

RELIANCE HEALTH GAIN POLICY - CUSTOMER INFORMATION SHEET

(Description is illustrative and not Exhaustive)

SI NO	TITLE	DESCRIPTION	Refer to Policy Clause Number
1	Product Name	Reliance Health Gain Policy	
2	What am I covered for	<p>Hospitalization Covers</p> <p>a. Hospitalization Expenses - This benefit indemnifies the Insured Person for any medical expenses incurred on In-Patient Treatment or Day Care Treatment including the expenses incurred on AYUSH Treatment.</p> <p>b.This benefit pays fixed daily amount of Rs 1000,if the Insured Person undergoes Hospitalization for In-Patient Treatment and occupies the following Room Categories Plan Plus & Power : Twin sharing Room or below Plan Prime: Single Private Air Conditioned Room or below</p> <p>b. Domestic Road Ambulance - This benefit indemnifies the Policyholder/ Insured Person up to an amount of Rs. 1,500 , Rs. 3,000 or actual (as per Plan opted), per Hospitalization on availing Ambulance services offered by a Hospital or by an Ambulance service provider. The benefit is extended to provide Rs 20000 or actual (as per plan opted) intercity transportation cost beyond 100 km.</p> <p>c. Domiciliary Hospitalization - This cover pays reasonable and customary charges for the medical expenses incurred during Domiciliary Hospitalization as defined under this Policy, provided that the condition for which the medical treatment is required continues for at least three continuous and completed days</p> <p>d. Modern Treatment - Coverage up to 50% or 100% of Base S.I (as per Plan opted) under this benefit for the medical expenses incurred during the Policy Year on Inpatient Treatment or Daycare Treatment or Domiciliary Treatment of listed Modern Treatment Methods</p> <p>e. Pre and Post - Hospitalization - This cover indemnifies the Insured Person for Pre-Hospitalization Expenses for a period of 60 days and Post Hospitalization Expenses for a period of 60 or 90 days (as per Plan opted)</p> <p>f. Organ Donor Expenses - This cover indemnifies the Policyholder/Insured Person up to 50% of Base Sum Insured subject to maximum of Rs. 5 Lakhs or 10 Lakhs (as per plan opted), incurred during Hospitalization, in respect of donor for any organ transplant Surgery conducted on Insured Person during the Policy Year</p> <p>Extra Cover</p> <p>g. Reinstatement of Base Sum Insured - On subsequent claim,one reinstatement up to 100% of Base Sum Insured for unrelated illness/injury, sub-limit of 20% of Base Sum Insured for related illness/injury</p> <p>h. Extra Sum Insured - This benefit provides an additional 20% of Base Sum Insured on same claim, in single hospitalization after exhaustion of Base Sum Insured under the Policy</p> <p>Personal Accident</p> <p>i. Accidental Death Cover - This benefit provides Personal Accident Death cover of 5% of Base Sum Insured subject to minimum of Rs 1 lakh to the Insured Person, if during the Policy Year, Insured Person sustains an injury from an Accident which is the sole and direct cause of his/her death. This benefit shall be applicable for Plan-Power and Plan-Prime</p> <p>Critical Illness</p> <p>j. Waiver of Premium- This benefit waives off the renewal Policy premium for one year, in case of first Diagnosis of any of the listed(mentioned in Policy wordings)Critical Illness. For long term policies, the Company shall waive off one-year proportionate renewal Policy Premium. This benefit is provided once in the lifetime of the Policyholder.</p>	<p>3.1</p> <p>3.1.1</p> <p>3.1.2</p> <p>3.1.3</p> <p>3.1.4</p> <p>3.1.5 3.1.6</p> <p>3.1.7</p> <p>3.2</p> <p>3.2.1</p> <p>3.2.2</p> <p>3.3</p> <p>3.3.1</p> <p>3.4</p> <p>3.4.1</p>



