

Customer Information Sheet
(Description is illustrative and not exhaustive)

Sl No	TITLE	DESCRIPTION	Refer to policy clause number
1.	Product Name	Arogya Sanjeevani Policy - Acko General Insurance	
2.	What am I covered for	<p>a) Hospitalization expenses Expenses incurred on hospitalization for minimum period of 24 hours including pre-hospitalization expenses for a period of 30 days and post hospitalization expenses for a period of 60 days.</p> <p>b) Day Care Procedures Medical expenses for day care procedures.</p> <p>c) AYUSH Coverage Expenses incurred on hospitalization under AYUSH Treatment.</p> <p>d) Expenses incurred on treatment of cataract.</p> <p>e) Expenses incurred on dental treatment and Plastic Surgery: Necessitated due to disease or injury.</p> <p>f) Ambulance Charges: Expenses on road Ambulance subject to a maximum of Rs.2000/- per hospitalization.</p>	<p>4.1</p> <p>4.1.1</p> <p>4.2</p> <p>4.3</p> <p>4.1.1</p>
3.	What are the Major exclusions in the policy	<p>Following is a partial list of the policy exclusions. Please refer to the policy document for the complete list of exclusions:</p> <p>a) Admission primarily for investigation & evaluation</p> <p>b) Admission primarily for rest Cure, rehabilitation and respite care</p> <p>c) Expenses related to the surgical treatment of obesity that do not fulfil certain conditions</p> <p>d) Change-of-Gender treatments</p> <p>e) Expenses for cosmetic or plastic surgery</p> <p>f) Expenses related to any treatment necessitated due to participation in hazardous or adventure sports</p>	<p>7.1</p> <p>7.2</p> <p>7.3</p> <p>7.4</p> <p>7.5</p> <p>7.6</p>
4.	Waiting period	<p>a) Pre-Existing Diseases will be covered after a waiting period of forty-eight (48) months of continuous coverage</p> <p>b) Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident.</p> <p>c) Specified surgeries/treatments/diseases are covered after specific waiting period of 24 months</p> <p>d) Specified surgeries/treatments/diseases are covered after specific waiting period of 48 months</p>	<p>6.1</p> <p>6.2</p> <p>6.3</p>
5.	Payment basis	Payment on indemnity basis (Cashless/ Reimbursement)	

6.	Loss sharing	<p>In case of a claim, this policy requires you to share the following costs:</p> <p>a) Expenses exceeding the following Sub-limits:</p> <p>i. Room Charges (Hospitalization):</p> <p>a. Room Rent - Up to 2% of SI, subject to max of INR 5,000 per day</p> <p>b. ICU charges - Up to 5% of SI subject to max of INR 10,000 per day.</p> <p>c. In case Room/ICU/ICCU rent exceeds the limits specified the claim shall be subject to the proportionate deduction.</p> <p>ii. Cataract - Up to 25% of Sum Insured or Rs.40,000/- whichever is lower.</p> <p>iii. Modern treatment methods and Advancements in technology: Up to 50% of the Sum insured.</p>	<p>4.1</p> <p>4.3</p> <p>4.6</p>									
		b) Each and every claim under the Policy shall be subject to a Co-payment of 5% applicable to claim amount admissible and payable as per the terms and conditions of the Policy	9.3									
7.	Renewal Conditions	The policy shall ordinarily be renewable except on grounds of fraud, moral hazard, misrepresentation by the insured person. Renewal shall not be denied on the ground that the insured had made a claim or claims in the preceding policy years.	10.16									
8.	Renewal Benefits	<p>Cumulative bonus:</p> <p>a) Increase in the sum insured by 5% in respect of each claim free year subject to a maximum of 50% of SI.</p> <p>b) In the event of claim the cumulative bonus shall be reduced at the same rate.</p>	5									
9.	Cancellation	<p>a) The Insured may cancel this Policy by giving 15 days' written notice, and in such an event, the Company shall refund premium on short term rates for the unexpired Policy Period as per the rates detailed in the policy terms and conditions.</p> <p>b) The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud by the Insured Person by giving 15 days' written notice.</p>	10.10									
10.	Claims	<p>a) For Cashless Service:</p> <p>The list of Network Hospitals can be found out on our website www.acko.com</p>	9									
		<p>b) For Reimbursement of Claim</p> <p>For reimbursement of claims the insured person may submit the necessary documents to TPA/Company within the prescribed time limit as specified hereunder.</p> <table border="1" data-bbox="363 1697 1390 2002"> <thead> <tr> <th data-bbox="363 1697 480 1778">SI No</th> <th data-bbox="480 1697 903 1778">Type of Claim</th> <th data-bbox="903 1697 1390 1778">Prescribed Time limit</th> </tr> </thead> <tbody> <tr> <td data-bbox="363 1778 480 1921">1</td> <td data-bbox="480 1778 903 1921">Reimbursement of hospitalization, day care and prehospitalization expenses</td> <td data-bbox="903 1778 1390 1921">Within thirty days of date of discharge from hospital</td> </tr> <tr> <td data-bbox="363 1921 480 2002">2</td> <td data-bbox="480 1921 903 2002">Reimbursement of post hospitalization expenses</td> <td data-bbox="903 1921 1390 2002">Within fifteen days from completion of post hospitalization treatment</td> </tr> </tbody> </table>	SI No	Type of Claim	Prescribed Time limit	1	Reimbursement of hospitalization, day care and prehospitalization expenses	Within thirty days of date of discharge from hospital	2	Reimbursement of post hospitalization expenses	Within fifteen days from completion of post hospitalization treatment	
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1	Reimbursement of hospitalization, day care and prehospitalization expenses	Within thirty days of date of discharge from hospital										
2	Reimbursement of post hospitalization expenses	Within fifteen days from completion of post hospitalization treatment										

