



**Oriental
Insurance**

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

Customer Information Sheet

Description is illustrative and not exhaustive


Sl. No	Title	Description	Refer to Policy Clause No.
1	Product Name	ORIENTAL YOUTH ECO CARE POLICY	
2	Policy No		
3	Type of insurance product/ policy	Indemnity (Where Insured Losses are covered up to Sum Insured under the policy)	
4	Sum Insured (Basis) Along with Amount	<ul style="list-style-type: none"> • 2 Plans - Basic & Premium • Sum Insured (SI) Rs.3 lac to Rs.100 lacs 	
5.	Policy Coverage (what the Policy covers)	<p style="text-align: center;">BASIC PLAN</p> <ul style="list-style-type: none"> • HOSPITALIZATION EXPENSES • ROAD AMBULANCE SERVICE CHARGES • AIR AMBULANCE COVER • AYUSH TREATMENT • HIV/ AIDS COVER • MENTAL ILLNESS COVER • MODERN TREATMENT • DOMICILIARY HOSPITALIZATION • TELEMEDICINE/ONLINE CONSULTATION • ADDITIONAL SI FOR CRITICAL ILLNESS • CUMULATIVE BONUS • ORGAN DONOR EXPENSES- WHEN INSURED PERSON IS THE RECIPIENT • ORGAN DONOR EXPENSES- WHEN INSURED PERSON IS THE DONOR • CATARACT TREATMENT • PRE AND POST HOSPITALIZATION-MEDICAL EXPENSES INCURRED 45 DAYS PRIOR TO HOSPITALIZATION AND UP TO 90 DAYS POST HOSPITALIZATION 	<p>3.1 to 3.19</p> <p>3.20 to 3.23</p>

		PREMIUM PLAN	
		<ul style="list-style-type: none"> • DAILY HOSPITAL CASH ALLOWANCE • MEDICAL SECOND OPINION • MATERNITY EXPENSES • ASSISTED REPRODUCTION TREATMENT (ART) 	
6	<p>Exclusions (what the policy does not cover)</p>	<ul style="list-style-type: none"> i. Any disease / illness any condition arising there from other than those specifically covered in the policy. ii. Pre-existing diseases. iii. Any hospital admission primarily for investigation/diagnostic purpose. iv. Sex change surgery, cosmetic surgery & plastic surgery. v. Infertility treatments. vi. Obesity and weight control. vii. Change of Gender treatments. viii. Excluded providers. ix. Hazardous or Adventure Sport. x. Refractive error, cosmetic dental surgeries. xi. Unproven Treatments. xii. Substance abuse, self-inflicted injuries. xiii. Breach of law. xiv. Treatments received in health hydro's, nature cure clinics, spas or similar establishments. xv. Dietary supplements and substances that can be purchased without prescription. <p>Any kind of admission fees, registration fees levied by the hospital.</p> <p>(Note: the above is a partial listing of the policy exclusions. Please refer to the policy clauses for the full listing).</p>	4
7	<p>Waiting period</p> <p>-Time period during which specified diseases/treatments are not covered</p> <p>-It is counted from the beginning of the policy coverage</p>	<ol style="list-style-type: none"> 1. Initial waiting period: 30 days for all illnesses (not applicable on renewal or for accidents) 2. Specific waiting periods: 24 months for named diseases 3. Pre-existing diseases: Covered after 12 months 	<p>4.1</p> <p>4.2</p> <p>4.3</p>

