

***Tentative Non –Binding Quote***

<b>Quotation No.</b>	1.6_Yes Bank Limited (Premia)_T091323104714_180723_Mandatory
<b>Quote Issued Date:</b>	18 <sup>th</sup> July 2023
<b>Quote Expiry Date :</b>	20 <sup>th</sup> September 2023
<b>Name of the Policyholder:</b>	<b>Yes Bank Limited</b>
<b>Who will be covered :</b>	This policy is applicable to all premia bank account holders of Yes Bank Limited.
<b>Type of Customers:</b>	Customers within India only and for Indian residents only.
<b>Expected lives :</b>	10,000 per month
<b>Age group :</b>	<ul style="list-style-type: none"> <li>- For Proposer/Adult entry age – 18 years to 60 years</li> <li>- For Child entry age – 91 days to 25 years</li> </ul>
<b>Policy Tenure :</b>	Annual Policy
<b>Product :</b>	<ul style="list-style-type: none"> <li>- Product 1: Group Mediciam policy</li> <li>- Product 2: Group Mediciam Super Top Up Insurance</li> </ul>
<b>Pre-condition :</b>	All pre-existing disease are mandatory to be declared and every case shall be referred to Underwriting team for medical evaluation.
<b>Review :</b>	The company will review the portfolio at every quarter of the financial year to analyze the performance and in case of adverse claims the terms and premium would be revised appropriately with the effect from the upcoming quarter.
<b>Family Definition :</b>	<p>It is agreed that only following members and Relationships are covered under the policy:</p> <ol style="list-style-type: none"> <li>1. Self - Premia Bank account holders of Yes Bank Limited.</li> <li>2. Self + 1 Children</li> <li>3. Self + 2 Children</li> <li>4. Self + Legally wedded Spouse</li> <li>5. Self + Spouse + 1 Children</li> <li>6. Self + Spouse + 2 Children</li> </ol> <p>In case of multiple policies only single policy purchased 1<sup>st</sup> will be applicable and all other policies will be cancelled on short scale period as and when identified.</p>
<b>Family Size :</b>	<p>Family Definition –</p> <ul style="list-style-type: none"> <li>• Self - The sum insured as mentioned against each customer is on Individual basis and is available for the member covered under the policy, the company's total liability under this policy shall not exceed the sum insured in aggregate for all claims.</li> <li>• 1A + 1C (Self + 1 Children). The sum insured as mentioned against each customer is on floater basis and is available for all dependents under the policy, the company's total liability under this policy shall not exceed the sum insured in aggregate for all claims.</li> <li>• 1A + 2C (Self + 2 Children). The sum insured as mentioned against each customer is on floater basis and is available for all dependents under the policy, the company's total liability under this policy shall not exceed the sum insured in aggregate for all claims.</li> <li>• 1A +1A (Self+ Spouse). The sum insured as mentioned against each customer is on floater basis and is available for all dependents under the policy, the company's total liability under this policy shall not exceed the sum insured in aggregate for all claims.</li> </ul>