	This benefit shall be applicable for Plan-Power and Plan-Prime	
	Renewal Benefits	3.5
	k. Cumulative Bonus- This renewal benefit increases the Base Sum Insured by 33.33% for every claim free Policy Year, subject to a maximum of 100% of Base Sum Insured and decreases by 33.33 % of Base Sum Insured for every claim year.	3.5.1
	l. Call Option for Enhancement of Base Sum Insured - After 4 continuous and consecutive claim free Policy Years, if Policyholder avails this benefit then enhanced Sum Insured will be sum of expiring Policy's Base Sum Insured and accumulated Cumulative Bonus	3.5.2
	m. Loyalty Cover: At the end of each completed and continuous Policy Year, the Company shall provide Loyalty Cover to the Policyholder (who is also an Insured Person) under the Policy.	3.5.3
	Policy Year-2: Accidental Death +Permanent Total Disability	3.5.3.1
	Policy Year 3: Accidental Death +Permanent Total Disability+ Critical Illness	3.5.3.2
	Policy Year 4: Accidental Death +Permanent Total Disability+ Critical Illness+ Hospital Cash	3.5.3.3
	Policy Year 5: Accidental Death +Permanent Total Disability+ Critical Illness+ Hospital Cash+ Leave Compensation Benefit.	3.5.3.4
		3.5.3.5
	Value Added Services	3.6
	n. Wellness Services- This is a service benefit in which Insured can seek Medical advice through telephonic or online mode	3.6.1
	o. Claim Service Guarantee –The Company is liable to pay the Insured Person for the delay in processing of claim for Benefit-Hospitalization Expenses in the following manner: i. Cashless Claims - 1% for every delay of 6 hours beyond 6 hours of receipt of all information / documents ii. Re-imburement Claims - 1% for every delay of 21 days beyond 21 days of receipt of all information/documents Maximum liability is limited to 6% Delayed Claim Amount	3.6.2 (i,ii)
	p. Policy Service Guarantee - In the event of delay in the process of issuing a Policy beyond 10 Working days from date of receipt of all required and completed documents, the Company shall provide a one time additional amount of Sum Insured of Rs. 10,000 or Rs. 20,000 (as per Plan opted)	3.6.3
	Optional Covers	3.7
	q. Enhanced Covers	
	i. Guaranteed Cumulative Bonus: This benefit is an extension to Benefit-Cumulative Bonus, this benefit waives off the condition to reduce Cumulative Bonus in case of a claim in immediate previous Policy Year	3.7.1.1
	ii. Unlimited Reinstatement of Base Sum Insured: On subsequent claims, Unlimited reinstatement of Base Sum Insured on unrelated illness or injury, sub-limit of 100% of Base Sum Insured for related illness/injury This benefit supersedes Benefit-Reinstatement of Base Sum Insured	3.7.1.2
	iii. Consumable Cover: This benefit pays the Reasonable and Customary expenses which are listed in Annexure - A List I as Optional Items	3.7.1.3
	r. Double Cover: This benefit provides an additional 100% of Base Sum Insured which can be utilized on the same claim, after exhaustion of Base Sum Insured This benefit supersedes Benefit-Extra Sum Insured	3.7.2
	s. Change in Room rent Limit: This benefit gives an option to Policyholder to change the allowable Room Category	3.7.3
	t. Reduction in Pre-Existing Waiting Period: This benefit reduces the Pre-Existing Waiting Period to 24 months or 12 months	3.7.4
	u. Voluntary Aggregate Deductible: The benefit gives an option to the Policyholder to avail discount in premium by choosing (10000,25000,50000,100000)as the Voluntary annual Aggregate Deductible	3.7.5
	v. Removal of Co-Payment: This benefit waives off the Co-Payment condition of 20% on the assessed claim amount, applicable on Policies where at the time of inception of the first Policy, the age of the Insured Person (or eldest Insured Person in case of Family Floater Policy) is 61 years and above	3.7.6
	w. Hospital Cash:	
	i. In Patient Cash: This benefit pays equal to selected Daily Cash Amount, max up to 30 days, provided the Company has accepted the claim under Benefit –In Patient Treatment.	3.7.7.1
	ii. ICU Cash: This benefit pays an additional 100% of selected Daily Cash Amount, max up to 15 days for ICU Hospitalization, provided the Company has accepted the claim under Benefit - In Patient Treatment Minimum Hospitalization of 72 hours is must under this benefit	3.7.7.2

