Bajaj Allianz General Insurance Co. Ltd.
Bajaj Allianz House, Airport Road, Yerawada, Pune - 411 006. Reg. No.: 113
For more details, log on to: www.bajajallianz.com | E-mail: bagichelp@bajajallianz.co.in or Call at: Sales - 1800 209 0144 / Service - 1800 209 5858 (Toll Free No.) Issuing Office:



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Hospital Cash Daily Allowance

CUSTOMER INFORMATION SHEET

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

SI	This document provides key information about your policy. You are also advised to go through your policy document Title Description Policy			
No	ritte	Description	Clause Number	
1	Name of Insurance Product	Hospital Cash Daily Allowance		
2	Policy Number	Kindly refer to Your Policy schedule		
3	Type of Insurance	Kindly refer to Your Policy schedule		
4	Sum Insured (Basis)	Kindly refer to Your Policy schedule		
5	Policy Coverage (What the Policy Covers)	 In the event of Accidental Bodily Injury or Illness first occurring or manifesting itself during the Policy Period and causing the Insured's or the Named Insured's Hospitalisation within the Policy Period, the Company will pay: Daily Allowance for each continuous and completed period of 24 hours of Hospitalisation necessitated solely by reason of the said Accidental Bodily Injury or Illness, 	Section C	
		2. Two times the Daily Allowance for each continuous and completed period of 24 hours required to be spent by the Insured or Named Insured in the Intensive Care Unit of a Hospital during any period of Hospitalisation necessitated solely by reason of the said Accidental Bodily Injury or Illness for a maximum period of 7 days for each hospitalisation.		
6	Cumulative Bonus	Not Applicable		
7	Exclusions (What the policy does not cover)	 EXCLUSIONS General Exclusions Any hospital admission primarily for investigation diagnostic purpose (Excl04) Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. (Excl05) Obesity/Weight Control (Excl06) Change-of-gender treatments (Excl07) Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) etc. (Excl08) Expenses for treatment arising from Insured committing or attempting to commit a breach of law with criminal intent. (Excl10) Excluded Providers (Excl11) Treatment for Alcoholism, drug or substance abuse. (Excl12) Treatments received in heath hydros, nature cure clinics, etc. where admission is arranged wholly or partly for domestic reasons. (Excl 13) Dietary supplements and substances unless prescribed as part of hospitalization claim or day care procedure. (Excl14) Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres. (Excl15) Expenses related to any unproven treatment, services and supplies. (Excl16) 	Standard Exclusions Section D & Specific Exclusion D II	

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		Medical Treatment Expenses tra (Excl 18)	aceable to pregnancy and its complications.	
		Specific Exclusions 1. Cosmetic dental procedures 2. Medical expenses where Inprequired 3. War, invasion, acts of foreign 4. The cost of external durable Limbs, cost of prosthetic dev Pacemaker, orthopedic implated in the process of the process o	medical equipment except Cost of Artificial ices implanted during surgical procedure like ants, etc. of any kind used at home as post or defects or anomalies, growth hormone on or surgery except for Hematopoietic stem lant for hematological conditions. Annexure II in policy wordings	
8	Waiting Period Time period during which	Initial Waiting period: 30 days for Specific Waiting period: 24 more		Standard Exclusions Section
	specified disease/treatme	Treatment of cataracts	2. Hemorrhoids	D
	nt are not covered	Benign prostatic hypertrophy	4. Fissure in ano	
	It is counted from beginning	5. Hysterectomy	Stones in the urinary and biliary systems	
	of the policy	7. Menorrhagia	8. Surgery on ears	
	coverage	9. Fibromyoma	10.Tonsils or Sinuses	
		11.D&C	12.Skin and all internal tumours/cysts/nodules/polyps of any kind including breast lumps	
		13.Endometriosis	14.Gastric or Duodenal ulcer	
		15.Hernia of all types	16.Backache	
		17.Hydrocele	18.Prolapsed Intervertebral disc	
		19.Fistulae	20.	
		Pre-existing diseases waiting p	period: 36 months	
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9 Financial Limits of Coverage Sublimit (it is a pre-defined limit and the insurance company will not pay any amount in excess of this limit) Co-payment (it is a specified amount /percentage of the admissible claim amount to be paid by policy holder/insured) .Deductible (it is a specified amount: Upto which an insurance company will not pay any claim and Which will be		
deducted from total claim amount (if claim amount is more than the specified amount)		
.Any other limit (as applicable)		
10 Claims/claims procedure	Pour Your representative must intimate Us in writing immediately with 48 hours of Hospitalization in case of emergency and 48 hours prior to hospitalization in case of planned hospitalization You or someone claiming on Your behalf must promptly and in any event within 30 days of discharge from a Hospital give Us the documentation In the event of the death of the insured person, someone claiming on his behalf must inform Us in writing immediately and send Us a copy of the post mortem report (if any) within 30 days* In event of a claim, the original documents to be submitted. Turnaround time(TAT) for claim settlement: 1. Turnaround time (TAT) for claim settlement: 1. Turnaround time (TAT) for claim settlement: 1. Turnaround time (TAT) for claim settlement: 1. Tarnaround time (TAT) for claim settlement: 1. Turnaround time (TAT) for claim settlement: 1. Turnar	Section E 29

