

Customer Information Sheet/ Know Your Policy

This document provides key information about your policy. You are advised to go through your policy document.

Sl. No	Title	Description	Policy Clause Number
1	Name of Insurance Product/ Policy	Empower Health Plan, Niva Bupa Health Insurance Co. Ltd	
2	Policy Number		
3	Type of Insurance Product/ Policy	Both Indemnity and Benefit	
4	Sum Insured	Sum Insured Options are: 4 Lacs and 5 Lacs The Sum Insured opted by you is mentioned in the Policy Schedule.	
5	Policy Coverage	<p>Expenses in respect of:</p> <p>Base Coverage:</p> <ul style="list-style-type: none"> • Inpatient Care – Coverage for medical expenses incurred for Hospitalization • AYUSH Treatment – Coverage for medical expenses incurred for inpatient care treatment under Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems of medicines • Pre-Hospitalization Medical Expenses – Coverage for a fixed period of 30 days prior to the date of admissible Hospitalization covered under the Policy • Post-Hospitalization Medical Expenses – Coverage for a fixed period of 60 days from the date of discharge from the Hospital, following an admissible hospitalization covered under the Policy. • Emergency Ground Ambulance – Coverage for expenses incurred towards ambulance charges for transportation of an Insured person. • Cataract Treatment – Coverage for medical expenses incurred for treatment of Cataract • Modern Treatment – Coverage for a list of modern treatment as inpatient or daycare treatment 	<p>4.1</p> <p>4.2</p> <p>4.3</p> <p>4.4</p> <p>4.5</p> <p>4.6</p> <p>4.7</p>
6	Exclusions	<p>Standard Exclusions</p> <ul style="list-style-type: none"> • Investigation & Evaluation (Code-Excl04) • Rest Cure, rehabilitation and respite care (Code-Excl05) • Obesity/ Weight Control (Code-Excl06) 	8

- Change-of-Gender treatments (Code- Exc107)
- Cosmetic or plastic Surgery (Code-Excl08)
- Hazardous or Adventure sports (Code-Excl09)
- Breach of law (Code-Excl10)
- Excluded Providers (Code-Excl11)
- Treatment for, alcoholism, drug or substance abuse or any addictive condition and consequences thereof. (Code-Excl12)
- Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons. (Code-Excl13)
- Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure. (Code-Excl14)
- Refractive Error (Code-Excl15)
- Unproven Treatments (Code-Excl16)
- Sterility and Infertility (Code-Excl17)
- Maternity Expenses (Code-Excl18)

Specific Exclusions

- Any medical treatment taken outside India.
- Hospitalization for donation of any body organs by an Insured including complications arising from the donation of organs.
- Nuclear damage caused by, contributed to, by or arising from ionising radiation or contamination by radioactivity from:
 - any nuclear fuel or from any nuclear waste, or
 - from the combustion of nuclear fuel (including any self-sustaining process of nuclear fission).
 - nuclear weapons material
 - nuclear equipment or any part of that equipment.
- War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war. Commotion, unrest rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition of or damage by or under the order of any government or public local authority.
- Injury or Disease caused by or contributed to by nuclear weapons/materials.
- Circumcision unless necessary for treatment of a disease, illness or injury not excluded hereunder, or as may be necessitated due to an accident.

		<ul style="list-style-type: none"> • Treatment with alternative medicines or Treatment, experimental or any other treatment such as acupuncture, acupressure, magnetic, osteopath, naturopathy, chiropractic, reflexology and aromatherapy. • Suicide, Intentional self-injury (including but not limited to the use or misuse of any intoxicating drugs or alcohol) and any violation of law or participation in an event/activity that is against law with a criminal intent. • Vaccination or inoculation except as post bite treatment for animal bite. • Convalescence, general debility. "Run-down" condition, rest cure, Congenital external illness/disease/defect. • Outpatient diagnostic, medical and surgical procedures or treatments, non-prescribed drugs and medical supplies, hormone replacement therapy and expenses related to Domiciliary hospitalization shall not be covered. • Dental treatment or Surgery of any kind unless requiring Hospitalisation as a result of accidental Bodily Injury. • Venereal/ Sexually Transmitted disease • Stem cell storage. • Any kind of service charge, surcharge levied by the hospital. • Personal comfort and convenience items or services such as television, telephone, barber or guest service and similar incidental services and supplies. • Non-Payable items: The expenses that are not covered in this Policy are placed under List-1 of Annexure-II. • Any medical procedure or treatment, which is not medically necessary or not performed by a Medical Practitioner. 	
7	Waiting period	<ul style="list-style-type: none"> • Initial Waiting Period (Excl03)- 30 days for all illnesses (not applicable in case of continuous renewal or accidents) • Specific Waiting Period (Not applicable for claims arising due to an accident) (Excl02): 24 months for all of the following conditions <ul style="list-style-type: none"> ○ Benign ENT disorders ○ Tonsillectomy ○ Adenoidectomy ○ Mastoidectomy ○ Tympanoplasty ○ Hysterectomy 	5.A.2 5.A.3

