



Continued happiness with protected future is a certainty

IndiaFirst Life Group Protection Rider Plan

(Non-Linked, Non-Participating, Group, Pure Risk, Health Rider)

Before You Start Reading

Important Note

IndiaFirst Life Group Protection Rider Plan is referred to as the Policy throughout the brochure.

How Will This Brochure Help You?

This brochure gives you details of how the policy works throughout its lifetime. It's an important document to refer to.

To Help Your Understanding

We've done our best to explain everything as simply as possible; however, you're likely to come across some terms you're unfamiliar with, where possible, we've explained these.

We have used plain language that's easy to understand and believe this brochure is a good place to start when planning your future under this insurance policy.

About IndiaFirst Life Insurance

Headquartered in Mumbai, IndiaFirst Life Insurance Company Limited (IndiaFirst Life), with a paid-up share capital of INR 754 crores, is one of the country's youngest life insurance companies. Its current shareholders include Bank of Baroda, Union Bank of India, and Carmel Point Investments India Private Limited, which hold 65%, 09%, and 26% stakes in the company. Carmel Point Investments India Pvt Ltd. is incorporated by Carmel Point Investment Ltd, a body corporate incorporated under the laws of Mauritius and owned by private equity funds managed by Warburg Pincus LLC, New York, United States. The company's key differentiator is its simple, easy-to-understand products that are fairly priced and efficiently serviced. For details, please visit <https://www.indiafirstlife.com>

Introduction

We live our lives in the pursuit of happiness where our happiness is a derivative of the wellbeing of our group members. Be it our own family or the members of our business family, rewarding them with extensive financial security in an uncertain world, is the best way to appreciate and encourage their invaluable contribution.

In today's scenarios, with the increase in the number of instances of accidents, it is imperative to shield the family's future. An unexpected accident may affect the income flow and ruin one's dreams. As a responsible organization you would like to safeguard your employee/ member and their family's future against any such eventualities

Providing that extra safety, we present IndiaFirst Life Group Protection Rider- an extra layer of life insurance cover that provides extra financial protection to your member & his family in his absence. For, a little extra protection goes a long way.

Key Features

- Flexibility to choose from 2 coverage options
- Enhanced protection at an affordable price
- Financial protection of the Member against accidental death and/or Terminal Illness basis the option chosen
- Tax* benefit may be available on the premiums paid and benefits received as per prevailing tax* laws.

1. What is the IndiaFirst Life Group Protection Rider Plan?

IndiaFirst Life Group Protection Rider Plan is a non-linked, non-participating, group rider which may be attached to one-year renewable Group Term Insurance Products and Group Credit Life Insurance products, designed to enhance financial security for your members in case of accidental death or member being diagnosed with any terminal illness.

2. What is the eligibility criteria in the policy?

Minimum Entry Age: 18 years last birthday

Maximum Entry Age

Event	One-year renewable Group Term insurance products	Group Credit Life Insurance products
Accidental Death	69 years	69 years
Terminal Illness	Same as base plan	Same as base plan

Maximum Maturity Age

Event	One-year renewable Group (eg. Group Term Life type plans)	More than one-year Group Products (Group Credit Life type plans)
Accidental Death	70 years	70 years
Terminal Illness	Same as base plan	Same as base plan

The maximum age at maturity will always be less than or equal to base plan.

In case of credit linked type policies, rider benefit option will be available for member under single life cover and only main/primary borrower under 100% first claim for joint life cover and all co-borrowers under loan sharing basis, subject to the rider Sum Assured and premium being less than Base Policy.

In case of rider claim for the first life under co-sharing arrangement, rider cover ceases for that member and will not be renewed further for that member. However, benefit cover will continue for remaining co-borrowers, and future rider premium, only for remaining co-borrowers, if any will be payable and benefit cover will continue as per terms and conditions of the rider policy.

Minimum Group Size	Same as base plan or 5 members for any group micro insurance plan; Same as base plan or 7 members for any scheme except group micro insurance plan;
Maximum Group Size	No limit

3. What is the rider term and the premium payment term in the policy?

The rider term as well as the premium payment term will be same as that of the base plan, subject to a minimum of 1 year and maximum of 5 years (credit linked policies). The rider will not be offered if the term of the rider exceeds outstanding term under the base policy.

