Give your family enhanced protection at nominal premiums.

Introducing

HDFC Life Protect Plus Rider

A Non-Linked Health Insurance Rider











- 1. Available on choosing Cancer Cover option.
- Cover for Accidental Death, Accidental Total Permanent Disability and Accidental Partial Permanent Disability available under Personal Accident Cover and cover for Accidental Death available under Accidental Death Cover.
- 3. Available for Accidental Death, Accidental Partial Permanent Disability under Personal Accident Cover and for Accidental Death under Accidental Death Cover.

Life Insurance products offering protection benefits help you to ensure that your financial needs and securing your family's future, in case of an untoward incident in your life are met with. Life Insurance riders are contingent benefits over a primary policy, which come into effect in case of a specific eventuality. Rider can be chosen based on individual and family needs since they enhance the life cover and secure the financial well-being of the family more comprehensively. Presenting HDFC Life Protect Plus rider that recognizes your efforts and enables you to enhance your life protection against unforeseen events in your life.

HDFC LIFE PROTECT PLUS RIDER BENEFITS AT A GLANCE

Benefit options:

Option A - Personal Accident Cover Option B - Accidental Death Cover Option C - Cancer Cover

Parameters	Limits
Entry Age (last birthday)	Minimum: 18 years Maximum: Option A & Option B - 74 years Option C - 65 years
Maximum Maturity Age (last birthday)	 Option A & Option B - 75 years Option C - 85 years
Minimum Rider Policy Term	 Option A & Option B - 1 month Option C - 60 months Rider options with minimum policy term of 1 month will be attached to individual pure risk premium products, group term, group credit life and micro-insurance products.
Maximum Rider Policy Term	Outstanding policy term (integer months) under the base policy. However, for Single Pay contracts, non-integer months can be selected if the policy term is less than 1 year. In Compliance with IRDAI (Health Insurance) Regulation, 2016, the rider will be offered to Individual Health Insurance products with a policy term of 5 years or more Group Health Policies with a term of one year except credit linked products where the term can be extended up to the loan period not exceeding five years
Minimum Rider Premium Payment Term	 Option A & Option B - 1 month Option C - Same as Rider Policy Term
Maximum Rider Premium Payment Term	 Option A & Option B - Outstanding premium payment term under the base policy Option C - Same as Rider Policy Term The premium payment term and the policy term of this rider will be consistent with the premium payment term and policy term of the base Unit Linked Insurance product to which this rider will be attached.

Parameters	Limits
Minimum Rider Sum Assured^	 Option A & Option B - ₹ 5,000 Option C - ₹ 50,000
Maximum Rider Sum Assured	No limit, subject to satisfactory underwriting as per the baseboard approved underwriting policy. In addition, the maximum rider sum assured as a proportion of base policy sum assured will be as per the prevailing regulations. As per current regulations, the maximum rider sum assured is equal to the base policy sum assured
Minimum Group Size (For Group Policies)	Minimum number of members per policy • For Employer Employee schemes - 10 • For Non Employer Employee schemes - 50

All ages are age last birthday

Note:

- 1. The Rider Sum Assured shall not exceed the Sum Assured of the Base Policy to which this rider is attached. This limit shall be governed by extant regulations at the time of opting for this rider.
- 2. The premium payable under this rider shall not exceed 100% of the base premium for option A & C and 30% of the base premium for option B. This limit shall be governed by extant regulations at the time of opting for this rider.
- 3. Rider will not be offered if the outstanding term under the base policy is less than minimum policy term (in months) as specified above.
- 4. Rider will not be offered if the term of the rider exceeds outstanding term under the base policy.
- 5. The rider is available for purchase online via company website along with the base plan.

The following discount will be applicable on the premium rates when the rider is purchased (Online via website):

Base Plan	Single Premium	Other than Single Premium
Linked	1.5%	2%
Non-Linked	1.5%	5%

WHAT ABOUT THE RIDER PREMIUM?

- The rider premium shall be collected in addition to the premium payable under the Base Policy.
- Premiums will vary depending upon the plan option chosen.
- Level premiums are payable for the rider.
- The minimum premium under this rider is as per the below table:

Option	Annual Rider Premium (in ₹)
А	₹6
В	₹2
С	₹24

[^]per member (applicable under Group Policies)

- Only an additional level rider premium will be charged for rider risk cover and no charge deduction will be made.
- The premium payment frequency for the rider shall be same as the frequency of the base plan.
- For non annual modes, premiums paid are calculated as the annual premium multiplied by a conversion factor.
- For Non linked base products: the conversion factor applicable for rider premium will be as per the base product.
- For Unit Linked base products: the conversion factors applicable for the rider shall be as given below.

