

**Customer Information Sheet**

**my: health Women Suraksha**

**CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY**

This document provides key information about your policy. You are also advised to go through your policy document.

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product/Policy	<b>my: health Women Suraksha</b>	NA
2	Policy number	Policy number shall be as on Policy Schedule issued post policy issuance.	NA
3	Type of Insurance Product/ Policy	Indemnity & Benefit	NA
4	Sum Insured	<ul style="list-style-type: none"> <li>Individual Sum Insured - Where each member has a separate sum insured under the policy), or</li> </ul> Sum Insured shall be as opted and the same will be mentioned in your Policy Schedules	NA
5	Policy Coverage (What the policy covers?)	<p><b>Base Covers:</b> Coverages in force for the Insured Persons shall be as per the plan opted</p> <p>Expenses in respect of:</p> <p>Major Illnesses &amp; Procedures</p> <ol style="list-style-type: none"> <li>Cancer Cover</li> <li>Major Illnesses</li> <li>Surgical Procedures</li> <li>Cardiac Ailments &amp; Procedures</li> <li>Critical Illnesses</li> <li>Assault &amp; Burns</li> <li>my:Health Active</li> <li>Renewal benefit</li> </ol> <p><b>Optional Covers:</b> Optional coverages for the Insured Persons shall be in force only if the same is available under the plan and/or is opted.</p> <ol style="list-style-type: none"> <li>Pregnancy and New Born Complications</li> <li>Post Diagnosis Support</li> <li>Loss of Job</li> </ol>	B.1.1 B.1.2 B.1.3 B.1.4 B.1.5 B.2 B.3 B.4 B.5 B.5.1 B.5.2 B.5.3
6	Exclusions(what the policy does not cover)	All exclusions as mentioned in the Base Plan unless otherwise stated and covered in Benefits section under my:health Critical Illness policy wordings.	C

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		<p>Specific Exclusions (applicable to all covers)</p> <ol style="list-style-type: none"> <li>1. War or any act of war, invasion, act of foreign enemy, (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, nuclear weapons/materials, chemical and biological weapons, radiation of any kind.</li> <li>2. Any Insured Person committing or attempting to commit intentional self-injury or attempted suicide.</li> <li>3. Participation or involvement of an Insured Person in naval, military or air force operation.</li> <li>4. From engaging in or participation in Adventure sports</li> <li>5. Abuse or the consequences of the abuse of intoxicants or hallucinogenic substances including all forms of narcotic drugs and alcohol including smoking cessation programs and the treatment of nicotine addiction or any other substance abuse treatment or services, or supplies, unless prescribed by Medical Practitioner.</li> </ol> <p>Specific Exclusions (applicable to Assault and Burns)</p> <ol style="list-style-type: none"> <li>1. Event which occurs whilst the Insured is operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft, or Scheduled Airlines or is engaging in aviation or ballooning, or whilst the Insured is mounting into, or dismounting from or travelling in any balloon or aircraft other than as a passenger (fare-paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world.</li> <li>2. The Company shall not be liable to pay any benefit in respect of any Insured Person for an act of Assault by military or police force, or military or paramilitary organisation.</li> <li>3. Participation or involvement of an Insured Person in naval, Policy, military or air force operation</li> </ol> <p>Specific Exclusions (applicable to Loss of Job):</p> <ol style="list-style-type: none"> <li>1. Any Loss of Income due to Resignation for reasons other than mentioned under Section Loss of Job</li> <li>2. Loss of job due to retirement whether voluntary or otherwise</li> <li>3. Resignation due to non-confirmation of employment after or during such period under which the Insured was under probation</li> </ol>	<p>C.2.1.i</p> <p>C.2.1.ii</p> <p>C.2.1.iii</p> <p>C.2.1.iv</p> <p>C.2.1.v</p> <p>C.2.2.i</p> <p>C.2.2.ii</p> <p>C.2.2.iii</p> <p>C.2.3.i</p> <p>C.2.3.ii</p> <p>C.2.3.iii</p>

