

OPD+ Rider Wordings

b. PREAMBLE:

This Rider is a contract of insurance between the Policyholder and Us subject to the receipt of applicable premium in advance with respect to the Insured Person(s).

It is agreed and understood that this Rider can only be bought along with the Base Product and cannot be bought in isolation or as a separate product. This Rider is subject to the terms and conditions stated below and also the Policy terms, conditions, exclusions and applicable endorsements of the Base Product.

c. DEFINITIONS:

For the purposes of this Rider, the terms specified below shall have the meaning set forth wherever appearing/specified in this Rider.

Where the context so requires, references to the singular shall also include references to the plural and references to any gender shall include references to all genders. Further any references to statutory enactment include subsequent changes to the same.

i. Standard Definitions

All Standard definitions as mentioned in the Base Product will be applicable to this Rider

ii. Specific definitions (Definitions other than those mentioned under c (i) above)

"Accidental Emergency" means a traumatic bodily injury which, if not immediately diagnosed and treated, could reasonably be expected to seriously jeopardize a person's health or result in loss of life.

"Admission" means Your admission in a Hospital as an inpatient for the purpose of medical treatment of an Injury and/or Illness.

"AYUSH Practitioner" means a person who holds a valid registration from the Council for Indian medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice the alternate medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.

"Base Product" means any Individual health Insurance policy (includes Family floater) issued by ICICI Lombard General Insurance Company Limited including its terms and conditions, any annexure thereto and the Policy Schedule (as amended from time to time), the information statements in the proposal form and the Policy wording (including endorsements, if any) and to which this Rider is attached.

"Company" means ICICI Lombard General Insurance Company Limited.

"Contribution" is essentially the right of an insurer to call upon other insurers, liable to the same Insured, to share the cost of an indemnity claim on a rateable proportion of Sum Insured. This clause shall not apply to any Benefit offered on fixed benefit basis.

"Claim" means a demand made by Insured/Policyholders or on Insured/Policyholders behalf for payment of Medical Expenses or any other expenses or benefits, as covered under the Policy/Rider.

"Dependent Child" means a child (natural or legally adopted), who is unmarried, aged between 91 days and 30 years, financially dependent on the Insured and does not have his / her independent sources of income.

"Disease" means an alteration in the state of the body or of some of its organs, interrupting or disturbing the performance of the functions, and causing or threatening pain and weakness or physical or mental disorder and certified by a Medical Practitioner.

"Diagnostic Tests" Investigations, such as X-Ray or blood tests, to find the cause of your symptoms and medical condition.

"Family Floater" means a Policy/Rider in terms of which, two or more persons of a Family are named in the Schedule as Insured Persons.

"General Medical Practitioner" means a person who holds a valid registration from the Medical Council of any State or Medical Council of India and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.

"Health Service Provider/ Empaneled Service provider" means any person or entity providing healthcare and medical services in individual capacity, or through aggregation under "Health Service Provider Agreement", and shall include but not be limited to any clinic, diagnostic centre, pharmacy, associated facility for diagnosis, treatment or wellness services, and health care providers empanelled with Us to provide services specified under the Benefits to the Insured Person on cashless basis for OPD Treatment or otherwise. The list of the Health Service Providers is available on our mobile application and is subject to amendment from time to time.

ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115

Mailing Address:

601 / 602, 6th Floor, Interface Building No. 16,
New Link Road, Malad (West),
Mumbai - 400 064.

UIN: ICIIHIA26050V012526

CIN: L67200MH2000PLC129408

Registered Office Address:

ICICI Lombard House, 414, P Balu Marg,
Off Veer Savarkar Road, Nr Siddhi Vinayak
Temple, Prabhadevi, Mumbai - 400 025.

Product Name: OPD+

Toll free No. : 1800 2666

Alternate No.: 86552 22666 (Chargeable)

Website : www.icicilombard.com

E-mail : customersupport@icicilombard.com

Specified Network for Optional coverage under this Rider shall not be a part of this Empaneled Service Provider network.

“Immediate Family” means spouse, dependent children, brother(s), sister(s) and dependent parent(s) of the Insured.