Frequency	Conversion Factor
Half-yearly	0.51
Quarterly	0.26
Monthly	0.0875

FOR GROUP POLICY:

- New members entry & exit criteria applicable under the base group master policy will be applicable to this rider as
 well. For yearly renewable contract proportionate premium as applicable for the duration of the cover will be charged
 for rider as well as base policy
- In the event where the Master Policyholder has collected/deducted the rider premium but has failed to pay the rider
 premium to the insurer due to administrative delays within the grace period, the insurer will be responsible for any
 valid claims.

WHICH PRODUCTS CAN THIS RIDER BE OFFERED WITH?

HDFC Life Protect Plus Rider will be available with the following products:

- HDFC Life HDFC SL Crest (UIN: 101L064V03)
- HDFC Life ProGrowth Super II (UIN: 101L066V04)
- HDFC Life Young Star Super Premium (UIN: 101L068V03)
- HDFC Life ProGrowth Flexi (UIN: 101L072V05)
- HDFC Life ProGrowth Plus (UIN: 101L081V05)
- HDFC Life Click 2 Invest (UIN: 101L100V03)
- HDFC Life Assured Pension Plan (UIN: 101L109V05)
- HDFC Life Classic One (UIN: 101L132V02)
- HDFC Life Click 2 Wealth (UIN: 101L133V02)
- HDFC Life Group Term Insurance (UIN: 101N005V06)
- HDFC Life Classic Assure Plus (UIN: 101N089V05)
- HDFC Life Personal Pension Plus (UIN: 101N091V03)
- HDFC Life Guaranteed Pension Plan (UIN: 101N092V04)
- HDFC Life Group Credit Protect Plus Insurance Plan (UIN: 101N096V03)
- HDFC Life Sanchay (UIN: 101N097V09)
- HDFC Life Super Income Plan (UIN: 101N098V05)
- HDFC Life Click 2 Protect 3D Plus (UIN: 101N115V05)
- HDFC Life Sanchay Plus (UIN: 101N134V04)
- HDFC Life Sanchay Par Advantage (UIN: 101N136V01)
- HDFC Life Click 2 Protect Plus (UIN: 101N101V03)

WHAT IS THE BENEFIT?

There are three benefit options available under the rider:

- Option A: Personal Accident Cover
- Option B: Accidental Death Cover
- Option C: Cancer Cover

Subject to the conditions stated below, this rider can be opted for by any or all of the lives covered under the base policy.

Conditions:

- i. A Life Assured/ Scheme Member can choose any or all of the above plan options. However, option A and option B cannot be selected together.
- ii. A Life Assured/ Scheme Member can opt for this rider at inception of the policy or at any base policy premium due date.
- iii. Rider coverage terminates as soon as the base policy terminates.

Option A: Personal Accident Cover

In case the Life Assured / Member has opted for this Benefit Option, the Benefit shall be paid out on the following events:

- i. Accidental Death,
- ii. Accidental Total Permanent Disability(ATPD) and/or
- iii. Accidental Partial Permanent Disability(APPD)
- i. Accidental Death

In an unforeseen event of death of the Life Assured /Scheme Member due to accident during the rider term, 100% of the rider sum assured will be paid to the nominee.

Accidental death means death by or due to a bodily injury caused by an accident, independent of all other causes of death.

An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

Accidental Death must be caused within 180 days of any bodily injury. If the bodily injury occurred within the coverage period and the Accidental Death happens after the end of coverage period but within 180 days of bodily injury, a valid claim arising as a result of such Accidental Death shall not be denied.

Once the benefit amount is claimed, the coverage under Option A shall terminate.

In lieu of lump sum benefit amount for Accidental Death, the nominee may choose to receive the benefit as:

- Regular monthly Income payable for 10 years, or
- Part of benefit amount as lump sum immediately on Accidental Death and the balance benefit amount as regular monthly income for 10 years.

The choice of benefit pay-out as lump sum or income or combination thereof can be exercised on the date the claim is made.

The interest rate used to compute the installment amount shall be equal to the annualized yield on 10 year G-Sec (over last 6 months & rounded down to nearest 25bps) less 100 basis points.