	<p>x. Convenience Cover</p> <p>i. Change in Pre -Post Hospitalization limit: The benefit, enhances the Pre Hospitalization limit to 90 days and Post Hospitalization limit to 180 days</p> <p>ii. Air Ambulance: This benefit indemnifies up to 7.5% of Base Sum Insured or Rs. 5 Lakhs whichever is higher, for the expenses incurred on availing Air Ambulance services</p> <p>iii. Radio Taxi: This benefit indemnifies up to Rs. 1000 per Hospitalization on availing registered Radio cab operator services</p> <p>iv. Convalescence Cover: This benefit pays a lumpsum amount of Rs. 10000 or Rs. 25000 (as per Plan opted), if the Insured Person is hospitalized for a minimum period of 7 continuous and consecutive days</p>	<p>3.7.8</p> <p>3.7.8.1</p> <p>3.7.8.2</p> <p>3.7.8.3</p> <p>3.7.8.4</p> <p>3.7.9</p> <p>3.7.9.1</p>
	<p>y. Preventive Care Cover</p> <p>i. Health Checkup: At the end of every Policy Year, this benefit indemnifies up to Rs 3000 towards the diagnostic or preventive medical tests (listed in Policy wordings) taken by the Insured Persons in the Policy</p> <p>ii. Vaccination Cover: At the end of every Policy Year, this benefit indemnifies up to Rs. 2000 or Rs. 3500 (as per Plan opted) towards the expenses for the vaccine (listed in policy wordings) taken by the Insured Persons in the Policy</p>	<p>3.7.9.2</p> <p>3.7.10</p> <p>3.7.10.1</p>
	<p>z. Smart Cover</p> <p>i. Change in Modern Treatment limits: This benefit increases the Modern Treatment limit from 50% of Base Sum Insured to 100% of Base Sum Insured This benefit is applicable only for Plan- Plus and Plan- Power</p> <p>ii. Vision Correction: This benefit indemnifies up to Rs. 50000 or Rs. 100000 (as per plan opted) for the medical expenses incurred for correction of eyesight due to refractive error on the written advice of the Medical Practitioner</p> <p>iii. Second Opinion: This benefit indemnifies up to Rs. 3000 or Rs. 5000 (as per plan opted) for availing second medical opinion from a Medical Practitioner within India</p>	<p>3.7.10.2</p> <p>3.7.10.3</p> <p>3.7.11</p>
	<p>aa. Family Care Cover</p> <p>i. Home Care Treatment: This benefit indemnifies the Insured for the medical expenses incurred towards Home Care Treatment for any of the treatments (listed in the Policy wordings) under the Policy</p> <p>ii. Companion Cover: This benefit pays a fixed daily amount of Rs. 1000 towards expenses incurred by the Companion towards accommodation, transportation, food or any other miscellaneous expenses. Minimum 72 hours of Hospitalization is must</p> <p>iii. Child Care Cover: This benefit pays a fixed daily amount of Rs. 1000 towards child care expenses for any one dependent child covered under the Policy up to 12 years of age. Minimum 72 hours of Hospitalization is must</p>	<p>3.7.11.1</p> <p>3.7.11.2</p> <p>3.7.11.3</p>

