

GROUP MEDICLAIM SCHEDULE

Address of Issuing Office : Policy Issuing Office: Reliance General Insurance Company Limited 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai - 400 063. Issuing Branch Code: 9201	4th floor, Chintamani Avenue, Next to Virvani Industrial Estate, W.Exp. Highway, Goregaon East MAHARASHTRA
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Policyholder Details	
Policy Number: 110532328430000007	Proposal No: P040423101166
Name: M/S NUVVEN INDIA PRIVATE LIMITED	Policy Issue Date: 06/04/2023
Correspondence Address & Place of Supply: 91 SPRING BOARD 175 & 176, DOLLARS COMPANY JP NAGAR 4TH PHASE BANNERGHATTA MAIN RD, BENGALURU, KARNATAKA KARNATAKA BANGALORE 560078	Email Id: shipra@coastr.com
Period of Insurance: From 20/03/2023 to mid night on 19/03/2024	Contact No: 9844013592
Tax Invoice No. & Date: P040423101166 & 06/04/2023	Date of proposal: 06/04/2023
GSTIN/UIN of Policyholder: 29AAHCN3999H1ZQ	Policy Branch Office Code: 1105

Details of previous policy (in case of renewal)	
Previous policy No:	Date of expiry:

Co-Insurance Details			
Co-Insurance Company	Company Status	Company Branch and Branch Code	Company Share (%)
RELIANCE GENERAL INSURANCE CO LTD.	Own	Andheri ,1105	100.00

Risk details	
Total No of Employees Covered	22
Total No of Lives Covered	44
Basis of Sum Insured	Family Floater
Family Covered	As Per Annexure
Total Sum Insured (Rs)	11000000.00
Coverage Details and List of members covered as per Schedule attached.	

Premium Details	Amount (Rs)
Premium (Rs)	270000.00
IGST (@18.00%)	48600.00
Total Premium (Rs)	318600.00

Branch GSTIN :27AABCR6747B1ZG;HSN Code :997133;Description Of Services :Accident and Health Insurance Service;
 Consolidated Stamp duty Paid vide Letter of Authorisation "NO.LOA/CSD/562/2023/(Validity Period Dt.10/01/2023 to Dt.01/12/2023)/117 DT.9 JAN 2023" at General Stamp Office, Mumbai. ** Not Applicable for the State of Jammu & Kashmir.

Coverage Details

Cover Name	Sum insured	Co-pay	Special Conditions
Hospitalization			-
Pre Hospitalization			30 days
Post Hospitalization			60 days
Maternity Cover			i) Normal Limits: Rs.50000 C-Section : Rs.60000, ii) Maternity Benefits applicable for first 2 deliveries.
Waiver of Maternity waiting period			Waived for all
Ambulance charges			Rs.1500/- per Hospitalisation subject to submission of bill (for Inward cases only)
Baby cover from Day1			Within Family Floater Sum insured
Domiciliary hospitalization			Not Applicable
Pre-existing illness cover			Waived for all
Cover for first year excluded diseases			Waived for all
Cover for first 30 days Exclusion			Waived for all
Family Definition			Employee + Spouse + 3 dependent Children upto age 25 years. Sum Insured- 5,00,000
Additional Details on family definition			Mid term inclusion of dependents will be possible only in case of spouse (on account of marriage during the policy term) & children (childbirth during the policy term but after the child has completed 91 days of age) subject to availability of slot under family definition children
Member Addition and Deletion Process			1)Premium to be charged on Pro Rata Basis for addition/deletion endorsement. Addition-deletion will be done on Pro Rata Basis for employees (for addition of lives DOJ of employee will be considered as effective date and for deletion of lives DOL will be considered as effective date) along with dependants once in a month only, subject to all relevant details being forwarded to insurer before 7th day of succeeding month. Please note no deletion of premium in case of claimed lives. 2)No Refund for deletion-if lives less than minimum required & if insured has claimed during policy.

Cover Name	Sum insured	Co-pay	Special Conditions
Room Rent			2% of SI for Normal & 4% of SI for ICU (inclusive of nursing charges & RMO Charges). Proportionate capping applicable. Room rent eligibility with rents including RMO and Nursing charges and other associated charges capped at Limits as defined above for normal and for ICU / ICCU / NICU hospitalisation. In the event of insured person getting admitted in a room/ICU/ICCU NICU where rent is higher than the capped amount or higher category, as mentioned above, the insured person shall bear proportion of the entire hospital Bill/ Medical Expenses in proportion of the [(Room Rent / ICU/ICCU actually incurred Room Rent / ICU/ICCU/NICU as per capping / type)]/ (Room Rent / ICU/ICCU actually incurred) This shall be applicable to all the Medical Expenses incurred during the stay in Hospital
Day care procedure			As per RGICL Day care list

General Conditions: 1) It shall be a condition precedent to the Company's liability under this policy that all supporting documents relating to the claim must be submitted to the RCARE within thirty (30) days from the date of discharge from the hospital. In case of post hospitalization treatment days, all claim documents should be submitted to the RCARE within seven (7) days after completion of such treatment.

