CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

SI No	Title	Description	Policy Clause Number
1	Name of the Insurance Product/Policy	New India Mediclaim Policy	Page 1
2	Policy Number		
	Type of Insurance Product/Policy	Indemnity	3.1
4	Sum Insured Basis	 Individual Sum insured. Insured Name A – Sum Insured Insured Name B – Sum Insured 	Prospectus Point 2 & 15
5	Policy Coverage (What Policy Covers?)	Expense in respect of:	
	-	Admission in hospital beyond 24 hours.	2.19
		Pre-hospitalisation - 30 days.	2.38 & 3.1(e)
		Post-Hospitalisation treatment within 60 days from date of discharge.	2.39 & 3.1(f)
		Specified / Listed procedures requiring less than 24 hours of hospitalization (day care).	Annexure 1:
		Proportionate deduction on the other expenses incurred at the Hospital.	3.2
		Coverage for AYUSH Treatment: up to 100% of the Sum Insured	3.4
		Surgeon, Anesthetist, Medical Practitioner Consultants, Specialist fees, Operating theatre charges, Cost of Pharmacy and Consumables etc	1
		Hospital cash -:0.1% per day maximum up to 1% of SI	3.5
		Health Check-up- upto 1% of Avg SI last 3 years	3.6
Ambulance service up		Ambulance service up to 1% of Sum Insured.	3.7
		Reinstatement of Sum Insured: Applicable only if the Sum Insured is =>Rs. 5 lakhs.	3.10
		Cumulative Bonus	3.15
		Congenital Internal Diseases – Covered with waiting period of 24 months	3.18
	Congenital External Diseases Specific Coverages		3.18
			3.16(a) & 3.16(e)
		Coverage For 12 Modern Treatments	3.17.1 to 3.17.12

	<u> </u>	3.9	
		New Born Baby cover-	3.11
6	Exclusion	Standard Exclusions and Specific Exclusion (including but not limited to the following) Investigation & Evaluation, Rest Cure, Weight Control, Change-Of-Gender Treatments, Cosmetic Surgery, Unproven Treatments, Sterility And Infertility, Treatment and/or services taken outside the India, Vaccination, Cost of braces, equipment or external prosthetic devices, eyeglasses, Cost of spectacles and contact lenses, hearing aids including cochlear implants, Dental treatment unless arising out of accident and requiring inpatient treatment, Acupressure, acupuncture, magnetic therapies, Any expenses incurred on Domiciliary Hospitalization, Stem cell implantation/Surgery for other than those treatments mentioned in clause 3.20.12 etc	4.4.1 to 4.4.31
7	Waiting Period	Initial Waiting period: First 30 days from date of inception (not applicable for Accidents & renewals) PRE-EXISTING DISEASES (Code- Excl01)- 36	4.3
		months Specific Waiting period- 90 days, 24 and 36 months for listed illnesses (not applicable for renewals and accident)	4.1
8	Financial Limit	The Policy will pay only up to the limits specified	
	of Coverage	hereunder for the following disease/procedures:	
	1. Sublimit	Up to 1 % & 2% of the Sum Insured per day for Room rent and ICU respectively	3.1(a) and 3.1.(b)
		Cataract: up to 20% of Sum Insured subject to a maximum of Rs. 50,000.	3.3
	2. Co-payment	20% if treated in the higher zone than the one opted.	5.29 and 3.14
		Optional cover IV - 15% premium discount for 20% voluntary co pay.	
	3. Deductible/ Any Other limit as applicable	Not Applicable	
9	Claims/Claim Procedure	 i. Network hospital details -Available on website and on policy schedule ii. Helpline number: 1800-209-1415 iii. Downloading the claim form-https://www.newindia.co.in/cms/24b38b03-6b17-42e8-b047-43c7784c6528/Claim_Form.pdf?guest=true iv. Pre-authorisation -Within 1 hour of 	

		request	
		v. Final Authorization for Discharge	
		from the Hospital within 3	
		hours of hospital request	
10	Policy Servicing	Call center number of the insurer-1800-209-1415	5.14
		Company Officials- https://www.newindia.co.in/	
		Policy Issuing Office :	
11	Grievances/Com	Details of GRO:	Annexure III
	plaints	https://www.newindia.co.in/portal/readMore/Grievance	
		S	
		Seniour citizens may write to –	
		Seniorcitizencare.ho@newindia.co.in	
		For Ombudsman's contact details	
12	Things to Remember	Free look Period:	5.6
		Policy Renewal:	5.11
		MIGRATION	2.32 & 5.15
		PORTABILITY	2.40
		Moratorium Period: - 5 Years	5.8
		Grace Period	2.17
13	Your Obligation	Please disclose all pre-existing disease/s or conditions before buying a policy. Non-disclosure may affect the claim settlement.	5.4

Declaration by the Policy Holder

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

<u>Place:</u>	
<u>Date:</u>	(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.

(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.