LIC'S HEALTH PROTECTION PLUS (PLAN NO. 902) (UIN: 512L253V01)

IN THIS POLICY, THE INVESTMENT RISK IN INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

Health is a major concern on everybody's mind these days. With sky rocketing medical expenses, the possibility of any illness leading to hospitalization or surgery is a constant source of anxiety unless the family has actively provided for funds to meet such an eventuality. Most families rarely provide for healthcare, and even if they do, it is grossly inadequate.

Given this scenario, LIC has launched LIC's Health Protection Plus plan, a unique long term health insurance plan that can combine health insurance covers for the entire family (husband, wife and the children) – Hospital Cash Benefit (HCB) and Major Surgical Benefit (MSB) along with a ULIP component (investment in the form of Units) that is specifically designed to meet Domiciliary Treatment Benefit (DTB) / Out Patient Department (OPD) expenses for the insured members.

I. <u>VITAL INFORMATION</u>

1. AGE	PRINCIPAL INSURED	SPOUSE INSURED	CHILD INSURED
Min Policy Entry Age – Age Last Birthday	18	18	3 months
Min Age – HCB Cover – Age Last Birthday	18	18	3 months
Min Age – MSB Cover – Age Last Birthday	18	18	18
Maximum Entry Age Age Nearest Birthday	55	55	17

2. Premium Payment.

Mode of Payment: Yearly, Half-Yearly & Monthly (ECS Mode only)

MINIMUM ANNUAL PREMIUM CONDITIONS		
Number of Lives covered	Higher of the two conditions in each category listed below:	
Single Life	6 times the HCB of the Principal Insured OR Rs.5000 p.a.	
Two LivesThe arithmetic sum of 6 times the HCB of PI and 3 times the HCB the second insured. OR Rs.7500 p.a.		
More LivestwoThe arithmetic sum of 6 times the HCB of PI and 3 times the HCB of each of the others insured OR Rs.10,000 p.a.		
Annualized Premiums are payable in multiples of Rs.500.		

3. Sum Assured. The Principal Insured must first choose the respective levels of HCB for each member to be covered under the policy. The sum assured for major surgical benefits will be 200 times of the HCB you choose.

MAJOR SURGICAL	PRINCIPAL	SPOUSE	CHILD INSURED
SUM ASSURED	INSURED	INSURED	
	200 times the HCB applicable to each insured life under the policy.		

4. Other Terms of the Policy.

AGE NEAREST	PRINCIPAL	SPOUSE	CHILD INSURED
BIRTHDAY	INSURED	INSURED	
Max. HCB and MSB	75	75	25
Cover ceasing age			
Premium Ceasing	65 Years Nearest Birthday of the Principal Insured		
Age			
DTB ceasing age	No age limit	No age limit	25

5. Addition of New Members. It is important for the Principal Insured (the person taking the policy) to decide which of the existing family members are to be covered and include them at the beginning (proposal stage) itself. Eligible existing family members cannot be added at a later stage. New members can however be added under the following three situations.

SITUATION	WHEN TO INCLUDE?	THE COVER STARTS FROM
Marriage/remarriage of the Principal insured after taking the policy	Within one year from the date of marriage	The following policy anniversary
A Child born or Legally adopted child less than 3 months after taking the policy		
Legally adopted child is more than 3 months old	From the policy anniv adoption	versary falling after date of

- The new members will be eligible for the cover only if they satisfy the conditions of minimum premium and benefits.
- New members must be included by the Principal Insured only. No new members will be allowed after the death of the principal insured.

6. Increase/Decrease of Premiums. Increase or decrease of premiums is allowed during the term of the policy. Increase in premium must be in multiples of Rs.500. In case of decrease, the minimum premium conditions must be satisfied. However, increase/decrease in premiums does not affect the level of health cover and HCB and MSB benefits.

II. <u>BENEFITS</u>

1. Hospital Cash Benefit (HCB). A daily benefit is payable in case the insured is hospitalized due to either accidental body injury or sickness. The quantum of benefit depends upon the level of cover opted.

