

INDUSIND HEALTH INFINITY INSURANCE - CUSTOMER INFORMATION SHEET

TITLE	DESCRIPTION	REFER TO POLICY CLAUSE NUMBER
Product name	IndusInd Health Infinity Insurance	
What am I covered for:	A. Basic Benefits: a. Inpatient Care: Covers medical expenses incurred during Hospitalization due to an illness or accident for period more than 24 hours. 3.1.1 b. Special Treatment: Covers for the medical expenses incurred during the Policy Year on Inpatient Treatment or Daycare Treatment or Domiciliary Treatment of listed Special Treatments. 3.1.2 c. Day Care Procedures: Medical expenses incurred for Day Care Treatment which is surgical procedure, chemotherapy or radiotherapy or hemodialysis taken by an Insured person during the Policy Period at a Hospital or Day Care Centre. 3.1.3 d. Domiciliary Hospitalisation: Medical expenses for medical treatment at home for a period exceeding 3 consecutive days which would otherwise have necessitated hospitalisation. 3.1.4 e. Organ Donor: Medical expenses on harvesting the organ from the donor for organ transplantation. 3.1.5 f. AYUSH Benefit: The Medical Expenses for In-patient Treatment taken under Ayurveda, Unani, Sidha and Homeopathy 3.1.6 g. Pre-Hospitalisation Medical Expenses: Covers expenses incurred 90 days prior of hospitalisation. 3.1.7 h. Post-Hospitalisation Medical Expenses: Covers expenses incurred up to 180 days from the to the date of discharge 3.1.8 i. Emergency Ambulance: Actual expenses incurred per Hospitalization for utilizing ambulance service for transporting the Insured Person to the nearest Hospital with adequate facilities in case of an emergency or from one hospital to another for medically necessary treatment. 3.1.9 j. Transportation Benefit: Reasonable expenses incurred up to Rs 500 per Hospitalization for utilizing a registered radio cab operator's services for transporting the Insured Person to and/or from the Hospital. 3.1.10 k. Restore Benefit: On subsequent claim, one reinstatement up to 100% of Sum Insured for unrelated illness/injury. 3.1.11 B. More Options Benefits The insured may choose one of the following More Options Benefits, which will be applied to the policy with no additional premium. If policy is renewed without any break, such More option benefit with no additional premium will be offered for the next Policy period. The insured can also choose any of the other More options benefits by paying an additional premium. l. MoreTime: The policy period will be extended by one month in case of one year policy period and two months in case of two year policy period. This option is not available for three-year policy period. 3.2.1 m. MoreCover: Additional Sum Insured limit for payment of further claims, in case the Sum Insured is exhausted due to claims made and paid/payable during the Policy Year. Additional Sum Insured will be applied only once for the Insured Person/s during a Policy Year. 3.2.2 n. MoreGlobal: Benefit covers Emergency Care on treatment of illness or conditions manifested during the Policy Period while travelling overseas. 3.2.3 This benefit also covers Planned In-Patient Treatment upto the S.I or Rs 50 lakhs whichever is lower.	


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IRDAI Registration No. 103. IndusInd General Insurance Company Limited (Formerly known as Reliance General Insurance). An ISO 9001:2015 Certified Company For complete details on the benefits, coverage, terms & conditions and exclusions, do read the sales brochure, prospectus and policy wordings carefully before concluding sale. Registered & Corporate Office: 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off. Western Express Highway, Goregaon (E), Mumbai-400063. Corporate Identity Number: U66603MH2000PLC128300. IndusInd Health Infinity Insurance UIN:RELHLIP23120V042223.


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The benefit is subject to a deduction of an amount (in INR) equivalent to USD100 which shall be applicable on each and every claim.

C. Renewal Benefit-Stay Healthy Discount

The Insured Person will be get upto 10% discount at the time of Renewal for carrying out an annual health check-up and sharing the results of the same with the Company.

3.3

D. Add On Covers

3.4

o. Voluntary Co-payment:

On Opting for Voluntary Co-payment, the Insured person is eligible for a discount of 10% on premium. The Co-payment is applicable for each and every claim.

