I. INTRODUCTION

Secure Shield policy can protect the policy holder from economic concerns arising from the events such as loss of job, hospital daily cost and critical illness that may occur during the coverage period. It is essential that people understand the features, advantages and the necessity of insurance policies in detail.

Acko General Insurance provides the following benefits to its customers:

- Wide range of Sum Insured Limit
- Easy & Transparent buying Process
- Guidance from Trained Professionals: Get unbiased insurance related advice from Acko’s trained professionals.
- Quick Claim Settlement: When a claim is filed, Acko tries to settle it in a quick and hassle free manner.

II. BENEFITS:

1. Hospital Daily Allowance:

If an Insured Person requires Hospitalization due to an Injury or Illness suffered or contracted during the Coverage Period, then We will pay the daily allowance amount specified against this Benefit in the Certificate of Insurance, for each continuous and completed period of 24 hours of Hospitalisation

Specific Exclusions:

1. The Illness has not arisen within first 30 days of the Risk Commencement Date;
2. Day care treatments are excluded from the scope of this Benefit.
3. 2 years’ Waiting Period: A Waiting Period of 2 years will be applicable for the below Illnesses. However, a 2 year Waiting Period would be considered to have been served if the Insured Person was insured continuously and without interruption for at least 2 years under another Indian insurer’s individual health / Family Health insurance policy for the reimbursement of medical costs for inpatient treatment in a Hospital. In case the Insured Person was insured for 1 year in the previous policy, the below Illnesses would be covered after completion of 1 year of insurance with Us.
   a. Congenital Internal Anomaly
   b. Varicose veins and Varicose Ulcers
   c. Rheumatism and arthritis of any kind
   d. Treatment of diseases on ears/ tonsils /adenoids /paranasal sinuses/ Deviated Nasal Septum
   e. Stones in the Urinary and Biliary systems
   f. Gastric or Duodenal Ulcer
   g. Any type of benign Cyst/ Nodules/ Polyps/Tumours/ Breast Lumps
   h. Intervertebral Disc Prolapse, and Degenerative Disc/vertebral Disorders
   i. Cataract
   j. Benign Prostatic Hypertrophy
   k. Myomectomy, Hysterectomy unless because of malignancy
   l. Dilatation and curettage (D&C)
   m. Anal Fistula, Fissure and Piles
   n. All types of Hernia
   o. Hydrocele
   p. Chronic Renal Failure
   q. Joint replacement Surgery unless because of accident
2. Loss of Job

If an Insured Person suffers an Involuntary Unemployment during the Coverage Period resulting in loss of Income, then We will pay the monthly amount specified in the Certificate of Insurance against this Benefit, or the number of EMI Amount(s) as specified in the Certificate of Insurance falling due in respect of the Loan Account Number specified against this benefit in the Certificate of Insurance, as applicable, for each continuous and completed month specified in the Certificate of Insurance from the date of such Involuntary Unemployment.

Specific Exclusions:

1. Any Involuntary Unemployment of the Insured Person that is attributed to any dishonesty, misconduct or fraud, or any wilful violation by the Insured Person of any internal rules/regulations/policies, or any laws or any directives issued by a public authority and in force, or any disciplinary action initiated against the Insured Person by his/her employer.

2. Unemployment from any occupation or job which is a Temporary or Seasonal Job, or where the Insured Person is not on the direct payroll of the employer.

3. Any voluntary unemployment, self-resignation, or voluntary retirement.

4. Any Involuntary Unemployment or suspension of the Insured Person at his/her primary occupation, which is temporary in nature.

5. Any unemployment from any occupation or job in which no salary was ever provided to the Insured Person.

6. Any unemployment occurring while the Insured Person, who is a Salaried Individual, is still under his/her probation, including any unemployment resulting from non-confirmation of his/her employment by the employer during or after the period on probation.

7. Any suspension of the Insured Person from his/her primary occupation on account of any pending enquiry being conducted by the employer or a public authority.

8. Any unemployment if it arises as a result of the place of employment or part thereof being temporary closed down for a period not exceeding the minimum number of days specified in Certificate of Insurance/Schedule due to lay off, lockout, strike or any other reason.

9. Any unemployment due to non-extension of a maternity/paternity leave, either as per the Maternity Benefit Act 1961, as amended from time to time, or as per the employer’s internal regulation/policy in force at the time of any event or occurrence that may give rise to a claim.

10. Any unemployment due to any strike or labour disturbance in which the Insured Person is directly or indirectly involved.

11. Any reasonable belief that the Insured Person was aware that such loss of Income was likely to happen, whether or not any official communication was provided, at the time of Risk Commencement Date.