	INITIAL DAILY BENEFIT (IDB)*#	
INSURED	Minimum	Maximum
Principal Insured	Rs.250	Rs.2500
Spouse/Child	Rs.250	Rs.1500

*The Applicable Daily Benefit. IDB is applicable during the first year of risk cover. The daily benefit will increase @5% simple p.a. of the IDB on each policy anniversary until it hits a cap of 1.5 times the initial benefit.

IDB of the spouse cannot exceed the Principal Insured's IDB; IDB of the children cannot exceed the spouse's IDB.

The initial HCB must be in multiples of Rs. 50.

*Initial daily benefit that is payable in respect of stay in a non-ICU room or ward. In case the insured is required to stay in the ICU of a hospital, an enhanced rate of daily benefit is payable, which is twice the eligible daily cash benefit.

2. Major Surgical Benefit (MSB). In the event of the insured undergoing one of the major surgeries defined in the Annexure I, a lump sum benefit (regardless of the actual costs incurred) equivalent to the percentage of the sum assured mentioned against that surgery will be payable on providing proper proof of surgery to the satisfaction of the corporation.

3. Domiciliary Treatment Benefit (DTB). The Principal Insured can claim an amount equivalent to the actual expense he or she has incurred in respect of any domiciliary treatment or to meet the medical expenses incurred over and above the hospital cash/major surgical benefits in respect of either oneself or the others insured under the policy.

BEFORE CESSATIONOFHCB AND MSB COVERSONALLMEMBERSCOVERED			
Minimum domiciliary claimable	Rs.2500		
Maximum amount that can be claimed payable*	Up to 50% of the policy fund at the date of payment		
* Subject to a minimum balance of one annualized premium being left in the policy fund after making the payment.			
AFTERCESSATIONOFHCB AND MSB COVERSONALL MEMBERSCOVERED			
Minimum domiciliary claimable Rs.2500*			
No limit on maximum amount that can be claimed / payable			
* If the balance in the Policy Fund is less than Rs. 2,500/-, then the payment of entire amount shall be made in one lump sum only.			

Note: i. A maximum of two payments will be allowed in a policy year subject to the above conditions – on production of supporting proof of treatment and bills for expenses. DTB is available only after at least 3 years premiums are paid.

ii. DTB is payable for the children covered until the health cover ceasing age.

4. Death Benefit. No death insurance cover is available under the plan. Following benefits/charges will take place on the happening of unfortunate death of principal insured (PI) and/or other insured member.

a) On death of the PI (if policy is issued on single life) or on death of all Insured members (if more than one life is covered under the policy).	The Policy Fund Value will be payable to the nominee/ legal heir.
b) On death of PI (if other Insured members are there).	The payment of premiums will cease and the cover will continue for the other Insured lives till the fund is sufficient to recover all the charges or till the maximum benefit ceasing age for each of the Insured lives, whichever is earlier.
c) On death of insured member(s), other than PI	The payment of premiums and the cover for PI and other Insured members, if any, will continue.

III. CONDITIONS&RESTRICTIONS

1. Waiting Period. Both HCB and MSB covers are available subject to a waiting period from the commencement of the risk cover specified hereunder – in respect of each insured member:

WAITING PERIOD FROM	PRINCIPAL INSURED	SPOUSE INSURED	CHILD INSURED
Date of the cover	180 days	180 days	180* days
Date of reinstatement of cover during the revival period	•	90 days	90 days
No waiting period in respect of Accidental Bodily Injury.			

*No waiting period in case of children for MSB from the date of cover.

2. Benefit Period Limits – Hospital Cash Benefit

НСВ	MAXIMUM ANNUAL BENEFIT PERIOD		MAXIMUM LIFETIME BENEFIT PERIOD
	1 st Year	2 nd year & after	
Principal Insured	18 days incl. 9	60 days incl. 30	365 days
Spouse Insured	days for ICU	days for ICU	
Child Insured*			
*Maximum period of HCB for an insured child until he or she completes 5 years age is limited to 90 days.			

