

Plan Coverage

1. Accidental & Disability

Death or permanent disability occurring due to accident.

2. Critical Illness

Death, or diagnoses of one or more critical illnesses.

List of critical Illnesses:

- 1. Cancer of specified severity
- 2. Open chest Coronary Artery Bypass Graft
- 3. Major Organ/ Bone Marrow Transplant
- 4. Multiple Sclerosis with Persisting Symptoms
- 5. Aorta Graft Surgery
- 6. Open Heart Replacement or Repair of Heart Valves
- 7. Quadriplegia/Paralysis of four limbs
- 8. Kidney Failure Requiring Regular Dialysis
- 9. First Heart Attack Of Specified Severity
- 10. Stroke Resulting in Permanent Symptoms
- 11. End Stage Liver Disease

3. Loss of job

Involuntary unemployment on account of termination, merger & acquisition, layoff, or retrenchment

4. Child Care Allowance

Claim Process:

You need intimate the claim to <u>insurance.support@elephant.in</u> with all documents mentioned below and bank details.

Post confirmation by Elephant, customers should send the required original documents by post at the below-shared address of the Insurer office

The insurer will reach out to the customer in case of any additional documentation required

After submission of all documents, the claim will be settled in 30 days in shared bank account details.

NOTE: During the complete journey customers can reach out to Elephant customer support for any updates.



CLAIMS MANUAL DETAILS:

In the event of any occurrence which might give rise to a claim under the policy, the Insured shall immediately notify the Insurer with the following information:

- Loss Description (Please give a brief description of the loss incident)
- Lost Date
- Policy Number
- Insured Contact Details
- Any additional Information you would like to share?
- Any additional Information you would like to share? ((Account details and IFSC code)

Once all the required information and documents are submitted/ uploaded to the system, claim no. will be generated by the system. There upon an auto email and/or SMS acknowledgement will be sent to the insured with system-generated claim no, acknowledging the claim intimation

Letter of Requirements & Reminders

Where required additional documents may be called for from the insured/claimant through emails as well as SMS. Reminders will also be sent setting out the time within which documents to be submitted for evaluation of claim

Documents for claim settlement:

The list is for illustrative purposes only and is not exhaustive:

Generic Claim documents

Duly filled claim form by the insured or

- AML Documents Pan Card Copy, Residence Proof, and 2 passport-sized colour photos of the insured Person/claimant
- Cancel Cheque and NEFT Mandate form- duly filled in by the claimant/insured,

1: Loss of job

- Termination letter and relieving letter from the employer
- Any documents stating the reason for termination/retrenchment
- Appointment letter issued by the employer
- Last 3 months' salary slips



- Original Amortization Chart, in case of a debt-linked policy
- Form-16 from employer
- Income Tax Return of the last 3 preceding years
- Contact details of Human Resource Personnel Mobile, Email id, Address and name of employer and HR personnel
- Name and contact details (Mobile No, Email ID) of reporting manager

2. Accidental death benefit

- MLC/FIR
- Cause of Death Certificate
- Death Certificate issued by the Government Authority
- Postmortem Report
- Viscera / Chemical Analysis / Forensic Report
- Police Final Charge sheet / Court Final Order
- Spot Inquest / Panchnama
- RACT award in case of rail accident
- Indoor Case Papers

2B: Permanent Total Disability (PTD) Benefit

- MLC/ FIR
- Police Final Charge sheet / Court Final Order Spot Inquest / Panchnama
- Indoor Case Papers
- Disability Certificate by Civil Surgeon /Government Hospital
- Certificate from a treating Medical Practitioner
- RACT award in case of rail accident
- Hospitalization records and Discharge summary (wherever applicable)
- 3. illness resulting due to Critical illness
 - Hospital discharge summary
 - All pre and post-surgery Investigation reports/scans
 - Scan of original Policy copy
 - Consultation papers of the surgeon advising for the surgery
 - Any other document required for assessing the claim
 - All past hospitalizations, consultations, or treatment detail documents. i>Police Final Charge sheet / Court Final Order
 - Copies of Indoor case papers from the hospitals



Survey

Insurers may appoint agencies wherever required to evaluate the loss event and the insured need to extend all support to agencies appointed by the insurer for the claim assessment.

Final Settlement

On receipt of all documents and clarifications from the Insured and report from the agency (if applicable) CSM will settle the claim within 30 days from date of receipt of all required documents and clarification.