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7	Waiting period <ul style="list-style-type: none"> <li>• Time period during which specified diseases/ treatments are not covered.</li> <li>• It is counted from the beginning of the policy coverage.</li> </ul>	<ol style="list-style-type: none"> <li>1. PED waiting period: 48 months</li> <li>2. Cancer Cover: 90/180 days</li> <li>3. Major Illnesses: 90/180 days</li> <li>4. Surgical Procedures: 180 days</li> <li>5. Cardiac Ailments and Procedure: 90/180 days</li> <li>6. Critical Illnesses – Burns: 90 days</li> <li>7. Health Checkup – Additional Tests – Once in 2Years</li> </ol> Optional Covers <ol style="list-style-type: none"> <li>1. Pregnancy and Newborn Complications – 1 Year</li> </ol> <b>Note:</b> Waiting Periods in force for Insured Persons shall be as per the plan opted or option selected	C B.1.1 B.1.2 B.1.3 B.1.4 B.1.5 B.3 B.5.i
8	Financial limits coverage of <ol style="list-style-type: none"> <li>i. Sub-limit (It is a pre- defined limit and the insurance company will not pay any amount in excess of this limit)</li> </ol>	<ol style="list-style-type: none"> <li>1. Pregnancy &amp; Newborn Complications : 25% of SI, Max 5L</li> <li>2. Post diagnosis Support :               <ul style="list-style-type: none"> <li>• Molecular Gene Expression Profiling Test : Upto 10K once in Policy term</li> <li>• Outpatient Counselling: 3K/Session up to Max. of 6 sessions</li> <li>• Second Medical Opinion: Upto 10K3.</li> </ul> </li> <li>3. Loss of Job Benefit : up to 50% of monthly Salary upto 6 months</li> </ol>	B.5.i B.5.ii B.5.iii
9	Claims/Claims Procedure	Details of procedure to be followed for cashless service as well as for reimbursement of claim including pre and post hospitalization. Turn Around Time (TAT) for claims settlement: <u>For Cashless Process :</u> <ol style="list-style-type: none"> <li>i. TAT for preauthorization of cashless facility: 2 hours from the time the last necessary document is received.</li> <li>ii. TAT for cashless final bill authorization: 2 hours from the time the last necessary document is received.</li> </ol> <b>(Note:</b> In case of internal verification, the final stand will be confirmed within 24 hours from the time the last necessary document is received by us) <u>For Reimbursement Process :</u> <ol style="list-style-type: none"> <li>i. TAT for Claim settlement: 30 days from the time the last necessary document is received.</li> </ol> <b>(Note:</b> In case of internal verification, the final stand will be confirmed within 45 days from the time the last necessary document is received by us) Provide the details /web link for following: <ol style="list-style-type: none"> <li>i. Network Hospital details :  <a href="https://www.hdfcergo.com/locators/cashless-hospitals-networks">https://www.hdfcergo.com/locators/cashless-hospitals-networks</a> </li> </ol>	E



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		<p><b>Process for migration:</b> The Insured Person will have the option to migrate the Policy to other health insurance products/plans offered by the Company by applying for Migration of the policy atleast 30 days before the policy renewal date as per IRDAI guidelines on Migration.</p> <p><b>Process for portability:</b> The Insured Person will have the option to port the Policy to other insurers by applying to such Insurer to port the entire policy along with all the members of the family, if any, at least 45 days before, but not earlier than 60 days from the policy renewal date as per IRDAI guidelines related to Portability.</p> <p><b>Change in Sum Insured:</b> Sum Insured can be changed (increased/ decreased) only at the time of renewal, subject to underwriting by the company. For increase in SI, the waiting period if any shall start afresh only for the enhanced portion of the sum insured.</p> <p><b>Moratorium Period:</b> After completion of eight continuous years under the policy no look back to be applied. This period of eight years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of eight continuous years would be applicable from date of enhancement of sums insured only on the 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>	D.6
13	Your Obligations	Please disclose all pre-existing disease/s or condition/s and fill in the complete details in the proposal form before buying a policy. Non-disclosure may affect the claim settlement.	

**Note:**

1. Web-link of the product documents: <<<https://www.hdfcergo.com/download> >>
2. In case of any conflict, the terms and conditions mention in the policy document shall prevail.

Declaration by the Policy Holder:

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

Place: \_\_\_\_\_

Date: \_\_\_\_\_

(Signature of the Policyholder)