IMPORTANT NOTE: HCB is available only in respect of hospitalization in a ward or ICU for continuous period of 24 hours or part thereof, over and above 48 hours, provided such part stay exceeds 4 hours.

MSB		PRINCIPAL	SPOUSE	CHILD INSURED
		INSURED	INSURED	
Maximum benefit	Annual	100% of the Sum Ass insured member	sured applicable in	respect of the each
Maximum Benefit	Lifetime	3 times the Sum Assured member	d applicable in respec	t of the each insured

3. Conditions for Availing Major Surgery Benefit

NOTE: i. Various HCB and MSB Benefit limits and restrictions applicable under this policy in respect of each insured shall solely and exclusively apply to that insured only and are not transferable to any other insured.

ii. HCB/MSB is payable only if the hospitalisation/surgery is performed in India.

4. Limits on Availing Domiciliary Treatment Benefit. Same as mentioned under para II (3).

5. Termination of HCB and MSB Benefits in respect of each insured.

On attainment of the insured's maximum cover ceasing age – 75 years nearest birthday for PI/spouse insured and 25 years nearest birthday for the children insured

On reaching the maximum lifetime benefit limits under HCB (365 days) and MSB (3 times the sum assured)

On the death of the insured or on the date of termination of the policy for any other reason

Insured spouse's cover terminates on the date of divorce/legal separation

6. Premium Discontinuance and Revival. The policy will lapse if the premiums are not paid within the days of grace. The PI shall have the option to revive the policy any time within a period of two years from the due date of first unpaid premium by payment of arrears of premiums or by availing Premium Holidays. During the period of discontinuity, the charges for HCB and MSB covers will continue to be deducted (even beyond two years) from the policy fund till:

i. the policy fund has sufficient balance, or

ii. the lives covered reach the benefit ceasing age, or

iii. the maximum lifetime benefits are exhausted, or

iv. the policy is terminated due to death or any other reason, if any,

whichever is earlier.

In case the policy is not revived during the revival period and the balance in the Policy Fund is not sufficient to recover the charges i.e. if the Policy Fund exhausts, the policy shall compulsorily be terminated with a notice to the PI.

All other charges will also continue to be deducted from the Policy Fund till the fund exhausts.

7. Premium Holidays. If the policy lapses after at least 3 years' premiums have been paid the Principal Insured has the option of either paying all the due premiums in full or avail of premium holiday by just paying the latest installment premium without any interest. The premium holidays can be availed only as long as the policy fund has a balance of at least one annualized premium at the time of revival.

8. Surrender. No surrender will be allowed.

9. Policy Loans. No policy loan will be available under this policy.

10. Assignment. No assignment will be allowed under this policy.

11. Tax Benefit: The premium payable under this product is eligible for Section 80(D) benefit of Income Tax Act, 1961.

12. Risks borne by the Policyholder:

- i) LIC's Health Protection Plus is a Unit Linked Health Insurance product which is different from the traditional insurance products and is subject to risk factors.
- ii) The premium paid in Unit Linked Life Insurance policies are subject to investment risks associated with capital markets and the NAVs of the units may go up or down based on the performance of fund and factors influencing the capital market and the insured is responsible for his/her decisions.
- iii) Life Insurance Corporation of India is only the name of the Insurance Company and LIC's Health Protection Plus is only the name of the unit linked health insurance contract and does not in any way indicate the quality of the contract, its future prospects or returns.
- iv) Please know the associated risks and the applicable charges, from your Insurance agent or the Intermediary or policy document of the insurer.
- v) The fund offered under this contract is the name of the fund and do not in any way indicate the quality of these plans, their future prospects and returns.
- vi) All benefits under the policy are also subject to the Tax Laws and other financial enactments as they exist from time to time.

13. Cooling off period: If you are not satisfied with the "Terms and Conditions" of the policy, you may return the policy to us within 15 days.

