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CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

SI No	Title	Description	Policy Clause Number										
1	Name of the Insurance Product/Policy	NEW INDIA CANCER GUARD											
2	Policy Number												
3	Type of Insurance Product/Policy	Both Indemnity and Benefit	Policy Clause 3.1 and 3.7										
4	Sum Insured Basis	<ul style="list-style-type: none"> Individual Sum insured. <table border="1"> <thead> <tr> <th>AGE</th> <th>ELIGIBLE SUM INSURED</th> </tr> </thead> <tbody> <tr> <td><= 50 years</td> <td>Rs. 5, 10, 15, 25 & 50 lakhs</td> </tr> <tr> <td>51 - 55 Years</td> <td>Rs. 5, 10 & 15 lakhs</td> </tr> <tr> <td>56 - 60 Years</td> <td>Rs. 5 & 10 lakhs</td> </tr> <tr> <td>61 - 65 Years</td> <td>Rs. 5 lakhs</td> </tr> </tbody> </table>	AGE	ELIGIBLE SUM INSURED	<= 50 years	Rs. 5, 10, 15, 25 & 50 lakhs	51 - 55 Years	Rs. 5, 10 & 15 lakhs	56 - 60 Years	Rs. 5 & 10 lakhs	61 - 65 Years	Rs. 5 lakhs	Prospectus Point 2 & 5.
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5	Policy Coverage (What Policy Covers?)	<p>Expense in respect of:</p> <p>The policy shall cover treatment for Cancer taken as Inpatient or Outpatient or Day Care. Following Conventional and Advanced Treatment shall be covered in the Policy:</p> <ul style="list-style-type: none"> Chemotherapy Radiotherapy Organ transplant, as part of Cancer treatment Onco-surgery (Surgeries for excision of cancerous tissue or removal of organs/ tissues) Proton Treatment Personalised & Targeted therapy Hormonal Therapy or Endocrine manipulation Immunotherapy including immunology agents Stem cell transplantation Bone marrow transplantation 	Policy Clause 3.0										
		Pre-hospitalisation (treatment prior to admission in hospital) of 30 days.	Policy clause 2.37 & 3.1(e)										
		Post-Hospitalisation (treatment after discharge from Hospital) within 60 days.	Policy clause 2.38 & 3.1(f)										

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	<ul style="list-style-type: none"> Room Rent, boarding and nursing expenses, <ul style="list-style-type: none"> • For Sum Insured for 5, 10 and 15 Lakhs - Single AC room • For Sum Insured for 25 and 50 Lakhs - Deluxe room 	Policy Clause 3.1(a)
	<ul style="list-style-type: none"> • Intensive Care Unit (ICU) expenses, as actuals 	Policy Clause 3.1(b)
	<ul style="list-style-type: none"> • Surgeon, Anesthetist, Medical Practitioner, Consultants' Specialist fees 	Policy Clause 3.1(c)
	<ul style="list-style-type: none"> • Anesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines & Drugs, Dialysis, Chemotherapy, Radiotherapy, Cost of Prosthetic devices implanted during Surgery, Relevant Laboratory / Diagnostic test, X-Ray and other medical expenses related to the treatment of Cancer 	Policy Clause 3.1(d)
	<ul style="list-style-type: none"> • Ambulance services not exceeding Rs. 3,000 per Hospitalization 	Policy Clause 3.2
	<ul style="list-style-type: none"> • Medical Expenses for Organ Transplant, as part of Cancer treatment 	Policy Clause 3.3
	<ul style="list-style-type: none"> • Medical Expenses incurred for the reconstruction of affected body part to restore your essential physical functioning as a direct result of Cancer Surgery. 	Policy Clause 3.4
	<ul style="list-style-type: none"> • Medical Expenses incurred on follow up check-up shall be payable up to Rs. 10,000 once in a Period of Insurance. 	Policy Clause 3.5
	<ul style="list-style-type: none"> • Second Opinion for Surgery, the expenses incurred towards consultation with another Medical Practitioner to seek advice on the Surgery shall be payable up to Rs. 5,000 for Sum Insured of Rs. 5, 10 & 15 Lakhs and up to Rs. 10,000 for Sum Insured of Rs. 25 & 50 Lakhs . 	Policy Clause 3.6

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		<ul style="list-style-type: none"> • Cancer Care Benefit: If during the Period of Insurance any Insured Person is first time diagnosed for Cancer and is in Stage IV (based on TNM classification) or advanced metastatic cancer , 50% of the Sum Insured would be paid as Critical Care Benefit in addition to the admissible claim amount 	Policy Clause 3.7
6	<p>Exclusion</p> <p>(What Policy does not cover)</p>	<p>Specific Exclusions</p> <ul style="list-style-type: none"> • Any Treatment other than for Cancer. • Pre-Existing Condition for Cancer for which Insured Person had signs or symptoms, and/or was diagnosed, and/or received medical advice / treatment prior to the first policy issued by Us (as mentioned in the Schedule). • Cancer diagnosed/contracted by the Insured person during the first ninety days of the commencement date of first Policy. Any treatment directly or indirectly caused by or arising from or attributable to War, invasion, Act of Foreign enemy, War like operations (whether war be declared or not), nuclear weapon / ionising radiation, contamination by Radioactive material, nuclear fuel or nuclear waste or from the combustion of nuclear fuel. • Plastic Surgery, cosmetic, aesthetic treatment. • Cost of external prosthetic devices, non-durable implants, external medical equipment. • Dental treatment or Surgery of any kind unless necessitated due to treatment of Cancer.aposi Sarcoma. • Charges incurred at Hospital primarily for diagnosis, x-ray or Laboratory examinations or other diagnostic studies not consistent with or incidental to the diagnosis and treatment of positive existence or presence of Cancer for which confinement is required at a Hospital. • Expenses on vitamins and tonics unless forming part of treatment for Injury or Illness as certified by the attending Medical Practitioner. • Non Allopathic treatment. • Any expenses relating to cost of items detailed in Annexure II. • Unproven/Experimental Treatment and pharmacological regimens. • Any kind of Service charges, Surcharges, Luxury Tax and similar charges levied by the Hospital. • Treatment including investigation / diagnostic services availed outside India. • Rest Cure, Rehabilitation and Respite care. 	Policy clause 4.1 to 4.18

