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Customer Information Sheet

Customer Information Sheet / Know Your Policy

This document provides key information about your policy. You are also advised to go through your policy document.

Title	Description (Please refer to the applicable Policy Clause number in next column)	Policy Clause Number																	
Name of the Insurance Product/Policy	Extra Care																		
Policy Number																			
Type of the Insurance Product/Policy	Indemnity																		
Sum Insured (Basis) (Along with amount)	<ul style="list-style-type: none"> • Individual Sum Insured or • Floater Sum Insured <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Benefits</th> <th>Description</th> </tr> </thead> <tbody> <tr> <td>Concierge/Geriatric Care</td> <td>The following services are available at home i. Emergency Doctor on Call ii. Access to 24*7 Help Desk iii. Fortnightly health check up via electronic mode Once in a 15 Days iv Health related content access</td> </tr> <tr> <td>Palliative Care</td> <td>Up to Rs. 5000 per day, maximum up to 1 Lac in a Policy Year</td> </tr> <tr> <td>Home Modifications</td> <td>Up to Rs. 5000/ 10,000 in a Policy Year</td> </tr> <tr> <td>Home Physiotherapy</td> <td>Up to 10 Sessions at home per Insured Person per Policy Year. Coverage amount limited to 1000 / 2000/ 5000 / 10000 per session. Payable on reimbursement basis.</td> </tr> <tr> <td>Sub-Limit on Specified Diseases</td> <td>Option to Select the Sublimit on listed treatments and procedures.</td> </tr> <tr> <td>Vaccination cover</td> <td>Covers Pneumococcal, Influenza, Zoster vaccination cost up to Rs. 5,000 /10,000 / 20,000</td> </tr> <tr> <td>Nursing Care</td> <td>Up to Rs. 500/1000 per day, max. 7 days in a Policy Year</td> </tr> <tr> <td>Compassionate Care</td> <td>Up to Rs. 500/1000 per day, max 14 days in a Policy Year if Insured Person cannot perform ADL</td> </tr> </tbody> </table>		Benefits	Description	Concierge/Geriatric Care	The following services are available at home i. Emergency Doctor on Call ii. Access to 24*7 Help Desk iii. Fortnightly health check up via electronic mode Once in a 15 Days iv Health related content access	Palliative Care	Up to Rs. 5000 per day, maximum up to 1 Lac in a Policy Year	Home Modifications	Up to Rs. 5000/ 10,000 in a Policy Year	Home Physiotherapy	Up to 10 Sessions at home per Insured Person per Policy Year. Coverage amount limited to 1000 / 2000/ 5000 / 10000 per session. Payable on reimbursement basis.	Sub-Limit on Specified Diseases	Option to Select the Sublimit on listed treatments and procedures.	Vaccination cover	Covers Pneumococcal, Influenza, Zoster vaccination cost up to Rs. 5,000 /10,000 / 20,000	Nursing Care	Up to Rs. 500/1000 per day, max. 7 days in a Policy Year	Compassionate Care
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<p>Policy Coverage (What the policy covers?)</p> <p>(Policy Clause Number/s)</p>	<p>1. Concierge/Geriatic Care: Provide following services at home through Company's network:</p> <ul style="list-style-type: none"> i. Emergency Doctor on Call ii. Access to 24*7 Help Desk iii. Fortnightly health check-up via electronic mode- Once in a 15 Days iv. Health related content access <p>2. Palliative Care - Indemnify medical expenses up to Rs. 5000 per day, max up to 1 Lac in a Policy Year on palliative care, if treating Medical Practitioner certifies that Insured Person requires Palliative Care on Diagnosis of terminal illness.</p> <p>3. Home Modification - Home Modification expenses covered up to the specified amount, as opted, if post discharge from hospital Insured Person requires mobility support to facilitate Insured Person's movement at his/her place of residence.</p> <p>4. Home Physiotherapy - Reimburse medical expenses up to the specified amount per session, as opted, max up to 10 sessions, incurred on physiotherapy session taken at Home prescribed by a qualified Medical Practitioner due to any illness/ injury.</p> <p>5. Sub-Limit on Specified Diseases - Sub-limit on listed treatment and procedures up to the specified amount applicable on the Base Policy against specified treatment and procedure.</p> <p>6. Vaccination Cover - Cover Pneumococcal, Influenza and Zoster vaccination cost up to the specified amount, as opted.</p> <p>7. Nursing Care – Expenses incurred for hiring of a nurse, recommended and certified by attending Medical Practitioner to avail post-operative care, covered up to the specified amount per day, as opted, for maximum 7 days in a Policy Year.</p> <p>8. Compassionate Care - Expenses incurred for hiring of a compassionate caregiver recommended and certified by attending Medical Practitioner after discharge from the hospital, if Insured Person is unable to perform Activities of Daily Living. Covered up to the specified amount per day, as opted, for maximum 14 days in a Policy Year.</p>	<p>3.1</p> <p>3.2</p> <p>3.3</p> <p>3.4</p> <p>3.5</p> <p>3.6</p> <p>3.7</p> <p>3.8</p>
<p>Exclusions</p> <p>(What the policy does not cover)</p>	<p>(a) Permanent Exclusion This Add-on Policy shall follow exclusions as mentioned in the Base Policy.</p> <p>(b) Specific Exclusions Any Claim of an Insured Person arising due to any of the following shall not be admissible unless expressly stated to the contrary elsewhere in the Policy Terms and conditions.</p> <ul style="list-style-type: none"> 1. Taking part or is supposed to participate in a naval, military, air force operation or aviation in a professional or semi-professional nature. 2. Treatment taken from anyone who is not a Medical Practitioner/therapist or from a Medical 	<p>4</p>