IV. EXCLUSIONS

1.CommonExclusionsin respectofHCB & MSB Benefits:

No benefits are available hereunder and no payment will be made by the Corporation for any claim for Hospital Cash Benefit and Major Surgical Benefit under this Policy on account of Hospitalization directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- a. "Pre-existing condition"- any medical condition or any related condition (e.g. illnesses, symptoms, treatments, pains and surgery) that have arisen at some point prior to the commencement of this coverage, irrespective of whether any medical treatment or advice was sought. Any such condition or related condition about which the PI or insured dependant know, knew or could reasonably have been assumed to have known, will be deemed to be pre-existing. The following conditions will also be deemed to be "pre-existing":
 - i. Conditions arising between signing the application form and confirmation of acceptance by the Corporation
 - ii. Any Sickness, illness, complication or ailment arising out of or connected to the preexisting illness

- b. Any Sickness that has been classified as an Epidemic by the -Central or State Government.
- c. Self afflicted injuries or conditions (attempted suicide), and/or the use or misuse of any drugs or alcohol.
- d. Any sexually transmitted diseases or any condition directly or indirectly caused to or associated with Human Immuno Deficiency (HIV) Virus or any Syndrome or condition of a similar kind commonly referred to as AIDS.
- e. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection military or usurped power of civil commotion or loot or pillage in connection herewith.
- f. Naval or military operations(including duties of peace time) of the armed forces or air force and participation in operations requiring the use of arms or which are ordered by military authorities for combating terrorists, rebels and the like.
- g. Any natural peril (including but not limited to avalanche, earthquake, volcanic eruptions or any kind of natural hazard).
- h. Participation in any hazardous activity or sports including but not limited to racing, scuba diving, aerial sports, bungee jumping and mountaineering or in any criminal or illegal activities.
- i. Radioactive contamination.
- j. Non-allopathic methods of surgery and treatment.

2.AdditionalExclusionsin respectofHospitalCash Benefit:

No benefits are available hereunder and no payment will be made by the Corporation for any claim for Hospital Cash Benefit under this Policy on account of Hospitalization directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- a. Hospitalization due to illness within the first 180 days from the Date of Cover commencement or 90 days from the date of revival/reinstatement if revived after discontinuance of the cover.
- b. Removal of any material that was implanted in a former surgery before Date of Cover commencement
- c. Any diagnosis or treatment arising from or traceable to pregnancy (whether uterine or extra uterine), childbirth including caesarean section, medical termination of pregnancy and/or any treatment related to pre and post natal care of the mother or the new born.
- d. Hospitalization for the sole purpose of physiotherapy or any ailment for which hospitalization is not warranted due to advancement in medical technology
- e. Any treatment not performed by a Physician or any treatment of a purely experimental nature.
- f. Any routine or prescribed medical check up or examination.
- g. Medical Expenses relating to any hospitalization primarily for diagnostic, X-ray or laboratory examinations
- h. Circumcision, cosmetic or aesthetic treatments of any description, change of gender surgery, plastic surgery (unless such plastic surgery is necessary for the treatment of Illness or Accidental Bodily Injury as a direct result of the insured event and performed with in 6 months of the same).
- i. Hospitalization for donation of an organ.
- j. Hospitalization for correction of birth defects or congenital anomalies

- k. Dental treatment or surgery of any kind unless necessitated by Accidental Bodily Injury.
- 1. Convalescence, general debility, nervous or other breakdown, rest cure, congenital diseases or defect or anomaly, sterilization or infertility (diagnosis and treatment), any sanatoriums, spa or rest cures or long term care or hospitalization undertaken as a preventive or recuperative measure.

