

Date : 25 Apr 2024

Mr Upendra Pisupati
Flat No 815 Smr Vinay Hi Lands
Nizampet-miyapur Road
Medchal-malkajigiri
Medchal-malkajigiri 500049
Telangana
State Code : 36

Policy No: I0257093

Mobile No: XXXXXX1450



Dear Mr Upendra Pisupati,

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 - <http://bit.ly/3EyPRnT>
- Policy Terms and Conditions- <https://rb.gy/x2mup> 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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Self Help Portal:
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Policy Certificate

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Medchal-malkajgiri 500049
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State Code : 36

Policy No.	10257093
Plan Name	CARE
Add-on Policy Name	Care Shield
Cover Type	Floater
Policy Period - Start Date	00:00 hrs 28-Apr-2024
Policy Period - End Date	Midnight 27-Apr-2025
Nominee Name (Relation)	SRIRAMYA PISUPATI (WIFE)
Premium Paid	Rs.24,912.00 (Premium Rs 21111.58+Underwriting Loading Rs 0.00+CGST Rs0.00+IGST Rs3,800.10+SGST Rs0.00+UGST Rs0.00)
Premium Payment Mode	Single Premium

Policyholder	Gender	Date Of Birth	Client ID
Mr Upendra Pisupati	Male	23-Apr-1983	51843577

Details of Insured Person

Name	Client ID	Date of Birth	Relationship	Insured with the Company (since)	Pre-existing diseases since
Upendra Pisupati	51843577	23-Apr-1983	MEMBER	16-Apr-2015	NONE
Sai Krishna Aswhin Pisupati	51843581	29-Sep-2011	SON	16-Apr-2015	NONE

Details of Cover

Policy Insured Name	Policy Sum Insured	Accumulated No Claim Bonus Amount	Accumulated No Claim Bonus Super Amount	Accumulated Inflation Shield Amount
Upendra Pisupati	20,00,000.00	7,00,000.00	15,00,000.00	1,85,250.00
Sai Krishna Aswhin Pisupati				

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
POLICYBAZAAR INSURANCE BROKERS PVT LTD	20374491	1800-2585970


Schedule of Benefits

S No.	Particulars	Basis of Offering
1	In-Patient Care/Day Care Treatment	Up to SI


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Schedule of Benefits

2	Pre & Post Hospitalization Medical Expenses	30 days Pre-Hospitalization & 60 days Post-Hospitalization
3	Ambulance Cover	Up to SI
4	Organ Donor Cover	Up to Rs 2 Lac
5	Domiciliary Hospitalization	Up to 10% of SI if domiciliary hospitalization exceeds 3 days
6	Automatic Recharge	Coverage available Once in a Policy year for related and unrelated Illness .Max amount per claim up to SI
7	Second Opinion	Once per Major Illness / Injury per policy year
8	AYUSH Treatments	Up to SI
9	No Claims Bonus	10% of Sum Insured for each Claim free year, maximum up to 50% of SI; reduced by 10% of Sum Insured in case of claim
10	Annual Health Check-up	Annual
11	Initial Wait Period	30 Days
12	Named ailments	24 months
13	Pre-existing Diseases	48 months
14	Room Rent / Room Category	Single Private Room (upgradable to next level, on approval)
15	ICU Charges	No Sub Limit

Optional Cover

S NO.	Particulars	Details
1	No Claims Bonus Super (NCBS)	50% of Sum Insured for each Claim free year, maximum upto 100% of Sum Insured; Reduced by 50% of Sum Insured in case of Claim
1	Unlimited Auto Recharge	Unlimited times for related and unrelated Illness, Max amount payable per claim up to SI
1	OPD Care	Rs. 5000

Note: The cumulative liability of the Company for all the above benefits shall be limited to Base Sum Insured /sub-limits unless specified as over and above under General Conditions applicable to all Benefits of Policy Terms & conditions or any amount accrued by Insured during the Policy Year

