

Date : 21 Apr 2023

Miss Diksha Raheja
D/o, Vishambhar Raheja, Main Road, Arya Nagar
Ward No.05, Udham Singh Nagar
kashipur
kashipur 244713
Uttarakhand 05

Policy No: 40536386

Mobile No: XXXXXX4461



Dear Miss Diksha Raheja,

Thank You for trusting us as your preferred Health Insurer.

At Care Health insurance, it is our endeavor to make quality healthcare easily accessible for our customers as well as ensure a truly hassle-free claim servicing experience

To help you understand our services better, please go through the 'Know your policy better' kit that accompanies this letter and constitutes the following

- Policy certificate
- Premium Acknowledgement
- Key Policy Information
- Claim Process
- Policy Terms and Conditions- <https://bit.ly/3qals5e> and also available on Customer App

Also appended herewith for your convenience is your Care Health Card. This card should be presented at the time of an emergency or a planned hospitalization, to avail cashless treatment at our network of over 16000+ cashless network pan-India.

To further simplify procedures, we're online as well. Visit our portal www.careinsurance.com and view network hospitals across the country, cashless procedures and do much more.

For any assistance, please feel free to write to us at <https://www.careinsurance.com/contact-us.html>.

Once again, we thank you for this opportunity to serve you, and wish you and your loved ones good health always!

Team Care Health Insurance

CUSTOMER APP



For Android



For iOS

Care Health Insurance Limited

Regd. Office: 5th Floor, 19 Chawla House, Nehru Place, New Delhi-110019
Corresp. Office: Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road,
Sector-43, Gurugram-122009 (Haryana)
IRDAI Regn. No. 148 | CIN: U66000DL2007PLC161503

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Care Health-
Customer App



WhatsApp
9960402452

Self Help Portal:
www.careinsurance.com/self-help-portal.html

Submit Your Queries/Requests:
www.careinsurance.com/contact-us.html

Policy Certificate

Miss Diksha Raheja
D/o, Vishambhar Raheja, Main Road, Arya Nagar
Ward No.05, Udham Singh Nagar
kashipur
kashipur 244713
Uttarakhand 05

Policy No.	40536386
Plan Name	CARE CLASSIC
Cover type	Floater
Policy Period - Start Date	00:00 hrs 22-Apr-2023
Policy Period - End Date	Midnight 21-Apr-2024
Nominee Name (Relation)	Radha Raheja
Premium Paid	Rs.13,092.00 Premium Rs 11094.76+CGST Rs 998.54+IGST Rs 0.00+SGST Rs 998.54+UGST Rs 0.00
Premium Payment Mode	Single Premium

Policyholder	Gender	Date Of Birth	Client ID
Miss Diksha Raheja	Female	27-Oct-1993	35815047

Details of Insured Person

Name	Client ID	Date of Birth	Relationship	Insured with the Company (since)	Pre-existing diseases since
Diksha Raheja	35815047	27-Oct-1993	MEMBER	31-Mar-2022	NONE

Details of Cover

Policy Insured Name	Policy Sum Insured	Accumulated No Claim Bonus Amount
Diksha Raheja	5,00,000.00	1,25,000.00

Note - NCB/NCB Shield Protection has been applied on this renewal.
- Amount of No Claim Bonus / No Claim Bonus Super is calculated basis the claim status updated till Date of Payment of Renewal Premium.
This amount can vary basis the claim reported against Expiring Policy Year.
- Floater Policy, all the member coverage is on shared basis. Individual Policy each member is covered on Individual Basis
- Coverage and Claims Subject to the Policy Terms & Conditions

Contact details for Claims & Policy Servicing

Correspondence address	Care Health Insurance Limited, Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road, Sector-43, Gurugram-122009 (Haryana)
E-mail ID for Claims	claims@careinsurance.com
Website	www.careinsurance.com


Intermediary Details

Name	Code	Contact Details
AJAY	20112054	9012345551


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Schedule of Benefits

S No.	Particulars	Basis of Offering
1	In-Patient Care	Up to SI
2	Pre-Hospitalization Medical Expenses	60 Days
3	Post Hospital Medical Expenses	90 Days
4	Ambulance Cover	Up to Rs 1,000 per year
5	Domiciliary Hospitalization	Up to SI including AYUSH
6	Unlimited Automatic Recharge	Available for unlimited times for unrelated or same illness.
7	No Claims Bonus	25% increase/decrease of SI on renewal based on claim in previous year, Max increase up to 150% of SI.
8	Day Care Treatment	All day care procedures
9	Room Rent	Single Private A/C Room.
10	ICU Charges	No limit
11	Treatment of Cataract	Up to 40,000 per eye, Max 60,000 per policy period
12	Initial Wait Period	30 Days
13	Named Ailment	24 months
14	Pre-Existing Diseases	48 months
15	Advance Technology Methods	Covered with sub limits, please refer T & C for sub limits.
16	AYUSH Treatment	Cover upto 10% of SI subject to Maximum Rs.50,000 per policy period
17	Organ Donor Expenses	Up to 10% SI
18	Medical Second Opinion	Available
19	Unlimited E-Consultation	Available for General Physician
20	Other Value Added Services	Health Portal- Doctor on chat, Healthy tips reminder, Discount Connect - Discounts on services at our network
21	Compassionate Travel	Up to Rs.5,000 per policy year

