacement surgery unless such surgery is necessitated by accidental Bodily Injury.
5. Any Medical Expenses incurred for Any illness diagnosed or diagnosable within 30 days of the commencement of the Policy Period except those incurred as a result of accidental Bodily Injury. This Exclusion shall apply only to the extent of the amount by which the limit of indemnity has been increased if the policy is a renewal of the Health EnSure Policy with Us without break in cover.
6. War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion, unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition of or damage by or under the order of any government or public local authority.
7. Circumcision unless necessitated for treatment of a disease not excluded hereunder, laser treatment for correction of eye sight due to refractive error, cosmetic or aesthetic treatments of any description, treatment or surgery for change of life/gender.
8. Any form of plastic surgery (unless necessary for the treatment of Illness or accidental Bodily Injury).
9. The cost of spectacles, contact lenses, hearing aids, crutches, dentures, artificial teeth and all other external appliances and/or devices whether for diagnosis or treatment.
10. External medical equipment of any kind used at home as post hospitalisation care including cost of instrument used in the treatment of Sleep Apnoea Syndrome (C.P.A.P), Continuous Peritoneal Ambulatory Dialysis (C.P.A.D) and Oxygen concentrator for Bronchial Asthmatic condition.
11. Dental treatment or surgery of any kind unless requiring hospitalisation and as a result of accidental Bodily Injury to natural teeth