4. What are the premiums and premium paying modes available in the policy?

Premium paying mode depends upon the option selected in the base plan.

Minimum premium would be as per the minimum rider sum insured.

The maximum total Rider Premium (which is inclusive of rider extra premium) shall, in no case, exceed

- 100% of premiums (including extra premium, if any) payable under the base policy
- Premium will be based on rating factor eg. Sum Assured or Cover amount, Commission rate, Loan interest rate, Cover tenure, Age of Life Assured, Nature & size of the group, Type of Loan, type of financial institution and any other rating factors as applicable.

5. What are the options available under this policy?

There are two rider options in the policy which the Master Policyholder/ Member can choose at the inception of the cover commencement:

- Accidental Death Benefit: In the event of death of the member as a result of an accident during the term of the rider, the beneficiary would receive a lump sum benefit equal to rider Sum Insured
- Terminal Illness Benefit: If the member is diagnosed with a terminal illness during the term of the rider, the member would receive a lump sum benefit equal to Sum Insured or death benefit under base policy.

C.

Rider Options	Coverage Option	Description	Details
Group Protection Rider	Accidental Death Benefit	100% Rider Sum Insured paid out on the accidental death of the member during the term of the policy	In the event of death of the member during the term of the rider due to an accident, the beneficiary would receive a lump sum benefit equal to rider Sum Insured. This is an additional benefit over the base policy benefit
	Terminal Illness Benefit	100% Rider Sum Insured paid out on member being diagnosed with a terminal illness during the term of policy	This option provides a lump sum benefit equal to rider Sum Insured or death benefit in the event of the member being diagnosed with a terminal illness during the term of the rider. This is an accelerated benefit under the base death

			<p>cover benefit. Membership terminates, and base death cover ceases after payment of terminal illness benefit.</p> <p>A member shall be regarded as Terminally Ill only if that member is diagnosed as suffering from a condition which, in the opinion of two independent medical practitioners specializing in treatment of such illness, is highly likely to lead to death within 6 months. The Terminal Illness must be diagnosed and confirmed by medical practitioners registered with the Indian Medical Association and approved by the Company. The Company reserves the right for independent assessment.</p>
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Note: For transgender lives, if any, male rates will be applicable

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

Medical Practitioner means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.

The Medical practitioner should not be

- the policyholder/insured person himself/herself; or
- an authorized insurance intermediary (or related persons) involved with selling or servicing the insurance contract in question; or
- employed by or under contractual engagement with the insurance company;
- related to the policyholder/insured person by blood or marriage

You as a Master policyholder or your member can choose any one or both of the above options.

6. What is the sum insured in this policy?

The sum insured in the policy will be as decided by you or your member as per the need. However, the minimum sum insured would be the base plan's minimum sum insured or Rs. 10,000, whichever is lower of the two.

Rider Option	Maximum per Life
Accidental Death Benefit	Base Life cover subject to maximum of Rs. 2 Cr*
Terminal Illness Benefit	Base Life cover subject to our underwriting policy

Note:

*Rider benefit is limited to a maximum of 100% of Base Life cover

7. What are the non-forfeiture conditions?

If the base policy lapses, then rider benefit will cease.

The rider benefit will terminate upon the happening of the first of the following events:

- On the date of receipt of free-look cancelation requests by member/Master Policyholder.
- On payment of rider Sum Assured against a valid claim
- On the date of intimation of repudiation of claim as may be applicable for accidental death benefit or terminal illness benefit, as the case may be. The base policy continues after payout/repudiation of terminal illness benefit.