	<ul style="list-style-type: none"> <li>• 1A+1A+1C (self + Spouse + 1 children). The sum insured as mentioned against each customer is on floater basis and is available for all dependents under the policy, the company's total liability under this policy shall not exceed the sum insured in aggregate for all claims.</li> <li>• 1A+1A+2C (self + Spouse +2 children). The sum insured as mentioned against each customer is on floater basis and is available for all dependents under the policy, the company's total liability under this policy shall not exceed the sum insured in aggregate for all claims.</li> </ul> <p>*Self – Premia Bank account holders of Yes Bank Limited.</p>
<b>Product 1: Group Mediclaim policy</b>	
<b>Sum Insured:</b>	5 lakh
<b>Pre-Hospitalization expenses:</b>	30 days before hospitalization.
<b>Post-Hospitalization expenses</b>	60 days after hospitalization.
<b>In-Patient Procedures Limit:</b>	<p>If during the Policy Period any of the Insured Person undergoes Hospitalization for Inpatient Treatment on the written advice of a Medical Practitioner, then the Company will indemnify the Policyholder/Insured Person for the below incurred Medical Expenses:</p> <ul style="list-style-type: none"> <li>• Room Rent (Please refer room rent clause)</li> <li>• Nursing</li> <li>• Medical Practitioner(s),</li> <li>• Anesthesia, blood, oxygen, operation theatre charges, surgical appliances,</li> <li>• Medicines, drugs and Consumables</li> <li>• Diagnostic procedures</li> <li>• The cost of prosthetic and other devices or equipment if implanted internally during a Surgical Procedure</li> </ul>
<b>Day care Procedures :</b>	<p>Standard Day-care procedures requiring less than 24hrs of hospitalization - procedures covered as per RGICL list.</p> <p>Any day care procedure covered with / without pre-auth in network or non-network hospital.</p> <p>Any new medical procedures or drugs that replace less than 24-hour hospitalization to be included as Day Care Procedure</p>
<b>Room Rent :</b>	<p>Room rent eligibility for Inpatient care shall be limited upto Single Private Room capped as mentioned - 1% of SI for Normal Hospitalization and 2% of SI for ICU/ICCU/NICU.</p> <p>In the event of insured person getting admitted in a higher category of accommodation the insured person shall bear proportion of the entire hospital Bill/ Medical Expenses in proportion of the</p> $\frac{\text{Room Rent actually incurred} - \text{Room Rent of the entitled room category}}{\text{Room Rent actually incurred}}$ <p>This shall be applicable to all the Medical Expenses incurred during the stay in Hospital.</p>
<b>Waiting Period:</b>	<b>First Thirty days Waiting period:</b> 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 accidental injury, provided the same are covered.

	<p><b>Pre-existing disease:</b> Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications will be excluded until the expiry of 6 months of continuous coverage after the date of inception of the first policy with us.</p> <p><b>Pre-existing disease and Specified disease / procedure waiting period:</b> Warranted that Exclusion no 4.1/4.2 stands deleted.</p>
<b>Ailment Capping :</b>	<p>Ailment wise restriction applicable for below listed treatment /procedures :</p> <ol style="list-style-type: none"> <li>1. Cataract – INR. 25,000 per eye</li> <li>2. Joint Replacement Surgery will be covered after a waiting period of 1 year.</li> </ol>
<b>Domiciliary Hospitalization :</b>	<p>Domiciliary Hospitalisation means medical treatment for a period exceeding three days for disease/ injury which in the normal course would require care and treatment at a hospital / nursing home but is actually taken whilst confined at home in India under any of the following circumstances namely</p> <ol style="list-style-type: none"> <li>1. The condition of the patient is such that he/she cannot be removed to Hospital/Nursing home, or</li> <li>2. The patient cannot be admitted to Hospital/ Nursing Home for lack of accommodation therein and doctor has advised in writing to take treatment or can take treatment at home.</li> </ol> <p>Domiciliary hospitalisation benefits shall be capped to subject to 10% of sum insured upto Rs.25,000 as specified in the Schedule, and shall, in no case cover expenses incurred for:</p> <p>Treatment of any of the following diseases/illness/injury:</p> <ol style="list-style-type: none"> <li>i. Asthma</li> <li>ii. Bronchitis</li> <li>iii. Chronic nephritis and nephritic syndrome</li> <li>iv. Diarrhea &amp; all types of dysenteries including gastroenteritis</li> <li>v. Diabetes mellitus and insipidus</li> <li>vi. Epilepsy</li> <li>vii. Hypertension</li> <li>viii. Influenza, cough and cold</li> <li>ix. All psychiatric or psychosomatic disorders</li> <li>x. Pyrexia of unknown origin for less than 10 days</li> <li>xi. Tonsillitis and upper respiratory tract infection including laryngitis &amp; pharyngitis</li> <li>xii. Arthritis, gout and rheumatism.</li> </ol>
<b>Maternity Benefit :</b>	Not covered
<b>Maternity Benefit Sum Insured: (Normal &amp; C-Section)</b>	Not covered
<b>New Born Baby Cover from Day 1 :</b>	Not covered
<b>Pre and Post Natal Expenses :</b>	Not covered
<b>Ayush Treatment :</b>	The Company will indemnify the Policyholder /Insured Person against the Medical Expenses which are incurred on treatment under AYUSH up to the Sum Insured under the Policy. The AYUSH treatment should be carried out in an AYUSH Hospital or AYUSH Day Care Centre as defined under the Policy. Rest T& C as per group mediclaim policy.
<b>Ambulance Charges :</b>	INR 5,000, per incidence, in case of emergency hospitalization.
<b>Exclusions:</b>	The company is not liable to make any payment under the policy, in respect of any expenses incurred in connection with or in respect of :-