		<ul style="list-style-type: none"> ○ All internal and external benign tumors, cysts, polyps of any kind, including benign breast lumps ○ Benign prostate hypertrophy ○ Cataract and age-related eye ailments ○ Gastric / Duodenal Ulcer ○ Gout and Rheumatism ○ Hernia of all types ○ Hydrocele ○ Non-Infective Arthritis ○ Piles, Fissures and Fistula in anus ○ Pilonidal sinus, Sinusitis and related disorders ○ Prolapse inter Vertebral Disc and Spinal Diseases unless arising from accident. ○ Calculi in urinary system, Gall Bladder and Bile duct, excluding malignancy. ○ Varicose Veins and Varicose Ulcers <ul style="list-style-type: none"> ● Pre-existing diseases (Excl01): 24 months for pre-existing disability/ 48 months for all pre-existing conditions other than HIV/AIDS and Disability 	5.A.1
8	<p>Financial Limits of Coverage</p> <p>i. Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit)</p> <p>ii. Co-Payment (It is a specified amount/ percentage of the admissible claim amount to be paid by policyholder/ insured)</p>	<p>i. Sublimit</p> <ul style="list-style-type: none"> ● Inpatient Care <ul style="list-style-type: none"> A. Room Rent, Boarding. Nursing Expenses as provided by the Hospital / Nursing Home up to maximum of 1% of the Sum Insured per day. 4.1 B. Intensive Care Unit (ICU)/ Intensive Cardiac Care Unit (ICCU) expenses up to maximum of 2% of Sum Insured per day. 4.2 ● AYUSH Treatment – Up to 50% of sum insured. 4.3 ● Emergency Ground Ambulance – Up to a maximum of Rs. 2000/- per hospitalization 4.6 ● Cataract Treatment – Up to a limit of Rs. 40,000/-, per each eye in one policy year. 4.7 ● Modern Treatment – Up to 50% of Sum Insured 10.5 <p>ii. Co-payment- Each and every claim under the Policy shall be subject to a Co-payment of 20% applicable to claim amount admissible and payable as per the terms and conditions of the Policy. The amount payable shall be after deduction of the co-payment.</p>	

		<p>opp. Metro Station, Sector 59, Noida, Uttar Pradesh, 201301</p> <p>Self-service platform, Insta Assist</p> <p>https://rules.nivabupa.com/customer-service/</p>	
11	Grievances/Complaints	<p>Details of</p> <ul style="list-style-type: none"> Grievance Redressal Officer of the insurer Grievance Redressal Officer Niva Bupa Health Insurance Company Limited D-5, 2nd Floor, Logix Infotech Park opp. Metro Station, Sector 59, Noida, Uttar Pradesh, 201301 For details of grievance officer, kindly refer the link https://www.nivabupa.com/customer-care/health-services/grievance-redressal.aspx Insurance company grievance portal/ Department Website: www.nivabupa.com Customer Services Department Niva Bupa Health Insurance Company Limited D-5, 2nd Floor, Logix Infotech Park opp. Metro Station, Sector 59, Noida, Uttar Pradesh, 201301 Contact No: 1860-500-8888 Fax No.: 011-41743397 Self-service platform, Insta Assist https://rules.nivabupa.com/customer-service/ Senior citizens may write to us at at: seniorcitizensupport@nivabupa.com Insured person may also approach the grievance cell at any of the company's branches with the details of grievance IRDAI/(IGMS/Call Centre): Email ID: www.igms.irdai.gov.in Ombudsman (Refer Annexure II of policy document for List of Insurance Ombudsmen) 	9.1.1.15
12	Things to Remember	<ul style="list-style-type: none"> Free Look cancellation: You may cancel the insurance policy if you do not want it, within 15 days (30 days for policies with a 	9.1.1.14