Illustration:

1. Accidental Death Benefit (ADB) rider: In case of death due to an accident occurred due to Drink and Drive(criminal offence), no benefit is payable i.e. additional accidental claim will be repudiated. So there is no question of any further payment as insured person is not alive, hence the rider terminates.
2. Terminal Illness (TI) rider accelerated benefit of base cover amount): Terminal Illness is to be established by medical practitioner certificate. Even if there is a pre-existing condition and non-disclosure of that leads to non payment of rider benefit, the rider remains inforce and benefit will be payable on expiry of the pre-existing disease or exclusion window provided the person is alive at that time. On account of any other reason, the rider cover terminates on repudiation.
 - On the expiry of the revival period for member
 - On the expiry of rider term for Member/Master Policyholder
 - On the maturity of the base policy or the date on which the base policy is surrendered, terminated by member/Master Policyholder.

- On the expiry of Policy Term of the base policy. At the time of rider attachment to the base policy, rider term/PPT would be aligned to the outstanding term/PPT of the base policy.
- On receipt of written request for cancellation/surrender of this rider, effective from the next Rider Premium due date provided no surrender/termination value has been paid
- On cancellation/termination of this rider on grounds of misrepresentation, fraud or non-disclosure by member/Master Policyholder as per section 45 of Insurance Act (1938) as amended from time to time

8. What do you receive at the end of the policy term?

There is no maturity benefit payable under this policy.

9. What are the tax benefits in this policy?

Tax** benefits may be available on premiums paid and benefits receivable as per prevailing Income Tax Laws. These are subject to change from time to time as per the Government Tax** laws. Please consult your tax consultant before investing.

10. Can I surrender this rider policy?

Yes, you have the flexibility to surrender this policy anytime during the rider policy term.

There is no surrender / termination value under regular premium option.

The surrender / termination value is calculated as -

Under One-year renewable Group Term insurance products there is no surrender/termination value.

Under Group Credit Life Insurance products :

- Single Premium: Surrender value is acquired immediately.
The surrender value for Single Premium in respect of an individual member or master policy holder will be calculated as below:
$$50\% \times \text{Single Premium} \times \{1 - M/P\}$$
Where M = Elapsed months since inception & P = Cover term in month
- Limited Premium: Termination/Surrender value is acquired immediately.
The termination/surrender value for Limited Premium in respect of an individual member will be calculated as below:
$$50\% \times \text{Premiums Paid} \times \{1 - M/P\} \times (\text{Premiums Paid} / \text{Total Premiums payable under the policy})$$
Where M = Elapsed months since inception & P = Cover term in month

11. Can I get a loan in this policy?

No, loan is not allowed in this policy.

12. What happens in case the Master Policyholder has collected the premium from the member and has not remitted the same to us?

In case, the Master Policyholder(MPH) has collected the premium from the member before the completion of grace period and has not remitted the same to us (due to any reason), we will continue to provide coverage to that member if the member can prove that he/she had paid the premium and secured a proper receipt leading the member to believe that he/she was duly insured.

13. What if you miss paying your premiums?

In the event of non-payment of premium due under the policy within the grace period the policy will lapse, and no benefit is payable. The cover will cease, and no further benefits will be payable in case of a lapsed policy.

What are your options to revive the policy?

The Revival period shall be a period of five years starting from the last premium due date. You can revive your policy within a Revival Period along with the base plan from the date of first unpaid premium subject to applicable underwriting. There is no revival charge or penal interest/Late fees on revival. If rider has lapsed and

not is revived within Revival Period or rider is opted out from base policy, then it cannot be included in the future period of the policy. On revival, if allowed, all due unpaid premium will be collected without any interest/Late fees and cover continues subject to our underwriting policy.

Are there any constraints to revive your policy?

Yes. You can revive your policy as long as you do it within Revival Period as per base policy years from the due date of the first unpaid premium but before the maturity date. The revival is subject to satisfactory medical and financial requirements raised by the Insurer. The medical cost, if any to be borne by you.

14. Is there a grace period for missed premiums?

Grace period will be same as per the base policy and means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. If a valid claim has occurred during grace period, then rider Sum Assured will be paid after deducting due premium. Grace period terms and conditions will be applicable under Regular/ Limited premium payment options

15. What is the Free Look Period available in your policy?

Yes, you can return your policy within the Free Look period;

In case you do not agree to the any policy terms and conditions, you have the option of returning the policy to us stating the reasons thereof, within 30 days from the date of receipt of the policy, whether received electronically or otherwise.