The interest rate shall be reviewed half-yearly and any change in the interest rate shall be effective from 25th February and 25th August each year. The interest rate shall be revised every time there is a change as per the above formula. In case of a revision in interest rate, the same shall apply until next revision. The source of 10-year benchmark G-sec yield shall be RBI Negotiated Dealing System-Order Matching segment (NDS-OM).

At any time during the installment phase, the nominee can choose to terminate the installment payment in exchange for a lump-sum, in which case, the lump-sum payable shall be equal to the discounted value of all the future installments due. The interest rate used to calculate the discounted value shall be equal to the annualized yield on 10 year G-Sec (over last 6 months & rounded down to nearest 25bps) + 100 basis points on the date of termination.

ii. Accidental Total Permanent Disability (ATPD)

In the event of Total Permanent Disability of the Life Assured /Scheme Member, due to an accident during the coverage term, a regular monthly income equal to 1% of the Rider Sum Assured shall be payable for a fixed period of 10 years.

What is Total Permanent Disability?

• Total Permanent Disability means when the Life Assured / Scheme Member is totally, continuously and permanently disabled as a result of accident i.e. Accidental Total Permanent Disability (ATPD) and meets either of the two or both the conditions mentioned below:

• 1: Unable to work:

Disability as a result of Injury or Accident and is thereby rendered totally incapable of being engaged in any work or any occupation or employment for any compensation, remuneration or profit and he/she is unlikely to ever be able to do so.

• 2: Physical Impairments:

The Life Assured / Member suffers an injury/Accident due to which there is total and irrecoverable loss of:

- a. The use of two limbs; or
- b. The sight of both eyes; or
- c. The use of one limb and the sight of one eye; or
- d. Loss by severance of two or more limbs at or above wrists or ankles; or
- e. Sight of one eye and loss by severance of one limb at or above wrist or ankle.
- The disabilities as stated above in (1) and (2) must have lasted, without interruption, for at least 6 consecutive months and must, in the opinion of a Medical practitioner, be deemed permanent.
- The benefit shall commence upon the completion of this uninterrupted period of 6 months. However, for the disabilities mentioned in (d) and (e) under (2), such 6 months period would not be applicable and the benefit shall commence immediately.
- Injury means accidental physical bodily harm excluding illness and disease. It must be solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.
- Once the maximum benefit is claimed, the coverage under Option A shall terminate.

iii. Accidental Partial Permanent Disability (APPD)

On Life Assured / Scheme Member sustaining any bodily injury during the coverage period resulting solely and directly from an Accident:

a) 50% of the Rider Sum Assured shall be payable, if such injury shall, within 12 months of its occurrence be the sole and direct cause of the total and irrecoverable loss by physical separation of one entire hand or of one entire foot.

b) If such injury shall, within 12 months of its occurrence be the sole and direct cause of the total and / or partial and irrecoverable loss of use or of the actual loss by physical separation of the following, then the percentage of the Rider Sum Assured as indicated below shall be payable

Sr. No.	Disability	Benefit %
(i)	Permanent total loss of hearing in both ears	75
(ii)	Permanent total loss of use of one limb other than by physical separation or Permanent total loss of sight of one eye	50
(iii)	Permanent total loss of use of four fingers and thumb of either hand	40
(iv)	Permanent total loss of hearing in one ear or Permanent total loss of the lens in one eye	25
(v)	Permanent total loss of use of four fingers of either hand or Permanent total loss of use of one thumb of either hand or Ankyloses of the elbow, hip or knee	20
(vi)	Permanent total loss of use of all toes	15
(vii)	Permanent total loss of one finger of either hand or Established non-union of fractured leg or kneecap	10

Other Conditions:

- Benefit payable towards any claim shall not exceed the Unclaimed Benefit Rider Sum Assured.
- Once the maximum benefit is claimed, the coverage under Option A shall terminate.
- The disabilities as stated above must have lasted, without interruption, for at least 6 consecutive months and must, in the opinion of a Medical practitioner, be deemed permanent. However, for the disability mentioned in (a) above, such 6 months period would not be applicable.
- In lieu of lump sum benefit amount for APPD, the Life Assured / Scheme Member may receive benefit as:
 - Regular monthly Income payable for 10 years, or
 - Part of benefit amount as lump sum immediately on Accidental Death and the balance benefit amount as regular monthly income for 10 years.
- The choice of benefit pay-out as lump sum or income or combination thereof can be exercised on the date the claim is made.
- The interest rate used to compute the installment amount shall be equal to the annualized yield on 10 year G-Sec (over last 6 months & rounded down to nearest 25bps) less 100 basis points.
- At any time during the installment phase, the nominee can choose to terminate the installment payment in exchange
 for a lump sum, in which case, the lump-sum payable shall be equal to the discounted value of all the future
 installments due. The interest rate used to calculate the discounted value shall be equal to the annualized yield on 10
 year G-Sec (over last 6 months & rounded down to nearest 25bps) + 100 basis points on the date of termination.
- The interest rate shall be reviewed half-yearly and any change in the interest rate shall be effective from 25th February and 25th August each year. The interest rate shall be revised every time there is a change as per the above formula. In case of a revision in interest rate, the same shall apply until next revision. The source of 10-year benchmark G-sec yield shall be RBI Negotiated Dealing System-Order Matching segment (NDS-OM).

- Additional conditions applicable for Option A:
 - If ATPD occurs after APPD, then 1% of the remaining amount (100% of PAC Rider Sum Assured less APPD claims paid) shall be paid as a regular monthly income for 10 years.
 - If Accidental Death happens after APPD, then the remaining amount (100% of PAC Rider Sum Assured less APPD claims paid) shall be paid as lump sum or income or a combination thereof as mentioned in the benefits section above.
 - No additional benefit shall be payable for Accidental Death and APPD following ATPD claim
 - In case of death following ATPD claim, the remaining instalment payments shall be paid to the nominee. On death of the life assured/ scheme member, or at any subsequent time during the installment phase, the nominee can choose to terminate the installment payment in exchange for a lumpsum, in which case, the lumpsum payable shall be equal to the discounted value of all the future installments due.

• Option B: Accidental Death Cover

In an unforeseen event of death of the Life Assured / Scheme Member due to accident during the rider term, 100% of the rider sum assured will be paid to the nominee.

Accidental death means death by or due to a bodily injury caused by an accident, independent of all other causes of death.

An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

Accidental Death must be caused within 180 days of any bodily injury.

If the bodily injury occurred within the coverage period and the Accidental Death happens after the end of coverage period but within 180 days of bodily injury, a valid claim arising as a result of such Accidental Death shall not be denied.

Once the benefit amount is claimed, the coverage under Option B shall terminate.

In lieu of lump sum benefit amount for Accidental Death, the nominee may choose to receive the benefit as:

- Regular monthly Income payable for 10 years, or
- Part of benefit amount as lump sum immediately on Accidental Death and the balance benefit amount as regular monthly income for 10 years.

The choice of benefit pay-out as lump sum or income or combination thereof can be exercised on the date the claim is made.

The interest rate used to compute the instalment amount shall be equal to the annualized yield on 10 year G-Sec (over last 6 months & rounded down to nearest 25bps) less 100 basis points.

At any time during the instalment phase, the nominee can choose to terminate the instalment payment in exchange for a lump-sum, in which case, the lump-sum payable shall be equal to the discounted value of all the future instalments due. The interest rate used to calculate the discounted value shall be equal to the annualized yield on 10 year G-Sec (over last 6 months & rounded down to nearest 25bps) + 100 basis points on the date of termination.

The interest rate shall be reviewed half-yearly and any change in the interest rate shall be effective from 25th February and 25th August each year. The interest rate shall be revised every time there is a change as per the above formula. In case of a revision in interest rate, the same shall apply until next revision. The source of 10-year benchmark G-sec yield shall be RBI Negotiated Dealing System-Order Matching segment (NDS-OM).

Option C: Cancer Cover

Benefits on diagnosis of Cancer -

i. Cancer Diagnosis Benefit:

A lump sum benefit, as per the table below, will be paid on diagnosis of:

- Carcinoma-in-situ or Malignant cancer
- Early stage cancers,
- Major cancer

Diagnosis of	Benefit Amount as a % of Applicable Rider Sum Assured
Early Stage Cancer or Carcinoma-in-situ (CIS)	25
Major Cancer	100 less Early Stage Cancer or CIS claims, if any

ii. Waiver of Premium:

On a valid claim of Early Stage Cancer or Carcinoma-in-situ (CIS) diagnosis, premiums payable under this rider option will be waived for a period of three policy years. In case the outstanding term is less than three years then premiums for the outstanding term would be waived.