	<ol style="list-style-type: none"> <li>Expenses related to any admission primarily for diagnostics and evaluation purposes.</li> <li>Rest Cure, rehabilitation and respite care, admission primarily for enforced bed rest and not for receiving treatment.</li> <li>Change-of-Gender treatments-Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.</li> <li>Cosmetic or plastic Surgery-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 certified by the attending Medical Practitioner.</li> <li>Hazardous or Adventure sports-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.</li> <li>Breach of law-Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.</li> <li>Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof.</li> <li>Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure</li> <li>Refractive Error-Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 diopters.</li> <li>Intentional self-injury, suicide or attempted suicide.</li> <li>Sterility and Infertility-Expenses related to sterility and infertility. This includes any type of sterilization, Assisted Reproduction, Gestational Surrogacy and Reversal of sterilization.</li> <li>Maternity Expenses-Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy.</li> <li>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.</li> <li>Treatment taken outside the geographical limits of India</li> </ol> <p>Rest all Terms and conditions strictly as per Group Mediclaim Policy wording of RGICL.</p>
<b>Ailments/Conditions not covered :</b>	Septoplasty, Cochlear Implant or related aids, RFQMR - Rotational Field Quantum Magnetic Resonance Device - Cytotron, C3R, Bariatric surgery, Injection Avastin / Lucentis / Macugen, Ozone Therapy, Enhanced External Counter Pulsation Therapy (EECP), Rejuvenation therapy, Lasik Surgery, Sleep Apnea, BAP.
<b>Product 2 : Group Mediclaim Super Top Up Insurance</b>	
<b>Sum Insured :</b>	20 lacs
<b>Aggregate Deductible :</b>	5 lacs (As per table below)
<b>Age Group:</b>	For Proposer/Adult entry age – 18 years to 60 years For Child entry age – 91 days to 25 years
<b>Type of Cover:</b>	Individual <ul style="list-style-type: none"> <li>1 Adult</li> <li>1 Adult + 1 Children</li> </ul>

