

Policy Certificate - Group Care 360°

PALOMA TURNING CO PRIVATE LIMITED
173/2, BANDAPURA VILLAGE ROAD, BEHIND AVS
CONCRETE
OFF HOSUR ROAD, ANEKAL TALUKA, BENGALURU
BANGALORE
KARNATAKA-562106

GSTN : 29AADCP7038B1ZI
STATE CODE : 29

Policy No	43042863
Name of Policyholder	PALOMA TURNING CO PRIVATE LIMITED
Cover type	Main Floater
Policy Period - Start Date	00:00 hrs 10-Jun-2022
Policy Period - End Date	Midnight 09-Jun-2023

Premium Details

Premium	CGST	IGST	SGST	UGST	Total Premium	Premium Payment Mode
₹ 860,000	₹0	₹ 154800.01	₹0	₹0	₹ 1,014,800	ANNUAL PREMIUM

Details of Insured

S No.	Particulars	Nos.
1	Primary Insured Members	178
2	Dependents	290
	Total	468

For details of each insured refer to “Annexure A”

Details of Cover

S No.	Particulars	Amount
1	Total Sum Insured	₹ 36,700,000

Intermediary Details

Name	Code	Contact Number
PHOENIX GENERAL INSURANCE	20420207	9156429030

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Benefits

S. No.	Particulars	Details
1	In-patient Care	Graded Sum insured
Room Rent		
Sum Insured	Maximum eligibility for Normal Hospitalization	Maximum eligibility for ICU Hospitalization
Rs. 200,000	2 % of Sum Insured per day	4 % of Sum Insured per day
Rs. 300,000	2 % of Sum Insured per day	4 % of Sum Insured per day

If the Insured Member is admitted in a room where the room rent incurred is higher than the room rent limit specified above, then the Insured Member shall bear the ratable proportion of the total Medical Expenses in the proportion of the room rent actually incurred-room rent limit/room rent actually incurred.

Day Care Treatment : List of Day Care procedure attached as “Annexure A under Know your policy Better”
List of Expenses Generally Excluded (Non-Medical) in Hospital Indemnity Policy "Annexure B under Know your policy Better"

Details of Benefits and Optional Extensions

1. **Policy type : Non selective**
2. **Family Structure : Self + Spouse + 3 Dependent children**
3. **Age Limit: Child age up to 25 years and Employee/Spouse/age up to 80 years**

Waiting Period

1. Pre-existing diseases are **covered** for existing members and new joinees.
2. 30 Days Wait Period condition is **waived** for existing members and new joinees.
3. First & Second year exclusion condition for specific diseases is **waived** for all Insured Members.

Pre & Post Hospitalization

1. Pre & Post Hospitalization is covered for **30 days and 60 days** respectively.

Maternity

1. Maximum Limit for Maternity claims is **Rs. 30,000 for Normal and Rs. 35,000 for LSCS.**
2. Maternity Expenses Benefit is available for Employees or Spouse Only if covered in data.
3. Maternity claim is payable for first two dependent children only.
4. 9 month waiting period in respect of maternity claims **waived** for all Insured Members.
5. Pre & Post natal expenses are covered **up to Rs. 5,000/-** within the overall maternity limit for a period of 30 days
6. **New Born Baby covered** from day one within family floater Sum Insured applicable to the Employee.

Other Benefits

1. Ambulance charges payable up to a maximum amount of Rs. 2,000/- per claim.
2. Claim for lasik treatment - if power of eye is above +/- 6.5 is payable.
3. Modern treatments, psychiatric treatments and Bariatric Surgery treatment covered under the policy as per terms and conditions upto 50% of the Sum Insured.
4. AYUSH Treatment: Expenses incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a Government Hospital or in any institute recognized by the government and/or accredited by the Quality Council of India/National Accreditation Board on Health up to 25% of the sum insured subject to a maximum of Rs. 25,000/- per policy period

5. INTERNAL CONGENITAL Covered
6. Congenital External Disease. COVERED ONLY IN CASE OF LIFE THREATING
7. Hospitalisation (24 hrs) arising out of Psychiatric Ailments-Upto Rs.30,000 on IPD basis
8. Liability for Functional Endoscopic Nasal Sinus Surgeries- Upto Rs.35,000
9. E-Consultation-General Physician

PPE Kit only COVID 19 treatments

1. Upto Isolation Rooms : Upto Rs. 1200 or 2 PPE kit per day whichever is lower
2. ICU with or without Ventilators : Upto Rs. 2000 or 4 PPE kit per day whichever is lower

****PPE kit includes overall cost of kit including mask, gloves, head and shoe cover, face shield and coverall suit.**

Premium per life Excluding tax:

Age Band	2,00,000	3,00,000
0-35	1502.25	1673.42
36-45	2007.7	2213.1
46-55	3871.42	4228.85
56-65	6811.48	7415.6
66-70	13978.38	15257.1
71-75	14566.39	15674.95
76-80	15219.85	16132.07

Other Term and Conditions

Below terms & conditions are applicable unless specifically waived or amended under the policy.

