

CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

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

SI NO	TITLE	DESCRIPTION	POLICY CLAUSE NUMBER
1.	<b>Name of Insurance Product / Policy</b>	Arogya Sanjeevani Policy, Reliance General Insurance Company Limited	
2.	<b>Policy Number</b>	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
3.	<b>Type of Insurance Product / Policy</b>	Both Indemnity and Benefit(where policy has elements of both the above)	
4.	<b>Sum Insured (Basis)</b>	Individual Sum Insured - XXXXXXXXX (Where each member has a separate sum insured under the policy) Floater Sum Insured - XXXXXXXXX (As opted) (Where all members under the policy have a single sum insured limit which may be utilized by any or all members)	
5.	<b>Policy Coverage</b>	<p>a. Hospitalization expenses- Expenses incurred on hospitalization for minimum period of 24 hours including</p> <p>b. Day Care Procedures- Medical expenses for day care procedures</p> <p>c. AYUSH Treatment- Expenses incurred on hospitalization under AYUSH Treatment.</p> <p>d. Cataract Treatment- Expenses incurred on treatment of cataract</p> <p>e. Pre-Hospitalisation-Pre-hospitalization Medical expenses for a period of 30 days</p> <p>f. Post-Hospitalisation-Post-hospitalization expenses for a period of 60 days</p> <p>g. Special Treatments / Procedures Special treatments as listed below are covered with up to 50% of the sum-insured:</p> <ul style="list-style-type: none"> <li>• Uterine Artery Embolization and HIFU (High intensity focused ultrasound)</li> <li>• Balloon Sinuplasty</li> <li>• Deep Brain stimulation</li> <li>• Oral chemotherapy</li> <li>• Immunotherapy- Monoclonal Antibody to be given as injection</li> <li>• Intra vitreal injections</li> <li>• Robotic surgeries</li> <li>• Stereotactic radio surgeries</li> <li>• Bronchical Thermoplasty</li> <li>• Vaporisation of the prostate (Green laser treatment or holmium laser treatment).</li> <li>• IONM - (Intra Operative Neuro Monitoring)</li> <li>• Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered</li> </ul> <p>h. Ambulance Charges: Expenses on road Ambulance subject to a maximum of Rs.2000/- per hospitalization.</p> <p>i. Dental treatment and Plastic Surgery- Dental treatment and Plastic Surgery Necessitated due to disease or injury</p> <p>k. Copayment - 5% at the time of claim</p>	<p>4.1</p> <p>4.1.1</p> <p>4.2</p> <p>4.3</p> <p>4.4</p> <p>4.5</p> <p>4.6</p> <p>4.1.1.5</p> <p>4.1.1.2</p>
6.	<b>Exclusions</b>	<p>Following is a partial list of the policy exclusions. Please refer to the policy document for the complete list of exclusions:</p> <p>a. Admission primarily for investigation and evaluation</p> <p>b. Admission primarily for rest Cure, rehabilitation and respite care</p> <p>c. Expenses related to the surgical treatment of obesity that do not fulfill certain conditions</p>	<p>7.1</p> <p>7.2</p> <p>7.3</p>