“Insured” / “Insured Person” means the individual(s) whose name(s) is/are specifically appearing as such in the Schedule and is/are hereinafter referred as “You”/“Your”/ “Yours”/ “Yourself”

“Maximum Limit of Indemnity” means the sum total of Sum Insured, available for the tenure of this Rider.

“Policy” means these Policy wordings, the Policy Schedule and any applicable endorsements or extensions attaching to or forming part thereof. The Policy contains details of the extent of cover available to You, what is excluded from the cover and the terms & conditions on which the Policy is issued to You.

For the purpose of this Rider, terms **“Policy”** and **“Rider”** are used interchangeably.

“Rider Period” means the period mentioned in Schedule, which shall be in consonance of the Policy Period under Base Policy.

“Specialist Medical Practitioner” means a medical practitioner holding specialized qualification and having additional specialized expertise in any one or more types of allopathic medicine, including but not limited to Gynaecology, Orthopaedic, Paediatrics, Cardiologist, etc.

“Sum Insured” means and denotes the maximum amount of cover available to You during each Rider Period, as stated in the Schedule or any revisions thereof based on Claim settled under the Rider.

You/Your/ Yours/ Yourself means the person(s) that We insure and is/are specifically named as Insured / Insured Person(s) in the Schedule.

We/ Our/ Ours/ Us means the ICICI Lombard General Insurance Company Limitedd.

d. Benefits covered under the Rider

The coverage mentioned below differs between the various plan offerings and the wordings of only the relevant covers as mentioned in the plan opted by the Insured Person and as mentioned in the schedule will be applicable.

The payment under these covers shall be limited to the amount as specified against these cover in Your chosen plan.

All Covers under this OPD+ Rider can be availed only on cashless basis via our mobile application and are subject to the terms, conditions, waiting periods and exclusions of the Rider and the availability of the Sum Insured.

All services shall be provided only on cashless basis through our Empaneled Health Service Provider (through Specified Network only in case optional cover “Coverage in Specified Network only” is opted) subject to availability at the time of appointment.

The rider will always be attached to a Base Product. It cannot be opted standalone.

Any unutilized services or benefits cannot be carried forward to the next Rider Period.

Choosing the services under any of these covers is purely upon the Insured Person’s own discretion and at own risk. The various medical and value add services provided under the covers are via third party health Service Providers/ Network Providers/ and We are not responsible for liability arising out of the services provided by these third parties.

The Insured Person(s) should seek assistance from a medical practitioner should they still have any concerns about their health even post availing services from our health service providers/network providers.

Please Note: The rider term shall be equal to the base policy term. The Sum Insured applicable under this rider shall stay same across the term, and shall not be replenished on every policy anniversary. For example, if you have chosen a sum insured of Rs 50,000 and a Rider Period of 2 years, You can avail benefits anytime maximum up to Rs. 50,000 (sum insured) in total across the term of 2 years.

d.1 Base covers

Below are the base benefits offered under this Rider. These benefits are available to covered members in this Rider as per the plan chosen by You and specified in the Schedule.

1. Tele General Medical Practitioner Consultation:

We shall cover the Medical Expenses incurred during the Rider Period for virtual out-patient consultations from a General Medical Practitioner on cashless basis within Our Empaneled Service Provider only. Such virtual consultation can be through telephone as Tele consultation or via Video call.

The medical expenses shall be limited to the tele consultation fees only provided by the company on cashless basis under this Cover.

The maximum expenses to be covered under this benefit in a Rider Period shall be as specified in Your opted plan.

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2. Tele Specialist & AYUSH Consultation:

We shall cover the Medical Expenses incurred during the Rider Period for virtual out-patient consultations from a Specialist Medical Practitioner, AYUSH practitioner, on cashless basis within Our Empaneled Service Provider only. Such virtual consultation can be through telephone as Tele consultation or via Video call.

The medical expenses shall be limited to the tele consultation fees only provided by the company on cashless basis under this Cover.

The maximum expenses to be covered under this benefit in a Rider Period shall be as specified in Your opted plan.

3. Mental Health Counselling:

We shall cover the Medical Expenses incurred during the Rider Period for virtual out-patient consultations from a psychologist or mental health counsellor, on cashless basis, within Our Empaneled Service Provider only. Such virtual consultation can be through telephone as Tele consultation or via Videocall. Physical consultation shall not be available.