Optional Cover

S NO.	Particulars	Details
1	Annual Health Check-up	Applicable

For Care Health Insurance Limited



Authorized Signatory

Date of Issue : 21 Apr 2023

Place of Issue : Gurgaon, Haryana

Service Branch : AKTOWER Plot No 03 2nd Floor Durga City Centre Haldwani
Khas Under Nagar Nigam
Haldwani263139Haldwani,Uttarakhand,263139

Branch Contact No. : 9289454699

Consolidated Stamp Duty paid vide E-Challan GRN no. 98389442 dated 17 Jan 2023, RCM Applicability- N/A
SAC: 997133 and Description of Service: Accident and Health Insurance Services State
GSTIN No.: 05AADCR6281N1ZY
UIN :CHIHLP22071V012122

Note:

- Attached with this Policy Certificate are the Policy terms and conditions, Optional Covers (if opted) and Annexures. Please ensure that these documents have been received, read and understood. If any of these documents have not been received, please feel free to write to us at <https://www.careinsurance.com/contact-us.html>
- For waiting periods and exclusions under this Policy, please refer to Clause 4 of the Policy terms and conditions.
- This Policy Certificate in original must be surrendered to the Company in case of cancellation of the Policy.

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Premium Acknowledgement

Policy No.	40536386
Client ID	35815047
Policyholder	Miss Diksha Raheja
Address	D/o, Vishambhar Raheja, Main Road, Arya Nagar Ward No.05, Udham Singh Nagar kashipur kashipur 244713 Uttarakhand 05
Policy Period	22-Apr-2023 to 21-Apr-2024

Premium Details

Particulars	Amount (in Rs.)	S.no.	Receipt Number	Amount	Mode of Payment
Gross Premium		1	A2088586	13,092.00	IPG
Care Classic	10,577.19				
Annual Health CheckUp CClassic	517.57				
Goods & Services Tax (GST)	1,997.08				
Total	13,092.00				

The Premium is rounded off to the nearest rupee.

Eligibility of Premium for Deduction u/s 80D of the Income Tax Act, 1961

The premium paid through any mode other than cash for this policy is eligible for Income tax benefits to the person making the payment subject to the provisions of section 80D of the Income Tax Act, 1961 and amendments thereof. Effective from Assessment year 2019-20, in cases where health insurance premium for multiple years is paid in one year, it will be eligible for proportionate deduction in the years in which the health insurance continues to be effective.

For Care Health Insurance Limited



Authorized Signatory

Date of Issue : 21 Apr 2023

Place of Issue : Gurgaon, Haryana

Note:

- 1) In case of any discrepancy, the Policyholder is requested to contact the Company immediately.
- 2) Any amount paid in cash towards the premium would not qualify for tax benefits as mentioned above.
- 3) This document must be surrendered to the Company in case of Cancellation of the Policy or for the issuance of a fresh certificate in the case of any alteration in the Policy.
- 4) This Policy is issued subject to realization of the premium amount. In case the instrument given towards the premium amount is dishonored, then the cover provided under this Policy shall automatically get cancelled. In the given scenario, if any amount has been paid by the Company in respect of a claim or due to any other reason than the amount so advanced by the Company shall be refunded to the Company forthwith.
- 5) We may credit upto Rs. 1/- to your account for validation, before remitting any further payment.

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No physical Health Cards will be dispatched. The electronic version of the card below will be accepted across all network providers.

care HEALTH INSURANCE		HEALTH CARD	
Policy No.			
40536386			
Member ID	DOB	Name	
35815047	27-oct-1993	Diksha Raheja	
<div><div> For Android</div><div> For iOS</div></div> <div> WhatsApp 8860402452</div> <div> SELF HELP <small>A PORTAL FOR ASSASSINATING YOUR POLICY ONLINE</small></div>			
Submit Your Queries/Requests: www.careinsurance.com/contact-us.html			
Disclaimer 1. This card is not transferable. 2. Use of this card is governed by the policy terms & conditions. 3. To avail cashless facility, this card needs to be produced along with photo ID proof. 4. Valid upto policy period end date or cancellation date, whichever is earlier.			
IRDAI Registration No. 148			