

Insurance Program – RuPay Cards

Frequently Asked Questions

Personal Accident

Q1. What is an accident?

Ans. Accident or Accidental means a sudden, unforeseen and involuntary event caused by external and visible means.

Q2. What are the benefits payables under this policy?

Ans. Now you can protect yourself with Personal Accident Insurance against accidental injuries. The policy provides the benefits to you, for Accidental Death and Permanent Disability.

Q3. Does the personal accident policy cover natural Death or death due to some illness/disease?

Ans. No, Personal accident policy covers Death occurring due to accidents or accidental injuries.

Q4. What is the available sum insured under the plan?

Ans. Sum Insured of Rs 1 lakh for RuPay Classic card holders

Q5. What is the eligibility criterion to avail Personal Accident Insurance cover on my RuPay Debit Card?

Ans. The claim under Accidental Death and / or Permanent Disablement shall be payable only if the RuPay Card holder has carried out at least one successful financial or non-financial purchase (Point of Sale) at a merchant establishment or at ATM or MicroATM or ecommerce transaction, upto 45 days prior to the date of incident resulting into Accidental death / Permanent Disability. Eligible transaction conducted in both On-us & Off-us environment will be eligible for the benefit of the Insurance Program.

Q6. Is there any age limit for availing Personal Accident Policy?

Ans. Personal Accident Insurance is open to everyone from the age of 18 years to 65 years. Age near birth shall be considered. It may be noted that age below 18 and beyond 65 year will not be eligible.

Q7. Does the policy have a worldwide coverage?

Ans. Yes, the accident policy will cover you even if you are out of the country. Claim will be paid in Indian rupees as per the sum insured on submission of required documentation. There is no negative list of countries.

Q8. Who can be beneficiary?

Ans. The beneficiary could be any member of your family or legal heir or nominee or as per competent court order.

Q9. Who is the beneficiary in case of multiple heirs / beneficiaries?

Ans. In case of multiple beneficiaries the claim is settled in the name of heir against which we have received legal heir certificate.

In case the legal heir absolutes his right of claim (i.e. legal heir doesn't want to claim) we will need the NOC from him/her and the claim can be settled in the name of other beneficiary.

Q10. How do I make a claim?

Ans. Please fill the entire documents as per the checklist and submit the same the same to the Bank where you have an account.

Q11. Whom should I contact in case of a claim?

Ans. Please contact your bank of which you have a card for intimating claim.

Q12. What are the claim documents to be submitted in case of claim whether incident has happened in India or overseas?

Ans. Accidental Death Claim Forms:-

- 1) Duly filled and signed claim form
- 2) FIR copy
- 3) Post mortem report
- 4) "Cause of Death" certificate from Treating doctor
- 5) Death Certificate
- 6) Viscera report (If done)
- 7) Passport, Pan card, Aadhaar card, address proof (KYC documents)

8) Copy of the RuPay card / Declaration from Bank on letter head with sign and stamp

9) Switch Log / Core Banking System screenshot from Bank for Transaction verification

10) Declaration from Bank for nominee including NEFT details with sign and stamp (in case nominee is available) / legal heir certificate or any other document in discussion with claimant as a proof (in case nominee not available with bank)

Q13. In how many days the claims will be settled?

Ans. The claims will be settled in 10 working days from the date of receiving the complete documents set by HDFC Ergo and assessment of entitlement.

Q14. In how many days should I intimate about claim?

Ans. The claims can be intimated within 30 days of the date of accident.

Q15. In how many days should I submit the claim?

Ans. The claim documents needs to be submitted within 60 days of the date of accident.

Q16. In case RuPay Cardholder having a Personal Accident policy with another insurance Company, will this Insurance Policy will be an additional cover?

Ans. Yes it will be an additional cover over the existing insurance.

Q17. What do you mean by exclusions?

Ans. Exclusions are situations or conditions where in HDFC Ergo is not liable to pay the benefits to insured person in the event of accident.

Q18. What are the exclusions applicable?

Ans. The exclusions under the policy are as follows:

- for Bodily Injury or Sickness occasioned by Civil War or Foreign War.
- for Bodily Injury or Sickness caused or provoked intentionally by the Insured Person.
- for Bodily Injury or Sickness due to wilful or deliberate exposure to danger, (except in an attempt to save human life), intentional self-inflicted injury, suicide or attempt thereof, or arising out of non-adherence to Medical Advice.
- for Bodily Injury or Sickness sustained or suffered whilst the Insured Person is or as a result of the Insured Person being under the influence of alcohol or drugs or narcotics unless professionally administered by a Physician or unless professionally prescribed by and taken in accordance with the directions of a Physician.