The medical expenses shall be limited to the tele consultation fees only provided by the company on cashless basis under this Cover.

The maximum expenses to be covered under this benefit in a Rider Period shall be as specified in Your opted plan.

4. Physical Consultation:

We shall cover the Medical Expenses incurred during the Rider Period for physical (in-clinic) out-patient consultations from a General Medical Practitioner or Specialist Medical Practitioner or an AYUSH Practitioner, on cashless basis within Our Empaneled Service Provider only.

The medical expenses shall be limited to the tele consultation fees only provided by the company on cashless basis under this Cover.

The maximum expenses to be covered under this benefit in a Rider Period shall be as specified in Your opted plan.

5. Diagnostic Procedures Cover:

If an Insured Person suffers an illness or Injury during Rider Period, for which diagnostic and investigation tests are required, then We shall cover the expenses for such tests on cashless basis.

We shall also cover expenses of any preventive diagnostic procedures under this cover.

These services shall be provided through our Empaneled Health Service Provider through its network diagnostic centers on cashless basis only.

6. Pharmacy Cover:

We shall cover medical expenses incurred on purchase of medicines, drugs, and medical consumables. This Pharmacy coverage will be under our cashless pharmacy network only. Such pharmacy expenses should be for any Illness or Injury suffered by the Insured Person during the Rider Period, maximum up to the limit as specified against this Cover in the Schedule.

Non-allopathic medicines, Health Supplements, Nutraceuticals, foods for special dietary use, foods for special medical purpose, foods with added probiotics and/or foods with added prebiotics, vaccinations, vitamins, tonics or other related products are excluded from the scope of this cover.

7. Vision Care Cover

We shall cover medical expenses incurred on medically necessary Ophthalmic consultation and procedures including routine eye check-up.

We shall also cover expenses of spectacles under this cover if medically prescribed by a Medical Practitioner. Such spectacles must be bought from the provider available in the network of our empanelled Service provider only. Cost of spectacles & Lens shall be covered maximum once Rider period in both individual and Floater policies.

Expenses for sunglasses, tinted/coloured lenses, any kind of contact lenses, lasik surgery expenses shall not be covered under this benefit.

Coverage under this section for the Rider Period shall be maximum up to the limit as specified against this Cover in the Schedule.

8. Dental Cover

We shall cover medical expenses incurred on dental consultation and non-aesthetic dental procedures maximum up to the limit as specified against this Cover in the Schedule.

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These procedures must be carried out by a Medical Practitioner in network of Our Empaneled Health Service Provider on cashless basis only.

Any dental procedure carried out for cosmetic reason, tooth jewellery, scaling procedure without periodontitis shall not be covered.

9. Physiotherapy Cover

We shall cover medical expenses incurred during the Rider Period by the Insured person for physiotherapy sessions with a qualified physiotherapist to treat Illness, injury or deformity suffered. Such physiotherapy should be as advised by qualified medical practitioners by physical methods such as but not limited to medically necessary heat treatment, ultrasound, Laser and exercises maximum up to the limit as specified against this benefit in the schedule.

These services shall be provided through our Empaneled Health Service Provider only, subject to availability at the time of appointment.

10. Minor Procedures Cover

We shall cover medical expenses incurred for listed minor procedures undergone at a general practitioner or specialist/super-specialist medical practitioner by the Insured Person during the Rider period maximum up to the limit as specified against this benefit in the Schedule.

These services shall be provided through our Empaneled Health Service Provider only, subject to availability at the time of appointment.

List of Minor Procedures covered under this benefit:

- Drainage of abscess
- Injection including Intramuscular (Per Injection cost)
- Intravenous injection(IV) Sprain Management (Joint movement/exercise)
- Otosopic examination (Magnifying otoscopy)
- Nasal packing for control of haemorrhage
- Nebulizer therapy
- Removal of foreign body
- Suturing (Staple under LA)
- Removal of suture
- Stabilization of joint
- Syringing ear to remove wax
- Application or removal of plaster cast
- Laryngoscopy
- Minor wound management

#This includes only the cost of medical procedures The actual cost of consumables upto sum insured shall be covered under the pharmacy cover or diagnostics cover. However, the said cost will have to be borne by the insured person in case the annual sum insured under the pharmacy cover has been exhausted or is out of scope of the Pharmacy cover or in case the consumable is a non-payable item as listed in Annexure I.