	<p>Practitioner/therapist who is practicing outside the discipline for which he is licensed or any kind of self medication.</p> <ol style="list-style-type: none"> 3. Hydrotherapy, Acupuncture, Reflexology, Chiropractic treatment or treatment related to any unrecognized systems of medicine. 4. War (whether declared or not) and war like occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrections, mutiny, military or usurped power, seizure, capture, arrest, restraints and detainment of all kinds. 5. Act of self-destruction or self-inflicted Injury, attempted suicide or suicide while sane or insane or Illness or Injury attributable to consumption, use, misuse or abuse of tobacco, intoxicating drugs, alcohol or hallucinogens. 6. Nuclear, chemical or biological attack or weapons, contributed to, caused by, resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense. For the purpose of this exclusion: <ol style="list-style-type: none"> a. Nuclear attack or weapons means the use of any nuclear weapon or device or waste or combustion of nuclear fuel or the emission, discharge, dispersal, release or escape of fissile/ fusion material emitting a level of radioactivity capable of causing any Illness, incapacitating disablement or death. b. 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 disablement or death. c. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) micro-organisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any Illness, incapacitating disablement or death. 7. Impairment of an Insured's intellectual faculties by abuse of stimulants or depressants unless prescribed by a medical practitioner. 8. Any other exclusion as specified in the Policy Schedule. <p>Note: In addition to the foregoing, any loss, claim or expense of whatsoever nature arising out of, contributed to, caused by, resulting from, or in connection with any action taken in controlling, preventing, suppressing, minimizing or in any way relating to the above Permanent Exclusions shall also be excluded</p>	
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<p>Waiting Period Time period during which specified diseases/ treatments are not covered</p> <p>It is counted from the beginning of the policy coverage.</p>	<p>Initial waiting Period : 30 days for all illnesses (not applicable in case of continuous renewal or accidents)</p>	4.1(a)																				
<p>Financial Limits of Coverage</p> <p>I. Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit)</p> <p>ii. Co-payment (It is a specified amount/ percentage of the admissible claim amount to be paid by policyholder/ insured)</p> <p>iii. Deductible (It is a specified amount :</p> <ul style="list-style-type: none"> - up to which an insurance company will not pay any claim , and - which will be deducted from total claim amount is more than the specified amount) <p>iv. Any other limit (as applicable)</p>	<p>I. The policy will pay only up to the limits specified hereunder for the following diseases/procedures :</p> <table border="1" data-bbox="341 381 941 660"> <thead> <tr> <th>Treatments</th> <th>Sub-Limit</th> </tr> </thead> <tbody> <tr> <td rowspan="3">Cataract (Per Eye)</td> <td>(SI <Rs.10L) - up to Rs.30,000</td> </tr> <tr> <td>(SI=Rs.10L- Rs.20L) – up to Rs.40,000</td> </tr> <tr> <td>(SI > Rs.20L) – up to Rs.50,000</td> </tr> <tr> <td rowspan="3">Knee Replacement (Per Knee)</td> <td>(SI <Rs.1.0L) - up to Rs.1,25,000</td> </tr> <tr> <td>(SI=Rs.10L- Rs.20L) – up to Rs.1,50,000</td> </tr> <tr> <td>(SI > Rs.20L) – up to Rs.2,00,000</td> </tr> </tbody> </table> <p>Treatment for each and every Ailment / Procedure mentioned below:-</p> <table border="1" data-bbox="341 774 941 1099"> <tbody> <tr> <td>I. Cerebrovascular Accident and Cardio vascular Diseases</td> <td rowspan="4">(SI <Rs.10L) - up to Rs.3,00,000 (SI=Rs.10L- Rs.20L) – up to Rs.4,00,000 (SI > Rs.20L) – up to Rs.5,00,000</td> </tr> <tr> <td>ii. Cancer (Including Chemotherapy / Radiotherapy)</td> </tr> <tr> <td>iii. Medical Renal Diseases (Including Dialysis)</td> </tr> <tr> <td>iv. Treatment of Breakage of Long Bones</td> </tr> </tbody> </table> <p>Treatment for each and every Ailment / Procedure mentioned below:-</p> <table border="1" data-bbox="341 1190 941 1483"> <tbody> <tr> <td>I. Surgery for treatment of all types of Hernia</td> <td rowspan="4">(SI <Rs.10L) - up to Rs.1,00,000 (SI=Rs.10L- Rs.20L) – up