		For details on claim procedure please refer the policy document.	
11.	Policy Servicing	<ul style="list-style-type: none"> ● Address: Acko General Insurance Limited, #36/5, Hustlehub One East, 27th Main Rd, Sector 2, HSR Layout, Bengaluru, Karnataka - 560102 ● Our website: www.acko.com ● Email: hello@acko.com ● Toll Free: 1860 266 2256 	
	Grievances/ Complaints	<p>a) You may write to Our Grievance Redressal Officer at the following address:</p> <p>Grievance Redressal Officer 3rd Floor, F-wing Lotus Corporate Park, Goregaon East, Mumbai 400063 Email: grievance@acko.com</p> <p>b) IRDAI Integrated Grievance Management System - https://igms.irda.gov.in/</p> <p>c) Insurance Ombudsman - The contact details of the Insurance Ombudsman offices have been provided as Annexure-B of Policy document.</p>	11
12.	Insured's Rights	a) Free Look period of 15 days from the date of receipt of the policy shall be applicable at the inception.	10.19
		b) Lifelong renewability (except on certain specific grounds)	10.16
		c) Right to migrate from one product to another product of the company (Note: Insurer to provide e-mail and address of the Person to be contacted)	10.14
		d) Right to port the from one company to another company (Note: Insurer to provide e-mail and address of the Person to be contacted)	10.15
		e) Change in SI during the policy term or at the time of renewal (Insurer to provide the contact details)	10.21
		<p>f) Turn around time (TAT)</p> <ul style="list-style-type: none"> ▪ Pre-Authorisation - first response within 2 hours of receiving request. ▪ Settlement of reimbursement claims - 30 days from the date of receipt of last necessary document. 	
13.	Insured's Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.	
Legal Disclaimer Note: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail.			

ANNEXURE: BENEFIT ILLUSTRATION

Illustration 1:

Age of the Members Insured	Coverage opted on individual basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum Insured is available for each member of the family)				Coverage opted on floater basis with overall Sum Insured (Only one sum insured is available for the entire family)			
	Premium (₹)	Sum Insured (₹)	Premium (₹)	Discount (if any)	Premium after discount (₹)	Sum Insured (₹)	Premium or consolidated premium for all members of the family (₹)	Floater discount (if any)	Premium after discount (₹)	Sum Insured (₹)
16 – 20	3,431	3,00,000	3,431	0	3,431	3,00,000				
21 - 25	3,431	3,00,000	3,431	0	3,431	3,00,000				
31 - 35	3,897	3,00,000	3,897	0	3,897	3,00,000				
36 – 40	3,897	3,00,000	3,897	0	3,897	3,00,000	39,528	12,116	27,412	3,00,000
51 – 55	6,694	3,00,000	6,694	0	6,694	3,00,000				
56 – 60	8,219	3,00,000	8,219	0	8,219	3,00,000				
61 – 65	9,957	3,00,000	9,957	0	9,957	3,00,000				
Total Premium for all members of the family is ₹ 39,528 when each member is covered separately.			Total Premium for all members of the family is ₹ 39,528 when they are covered under a single policy.				Total Premium when policy is opted on a floater basis is ₹ 27,412.			
Sum Insured available for each member separately is ₹ 3,00,000			Sum Insured available for each family member is ₹ 3,00,000				Sum Insured ₹ 3,00,000 is available for the entire family			

Coverage assumptions:

1. The family of the proposer comprises spouse, one daughter and one son.
2. Parents and mother-in-law are covered additionally
3. Age band of family members:

Relationship	Age Band
Self	36 – 40
Spouse	31 – 35
Father	56 – 60
Mother	51 - 55
Mother-in-Law	61 – 65
Son	16 – 20
Daughter	21 – 25

4. Coverage is standard

Illustration 2:

Age of the Members Insured	Coverage opted on individual basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum Insured is available for each member of the family)				Coverage opted on floater basis with overall Sum Insured (Only one sum insured is available for the entire family)			
	Premium (₹)	Sum Insured (₹)	Premium (₹)	Discount (if any)	Premium after discount (₹)	Sum Insured (₹)	Premium or consolidated premium for all members of the family (₹)	Floater discount (if any)	Premium after discount (₹)	Sum Insured (₹)
16 – 20	3,431	3,00,000	3,431	0	3,431	3,00,000				
21 – 25	3,431	3,00,000	3,431	0	3,431	3,00,000				
41 - 45	4,491	3,00,000	4,491	0	4,491	3,00,000	17,454	5,972	11,482	3,00,000
46 – 50	6,101	3,00,000	6,101	0	6,101	3,00,000				
Total Premium for all members of the family is ₹ 17,454 when each member is covered separately.			Total Premium for all members of the family is ₹ 17,454 when they are covered under a single policy.				Total Premium when policy is opted on a floater basis is ₹ 11,482.			
Sum Insured available for each member separately is ₹ 3,00,000			Sum Insured available for each family member is ₹ 3,00,000				Sum Insured ₹ 3,00,000 is available for the entire family			

Coverage assumptions:

1. The family of the proposer comprises spouse, one daughter and one son.
2. Parents are covered additionally
3. Age band of family members:

Relationship	Age Band
Self	46 – 50
Spouse	41 – 45
Son	16 – 20
Daughter	21 – 25

4. Coverage is standard.