

Customer Information Sheet
Description is illustrative and not exhaustive

S. No	Title	Description	Refer to Policy Clause No.
1	Product Name	Health of Privileged Elders	
2	What am I covered for:	<ul style="list-style-type: none"> • Coverage for 60 yrs and above only • Hospital admission longer than 24 hours • 1% Room Rent AND 2% I.C.U. • Related medical expenses incurred 30 days prior to hospitalization and 60 days from date of discharge. • Covers specified diseases only. • Ayurvedic, Unani and Homeopathic treatment in Govt. Hospitals/ Colleges 	1.1A, 1.2, 2.1,3,3.3.8,3.9
3	What are the major exclusions in the policy:	<ul style="list-style-type: none"> • Any hospital admission primarily for investigation / diagnostic purpose • External congenital/genetic conditions, • Domicilliary treatment, treatment outside India. • Circumcision, sex change surgery ,cosmetic surgery & plastic surgery, • Refractive error correction, hearing impairment correction & cosmetic dental surgeries • Organ donor expenses • Substance abuse, self-inflicted injuries, STDs and HIV / AIDS, • sports, war or war like operations or breach o f law etc. • Any kind of admission fees, registration fees levied by the hospital <p>(Note: the above is a partial listing o f</p>	4

(Legal Disclaimer) Note: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the KFD and the policy document the terms and conditions mentioned in the policy document shall prevail.

		the policy exclusions. Please refer to the policy clauses for the full listing).	
4	Waiting period	<ul style="list-style-type: none"> • Initial waiting period: 30 days for all illnesses (not applicable on renewal or for accidents) • Specific waiting periods: <ol style="list-style-type: none"> 1. 24 months for named diseases (clauses aa to bb) • Pre-existing diseases: Covered after 24 months 	4.2, 4.3, 4.4
5	Payout basis	<ul style="list-style-type: none"> • Cashless services of covered expenses upto Rs. 1 lakh only • Reimbursement of covered expenses 	5.8
6	Cost sharing	<ul style="list-style-type: none"> o 20% of each claim as Co-payment o Option of Voluntary co-payment 	3.22, 3.23
7	Renewal Conditions	<ul style="list-style-type: none"> • Your policy is ordinarily renewable • Other terms and conditions of renewal 	8
8	Renewal Benefits	<p>5% discount on renewal premium for every claim free year, subject to a maximum of 20%</p> <p>For every block of 4 claim free policy years, free health check up for the insured persons subject to maximum 1% of average sum insured.</p>	3.24
9	Cancellation	<ul style="list-style-type: none"> • This policy would be cancelled, and no claim or refund would be due to you if: <ol style="list-style-type: none"> 1. you have not correctly disclosed details about your current and past health status OR have otherwise encouraged or participated in any fraudulent claims under the policy. 	5.12

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