In case the outstanding term is more than three years then the premiums will be waived only for a period of three years. The life assured/ scheme member will need to resume payment of premiums thereafter.

Please refer the Annexure 1 for definitions applicable under this rider option.

Applicable under Group Policies:

- The process of payment of benefits of the rider shall follow the process as applicable under the base master policy.
- In case of lender borrower schemes under Regulated Entities as defined below in terms & conditions (Clause iv), the Outstanding Loan amount, if any for which the cover was taken shall be payable to You, the Master Policyholder with prior authorisation from the Member at inception, out of the total Death Benefit otherwise payable to the Nominee. Any residual benefit shall be paid to the Nominee or Beneficiary, as applicable
- In case of lender borrower schemes under Other Entities as defined below in terms & conditions, the Death Benefit shall be payable to the Nominee, in the event of the Member's demise
- The Membership will terminate on payment of the Death Benefit to the Nominee / Beneficiary

Is there any Maturity benefit?

There is no maturity benefit available under this rider.

What is the grace period?

The grace period depends on the premium payment frequency and will be as applicable under the Base Policy to which this rider is attached. The rider is considered to be in-force with the risk cover during the grace period without any interruption.

What is the Paid Up Benefit available?

Single Pay and Limited Pay: Upon premium discontinuance, if the policy has acquired surrender value, Paid-up Rider Sum Assured will be calculated as follows:

Regular Pay: No Paid-Up benefit is payable.

Can I Surrender the Benefit?

Surrender value shall be payable subject to following conditions:

• Surrender Value is acquired as follows:

Single Pay	Immediately upon payment of premium
Limited Pay	Upon payment of rider premiums for 2 years.
Regular Pay	No surrender value is payable.

• Surrender Value =

1. Total Rider Premiums Paid means total of all the rider premiums received, excluding any extra premium and taxes.

What are the revival conditions?

Revival period shall be the same as that of base plan. The revival shall be subject to the BAUP and payment of unpaid premiums with interest and a revival fee of ₹ 250. The current interest rate for revival is 9.5%.

Additional conditions on Revival for Option C

Reinstatement request will attract the following:

A waiting period of 180 days will apply from date of commencement.

On revival:

- If the policy is revived within 60 days, only the remaining part of waiting period will apply.
- If the policy is revived after 60 days, full 180 day waiting period will apply afresh.

What are the renewal conditions?

Since it's a rider benefit, as long as the premium due is paid along with the base premium, the rider benefit is renewed.

Rider premium rates for Option C - Cancer Cover, will be reviewed at the end of every three years and the rates revision where required, subject to prior approval from IRDAI. The policyholder will be notified of the change in premium rates three months before the change is effected and will be given a period of 30 days from the date of premium due (on or after the effective date of change) to renew the policy.

ANNEXURE 1 - DEFINITIONS AND EXCLUSIONS

Option A - Personal Accident Cover and Option B - Accidental Death Cover

Permanent Exclusions:

Accidental death benefit will not be paid if death is caused from or due to any of the following:

- Intentionally self-inflicted injury or suicide while sane or insane
- Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.
- Engaging in or taking part in professional sport(s) or any hazardous pursuits, power boat racing, sky diving, para
 gliding, parachuting, scuba diving, skydo riding, winter sports, sky jumping, ice hockey, ice speedway, ballooning,
 hand gliding, river rafting / bugging, black water rafting, yachting / boating outside coastal waters, motor rallying,
 power lifting, quad biking, rodeo and roller hockey.
- War, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil
 commotion.
- Taking part in any flying activity, other than as a passenger in a commercially licensed aircraft.
- Participation by the life assured in a criminal or unlawful act.

Option C - Cancer Cover

Carcinoma-in-situ

Carcinoma-in-situ shall mean a histologically proven, localized pre-invasion lesion where cancer cells have not yet penetrated the basement membrane or invaded (in the sense of infiltrating and / or actively destroying) the surrounding tissues or stroma in any one of the following covered organ groups, and subject to any classification stated:

- (a) Breast, where the tumour is classified as Tis according to the TNM Staging method;
- (b) Corpus uteri, vagina, vulva or fallopian tubes where the tumour is classified as Tis according to the TNM Staging method or FIGO* Stage 0;
- (c) Cervix uteri, classified as cervical intraepithelial neoplasia grade III (CIN III) or as Tis according to the TNM Staging method or FIGO* Stage 0;
- (d) Ovary -include borderline ovarian tumours with intact capsule, no tumour on the ovarian surface, classified as T1aNOMO, T1bNOMO (TMN Staging) or FIGO 1A, FIGO 1B
- (e) Colon and rectum;
- (f) Penis;
- (q) Testis;
- (h) Lung;
- (i) Liver;
- (j) Stomach and esophagus;
- (k) Urinary tract, for the purpose of in-situ cancers of the bladder, stage Ta of papillary carcinoma is included
- (I) Nasopharynx

For purposes of this Policy, Carcinoma-in-situ must be confirmed by a biopsy.

