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### **CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY**

<b>SI No</b>	<b>Title</b>	<b>Description</b>	<b>Policy Clause Number</b>
1	Name of the Insurance Product/Policy	Arogya Pragati Plus- Top up Re invented	<b>PAGE 1</b>
2	Policy Number		
3	Type of Insurance Product/Policy	Indemnity	<b>Policy Clause Section 1 and 3.1</b>
4	Sum Insured Basis	Both Individual & Floater Sum insured. <ul style="list-style-type: none"> <li>• For Threshold 5L to 15L, Sum Insured – 1L to 50L</li> <li>• For Threshold 16L to 50L, Sum Insured 5L to 50L</li> </ul>	<b>Prospectus Point 5 &amp; 7.</b>
5	Policy Coverage (What Policy Covers?)	<b>Expense in respect of:</b>	
		Admission in hospital beyond 24 hours	<b>Policy Clause 2.17</b>
		<b>Pre-Hospitalisation</b> (treatment prior to admission in hospital) of 30 and 60 days for Gold and Platinum Plan respectively.	<b>Policy clause 2.35 &amp; 3.1(e)</b>
		<b>Post-Hospitalisation</b> (treatment after discharge from Hospital) within 60 and 90 days from date of discharge for Gold and Platinum Plan respectively.	<b>Policy clause 2.37 &amp; 3.1(f)</b>
		<b>Specified / Listed procedures requiring less than 24 hours of hospitalization (day care)</b>  List of 226 Day care procedure in policy clause	<b>Annexure 1: List 1 of Day Care Procedure</b>

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		<p>Undergoing specified procedure in case of 18 Critical illness</p> <ul style="list-style-type: none"> <li> <b>Optional cover 1: Critical Care benefit</b>                      On diagnosis with any of the 18 listed critical illness for the first time, Lump sum amount is payable as mentioned below                 </li> </ul> <table border="1" data-bbox="634 449 1247 600"> <thead> <tr> <th>Plan</th> <th>Benefit Payable</th> </tr> </thead> <tbody> <tr> <td>Gold Plan</td> <td>Rs. 5,00,000</td> </tr> <tr> <td>Platinum Plan</td> <td>Rs. 5,00,000 or Rs. 7,50,000</td> </tr> </tbody> </table>	Plan	Benefit Payable	Gold Plan	Rs. 5,00,000	Platinum Plan	Rs. 5,00,000 or Rs. 7,50,000	<p><b>Policy clause 3.14</b></p>
Plan	Benefit Payable								
Gold Plan	Rs. 5,00,000								
Platinum Plan	Rs. 5,00,000 or Rs. 7,50,000								
		<ul style="list-style-type: none"> <li> <b>Medical Second Opinion:</b>                      In case insured requires to undergo surgery for any of the 18 critical illness defined under 2.9 and 2.50 of the Policy Clause, consultation expense incurred for this will be reimbursed as below:                 </li> </ul> <table border="1" data-bbox="634 827 1247 1052"> <thead> <tr> <th>Plan</th> <th>Charges payable (per policy period)</th> </tr> </thead> <tbody> <tr> <td>Gold Plan</td> <td>Up to a maximum Rs. 2,500</td> </tr> <tr> <td>Platinum Plan</td> <td>Up to a maximum of Rs. 5,000</td> </tr> </tbody> </table>	Plan	Charges payable (per policy period)	Gold Plan	Up to a maximum Rs. 2,500	Platinum Plan	Up to a maximum of Rs. 5,000	<p><b>Policy clause 3.11</b></p>
Plan	Charges payable (per policy period)								
Gold Plan	Up to a maximum Rs. 2,500								
Platinum Plan	Up to a maximum of Rs. 5,000								
		<p><b>Dental Treatment:</b></p> <p>Medical expenses incurred towards dental treatment done under anesthesia necessitated due to an accident/injury/illness requiring Hospitalization as Inpatient treatment</p>	<p><b>Policy clause 3.3</b></p>						
		<p><b>Coverage for Cataract:</b></p> <p>We will pay for any claim of cataract within the period of insurance, subject to the condition that threshold being breached as mentioned below:</p> <table border="1" data-bbox="617 1566 1260 1755"> <thead> <tr> <th>Plan</th> <th>Charges Payable(Per Eye)</th> </tr> </thead> <tbody> <tr> <td>Gold Plan</td> <td>Up to a maximum Rs. 50,000</td> </tr> <tr> <td>Platinum Plan</td> <td>Up to a maximum Rs. 1,00,000</td> </tr> </tbody> </table>	Plan	Charges Payable(Per Eye)	Gold Plan	Up to a maximum Rs. 50,000	Platinum Plan	Up to a maximum Rs. 1,00,000	<p><b>Policy clause 3.4</b></p>
Plan	Charges Payable(Per Eye)								
Gold Plan	Up to a maximum Rs. 50,000								
Platinum Plan	Up to a maximum Rs. 1,00,000								

