

SECURE SHIELD

PROSPECTUS

I. INTRODUCTION

Secure Shield policy can protect the policy holder from economic concerns arising from the events such as loss of job, hospital daily cost and critical illness that may occur during the coverage period. It is essential that people understand the features, advantages and the necessity of insurance policies in detail.

Acko General Insurance provides the following benefits to its customers:

- Wide range of Sum Insured Limit
- Easy & Transparent buying Process
- Guidance from Trained Professionals: Get unbiased insurance related advice from Acko's trained professionals.
- Quick Claim Settlement: When a claim is filed, Acko tries to settle it in a quick and hassle-free manner.

II. BENEFITS:

1. Hospital Daily Allowance:

If an Insured Person requires Hospitalization due to an Injury or Illness suffered or contracted during the Coverage Period, then We will pay the daily allowance amount specified against this Benefit in the Certificate of Insurance, for each continuous and completed period of 24 hours of Hospitalisation

Specific Exclusions:

1. 30-day waiting period-Code-Excl03

- 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.
- ii. This exclusion shall not, however, apply if the Insured Person has Continuous Coverage for more than twelve months.
- iii. The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently.
- 2. Day care treatments are excluded from the scope of this Benefit.

3. Specified Disease/Procedure Waiting Period-Code-Excl02

- i. Expenses related to the treatment of the listed Conditions, surgeries/treatments shall be excluded until the expiry of number of months, as specified in the Schedule, of continuous coverage after the date of inception of the first policy with Us. This exclusion shall not be applicable for claims arising due to an accident.
- ii. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- iii. If any of the specified disease/procedure falls under the waiting period specified for pre-Existing diseases, then the longer of the two waiting periods shall apply.
- iv. The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.
- v. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.



vi. List of specific diseases/procedures:

- a. Varicose veins and Varicose Ulcers
- b. Rheumatism and arthritis of any kind
- c. Treatment of diseases on ears/ tonsils /adenoids /paranasal sinuses/ Deviated Nasal Septum
- d. Stones in the Urinary and Biliary systems
- e. Gastric or Duodenal Ulcer
- f. Any type of benign Cyst/ Nodules/ Polyps/Tumours/ Breast Lumps
- g. Intervertebral Disc Prolapse, and Degenerative Disc/vertebral Disorders
- h. Cataract
- i. Benign Prostatic Hypertrophy
- j. Myomectomy, Hysterectomy unless because of malignancy
- k. Dilatation and curettage (D&C)
- I. Anal Fistula, Fissure and Piles
- m. All types of Hernia
- n. Hydrocele
- o. Chronic Renal Failure
- p. Joint replacement Surgery unless because of accident

2. Loss of Job

If an Insured Person suffers an Involuntary Unemployment during the Coverage Period resulting in loss of Income, then We will pay the monthly amount specified in the Certificate of Insurance against this Benefit, or the number of EMI Amount(s) as specified in the Certificate of Insurance falling due in respect of the Loan Account Number specified against this benefit in the Certificate of Insurance, as applicable, for each continuous and completed month specified in the Certificate of Insurance from the date of such Involuntary Unemployment.

Specific Exclusions:

- Any Involuntary Unemployment of the Insured Person that is attributed to any dishonesty, misconduct or fraud, or any wilful violation by the Insured Person of any internal rules/regulations/policies, or any laws or any directives issued by a public authority and in force, or any disciplinary action initiated against the Insured Person by his/her employer.
- 2. Unemployment from any occupation or job which is a Temporary or Seasonal Job, or where the Insured Person is not on the direct payroll of the employer.
- 3. Any voluntary unemployment, self-resignation, or voluntary retirement.
- 4. Any Involuntary Unemployment or suspension of the Insured Person at his/her primary occupation, which is temporary in nature.
- 5. Any unemployment from any occupation or job in which no salary was ever provided to the Insured Person.
- 6. Any unemployment occurring while the Insured Person, who is a Salaried Individual, is still under his/her probation, including any unemployment resulting from non-confirmation of his/her employment by the employer during or after the period on probation.
- 7. Any suspension of the Insured Person from his/her primary occupation on account of any pending enquiry being conducted by the employer or a public authority.
- 8. Any unemployment if it arises as a result of the place of employment or part thereof being temporary closed down for a period not exceeding the minimum number of days specified in Certificate of Insurance/Schedule due to lay off, lockout, strike or any other reason.
- 9. Any unemployment due to non-extension of a maternity/paternity leave, either as per the Maternity Benefit Act 1961, as amended from time to time, or as per the employer's internal regulation/policy in force at the time of any event or occurrence that may give rise to a claim.
- 10. Any unemployment due to any strike or labour disturbance in which the Insured Person is



directly or indirectly involved.