to Rs.1,50,000 (SI > Rs.20L) – up to Rs.2,00,000</td> </tr> <tr> <td>ii. Hysterectomy</td> </tr> <tr> <td>iii. Surgeries for Benign Prostate Hypertrophy (BPH)</td> </tr> <tr> <td>iv. Surgical treatment of stones of renal system</td> </tr> </tbody> </table>	Treatments	Sub-Limit	Cataract (Per Eye)	(SI <Rs.10L) - up to Rs.30,000	(SI=Rs.10L- Rs.20L) – up to Rs.40,000	(SI > Rs.20L) – up to Rs.50,000	Knee Replacement (Per Knee)	(SI <Rs.1.0L) - up to Rs.1,25,000	(SI=Rs.10L- Rs.20L) – up to Rs.1,50,000	(SI > Rs.20L) – up to Rs.2,00,000	I. Cerebrovascular Accident and Cardio vascular Diseases	(SI <Rs.10L) - up to Rs.3,00,000 (SI=Rs.10L- Rs.20L) – up to Rs.4,00,000 (SI > Rs.20L) – up to Rs.5,00,000	ii. Cancer (Including Chemotherapy / Radiotherapy)	iii. Medical Renal Diseases (Including Dialysis)	iv. Treatment of Breakage of Long Bones	I. Surgery for treatment of all types of Hernia	(SI <Rs.10L) - up to Rs.1,00,000 (SI=Rs.10L- Rs.20L) – up to Rs.1,50,000 (SI > Rs.20L) – up to Rs.2,00,000	ii. Hysterectomy	iii. Surgeries for Benign Prostate Hypertrophy (BPH)	iv. Surgical treatment of stones of renal system	3.5
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<p>Claims/ Claims Procedure</p>	<p>Claim Procedure and Management under this Add-on Policy shall be same as in the Base Policy.</p> <p>Turn Around Time (TAT) for claims settlement :</p> <p>i. TAT for preauthorization of cashless facility: 4 hours ii. TAT for cashless final bill authorization : 6 hours</p> <p>Web link(https://www.careinsurance.com/rhic/claim/login)for following :</p> <p>I. Network hospital details ii. Helpline number iii. Hospitals which are blacklisted or from where no claims will be accepted by insurer iv. Downloading/getting claim form</p>	<p>6.1</p>
<p>Policy Servicing</p>	<p>I. Call center number of the insurer - whatsapp number: 8860402452 ii. Details of Company officials - Customer Service Care Health Insurance Limited , Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road, Sector- 43, Gurugram – 122009</p>	
<p>Grievances/Complaints</p>	<p>In case of any grievance the Insured Person may contact the Company through Website link https://www.careinsurance.com/customer-grievanceredressal.html Mobile App : Care Health- Customer App Toll free (whatsapp number): 8860402452 Courier: Any of Company's Branch Office or corporate office If Insured Person is not satisfied with the redressal of grievance through above methods, the Insured Person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017. https://www.cioins.co.in/Ombudsman Grievance may also be lodged at IRDAI integrated Grievance Management System - https://bimabharosa.irdai.gov.in/</p>	<p>5.16</p>
<p>Things to remember</p>	<p>Free Look cancellation: Free look Period under this Add-on policy will be similar to the base policy.</p> <p>Policy renewal: This Add-on Policy shall follow conditions as mentioned in the Base Policy.</p> <p>Migration and Portability: This Add-on Policy shall follow conditions as mentioned in the Base Policy.</p> <p>Moratorium Period: After completion of eight continuous years under the policy, no look back to be applied. This period of eight years is called the moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of eight continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits.</p> <p>After the expiry of Moratorium Period no health insurance policy shall be contestable except for proven fraud and permanent exclusions specified in the policy contract</p>	<p>5.15</p> <p>5.10</p> <p>5.8 and 5.9</p> <p>5.12</p>
<p>Your Obligations</p>	<p>Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement.</p>	

Disclosure of other material information during the policy period.

Disclosure to Information: Conditions under this Add-on policy will be similar to the base policy.

5.1

Material Change: Conditions under this Add-on policy will be similar to the base policy.

5.18

Declaration by the Policy Holder :

I have read the above and confirm having noted the details.

Place:

Date _____ (Signature of the Policyholder)

Note:

- I. For the product terms and conditions and other documents, including CIS , please refer the web link : <https://www.careinsurance.com/rhicl/login/register>
- ii. In case of any conflict, the terms and conditions mentioned in the policy document shall prevail and please refer the Policy Schedule for the applicable benefits.