3. AdditionalExclusionsin respectofMajorSurgicalBenefit:

No benefits are available hereunder and no payment will be made by the Corporation for any claim for Major Surgical Benefit under this Policy directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- a. Surgeries not listed in the Surgical Benefit Annexure I
- b. Surgery triggered by health related causes (and not by Accident) within the first 180 days from the commencement date or 90 days from the date of revival/reinstatement if revived after discontinuance of the cover.
- c. Any Surgery for which claim has already been made and paid by the Corporation.
- d. Any treatment not performed by a Physician/Surgeon.
- e. Any treatment including Surgery that is performed un-conventionally under experimental conditions and purely experimental in nature.
- f. Circumcision, cosmetic or aesthetic treatments of any description, change of life surgery or treatment, treatment (including surgery) for obesity, plastic surgery (unless necessary for the treatment of Illness or accidental Bodily Injury as a direct result of the insured event and performed with in 6 months of the same).
- g. Surgery for donation of an organ.
- h. Removal or correction or replacement of any material that was implanted in a former Surgery before Date of Cover commencement
- i. Surgery for correction of birth defects or congenital anomalies.
- j. Any diagnosis or treatment or surgery arising from or traceable to pregnancy (whether uterine or extra uterine).

V. INVESTMENTOFFUNDS

The premiums allocated to purchase units will be strictly invested in a Health Protection Plus Fund (Income and Growth – Low Risk) as follows:

A. Government/ Government Guaranteed/ Corporate Securities/ Debt	Not less than 50%
B. Short term investments: Money Market instruments including A above	Not more than 90%
C. Investment in listed equity shares	Not less than 10% & Not more than 50%

1. Method of Calculation of Unit price: Units will be allotted based on the Net Asset Value (NAV) on the date of allotment. There is no Bid-Offer spread. The NAV will be computed on daily basis and will be based on investment performance, Fund Management Charge and whether the fund is expanding or contracting.

a. Applicability of Net Asset Value (NAV): The premiums received up to 3 p.m. (as per IRDA guidelines) by the servicing branch of the corporation by a local cheque or by a demand draft payable at par at the place where the premium is received, the closing NAV of the day on which premium is received shall be applicable. The premiums received after such time by the servicing branch of the corporation by a local cheque or by a demand draft payable at par at the place where the premium is received, the closing NAV of the next business day shall be applicable.

b. Redeeming of Units: In respect of valid applications received for reimbursement of medical expenses, death claim, etc up to such time by the servicing branch of the Corporation closing NAV of that day shall be applicable. For the valid applications received in respect of Domiciliary Treatment Benefit, death claim etc after 3 p.m. (as per IRDA guidelines) by the servicing branch of the Corporation the closing NAV of the next business day shall be applicable.

2. Charges under the Plan:

a. Premium Allocation Charge: This is the percentage of the premium appropriated towards charges from the premium received. The balance known as allocation rate constitutes that part of the premium which is utilized to purchase (Investment) units for the policy. The allocation charges are as below:

FIRST YEAR	THEREAFTER							
30 %	6%							

The above allocation charges shall be applicable for all premiums including any additional premium paid in that particular policy year.

b. Health Insurance Charge: There will be two separate charges for the following benefits:

i) Hospital Cash Benefit

ii) Major Surgical Benefits.

These charges will be taken every month in respect of all the members covered by canceling appropriate number of units out of the Policy Fund.

These charges, during a policy year, will be based on the age nearer birthday, of each of the members covered, as at the Policy anniversary coinciding with or immediately preceding the due date of cancellation of units and hence may increase every year on each policy anniversary. The charges will also depend on whether the person covered is male or female and standard or sub-standard as per the underwriting decision.

If more than one member is covered under the policy then the total charges shall be based on the individual ages of all the members and the amount of cover for each such member.

In case of Hospital Cash Benefit, the charges will be applied on the Initial Daily Benefit as mentioned in the Policy Schedule.

The charges for Hospital Cash Benefit and/or Major Surgical Benefit will not be deducted once the benefit terminates.