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		<p><b>Medical Expenses for Organ Transplant:</b></p> <p>We will pay hospitalization expenses (excluding the cost of Organ) incurred on the donor during the course of organ transplant, provided our liability towards expenses incurred on donor and recipient shall not exceed the sum insured.</p>	<p><b>Policy clause 3.5</b></p>									
		<p><b>Ayush Treatment:</b></p> <p>Expenses incurred for Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy system of medicines is covered up to 100% of the Sum Insured during each policy year as specified in the policy schedule.</p>	<p><b>Policy clause 3.6</b></p>									
		<p><b>Ambulance charges (Road and Air):</b></p> <p>We will pay You the charges incurred towards Road Ambulance service and/or Air Ambulance expenses that are actually incurred in India, only if they are Reasonable, Customary and Medically necessary for shifting any person to Hospital. For detail, please refer policy documents.</p> <table border="1" data-bbox="539 1058 1243 1209"> <thead> <tr> <th>Plan</th> <th>Road Ambulance</th> <th>Air Ambulance</th> </tr> </thead> <tbody> <tr> <td>Gold Plan</td> <td>Actuals</td> <td>Not available</td> </tr> <tr> <td>Platinum Plan</td> <td>Actuals</td> <td>Actuals</td> </tr> </tbody> </table>	Plan	Road Ambulance	Air Ambulance	Gold Plan	Actuals	Not available	Platinum Plan	Actuals	Actuals	<p><b>Policy clause 3.7</b></p>
Plan	Road Ambulance	Air Ambulance										
Gold Plan	Actuals	Not available										
Platinum Plan	Actuals	Actuals										
		<p><b>Non-Medical Items:</b></p> <p>Items listed in Annexure II (List 1) shall become payable in platinum plan up to Rs. 25,000 in policy. It is not available in Gold Platinum.</p>	<p><b>Policy clause 3.13</b></p>									
		<p><b>Optional Cover 2: Personal Accident Benefit:</b></p> <table border="1" data-bbox="539 1575 1295 1822"> <thead> <tr> <th>Condition</th> <th>Benefit Payable</th> </tr> </thead> <tbody> <tr> <td>Death</td> <td>50% of the Sum Insured</td> </tr> <tr> <td>Permanent Total disablement</td> <td>50% of the Sum Insured</td> </tr> <tr> <td>Permanent partial disablement</td> <td>Limit as per the condition given in the Annexure</td> </tr> </tbody> </table>	Condition	Benefit Payable	Death	50% of the Sum Insured	Permanent Total disablement	50% of the Sum Insured	Permanent partial disablement	Limit as per the condition given in the Annexure	<p><b>Policy clause 3.15</b></p>	
Condition	Benefit Payable											
Death	50% of the Sum Insured											
Permanent Total disablement	50% of the Sum Insured											
Permanent partial disablement	Limit as per the condition given in the Annexure											