Previous Insurer Details of the Insured

Policy Period	Insured Name	Insurer Name	Previous Policy Number	1st Enrollment Date	Sum insured + NCB + NCBS + Inflation SI
28-Apr-2023 to 27-Apr-2024	UPENDRA PISUPATI	Care Health Insurance Ltd	10257093	16-Apr-2015	15,00,000.00 + 5,50,000.00 + 15,00,000.00 + 1,00,500.00
28-Apr-2023 to 27-Apr-2024	SAI KRISHNA ASWHIN PISUPATI	Care Health Insurance Ltd	10257093	16-Apr-2015	
28-Apr-2022 to 27-Apr-2023	UPENDRA PISUPATI	Care Health Insurance Ltd	10257093	16-Apr-2015	15,00,000.00 + 4,00,000.00 + 10,00,000.00 + 0.00
28-Apr-2021 to 27-Apr-2022	UPENDRA PISUPATI	Care Health Insurance Ltd	10257093	16-Apr-2015	10,00,000.00 + 3,00,000.00 + 10,00,000.00 + 0.00
28-Apr-2021 to 27-Apr-2022	SAI KRISHNA ASWHIN PISUPATI	Care Health Insurance Ltd	10257093	16-Apr-2015	
28-Apr-2020 to 27-Apr-2021	UPENDRA PISUPATI	Care Health Insurance Ltd	10257093	16-Apr-2015	10,00,000.00 + 2,00,000.00 + 10,00,000.00 + 0.00
28-Apr-2020 to 27-Apr-2021	SAI KRISHNA ASWHIN PISUPATI	Care Health Insurance Ltd	10257093	16-Apr-2015	

Special Conditions

S No.	Particulars
1	Co-payment (Applicable 61 years or above)

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Schedule of Benefits

S No.	Particulars	Description
1	Claim Shield	Applicable
2	NCB Shield	Applicable
3	Inflation Shield	Applicable

For Care Health Insurance Limited



Authorized Signatory

Date of Issue : 25 Apr 2024

Place of Issue : Gurgaon, Haryana

Service Branch : Vipul Tech Square TowerC3rd Floor Sector43Golf Course Road Gurgaon
Haryana 122009Gurgaon,Haryana,122009

Branch Contact No. : 0124-6141810

Consolidated Stamp Duty paid vide E-Challan GRN no. 0107464159 dated 21 Sep 2023, RCM Applicability- N/A
SAC: 997133 and Description of Service: Accident and Health Insurance Services State
GSTIN No.: 06AADCR6281N1ZWS_GSTIN_No
UIN :CHIHLP24065V072324


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.	10257093
Client ID	51843577
Policyholder	Mr Upendra Pisupati
Address	Flat No 815 Smr Vinay Hi Lands Nizampet-miyapur Road Medchal-malkajgiri Medchal-malkajgiri 500049 Telangana
Policy Period	28-Apr-2024 to 27-Apr-2025

Premium Details

Particulars	Amount (in Rs.)	S.No.	Receipt Number	Amount	Mode of Payment
Gross Premium		1	A9705054	24,912.00	IPG
Care	16,022.50				
NCB-Super	1,602.24				
Unlimited Automatic Recharge	1,321.84				
OPD Care	1,283.78				
Care Shield	881.22				
Goods & Services Tax (GST)	3,800.10				
Total	24,912.00				

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 : 25 Apr 2024

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.

**HEALTH CARD**

Policy No.
10257093

Member ID	DOB	NAME
51843577	23-Apr-1983	Upendra Pisupati
51843581	29-Sep-2011	Sai Krishna Aswhin Pisupati

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FOR POLICYHOLDERS ONLY

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 &
3. To avail cashless facility, this card needs to be produced along with photo
4. Valid upto policy period end date or cancellation date, whichever is earlier

IRDAI Registration No.148

Good Health Declaration

I/ We hereby state and confirm that I/ We continue to enjoy good health since the expiry of our policy till today. I/ We further state and confirm that neither has any member covered under the policy undergone any consultation, investigation and treatment for any illness or injury nor any claims has been logged during this period. I/ We also understand that the policy coverage would not be extended over the break in period. I/We understand that no claim will be reported/is payable for break in period till the new policy gets issued. Further to this, there has been no other change to the information previously provided in the proposal form submitted during initial purchase of this policy

Proposal No: 1129974069759S_APPLICATION_PROPOSAL_NO

Declaration as provided to the insurer at the time of proposing for insurance cover

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