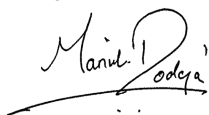
1. Mid-term increase in Sum insured due to change in level of the employee (promotion) is allowed, but in case of claims it will not be applicable.
2. If Dependents are to be covered under Family Structure, then the same needs to be declared at the time of inception of the Policy. Mid-term inclusion of only Child by birth and Spouse after marriage falling during the Policy period is allowed.
3. Definition - Mental Illness means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognize, reality or ability to meet the ordinary demands of life, mental conditions associated with the abuse of alcohol and drugs, but does not include mental retardation which is a condition of arrested or incomplete development of mind of a person, specially characterized by sub normality of intelligence.
4. Treatment of mental retardation, arrested or incomplete development of mind of a person, subnormal intelligence, cerebral palsy, cretinism, Mongolism, mental intellectual disability, Parkinson's disease, Alzheimer's disease and Dementia will not be covered under the policy.
5. All additions and deletions will be done on a pro rate a basis unless otherwise agreed.
6. The Insured must inform of new additions within a reasonable time but not later than 30 days from the date of the joining the organization. On exit of employees, deletion of employees should be informed in writing failing which the liability incurred on claims of such employees after their exit, would be of the employer.
7. Domiciliary Hospitalization is specifically excluded unless mentioned specifically.
8. Terrorism cover extended under the policy.
9. Treatment related to genetic disorders is not covered.
10. Internal congenital disorders are covered under the policy
11. Individuals cannot be covered as an employee and dependent under the same policy, nor may children or parents will be covered by both under the same policy.
12. List of hospitals where cashless can be availed is also available on our website. The Co. however reserves the right to include/exclude any hospital from this list. However if an insured has already availed a cashless from a hospital which is later on delisted by the Co., in such case the Co. will continue to provide cashless to that insured for the same treatment.
13. Following charges levied by hospitals will not be payable under the policy:- Admission charge / Surcharge / Service charges / miscellaneous charges / Registration fee / Admission Fee / Other non- medical or non-treatment related expenses.

14. Existing groups may not split into multiple groups to obtain multiple benefit levels.
 15. Excluding a class within a group from coverage is not permitted.
 16. Ineligible employees include: contractors; temporary, seasonal, substitute, uncompensated employees; volunteers, silent partners, shareholders or investors only; owners, officers or managing members who are not active, permanent, full-time employees.
 17. Any hospitalization to undergo contraception is excluded under the policy.
 18. Infertility & related ailments including male sterility, treatment on trial /experimental basis; expenses on fitting of prosthesis (any device /instrument/contributing machine/replacing the functions of an organ) holter monitoring are outside the scope of this policy.
 19. Septoplasty for cosmetic purpose shall be excluded from the scope of the policy.
 20. 50% co-pay for Bio-absorbable Stent/Toric lens/Multi Focal lens.
 21. Subject otherwise to terms, conditions and exclusions of the Policy.
 22. Claim payment shall be done in favor of customer (employee)/Nominee
- Claims whether Cashless or Reimbursement pertaining to any treatment taken in Non-Preferred hospitals will not be payable. Please refer below link to access the latest list of such hospitals subjected to change from time to time.
- <https://www.careinsurance.com/non-preferred-hospital-list.html>
23. In case of any mass media promotion of the product and policy, prior approval from the Co. shall be taken.
 24. Physical - Health Cards will be provided if specifically mentioned on the policy.

Claims Servicing Team

Name of Service	Address	Phone	Fax	Email
Care Health Insurance Ltd	Vipul Tech Square, Tower C, 3rd Floor, Sector 43, Golf Course Road Gurgaon - 122009	1800-102-4488	1800-200-6677	Claims@careinsurance.com

For **Care Health Insurance Limited**
(Formerly known as Religare Health Insurance Company Limited)



Authorized Signatory

Date of Issue : 17-Jun-2022

Place of Issue : Gurgaon, Haryana

Registered office address: Care Health Insurance Limited,
(Formerly known as Religare Health Insurance Company Limited),
5th Floor, 19 Chawla House, Nehru Place, New Delhi - 110019
Service Branch : CHIL, "Synergy Business Park" Office no 702 & 703 7th Floor, Off Aarey Road, Goregaon (East), Mumbai, Maharashtra-400063, Mumbai, Maharashtra - 400063 Branch Contact No. : 1800-102-4488
Correspondence Address: Care Health Insurance Limited
(Formerly known as Religare Health Insurance Company Limited)
Unit no 604 - 607, 6th Floor, Tower C, Unitech Cyber Park,
Sector 39, Gurgaon - 122001.(HARYANA)
Call us : 1800-102-4488 Fax : 1800-200-6677
Website : www.careinsurance.com E-mail : customerfirst@careinsurance.com

Consolidated Stamp Duty paid vide E-Challan GRN no. 89495132 dated 18 April 2022, RCM Applicability- N/A
SAC: 997133 and Description of Service: Accident and Health Insurance Services State GSTIN No.: 27AADCR6281N1ZS
IRDA Registration Number - 148
UIN : RHIHLGP20126V011920 CIN – U66000DL2007PLC161503
Note:

*In case premium is paid (partly/fully) by the Insured Member, the same shall be eligible for deduction u/s 80D of Income tax act 1961