8	<p>Financial Limit of Coverage.</p> <p>i) Sub-Limit (it is 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 policy holder/insured</p> <p>iii) Deductible (it is a specified amount :</p> <p>Upto which an insurance company will not pay any claim and Which will be deducted from total claim amount (if claim amount is more than the specified amount)</p> <p>iv) any other limit (as applicable)</p>	<ul style="list-style-type: none"> • Upto sum insured. • Hospital admission of minimum 24 hours <table border="1" data-bbox="606 340 1268 824"> <thead> <tr> <th colspan="2">Room, Boarding and Nursing Expenses as provided by the Hospital /Nursing Home</th> </tr> <tr> <th>Sum Insured Slabs</th> <th>Limit per day</th> </tr> </thead> <tbody> <tr> <td>Up to 5 lakhs</td> <td>Single Room up to 1% of Sum Insured, maximum up to Rs 5,000/- per day</td> </tr> <tr> <td>7- 10 lakhs</td> <td>Single Room, maximum up to Rs. 10,000/- per day.</td> </tr> <tr> <td>Above 10 lakhs Actuals Expenses.</td> <td>Actuals Expenses.</td> </tr> </tbody> </table> <table border="1" data-bbox="606 869 1279 1279"> <thead> <tr> <th colspan="2">Intensive Care Unit (ICU) Expenses as provided by the Hospital /Nursing Home</th> </tr> <tr> <th>Sum Insured Slabs</th> <th>Limit per day</th> </tr> </thead> <tbody> <tr> <td>Up to 5 lakhs</td> <td>Maximum up to Rs.10,000/- per day</td> </tr> <tr> <td>7- 10 lakhs</td> <td>Maximum up to Rs. 20,000/- per day</td> </tr> <tr> <td>Above 10 lakhs Actuals Expenses.</td> <td>Actuals Expenses.</td> </tr> </tbody> </table> <table border="1" data-bbox="606 1323 1279 1915"> <thead> <tr> <th colspan="2">Road Ambulance Expenses :</th> </tr> <tr> <td colspan="2">Subject to an admissible hospitalization claim, Emergency Road following Ambulance expenses incurred is payable</td> </tr> <tr> <th>Sum Insured Slabs</th> <th>Limit per day</th> </tr> </thead> <tbody> <tr> <td>Up to Rs.10 lakhs</td> <td>Up to Rs.5,000/- per occurrence maximum up to 10,000/- per policy period.</td> </tr> <tr> <td>Rs. 15-25 lakhs</td> <td>Up to Rs. 10,000/- per occurrence maximum up to Rs. 20,000/- per policy period.</td> </tr> <tr> <td>Above Rs.25 lakhs</td> <td>Up to Rs. 25,000/- per occurrence maximum up</td> </tr> </tbody> </table>	Room, Boarding and Nursing Expenses as provided by the Hospital /Nursing Home		Sum Insured Slabs	Limit per day	Up to 5 lakhs	Single Room up to 1% of Sum Insured, maximum up to Rs 5,000/- per day	7- 10 lakhs	Single Room, maximum up to Rs. 10,000/- per day.	Above 10 lakhs Actuals Expenses.	Actuals Expenses.	Intensive Care Unit (ICU) Expenses as provided by the Hospital /Nursing Home		Sum Insured Slabs	Limit per day	Up to 5 lakhs	Maximum up to Rs.10,000/- per day	7- 10 lakhs	Maximum up to Rs. 20,000/- per day	Above 10 lakhs Actuals Expenses.	Actuals Expenses.	Road Ambulance Expenses :		Subject to an admissible hospitalization claim, Emergency Road following Ambulance expenses incurred is payable		Sum Insured Slabs	Limit per day	Up to Rs.10 lakhs	Up to Rs.5,000/- per occurrence maximum up to 10,000/- per policy period.	Rs. 15-25 lakhs	Up to Rs. 10,000/- per occurrence maximum up to Rs. 20,000/- per policy period.	Above Rs.25 lakhs	Up to Rs. 25,000/- per occurrence maximum up	<p>3.1,</p> <p>3.2</p> <p>3.6</p> <p>3.5</p>
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		<p>Air Ambulance Cover limit: Only for life threatening medical emergency condition/s which requires immediate and rapid ambulance transportation to the hospital / medical centre that ground transportation cannot provide with limits based on SI</p> <table border="1"> <tr> <td>Sum Insured Slabs</td> <td>Limit</td> </tr> <tr> <td>Up to 10 lakhs</td> <td>Maximum up to 10% of Sum Insured</td> </tr> <tr> <td>15-25 lakhs</td> <td>Maximum up to 25% of Sum Insured</td> </tr> <tr> <td>Above 25 lakhs</td> <td>Actual expenses Incurred.</td> </tr> </table>	Sum Insured Slabs	Limit	Up to 10 lakhs	Maximum up to 10% of Sum Insured	15-25 lakhs	Maximum up to 25% of Sum Insured	Above 25 lakhs	Actual expenses Incurred.	3.8
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		<ul style="list-style-type: none"> • AYUSH Treatment up to 25% of the Sum Insured. 	3.11								
		<ul style="list-style-type: none"> • Mental Illness Cover limit: <table border="1"> <tr> <td>Sum Insured Slabs</td> <td>Limit per policy period</td> </tr> <tr> <td>Up to 10 lakhs</td> <td>up to 50% of Sum Insured</td> </tr> <tr> <td>Above 10 lakhs</td> <td>As per the limits of Sum Insured</td> </tr> </table>	Sum Insured Slabs	Limit per policy period	Up to 10 lakhs	up to 50% of Sum Insured	Above 10 lakhs	As per the limits of Sum Insured	3.12		
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		<ul style="list-style-type: none"> • Modern Treatment Limit: - <table border="1"> <tr> <td>Sum Insured Slabs</td> <td>Limit per policy period</td> </tr> <tr> <td>Up to 10 lakhs</td> <td>up to 25% of Sum Insured</td> </tr> <tr> <td>Above 10 lakhs</td> <td>As per the limits of Sum Insured</td> </tr> </table>	Sum Insured Slabs	Limit per policy period	Up to 10 lakhs	up to 25% of Sum Insured	Above 10 lakhs	As per the limits of Sum Insured	3.12		
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		<ul style="list-style-type: none"> • Domiciliary Hospitalization i.e. treatment at home, if medical treatment is continuously required for more than three (3) days, in which case the cost of medical treatment for the eligible period shall be payable up to 10% of Sum Insured subject to maximum up to Rs 50000/- per family per policy period. 	3.13								

