



# special carē

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

## Customer Information Sheet

## Customer Information Sheet

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
<b>Name of the Insurance Product /Policy</b>	<b>Special Care</b>	
<b>Policy Number</b>		
<b>Type of the Insurance Product /Policy</b>	<b>Indemnity</b>	
<b>Sum Insured (Basis)</b> (Along with amount)	As per Benefit opted	
<b>Policy Coverage (What the policy covers?)</b> (Policy Clause Number/s)	<b>1. Recharge Remover</b> Allows the Insured Person to opt out of the Recharge Benefit available under the Base Policy. <b>Note:</b> 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.	3.1
	<b>2. Bonus Remover</b> Allows the Insured Person to opt out of the Bonus Benefit available under the Base Policy. <b>Note:</b> 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.	3.2
	<b>3. Lifetime Sum Insured</b> The Company shall Limits the coverage amount for specified pre-existing conditions under the Base Policy up to the opted Lifetime Sum Insured which remains applicable throughout the lifetime of the Policy without annual reset on renewal of the Policy.	3.3

	<p><b>4. Deductible</b> Deductible amount (as opted) shall be bear by Insured before any benefits are payable by the Company and is on aggregate basis for all claims in a policy year.</p> <p><b>5. Two- Hours Hospitalization</b> Modify the minimum Hospitalization requirement of minimum 24 consecutive hours under the In-patient Care Benefit in Base Policy to minimum 2 consecutive hours.</p> <p><b>6. Instant Cover</b> No PED wait period (for Diabetes/ Hypertension/ Hyperlipidemia / Asthma/ Chronic Obstructive Pulmonary Disease (COPD)/ Obesity/ Coronary Artery Disease with PTCA done prior to 1 year.</p> <p><b>7. Cumulative Bonus Modification</b> 10% increase in SI per Policy Year in case of claim-free year; Max up to 100% of SI (10% decrease in SI per Policy Year in case a claim has been paid; Such decrease is only in SI accrued as NCB)</p>	<p>3.4</p> <p>3.5</p> <p>3.6</p> <p>3.7</p>
<b>Exclusions</b> (What the policy does not cover )	This Add-on Policy shall follow exclusions as mentioned in the Base Policy.	4
<p><b>Waiting Period</b></p> <ul style="list-style-type: none"> <li>• Time period during which specified diseases/treatments are not covered</li> <li>• It is counted from the beginning of the policy coverage.</li> </ul>	As per Base Policy	4

<p><b>Financial limits of coverage</b></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"> <li>- up to which an insurance company will not pay any claim , and</li> <li>- which will be deducted from total claim amount is more than the specified amount )</li> </ul> <p>iv. Any other limit (as applicable)</p>	<p>NA</p> <p>NA</p> <p>Deductible Options- Rs. 15 /20 /25 /30 /40 /45 /50L</p> <p>NA</p>	
<p><b>Claims/ Claims Procedure</b></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><b>i.</b> TAT for preauthorization of cashless facility: 1 hours</p> <p><b>ii.</b> TAT for cashless final bill authorization : 3 hours</p> <p>Web link (<a href="https://www.careinsurance.com/">https://www.careinsurance.com/</a>)</p>	<p>6</p>

	<p>rhicl/claim/login) for following :</p> <ul style="list-style-type: none"> <li><b>i.</b> Network hospital details</li> <li><b>ii.</b> Helpline number</li> <li><b>iii.</b> Hospitals which are blacklisted or from where no claims will be accepted by insurer</li> <li><b>iv.</b> Downloading/getting claim form</li> </ul>	
<b>Policy Servicing</b>	<ul style="list-style-type: none"> <li><b>I.</b> Call center number of the insurer - whatsapp number: 8860402452</li> <li><b>ii.</b> Details of Company officials - Customer Service Care Health Insurance Limited , Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road, Sector– 43, Gurugram – 122009</li> </ul>	
<b>Grievances/ Complaints</b>	<p>In case of any grievance the Insured Person may contact the Company through Website/link:  <a href="https://www.careinsurance.com/customer-grievance-redressal.html">https://www.careinsurance.com/customer-grievance-redressal.html</a>          Mobile App : Care Health- Customer App          Toll free (whatsapp number): 8860402452          Courier: Any of Company's Branch Office or corporate office</p> <p>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. <a href="https://www.cioins.co.in/Ombudsman">https://www.cioins.co.in/Ombudsman</a>          Grievance may also be lodged at IRDAI integrated Grievance Management System - <a href="https://bimabharosa.irdai.gov.in/">https://bimabharosa.irdai.gov.in/</a></p>	5.16

<b>Things to Remember</b>	<b>Free Look cancellation:</b> Free look Period under this Add-on policy will be similar to the base policy.	5.15
	<b>Policy renewal:</b> This Add-on Policy shall follow conditions as mentioned in the Base Policy.	5.10
	<b>Migration and Portability:</b> This Add-on Policy shall follow conditions as mentioned in the Base Policy.	5.8 and 5.9
	<b>Moratorium Period:</b> This Add-on Policy shall follow conditions as mentioned in the Base Policy.	5.12
<b>Your Obligations</b>	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement. Disclosure of other material information during the policy period.	
	<b>Disclosure to Information:</b> Conditions under this Add-on policy will be similar to the base policy.	5.1
	<b>Material Change:</b> Conditions under this Add-on policy will be similar to the base policy.	5.18

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.
- iii. Insurer to take confirmation of the policyholder regarding receiving of the Customer Information Sheet.



### **Care Health Insurance Limited**

Registered Office: 5th Floor, 19 Chawla House, Nehru Place, New Delhi-110019  
Correspondence Office: Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road,  
Sector-43, Gurugram-122009 (Haryana)  
CIN: U66000DL2007PLC161503 UIN:CHIHIA26050V012526  
IRDAI Registration Number - 148

#### **REACH US @**



WhatsApp - **8860402452**



Care Health - Customer App:  
<https://careinsurance.app.link/3QB1xwRrNPb>



[www.careinsurance.com/self-help-portal.html](http://www.careinsurance.com/self-help-portal.html)



Submit Your Queries/Requests:  
[www.careinsurance.com/contact-us.html](http://www.careinsurance.com/contact-us.html)