2) Ailment/ Conditions not covered- Robotic surgery/treatment done using this technology/Robotically assisted Surgery, Stem Cell Transplantation/bone marrow transplant, Septoplasty, Cochlear Implant or related aids, RFQMR - Rotational Field Quantum Magnetic Resonance Device - Cytotron, C3R, Balloon Sinuplasty, Bariatric surgery, Inj Avastin /Lucentis/Macugen, Ozone Therapy, Enhanced External Counter Pulsation Therapy (EECP), Rejuvenation therapy, Lasik Surgery.

3) Maternity- Maternity in self demography to have a waiting period of 5 months for endorsement cases.

4) Surcharges, service charges, miscellaneous charges and other non treatment related expenses are not payable.

5) Rest all other terms & conditions strictly as per Reliance's Group mediclaim policy.

Warranted that the exclusions mentioned below stand deleted:

Maternity
Maternity waiting period
Pre- existing illness
First Year exclusion
30 day Exclusion

11BRG436	RAGHNALL INSURANCE BROKING RISK MANAGEMENT PVT LTD	9930469476
Intermediary Code	Intermediary Name	Intermediary Contact No.

Schedule of Members

Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	M/F	Sum Insured	Date of Joining	Location	Remarks
1	20	DEBOLINA GHOSH	SELF	NA	35 Yr 00 M	F	500000	20.03.2023		
2	20	HRIDHAAN GHOSH SINHA	SON	NA	4 Yr 00 M	M		20.03.2023		
3	NI002	ANUJ KUMAR	SELF	NA	28 Yr 00 M	M	500000	20.03.2023		
4	NI002	MANISHA KUMARI	SPOUSE	NA	29 Yr 00 M	F		20.03.2023		
5	NI003	ASHUTOSH KUMAR MANTOO	SELF	NA	29 Yr 00 M	M	500000	20.03.2023		
6	NI003	PARIDHI KUMARI	DAUGHTER	NA	1 Yr 00 M	F		20.03.2023		
7	NI003	DIVYANSHI KUMARI	DAUGHTER	NA	3 Yr 00 M	F		20.03.2023		
8	NI003	PRATIMA KUMARI	SPOUSE	NA	29 Yr 00 M	F		20.03.2023		
9	NI004	SHAARVI NELAGONDANAHALLI	DAUGHTER	NA	0 Yr 03 M	F		20.03.2023		
10	NI004	HARISH N V	SELF	NA	32 Yr 00 M	M	500000	20.03.2023		
11	NI004	PRATIBHA SANGAMESH	SPOUSE	NA	29 Yr 00 M	F		20.03.2023		
12	NI005	ANMOL ATRI	SPOUSE	NA	28 Yr 00 M	F		20.03.2023		
13	NI005	HARSHIT AGARWAL	SELF	NA	27 Yr 00 M	M	500000	20.03.2023		
14	NI006	NISHTHA TOMER	SELF	NA	31 Yr 00 M	M	500000	20.03.2023		
15	NI009	ANINDYA BHANJA CHOWDHURY	SELF	NA	47 Yr 00 M	M	500000	20.03.2023		
16	NI009	RAJANYA BHANJA CHOWDHURY	DAUGHTER	NA	8 Yr 00 M	F		20.03.2023		
17	NI009	NIVEDITA BHANJA CHOWDHURY	SPOUSE	NA	44 Yr 00 M	F		20.03.2023		
18	NI011	SARTHAK AGARWAL	SPOUSE	NA	28 Yr 00 M	M		20.03.2023		
19	NI011	SHREAYA BAJAJ	SELF	NA	28 Yr 00 M	F	500000	20.03.2023		
20	NI012	VARTIKA TREHAN	SELF	NA	26 Yr 00 M	F	500000	20.03.2023		
21	NI013	AASTHA G KHAN	SPOUSE	NA	35 Yr 00 M	F		20.03.2023		
22	NI013	NADEEM KHAN	SELF	NA	37 Yr 00 M	M	500000	20.03.2023		
23	NI018	PRATHMESH TIWARY	SON	NA	8 Yr 00 M	M		20.03.2023		

Reliance General Insurance Company Limited. IRDAI Registration No. 103

An ISO 9001:2015 Certified Company

Registered Office & Corporate Office/Policy Issuing Office: Reliance General Insurance Company Limited 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai -400 063.