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6	<p>Exclusion</p> <p>(What Policy does not cover)</p>	<p style="text-align: center;"><b>Standard Exclusions</b></p> <ul style="list-style-type: none"> <li>• Investigation &amp; Evaluation(Code-Excl-04)</li> <li>• REST CURE, REHABILITATION AND RESPITE CARE (Code- Excl05)</li> <li>• OBESITY / WEIGHT CONTROL (Code- Excl06)</li> <li>• CHANGE-OF-GENDER TREATMENTS (Code- Excl07)</li> <li>• COSMETIC OR PLASTIC SURGERY (Code- Excl08)</li> <li>• HAZARDOUS OR ADVENTURE SPORTS (Code- Excl09)</li> <li>• BREACH OF LAW (Code- Excl10)</li> <li>• EXCLUDED PROVIDERS (Code-Excl11)</li> <li>• Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. (Code- Excl12)</li> <li>• Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons. (Code- Excl13)</li> <li>• Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of</li> </ul>	<p><b>Policy clause 4.4 to 4.18</b></p>
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		<p>hospitalization claim or day care procedure. (<b>Code- Excl14</b>)</p> <ul style="list-style-type: none"> <li>• REFRACTIVE ERROR (<b>Code- Excl15</b>)</li> <li>• UNPROVEN TREATMENTS (<b>Code- Excl16</b>)</li> <li>• STERILITY AND INFERTILITY (<b>Code- Excl17</b>)</li> <li>• MATERNITY EXPENSES (<b>Code - Excl18</b>)</li> </ul> <p style="text-align: center;"><b>Specific Exclusions</b></p> <ul style="list-style-type: none"> <li>• Acupressure, acupuncture and magnetic therapies.</li> <li>• Any expenses incurred on Domiciliary Hospitalization.</li> <li>• Service charges, Surcharges, Luxury Tax, Admission fees, Registration fees, Record Charges and Telephone Charges levied by the Hospital. Bodily Injury or Illness due to intentional.</li> <li>• Bodily Injury or Illness due to intentional self-inflicted Injury and attempted suicide.</li> <li>• Circumcision unless Medically Necessary or as may be necessitated due to an Accident.</li> <li>• Convalescence and General debility.</li> <li>• Cost of braces, equipment or external prosthetic devices, eyeglasses, cost of spectacles and contact lenses, hearing aids including cochlear implants.</li> <li>• External Medical / Non-medical equipment used for diagnosis and/or treatment including CPAP/BIPAP, Oxygen Concentrator, Infusion pump, Ambulatory devices (walker, crutches, Collars, Caps, Splints, Elasto crepe bandages, external orthopaedic pads) and sub cutaneous insulin pump, Diabetic foot wear, Glucometer / Thermometer, Alpha / Water Bed and medical equipment, which is subsequently used at home and outlives the use and life of the Insured Person.</li> <li>• Nuclear, chemical or biological attack or weapons, contributed to, caused by, resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense. For the purpose of this exclusion: <ul style="list-style-type: none"> <li>• Nuclear attack or weapons means the use of any nuclear weapon or device or waste or combustion of nuclear fuel or the emission, discharge, dispersal, release or escape of fissile/ fusion material emitting a level of radioactivity capable of causing any Illness, incapacitating disablement or death.</li> <li>• Chemical attack or weapons means the emission,</li> </ul> </li> </ul>	<p><b>Policy clause 4.19 to 4.34</b></p>
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		<p>discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any illness, incapacitating disablement or death.</p> <ul style="list-style-type: none"><li>• Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) micro-organisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disablement or death.</li><li>• Stem cell implantation/Surgery for other than those treatments mentioned in clause 3.10.12</li><li>• Expenses incurred for Rotational Field Quantum Magnetic Resonance (RFQMR), External Counter Pulsation (ECP), Enhanced External Counter Pulsation (EECP), Hyperbaric Oxygen Therapy.</li><li>• Treatments or Investigations or Services taken outside the geographical limits of India.</li><li>• Vaccination and/or inoculation</li><li>• War (whether declared or not) and war like occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrections, mutiny, military or usurped power, seizure, capture, arrest, restraints and detainment of all kinds.</li><li>• Change of treatment from one system to another unless recommended by the consultant/ Hospital under which the treatment is taken</li><li>• Procedures/treatments usually done in outpatient department are not payable under the Policy even if converted as an in-patient in the Hospital for more than 24 hours.</li></ul>	
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		<p><b>36 Months for 6 disease/procedure</b></p> <ul style="list-style-type: none"> <li>• Joint Replacement due to Degenerative Condition</li> <li>• Age-related Osteoarthritis &amp; Osteoporosis</li> <li>• Treatment of Mental Illness.</li> <li>• Age Related Macular Degeneration (ARMD)</li> <li>• Genetic diseases or disorders</li> <li>• Congenital External Diseases</li> </ul>	<p><b>Policy clause 4.2.e.(iii)</b></p>
		<p><b>Pre-Existing disease:</b> Covered after 36 Months</p>	<p><b>Policy Clause 4.1</b></p>
8	Financial Limit of Coverage	<p>The Policy will pay only up to the limits specified hereunder for the following disease/procedures:</p>	
	<b>i. Sub-limit</b>	<ul style="list-style-type: none"> <li>• Room Rent will be payable up to 1% of the Sum Insured or Rs 15,000 (lesser amount) for Gold Plan and Single Ac room for Platinum Plan</li> </ul>	<p><b>Policy clause 2.41 and 3.1.(a)</b></p>
		<ul style="list-style-type: none"> <li>• ICU charges will payable up to 2% of Sum Insured or 25,000 (lesser amount) for Gold Plan and Actual amount for Platinum</li> </ul>	<p><b>Policy clause 2.21 &amp; 3.1.(b)</b></p>
		<ul style="list-style-type: none"> <li>• Coverage for Cataract: Up to Rs 50,000 and 1,00,000 per/Eye for Gold and Platinum Plan respectively.</li> </ul>	<p><b>Policy clause 3.4</b></p>
		<ul style="list-style-type: none"> <li>• Coverage for Modern Treatment will be payable as the limit mentioned in the Gold plans and up to the balance Sum insured for Platinum plan.</li> </ul> <p>Please refer policy clause for more information.</p>	<p><b>Policy clause 3.10</b></p>
		<ul style="list-style-type: none"> <li>• Medical second opinion will be payable up to Rs 2500 and 5000 for Gold and Platinum Plan respectively. Refer policy documents for more details</li> </ul>	<p><b>Policy clause 3.11</b></p>
		<ul style="list-style-type: none"> <li>• Non-Medical Items will be payable for up to Rs 25,000 for Platinum Plan (not available for Gold Plan)</li> </ul>	<p><b>Policy clause 3.13</b></p>