3.4.1

p. Limitless Cover:

3.4.2

i. Consumables Cover: This benefit pays the Reasonable and Customary expenses which are listed in Annexure -A List I as Optional Items.

3.4.2.1

ii. Unlimited Restore Benefit: On subsequent claim.

3.4.2.2

Policies with Sum Insured 5 lakhs: Unlimited restore of S.I on unrelated illness/injury, sub-limit of 100% of Sum Insured for related illness/injury

Policies with Sum Insured >=10lakhs

Unlimited restore of S.I on related or unrelated illness/injury

This benefit supersedes Basic Benefit - Restore Benefit

3.4.3

q. Smart Protector

3.4.3.1

i. Super Charger: At the end of each completed and continuous Policy Year, the Company shall provide the additional Sum Insured under the Policy

Options:

(Option 1): 20% of S.I, maximum up to 100% of S.I

(Option 2) 33.33% of S.I, maximum up to 100% of S.I

ii. Air Ambulance: This benefit indemnifies the Insured, for the expenses incurred on availing Air Ambulance services.

3.4.3.2

S.I < 1crores: 7.5% of Sum Insured or Rs 5 Lakhs whichever is higher

S.I >=1crores: 10% of Sum Insured

r. Mother and Child Care:

3.4.4

i. Maternity Cover: This Cover indemnifies the Insured Person up 1lakh/2lakhs (S.I-5L- 1lakh and S.I >=10L- 1or 2lakhs) towards the maternity expenses including pre-natal and post-natal medical expenses.

3.4.4.1

Cover is available only to 3 years Policy Period.

ii. Newborn baby and Vaccination Cover: This Cover indemnifies the Insured up to Rs. 1lakh during the Policy Year, towards the Hospitalization Expenses incurred towards treatment of Newborn baby and it also includes the cost of mandatory New-born baby immunization vaccination up to 90 days of birth.

3.4.4.2

s. OPD Cover: OPD Cover has 2 plans:

3.4.5

Plan A: This benefit indemnifies the Insured for following:

- a. OPD Consultations with 10 Super Specialist
- b. Diagnostic Tests
- c. Prescription Drugs: 35% of OPD limit

OPD Limits: 10000 to 20000 (in multiples of 5000)

Plan B: This benefit indemnifies the Insured for following:

- a. OPD Consultations with Medical Practitioners
- b. Diagnostic Tests
- c. Prescription Drugs: 35% of OPD limit
- d. OPD for Dental Treatment & related Diagnostic Tests& prescription drugs
- e. Surgical Treatments

OPD Limits: 25000 to 50000 (in multiples of 5000)

t. Medical Equipment Cover: The benefit provides the Reasonable and Customary expenses for procuring Durable and Small Medical Equipment or devices (listed in Policy Wordings) as medical aid, during the Policy Year.

3.4.6

u. Double Cover: This benefit provides an additional 100% of Sum Insured which can be utilized on the same claim, after exhaustion of Sum Insured.

3.4.7

v. Home Care Treatment: This benefit indemnifies the Insured for the medical expenses incurred towards Home Care Treatment for any of the treatments (listed in the Policy wordings) under the Policy.