Do you get any refund when you return your policy?

Yes. We will refund an amount equal to the -

Premium paid

Less: i. Pro-rata risk premium (if any) for the time the policy was in force

Less ii. Any stamp duty paid

Less iii. Expenses incurred on medical examination, if any

16. What are the conditions in which the benefits of this policy will not be paid?

Exclusions for ADB:

Accidental Death benefit shall not be paid on death of the insured person occurring directly or indirectly due to or caused, occasioned, accelerated or aggravated by any of the following:

1. Suicide or self-inflicted injury, whether the life assured is medically sane or insane.

2. War, terrorism, invasion, act of foreign enemy, hostilities, civil war, martial law, rebellion, revolution, insurrection, military or usurper

power, civil commotion. War means any war whether declared or not.

3. Taking part in any naval, military or air force operation during peace time.

4. Committing an assault, a criminal offence, an illegal activity or any breach of law with criminal intent.

5. Poison, gas or fumes (voluntary or involuntarily, accidentally or otherwise taken, administered, absorbed or inhaled).

6. Service in the armed forces, or any police organization, of any country at war or service in any force of an international body

7. Participation by the insured person in any flying activity, except as a bona fide, fare-paying passenger, pilot, air crew of a recognized airline on regular routes and on a scheduled timetable.

8. Taking part in professional sport(s) or any adventurous pursuits or hobbies. "Adventurous Pursuits or Hobbies" includes any kind of racing (other than on foot or swimming), potholing, rock climbing (except on man-made walls), hunting, mountaineering or climbing requiring the use of ropes or guides, any underwater activities involving the use of underwater breathing apparatus including deep sea diving, sky diving, cliff diving, bungee jumping, paragliding, hand gliding and parachuting.

9. Nuclear Contamination; the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.

Exclusion for Terminal Illness

Terminal illness rider benefit shall not be paid in the event of any claim occurring directly or indirectly as a result of any of the following

1. Self-inflicted injury: Intentional self-inflicted injuries including the injuries arising out of attempted suicide
2. Any condition that is pre-existing at the time of inception of cover

Pre-Existing disease means any condition, ailment injury or disease:

- a. That is/are diagnosed by a physician within 36 months prior to the effective date of the policy issued by the insurer or
- b. For which medical advice or treatment was recommended by, or received from, a physician within 36 months prior to the effective date of the policy or its reinstatement

After completion of 36 months from date of issuance or reinstatement, as the case may be, pre-existing exclusion clause will not be applicable

17. Nomination

Allowed as per the provisions of Section 39 of the Insurance Act, 1938 as amended from time to time. For more details on the nomination, please refer to our website www.indiafirstlife.com

18. Assignment

Allowed as per the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time. For more details on the assignment, please refer to our website www.indiafirstlife.com

19. You are prohibited from accepting rebate in any form

Prohibition of Rebate: Section 41 of the Insurance Act, 1938, as amended from time to time, states

- 1) No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person, to take 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.
- 2) 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.

20. What happens in the case of submission of information which is false or incorrect?

A Policy may be called into question as per the provisions of Section 45 of Insurance Act, 1938. A simplified version of the provisions of Section 45 is provided below:

1. No Policy of Life Insurance shall be called in question on any ground whatsoever after expiry of 3 years from
 - a. the date of issuance of policy or
 - b. the date of commencement of risk or
 - c. the date of revival of policy or
 - d. the date of rider to the policy whichever is later.

- 2) On the ground of fraud, a policy of Life Insurance may be called in question within 3 years from
 - a. the date of issuance of policy or
 - b. the date of commencement of risk or
 - c. the date of revival of policy or
 - d. the date of rider to the policy whichever is later.

For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which such decision is based.

- 3) Fraud means any of the following acts committed by insured or by his agent, with the intent to deceive the insurer or to induce the insurer to issue a life insurance policy:
 - a. The suggestion, as a fact of that which is not true and which the insured does not believe to be true;
 - b. The active concealment of a fact by the insured having knowledge or belief of the fact;
 - c. Any other act fitted to deceive; and
 - d. Any such act or omission as the law specifically declares to be fraudulent.
- 4) Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the insured or his agent keeping silence to speak or silence is in itself equivalent to speak.
- 5) No Insurer shall repudiate a life insurance Policy on the ground of

Fraud, if the Insured / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the policyholder, if alive, or beneficiaries.

