

### CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

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

S.No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product/Policy	Optima Wellbeing (Add on)	NA
2	Policy number	Policy number shall be as on Policy Schedule issued post policy issuance	NA
3	Type of Insurance Product/ Policy	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> <li>Floater Sum Insured-Where all members under the policy have a single sum insured limit which may be utilized by any or all members</li> </ul> <p>Sum Insured shall be as opted and the same will be mentioned in your Policy Schedule</p>	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> <ol style="list-style-type: none"> <li>1. Tele-Consultations (Consultations with General Practitioner listed on our/ Service Provider's digital platform for treatment advice)</li> <li>2. Doctor Consultations (In-Person) (In Person consultations with General Practitioner /Specialist/Super Specialist listed on our/ Service Provider's digital platform for treatment advice)</li> <li>3. Psychology E-Counselling (e-counselling session(s) with a Psychologist)</li> </ol>	<p>2.1</p> <p>2.2</p> <p>2.3</p>

		<p>4. Diet &amp; Nutrition E-Consultation (diet and nutrition e-consultation with dieticians/nutritionist)</p> <p>5. Fitness Sessions (unlimited live scheduled online fitness sessions)</p> <p>6. Value Added Services</p> <ul style="list-style-type: none"> <li>• Discounts on Diagnostic services</li> <li>• Discount on Pharmacy expenses</li> <li>• Free Home Sample Collection</li> </ul>	<p>2.4</p> <p>2.5</p> <p>2.6</p>
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 Optima Wellbeing (Add-on) policy wordings.	2
7	<p>Waiting period</p> <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>	<p>30 days initial waiting period for all illnesses (except accident) in the first year and is not applicable in subsequent renewals</p> <p>Note: Waiting Periods in force for Insured Persons shall be as per the plan opted or option selected</p>	2
8	<p>Financial limits coverage of</p> <p>i. Sub-limit (It is a pre- defined limit and the insurance company will not pay any amount in excess of this limit)</p>	NA	NA
9	Claims/Claims Procedure	<p>Details of procedure to be followed for cashless service as well as for reimbursement of claim including pre and post hospitalization.</p> <p>Turn Around Time (TAT) for claims settlement:</p>	As per base product

		<p><u>For Cashless Process :</u></p> <ul style="list-style-type: none"> <li>i. TAT for preauthorization of cashless facility: Decision on cashless authorization to be provided within 1 hour from the time of receipt of request..</li> <li>ii. TAT for cashless final bill authorization :Within 3 hours of the receipt of discharge authorization request from the hospital.</li> </ul> <p><u>For Reimbursement Process :</u></p> <ul style="list-style-type: none"> <li>iii. TAT for Claim settlement – Within 15 days of claim intimation</li> </ul> <p>Provide the details /web link for following:</p> <ul style="list-style-type: none"> <li>iv. Network Hospital details : <a href="https://www.hdfcergo.com/locators/cashless-hospitals-networks">https://www.hdfcergo.com/locators/cashless-hospitals-networks</a></li> <li>v. Helpline number : <a href="https://www.hdfcergo.com/customer-care/grievances">https://www.hdfcergo.com/customer-care/grievances</a></li> </ul> <p>Call - : 022 6158 2020/ 022 6234 6234</p> <ul style="list-style-type: none"> <li>vi. Hospitals which are excluded or from where no claims will be accepted by insurer <a href="http://www.hdfcergo.com/docs/default-source/documents/excluded-hospital1.pdf">http://www.hdfcergo.com/docs/default-source/documents/excluded-hospital1.pdf</a></li> <li>vii. Downloading/getting claim form <a href="https://www.hdfcergo.com/download/claim-form">https://www.hdfcergo.com/download/claim-form</a></li> </ul>	
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10	Policy Servicing	<p>Call us on: 022 6158 2020/ 022 6234 6234 Or visit help section on <a href="http://www.hdfcergo.com">www.hdfcergo.com</a></p> <p>Details of Company officials: Customer Happiness Center: D-301, 3rd Floor, Eastern Business District LBS Marg, Bhandup (West), Mumbai - 400 078.</p>	As per base product
11	Grievances/ Complaints	<p>In case of any grievance the insured person may contact the Company through:</p> <ul style="list-style-type: none"> <li>- Website: <a href="http://www.hdfcergo.com">www.hdfcergo.com</a></li> <li>- Contact us: 022 6158 2020/ 022 6234 6234</li> <li>- E-mail: <a href="mailto:grievance@hdfcergo.com">grievance@hdfcergo.com</a></li> <li>- Contact Details for Senior Citizen: 022 – 6242 – 6226</li> <li>- E-mail specific for Senior citizens : <a href="mailto:seniorcitizen@hdfcergo.com">seniorcitizen@hdfcergo.com</a></li> </ul> <p>Insured Person may contact the Grievance officer at <a href="mailto:cgo@hdfcergo.com">cgo@hdfcergo.com</a></p> <p>For updated details of grievance officer, kindly refer the link: <a href="https://www.hdfcergo.com/customer-voice/grievances">https://www.hdfcergo.com/customer-voice/grievances</a></p> <p>Ombudsman: <a href="https://bimabharosa.irdai.gov.in/">https://bimabharosa.irdai.gov.in/</a>.</p>	As per base product
12	Things to remember	<p><b>Free Look cancellation:</b> You may cancel the insurance policy if you do not want it, within 30 days from the beginning of the policy.</p> <p>Process for free look cancellation:</p> <ol style="list-style-type: none"> <li>1. The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy.</li> <li>2. The insured person shall be allowed free look period of 30 days from date of receipt</li> </ol>	As per base product



		<p>of the policy document to review the terms and conditions of the policy, and to return the same if not acceptable.</p> <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> <p><b>Migration and Portability:</b> When your policy is due for renewal, you may migrate to another policy with us or port your policy to another insurer.</p> <p><u>Process for migration:</u> 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><u>Process for portability:</u> 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 30 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 five continuous years under the policy no look back to be applied. This period of five years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy</p>	
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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)