3.4.8



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	w. Change in Pre-Existing Waiting Period: This benefit allows the Policyholder to change the Pre-Existing Waiting Period to 48 months, 24 months or 12 months. 3.4.9 x. Reduction in Specific Illness Waiting Period: This benefit reduces the Specific Illness Waiting Period to 12 months. 3.4.10 y. Reduction in Room Rent: This benefit gives an option to Policyholder to change the allowable Room Category. 3.4.11 z. Discount for Removal of More Options Benefits: This benefit gives discount in Policy Premium if one complementary More Option Benefit is not opted under the Policy. 3.4.12 aa. Voluntary Aggregate Deductible: The benefit gives an option to the Policyholder to avail discount in premium by choosing (10000,25000,50000,100000) as the Voluntary annual Aggregate Deductible. 3.4.13	
What are the major exclusions in the policy	The following is a partial list of the policy exclusions (Please refer to the policy wording for the complete list of exclusions): a. Investigation & Evaluation (Code:Excl04) b. Rest Cure, rehabilitation and respite care (Code:Excl05) c. Obesity/ Weight Control (Code:Excl06) d. Change-of-Gender treatments (Code:Excl07) e. Cosmetic or Plastic Surgery (Code: Excl08) f. Hazardous or Adventure sports(Code:Excl09) g. Breach of law (Code: Excl10) h. Excluded Providers (Code:Excl11) i. Substance Abuse and Alcohol (Code: Excl12) j. Wellness and Rejuvenation (Code:Excl13) k. Dietary Supplements & Substances (Code: Excl14) l. Refractive Error (Code: Excl15) m. Unproven Treatments-Code (Code: Excl16) n. Sterility and Infertility (Code: Excl17) o. Maternity Expenses (Code - Excl 18) Specific Exclusions p. Alternative Treatments q. Circumcision r. Convalescence or Rehabilitation s. Dental Treatments t. Unprescribed Drugs or treatments u. Enteral Feedings v. External Congenital Anomaly w. Hearing aids x. Hormonal therapies y. Non-Medically necessary treatment z. Medical Supplies - aa. Non-medical expenses - bb. Outpatient Treatment (OPD) - cc. Overseas Treatment - dd. Peritoneal Dialysis - ee. Prosthetic and other devices - ff. Charges other than Reasonable and Customary - gg. Self-Injury or suicide - hh. Sexually Transmitted Diseases ii. Sleep-Apnea - jj. Spinal subluxation, manipulation and muscle stimulation - kk. Treatment by a family member - ll. Treatment Outside discipline - mm. Vaccination and immunization - nn. Nuclear Attack - oo. War (whether declared or not)	4



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Renewal benefits	a. Stay Healthy Discount b. Super Charger	3.3 3.4.3.1									
Cancellation	a. This Policy can be cancelled by the Company at any time on grounds of misrepresentation, fraud, non-disclosure of material facts by any Insured Person, upon giving 15 days' notice without refund of premium. b. The Insured may cancel this Policy at any time by giving written notice. If no claim has been made under the Policy, then the refund premium will be in accordance with the table below: <table><tr><td>Length of time Policy in force</td><td>Refund of premium</td></tr><tr><td>Upto 90 days</td><td>100%</td></tr><tr><td>Above 90 days</td><td>Pro-rata</td></tr></table> c. If an Insured Person dies, he will cease to be an Insured Person upon the Company receiving all relevant particulars in this regard. The Company will return a rateable part of the premium received for such person if there are no claims made in respect of that Insured Person under the Policy	Length of time Policy in force	Refund of premium	Upto 90 days	100%	Above 90 days	Pro-rata	5.1.16			
Length of time Policy in force	Refund of premium										
Upto 90 days	100%										
Above 90 days	Pro-rata										
Claims	Please contact Company atleast 48 hrs prior to an event which might give rise to a claim. For any emergency situations, kindly contact the Company within 24 hours of the event. For any claim related query, information or assistance You can also contact Our Help Line at 022 4890 3009 (paid)/ 022-41112600 or visit Our website www.indusindinsurance.com or e-mail Us at healthcare@indusindinsurance.com	Annexure-III									
Policy servicing/	Company Officials In case of a Policy Servicing / grievance, You can contact the Company with the details through: Our website: www.indusindinsurance.com Email : services@indusindinsurance.com Helpline : 022 4890 3009 (paid)/022-41112600 Address : IndusInd General Insurance., Winway Building 2nd & 3rd Floor,11/12 Block No-4, Old no-67, South Tukoganj, Indore(M.P) -452001	Annexure-II									
Grievances/ Complaints	For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 022 4890 3009 (paid) or may write an email at services@indusindinsurance.com In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at grievances@indusindinsurance.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at headgrievances@indusindinsurance.com IRDAI / (IGMS/Call Centre): Through IGMS, Insured can register the complaint online and track its status. For registration please visit IRDAI website www.irdai.gov.in. Telephone Number: 022 4890 3009 (paid) Timings: 8 AM to 8 PM -- (Monday to Saturday) Ombudsman: In case you/insured person are not satisfied with our decision/resolution, you may approach the Insurance Ombudsman.	5.1.17									
Insured's Rights	a. Free Look period of 15 days from the date of receipt of the policy shall be applicable at the inception. b. Lifelong renewability (except on certain specific grounds) c. Right to migrate from one product to another product of the company (E-mail us at services@indusindinsurance.com and For correspondence contact us IndusInd General Insurance, Winway Building 2nd & 3rd Floor, 11/12 Block No-4, Old no-67,South Tukoganj, Indore (M.P) -452001 Contact No.- 022-41112600 d. Right to port the from one company to another company (E-mail us at services@indusindinsurance.com and For correspondence contact us IndusInd General Insurance, Winway Building 2nd & 3rd Floor, 11/12 Block No-4, Old no-67, South Tukoganj, Indore(M.P) -452001 Contact No.- 022-41112600 e. Change in SI during the policy term or at the time of renewal E-mail us at services@indusindinsurance.com f. Norms on TAT for Pre-Auth and Settlement of reimbursement. <table><tr><td>Sr. No</td><td>Type of claim</td><td>Prescribed Time Limit</td></tr><tr><td>1</td><td>Pre-Authorization</td><td>Within 4 hours of receipt of necessary document</td></tr><tr><td>2</td><td>Reimbursement of hospitalization, day care and expenses</td><td>Within 30 days of date of receipt of last necessary document</td></tr></table>	Sr. No	Type of claim	Prescribed Time Limit	1	Pre-Authorization	Within 4 hours of receipt of necessary document	2	Reimbursement of hospitalization, day care and expenses	Within 30 days of date of receipt of last necessary document	5.1.14 5.1.8 5.1.12 5.1.13 5.2.4
Sr. No	Type of claim	Prescribed Time Limit									
1	Pre-Authorization	Within 4 hours of receipt of necessary document									
2	Reimbursement of hospitalization, day care and expenses	Within 30 days of date of receipt of last necessary document									


