

Policy Usage Guide

enhancē™

High Deductible Health Insurance plan

Note: This is a illustrative summary description of the health insurance policy cover for quick customer overview and does not in any way claim to present exhaustive information. Please refer to policy document for complete details.

WHAT IS COVERED?

Refer to policy T&C

- Hospitalization Expenses Upto sum insured after deductible.
- In-patient Care If the Insured Person is hospitalized for a minimum period of 24 consecutive hours, the Company pays for the expenses pertaining to in-patient treatment such as room charges, nursing expenses, intensive care unit charges, surgeon's fee, doctor's fee, anesthesia, blood, oxygen, operation theatre charges, etc.
- Day Care Treatment The Company even pays reimburses for medical expenses incurred during specified treatments that require the Insured Person to be hospitalized for less than 24 hours.
- Room Category Single Private Room with A.C.

Clause Benefit 1

Clause 3.1(a)(i) Benefit 1

3.1(a)(ii) Benefit 1

Clause 3.1(b)Benefit 1 Pre-hospitalization Medical Expenses

The Insured Person is covered for medical expenses incurred immediately 30 days prior to the hospitalization.

Clause 3.2(a)i Benefit 2

Post-hospitalization Medical Expenses

The Company covers medical expenses incurred by the Policyholder/ Insured Person immediately 60 days after the discharge from hospital.

Clause 3.2(a)ii Benefit 2

Organ Donor Cover

The Policyholder will be reimbursed medical expenses incurred by an organ donor who undergoes any organ transplant surgery for the use of the Insured Person.

Clause 3.3 Benefit 3

Health Check-up

The Company shall arrange for a health check-up for each adult member covered under the policy. Clause 3.4 Benefit 4

Enhance Anywhere

Get re-imbursement of the Medical Expenses incurred for select diseases/illness when treatment is received outside India.

3.5 Benefit 5

Everyday Care - Get access to Host of Day to Day Medical Services

Add-on Benefit 1

- a. Unlimited visits with Medical Practitioners across our Network at a nominal charge (a maximum of 4 visits for the same illness or disease)
- b. Discounts at the Network pharmacy outlets, diagnostic centers and other such medical service providers.
- Expert Opinion

The Insured Person is entitled to an expert opinion from a specialist doctor, on ailments pertaining to certain specified major illnesses.

Add-on Benefit 2

WHAT IS NOT COVERED?



Any hospital admission primarily for investigation/diagnostic purposes, infertility, circumcision, sex change, surgery, cosmetic surgery & plastic surgery, refractive error correction, substance abuse, self-inflicted injuries war, terrorism, civil war or breach of law. Treatment expenses in blacklisted hospitals is also not covered.

WAITING PERIOD



The time span during which you can not claim some or all benefits, specified for the illnesses covered under the insurance policy. A 30 day initial wait period applies at start of policy except for policy renewal & accident cases. For specified illness, treatment & surgeries for example – Hernia, Ulcer, ENT related, Arthirities, Ligament Tear, Cataract & Stone the applicant will wait 24 month and for pre-existing aliment 36 months.

Clause 4.1(a) (i)(ii)(iii)

Note: Information provided is representative and summary of waiting period applicable under the policy, for complete details please refer to T&C

HOW TO CLAIM



There are two modes of claiming, cashless & reimbursement.

- In case of cashless claim, the individual can get hospitalized in any of our empaneled network hospitals and the hospital bill will be settled directly by the insurance company.
- In case of reimbursement: The insured members has the flexibility to visit a hospital that can be outside of our empaneled network list, wherein they can settle the hospitalization bill and claim for the reimbursements of same as per policy terms & conditions, after getting discharged.
- We request all our insured members to intimate us of any accident or illness (for cashless claims) before hospitalization. For unplanned hospitalization within 24 hours of admission and in case of planned hospitalization at least 48 hours prior to the planned date of admission to hospital.
- For hassle free claim intimation: just scan and upload the claim documents at self-help portal link.
- For hard copy claim intimation send us at: Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road, Sector-43, Gurugram-122009 (Haryana)

HOW CAN I RENEW POLICY

On basis of your existing policy details and renewal request, a new renewal premium will be intimated to you within specified period before the policy expires. You can pay renewal premium through below payment modes.



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Paytm

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PhonePe

Through Mobile app Scan QR code Through website

Cheque/DD

EMI through

Paytm

HDFC & Axis Bank branches

Note:This summary description is only to aid your understanding of the primary coverage / benefits offered. For detailed information please refer to related policy document. In case of dispute, the terms and conditions detailed in the policy document and policy schedule shall prevail.

Care Health Insurance Limited

Regd. Office: 5th Floor, 19 Chawla House, Nehru Place, New Delhi-110019 Corresp. Office: Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road, Sector-43, Gurugram-122009 (Haryana) Website: www.careinsurance.com

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