	<ul style="list-style-type: none"><li>• 1 Adult + 2 Children</li><li>• 2 Adult</li><li>• 2 Adult + 1 Children</li><li>• 2 Adult + 2 Children</li></ul>	
Cover Details :	<p><b>Policy Covers</b></p> <ul style="list-style-type: none"><li>• <b>Medical Expenses</b> -incurred by Policyholder in excess of Aggregate Deductible and upto the Sum Insured for:<ul style="list-style-type: none"><li>a. In-Patient Treatment</li><li>b. Pre-Hospitalisation</li><li>c. Post Hospitalisation</li><li>d. Day Care Treatment</li></ul></li><li>• <b>Domiciliary Hospitalisation</b></li><li>• <b>Maternity Cover</b></li><li>• <b>Organ Donor</b></li><li>• <b>AYUSH Treatment</b></li><li>• <b>Ambulance Cover</b></li><li>• <b>Modern Treatment Methods</b></li></ul>	
Renewal :	The Certificates are renewable life long as per the terms of the Master Policy, as long as the Master Policy remains in force and the Insured members remain part of the group.	
Waiting period :	<ul style="list-style-type: none"><li>• 30 days Waiting Period</li><li>• 24 months Waiting Period for named ailments listed under Annexure A</li><li>• 24 months Waiting Period for Pre-Existing Diseases</li><li>• 12 months Waiting Period for Maternity Cover – As per sub-limits</li></ul>	
Geographical Limits:	Within India Only	
Discounts :	As per customer profile	
Loading :	As per pre-existing disease and medical conditions of customer.	
Coverage Details		
Base Covers	Description	Limits
1.Medical Expenses	This cover indemnifies the insured for any medical expenses incurred on In-patient Treatment. Pre-Hospitalization and Post-Hospitalization is also covered for the insured for that instance inpatient treatment This shall also cover Day Care Treatment- i.e. indemnify the insured for the medical expenses incurred under Day care procedure as advised by Medical Practitioner.	Sum Insured is limited to the selected combination of aggregate deductible and Sum Insured
2.Domiciliary Hospitalization	This cover indemnifies the Insured Person for the medical expenses incurred for treatment under Domiciliary hospitalization	Within the Sum Insured subject to Aggregate Deductible

<b>3.Maternity Cover</b>	This cover will indemnify the Insured Person for the Medical Expenses related to pregnancy, childbirth, pre and postnatal hospitalization or medically recommended and lawful termination of pregnancy	Limited to 1,00,000 subjects to Aggregate Deductible; available with Aggregate Deductible of Rs 2lakhs and above
<b>4.Organ Donor</b>	This cover will indemnify the Insured Person for the Medical Expenses incurred during Hospitalization, in respect of donor for any organ transplant Surgery performed on insured	Within the Sum Insured subject to Aggregate Deductible
<b>5.AYUSH Treatment</b>	This cover will indemnify the Insured Person for the Medical Expenses incurred on treatment under Ayurveda, Yoga & Naturopathy, Unani, Siddha, Sowa Riga and Homeopathy	Within the Sum Insured subject to Aggregate Deductible
<b>6.Ambulance Cover</b>	The cover indemnifies the Insured Person for expenses on availing Ambulance services offered by a hospital or by an Ambulance service provider on Inpatient hospitalization.	3500 per hospitalization
<b>7.Modern Treatment Methods</b>	This cover indemnifies the insured for the medical expenses incurred on treatment of listed Modern Treatment Methods	Limited to 50% of the selected Sum Insured subject to aggregate deductible