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Insured's obligations	This Policy has been issued on the basis of the Disclosure to Information Norm, including the information provided by You in respect of the Insured Persons in the Proposal Form and any other details submitted in relation to the Proposal Form. If at the time of issuance of Policy or during continuation of the Policy, any material fact in the information provided to Us in the Proposal Form or otherwise, by You or the Insured Person, or anyone acting on behalf of You or an Insured Person is found to be incorrect, incomplete, suppressed or not disclosed, wilfully or otherwise, the Policy shall be: i. cancelled ab initio from the inception date or the renewal date (as the case may be), or the Policy may be modified by Us, at Our sole discretion, upon 15 days notice by sending an endorsement to Your address shown in the Schedule without refund of premium; and ii. any claim made under such Policy, shall be rejected/repudiated forthwith.	5.1.1
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Legal disclaimer Note: The information must be read in conjunction with the prospectus and policy wording. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail.

Benefit Illustration in respect of policies offered on Individual and Family Floater basis											
Age of the members insured	Coverage opted on individual basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum insured is available for each member of the family)				Coverage opted on family floater basis with overall Sum insured (Only one sum insured is available for the entire family)				
	Premium (Rs.)	Sum insured (Rs.)	Premium (Rs.)	Discount, if any	Premium after discount (Rs.)	Sum insured (Rs.)	Premium or consolidated premium for all members of family (Rs.)	Floater discount, if any	Premium after discount (Rs.)	Sum insured (Rs.)	
	51	10,252	3,00,000	10,252		9,227	3,00,000	18,815	0%	18,815	3,00,000
	44	6,659	3,00,000	6,659		5,993	3,00,000				
	23	4,933	3,00,000	4,933	10%	4,440	3,00,000				
	18	4,190	3,00,000	4,190		3,771	3,00,000				
Total Premium for all members of the family is Rs.26,034 when each member is covered separately. Sum insured available for each individual is Rs.3 lakhs			Total Premium for all members of the family is Rs. 23,431 when they are covered under a single policy. Sum insured available for each family member is Rs.3 lakhs				Total Premium when policy is opted on floater basis is Rs. 18,815 Sum insured of Rs 3 lakhs is available for the entire family.				
Note: Premium rates specified in the above illustration are standard premium rates without any discount for Rest of India zone. Also, the premium rates are exclusive of taxes applicable.											


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