	d. Change-of-Gender treatments	7.4									
	e. Expenses for cosmetic or plastic surgery	7.5									
	f. Expenses related to any treatment necessitated due to participation in hazardous or adventure sports	7.6									
7.	<b>Waiting periods</b> <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>	Initial waiting Period: 30 days for all illnesses (not applicable in case of continuous renewal or accidents) 6.2 Specific Waiting periods (Not applicable for claims arising due to an accident): 6.3 (i, ii) 24 months for 20 diseases/procedures 36 months for 02 diseases/procedures Pre-existing diseases: Covered after 36 months 6.1									
8.	<b>Financial limits of coverage</b> Sub-limit	In case of a claim, this policy requires you to share the following costs: a. Expenses exceeding the following Sub-limits: i. Room Charges(Hospitalization): b. Room Rent - Up to 2% of SI, subject to max of INR 5,000 per day c. ICU charges - Up to 5% of SI subject to max of INR 10,000 per day. In case Room/ICU/CCU rent exceeds the limits specified the claim shall be subject to the proportionate deduction. ii. Cataract - Up to 25% of Sum Insured or Rs.40,000/- whichever is lower. iii. Modern treatment methods and Advancements in technology: Up to 50% of the Sum insured									
	<b>Co-Payment</b>	Each and every claim under the Policy shall be subject to a Copayment of 5% applicable to claim amount admissible and payable as per the terms and conditions of the Policy 9.3									
	Deductible	Not Applicable									
	Any other limit (as applicable)	Not Applicable									
9.	<b>Claims / Claims Procedure</b>	a. For Cashless Service: Insured may refer Pre-Authorization form attached as Annexure-C to the Policy Wordings and for updated Hospital Network details refer the link <a href="https://www.reliancegeneral.co.in/Insurance/Self-Help/Cashless-Garages-and-Hospitals.aspx?network=Hospitals">https://www.reliancegeneral.co.in/Insurance/Self-Help/Cashless-Garages-and-Hospitals.aspx?network=Hospitals</a> 9 (1.1, 1.2), 9.1,9.2 b. For Reimbursement of Claim: For reimbursement of claims the insured person may submit the necessary documents to TPA/Company within the prescribed time limit as specified here under									
		<table border="1"> <thead> <tr> <th>Sr. No.</th> <th>Type of Claim</th> <th>Prescribed Time limit</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>Reimbursement of hospitalization, day care and pre hospitalization expenses</td> <td>Within fifteen days from completion of hospitalization</td> </tr> <tr> <td>2.</td> <td>Reimbursement of post expenses post hospitalization treatment</td> <td>Within fifteen days from completion of post hospitalization</td> </tr> </tbody> </table>	Sr. No.	Type of Claim	Prescribed Time limit	1.	Reimbursement of hospitalization, day care and pre hospitalization expenses	Within fifteen days from completion of hospitalization	2.	Reimbursement of post expenses post hospitalization treatment	Within fifteen days from completion of post hospitalization
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		<p>Details of procedure to be followed for cashless service as well as for reimbursement of claim including pre and post hospitalization</p> <p><b>Turn Around Time (TAT) for claims settlement:</b></p> <p>i. TAT for preauthorization of cashless facility: 2 hours  ii. TAT for cashless final bill authorization: 1 hour</p> <p><b>web link for following:</b></p> <p>i. Network Hospital details  Reliance General Insurance Locator (<a href="http://rgi-locator.appspot.com">rgi-locator.appspot.com</a>)  ii. Helpline number : +91 22 4890 3009 (Paid number)  iii. Hospitals which are blacklisted or from where no claims will be accepted by insurer  <a href="https://www.reliancegeneral.co.in/downloads/Black_List_Hospital.pdf">https://www.reliancegeneral.co.in/downloads/Black_List_Hospital.pdf</a>  iv. Downloading/getting claim form  <a href="https://www.reliancegeneral.co.in/insurance/claims/claim-page-health.aspx">https://www.reliancegeneral.co.in/insurance/claims/claim-page-health.aspx</a></p>									

