

Customer Information Sheet - Reliance HealthWise Policy

Title	Description	Refer to Policy Clause Number
Product Name	Reliance HealthWise Policy	
What I am Covered For	1. Hospitalisation - Covers Hospitalisation expenses for period more than 24 hours. Applicable to Standard Plan, Silver Plan & Gold Plan.	Benefit 1
	2. Domiciliary Hospitalisation - Limited to 10% of Sum Insured, for medical expenses incurred for availing Medical treatment at home which would have otherwise required hospitalisation. Applicable to Standard Plan, Silver Plan & Gold Plan.	Benefit 2
	3. Day Care Treatment - As listed in Annexure 1. Applicable to Standard Plan, Silver Plan & Gold Plan.	Benefit 3
	4. Pre-Hospitalisation Medical Expenses - Standard Plan - Medical Expenses incurred 30 days before Hospitalisation. Silver Plan - Medical Expenses incurred 60 days before Hospitalisation. Gold Plan - Medical Expenses incurred 60 days before Hospitalisation.	Benefit 4
	5. Post-Hospitalisation Medical Expenses - Standard Plan - Medical Expenses incurred 60 days after Hospitalisation. Silver Plan - Medical Expenses incurred 90 days after Hospitalisation. Gold Plan - Medical Expenses incurred 90 days after Hospitalisation.	Benefit 5
	6. Critical Illness - This policy provides an additional amount equivalent to the Sum Insured opted under Hospitalisation, towards treatment of listed critical illness. Only applicable in Gold Plan.	Benefit 7
	7. Donor Expenses - Covers medical expenses towards hospitalisation of donor in case of major organ transplant subject to the overall limit of the Sum Insured. Only applicable in Silver & Gold Plan.	Benefit 8
	8. Cost of Health Check up - Reimbursement of cost of medical check-up upto 1% of average Sum Insured for individual policies and upto 1.25% for Floater covers, once at the end of a block of four consecutive years provided there are no claims reported under the policies by any member, during the block. Applicable to Standard Plan, Silver Plan & Gold Plan.	Benefit 9
	9. Daily Hospitalisation Allowance - Rs. 250 per day upto 7 days will be paid to cover daily expenses starting from day 4 to day 10. In case of listed critical illness the said cash allowance will be paid upto 14 days. Only applicable in Gold Plan.	Value Added Covers 1
	10. Nursing Allowance- Standard Plan - Not Applicable Silver Plan - Rs.250 per day for a maximum period of 5 days Gold Plan - Rs.300 per day for a maximum period of 5 days. In case of listed Critical Illness, the said reimbursement will be extended to maximum of 10 days	Value Added Covers 2
	11. Local Road Ambulance Service - Standard Plan - Upto Rs. 500/- Silver Plan - Upto Rs. 750/- Gold Plan - Upto Rs. 1000/-	Value Added Covers 3
	12. Recovery Benefit - Standard Plan - Not Applicable Silver & Gold Plan - If in case an insured person is hospitalised for more than 10 days, a lump-sum of Rs. 10,000/- will be paid.	Value Added Covers 4
	13. Expenses on Accompanying Person - Subject to the Insured person being hospitalised for a period of 5 days at a given time, an allowance towards expenses of accompanying person at the hospital is payable at - Standard Plan - Rs. 200/- per day for a maximum period of 5 days. Silver Plan - Rs. 250/- per day for a maximum period of 5 days. Gold Plan - Rs. 300/- per day for a maximum period of 5 days.	Value Added Covers 5
1. Dental treatment or surgery unless necessitated due to an injury and requiring hospitalisation.		
2. Birth control procedures, hormone replacement therapy, treatment arising from or traceable to pregnancy, childbirth; excluding ectopic pregnancy.		
3. Cost of spectacles, laser surgery for correction of refractive error, contact lenses or hearing aids, vaccinations.		

