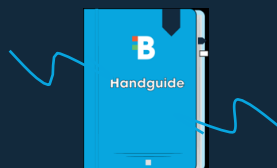


**HEALTH INSURANCE – COVERAGE NOTE FOR CRIB**

Following are the policy features of the Health Insurance coverage:

PARTICULARS	POLICY FEATURES
Sum Insured	₹ 1,00,000
Age Band	03-30 years
Coverage	Self Only
Insurance Partner	Care Health
Cashless Network Hospitals	9400+ Hospitals PAN India
Daycare Treatments	Covered
Room Rent Restriction	Normal room: ₹ 2,000 per day ICU / ICCU room: ₹ 4,000 per day
Pre and Post Hospitalization	30/60 days (Expenses towards medicines, lab tests and consultations)
Initial Waiting Period	Waived
Pre-Existing Diseases Waiting Period	Waived
Specific Diseases Waiting Period	Waived
Ambulance Charges	Rs. 2000 per hospitalisation

**What is not covered?**

- 1. OPD Expenses** - Doctor consultations, medicines, lab tests where hospitalization is not required.
- 2. External equipment** - Cost of spectacles, contact lenses, hearing aids, prosthesis.
- 3. Miscellaneous charges** - Admin, registration, and service charges
- 4. Infertility Treatments** - Infertility treatments such as IVF and surrogacy
- 5. Dental treatment** - Dental surgeries of any kind unless requiring accidental hospitalization.
- 6. Foreign treatments** – Treatments taken outside India.
- 7. Certain injectables** - Avastin, ramicade and similar injectables
- 8. Cosmetic/Plastic surgery** - Plastic surgery unless necessary for treatment of a disease or as may be necessitated for treatment of accident.
- 9. Miscellaneous Exclusions** - Abortion, sleep disorder, external congenital diseases, AIDS, vaccination, drug abuse
- 10. Non-Medical Consumables** - Food, toiletries, television, laundry charges, gowns, masks, crepe bandages etc.

**HEALTH INSURANCE – CASHLESS CLAIM PROCESS**

Cashless Facility can be availed from our network hospitals. For list of network hospitals, click [here](#).

**Step 1: Claim Intimation** - Inform on Claims Helpline No. (+91 - 90213 23456) for guidance.

Bharatsure team will support you with policy e-card copy in case you do not have it handy.

Sr. No.	Designation	Escalation Matrix
Level 1	Claims Helpline	Helpline No. +91 - 90213 23456 or email at <a href="mailto:care@bharatsure.com">care@bharatsure.com</a>
Level 2	Claims Manager	Email to <a href="mailto:sakshi@bharatsure.com">sakshi@bharatsure.com</a>
Level 3	Program	Email to <a href="mailto:jessica@bharatsure.com">jessica@bharatsure.com</a>

**Step 2: Claim Submission (Cashless Pre- Authorization Request)**

The hospital insurance desk will verify the docs and seek pre-authorization directly from insurance co. (Note: The hospital insurance desk will fill the pre-authorization form on behalf of the patient).

Documents Required for Cashless Treatment
<ul style="list-style-type: none"><li>• Policy E-Card</li><li>• Valid ID proof</li><li>• Medical practitioner's referral letter advising hospitalization</li></ul>

Make sure the hospital insurance desk shares the completed form with Care Health

**Step 3: Claim Settlement (Cashless Pre- Authorization Approval)**

- a) Care Health's in-house medical team will review the case and will generate a 'Claim Ref. No.' with pre-approved limit within 2-4 hours of valid submission

(Note: The approved limit would be a reasonable value to initiate the treatment. Any additional cost of treatment will be separately approved at time of discharge)

- b) In case pre-authorization is not received, you may claim through reimbursement mode after discharge from the hospital.
- c) Pre and post hospitalization bills for cashless treatments can be claimed through reimbursement mode after discharge from the hospital.

**HEALTH INSURANCE – REIMBURSEMENT CLAIM PROCESS**

Reimbursement of claims can be availed for all hospitals in India (except blacklisted by Care Health).

**Step 1: Claim Intimation** - Inform on Claims Helpline No. (+91 - 90213 23456) for guidance.

Share basic details of hospitalization with the claims manager within 48 hours post-discharge. Bharatsure will file a claim intimation with the insurance company.