* FIGO refers to the staging method of the Federation Internationale de Gynecologie et d'Obstetrique

Pre-malignant lesions and Carcinoma-in-situ of any organ unless listed above are excluded.

Early Stage Cancer

Early Stage Cancer shall mean the presence of one of the following malignant conditions:

- (a) Tumour of the thyroid histologically classified as T1NOMO according to the TNM classification;
- (b) Prostate tumour should be histologically described as TNM Classification T1a or T1b or T1c are of another equivalent or lesser classification.
- (c) Chronic lymphocytic leukaemia classified as RAI Stage I or II;
- (d) Basal cell and squamous skin cancer that has spread to distant organs beyond the skin,
- (e) Hodgkin's lymphoma Stage I by the Cotswolds classification staging system.

The Diagnosis must be based on histopathological features and confirmed by a Pathologist. Pre-malignant lesions and conditions, unless listed above, are excluded.

Major Cancer

A malignant tumour characterised by the uncontrolled growth & spread of malignant cells with invasion & destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy & confirmed by a pathologist. The term cancer includes leukemia, lymphoma and sarcoma.

The following are excluded:

- (a) Tumours showing the malignant changes of carcinoma in situ & tumours which are histologically described as premalignant or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 & CIN-3.
- (b) Any skin cancer other than invasive malignant melanoma
- (c) All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2NOMO.
- (d) Papillary micro carcinoma of the thyroid less than 1 cm in diameter
- (e) Chronic lymphocyctic leukaemia less than RAI stage 3
- $(f) \ All \ tumours \ of \ the \ urinary \ bladder \ histologically \ classified \ as \ T1NOMO \ (TNM \ Classification) \ or \ below$

Pre-existing Disease

Pre-existing condition is a cancer condition (primary or metastatic); or precancerous condition:

- (a) For which the insured was diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement or
- (b) For which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement

Time bound exclusions

- (a) The benefits under this plan will be paid only if the life assured survives for a period of 7 days from the date of diagnosis of the condition.
- (b) A waiting period of 180 days will apply from date of commencement.
- (c) On revival:
 - If the policy is revived within 60 days, only the remaining part of waiting period will apply.
 - If the policy is revived after 60 days, full 180 day waiting period will apply afresh.

- (d) The policy shall terminate and no benefit shall be payable under the policy if the:
 - diagnosis or
 - medical evidences confirming the diagnosis of Cancer/Carcinoma-in-situ/Early Stage Cancer

first occurred during the waiting period.

(e) In the event of a claim, provisions of Section 45 of the Insurance Act 1938, as amended from time to time, will apply.

Permanent Exclusions:

No benefit shall be payable under the policy in respect of any Major Cancer, Carcinoma-in-situ or Early Stage Cancer resulting from or caused by or contributed by:

- Sexually Transmitted Diseases other than HIV/AIDS.
- External congenital conditions
- Any pre-existing disease (as defined above)
- Intoxication by alcohol or narcotics or voluntarily taking or using any drug, medication or sedative unless it is an "over the counter" drug, medication or sedative taken according to package directions;
- Nuclear, biological or chemical contamination (NBC)

Please refer to the definition of Major Cancer above for exclusions under it.

Congenital Anomaly

Congenital Anomaly means a condition which is present since birth, and which is abnormal with reference to form, structure or position.

a) Internal Congenital Anomaly

Congenital anomaly which is not in the visible and accessible parts of the body.

b) External Congenital Anomaly

Congenital anomaly which is in the visible and accessible parts of the body.

TERMS & CONDITIONS

(i) Free-look Period:

Individual

The Policyholder shall have the option of cancelling the Rider, stating the reasons thereof, by returning the Rider Policy Document to the Company, within 15 days from the date of receipt of the Rider Policy Document in case Policyholder is not agreeable to any Rider terms and conditions. The free-look period for Policies purchased through Distance Marketing mode shall be 30 days.