AGE	H	СВ	MSB					
	Male Life	Female Life	Male Life	Female Life				
5	24.43	24.43	0	0				
15	20.71	20.71	0	0				
25	31.39	24.34	1.02	1.38				
35	33.59	29.96	1.58	1.75				
45	49.29	53.20	3.54	2.64				
55	76.08	72.53	7.28	5.16				

Specimen charges for Rs. 100/- per day for HCB and Rs. 1000/- SA for MSB for standard lives are given as under:

c. Other Charges:

Policy Administration Charges	Rs.75 per month during the first year and Rs. 25 per month during the subsequent years.
Fund Management Charges	Levied @ 1.25% per annum of the unit fund, at the time of computation of NAV which will be done on daily basis.
Bid/ Offer Spread	Nil
Service Tax Charge	 A service tax charge shall be levied on the following charges: i) Policy Administration charge and Health Insurance charges - by canceling appropriate number of units out of the Policyholder's Fund Value on a monthly basis as and when the corresponding Policy Administration and Health Insurance charges are deducted. ii) Premium allocation charge - at the time of allocation of premium. iii) Fund Management charge- at the time of computation of NAV on daily basis. The level of this charge will be as per the rate of service tax as applicable from time to time. Currently, the rate of 3% thereon and hence effective rate is 12.36%.

d. Right to revise charges-The Corporation reserves the right to revise all or any of the above charges except the Premium Allocation charge. The modification in charges will be done with prospective effect with the prior approval of IRDA.

Although the charges are reviewable, they will be subject to the following maximum limit:

- Policy Administration Charge-Rs. 150/- per month during the first policy year and Rs.50/- per month thereafter, throughout the term of the policy.
- Fund Management Charge-The Maximum for Fund will be 2.5% p.a. of Unit Fund
- Hospital Cash Cover charges and Major Surgical Benefit charges shall not exceed by more than 200% of the current rate.

Benefit Illustration :

Statutory warning

"Some benefits are guaranteed and some benefits are variable with returns based on the future performance of the life insurance company. If your policy offers guaranteed returns then these will be clearly marked "guaranteed" in the illustration table on this page. If your policy offers variable returns then the illustrations on this page will show two different rates of assumed investment returns. These assumed rates of return are not guaranteed and they are not upper or lower limits of what you might get back as the value of your policy is dependent on a number of factors including future investment performance."

PRODUCT FEATURES : 1 Name of the Product:

LIC's Health Protection Pia 2 Unique Identification No. 512L253V01

3 Sum Assured: 4 Policy Term : 30 Years 6 Mode of Premium Payment : 5 Premium Paying Term: Yearly 7 Amount of Instalment Premium 12000 8 Funds opted for: Health protection Plus Fund 9 Age: 35 Years 10 Number of lives covered: SINGLE MALE 11 Per day Hospital Cash Benefit (HCB): 2000 12 Per day Hospital Cash Benefi 4000

