Care HEALTH INSURANCE®

BEST CLAIM SETTLEMENT COMPANY OF THE YEAR
9th ANNUAL INDIA INSURANCE SUMMIT & AWARDS 2025^

special care

^The Company Was Awarded 'Best Claim Settlement Company of The Year' Award At The 9th Annual India Insurance Summit & Awards 2025, in March 2025

Know Your Policy Better

Policy Terms and Conditions

1. PREAMBLE

The proposal and declaration given by the proposer and other documents if any shall form the basis of this Contract and is deemed to be incorporated herein. The two parties to this contract are the Policy Holder/Insured(also referred as You) and Care Health Insurance Ltd. (also referred as Company/ We/Us), and all the Provisions of Indian Contract Act, 1872, shall hold good in this regard. The references to the singular include references to the plural; references to the male include the references to the female; and references to any statutory enactment include subsequent changes to the same and vice versa.

In consideration of the premium paid by the Policy Holder, subject to the terms & conditions contained herein and the Base policy, the Company agrees to pay/indemnify the Insured(s), the amount of such expenses that are reasonably and necessarily incurred up to the limits specified against respective Benefit in this policy in any Add-on Policy Year.

Please check whether the details given by you about the insured in the proposal form (a copy of which was provided at the time of issuance of cover for the first time) are incorporated correctly in the Add-on Policy Schedule. If you find any discrepancy, please inform us within 30 days from the date of receipt of the Add-on policy, failing which the details relating to the person/s covered would be taken as correct.

So also the coverage details may also be gone through and in the absence of any communication from you within 30 days from the date of receipt of the Add-on policy, it would be construed that the policy issued is correct and the claims if any arise under the policy will be dealt with based on proposal /policy details.

2. DEFINITIONS

2.1. Standard Definitions:

This Add-on Policy shall follow the standard definitions as mentioned in the Base Policy.

2.2. Specific Definitions:

2.2.1. **Add-on Policy** means these Policy terms and conditions and Annexures thereto, the Proposal Form, Policy Schedule and any endorsements which form part of this Policy shall be read together.

2.2.2. **Add-on Policy Period** means the period commencing from the Add-on Policy Period Start Date and ending on the Add-on Policy Period End Date of the Policy as specifically appearing in the Add-on Policy Schedule.

2.2.3. Add-on Policy Period End Date means the date on which the Add-on Policy expires, as specifically appearing in the Add-on Policy Schedule.

2.2.4. Add-on Policy Period Start Date means the date on which the Add-on Policy commences, as specifically appearing in the Add-on Policy Schedule.

2.2.5. Add-on Policy Schedule is a schedule attached to and forming part of this Add-on Policy and which can be endorsed depending on the requirement of the Add-on Policy.

2.2.6. Add-on Policy Year means a period of one year commencing on the Add-on Policy Period Start Date or any anniversary thereof.

2.2.7. Annexure means the document attached and marked as Annexure to this Policy.

2.2.8. Base Policy means means retail policy issued by the Company including Policy terms and conditions and Annexures thereto, the Proposal Form, Policy Schedule and to which this Add-on shall be attached.

2.2.9. Network Service Provider means any person, organization, institution that has been empaneled with the Company to provide Services specified under the benefits.

2.2.10. Lifetime Sum Insured means the maximum aggregate coverage amount available to Insured Person during the entire lifetime of the Policy without annual reset on renewal of the Policy.

3. BENEFITS COVERED UNDER THE ADD-ON POLICY

GENERAL CONDITIONS:

1) The Add-on Policy can only be bought along with the Base Policy either on Policy Issuance or on Renewal and cannot be bought in isolation or as a separate product or mid-term.

2) The Add on policy is subject to the terms and conditions and applicable endorsements stated herein and in the Base Policy.

3) All Claims shall be payable subject to the limits, terms, conditions, wait periods exclusions of the Add-on Policy and Base policy.

4) Benefits can be opted in any combination.

5) If any benefit or coverage is opted in the Base Policy, then same or similar coverage/benefit cannot be opted in Add-on Policy.

6) This Add-on policy shall be available only if the same is specifically mentioned in the Add-on Policy Schedule.

7) Option of Mid-term inclusion of a Person in the Policy will be only upon marriage or child birth. Additional differential premium will be calculated on a pro rata basis.