10.	<b>Policy Servicing</b>	Any issues related with respect to policy, kindly E-mail us at rgicl.services@relianceada.com and for correspondence contact us Reliance General Insurance Company Limited Correspondence Address – Reliance General Insurance., Winway Building 2nd & 3rd Floor, 11/12 Block No-4, Old no-67, South Tukoganj, Indore (M.P) - 452001 Contact No.:- +91 22 4890 3009 (Paid)	
11.	<b>Grievances/ Complaints</b>	a. Details of Grievance redressal officer refer the link <a href="https://www.reliancegeneral.co.in/Insurance/About-Us/Grievance-Redressal.aspx">https://www.reliancegeneral.co.in/Insurance/About-Us/Grievance-Redressal.aspx</a> b. IRDAI Integrated Grievance Management System <a href="https://igms.irda.gov.in/">https://igms.irda.gov.in/</a> c. Insurance Ombudsman - The contact details of the Insurance Ombudsman offices have been provided as Annexure-B of Policy document	5.1.17
12.	<b>Things to remember</b>	<b>Free Look Cancellation:</b> The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy. The Insured Person shall be allowed free look period of thirty days from date of receipt of the policy document to review the terms and conditions of the Policy, and to return the same if not acceptable. If the Insured has not made any claim during the Free Look Period, the Insured shall be entitled to i. A refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges or ii. where the risk has already commenced and the option of return of the policy is exercised by the insured person, a deduction towards the proportionate risk premium for period of cover or iii. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period;	10.19
		<b>Policy Renewal:-</b> Except on grounds of fraud, moral hazard or misrepresentation or non-cooperation, renewal of your policy shall not be denied, provided the policy is not withdrawn.	
		<b>Migration and Portability:-</b> When your policy is due for renewal, you may migrate to another policy with us (subject to underwriting guidelines of company) or port your policy to another insurer.	10.14
		<b>Migration:-</b> The Insured Person will have the option to migrate the Policy to other health insurance products/plans offered by the Company by applying for migration of the Policy atleast 30 days before the Policy renewal date as per IRDAI guidelines on Migration. If such person is presently covered and has been continuously covered without any lapses under any health insurance product/plan offered by the Company, the Insured Person will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on migration	10.15
		<b>Portability:-</b> The Insured Person will have the option to port the Policy to other insurers by applying to such insurer to port the entire Policy along with all the members of the family, if any, at least 45 days before, but not earlier than 60 days from the Policy renewal date as per IRDAI guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance policy with an Indian General/Health insurer, the proposed Insured Person will get the accrued continuity benefits in Waiting Periods as per IRDAI guidelines on portability.	
		<b>Change in Sum Insured:-</b> Sum Insured can be changed (increased/decreased) only at the time of renewal or at any time, subject to underwriting by the company. For increase in SI, the waiting period if any shall start afresh only for the enhanced portion of the sum insured.	10.21
		<b>Moratorium Period:</b> After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the insurer on grounds of non-disclosure, misrepresentation, except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever, the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits.	8
13.	<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.) Insurer to specify the material information	

The enclosed Customer Information Sheet bearing reference number "CIS\XXXXXXXXXXXXXXXXXXXXXXXXXXXX" is essential part of your policy schedule, Kindly review it carefully.



[reliancegeneral.co.in](https://www.reliancegeneral.co.in)



022 4890 3009 (Paid)



74004 22200 (WhatsApp)

IRDAI Registration No. 103. Reliance General Insurance Company Limited.

An ISO 9001:2015 Certified Company

For complete details on the benefits, coverage, terms & conditions and exclusions, do read the sales brochure, prospectus and policy wordings carefully before concluding sale. Registered & Corporate Office: 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off. Western Express Highway, Goregaon (E), Mumbai-400063. Corporate Identity Number: U66603MH2000PLC128300. Trade Logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under License.

**Arogya Sanjeevani Policy, Reliance General. UIN No.: RELHLIP21001V012021.**

Declaration by the Policy Holder;

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

Place : \_\_\_\_\_

Verified by OTP

(Signature of the Policy)

Date: DD/MM/YYYY

**Note:**

In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.

Premium Illustration										
Individual and Floater Premium Illustration-AROGYA SANJEEVANI POLICY, RELIANCE GENERAL										
Age of the members insured	Coverage opted on individual basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum insured is available for each member of the family)				Coverage opted on family floater basis with overall Sum insured (Only one sum insured is available for the entire family)			
	Premium (₹)	Sum insured (₹)	Premium (₹)	Discount, if any	Premium after discount (₹)	Sum insured (₹)	Premium or consolidated premium for all members of family (₹)	Floater discount, if any	Premium after discount (₹)	Sum insured (₹)
51 years	10,089	3 Lakhs	10,089		9,080	3 Lakhs				
44 years	6,487	3 Lakhs	6,487	10%	5,838	3 Lakhs	17,098	0%	17,098	3 Lakhs
23 years	2,680	3 Lakhs	2,680		2,412	3 Lakhs				
18 years	2,146	3 Lakhs	2,146		1,931	3 Lakhs				
Total Premium for all members of the family is ₹21,402 when each member is covered separately.			Total Premium for all members of the family is ₹19,261.8 when they are covered under a single policy.				Total Premium when policy is opted on floater basis is ₹17,098.			
Sum insured available for each individual is ₹3 lakhs			Sum insured available for each family member is ₹3 lakhs				Sum insured of ₹3 lakhs is available for the entire family.			
<b>Note:</b> Premium rates specified in the above illustration are standard premium rates for Zone A without any loading. Also, the premium rates are exclusive of taxes applicable										



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