13 Major Surgical Benefit (MSB): 400000 in ICU (HCB):

Stater	ment of \	/arious char	ges alongwith g	rowth of the f	e fund expected over the duration of the policy with assumed rate of interst as mentioned							ntioned										
					Assuming gross interest rate of 6% p.a.							Assuming gross interest rate of 10% p.a.										
Polic y Year	An nual ised Premiu m	Premium Allocation Charge	Amount Available for investment (out of premium)	Policy Admin Charge	Fund Mgt Charge	Other Charges	Total Charges	Addition to Fund (if any)	Fund at the End	Summed or Value	Death Decelit	Maximum G Benefit the y	During	Fund Mgt Charge	Other Charges	Total Charges	Addition to Fund (ifany)	Fund at the End	Surrend er Value	Death Deselit	Benefit	Guaranteed t During year
												HCB	MSB								HCB	MSB
1	12000	3600	8400	900	86	1912	2898	401	5902	0		54000	400000	88	1912	2900	668	6168	0		54000	400000
2	12000	720	11280	300	207	1626	2132	961	16011	0		189000	400000	214	1626	2141	1629	16936	0		189000	400000
3	12000	720	11280	300	336	1691	2327	1562	26527	0	-	198000	400000	355	1693	2348	2696	28565	0	-	198000	400000
4	12000	720	11280	300	470	1767	2537	2187	37457	0		207000	400000	507	1771	2577	3848	41115	0	-	207000	400000
5	12000	720	11280	300	610	1874	2783	2836	48789	0		216000	400000	670	1880	2850	5090	54636	0	-	216000	400000
6	12000	720	11280	300	754	2015	3070	3507	60507	0	-	225000	400000	846	2025	3171	6427	69172	0	-	225000	400000
7	12000	720	11280	300	903	2246	3449	4199	72537	0		234000	400000	1035	2259	3594	7860	84717	0	-	234000	400000
8	12000	720	11280	300	1056	2389	3745	4912	84985	0		243000	400000	1237	2407	3945	9398	101450	0		243000	400000
9	12000	720	11280	300	1215	2547	4062	5650	97853	0		252000	400000	1455	2572	4327	11053	119456	0		252000	400000
10	12000	720	11280	300	1379	2732	4411	6412	111133	0	-	261000	400000	1690	2764	4754	12833	138815	0	-	261000	400000
11	12000	720	11280	300	1548	2913	4761	7198	124850	0		270000	400000	1942	2953	5195	14748	159647	0	-	270000	400000
12	12000	720	11280	300	1722	3135	5157	8009	138983	0	-	270000	400000	2213	3185	5698	16807	182036	0		270000	400000
13	12000	720	11280	300	1902	3355	5558	8845	153550	0		270000	400000	2504	3417	6222	19020	206114	0		270000	400000
14	12000	720	11280	300	2087	3581	5969	9707	168569	0		270000	400000	2818	3656	6774	21402	232022	0		270000	400000
15	12000	720	11280	300	2278	3830	6409	10595	184036	0		270000	400000	3155	3921	7376	23964	259890	0		270000	400000
16	12000	720	11280	300	2475	4064	6839	11511	199987	0		270000	400000	3518	4172	7990	26721	289901	0		270000	400000
17	12000	720	11280	300	2679	4248	7226	12456	216497	0		270000	400000	3910	4375	8585	29695	322291	0		270000	400000
18	12000	720	11280	300	2889	4509	7697	13433	233512	0		270000	400000	4332	4657	9289	32900	357182	0		270000	400000
19	12000	720	11280	300	3105	4774	8179	14440	251053	0		270000	400000	4787	4947	10034	36354	394783	0		270000	400000
20	12000	720	11280	300	3328	5073	8701	15476	269108	0		270000	400000	5277	5274	10851	40075	435287	0		270000	400000
21	12000	720	11280	300	3558	5364	9221	16544	287711	0		270000	400000	5805	5595	11700	44086	478953	0		270000	400000
22	12000	720	11280	300	3794	5681	9775	17644	306860	0		270000	400000	6374	5946	12620	48409	526021	0		270000	400000
23	12000	720	11280	300	4038	5988	10326	18777	326591	0		270000	400000	6988	6292	13580	53071	576792	0		270000	400000
24	12000	720	11280	300	4289	6307	10896	19944	346919	0		270000	400000	7650	6653	14603	58100	631568	0	-	270000	400000
25	12000	720	11280	300	4547	6652	11499	21145	367845	0		270000	400000	8365	7045	15709	63525	690664	0		270000	400000
26	12000	720	11280	300	4813	7003	12116	22382	389391	0		270000	400000	9135	7448	16883	69380	754440	0		270000	400000
27	12000	720	11280	300	5087	7452	12838	23653	411486	0		270000	400000	9967	7954	18221	75694	823193	0		270000	400000
28	12000	720	11280	300	5366	7960	13627	24955	434095	0		270000	400000	10863	8527	19690	82500	897284	0		270000	400000
29	12000	720	11280	300	5653	8456	14410	26288	457254	0		270000	400000	11829	9093	21222	89837	977179	0	-	270000	400000
30	12000	720	11280	300	5946	9048	15294	27651	480891	0		270000	400000	12870	9761	22931	97745	1063273	0	-	270000	400000
31	0	0	0	300	6102	9495	15897	28376	493369	0		270000	400000	13847	10293	24439	105159	1143993	0	-	270000	400000
32	0	0	0	300	6258	10113	16671	29101	505799	0		270000	400000	14898	11003	26201	113148	1230939	0	-	270000	400000
33	0	0	0	300	6413	10755	17468	29822	518153	0		270000	400000	16032	11745	28077	121753	1324615	0	-	270000	400000
34	0	0	0	300	6567	11418	18285	30537	530405	0		270000	400000	17253	12519	30071	131026	1425571	0	-	270000	400000
35	0	0	0	300	6719	12106	19125	31246	542526	0		270000	400000	18569	13326	32195	141022	1534397	0	-	270000	400000
36	0	0	0	300	6870	12820	19989	31946	554483	0		270000	400000	19988	14171	34458	151798	1651737	0	-	270000	400000
37	0	0	0	300	7018	13522	20841	32637	566280	0		270000	400000	21518	15016	36834	163420	1778323	0	-	270000	400000
38	0	0	0	300	7165	14237	21702	33318	577896	0		270000	400000	23169	15886	39355	175960	1914928	0	-	270000	400000
39	0	0	0	300	7309	14925	22534	33989	589351	0		270000	400000	24952	16742	41994	189497	2062432	0	-	270000	400000
40	0	0	0	300	7452	15565	23317	34652	600686	0		270000	400000	26877	17566	44743	204120	2221810	0	-	270000	400000