		<p>term of 3 years, if sold through distance marketing) days from the beginning of the policy.</p> <p>You have 15 days from receipt of the policy document to re visit your policy terms & conditions and if you have any disagreement to it, you may apply for Free look cancellation through submission of Free look Cancellation form.</p> <p>Please note that free look cancellation is applicable only when no claims have been paid under any benefits. Also, there could be few deductions that may be applicable as per policy document.</p> <p>If the insured has not made any claim during the Free Look Period, the insured shall be entitled to:</p> <p>i. refund of the premium paid, less any expenses incurred by the Company on medical examination of the insured person.</p> <ul style="list-style-type: none"> • Policy renewal: Except on grounds of fraud, moral hazard or misrepresentation or non-cooperation, renewal of your policy shall not be denied, provided the policy is not withdrawn. • Migration and Portability: When your policy is due for renewal, you may migrate to another policy with us or port your policy to another insurer. You can contact Customer Service Department (details provided above) for migration and portability. • Change in Sum Insured: Sum Insured can be changed (increased/decreased) only at the time of renewal or at any time, subject to underwriting by the company. For increase in SI, the waiting period if any shall start afresh only for the enhanced portion of the sum insured. • Moratorium Period: After completion of eight continuous years under the policy no look back to be applied. This period of eight years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of eight continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period no health insurance policy shall be contestable except for proven Fraud and permanent exclusions specified in the policy contract. 	<p>9.1.1.10</p> <p>9.1.1.8 & 9.1.1.9</p> <p>9.2.1.b</p> <p>9.1.1.12</p>
13	Your Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement.	9.1.1.1

		<p>Disclosure of Information- The Policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact by the policyholder.</p> <p>(Explanation: "Material facts" for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk)</p>	
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Benefit Illustration

Benefit Illustration (5 Lac Sum Insured, Policy Term 1 year)										
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 family floater basis with overall Sum Insured (Only one Sum Insured is available for the entire family)			
	Premium (Rs.)	Sum Insured (Rs.)	Premium (Rs.)	Discount, if any	Premium after discount (Rs.)	Sum Insured (Rs.)	Premium or Consolidated premium for all members of family (Rs.)	Floater discount, if any	Premium after discount (Rs.)	Sum Insured (Rs.)
Illustration 1										
18	15,191	5,00,000	NA	NA	NA	NA	NA	NA	NA	NA
21	15,191	5,00,000	NA	NA	NA	NA	NA			
39	18,548	5,00,000	NA	NA	NA	NA	NA			
45	21,004	5,00,000	NA	NA	NA	NA	NA			
Total premium for all members of the family is <u>Rs. 69,934.</u> when each member is covered separately. Sum Insured available for each individual is <u>Rs.500,000.</u>			Total premium for all members of the family is <u>Rs. NA.</u> when they are covered under a single policy. Sum Insured available for each family member is <u>Rs. NA.</u>				Total premium when the policy is opted on floater basis is <u>Rs. NA.</u> Sum Insured of <u>Rs. NA</u> is available for the entire family.			

			Illustration 2							
55	34,005	5,00,000	NA	NA	NA	NA	NA	NA	NA	NA
63	61,883	5,00,000	NA	NA	NA	NA	NA	NA	NA	NA
<p>Total premium for all members of the family is <u>Rs. 95,888</u>, when each member is covered separately.</p> <p>Sum Insured available for each individual is <u>Rs.500,000</u>.</p>			<p>Total premium for all members of the family is <u>Rs. NA</u>, when they are covered under a single policy.</p> <p>Sum Insured available for each family member is <u>Rs. NA</u>.</p>				<p>Total premium when the policy is opted on floater basis is <u>Rs. NA</u>.</p> <p>Sum Insured of <u>Rs. NA</u> is available for the entire family.</p>			
			Illustration 3							
65	61,883	5,00,000	NA	NA	NA	NA	NA	NA	NA	NA
70	83,294	5,00,000	NA	NA	NA	NA	NA	NA	NA	NA
<p>Total premium for all members of the family is <u>Rs. 1,45,177</u>, when each member is covered separately.</p> <p>Sum Insured available for each individual is <u>Rs.500,000</u>.</p>			<p>Total premium for all members of the family is <u>Rs. NA</u>, when they are covered under a single policy.</p> <p>Sum Insured available for each family member is <u>Rs. NA</u>.</p>				<p>Total premium when the policy is opted on floater basis is <u>Rs. NA</u>.</p> <p>Sum Insured of <u>Rs. NA</u> is available for the entire family.</p>			

Note: Premium rates specified in the above illustration are standard premium rates without considering any loading. Also, the premium rates are exclusive of taxes applicable.