

SAMAVESHI SURAKSHA HEALTH INSURANCE POLICY

CUSTOMER INFORMATION SHEET (CIS)

Guide to the CIS

- This document has been prepared to give you a brief and quick introduction to your Samaveshi Suraksha Health Insurance Policy (SSHIP).
- The CIS must be read concurrently with Policy Wording as there are references to various clauses in the Policy Wordings.
- The CIS only provides a summary of the key features of the policy. Please refer to your Policy Schedule along with the Policy Wordings for complete information on what your policy covers.

(Description is illustrative and not exhaustive)

TITLE	DESCRIPTION	POLICY CLAUSE NUMBER
Product Name	Samaveshi Suraksha Health Insurance Policy	-
What am I covered for?	<ol style="list-style-type: none"> 1. In-patient Hospitalisation Expenses. 2. All Day Care Procedures. 3. Pre and Post–Hospitalisation Expenses. 4. AYUSH Treatment Coverage. 5. Emergency Road Ambulance Cover. 6. Modern Treatment Methods & Advancement in Technology 7. Lump Sum Benefit for persons with HIV/AIDS 8. Optional Cover - Waiver of Co-Payment 	<i>Clause III</i>
What are the major exclusions in the policy?	<p>The following is a partial list. Please refer to Policy Wordings for the complete list of exclusions.</p> <ol style="list-style-type: none"> 1. Admission primarily for investigation & evaluation. 2. Admission primarily for rest Cure, rehab., and respite care. 3. Expenses related to the surgical treatment of obesity that does not fulfil certain conditions. 4. Dietary supplements and substances that can be purchased without a prescription. 5. Expenses for cosmetic or plastic surgery expenses related to any treatment necessitated due to participation in hazardous or adventure sports. 6. Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. 	<i>Clause IV.B & Clause IV.C</i>
Waiting Period	<ol style="list-style-type: none"> 1. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident. 2. Pre-Existing Diseases (other than pre-existing HIV/AIDS and Disability) will be covered after a waiting period of forty-eight (48) months of continuous coverage. 3. Expenses related to the treatment of Pre-existing Disability covered after 24 months of continuous coverage from date of commencement of policy. 4. Specified surgeries/ treatments/ diseases are covered after a specific waiting period of 48 months. 5. Specified surgeries/ treatments/ diseases are covered after a specific waiting period of 24 months. 	<i>Clause IV.A</i>

United India Insurance Company Limited

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Payment Basis	Payment on an indemnity basis (Cashless/ Reimbursement) and Benefit basis.	<i>Clause V.B.12</i>
Loss Sharing	In case of a claim, this policy requires you to share Expenses exceeding the following sub-limits <ol style="list-style-type: none"> Room Charges (Hospitalization) Room Rent — 1% of SI per day ICU charges — 2% of SI per day Cataract — Rs. 40,000/- per eye in one policy year Modern treatment methods and Advancements in technology (MTMAT) — Up to 50% of the Sum Insured. AYUSH Treatment expenses — 50% of Sum Insured Emergency Road Ambulance — Rs. 2,000 per hospitalisation 	<i>Clause III</i>
	<ol style="list-style-type: none"> Co-Payment — Each and every claim under the Policy shall be subject to a Co-payment of 20% applicable to claim amount admissible and payable as per the terms and conditions of the Policy. This co-payment can be waived off on payment of an additional premium. 	<i>Clause V.B.2 & Clause III.B.1</i>
Renewal Conditions	<ol style="list-style-type: none"> The policy is ordinarily life-long renewable, except on grounds of fraud, misrepresentation, or non-disclosure of material facts by the Insured. Renewal is subject to request for renewal and requisite premium in full having been received before the end of the policy period and realisation of premium. At the end of policy period, the policy shall terminate, and a grace period of 30 days is provided to renew policy to maintain continuity benefits. Coverage is not available during Grace period. Renewal shall not be denied on the ground that the Insured had made a claim or claims in the preceding policy years. However, the policy will not be available for renewal once Lump Sum Benefit for HIV/AIDS is paid. No loading shall apply at renewal based on your claims experience. 	<i>Clause V.A.15</i>
Renewal Benefits	None	<i>N.A.</i>
Cancellation	<ol style="list-style-type: none"> The Policyholder may cancel the policy by giving 15 days' written notice and UIIC shall refund premium for the unexpired policy period as per short period rate table given in Policy Wordings. UIIC may cancel the policy at any time on grounds of misrepresentation, fraud, or non-disclosure of material facts by the Insured Person, by giving 15 days' written notice. There is no refund of premium in such an event. 	<i>Clause V.A.1</i>
How to Claim?	<ol style="list-style-type: none"> Notification: Please notify the TPA/UIIC in writing within 24 hours from the date of emergency hospitalization required or before discharge from Hospital, whichever is earlier; at least 48 hours prior to admission in Hospital in case of planned Hospitalization. Cashless Procedure: <ol style="list-style-type: none"> Intimate TPA of the claim using toll-free number given in health ID card. Upon admission in hospital, cashless request form shall be completed and sent to TPA for authorisation. After verification, TPA issues pre-authorisation letter. At the time of discharge, the Insured Person shall verify and sign the discharge papers and pay for non-medical and inadmissible expenses. Hospital Network details can be obtained at: https://uiic.co.in/en/tpa-ppn-network-hospitals 	<i>Clause V.B.12</i>