- 6) Life insurance Policy can be called in question within 3 years on the ground that any statement of or suppression of a fact material to expectancy of life of the insured was incorrectly made in the proposal or other document basis which policy was issued or revived or rider issued. For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which decision to repudiate the policy of life insurance is based.
- 7) In case repudiation is on ground of mis-statement and not on fraud, the premium collected on policy till the date of repudiation shall be paid to the insured or legal representative or nominee or assignees of insured, within a period of 90 days from the date of repudiation.
- 8) Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer. The onus is on insurer to show that if the insurer had been aware of the said fact, no life insurance policy would have been

issued to the insured.

- 9) The insurer can call 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 of age of life insured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.

[Disclaimer: This is not the exact text of Insurance Laws (Amendment) Act, 2015 and only a simplified version prepared for general information. Policy Holders are advised to refer to Insurance Laws (Amendment) Act, 2015 dated 23.03.2015 for complete and accurate details.]

21. Policy Servicing & Grievance Handling Mechanism

You may contact us in case of any grievance at any of our branches or at Customer Care, IndiaFirst Life Insurance Company Ltd, 12th & 13th floor, North [C] Wing, Tower 4, Nesco IT Park, Nesco Center, Western Express Highway, Goregaon (East), Mumbai - 400 063, Contact No.: 1800 209 8700, Email id: customer.first@indiafirstlife.com. IRDAI Regn No. 143. CIN: U66010MH2008PLC183679

- a. An acknowledgment to all such grievances received will be sent immediately from the date of receipt of the grievance
- b. A written communication giving reasons of either redressing or rejecting the grievance will be sent to you within 14 days from the date of receipt of the grievance. In case

We don't receive a revert from You within 8 weeks from the date of registration of grievance, We will treat the complaint as closed.

However, if you are not satisfied with our resolution provided or have not received any response within 14 , then, you may approach our Grievance Officer at the nearest IndiaFirst Life Insurance's branch or you may write to our Grievance Redressal Officer at grievance.redressal@indiafirstlife.com.

- c. If you are not satisfied with the resolution or have not received any response within 14 days then you can contact the insurance ombudsman. For the list of ombudsman office please refer Annexure B
- d. Further, you may approach the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:
IRDAI Grievance Call Centre (IGCC)
TOLL FREE NO: 155255/18004254732
Email ID: complaints@irdai.gov.in
You can also register your complaint online at <https://bimabharosa.irdai.gov.in/>
Address for communication for complaints by post:
Policyholder Protection & Grievance Redressal Department (PPGR) - Grievance Redressal Cell, Insurance Regulatory and Development Authority of India, Sy. No. 115/1, Financial District, Nanakramguda Gachibowli, Hyderabad- 500032, Telangana
IRDAI TOLL FREE NO: 18004254732

**Tax exemptions are as per applicable tax laws from time to time.

Disclaimers: IndiaFirst Life Insurance Company Limited, IRDAI Regn No.143, CIN: U66010MH2008PLC183679, Address: 12th & 13th floor, North [C] Wing, Tower 4, Nesco IT Park, Nesco Center, Western Express Highway, Goregaon (East), Mumbai - 400 063. Toll free No - 18002098700. www.indiafirstlife.com SMS to 5667735 SMS Charges apply.

IndiaFirst Life Insurance Company Limited is only the name of the Life Insurance Company and IndiaFirst Life Group Protection Rider Plan is the name of the Group Rider and does not in any way indicate the quality of the contract, its future prospects, or returns. For more details on risk factors and terms and conditions, please read the sales brochure carefully before concluding the sale. IndiaFirst Life Group Protection Rider (UIN 143B003V02)

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BEWARE OF SPURIOUS PHONE CALLS AND FICTIOUS/ FRAUDULENT OFFERS

- IRDAI or its official do not involve in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.