

(LEGAL DISCLAIMER) NOTE: The information must be read in conjunction with the Prospectus 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.

## ORIENTAL INSURANCE BANK SAATHI POLICY -GROUP

### CUSTOMER INFORMATION SHEET

| Sr. No. | Title                        | Description   | Refer to Policy Clause No. |
|---------|------------------------------|---|----------------------------|
| 1.      | <b>Product Name</b>          | <b>ORIENTAL INSURANCE BANK SAATHI POLICY - GROUP</b>  |                            |
| 2.      | <b>What I am Covered For</b> | Hospitalization expenses- Expenses incurred on hospitalization for 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.   | 2.1.II                     |
|         |                              | Intensive Care Unit (ICU) or Specialised Expenses as provided by the Hospital /Nursing Home.  | 2.1.III                    |
|         |                              | Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialists Fees  | 2.1 IV                     |
|         |                              | Anaesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines & Drugs, Dialysis, Chemotherapy, Radiotherapy, Cost of Prosthetic devices implanted during Surgery, Relevant Laboratory / Diagnostic tests, X-Ray and other medical expenses related to the covered treatment | 2.2                        |
|         |                              | Road Ambulance Cover  | 2.3                        |
|         |                              | Organ Donor Expenses – When Insured Person is Recipient   | 2.4                        |
|         |                              | Pre and Post Hospitalisation expenses   | 2.5 & 2.6                  |
|         |                              | AYUSH Treatment Expenses  | 2.7                        |
|         |                              | Expenses incurred on treatment of Mental Illness  | 2.8                        |
|         |                              | Patient's Attendant Allowance   | 2.9                        |
|         |                              | Coverage for Modern Treatment & Techniques/Method   | 2.10                       |
|         |                              | Telemedicine/Teleconsultation   | 2.11                       |
|         |                              | Daily Hospital Cash Allowance   | 2.12                       |
|         |                              | Maternity expenses  | 2.13                       |
|         |                              | Newborn Baby cover  | 2.14                       |
|         |                              | Assisted Reproduction Treatment   | 2.15                       |
|         |                              | Medical Second Opinion for 11 specified major Illnesses   | 2.16                       |

The Oriental Insurance Company Limited

Oriental Insurance Bank Saathi Policy - Group

UIN: OICHLGP22026V012122

Customer information sheet

|   |  |  |      |
|---|--|--|------|
|   |  | HIV/AIDS Cover   | 2.21 |
| 3 | <b>What are the Major exclusions in the policy</b> | Following is a partial list of the policy exclusions. Please refer to the policy document for the complete list of exclusions  | 4    |
|   |  | Admission primarily for investigation & evaluation   |      |
|   |  | Admission primarily for rest Cure, rehabilitation and respite care   |      |
|   |  | Expenses related to the surgical treatment of obesity that do not fulfil certain conditions  |      |
|   |  | Change-of-Gender treatments  |      |
|   |  | Expenses for cosmetic or plastic surgery   |      |
|   |  | Expenses related to any treatment necessitated due to participation in hazardous or adventure sports   |      |
| 4 | <b>Waiting period</b>                              | Pre-Existing Diseases will be covered after a waiting period of forty eight (48) months of continuous coverage   | 4.1a |
|   |  | Expenses related to the treatment of any illness within 15 days from the first policy commencement date shall be excluded except claims arising due to an accident.  | 4.1c |
|   |  | Specified surgeries/treatments/diseases are covered after specific waiting period  | 4.1b |
| 5 | <b>Payment basis</b>                               | Payment on indemnity basis (Cashless / Reimbursement)  | 5.6  |
| 6 | <b>Loss sharing</b>                                | In case of a claim, this policy requires you to share the following costs:   |      |
|   |  | Expenses exceeding the following Sub-limits:   |      |
|   |  | Room Charges (Hospitalization):  |      |
|   |  | Room Rent –<br>PLAN A - 1% of the Sum Insured per day<br>PLAN B - 1% of the Sum Insured per day for 6, 8, 10 Lacs.<br>For SI levels above 10 Lacs, 1% of 10 lac plus 0.5% of every additional 1 lac of SI above 10 lacs. | 2.1  |
|   |  | ICU charges –<br>PLAN A - 2% of the Sum Insured per day<br>PLAN B - 2% of the Sum Insured per day for 6, 8, 10 lacs.<br>For SI levels above 10 Lacs, 1% of every additional 1 Lac of SI above 10 Lacs                    | 2.1  |
|   |  | In case Room/ICU/ICCU rent exceeds the limits specified the claim shall be subject to the proportionate deduction.   | 2.2  |
|   |  | Expenses beyond disease/Procedure wise   | 2.17 |

|         |   | capping  |         |               |                       |   |   |   |   |  |   |  |
|---------|---|--|---------|---------------|-----------------------|---|---|---|---|--|---|--|
|         |   | Expenses beyond limits prescribed for Modern treatment methods and Advancements in technology  | 2.10    |               |                       |   |   |   |   |  |   |  |
| 7       | <b>Renewal Conditions</b>   | 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.   | 6.4     |               |                       |   |   |   |   |  |   |  |
| 8       | <b>Cancellation</b>   | 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 as per the rates detailed in the policy terms and conditions.<br><br>The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, and fraud by the Insured Person by giving 15 days' written notice.  | 5.14    |               |                       |   |   |   |   |  |   |  |
| 10      | <b>Claims</b>   | a. For Cashless Service:<br>Contact the TPA or visit our Website at <a href="https://orientalinsurance.org.in/">https://orientalinsurance.org.in/</a> for the list of Hospitals where cashless facility is available.<br>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.   | 5.6     |               |                       |   |   |   |   |  |   |  |
|         |   | <table border="1"> <thead> <tr> <th>Sl. 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 thirty days of date of discharge from hospital</td> </tr> <tr> <td>2</td> <td>Reimbursement of post hospitalization expenses</td> <td>Within fifteen days from completion of post hospitalization treatment</td> </tr> </tbody> </table> | Sl. 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 |  |
| Sl. 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  |         |               |                       |   |   |   |   |  |   |  |
|         |   | For details on claim procedure please refer the  |         |               |                       |   |   |   |   |  |   |  |

|  |                              |   |      |
|--|------------------------------|---|------|
|  |                              | policy document.  |      |
| 11   | <b>Policy Servicing</b>      | <ul style="list-style-type: none"> <li>In the event of Insured having any grievance relating to the Insurance or any Claim thereunder, he may contact us at any of our Branches/Regional offices.</li> </ul>  | 6.14 |
|  | <b>Grievances/Complaints</b> | a. <a href="http://www.orientalinsurance.org.in">www.orientalinsurance.org.in</a><br>b. IRDAI Integrated Grievance Management System <a href="http://igms.irda.gov.in">http://igms.irda.gov.in</a><br>Insurance Ombudsman – Contact details of the Insurance Ombudsman have been provided in Annexure III of the policy document. | 6.14 |
| 12   | <b>Insured's Rights</b>      | a. Free Look period of 15 days from the date of receipt of the policy shall be applicable at the inception.   | 6.2  |
|  |                              | b. Lifelong renewability (except on certain specific grounds)   | 6.4  |
|  |                              | c. Change in SI during the policy term or at the time of renewal (please contact the policy issuing office)   | 6.1  |
|  |                              | d. Free Look period of 15 Days  | 6.2  |
| 13   | <b>Insured's Obligations</b> | The policy shall be void and all premiums paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact by the policyholder.   | 6.17 |
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### Insurance is a subject matter of solicitation