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	<p><b>ii. Co-Payment</b></p> <p><b>iii. Deductible</b></p> <p><b>iv. Any Other limit as applicable</b></p>	Not Applicable	
9	Claims/Claim Procedure	<p>Details of procedure to be followed for cashless service as well as for reimbursement of claims including pre and post hospitalisation.</p> <p>Provide the details/Weblink of the following</p> <p>i. Network hospital details-  <a href="https://www.newindia.co.in/portal/readMore/HospitalsList">https://www.newindia.co.in/portal/readMore/HospitalsList</a></p> <p>ii. Helpline number : 1800-209-1415</p> <p>iii. Hospitals which are blacklisted or from where no claims will be accepted by the insurer- <b>Not applicable</b></p> <p>iv. Downloading the claim form-  <a href="https://www.newindia.co.in/cms/24b38b03-6b17-42e8-b047-43c7784c6528/Claim_Form.pdf?quest=true">https://www.newindia.co.in/cms/24b38b03-6b17-42e8-b047-43c7784c6528/Claim_Form.pdf?quest=true</a></p> <p>v. Pre-authorisation approval/rejections:</p> <ul style="list-style-type: none"> <li>• Within 1 hour of receipt of request</li> </ul> <p>vi. Final Authorization for Discharge from the Hospital</p> <ul style="list-style-type: none"> <li>• Within 3 hours of receipt of discharge authorization request from the hospital</li> <li>• .</li> </ul> <p>No pre-authorisation will be done in the absence of beneficiary photo ID and other valid ID proof as defined</p>	