- The Rider can be cancelled in the free-look period even if the Main Policy to which it is attached is continued.
- The Rider shall be automatically cancelled, if the Main Policy to which it is attached is cancelled.
- If Rider is cancelled along with the Main Policy, on receipt of letter along with original Policy Document provided the Life Assured has not made any claim during the free look period, the Company shall arrange to
 - a) Refund the Rider Premiums paid by Policyholder, subject to deduction of the expenses incurred for medical examination (if any) and stamp duty, (if any) or;

- b) Where the risk has already commenced and the option of return of the policy is exercised by the policyholder, a deduction towards the proportionate risk premium for period on cover or;
- c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

This would be in addition to the refund under the Main Policy as per applicable terms and conditions.

- If Rider is cancelled independently of the Main Policy, provided the Life Assured has not made any claim during the free look period, the Company shall arrange to
 - a) Refund the Rider Premium, subject to deduction of the expenses incurred for medical examination (if any) and stamp duty, (if any) or;
 - b) Where the risk has already commenced and the option of return of the policy is exercised by the policyholder, a deduction towards the proportionate risk premium for period on cover or;
 - c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.
- A rider once cancelled shall not be revived, reinstated or restored; at any point of time and a new proposal will have to be made for a new rider.

Group

• Cancellation in the free look period by Master Policyholder:

The Master Policyholder shall have the option of cancelling the Rider Policy stating the reasons thereof, within 15 days (in case of sale through distance marketing mode this period shall be 30 days) from date of receipt of the Rider Policy Document. On receipt of the Free-look intimation, provided no claim made during the free look period we shall

- a) Refund the Rider Premium, subject to deduction of the expenses incurred for medical examination (if any) and stamp duty, if any or;
- b) Where the risk has already commenced and the option of return of the policy is exercised by the master policyholder, a deduction towards the proportionate risk premium for period on cover or;
- c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

There can be two scenarios in such Free-Look cancellation as mentioned below:

- i. Rider Policy cancelled with the Master Policy
 - If the Rider Policy is cancelled with the Master Policy, the Company shall arrange to
 - a) Refund the total (Master Policy Document of Main Policy & Rider) Premium paid, subject to deduction of the expenses incurred for medical examination (if any) and stamp duty, (if any) or;
 - b) Where the risk has already commenced and the option of return of the policy is exercised by the master policyholder, a deduction towards the proportionate risk premium for period on cover or;
 - c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

The Rider Policy will be cancelled automatically if the Master Policy to which it is attached is cancelled in the free-look period.

ii. Rider Policy cancelled without the Master Policy

If the Rider Policy is cancelled independently of the Master Policy then the Company shall arrange to

- a) Refund the Rider Premium, subject to deduction of the expenses incurred for medical examination (if any) and stamp duty (if any) or;
- b) Where the risk has already commenced and the option of return of the policy is exercised by the master policyholder, a deduction towards the proportionate risk premium for period on cover or;
- c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.
- Cancellation in the free look period by Scheme Member:

The Scheme Member shall have the option of cancelling the Rider Policy Coverage stating the reasons thereof, within 15 days (in case of sale through distance marketing mode this period shall be 30 days) from date of receipt of the Certificate of Insurance. On receipt of the Free-look intimation, provided the Scheme Member has not made any claim during the free look period we shall

- a) Refund the Rider Premium, subject to deduction of the expenses incurred for medical examination (if any) and stamp duty, if any or:
- b) Where the risk has already commenced and the option of return of the policy is exercised by the scheme member, a deduction towards the proportionate risk premium for period on cover or;
- c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

There can be two scenarios in such Free-Look cancellation as mentioned below:

- i. Rider Policy cancelled with the base group policy
 - If the Rider is cancelled with the base group policy, the Company shall arrange to
 - a) Refund the total (Certificate of Insurance) Premium paid, subject to deduction of the expenses incurred for medical examination (if any) and stamp duty, (if any) or;
 - b) Where the risk has already commenced and the option of return of the policy is exercised by the scheme member, a deduction towards the proportionate risk premium for period on cover or;
 - c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.
 - The Rider Policy will be cancelled automatically if the Master Policy to which it is attached is cancelled in the free-look period.
- ii. Rider Policy without the base group policy
 - If the Rider is cancelled independently of the base group policy then the Company shall arrange to
 - a) Refund the Rider Premium subject to deduction of the expenses incurred for medical examination (if any) and stamp duty (if any) or;
 - b) Where the risk has already commenced and the option of return of the policy is exercised by the scheme member, a deduction towards the proportionate risk premium for period on cover or;
 - c) Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

For administrative purposes, all such Free-Look requests should be registered by Master Policyholder on behalf of the Scheme Member

• A rider once cancelled shall not be revived, reinstated or restored at any point of time and a new proposal will have to be made for a new rider.