11. Dermatological Procedures Cover:

We shall cover medical expenses incurred for listed dermatological procedures undergone at a dermatologist by the Insured Person during the Rider period maximum up to the limit as specified against this benefit in the Schedule.

Such procedures must be medically required and must be prescribed by Medical Practitioner. Any such dermatological procedure done for cosmetic reasons shall be excluded.

These services shall be provided through our Empaneled Health Service Provider only, subject to availability at the time of appointment.

List of dermatological procedures covered under this benefit#:

- 1 Chemical Cautey
- 2 CO2 Wart/Skin Tag/ DPN removal
- 3 Cryocautery
- 4 Cryosurgery

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- 5 Dermfillers Injections
- 6 Electrocautery
- 7 Electrofulguration/ Electrocauterisation
- 8 Genital Wart removal
- 9 Glycolic Acid Treatment
- 10 Incision & Drainage
- 11 Ingrowing Nail removal
- 12 Intradermal Injection
- 13 Intralesional Injection
- 14 Keloidal Treatment by Injection
- 15 Mollusum Surgery
- 16 Nevus Excision
- 17 Plantar wart paring
- 18 Radiofrequency Treatment
- 19 Removal of Epidermal/Other cyst
- 20 Removal of warts
- 21 RF Cautery
- 22 Dermatology Suture removal

#This includes only the cost of medical procedures. The actual cost of consumables upto sum insured shall be covered under the pharmacy cover or diagnostics cover. However, the said cost will have to be borne by the insured person in case the annual sum insured under the pharmacy cover has been exhausted or is out of scope of the Pharmacy cover or in case the consumable is a non-payable item as listed in Annexure I.

12. Vaccination expenses:

We shall cover medical expenses incurred for vaccination of Insured person, maximum up to the limit as specified against this Cover in the Schedule. The vaccine must be medically required and prescribed by qualified Medical Practitioner in writing.

Such vaccination service must be availed through network of Our Empaneled Health Service Provider only.

13. Value Added Wellness Services

We at the request of the Insured Person shall arrange or shall facilitate the following additional services through Our empaneled health service provider only:

a. Access to fitness videos

We shall provide You access to fitness videos through our mobile app. Such video can be as available on app or may be provided as access to live streaming session. This access will be unlimited. Fitness videos may include dance, meditation, health video content, Yoga etc as per availability through our Empaneled Service Provider.

b. Medical Vault

We shall provide you a facility to save your medical records- diagnostic reports, prescriptions, routine and preventive health check-up reports in the medical vault on our mobile application. You can access these documents anytime on this application.

14. Extended Value Added Wellness Services

We at the request of the Insured Person shall arrange or shall facilitate the following additional services through Our empaneled health service provider only:

a. Sleep Tracker

Though our mobile application, We shall provide you a functionality to track your average sleep hours on periodic basis.

b. Sit Tracker

Though our mobile application, We shall provide you a functionality to track your average hours of sitting on periodic basis.

c. Access to wellness content

You can access content related to health & Wellness available on our mobile application.

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d.2 Optional cover

Below is the Optional benefits offered under this Rider. If opted and specified in Your Schedule, this will be applicable for all the members covered under this Rider.

1. Coverage in Specified network Only:

We shall cover the eligible expenses under this Rider within the Specified Network Only. For availing benefits like Diagnostic procedures, Pharmacy Cover etc, prescription from the Medical Practitioner of such Preferred Network is mandatory.

All benefits will be on cashless basis only within such Specified Network.

e. EXCLUSIONS:

e.i. Standard Exclusions:

1. 30-day waiting period- Code- Excl03

- a. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident, provided the same are covered.
- b. This exclusion shall not, however, apply if the Insured Person has Continuous Coverage for more than twelve months.
- c. The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently.

2. Rest Cure, rehabilitation and respite care- Code- Excl05

- a. Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:
 - i. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons.
 - ii. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.

3. Change-of-Gender treatments: Code- Excl07

Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.

4. Cosmetic or plastic Surgery: Code- Excl08

Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.

5. Hazardous or Adventure sports: Code- Excl09

Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.

6. Breach of law: Code- Excl10

Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.

7. Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. Code- Excl12

8. Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons. Code- Excl13

9. Unproven Treatments: Code- Excl 16

Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.

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e.ii. Specific Exclusions:

10. In-patient & day care treatment:

Expenses related to any hospitalization treatment or day care procedures shall not be covered.

11. War (whether declared or not) and war like occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrections, mutiny, military or usurped power, seizure, capture, arrest, restraints and detainment of all kinds.
12. Nuclear, chemical or biological attack or weapons, contributed to, caused by, resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense. For the purpose of this exclusion:
 - a. Nuclear attack or weapons means the use of any nuclear weapon or device or waste or combustion of nuclear fuel or the emission, discharge, dispersal, release or escape of fissile/ fusion material emitting a level of radioactivity capable of causing any illness, incapacitating disablement or death.
 - b. Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any illness, incapacitating disablement or death.
 - c. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) micro-organisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disablement or death.
13. Any expenses incurred on prosthesis, corrective devices, external durable medical equipment of any kind, like wheelchairs, crutches, instruments used in treatment of sleep apnoea syndrome or cost of cochlear implants. This exclusion does not apply to benefit "Vision care" to the extent of coverage defined in this benefit.
14. Treatment taken outside the geographical limits of India.
15. Personal comfort, cosmetics, convenience and hygiene related items and services
16. Acupressure, acupuncture, magnetic and other therapies
17. Circumcision unless necessary for treatment of an illness or necessitated due to an Accident.
18. Expenses for venereal disease or any sexually transmitted disease except HIV.
19. Screening, counselling or Treatment relating to external birth defects and external congenital illnesses or defects or anomalies
20. Intentional self-injury (whether arising from an attempt to commit suicide or otherwise)
21. Any ailment/ illness/ injury/ condition or treatment or service that is specifically excluded in the Policy Schedule under Special Conditions.

f. GENERAL TERMS AND CONDITIONS:

i. Standard General Terms and clauses

All Standard general terms and conditions as mentioned in the Base Product will be applicable to this Rider unless otherwise stated.

ii. Specific terms and clauses (terms and other clauses other than those mentioned under f.i above)

All Specific general terms and conditions as mentioned in the Base Product will be applicable to this Rider unless otherwise stated.

1. Redressal of Grievances:

In case of any grievance the insured person (including senior citizens) may contact the company through:

Website: www.icicilombard.com

Toll free: 1800 2666

Email: customersupport@icicilombard.com

ICICI Lombard General Insurance Co. Ltd. Ground floor- Interface 11, Sixth floor- Interface 16 Office no 601 & 602, New linking Road, Malad (West), Mumbai – 400064

There is an Interactive Voice Response (IVR) facility for senior citizens' grievance redressal for easy and faster resolution

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Insured person may also approach the grievance cell at any of the company's branches with the details of grievance. For branch details, please visit <https://www.icicilombard.com/docs/default-source/policy-wordings-product-brochure/final-gro-mapping.pdf>.

If Insured person is not satisfied with the redressal of grievance, insured person may contact the grievance officer at the details provided in the below link: <https://www.icicilombard.com/grievanceredressal.com>

If Insured person is not satisfied with the redressal of grievance, the insured person may also approach Insurance Regulatory and Development Authority of India (IRDAI) through the Bima Bharosa Portal - <https://bimabharosa.irdai.gov.in/> or IRDAI Grievance Call Centre (IGCC) at their toll free no. 1800 4254 732 / 155255

Insured may also approach Insurance Ombudsman, subject to vested jurisdiction, for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDA website: [website: www.irdai.gov.in](http://www.irdai.gov.in), or on the Company's website at www.icicilombard.com or on <https://www.cioins.co.in/Ombudsman>

2. Cancellation:

- a) This Rider is applicable along with Base Product only. If the Base Product or is cancelled, the Rider shall be automatically cancelled.
- b) The policyholder may cancel this Rider (with or without cancelling the Base Product) by giving 7 days' written notice and in such an event, the Company shall refund proportionate premium for unexpired Rider Period, if there is no claim (s) made in the Rider.

Note: Above mentioned refund clause shall not be applicable for policies with free look period; Premium refund for cancellations during the free look period will be provided as per the Free look clause.

Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any benefit has been availed by the insured person under the Rider.