	<p>3. Reimbursement Procedure:</p> <p>i. Submit the necessary documents to TPA/UIIC within the prescribed time limit as mentioned below:</p> <table border="1" data-bbox="384 331 1334 506"> <thead> <tr> <th>Type of Reimbursement Claim</th> <th>Prescribed Time Limit</th> </tr> </thead> <tbody> <tr> <td>Hospitalisation and Pre-hospitalisation expenses</td> <td>Within 15 (fifteen) days of date of discharge from hospital</td> </tr> <tr> <td>Post hospitalisation expenses</td> <td>Within 15 (fifteen) days from completion of post hospitalisation treatment</td> </tr> </tbody> </table>	Type of Reimbursement Claim	Prescribed Time Limit	Hospitalisation and Pre-hospitalisation expenses	Within 15 (fifteen) days of date of discharge from hospital	Post hospitalisation expenses	Within 15 (fifteen) days from completion of post hospitalisation treatment	
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<p>Policy Servicing/ Grievance/ Complaints</p>	<p>Policy Servicing Please contact your Policy issuing office, details of which are mentioned in your Policy Schedule.</p> <p>Grievance/Complaints In case of any grievance, you may contact UIIC through:</p> <p>a. Website: www.uiic.co.in b. Toll Free Number: 1800 425 333 33 c. E-Mail: customercare@uiic.co.in</p> <p>You may also approach the grievance cell at any of our branches with details of the grievance.</p> <p>Alternatively, you may lodge a complaint at the IRDAI Integrated Grievance Management System (https://igms.irda.gov.in/) OR approach the Office of the Insurance Ombudsman in your respective Area/Region. Details of Insurance Ombudsman offices have been provided as Annexure – 3 in the Policy Wordings.</p>	<p><i>Clause V.A.14</i></p>						
<p>Insured's Rights</p>	<ol style="list-style-type: none"> Free Look Period: You are allowed a period of 15 days from date of receipt of the policy document to review its terms and conditions and to return the policy if not acceptable to you. This is not applicable on renewals. Renewability: The policy can be renewed annually throughout the lifetime of the insured. In the event of break in the policy a grace period of 30 days is allowed. However, the policy will not be available for renewal once Lump Sum Benefit for HIV/AIDS is paid. Change of Sum Insured: The Insured Person can apply for an enhancement of Sum Insured at the time of renewal. The acceptance of such enhancement would be at the discretion of UIIC. Migration: Insured Person has the option to migrate the policy to other health insurance products/plans offered by UIIC by applying at least 30 days before the policy renewal date... Portability: Insured Person has the option to port the entire policy to an Super Top Up Medicare product offered by another Insurer by applying at least 45 days before policy renewal date. Portability is subject to underwriting. Turn Around Time (TAT): For reimbursement claims, the company shall settle or reject a claim within 30 days from date of receipt of last necessary document. Change of Sum Insured: On applying at the time of renewal. The acceptance of the enhancement would be at the discretion of the company. All waiting periods as defined in the Policy shall apply for the incremental portion of the Sum Insured from the effective date of enhancement of such Sum Insured. Moratorium Period: After the expiry of Moratorium Period of eight years, no claim under this policy shall be contestable except for proven fraud and permanent exclusions specified in the policy contract. 	<p><i>Clause V.A & Clause V.B</i></p>						

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Insured's Obligations	<p>1. Disclosure of Information: Policyholder is required to disclose all material information such as, but not limited to, pre-existing diseases/conditions, medical history, etc. as sought in the Proposal form and other connected documents.</p> <p>Non-disclosure, misrepresentation or misdescription of such information may result in claim not being paid and shall make the policy void and all premium paid thereon shall be forfeited to UIIC.</p> <p>2. Nomination: Policyholder is required at the inception of the policy to make a nomination for the purpose of payment of claims under the policy in the event of death of the Policyholder.</p>	<p><i>Clause V.A.5</i></p> <p><i>&</i></p> <p><i>Clause V.A.11</i></p>
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Legal Disclaimer Note: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy shall prevail.