IN THIS POLICY, THE INVESTMENT RISK IS BORNE BY THE POLICY HOLDER AND THE ABOVE INTEREST RATES ARE ONLY FOR ILLUSTRATION PURPOSE

Note: 1) Other charges includes the charges for HCB,MSB and service tax.

2)For fund at the end in the above benefit illustration, it is assumed that premiums have been paid as and when due and no domiciliary treatment benefit has been availed earlier. 3)Maximum HCB shown above is inclusive of 9 days stay in ICU in the first year and 30 days in subsequent years 4) Maximum life time benefit for HCB is 365 days and for MSB 3 times of the initial sum assured.

- i. This illustration is applicable to a non-smoker male standard (from medical, life style and occupation point of view) life.
- ii. The non-guaranteed benefits (1) and (2) in above illustration are calculated so that they are consistent with the Projected Investment Rate of Return assumption of 6% p.a.(Scenario 1) and 10% p.a. (Scenario 2) respectively. In other words, in preparing this benefit illustration, it is assumed that the Projected Investment Rate of Return that LICI will be able to earn throughout the term of the policy will be 6% p.a. or 10% p.a., as the case may be. The Projected Investment Rate of Return is not guaranteed.
- iii. The main objective of the illustration is that the client is able to appreciate the features of the product and theflow of benefits in different circumstances with some level of quantification.
- iv. LIC does not authorize its agents/intermediaries, staff and officials to express their opinion on the future performance of the "ULIP" fund, excepting the above illustrative rate of 6% and 10% growth.
- v. Domiciliary Treatment Benefit can be claimed from the 3rd year onwards after at least three years premiums have been paid.

vi. Maximum Hospital Cash Benefit can be claimed for 365 days.

vii. Maximum Major Surgical Benefit can be claimed upto three times of the Sum Assured

SECTION 41 OFINSURANCEACT 1938

(1) No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out 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: provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.

(2) Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

SECTION 450FINSURANCEACT 1938 – INDISPUTABILITYCLAUSE

No policy of Life Insurance shall, after the expiry of two years from the date on which it was effected, be called in question by an Insurer on the ground that a statement made in the proposal for insurance or any report of a medical officer or referee or friend of the Insured or in any other document leading to the issue of the Policy, was inaccurate or false, unless the insurer shows such statement was on material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the policy holder and that the policy holder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose.

Note: "Material" shall mean and include all important, essential and relevant information in the context of underwriting the risk to be covered by the corporation.

Note: Conditions apply for which please refer to the Policy document or contact our nearest Branch Office.