3	What are the major exclusion in the policy	<p>Following is a partial list of the policy exclusions. Please refer to the policy document for the complete list of exclusions:</p> <ul style="list-style-type: none"> a. Investigation & Evaluation (Code:Excl04) b. Rest Cure, rehabilitation and respite care (Code:Excl05) c. Obesity/ Weight Control (Code:Excl06) d. Change-of-Gender treatments (Code:Excl07) e. Cosmetic or Plastic Surgery (Code: Excl08) f. Hazardous or Adventure sports(Code:Excl09) g. Breach of law (Code: Excl10) h. Excluded Providers (Code:Excl11) i. Substance Abuse and Alcohol (Code: Excl12) j. Wellness and Rejuvenation (Code:Excl13) k. Dietary Supplements & Substances (Code: Excl14) l. Refractive Error (Code: Excl15) m. Unproven Treatments-Code (Code: Excl16) n. Sterility and Infertility (Code: Excl17) o. Maternity Expenses (Code - Excl 18) <p>Specific Exclusions</p> <ul style="list-style-type: none"> p. Treatment outside Discipline q. Hearing Aids and spectacles r. External durable medical equipment s. Sleep Apnea t. External Congenital Anomaly u. Artificial Life support equipment's v. Non-payable items w. Outpatient Treatment x. Overseas Treatment y. Self-injury z. Documentation charges aa. Charges other than Reasonable & Customary Charges bb. RMO charges and Service charge cc. Nuclear Attack dd. War 	4
4	Waiting Periods	<ul style="list-style-type: none"> a. 36 months waiting period for Pre-Existing Disease (Code: Excl01) b. 24 months waiting period for Specified disease/procedure waiting period code (Code: Excl02) c. 30 Days Waiting Period (Code: Excl03) d. 15 days Waiting Period for treatment of Covid-19 	4.1.1 4.1.2 4.1.3 4.2.1
5	Payment Basis	Payment on indemnity basis for all covers except for Accommodation Bonus, Accidental Death Cover, Loyalty Cover and Hospital Cash, Convalescence Cover, Companion Cover and Child Care Cover which are on Benefit basis	
6	Loss Sharing	<p>In case of a claim, this policy requires you to share the following costs:</p> <p>Expenses exceeding the following Sub-Limits</p> <ul style="list-style-type: none"> a. Domestic Road Ambulance: Plan-Plus up to 1500 per hospitalization and Intercity (beyond 100 km) ambulance cost: Rs 20000 per hospitalization Plan-Power: up to 3000 per hospitalization and Intercity (beyond 100km) ambulance cost: Rs 20000 per hospitalization Plan Prime: Actuals (even for intercity transportation beyond 100km) b. Modern Treatment: Plan-Plus and Power: up to 50% of Base Sum Insured c. Organ Donor Expenses: Plan-Plus and Plan-Power: Up to 50% of Sum Insured subject to maximum of 5 lacs Plan-Prime: Up to 50% of Sum Insured subject to maximum of 10 lacs d. Air Ambulance: 7.5% of Base Sum Insured or Rs 5 Lakhs whichever is higher. e. Radio Taxi: 1000 per Hospitalization f. Health Checkup: 3000 g. Vaccination Cover: Plan - Plus & Power: 2000 and Plan - Prime: 3500 h. Vision Correction: Plan - Plus: 50000 and Plan - Power and Prime: 100000 i. Second Opinion: Plan- Plus: 3000 and Plan - Prime: 5000 	3.1.2 3.1.4 3.1.7 3.7.8.2 3.7.8.3 3.7.9.1 3.7.9.2
		<p>Co-Payment 20% co-payment on the Assessed Claim Amount if at the time of inception of the first Policy with the Company, the age of the Insured Person (or eldest Insured Person in case of Family Floater Policy) is 61 years and above. Zone based Co-payment: 20% co-payment for claims administered from Zone A, if policy was issued for Zone B.</p>	6.2