12. Withdrawal of offer of employment by an employer.

13. Medical exclusions
   
   a. Any unemployment if it arises as a result of intentional self-inflicted injuries.
   
   b. Any unemployment if it arises as a result of termination of service on the grounds of a Pre-Existing Diseases.
   
   c. Any unemployment if it arises as a result of intake of alcohol or drugs by the Insured Person.
   
   d. Any unemployment if it arises as a result of insured person being on family leave or sick leave due to childbirth or pregnancy.
3. Critical Illness Benefit

If an Insured Person is First Diagnosed to be suffering from a Critical Illness of the nature specified in Annexure A of the Policy, during the Coverage Period, then We will pay the Sum Insured under this Benefit as specified in the Certificate of Insurance.

Details of Covers under Critical Illness Benefit along with the grouping

<table>
<thead>
<tr>
<th>S.NO.</th>
<th>CRITICAL ILLNESS</th>
<th>15 CI's</th>
<th>18 CI's</th>
<th>25 CI's</th>
<th>36 CI's</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cancer of Specified Severity</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>2</td>
<td>Kidney Failure Requiring Regular Dialysis</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>3</td>
<td>Multiple Sclerosis with Persisting Symptoms</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>4</td>
<td>Major Organ / Bone Marrow Transplant</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>5</td>
<td>Open Heart Replacement or Repair of Heart Valves</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>6</td>
<td>Open Chest CABG</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>7</td>
<td>Permanent Paralysis of Limbs</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>8</td>
<td>Myocardial Infarction (First Heart Attack – of Specific Severity)</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>9</td>
<td>Stroke Resulting in Permanent Symptoms</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>10</td>
<td>Benign Brain Tumor</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>11</td>
<td>Parkinson’s Disease</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>12</td>
<td>Coma of Specified Severity</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>13</td>
<td>End Stage Liver Failure</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>14</td>
<td>Alzheimer’s Disease</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>15</td>
<td>Aorta Graft Surgery</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>16</td>
<td>Major Burns</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>17</td>
<td>Loss of Hearing (Deafness)</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>18</td>
<td>Loss of Speech</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>19</td>
<td>Loss of Vision (Blindness)</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>20</td>
<td>Motor Neurone Disease with Permanent Symptoms</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>21</td>
<td>Loss of Limbs</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>22</td>
<td>Aplastic Anaemia</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>23</td>
<td>End Stage Lung Failure</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>24</td>
<td>Primary (Idiopathic) Pulmonary Hypertension</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>25</td>
<td>Bacterial Meningitis</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>26</td>
<td>Apallic Syndrome or Persistent Vegetative State (PVS)</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>27</td>
<td>Coronary Angioplasty (PTCA)[1]</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>28</td>
<td>Encephalitis</td>
<td>×</td>
<td>×</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>29</td>
<td>Fulminant Hepatitis</td>
<td>×</td>
<td>×</td>
<td>×</td>
<td>✓</td>
</tr>
<tr>
<td>30</td>
<td>Chronic Relapsing Pancreatititis</td>
<td>×</td>
<td>×</td>
<td>×</td>
<td>✓</td>
</tr>
<tr>
<td>31</td>
<td>Major Head Trauma</td>
<td>×</td>
<td>×</td>
<td>×</td>
<td>✓</td>
</tr>
<tr>
<td>32</td>
<td>Medullary Cystic Disease</td>
<td>×</td>
<td>×</td>
<td>×</td>
<td>✓</td>
</tr>
<tr>
<td>33</td>
<td>Muscular Dystrophy</td>
<td>×</td>
<td>×</td>
<td>×</td>
<td>✓</td>
</tr>
<tr>
<td>34</td>
<td>Poliomyelitis</td>
<td>×</td>
<td>×</td>
<td>×</td>
<td>✓</td>
</tr>
<tr>
<td>35</td>
<td>Systemic Lupus Erythematos</td>
<td>×</td>
<td>×</td>
<td>×</td>
<td>✓</td>
</tr>
</tbody>
</table>
### III. EXCLUSIONS:

We shall not be liable to make any payment for any claim under the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following, except where provided to the contrary under any Benefit(s) within the Policy:

- a. Any Illness or Critical Illness arising within first 30 days of the Risk Commencement Date
- b. Any Illness or Critical Illness arising within the Waiting Period(s) specified in the Schedule or Certificate of Insurance. This Waiting Period commences at the Risk Commencement Date and concurrently with the first 30 days of the Risk Commencement Date specified in Exclusion (a) of this Section.
- c. The above Waiting Periods in Exclusions (a) and (b) and the Specific Exclusions to Benefit 1.1 (Hospital Daily Allowance) would be considered to have been served if the Insured Person was insured continuously and without interruption for at least 1 year under another Indian insurer's individual health / Family Health insurance policy for the reimbursement of medical costs for inpatient treatment in a Hospital.
- d. Any Pre-Existing Disease, or any Injury or condition arising out of a Pre-Existing Disease, or any complication arising therefrom.
- e. Suicide or attempted suicide, intentional self-inflicted Injury or acts of self-destruction, whether the Insured Person is medically sane or insane.
- f. Any change of profession after the inception of the Policy which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Certificate of Insurance.
- g. Any External Congenital Anomalies or in consequence thereof.
- h. Any certification provided by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's family.
- i. Any claim directly or indirectly caused by or associated with any venereal disease or sexually transmitted disease.
- j. Any claim directly or indirectly caused due to or associated with human T-call Lymph tropic virus type III (HTLV-III or IITLB-III) or Lymphadinopathy Associated Virus (LAV) and its variants or mutants, Acquired Immune Deficiency Syndrome (AIDS) whether or not arising out of HIV, AIDS related complex syndrome (ARCS) and any injury caused by and/or related to HIV.
- k. Hospitalization, if applicable, for the following treatments:
  - i. Laser treatment for correction of eye due to refractive error;
  - ii. Aesthetic or change-of-life treatments of any description such as sex transformation operations, treatment towards changes in appearance or any procedure which is aimed to improve physical appearance;
  - iii. Cosmetic treatments (including any complications arising out of cosmetic treatments) unless necessitated by traumatic Injury, or Illness;
  - iv. Vaccination or inoculation unless forming a part of post-animal bite treatment;
  - v. Treatment of obesity (including morbid obesity) and any other weight control program, general debility, convalescence, run—down conditions, rest cure, treatment of sleep apnea.
  - vi. Naturopathy Treatments.
  - vii. Sterility, treatment whether to effect or to treat infertility; any fertility, sub—fertility or assisted conception procedure; surrogate or vicarious pregnancy; birth control, contraceptive supplies or services including complications arising due to supplying services;
  - viii. Mental Illness including psychiatric conditions, mental disorders, disturbances of consciousness, strokes, fits or convulsions which affect the entire body and pathological disturbances caused by mental reaction to the same, unless expressly specified to be covered in the Certificate of Insurance.
  - ix. Any dental treatment or Surgery of a corrective, cosmetic or aesthetic nature unless carried out under general anaesthesia and is necessitated by illness or Injury during the Coverage Period.
  - l. Any claim arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen.

**Note:** The Benefits specified above shall be subject to the terms and conditions of this Policy, and you are advised to read the policy for a full description of the terms, conditions and provisos applicable to each of the Benefits specified above.
m. Any claim arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor or civil commotion with criminal intent.

n. Any claim caused by participation of the Insured Person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.

o. Any claim arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air-force operation, civil war, public defence, rebellion, revolution, insurrection, military or usurped power.

p. Any claim arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.

q. Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any illness, incapacitating disability or death.

r. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disability or death.

**Note:** The policy exclusions are subject to the policy terms and conditions, and you are advised to read the policy for a full description of the terms and conditions thereto.

IV. CLAIMS PROCEDURE:

- On the occurrence of or discovery of any Injury which may give rise to a claim under this Policy, We shall be provided with the following necessary information and documentation in respect of the claim within 30 days of the occurrence of the Insured Person’s Injury:

- For details on the claims procedures and requirements or any assistance during the process, We may be contacted at Our call centre on the toll free number: 1860 266 2256 or through Our website: www.acko.com or mail us at hello@acko.com

V. CONTACT US

1. You can reach Us through any of the following methods:

   - Call Us on Our toll free number: 1860 266 2256
   - Write to us On at: hello@acko.com
   - Visit Our website: www.acko.com

2. If you have a grievance that You want Us to redress, You may contact Us with details of Your grievance through:

   - Website: www.acko.com
   - Email: grievance@acko.com
   - Toll Free No: 1860 266 2256

VI. SECTION 41 OF INSURANCE ACT, 1938 (PROHIBITION OF REBATES, AS AMENDED)

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out 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 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 prospectus or tables of the insurers.
2. Any person making default in complying with the provisions of this section shall be liable for penalty which may extend to 10 lakh rupees.

VII. DISCLAIMER:

- This is only a summary of the product features. The actual benefits available are as described in the policy and will be subject to the policy terms, conditions and exclusions. Please seek the advice of your insurance advisor if you require any further information or clarifications.

**Note:** Policy Term and Conditions & Premium rates are subject to change with prior approval from IRDAI.