- (ii) **Nomination:** Nomination for this Rider Policy shall be as per the Nomination Schedule under the Main Policy as per section 39 of the Insurance Act, 1938 as amended from time to time.
- (iii) Alterations: Rider term and rider sum assured cannot be altered. The premium payment frequency of the rider can be changed if the premium payment frequency on the base product is changed. The premium payment frequency of the rider cannot be changed independently from the Base Policy.

Addition/Removal of Benefit Option

- i. If not opted at inception of the base policy, the life assured / scheme member may opt for the rider at any base policy premium due date.
- ii. At any base policy premium due date, the life assured / scheme member can remove their existing rider option and/ or add the other option. For example, if the life assured / member has opted for Option A at inception, he/she may remove Option A and choose Option B at any base policy premium due date.
- iii. In case the life assured/ scheme member wants to opt for an additional option, he may do so at any premium due date and the additional premium for the new option shall be calculated based on the outstanding term on the date of adding the new rider.

Switching of Options:

In case the life assured/ scheme member wants to switch from one rider option to another, he may do so at any premium due date and the premium shall be calculated as below:

- i. Regular Pay policies The life assured/ member shall pay revised premium corresponding to the option now chosen for the outstanding premium payment term. The cover under the old rider option expires on the day he switches to the new option.
- ii. Limited Pay/Single Pay policies For Limited Pay/Single Pay policies, the revised premium shall be calculated based on the outstanding term on the date of adding the new rider. In addition, in respect of the premiums already paid, there will be a refund of premiums equal to the Total premiums paid until the date of switch less the premiums payable under Regular Pay for the covered duration.
- iii. In case the life assured/ member switches to Option C, a waiting period of 180 days from the date of switching will apply.
 - a. Regulated Entities shall mean to include the following: Reserve Bank of India ("RBI") regulated Scheduled Commercial Banks (including co-operative Banks),
 - b. NBFCs having Certificate of Registration from RBI or
 - c. National Housing Bank ("NHB") regulated Housing Finance Companies
 - d. National Minority Development Finance Corporation (NMDFC) and its State Channelizing Agencies
 - e. Small Finance Banks regulated by RBI
 - f. Mutually Aided Cooperative Societies formed and registered under the applicable State Act concerning such Societies
 - g. Microfinance Companies registered under Section 8 of the Companies Act, 2013
 - h. Any other category as approved by the Authority
- (iv) Other Entities shall mean to include the entities other than Regulated Entities

- (v) Assignment and Transfer: This Rider Policy cannot be assigned independently. However the Rider Policy can be assigned along with the Base Policy as per Section 38 of the Insurance Act, 1938 as amended from time to time.
- (vi) Prohibition of Rebates: In accordance with Section 41 of the Insurance Act, 1938 as amended from time to time: No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

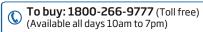
(vii) Non-Disclosure: In accordance with Section 45 of the Insurance Act, 1938 as amended from time to time:

- 1. No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later.
- 2. A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or asignees of the insured the grounds and materials on which such decision is based.
- 3. Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer: Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.
- 4. A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued:Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based:Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation.
- 5. Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.

(viii) Taxes:

Taxes and levies as applicable will be charged. Any taxes, statutory levy becoming applicable in future may become payable by you by any method including by levy of an additional monetary amount in addition to premium and/or charges.







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HDFC Life Insurance Company Limited (Formerly HDFC Standard Life Insurance Company Limited) ("HDFC Life").

CIN: L65110MH2000PLC128245. IRDAI Registration No. 101.

Registered Office: 13th Floor, Lodha Excelus, Apollo Mills Compound, N. M. Joshi Marg, Mahalaxmi, Mumbai - 400 011.

Email: service@hdfclife.com, Tel. No: 1860 267 9999 (Mon-Sat 10 am to 7 pm) Local charges apply. Do NOT prefix any country code. e.g. +91 or 00. Website: www.hdfclife.com

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