	<ul style="list-style-type: none"> • Treatment for Dog bite (or bite of any other rabid animal like monkey, cat etc.)- Maximum Rs.5,000/- actually incurred on immunization injections in any one Policy Period. 	3.17										
	<ul style="list-style-type: none"> • Telemedicine/Online Consultation limit: <table border="1"> <thead> <tr> <th>Sum Insured Slabs</th> <th>Limit per policy period</th> </tr> </thead> <tbody> <tr> <td>Up to 10 lakhs</td> <td>Max 2 consultations per policy period, max Rs. 1000 per consultation</td> </tr> <tr> <td>Above 10 lakhs</td> <td>Max 3 consultations per policy period, max Rs. 1500 per consultation</td> </tr> </tbody> </table>	Sum Insured Slabs	Limit per policy period	Up to 10 lakhs	Max 2 consultations per policy period, max Rs. 1000 per consultation	Above 10 lakhs	Max 3 consultations per policy period, max Rs. 1500 per consultation	3.18				
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	<ul style="list-style-type: none"> • Organ Donor Benefit when Insured is the Donor: Actual expenses up to 10% of Sum Insured. <table border="1"> <thead> <tr> <th colspan="2">CATARACT TREATMENT LIMIT</th> </tr> <tr> <th>Sum Insured Slabs</th> <th>Limit</th> </tr> </thead> <tbody> <tr> <td>Up to 10 lakhs</td> <td>up to Rs 50,000/- per eye including IOL.</td> </tr> <tr> <td>Above 10 lakhs</td> <td>up to Rs 1,00,000/- per eye including IOL.</td> </tr> </tbody> </table>	CATARACT TREATMENT LIMIT		Sum Insured Slabs	Limit	Up to 10 lakhs	up to Rs 50,000/- per eye including IOL.	Above 10 lakhs	up to Rs 1,00,000/- per eye including IOL.	3.20		
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		<ul style="list-style-type: none"> • Assisted Reproduction Treatment (Only under Premium Plan): The maximum liability of the Company for such treatment shall be limited to Rs. 2,00,000/-. This benefit (2 Lakhs) will be a part of the basic SI. A waiting period of 36 months from the date of first inception of this policy with the Company for the insured persons (both spouses) 									
9	Claims/ claim Procedure	<p>For Cashless Service: Claim in respect of Cashless Access Services will be through the Company / TPA provided admission is in a network Hospital/ Nursing Home and is subject to pre admission authorization.</p> <p>Hospital Network Details are available at www.orientalinsurance.org.in</p> <p>For reimbursement of Claim: Policy issuing Office /TPA</p> <ul style="list-style-type: none"> • Cashless services for covered expenses in Network hospitals • Reimbursement of Admissible expenses <p>Web link for following :</p> <ol style="list-style-type: none"> 1. Network Hospital Details: https://orientalinsurance.org.in/en/network-hospitals?isSelected=locator&isRefresh=true 2. Help Line Number:  Toll free : 1800118485/011-33208485 3. Hospitals which are blacklisted or from where no claims will be accepted by insurer. https://orientalinsurance.org.in/en/network-hospitals 4. Download/getting claim form https://orientalinsurance.org.in/en/download-claimform?isSelected=policyDownload&isRefresh=true 	5.21								

10	Policy servicing	<p>1. Company officials : Website: www.orientalinsurance.org.in</p> <p>2 . Toll free: 1800118485 Or 011-33208485</p> <p>3. Policy issuing office</p>	
11	Grievances/ Complaints	<ul style="list-style-type: none"> • www.orientalinsurance.org.in E-mail: csd@orientalinsurance.co.in • IRDAI Integrated Grievance Management System https://igms.irda.gov.in • Insurance Ombudsman - Contact details of the Insurance Ombudsman have been provided in Annexure I of the policy document. <p>Ombudsman website: http://ecoi.co.in/ombudsman.html</p>	
12	Things to remember	<p>a. Free Look period of 15 days from the date of receipt of the policy shall be applicable at the inception</p> <p>B. Renewable Conditions</p> <ul style="list-style-type: none"> • Grace period of 30 days • Policy is ordinarily renewable <p>Adjustment of premium on renewal in lieu of OMP policy.</p> <p>c. Right to migrate from one product to another product of the company. www.orientalinsurance.org.in</p> <p>d. Right to port the policy from one company to another company – www.orientalinsurance.co.in</p> <p>e. Change in SI during the policy term or at the time of renewal (please contact the policy issuing office)</p> <p>f. Insurer to specify the norms on TAT – Please refer to clause 9 of the CIS of policy document.</p> <p>Moratorium Period: After Completion of eight</p>	

		<p>continuous years under the policy no look back to be applied. This period of eight year is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of eight continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits.</p> <p>After the expiry of Moratorium period no health policy shall be contestable except for proven fraud and permanent exclusion specified in the policy contract.</p> <p>Renewal Benefits : Health checkup benefit for every block of 3 claim free policy years for the insured persons up to 1% of average sum insured subject to maximum Rs. 5000/- per insured person</p>	
13	Insured's Obligations	<p>Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.</p> <p>Disclosure of Material Information during the policy period such as change in occupation.</p>	

Declaration by the Policy Holder:

I have read the above and confirm having noted the details

Place:

Date:

Signature of the Policy Holder