- 11. Any reasonable belief that the Insured Person was aware that such loss of Income was likely to happen, whether or not any official communication was provided, at the time of Risk Commencement Date.
- 12. Withdrawal of offer of employment by an employer.
- 13. Medical exclusions
 - a. Any unemployment if it arises as a result of intentional self-inflicted injuries.
 - b. Any unemployment if it arises as a result of termination of service on the grounds of a Pre-Existing Diseases.
 - c. Any unemployment if it arises as a result of intake of alcohol or drugs by the Insured Person.
 - d. Any unemployment if it arises as a result of insured person being on family leave or sick leave due to childbirth or pregnancy.
 - 3. Critical Illness Benefit

If an Insured Person is First Diagnosed to be suffering from a Critical Illness of the nature specified in Annexure A of the Policy, during the Coverage Period, then We will pay the Sum Insured under this Benefit as specified in the Certificate of Insurance.

Details of Covers under Critical Illness Benefit along with the grouping

S.NO.	CRITICAL ILLNESS	GROUP				
		15 Cl's	18 Cl's	25 Cl's	36 Cl's	
1	Cancer of Specified Severity	√	√	√	V	
2	Kidney Failure Requiring Regular Dialysis	\checkmark	\checkmark	\checkmark	$\sqrt{}$	
3	Multiple Sclerosis with Persisting Symptoms	\checkmark	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	
4	Major Organ / Bone Marrow Transplant	\checkmark	$\sqrt{}$	\checkmark	\checkmark	
5	Open Heart Replacement or Repair of Heart Valves	\checkmark	\checkmark	\checkmark	\checkmark	
6	Open Chest CABG	\checkmark	\checkmark	\checkmark	\checkmark	
7	Permanent Paralysis of Limbs	\checkmark	\checkmark	$\sqrt{}$	$\sqrt{}$	
8	Myocardial Infarction (First Heart Attack – of Specific Severity)	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	
9	Stroke Resulting in Permanent Symptoms	\checkmark	\checkmark	$\sqrt{}$	$\sqrt{}$	
10	Benign Brain Tumor	\checkmark	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	
11	Parkinson's Disease	\checkmark	\checkmark	$\sqrt{}$	$\sqrt{}$	
12	Coma of Specified Severity	\checkmark	\checkmark	\checkmark	\checkmark	
13	End Stage Liver Failure	$\sqrt{}$	\checkmark	\checkmark	\checkmark	
14	Alzheimer's Disease	\checkmark	\checkmark	$\sqrt{}$	$\sqrt{}$	
15	Aorta Graft Surgery	\checkmark	\checkmark	\checkmark	\checkmark	
16	Major Burns	×	\checkmark	\checkmark	\checkmark	
17	Loss of Hearing (Deafness)	×	\checkmark	\checkmark	\checkmark	
18	Loss of Speech	×	\checkmark	\checkmark	\checkmark	
19	Loss of Vision (Blindness)	×	×	\checkmark	\checkmark	
20	Motor Neurone Disease with Permanent Symptoms	×	×	\checkmark	\checkmark	
21	Loss of Limbs	×	×	\checkmark	$\sqrt{}$	
22	Aplastic Anaemia	×	×	$\sqrt{}$	$\sqrt{}$	
23	End Stage Lung Failure	×	×	\checkmark	\checkmark	
24	Primary (Idiopathic) Pulmonary Hypertension	×	×	$\sqrt{}$	$\sqrt{}$	
25	Bacterial Meningitis	×	×	$\sqrt{}$	$\sqrt{}$	
26	Apallic Syndrome or Persistent Vegetative State (PVS)	×	×	×	$\sqrt{}$	



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27	Coronary Angioplasty (PTCA)[1]	×	×	×	$\sqrt{}$
28	Encephalitis	×	×	×	$\sqrt{}$
29	Fulminant Hepatitis	×	×	×	$\sqrt{}$
30	Chronic Relapsing Pancreatitis	×	×	×	\checkmark
31	Major Head Trauma	×	×	×	\checkmark
32	Medullary Cystic Disease	×	×	×	\checkmark
33	Muscular Dystrophy	×	×	×	\checkmark
34	Poliomyelitis	×	×	×	\checkmark
35	Systemic Lupus Erythematous	×	×	×	\checkmark
36	Brain Surgery	×	×	×	\checkmark

Note:

The Benefits specified above shall be subject to the terms and conditions of this Policy, and you are advised to read the policy for a full description of the terms, conditions and provisos applicable to each of the Benefits specified above.

III. EXCLUSIONS:

We shall not be liable to make any payment for any claim under the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

- a. 30-day waiting period-Code-Excl03
- iv. 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.
- vii. This exclusion shall not, however, apply if the Insured Person has Continuous Coverage for more than twelve months.
- viii. The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently.
- b. Pre-Existing Diseases-Code-Excl01
- v. Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of number of months, as specified in the Schedule, of continuous coverage after the date of inception of the first policy with insurer.
- ix. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- x. If the Insured Person is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations, then waiting period for the same would be reduced to the extent of prior coverage.
- xi. Coverage under the policy after the expiry of number of months, as specified in the Schedule, for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer.
- c. Suicide or attempted suicide, intentional self-inflicted Injury or acts of self-destruction.
- d. Any change of profession after inception of the Policy which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Certificate of Insurance.
- e. Any External Congenital Anomaly or defects.
- f. Any certification provided by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's family.
- g. Treatment of any sexually transmitted diseases or infections (other than HIV and AIDS), including the screening and prevention of such diseases or infections.
- h. Hospitalization, if applicable, for the following treatments:
 - i. **Refractive Error: Code-Excl15** Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres.