3.1 Benefit 1 : Recharge Remover

If this Benefit is opted, then the Company shall allow the Insured Person to opt out of the Recharge Benefit available under the Base Policy. Accordingly, Policyholder is entitled for a discount on the Premium payable.

Note - Any form of recharge Benefit shall not be available under Base Policy, if this Benefit is opted.

3.2 Benefit 2 : Bonus Remover

If this Benefit is opted, then the Company shall allow the Insured Person to opt out of the Bonus Benefit available under the Base Policy. Accordingly, Policyholder is entitled for a discount on the Premium payable.

Upon selection of this Benefit, the Insured Person shall not be entitled to any further accrual of the Bonus.

Note - Any form of Bonus Benefit including No Claim Bonus, No Claim Bonus Super, Cumulative Bonus, Cumulative Bonus Super, Infinity bonus shall not be available under Base Policy, if this Benefit is opted.

3.3 Benefit 3 : Lifetime Sum Insured

If this Benefit is opted, the Company shall limit the coverage amount for specified pre-existing condition under the Base Policy up to the Lifetime Sum Insured as specified in the Add-on Policy Schedule. The Lifetime Sum Insured shall remain applicable during the entire the Policy lifetime without annual reset or reinstatement on renewal or otherwise.

Conditions applicable to this Benefit are:

(I) Claim under this Benefit shall be admissible only if the pre-existing condition was declared by the Insured Person and accepted by the Company at the time of Policy issuance and the same is specified in the Add-on Policy Schedule.

(ii) For other medical conditions, the Insured Person shall be eligible for the coverage as available under the Base Policy.

(iii) All the admissible claims related to the specified pre-existing condition shall be payable up to the Lifetime Sum Insured. Once the Lifetime Sum Insured is fully exhausted, no further claims for the said pre-existing condition shall be payable under the Policy for the entire Policy Period including renewal.

(iv) Once the Lifetime Sum Insured is fully exhausted, the cover shall cease and not be available for re-selection during the subsequent renewal.

(v) Claim under this Benefit shall be admissible only if the Claim is admissible under 'Hospitalization Expenses' of Base Policy.

(vi) This Benefit can be opted only at the time of inception of the Base Policy irrespective of Policy tenure.

(vii) Lifetime Sum Insured shall be applicable on individual basis.

3.4 Benefit 4 : Deductible

If this Benefit is opted, then Policyholder is entitled for a discount on the Premium payable.

(i) The claim amount assessed by the Company for a particular claim shall be reduced by the Deductible as specified in the Add-on Policy Schedule and the Company shall be liable to make payment under the Policy for any Claim only when the Deductible on that Claim is exhausted.

(ii) The Deductible shall be applicable on an aggregate basis for all Claims made by the Insured Person in an Add-on Policy Year.

(iii) Illustration for applicability of Deductible in the same Policy Year:

(Amount in Rs.)

Case	Sum Insured	Deductible	Claim 1	Claim 2	Claim 3
1	5,00,000	15,00,000	750,000	5,00,000	10,00,000
2	5,00,000	15,00,000	500,000	12,50,000	15,00,000
3	5,00,000	15,00,000	17,50,000	15,00,000	20,00,000
Case	**Sum Insured**	**Deductible**	**Payable 1**	**Payable 2**	**Payable 3**
1	5,00,000	15,00,000	-	-	5,00,000
2	5,00,000	15,00,000	-	2,50,000	2,50,000
3	5,00,000	15,00,000	2,50,000	2,50,000	Claim not payable as SI is exhausted

3.5 Benefit 5 : Two Hours Hospitalization

Notwithstanding anything to the contrary in the Policy, if this Benefit is opted, the requirement of minimum Hospitalization of 24 consecutive hours under the In-patient Care Benefit of the Base Policy shall be modified to minimum 2 consecutive hours.

Note: Above mentioned minimum period of 2 or more consecutive hours of Hospitalization is not applicable for AYUSH treatments, any admission for medical investigation or evaluation or injections, procedures done under OPD services.

All the other provisions stated under Hospitalization Expenses in Base Policy holds good for this benefit as well.

3.6 Benefit 6 : Instant Cover

Notwithstanding anything to the contrary in the Policy, by opting this Benefit the Company shall waive off the applicable PED waiting period for diabetes/ Hypertension/ Hyperlipidemia/ Asthma / Chronic Obstructive Pulmonary Disease (COPD)/ Obesity/ Coronary Artery Disease with PTCA done prior to 1 year and the coverage for these conditions shall commence from the Policy start date.