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What are the major exclusions in the policy	4. Any illness/injury directly or indirectly resulting or arising from or occurring during commission of any breach of any law by the Insured Person with any criminal intent.	Policy Exclusions
	5. All diseases/illness/injury caused by and/or related to HIV/AIDS/AIDS related complex syndrome.	
	6. Treatment of obesity, general debility, convalescence, run down condition or rest cure, Congenital external disease/illness or defects or anomalies, sterility, venereal disease, intentional self-injury & use of intoxicating drugs/alcohol.	
	7. Act of self-destruction or self-inflicted injury or any form of organ donation by Insured Person, attempted suicide or suicide while sane or insane or illness/injury attributable to consumption, use, misuse or abuse of tobacco, intoxicating drugs and alcohol	
	8. Treatment of Mental disease/illness, stress, psychiatric or psychological disorders.	
	9. Aesthetic treatment, cosmetic surgery & plastic surgery	
	10. Ionising radiation or contamination by radioactivity	
	11. Experimental & Unproven treatment	
	12. Any Non-medical charges as mentioned in "List of Medical Expenses Excluded" as appended	
	13. Naturopathy Treatment/Non-allopathic treatment/ local medication	
14. Charges incurred primarily for diagnostic, X-ray or laboratory examinations not consistent with diagnosis & treatment of disease for which confinement is required at a Hospital		
Waiting Period	Initial waiting period - 30 days for all illness (except accident) in the first year	Policy Exclusions 3.1.2
	12 months for specific illness and treatment in the first year	Policy Exclusions 3.1.3
	Pre Existing Disease - Standard Plan - 48 months waiting period Silver & Gold Plan - 24 month waiting period	Policy Exclusions 3.1.1
Payment basis	For Benefit 1,2,3,4,5,7,8,9, Value Added Covers 3	Indemnity Basis
	Value Added Covers 1,2,4,5	Benefit Basis
Loss Sharing	Not Applicable	
Renewal Conditions	Policy is ordinarily life-long renewable, subject to timely receipt of renewal application and premium, which would be charges as per the prevailing rates and age at the time of renewal. Grace period of 30 days for renewing the policy is provided. Any Claim incurred during the break-in period will not be payable.	Clause No. 22 - Terms & Conditions
Renewal Benefits	Renewal Discount equivalent to 5%, on cumulative basis, of renewal premium for each continuous claim free year will offered as No Claim Bonus subject to maximum upto 20%, where the Policy which is claim free & is renewed without a break. In case of claim all discount shall be forfeited at renewal.	Clause No. 22 - Terms & Conditions
Cancellation	This policy would be cancelled on grounds of misrepresentation, misdescription, fraud, non-disclosure of material facts or non cooperation by Insured persons upon giving 15 days notice without refund of premium	Clause no. 2 & Clause no. 12 - Terms & Conditions
Claims	Cashless facility can only be availed at a Network Hospital by presenting the health card as provided by the Company along with valid photo identification proof. <ul style="list-style-type: none"> Planned hospitalisation – Intimation of such admission to be done at least 48 hours prior to the planned date of admission Emergency Hospitalisation- Intimation of such admission to be done within 24 hours of such admission In case of reimbursement is availed list of documents as mentioned in Clause 4.4 to be provided immediately but not later than 15 days of discharge from the Hospital.	Claims Procedure

Reliance HealthWise Policy (UIN: RELHLIP18124V021718)