- c) The Company may cancel the Rider at any time on grounds of misrepresentation non-disclosure of material facts, established fraud by the insured person by giving 7 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or established fraud.

g. Other Terms and Conditions

i. Claim Administration

The fulfilment of the terms and conditions of this Rider (including payment of premium by the due dates mentioned in the Schedule) in so far as they relate to anything to be done or complied with by each of You shall be conditions precedent to admission of Our liability.

Further, upon the discovery or happening of any Illness or Injury that may give rise to a Claim under this Rider, then as a condition precedent to the admission of Our liability, You shall undertake the following

ii. Claims Procedure

All claims will be adjudicated only on cashless basis and are subject to the terms, conditions, and exclusions of the Rider and the availability of limits applicable within the respective benefit.

Cashless Facility is only available at specific Network Providers/Health Service Provider. We reserve the right to modify, add or restrict any Network Provider/Health Service Provider for Cashless facility at Our sole discretion.

To avail the benefits and services under this cover, Insured Person shall need to raise a request through mobile application. In case the services availed exceed the eligibility of the Rider, the difference shall have to be paid directly to the Hospital/Network Provider/Health Service Provider by the Insured Person/claimant.

How to avail the cashless services on the mobile application:

1. The Insured Person will have to download the mobile application from the App Store/Play Store.
2. Post download the Insured Person will have to complete the registration process and login to the home page.
3. On the home page, the insured person will have to click on Health, and then select the required service to be availed, as per policy coverages
4. Cashless OPD will be processed as per policy terms and conditions.
5. Discounts on pharmacy, diagnostic tests will be available through empaneled network providers

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Alternate No.: 86552 22666 (Chargeable)
Website : www.icicilombard.com
E-mail : customersupport@icicilombard.com

Annexure I**List 1: Items for which coverage is not available in this Rider**

Sr. No.	Item
1	BABY FOOD
2	BABY UTILITIES CHARGES
3	BEAUTY SERVICES
4	BELTS/ BRACES
5	BUDS
6	COLD PACK/HOT PACK
7	CARRY BAGS
8	EMAIL / INTERNET CHARGES
9	FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL)
10	LEGGINGS
11	LAUNDRY CHARGES
12	MINERAL WATER
13	SANITARY PAD
14	TELEPHONE CHARGES
15	GUEST SERVICES
16	CREPE BANDAGE
17	DIAPER OF ANY TYPE
18	EYELET COLLAR
19	SLINGS
20	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES
21	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED
22	TELEVISION CHARGES
23	SURCHARGES
24	ATTENDANT CHARGES
25	EXTRA DIET OF PATIENT (OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)
26	BIRTH CERTIFICATE
27	CERTIFICATE CHARGES
28	COURIER CHARGES
29	CONVEYANCE CHARGES
30	MEDICAL CERTIFICATE
31	MEDICAL RECORDS
32	PHOTOCOPIES CHARGES
33	MORTUARY CHARGES
34	WALKING AIDS CHARGES

Sr. No.	Item
35	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)
36	SPACER
37	SPIROMETRE
38	NEBULIZER KIT
39	STEAM INHALER
40	ARMSLING
41	THERMOMETER
42	CERVICAL COLLAR
43	SPLINT
44	DIABETIC FOOT WEAR
45	KNEE BRACES (LONG/ SHORT/ HINGED)
46	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER
47	LUMBO SACRAL BELT
48	NIMBUS BED OR WATER OR AIR BED CHARGES
49	AMBULANCE COLLAR
50	AMBULANCE EQUIPMENT
51	ABDOMINAL BINDER
52	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES
53	SUGAR FREE Tablets
54	CREAMS POWDERS LOTIONS (Toiletries are not payable, only prescribed medical pharmaceuticals payable)
55	ECG ELECTRODES
56	GLOVES
57	NEBULISATION KIT
58	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]
59	KIDNEY TRAY
60	MASK
61	OUNCE GLASS
62	OXYGEN MASK
63	PELVIC TRACTION BELT
64	PAN CAN
65	TROLLY COVER
66	UROMETER, URINE JUG
67	AMBULANCE
68	VASOFIX SAFETY

ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115

Mailing Address:

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UIN: ICILHIA26050V012526

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