



**Oriental
Insurance**

THE ORIENTAL INSURANCE COMPANY LIMITED
Regd. Office: Oriental House, A-25/27,
Asaf Ali Road, New Delhi-110002
CIN No.U66010DL1947GOI007158

SAKSHAM SWASTHYA POLICY-ORIENTAL

Customer Information Sheet

(Description is illustrative and not exhaustive)

S.NO	TITLE	DESCRIPTION	POLICY CLAUSE NO
1.	Product Name	SAKSHAM SWASTHYA POLICY-ORIENTAL	NA
2.	What I am covered for	<p>a) Hospitalization expenses — Expenses incurred on hospitalization for a minimum period of 24 hours including pre-hospitalization expenses for a period of 30 days and post-hospitalization expenses for a period of 60 days. Time limit of 24 hrs shall not apply in respect of Day Care Treatment.</p> <p>b) AYUSH Coverage — Expenses incurred on hospitalization under AYUSH Treatment.</p> <p>c) Expenses incurred for treatment of cataract.</p> <p>d) Expenses incurred on hospitalization for Modern Treatment listed procedures.</p> <p>e) Expenses on road Ambulance are subject to a maximum of Rs. 2000/-per hospitalization.</p>	Section 4
3.	What are the major exclusions 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> <p>a. Admission primarily for investigation & 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 does not fulfil certain conditions</p> <p>d. Change of Gender treatments</p> <p>e. Expenses for cosmetic or plastic surgery expenses related to any treatment necessitated due to participation in hazardous or adventure sports</p>	Section 5

4.	Waiting period	<p>a. Pre-Existing Diseases (other than pre-existing HIV/AIDS and Disability) will be covered after a waiting period of forty-eight (48) months of continuous coverage.</p> <p>b. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident</p> <p>c. Expenses related to the treatment of Pre-existing Disability covered after 24 months of continuous coverage from date of Commencement of policy.</p> <p>d. Specified surgeries/ treatments/ diseases are covered after a specific waiting period as per policy terms and conditions.</p>	Section 5
5.	Payment basis	Payment on an indemnity basis (Cashless/ Reimbursement) and Benefit basis	Section 6
6.	Loss Sharing	<p>In case of a claim, this policy requires you to share the following costs:</p> <p>a) Expenses exceeding the following sub-limits:</p> <p>i. Room Charges (Hospitalization):</p> <ul style="list-style-type: none"> • Room Rent — Up to maximum of 1% of SI, per day • ICU charges — Up to maximum of 2 % of SI per day <p>b) Cataract — up to Rs. 40,000/- per each eye in one policy year</p> <p>c) Modern treatment methods and Advancements in technology: Up to 50% of the Sum Insured.</p> <p>d) AYUSH Treatment expenses covered up to 50% of Sum insured</p> <p>e) Expenses incurred on road Ambulance subject to a maximum of Rs.2000/- per hospitalisation.</p> <p>f) Each and every claim under the Policy shall be subject to a Co-payment of 20% applicable to claim amount admissible and payable as per the terms and conditions of the Policy. This co-payment can be waived off by paying an additional premium.</p>	Section 4
7.	Renewal Conditions	<p>The policy shall ordinarily be renewable except on grounds of fraud, moral hazard, or 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</p> <p>For details on the renewal please refer to the policy document.</p>	Section 6.1.10

8.	Cancellation	<p>a. The Insured may cancel this Policy by giving 15 days written notice and in such an event, the Company shall refund the premium on short-term rates for the unexpired Policy Period as per the rates detailed in the policy terms and conditions.</p> <p>b. The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, or fraud by the Insured Person by giving 15 days written notice</p>	Section 6.1.7									
9.	Claims	<p>a. For Cashless Service: Hospital Network details can be obtained.</p> <p>b. For Reimbursement of claims: For reimbursement of claims the insured person may submit the necessary documents to the Company within the prescribed time limit as specified hereunder.</p> <table border="1" data-bbox="424 667 1273 1205"> <thead> <tr> <th data-bbox="424 667 523 734">S. No</th> <th data-bbox="523 667 847 734">Type of Claim</th> <th data-bbox="847 667 1273 734">Prescribed Time limit</th> </tr> </thead> <tbody> <tr> <td data-bbox="424 734 523 981">1.</td> <td data-bbox="523 734 847 981">Reimbursement of hospitalization, day care and pre hospitalization expenses</td> <td data-bbox="847 734 1273 981">Within thirty days of date of discharge from hospital</td> </tr> <tr> <td data-bbox="424 981 523 1205">2.</td> <td data-bbox="523 981 847 1205">Reimbursement of post hospitalization expenses</td> <td data-bbox="847 981 1273 1205">Within fifteen days from completion of post hospitalization treatment</td> </tr> </tbody> </table> <p>For details on the claim procedure please refer to the policy document.</p>	S. No	Type of Claim	Prescribed Time limit	1.	Reimbursement of hospitalization, day care and pre hospitalization expenses	Within thirty days of date of discharge from hospital	2.	Reimbursement of post hospitalization expenses	Within fifteen days from completion of post hospitalization treatment	Section 7
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2.	Reimbursement of post hospitalization expenses	Within fifteen days from completion of post hospitalization treatment										
10.	Grievances/Complains	<p>Company officials :</p> <p>Website: www.orientalinsurance.org.in Toll free: 1800118485 Or 011-33208485 E-mail: csd@orientalinsurance.co.in</p> <p>Insurance Ombudsman — The contact details Ombudsman offices have been provided as Annexure-I of the policy document</p>	Section 6.1.15									
11.	Insured's Rights	<p>Free Look period Grace period Implied Renewability (except on certain specific grounds) Migration and Portability Turn Around Time (TAT) for issue of Pre-auth and settlement of Reimbursement</p>	Section 6									

12.	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. Disclosure of Material Information during the policy period such as change in occupation.	
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.			