Corporate Identity No: U66603MH2000PLC128300. HEALTH GROUP MEDICLAIM - MASTER - EMPLOYER EMPLOYEE RELATIONSHIP. UIN : RELHLGP21523V022021

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RGI/MCOM/CO/ 2843 /PS/Ver.1.0/151020

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Sr. No.	Emp Code	Name of the person	Emp Relation	Grade	AGE	M/F	Sum Insured	Date of Joining	Location	Remarks
24	NI018	PREETI BALA	SPOUSE	NA	38 Yr 00 M	F		20.03.2023		
25	NI018	SHRESHTA TIWARY	DAUGHTER	NA	9 Yr 00 M	F		20.03.2023		
26	NI018	RISHABH MAKRAND	SELF	NA	40 Yr 00 M	M	500000	20.03.2023		
27	NI026	KARTHIK AM	SELF	NA	25 Yr 00 M	F	500000	20.03.2023		
28	NI032	BABLU KUMAR	SELF	NA	26 Yr 00 M	M	500000	20.03.2023		
29	NI036	PURNIMA PAUL	SELF	NA	41 Yr 00 M	F	500000	20.03.2023		
30	NI036	AKASH JAIN	SPOUSE	NA	43 Yr 00 M	M		20.03.2023		
31	NI036	EKAGRAHH JAIN	SON	NA	10 Yr 00 M	M		20.03.2023		
32	NI038	ANIKA HOM CHOUDHURY	DAUGHTER	NA	11 Yr 00 M	F		20.03.2023		
33	NI038	SHIPRA CHOUDHURY	SELF	NA	40 Yr 00 M	F	500000	20.03.2023		
34	NI038	ARNAV HOM CHOUDHURY	SON	NA	11 Yr 00 M	M		20.03.2023		
35	NI038	SATYAJIT CHOUDHURY	SPOUSE	NA	45 Yr 00 M	M		20.03.2023		
36	NI039	HARMEET KOUR	SELF	NA	29 Yr 00 M	M	500000	20.03.2023		
37	NI041	NANDA KUMAR	SELF	NA	26 Yr 00 M	F	500000	20.03.2023		
38	NI042	HARSHIT AGARWAL	SELF	NA	27 Yr 00 M	M	500000	20.03.2023		
39	NI042	ANMOL ATRI	SPOUSE	NA	28 Yr 00 M	F		20.03.2023		
40	NI046	KIRAN PULUGUZZU	SELF	NA	30 Yr 00 M	M	500000	20.03.2023		
41	NI047	G SACHINKUMAR	SPOUSE	NA	35 Yr 00 M	M		20.03.2023		
42	NI047	PALLAVI PATIL	SELF	NA	34 Yr 00 M	F	500000	20.03.2023		
43	NI049	RAJESH MAROTHU	SELF	NA	24 Yr 00 M	M	500000	20.03.2023		
44	NI050	SONAM VERMA	SELF	NA	30 Yr 00 M	F	500000	20.03.2023		

Notice of communication to be given in respect of claim to :

Name:	Reliance HCMT
Address:	Reliance General Insurance Company .Ltd. HCMT HUB 1-89/3/B/40 to 42/ks/301 3rd floor, Krishe block, Krishe Sapphire Madhapur, Hyderabad Pincode: 500081
City:	Hyderabad
Website Address:	
Customer care No	1800-3009
Email id:	rcarehealth@rcap.co.in

Note :

- In case of renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change
- For detailed terms, conditions and exclusions please refer the policy wordings.
- In the event of non-realization of premium, this policy document automatically stands cancelled from inception, irrespective of whether a separate communication is sent or not
- In witness whereof this Policy has been signed at Mumbai on policy tax invoice date in lieu of Application No. as mentioned in the policy.
- In the event of incorrect representation of this declaration, the liability shall be upon the Policyholder
- Only the benefits which are mentioned in this Policy Schedule shall be available under the Policy.
- This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017
- In case of any assistance with claims, please contact us on 1800 3009 (toll free) or email us at rgicl.services@relianceada.com
- The Policy Wording with detailed terms, conditions and exclusions along with other documents are available on our website www.reliancegeneral.co.in.
- (Policy wordings link : <https://www.reliancegeneral.co.in/Insurance/About-Us/Downloads.aspx>)

Grievance Clause: For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 1800 3009 or may write an email at rgicl.services@relianceada.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 rgicl.grievances@relianceada.com. In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at rgicl.headgrievances@relianceada.com. In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irda.gov.in or on company website www.reliancegeneral.co.in or on www.gbic.co.in. The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located. Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@gbic.co.in | Shri. A. K. Sahoo Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune - 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@gbic.co.in

For Reliance General Insurance Co. Ltd.


Authorised Signatory