- for Bodily Injury due to a gradually operating cause.
- for Bodily Injury sustained whilst or as a result of participating in any sport as a professional player.
- for Bodily Injury sustained whilst or as a result of participating in any competition involving the utilisation of a motorised land, water or air vehicle.
- for Bodily Injury whilst the Insured Person is travelling by air other than as a fare paying passenger on an aircraft registered to an airline company for the transport of paying passengers on regular and published scheduled routes.
- for Bodily Injury sustained whilst or as a result of participating in any criminal act.
- for Bodily Injury or Sickness resulting from pregnancy within twenty-six (26) weeks of the expected date of birth.
- for Bodily Injury or Sickness caused by or arising from the conditions commonly known as Acquired Immunodeficiency Syndrome (AIDS) or Human Immunodeficiency Virus (HIV) and/or any related illness or condition including derivatives or variations thereof howsoever acquired or caused. The onus shall always be upon the Insured Person to show that Bodily Injury or Sickness was not caused by or did not arise through AIDS or HIV.
- for Bodily Injury or Sickness caused by or arising from or due to venereal or venereal related disease.
- for Bodily Injury sustained whilst or as a result of active participation in any violent labour disturbance, riot or civil commotion or public disorder.
- for Bodily Injury sustained whilst on service or on duty with or undergoing training with any military or police force, or militia or paramilitary organisation, notwithstanding that the Bodily Injury occurred whilst the Insured Person was on leave or not in uniform.
- for treatments for nervous or mental problems, whatever their classification, psychiatric or psychotic conditions, depression of any kind, or mental insanity.
- any pathological fracture.
- for cures of any kind and all stays in long term care institutions (retirement homes, convalescence centres, centres of detoxification etc.).
- for investigations, operations or treatment of a purely cosmetic nature; or for obesity; or undertaken to facilitate pregnancy or to cure impotence or to improve potency.
- for Bodily Injury sustained whilst or as a result of active participation in any hazardous sport such as parachuting, hangliding, parasailing, off-piste skiing or bungee jumping.
- for Bodily Injury caused by or arising from or as a result of Terrorism.

Q19. If the incident occurs in a timeline of 0-45 days of issuance of the RuPay card, thereby not giving a window of the 45 days qualifying criteria for doing a transaction in order to be eligible for the insurance benefit, is the Cover still valid?

Ans. Yes as an exception in such cases the cover is still valid.

Q20. Since the cover is effective 01 April 2014 and upto 31 March 2015, if incident happens on 15 April 2014 and the transaction has happened prior to the policy period is the cover valid?

Ans. Yes as long as the incident has happened in the policy period the cover is valid.

Note: For additional Information please refer policy wordings document available at [<Link of Bank website>](#).

Permanent Total Disability

Q1. What is permanent disability?

Ans. Permanent Total Disablement means disablement, as the result of a Bodily Injury, which:

continues for a period of twelve (12) consecutive months, and is confirmed as total, continuous and permanent by a Physician after the twelve (12) consecutive months, and entirely prevents an Insured Person from engaging in or giving attention to gainful occupation of any and every kind for the remainder of his/her life.

Q2. What is the benefits payable under this policy?

Ans. This policy pays for any permanent disability due to an accident.

Q3. What is covered under Permanent Total Disability whether incident has happened in India or overseas?

The Disablement	Compensation Expressed as a Percentage of Total Sum Insured
1) Permanent Total Disablement	100%
2) Permanent and incurable insanity	100%
3) Permanent Total Loss of two Limbs	100%
4) Permanent Total Loss of Sight in both eyes	100%
5) Permanent Total Loss of Sight of one eye and one Limb	100%
6) Permanent Total Loss of Speech	100%
7) Complete removal of the lower jaw	100%
8) Permanent Total Loss of Mastication	100%
9) Permanent Total Loss of the central nervous system or the thorax and all abdominal organs resulting in the complete inability to engage in any job and the inability to carry out Daily Activities essential to life without full time assistance	100%
10) Permanent Total Loss of Hearing in both ears	75%
11) Permanent Total Loss of one Limb	50%
12) Permanent Total Loss of Sight of one eye	50%
13) Permanent Total Loss of Hearing in one ear	15%

14) Permanent Total Loss of the lens in one eye	25%
15) Permanent Total Loss of use of four fingers and thumb of either hand	40%
16) Permanent Total Loss of use of four fingers of either hand	20%
17) Permanent Total Loss of use of one thumb of either hand: a) Both Joints b) One joint	20% 10%
18) Permanent Total Loss of one finger of either hand: a) Three joints b) Two joints c) One joint	5% 3.5% 2%
19) Permanent Total Loss of use of toes: a) All-one foot b) Big-both Joints c) Big-one joint d) Other than Big- each toe	15% 5% 2% 2%
20) Established non-union of fractured leg or kneecap	10%
21) Shortening of leg by at least 5cms	7.50%
22) Ankylosis of the elbow, hip or knee	20%

Q4. What is the available sum insured under this insurance cover?

Ans. Sum Insured of Rs 1 lakh for RuPay Classic card holders

Q5. What is the eligibility criterion to avail Permanent Total Disability Insurance cover on my RuPay Debit Card?