7	Renewal Condition	The policy shall ordinarily be renewable except on grounds of fraud, moral hazard, misrepresentation by the insured person. Renewal shall not be denied on the ground that the insured had made a claim or claims in the preceding policy years	5.1.10									
8	Renewal Benefits	a. Cumulative Bonus b. Call Option for Enhancement of Base Sum Insured c. Loyalty Cover d. Waiver of Premium e. Guaranteed Cumulative Bonus(if applicable)	3.5.1 3.5.2 3.5.3 3.4.1 3.7.1.1									
9	Cancellation	a. The Policyholder may cancel this Policy by giving 15 days' written notice, and in such an event, the Company shall refund premium on short term rates for the unexpired Policy Period as per the rates detailed in the policy terms and conditions. b. The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud by the Insured Person by giving 15 days' written notice	5.1.7									
10	Claims	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 https://www.reliancegeneral.co.in/Insurance/Self-Help/Cashless-Garages-and-Hospitals.aspx?network=Hospitals	6.1.2 (i)									
		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 hereunder	6.1.2(ii)									
		<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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2	Reimbursement of post expenses post hospitalization treatment	Within fifteen days from completion of post-hospitalization										
For details on claim procedure please refer the policy document												
11	Policy Servicing	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.- 022- 41112600										
12	Grievances/ Complaints	a. Details of Grievance redressal officer refer the link (https://www.reliancegeneral.co.in/Insurance/About-Us/Grievance-Redressal.aspx) b. IRDAI Integrated Grievance Management System- https://igms.irda.gov.in/ c. Insurance Ombudsman - The contact details of the Insurance Ombudsman offices have been provided as Annexure-B of Policy document	5.1.17									
13	Insured's Rights	a. Free Look period of 15 days from the date of receipt of the policy shall be applicable at the inception.	5.1.15									
		b. Lifelong renewability (except on certain specific grounds)	5.1.10									
		c. Right to migrate from one product to another product of the company (E-mail us at rgicl.services@relianceada.com and For correspondence contact us Reliance General Insurance, Winway Building 2nd & 3rd Floor, 11/12 Block No-4, Old no-67, South Tukoganj, Indore(M.P) -452001 Contact No.- 022-41112600	5.1.8									
		d. Right to port the from one company to another company (E-mail us at rgicl.services@relianceada.com and For correspondence contact us Reliance General Insurance, Winway Building 2nd & 3rd Floor, 11/12 Block No-4, Old no-67, South Tukoganj Indore (M.P) -452001 Contact No.- 022-41112600	5.1.9									
		e. Change in SI during the policy term or at the time of renewal E-mail us at rgicl.services@relianceada.com	5.2.6									
		f. Norms on TAT for Pre-Auth and Settlement of reimbursement.	3.2.6									
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1	Pre-Authorization	Within six hours of receipt of necessary document.										
2	Reimbursement of hospitalization, day care and expenses	Within twenty one days of date of receipt of last necessary document.										

14	Insured's Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid	5.2.4
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Legal Disclaimer Note: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail.

Premium Illustration

Benefit Illustration in respect of policies offered on Individual and Family Floater basis										
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 (Rs.)	Sum insured (Rs.)	Premium (Rs.)	Discount, if any	Premium after discount (Rs.)	Sum insured (Rs.)	Premium or consolidated premium for all members of family (Rs.)	Floater discount, if any	Premium after discount (Rs.)	Sum insured (Rs.)
51 years	14,524	5 lakhs	14,524		13,072	5 lakhs				
44 years	7,551	5 lakhs	7,551		6,796	5 lakhs				
23 years	5,055	5 lakhs	5,055	10%	4,550	5 lakhs	25,691	0%	25,691	5 lakhs
18 years	3,428	5 lakhs	3,428		3,085	5 lakhs				
Total Premium for all members of the family is Rs. 30,558 when each member is covered separately.			Total Premium for all members of the family is Rs. 27,502 when they are covered under a single policy.				Total Premium when policy is opted on floater basis is Rs. 25,691			
Sum insured available for each individual is Rs. 5 lakhs			Sum insured available for each family member is Rs. 5 lakhs				Sum insured of Rs. 5 lakhs is available for the entire family.			
Note: 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										