Title	Description	Refer to Policy Clause Number
Product Name	Reliance HealthWise Policy	
Policy Servicing/Grievances/Complaints	<p>If the Policyholder has a grievance that the Policyholder wishes the Company to redress, the Policyholder may contact the Company with the details of his grievance through:</p> <p>Website : https://reliancegeneral.co.in e-mail : rgicl.services@relianceada.com Telephone : 1800-3009 Post/Courier : Any branch office, the correspondence address, during normal business hours Write to us at : Reliance General Insurance, (For Correspondence Only) Correspondence Unit, 301-302, Corporate House RNT Marg, Opp. Jhabua Tower, Indore, Madhya Pradesh, India – 452001</p> <p>For further details on Grievance redressal procedure please refer: https://reliancegeneral.co.in/Insurance/About-Us/Grievance-Redressal.aspx</p> <p>If the Policyholder is not satisfied with the Company's redressal of the Policyholder's grievance through one of the above methods, the Policyholder may approach the nearest Insurance Ombudsman for resolution of the grievance. The contact details of Ombudsman offices are mentioned below:</p>	Under Point No. 5 – Terms and Conditions – 28 - Grievance
	Address of the Ombudsman Offices	
	<p>AHMEDABAD Office of the Insurance Ombudsman, 2nd floor, Ambica House, Near C.U. Shah College, 5, Navyug Colony, Ashram Road, Ahmedabad – 380 014. Tel.: 079 - 27546150 / 27546139 Fax: 079 - 27546142 Email: bimalokpal.ahmedabad@gbic.co.in</p>	
	<p>BENGALURU Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@gbic.co.in</p>	
	<p>BHOPAL Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@gbic.co.in</p>	
	<p>BHUBANESHWAR Office of the Insurance Ombudsman, 62, Forest park, Bhubneswar – 751 009. Tel.: 0674 - 2596461 / 2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@gbic.co.in</p>	
	<p>CHANDIGARH Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@gbic.co.in</p>	
	<p>CHENNAI Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@gbic.co.in</p>	
	<p>DELHI Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23239633 / 23237532 Fax: 011 - 23230858 Email: bimalokpal.delhi@gbic.co.in</p>	
	<p>GUWAHATI Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2132204 / 2132205 Fax: 0361 - 2732937 Email: bimalokpal.guwahati@gbic.co.in</p>	

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Policy Servicing/Grievances/Complaints	Address of the Ombudsman Offices	Under Point No. 5 – Terms and Conditions – 27 - Grievance
	HYDERABAD Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 65504123 / 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@gbic.co.in	
	JAIPUR Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: Bimalokpal.jaipur@gbic.co.in	
	ERNAKULAM Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@gbic.co.in	
	KOLKATA Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@gbic.co.in	
	LUCKNOW Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@gbic.co.in	
	MUMBAI Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@gbic.co.in	
	NOIDA Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514250 / 2514252 / 2514253 Email: bimalokpal.noida@gbic.co.in	
	PATNA Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna-800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@gbic.co.in	
PUNE Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@gbic.co.in		
The details of Insurance Ombudsman are available on IRDA website: www.irda.gov.in , on the website of General Insurance Council: www.gbic.co.in , the Company's website www.reliancegeneral.co.in or from any of the Company's offices. Address and contact number of Governing Body of Insurance Council – (Monitoring Body for Offices of Insurance Ombudsman) 3 rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz(West), Mumbai – 400054, Tel: 022 - 26106889 /671 Email id: inscoun@gbic.co.in		
Insured's Rights	Free Look Period: You have a period of 15 days from the date of receipt of the policy document to review the terms and conditions of this Policy. If You have any objections to any of the terms and conditions, You have the option of cancelling the Policy stating the reasons for cancellation provided no claim has been incurred under this policy	Clause No. 21 - Terms & Conditions

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	Ordinarily renewals will not be refused by the Company except on ground of fraud, moral hazard or misrepresentation.	Clause No. 22 - Terms & Conditions
	Portability is the right accorded to an Individual health insurance policyholder (including family cover) to transfer the credit gained for pre-existing conditions and time-bound exclusions, from one insurer to another or from one plan to another plan of the same insurer.	Under Point No. 3 – Policy Exclusions – 3.2 - Portability
	In the event of any Illness or Injury or occurrence of any other contingency which has resulted in a Claim or may result in a Claim covered under the Policy, the Policyholder/ Insured Person, must notify the Company either at the call center or in writing immediately. In the event of <ul style="list-style-type: none"> Planned Hospitalization, the Policyholder /Insured Person will intimate such admission at least 48 hours prior to the planned date of admission. Emergency Hospitalization, the Policyholder /Insured Person will intimate such admission within 24 hours of such admission 	Under Point No. 4 – Claims Procedure – 4.1 – Claims intimation
Insured's Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in the claims not being paid	
	Disclosure of Material Information during the policy period such as change in occupation	
<p>The details of Insurance Ombudsman are available on IRDA website: www.irda.gov.in, on the website of General Insurance Council: www.gbic.co.in, the Company's website www.reliancegeneral.co.in or from any of the Company's offices. Address and contact number of Governing Body of Insurance Council – (Monitoring Body for Offices of Insurance Ombudsman) 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz(West), Mumbai – 400054, Tel: 022 - 26106889 / 671 Email id: inscoun@gbic.co.in</p>		