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10	Policy Servicing	<p>Call Centre number of the insurer- <b>1800-209-1415</b></p> <p>Details of the Company Officials-  <a href="https://www.newindia.co.in/">https://www.newindia.co.in/</a></p> <p>Detail of Policy Issuing Office: -</p>	
11	Grievances/ Complaints	<p>Grievance redressal officer of the company:  <a href="https://www.newindia.co.in/portal/readMore/Grievances/">https://www.newindia.co.in/portal/readMore/Grievances/</a></p> <p>Senior Citizens may write to-  <a href="mailto:seniorcitizencare.ho@newindia.co.in">seniorcitizencare.ho@newindia.co.in</a></p> <p>IRDAI Integrated Grievance Management System –  <a href="https://igms.irda.gov.in/">https://igms.irda.gov.in/</a></p>	<b>Policy Clause 5.14</b>
		Ombudsman's contact details	<b>Annexure IV</b>
12	Things to Remember	<p><b>Free look cancellation:</b></p> <p>You may cancel the insurance policy, if you do not want it, within 30 days from the beginning of the policy.</p> <p>For detail, please refer policy clause.</p>	<b>Policy clause 5.6</b>
		<p><b>Policy Renewal:</b> Except on grounds of fraud, moral hazard or misrepresentation or non-cooperation, renewal of your policy shall not be denied, provided the policy is not withdrawn.</p>	<b>Policy clause 5.11</b>

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		<p><b>MIGRATION</b> means a facility provided to policyholders (including all members under family cover and group Health insurance policy), to transfer the credit gained for pre-existing conditions and specific waiting period, from one health insurance policy to another with the same insurer.</p> <p><b>PORTABILTY</b> means the facility provided to the health insurance policyholder (including all members under family cover), to transfer the credits gained for pre-existing diseases and specific waiting periods, from one insurer to another insurer</p> <p><b>Please refer policy documents for more detail.</b></p>	<p><b>Policy clause 2.29, 5.15</b></p> <p><b>Policy clause 2.29 and 5.15</b></p>
		<p><b>Change in Sum Insured:</b> Sum Insured can be changed (increased/decreased) only at the time of renewal or at any time subject to our underwriting guidelines.</p> <p>For increase in SI,waiting period if any shall start afresh only for the enhanced portion of the sum Insured.</p>	<p><b>Policy clause 5.24</b></p>
		<p><b>Moratorium period:</b> After completion of five continuous years under the policy no look back to be applied. This period of five years is called moratorium period. The moratorium period would be applicable for the sum insured of the first policy and subsequent completion of five continuous years would be applicable from date of enhancement of sum insured only on enhanced limits.</p> <p>After the expiry of moratorium period no health insurance policy shall be contestable except for proven fraud and permanent exclusions specified in the policy contract.</p> <p><b>POLICY YEAR</b> means a period of twelve months beginning from the date of commencement of the policy period and ending on the last day of such twelve-month period. For the purpose of subsequent years, policy year shall mean a period of twelve months commencing from the end of the previous policy year and lapsing on the last day of such twelve-month period, till the policy period, as mentioned in the schedule.</p>	<p><b>Policy clause 5.8</b></p> <p><b>Policy clause 2.55</b></p>

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		<b>POLICY TERM</b> means the tenure of the policy, which can be 1 Year or 2 Years or 3 Years	<b>Policy clause 2.63</b>
13	Your Obligation	Please disclose all pre-existing disease/s or conditions before buying a policy. Non-disclosure may affect the claim settlement.	<b>Policy clause 5.4</b>

Declaration by the Policy Holder;

I have read the above and confirm having noted the details.

Place:

Date: \_\_\_\_\_ (Signature of the Policy Holder)

Note:

- i. Web-link where the product related documents including the Customer information sheet are available on <https://www.newindia.co.in/health/all-products>
- ii. In case of any conflict, the terms and condition mentioned in the policy document shall prevail.