Ans. The claim under Accidental Death and / or Permanent Disablement shall be payable only if the RuPay Card holder has carried out at least one successful financial or non-financial purchase (Point of Sale) at a merchant establishment or at ATM or MicroATM or ecommerce transaction, upto 45 days prior to the date of incident resulting into Accidental death / Permanent Disability. Eligible transaction conducted in both On-us & Off-us environment will be eligible for the benefit of the insurance Insurance Program.

Q6. Is there any age limit for opting Permanent Disability Policy?

Ans. Permanent total disability Insurance is open to everyone from the age of 18 years to 65 years. Age near birth shall be considered. It may be noted that age below 18 and beyond 65 year will not be eligible.

Q7. Does the policy have a worldwide coverage?

Ans. Yes, the permanent disability policy will cover you even if you are out of the country. Claim will be paid in Indian rupees as per the sum insured on submission of required documentation. There is no negative list of countries.

Q8. Who can be beneficiary?

Ans. Beneficiary will be the insured under this policy.

Q9. What are the claim documents to be submitted in case of claim?

Ans. Permanent Disability Claim Forms:-

- 1) Duly filled and signed claim form
- 2) FIR copy
- 3) Disability certificate from treating doctor / Government hospital
- 4) Hospital Indoor case paper.
- 5) Full size photo of insured with disable / Amputated limb
- 6) Passport, Pan Card, Aadhaar card, address proof (KYC documents)
- 8) Copy of the RuPay card / Declaration from Bank on letter head with sign and stamp
- 9) Switch Log / Core Banking System screenshot from Bank for Transaction Verification

Q10. In how many days the claim will be settled?

Ans. The claims will be settled within 10 working days of complete documentation received by HDFC Ergo and establishment of entitlement.

Q11. Whom should I contact in case of a claim?

Ans. Please contact your bank of which you have a card for intimating claim.

Q12. How do I make a claim?

Ans. Please fill the entire documents as per the checklist and submit the same the same to the Bank where you have an account.

Q13. In how many days should I intimate about claim?

Ans. Please intimate about the claim within 30 days of the date of accident.

Q14. In how many days should I submit the claim?

Ans. The claim documents needs to be submitted within 60 days from the date of accident.

Q15. Can I claim additional cover on my existing permanent disability cover from other Insurer (s) company?

Ans. Yes it will be an additional cover over the existing insurance.

Q16. Accidental Injury can I avail the cashless facility?

Ans. No, cashless facility is not available for Personal accident policy.

Q17. What do you mean by exclusions?

Ans. Exclusions are situations or conditions where in HDFC Ergo is not liable to pay the benefits to insured person in the event of accident.

Q18. What are the exclusions applicable?

Ans. The exclusions under the policy are as follows:

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- for Bodily Injury or Sickness sustained or suffered whilst the Insured Person is or as a result of the Insured Person being under the influence of alcohol or drugs or narcotics unless professionally administered by a Physician or unless professionally prescribed by and taken in accordance with the directions of a Physician.
- for Bodily Injury due to a gradually operating cause.
- for Bodily Injury sustained whilst or as a result of participating in any sport as a professional player.
- for Bodily Injury sustained whilst or as a result of participating in any competition involving the utilisation of a motorised land, water or air vehicle.

- for Bodily Injury whilst the Insured Person is travelling by air other than as a fare paying passenger on an aircraft registered to an airline company for the transport of paying passengers on regular and published scheduled routes.
- for Bodily Injury sustained whilst or as a result of participating in any criminal act.
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- for Bodily Injury or Sickness caused by or arising from or due to venereal or venereal related disease.
- for Bodily Injury sustained whilst or as a result of active participation in any violent labour disturbance, riot or civil commotion or public disorder.
- for Bodily Injury sustained whilst on service or on duty with or undergoing training with any military or police force, or militia or paramilitary organisation, notwithstanding that the Bodily Injury occurred whilst the Insured Person was on leave or not in uniform.
- for treatments for nervous or mental problems, whatever their classification, psychiatric or psychotic conditions, depression of any kind, or mental insanity.
- any pathological fracture.
- for cures of any kind and all stays in long term care institutions (retirement homes, convalescence centres, centres of detoxification etc.).
- for investigations, operations or treatment of a purely cosmetic nature; or for obesity; or undertaken to facilitate pregnancy or to cure impotence or to improve potency.
- for Bodily Injury sustained whilst or as a result of active participation in any hazardous sport such as parachuting, hangliding, parasailing, off-piste skiing or bungee jumping.
- for Bodily Injury caused by or arising from or as a result of Terrorism.

Q19. Is there is provision for interim relief on Insurance?

Ans. There is no provision interim relief until establishment of entitlement upon which the claim is payable as qualified.

Q20. If the incident occurs in a timeline of 0-45 days of issuance of the RuPay card, thereby not giving a window of the 45days qualifying criteria for doing a transaction in order to be eligible for the insurance benefit, is the Cover still valid?

Ans. Yes as an exception in such cases the cover is still valid.

Q21. Since the cover is effective 01 April 2014 and upto 31 March 2015, if incident happens on 15 April 2014 and the transaction has happened prior to the policy period is the cover valid?

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