Note: The above Benefit can be opted only if the Policy is issued for the first time with the Company and continues renewal without break in policy.

3.7 Benefit 7 : Cumulative Bonus Modification

Notwithstanding anything to the contrary in the Base Policy, by choosing this Benefit, the Cumulative Bonus Benefit in the Base Policy shall be modified and limited to 10% of Sum Insured for every claim free year, maximum up to 100% of the Sum Insured, subject to the conditions specified below:

(i) At the end of each Policy Year, the Company will enhance the Sum Insured by 10% flat, on a cumulative basis, as a No Claim Bonus for each completed and continuous Policy Year, provided that no Claim has been paid by the Company in the expiring Policy Year.

(ii) In the event of a Claim occurring during any Policy Year, the accrued No Claims Bonus will be reduced by 10% of the Base Sum Insured at the commencement of next Policy Year, but in no case the Total Sum Insured shall be reduced than the Base Sum Insured;

(iii) Other provisions stated under Cumulative Bonus Benefit of Base product, holds good for this benefit as well.

Note -

If Insured wishes to opt for discount on premium instead of additional Sum Insured at the time of renewal, then the Insured would be eligible for a No Claim Discount of Rs. 49 (individual cover) /Rs. 99 (floater cover) in the base premium provided and subject to :

1) Maximum NCB amount is not yet accrued by Insured under the Policy.

2) No discount shall be offered in case of claim paid in previous Policy Year.

3) Number of times the discount can be offered shall be same as number of times

NCB amount gets accrued year on year.

4) Insured has the option at the time of renewal only either to opt for additional Sum Insured or discount on renewal premium due to no claim but not both.

4. EXCLUSIONS

4.1. Standard Exclusions:

This Add-on policy shall follow exclusions as mentioned in the Base policy.

4.2. Specific Exclusions:

This Add-on policy shall follow exclusions as mentioned in the Base policy.

5. GENERAL TERMS AND CLAUSES

5.1. Disclosure of Information

Conditions under this section are same as Base Policy.

5.2. Condition Precedent to Admission of Liability

Conditions under this section are same as Base Policy.

5.3. Claim Settlement (provision for Penal Interest)

Conditions under this section are same as Base Policy.

5.4. Complete Discharge

Conditions under this section are same as Base Policy.

5.5. Multiple Policies

Conditions under this section are same as Base Policy.

5.6. Fraud

Conditions under this section are same as Base Policy.

5.7. Cancellation / Termination

Conditions under this section are same as Base Policy.

5.8. Migration

Conditions under this section are same as Base Policy.

5.9. Portability

Conditions under this section are same as Base Policy.

5.10. Renewal of Policy

Conditions under this section are same as Base Policy.

5.11. Withdrawal of Policy

Conditions under this section are same as Base Policy.

5.12. Moratorium Period

Conditions under this section are same as Base Policy.

5.13. Premium payment Installment

Conditions under this section are same as Base Policy

5.14. Possibility of Revision of Terms of the Policy Including the Premium Rates

Conditions under this section are same as Base Policy.

5.15. Free Look Period

Conditions under this section are same as Base Policy.

5.16. Grievances

Conditions under this section are same as Base Policy.

5.17. Nomination:

Conditions under this section are same as Base Policy.

5.18. Material Change

Conditions under this section are same as Base Policy.

5.19. Records to be maintained

Conditions under this section are same as Base Policy.

5.20. No constructive Notice

Conditions under this section are same as Base Policy.

5.21. Policy Disputes

Conditions under this section are same as Base Policy.

5.22. Limitation of liability

Conditions under this section are same as Base Policy.

5.23. Communication

Conditions under this section are same as Base Policy.

5.24. Alterations in the Policy

Conditions under this section are same as Base Policy.

5.25. Electronic Transactions

Conditions under this section are same as Base Policy.

6. OTHER TERMS AND CLAUSES

6.1. Claims procedure and management

Claim Procedure and Management under this Add-on Policy shall be same as in the Base Policy. Original supportive documents to be submitted for claim admissibility under this Add-on Policy.

Care Health Insurance Limited

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Care Health - Customer App:
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