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		<ul style="list-style-type: none"> • Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes: Custodial care either at home or in a Hospital / nursing facility for personal care either by skilled nurses or assistants or unskilled persons. Any services for people who are terminally ill to address medical, physical, social, emotional and spiritual needs. • Specified healthcare providers • Treatment rendered by a Medical Practitioner, which is outside his discipline or the discipline for which he is licensed. • Treatments rendered by a Medical Practitioner, who is a member of the Insured Person's family or stays with him, however proven material costs are eligible for reimbursement in accordance with the applicable cover. • Any treatment or part of a treatment that is not of a reasonable charge, not Medically Necessary; drugs or treatments that are not supported by treating doctor's prescription. • Charges related to a Hospital stay not expressly mentioned as being covered in this Policy, including but not limited to charges for admission, discharge, administration, registration, documentation and filing. • Any non-medical expenses mentioned on our website and or attached with this policy 	
7	Waiting period	Cancer diagnosed / contracted by the Insured person during the first ninety(90) days of the commencement date of this Policy.	Policy clause 4.3
8	Financial Limit Of Coverage	<ul style="list-style-type: none"> •Room Rent exceeding the charges of <ol style="list-style-type: none"> 1)Single AC room for Sum Insured for 5, 10 and 15 Lakhs 2)Deluxe room For Sum Insured for 25 and 50 Lakhs •Expenses relating to Hospitalization will be considered in proportion to the eligible room rent stated in the Policy or actual whichever is less. 	Policy Clause 3.1(a) Policy Clause 3.1
9	Claims/Claim Procedure	<p>You must send all communications and papers regarding a claim to the TPA at the address shown in the Schedule.</p> <p>Intimate TPA in writing on detection of Cancer immediately or forty-eight hours before Hospitalization.</p> <p>Intimate within Seventy Two hours from the time of Hospitalization in case of Hospitalization due to Medical emergency. Submit the Claim Document within fifteen days</p>	Policy Clause 5.11

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		<p>from the date of Discharge from Hospital</p> <p>The details/Weblink of the following</p> <ol style="list-style-type: none"> i. Networkhospital details- https://www.newindia.co.in/portal/readMore/HospitalsList ii. Helpline number : 1800-209-1415 iii. Hospitals which are blacklisted or from where no claims will be accepted by the insurer- Not applicable iv. Downloading the claim form- https://www.newindia.co.in/cms/24b38b03-6b17-42e8-b047-43c7784c6528/Claim_Form.pdf?quest=true v. Pre-authorisation approval/rejections: <ul style="list-style-type: none"> • Within 2 hours from the time of admission. • Within 1 hour of receipt of request for enhancement. • Within 1 hour of receipt of final bill for discharge. • Within 1 hour from the receipt of response to queries. • Within 24 hours if confirmation of policy is required. <p>No pre-authorisation will be done in the absence of beneficiary photo ID and other valid ID proof as defined</p>	
10	Policy Servicing	<p>Call centre number of the insurer-1800-209-1415</p> <p>Details of the Company Officials-https://www.newindia.co.in/</p> <p>Details of the Policy Issuing Office-</p>	Policy Clause5.6
11	Grievances/Complaints	<p>Details of</p> <p>Grievance redressal officer of the company:https://www.newindia.co.in/portal/readMore/Grievances</p> <p>Insurance company grievance portal/department: Not applicable</p> <p>Ombudsman's:Annexure IV of the policy clause</p>	

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12	Things Remember to	<p>Free look cancellation : You may cancel the insurance policy, if you do not want it, within 15 days from the beginning of the policy.</p> <p>Renewal Conditions-- We shall renew this Policy if You shall remit the requisite Premium to Us prior to expiry of the Period of Insurance stated in the Schedule. The Renewal is subject to the rates & terms prevalent at the time of Renewal. Grace period of 30 days for renewing the policy is provided. To avoid any confusion any claim incurred during break-in period will not be payable under this policy.</p> <p>CUMULATIVE BONUS:- The Sum Insured under Policy shall be increased by 10% at each renewal in respect of each claim free year of Insurance, subject to maximum of 50%. If a claim is made in any particular year; the cumulative bonus accrued shall be reduced at the same rate at which it is accrued.</p> <p>Cancellation-: The policy shall be null and void, and no benefits shall be payable in case of Fraud, misrepresentation, misdescription or nondisclosure of any material fact / particular. Premium paid shall also stand forfeited. You may also at any time cancel this Policy. We shall allow refund of premium, if no claim has been made or paid under the Policy, at short period rate. Please see the policy terms and conditions.</p> <p>Migration and Portability: When your policy is due for renewal, you may migrate to another policy with us or port your policy to another insurer.</p>	<p>Policy clause 5.5</p> <p>Policy clause 5.2</p> <p>Policy clause 3.8</p> <p>Policy Clause 5.3</p> <p>Policy Clause 5.4</p>
13	Your Obligation	<p>The policy shall be null and void, and no benefits shall be payable in the event of misrepresentation, mis-description or nondisclosure of any material fact / particular if such claim be in any manner fraudulent or supported by any fraudulent means or device whether by the Insured Person or by any other person acting on his / her behalf.</p>	<p>Policy clause 5.3</p>

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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.