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		Downloading /getting claim forms Downloading /getting claim forms	
		Health Insurance Claim Process Accident Insurance Claim (bajajallianz.com)	
11	Policy Servicing	Call centre number(Toll free): 1800-209-5858	
		Details of Company officials: Branch-wise GRO details can be found on the below link.	
		https://www.bajajallianz.com/download-documents/other-information/GRO- List.pdf	
12	Grievances /Complaints	Grievance Redressal Procedure: a) Toll-free number 1-800-209- 5858 or 020-30305858, Say "Hi" on WhatsApp on +91 7507245858 b) Branches for resolution of your grievances /complaints, the Branch details can be found on our website: www.bajajallianz.com/branch-locator.html Register your grievances / complaints on our website www.bajajallianz.com/about-us/customer-service.html c) E-mail	Section E 17
		 Level 1: bagichelp@bajajallianz.co.in and for senior citizens to seniorcitizen@bajajallianz.co.in Level 2: In case you are not satisfied with the response given to you at Level 1 you may write to our Grievance Redressal Officer at ggro@bajajallianz.co.in Level 3: If in case, your grievance is still not resolved, and you wish to talk to our care specialist, please give a missed call on +91 8080945060 OR SMS To 575758 and our care specialist will call you back d) If you are still not satisfied with the decision of the Insurance Company, you may approach the Insurance Ombudsman, established by the Central Government for redressal of grievance. Detailed process along with list of Ombudsman offices are available at www.cioins.co.in/ombudsman 	
13	Things to remember	Free Look Cancellation: Insured has an option of cancelling his/her policy up to 30 days from the first inception of policy with Us , subject to rest terms and conditions. Policy Renewal: Except on grounds of fraud, moral hazard or mis representation or non-co-operation, renewal of your policy shall not be denied Migration and Portability: At renewal Insured has an option to migrate his /her policy to other policy with us or port the policy to another insurer subject to terms and conditions specified under Migration and Portability guidelines For detailed guidelines on Migration and Portability, kindly refer the link https://irdai.gov.in/document-detail?documentId=393128 beneficiary will have the option to port the policy to other insurers by applying to such insurer to port the entire policy along with all the members of the family, if any ,at least 45days before, but not earlier than60days from the policy renewal date as per IRDAI guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance policy with an Indian General/Health insurer, the proposed Insured beneficiary will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on portability Change in Sum Insured: sum insured can be changed (increased/decreased) only at the time of renewal subject to underwriting by the company. For increase in Sum insured, the waiting periods if any shall start afresh only for the enhance portion of the sum insured	Section E7 Section E11 Section E12 Section E14

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		Moratorium period: 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 The moratorium would be applicable for the sum insured of the first policy and subsequently completion of 60 continuous months would be applicable from date of enhancement of sums insured only on the enhanced limits	
14	Your Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement	

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.

Declaration by policy holder

I have read the above and confirm having noted the details

Place

Date: Signature of Policy holder

Note:

Web link for downloading the product related documents https://www.bajajallianz.com/health-insurance-plans/health-insurance-documents.html