

Customer Information Sheet

Description is illustrative and not exhaustive

| S. No. | Title | Description | Refer to Policy Clause No. |
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| 1 | Product Name | Happy Family Floater Policy - 2015 | |
| 2 | What am I covered for: | <ul style="list-style-type: none"> • 3 Plans-Silver, Gold & Diamond-Sum Insured Hospital admission longer than 24 hours (SI) Rs.2 to Rs.20 lacs Hospital admission of minimum 24 hours • Related medical expenses incurred 30 days prior to hospitalization &.60 days from date of discharge. • Specified / Listed procedures requiring less than • 24 hours hospitalization (day care) • Cover for 11 critical illnesses on benefit basis. • Daily Hospital Cash Allowance benefit of 0.1% of SI per day, max 10 days per illness limited to 1.5% of SI in a policy period-Gold and Diamond Plan • Attendant Allowance- Rs.500 & Rs.1000 per day of hospitalisation, in Gold Plan & Diamond Plan respectively, max 10 days per illness, limited to 15 days in a policy period- in respect of insured persons above the age of 90 days to 10 years. • Ambulance Charges-Rs 1000 to Rs.3000 per illness, limited to Rs.3000-Rs.8000 per policy period. • Donor Expenses when Insured is the Recipient • Organ Donor Benefit when Insured is the Donor • Medical Second Opinion on reimbursement basis • Maternity Expenses cover upto 2.5% of SI, in Diamond Plan • New born Baby cover upto 2.5% ofSI, in Diamond Plan • Restoration of SI under 2 options-50% &100%. • Ayurvedic, Siddha, Unani and Homeopathic treatment. • Optional Covers-Restoration of SI, Personal • Accident, Life Hardship Survival benefit • Extension of policy covering SAARC countries | 1.1A, 1.2, 2.1,3,3.3.8,3.9 |

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| 3 | What are the major exclusions in the policy: | <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 spas, 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 & 5 |
| 4 | Waiting period | <ul style="list-style-type: none"> • Initial waiting period: 30 days for all illnesses (not applicable on renewal or for accidents) • Specific waiting periods: 24 months for named diseases (clauses aa to bb) • Pre-existing diseases: Covered after 48 months | 4.2, 4.3, 4.4 |
| 5 | Payout basis | <ul style="list-style-type: none"> • Cashless services of covered expenses upto Rs. 1 lakh only • Reimbursement of covered expenses | 7.8 |
| 6 | Cost sharing | <ul style="list-style-type: none"> • 20% of each claim as Co-payment • Option of Voluntary co-payment | 3.22, 3.23 |
| 7 | Renewal Conditions | <ul style="list-style-type: none"> • Your policy is ordinarily renewable • Other terms and conditions of renewal | 8 |
| 8 | Renewal Benefits | <ul style="list-style-type: none"> • None | NA |

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| 9 | Cancellation | <ol style="list-style-type: none"> 1. The Insured 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. 2. 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 30 days' written notice. 3. There would be no refund of premium on cancellation on grounds of misrepresentation non-disclosure of material facts or fraud. | 7.12 |
| 10 | Claims | <ul style="list-style-type: none"> • For Cashless Service: Hospital Network Details are available at www.orientalinsurance.org.in • For reimbursement of Claim | |
| 11 | Policy Servicing/ Grievances/ Complaints | <p>Company officials :</p> <p>Website: www.orientalinsurance.org.in Toll free: 1800118485 Or 011- 33208485 E-mail: csd@orientalinsurance.co.in IRDAI/(IGMS/Call Centre) : https://igms.irda.gov.in/ Ombudsman website: http://ecoi.co.in/ombudsman.html</p> | |
| 12 | Insured's Rights | <ul style="list-style-type: none"> • Free Look • 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 | |
| 13 | Insured's Obligations | <p>Please disclose all pre-existing disease/s or condition/s before buying a policy.</p> <p>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> | |
| <p>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.</p> | | | |