

PIONEER GENERAL SELF CARE

The Product

SELF CARE offers you compensation in the event of injuries or disability as a result of violent, accidental, external and visible events. In the event of hospitalization following an accident the medical expenses benefit will be paid directly to the hospital or medical facility. Alternatively the company will reimburse

SCOPE OF BENEFITS

Accidental Death: The death of the Insured occurring within 12 calendar months.

Permanent Total Disablement: Disability that renders the Insured incapable of attending to their usual business or occupation or engaging in any occupation. Provided such disability is total, continuous, permanent and occurs within 12 calendar months.

Hospital Cash: This is Hospital cash is payable once following hospitalization, excluding the first three days.

Temporary total Disablement: Pays a weekly income for the period you are out of work as a result body injury from an accident.

Medical Expenses: The actual cost of medical, surgical, hospital and related expenses necessarily and reasonably incurred for treatment of injuries resulting from an accident.

Artificial Medical Appliances : The actual cost of appliances/aides, incurred after treatment necessarily and reasonably incurred for treatment of injuries resulting from an accident.

Funeral Expense (Accidental Death): Payable within 48 hours following a fatal

NOTE: PVT is covered

Self Care

Schedule of Benefits

Benefits	Plan A	Plan B	Plan C	Plan D	Plan E	Plan F	Plan G
Death	500,000	750,000	1,000,000	2,000,000	3,000,000	4,000,000	5,000,000
Permanent Total Disablement	500,000	750,000	1,000,000	2,000,000	3,000,000	4,000,000	5,000,000
Hospital Cash	5,000	7,500	10,000	12,500	15,000	17,500	20,000
Temporary total Disablement	500	750	1,000	2,000	3,000	4,000	5,000
Weekly max 52 weeks							
Accidental Medical Expenses	50,000	75,000	100,000	200,000	300,000	400,000	500,000
Artificial Appliances	5,000	7,500	10,000	20,000	30,000	40,000	50,000
Funeral Expenses (Accidental Death)	5,000	7,500	10,000	20,000	30,000	40,000	50,000
Actual Premium Inclusive of Levies	1500	2,200	3,000	6,000	9,000	11,500	14,500

Entry age Limit is 18 - 65 years, covered up to a max of 70 years

NOTE: Above rates are for standard risks (Clerical Occupations) only, non-standard risk are on quotation basis

WHAT IS NOT COVERED

The insurers will not indemnify the insured in respect of loss, damage or liability directly or indirectly caused by or arising out of or aggravated by:

- War.
- Nuclear reaction, nuclear radiation or radioactive contamination.
- Willful act or willful negligence of the Insured or of his representatives.
- Terrorism
- Deductible / Excess.
- Consequential loss of any kind.
- Liability that would not have attached also in the absence of an agreement.

*** Kindly refer to the policy document for the full list of exclusions***

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