*(Note- For complete details of cover, kindly refer policy wordings)*

<b>Exclusion :</b>	<ul style="list-style-type: none"> <li>Investigation &amp; Evaluation (Code: Excl04)</li> <li>Rest Cure, rehabilitation and respite care (Code:Excl05)</li> <li>Obesity/ Weight Control (Code:Excl06)</li> <li>Change-of-Gender treatments (Code:Excl07)</li> <li>Cosmetic or Plastic Surgery (Code: Excl08)</li> <li>Hazardous or Adventure sports (Code:Excl09)</li> <li>Breach of law (Code: Excl10)</li> <li>Excluded Providers (Code:Excl11)</li> <li>Substance Abuse and Alcohol (Code: Excl12)</li> <li>Wellness and Rejuvenation (Code:Excl13)</li> <li>Dietary Supplements &amp; Substances (Code: Excl14)</li> <li>Refractive Error (Code: Excl15)</li> <li>Unproven Treatments-Code (Code: Excl16)</li> <li>Sterility and Infertility (Code: Excl17)</li> <li>Aggregate Deductible</li> <li>Dental Treatments</li> <li>External Congenital Anomaly</li> <li>Treatment other than Medically Necessary Treatment:</li> <li>Non-medical expenses</li> <li>Nuclear and radiological emissions, acts of terrorism</li> </ul>
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	<ul style="list-style-type: none"> <li>• Outpatient treatment</li> <li>• Overseas treatment</li> <li>• Charges other than Reasonable &amp; Customary Charges</li> <li>• Self-injury or suicide</li> <li>• Treatment outside discipline</li> <li>• War</li> <li>• Wilful Act/Negligence</li> </ul> <p>Rest all Terms and conditions strictly as per Group Mediclaim Super Top up Insurance of RGICL.</p>				
<b>Aggregate Deductible and Sum Insured :</b>	<p>The Group may choose the following Sum Insured and Deductible combinations.</p> <table> <tr> <th>Annual Deductible (in INR)</th><th>Sum Insured</th></tr> <tr> <td>5 lacs</td><td>20 lacs</td></tr> </table>	Annual Deductible (in INR)	Sum Insured	5 lacs	20 lacs
Annual Deductible (in INR)	Sum Insured				
5 lacs	20 lacs				
<b>Permanent Exclusion: (Applicable to GMC and Supertop up policy)</b>	The Diseases may be permanently excluded with due consent from the proposer in the case where such Diseases are Pre-Existing at the time of first proposal of this Product with the Company and are part of Knockout conditions listed in Annexure B of the policy wording.				
<b>Others :</b>	No midterm change or dependents to be allowed under the policy .				
<b>Claim Intimation :</b>	Within 24 hours from the date of Hospitalization for cashless claims.				
<b>Claim Submission :</b>	Submission of Claim for reimbursement within 30 days from the date of discharge.				
<b>In House TPA :</b>	Warranted that this policy will be serviced in house.				
<b>Special Conditions :</b>	<ol style="list-style-type: none"> <li>1. This policy is applicable to all premia bank account holders only of Yes Bank Limited.</li> <li>2. Policy shall be on named basis only.</li> <li>3. Only Active accounts will be considered - in case of Dormant Accounts the same is to be excluded from the scheme.</li> <li>4. Period of Insurance will be “One Year from the date of Payment made by the Individual Customer “.</li> <li>5. In case of non-declaration of Preexisting disease at the time of policy issuance, issued policy would be considered void-ab-intio and there will be no liability on insurance company for any claim/loss and company reserves the right to forfeit the premium under NDC clause of policy wordings.</li> <li>6. In case of any claim made under the policy no premium shall be refunded on cancellation of the policy.</li> <li>7. In case of multiple policies only single policy purchased 1<sup>st</sup> will be applicable and all other policies will be cancelled on short scale period as and when identified.</li> <li>8. Premium installment is not allowed under the Policy.</li> <li>9. Any mid term addition of dependents is not allowed under the policy.</li> </ol>				
<b>Other Conditions :</b>	<ol style="list-style-type: none"> <li>1. On finalization of the quote, the premium will be paid considering per life rate basis the sum insured opted.</li> <li>2. Surcharges, service charges, miscellaneous charges, consumables, registration charges and other non treatment related expenses are not covered.</li> <li>3. Rest all other terms and conditions strictly as per Reliance’s group mediclaim policy.&amp; Super Top up Insurance Policy Attached with this Policy Schedule, are the Policy wording along with terms and condition, Endorsement and Annexure. If you (Policyholder ) have not received any of these ,Please E-mail/write to the company at <a href="mailto:rgicl.services@relianceada.com">rgicl.services@relianceada.com</a> within 15 days of receipt of the policy .This policy copy in original must be surrendered to the Company in case of Cancellation of the policy .In case of any incorrect representation, the liability shall be upon the Policyholder.</li> </ol>				

	<p>4. In case of any mis-representation, wrong information provided during the conclusion of sales the liability shall be upon the Policyholder and insurance company reserve the right to cancel the policy and forfeit the premium.</p> <p>5. The duly signed and completed proposal form to be submitted by Insured / proposer at the time of placement of policy with us confirming relation and previous claim / hospitalization details if any.</p> <p>6. Please note the coverage as approved above is to be considered as final.</p>
<b>Premium rates : (Including GST and Commission)</b>	Annexure 1.4 – Mandatory