- ii. **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.
- iii. 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.
- iv. **Obesity/Weight Control: Code- Excl06:** Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions:
 - 1) Surgery to be conducted is upon the advice of the Doctor
 - 2) The surgery/Procedure conducted should be supported by clinical protocols
 - 3) The member has to be 18 years of age or older and
 - 4) Body Mass Index (BMI);
 - a) greater than or equal to 40 or
 - b) greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
 - i. Obesity-related cardiomyopathy
 - ii. Coronary heart disease
 - iii. Severe Sleep Apnoea
 - iv. Uncontrolled Type2 Diabetes
- v. **Circumcision:** Circumcisions (unless necessitated by Illness or Injury and forming part of treatment); aesthetic or change-of-life treatments of any description such as sex transformation operations.
- vi. **Sleep Disorders:** Treatment for any conditions related to disturbance of normal sleep patterns or behaviours such as Sleep-apnoea, snoring, etc.
 - Vaccination or inoculation unless forming a part of post-animal bite treatment;
- vii. Naturopathy Treatments.
- viii. Sterility and Infertility: Code Excl17: Expenses related to sterility and infertility. This includes:
 - a. Any type of contraception, sterilization
 - b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
 - c. Gestational Surrogacy
 - d. Reversal of sterilization
 - ix. Any dental treatment or Surgery of a corrective, cosmetic or aesthetic nature unless carried out under general anaesthesia and is necessitated by Illness or Injury during the Coverage Period.
- Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. Code-Excl12
- j. **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.
- k. **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.
- I. 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.
- m. Any claim arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.
- n. 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 disability or death.
- o. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing



any Illness, incapacitating disability or death.

<u>Note</u>: The policy exclusions are subject to the policy terms and conditions, and you are advised to read the policy for a full description of the terms and conditions thereto.

IV.CLAIMS PROCEDURE:

- On the occurrence of or discovery of any Injury which may give rise to a claim under this Policy, We shall be provided with the following necessary information and documentation in respect of the claim within 30 days of the occurrence of the Insured Person's Injury:
- For details on the claims procedures and requirements or any assistance during the process, We may be contacted at Our call centre on the toll free number: 1800 266 2256 or through Our website: www.acko.com/gi or mail us at hello@acko.com

V. CONTACT US

- 1. You can reach Us through any of the following methods:
- Call Us on Our toll free number: 1800 266 2256
- Write to us On at: hello@acko.com/gi
 Visit Our website: www.acko.com/gi
- 2. For Grievance:

For resolution of any query, insured may contact the company on our helpline number **1800 266 2256** or may write an e-mail at hello@acko.com.

For resolution of grievance, insured may contact the company on our toll-free helpline number **1800 210 4990** (Operating hours: 10 AM – 7 PM, all days of the week).

Senior Citizens Support: Phone: 080-62370023 Email: grievance.healthseniorcitizen@acko.com

you can also write to grievance@acko.com. Your complaint will be acknowledged by us within 24 working hours.

If in case you are dissatisfied with the decision/resolution provided through details indicated above on your Complaint or have not received any response within 14 working days, you may write or email to Chief Grievance Officer:

Email: gro@acko.com

Postal Address: Acko General Insurance Limited 36/5 Hustlehub One East, Somasandrapalya, 27th Main Road Sector 2, HSR Layout, Karnataka Bangalore – 560102

The Chief Grievance Officer will provide a final response within 7 days of receipt of the escalation. If you wish to pursue other avenues for redressal of grievances or if You are not satisfied with the redressal of grievance, You may also approach Insurance Regulatory and Development Authority of India (IRDAI) through the Bima Bharosa Portal - https://bimabharosa.irdai.gov.in/ or their toll free no. 1800 4254 732 / 155255 or through email on complaints@irdai.gov.in/.

Please refer to the details of Ombudsman offices. Insurance Ombudsman for Redressal, whose

details are given below: General Manager Consumer Affairs Department- Grievance Redressal Cell

Website: https://cioins.co.in/Ombudsman

VI.SECTION 41 OF INSURANCE ACT, 1938 (PROHIBITION OF REBATES, AS AMENDED)

- 1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out 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 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 prospectus or tables of the insurers.
- 2. Any person making default in complying with the provisions of this section shall be liable for penalty which may extend to 10 lakh rupees.

VII. DISCLAIMER:

This is only a summary of the product features. The actual benefits available are as described in the policy and will be subject to the policy terms, conditions and exclusions. Please seek the advice of your insurance advisor if you require any further information or clarifications.

Note: Policy Term and Conditions & Premium rates are subject to change with prior approval from IRDAL.