**Step 2: Claim Submission** - Collate and send scanned copies of documents to [care@bharatsure.com](mailto:care@bharatsure.com) or Whatsapp us the documents at **+91 - 81043 80020**

- For IPD and pre-hospitalization claims - Within 15 days of discharge
- For post hospitalization claims - Within 75 days of discharge

**Documents Required for Reimbursement**

- Valid ID proof
- Medical practitioner's referral letter advising hospitalization.
- Medical practitioner's prescription advising drugs, diagnostic tests or consultation.
- Original test reports
- Original bills from hospital (final bill with break-up)
- Original discharge card / summary
- Original bills from pharmacy and lab centers
- Indoor case papers
- Cancelled Cheque with Bank details
- For accident cases, FIR copy (if applicable)
- Any other document as required by the company to assess the claim

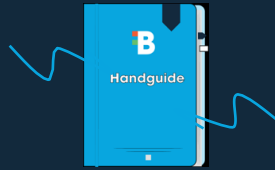
Bharatsure Team will review all docs and share a pre-filled reimbursement form with you. Print and sign the reimbursement form, enclose all supporting physical copies in original and send them with Claim Reference Number to following address:

*Care Health Insurance Limited (formerly Religare Health Insurance), Unit No. 604 - 607, 6th Floor, Tower C, Unitech Cyber Park, Sector-39, Gurugram-122001, Haryana.*

**Step 3: Claim Settlement**

- a) Care Health's team will review physical copies of all documents submitted
- b) Claims will be settled within 30 days from the date of valid submission
- c) In case of any delay in payment, Care Health pays interest at bank rate + 2%.

## ACCIDENT INSURANCE – COVERAGE NOTE FOR CRIB



Following are the policy features of the Health Insurance coverage:

PARTICULARS	POLICY FEATURES
Sum Insured	₹ 3,00,000
Age Band	03-30 years
Coverage	Self only
Insurance Partner	Care Health Insurance
Accidental Death	100% of Sum Insured
Permanent Total Disablement	100% of Sum Insured
Permanent Partial Disablement	Up to 100% of Sum Insured based on extent of disability
Accidental Expenses (OPD)	Fracture Cover – Up to ₹ 15,000 or actuals, whichever is lower Burns Cover – Up to ₹ 15,000 or actuals, whichever is lower
Terrorism	Covered
Geographical Limit	Worldwide
Coverage	24 x 7 Cover

**What is not covered?**

1. **Suicide** - Intentional self-injury, suicide or attempted suicide.
2. **Drug Abuse** - Use or consumption of narcotic or intoxicating drugs or alcohol
3. **Unlawful Activities** - Participation in any illegal or unlawful or criminal act
4. **Adventure Sports** - participation in any adventure sports activities.
5. **Act of War** - Accident caused by war, invasion, act of foreign enemy or by nuclear/biological/chemical.
6. **Medical Hospitalization** - arising out of any illness (other than an accident)

**ACCIDENT INSURANCE – CLAIMS PROCESS AND DOCUMENTATION**

Inform about the occurrence of an accident within 14 days on the helpline number: [+91 9021323456](tel:+919021323456)

Our claims representative will guide you through the entire process:

1. Collate and send scanned copies of the required documents to Bharatsure.
2. Our team will review all documents and share a pre-filled reimbursement form with you.
3. Send documents in original to the insurer within 30 days from date of occurrence of accident.
4. The claim will be approved or rejected within 30 days of all relevant document submission.
5. Once approved, claims shall be paid within 7 days to the insured or legal heir.

**Documents for Accidental Hospitalization**

- Discharge Summary
- Final Bill & Receipt
- Investigation Bill & Prescription
- Pharmacy Bill & Prescription
- Investigation Reports
- Doctor Consultations
- Claim Intimation Form
- Claim Form
- ICP (if needed)
- Medico Legal Cases Report
- FIR copy for Road Accidents

**Documents for Accidental Disability**

Employment Certificate from employer  
 Fitness Certificate from the treating doctor  
 Rest Certificate from the treating doctor  
 Salary slip/ statement - last 3 months  
 Govt. ID Proof - Aadhar/ PAN Card  
 Medico Legal Cases Report  
 Claim Intimation Form  
 Cancelled Cheque (main policy holder with the name mentioned on cheque. If not, then bank statement)

**Treatment Records – Original documents mandatory**

- Doctor prescription
- Medical bills
- Reports
- Discharge summary
- Paid receipts

**Documents for Accidental Death**

- Signed Claim Form (Blank)
- Statement of at least 2 witnesses for the accident
- Certificate copy of Attendance record
- Medico Legal Cases Report
- Certificate copy of FIR
- Certificate copy of Postmortem Report
- Certificate copy of Inquest Report
- Death Certificate
- Claim Intimation Form
- Claim Form
- News Paper clipping (if any)
- Certificate copy of Viscera Report of Forensic Dept