

Customer Information Sheet

Description is illustrative and not exhaustive

S. No	Title	Description	Refer to Policy Clause No.
1	Product Name	Happy Family Floater Policy – 2015	
2	What am I covered for:	<ul style="list-style-type: none"> • 3 Plans-Silver, Gold & Diamond-Sum Insured (SI) Rs.2 to Rs.20lacs • Hospital admission of minimum 24 hours • Related medical expenses incurred 30 days prior to hospitalization & 60 days from date of discharge. • Specified / Listed procedures requiring less than 24 hours hospitalization (day care) • Cover for 11 critical illnesses on benefit basis. • Daily Hospital Cash Allowance benefit of 0.1% of SI per day, max 10 days per illness limited to 1.5% of SI in a policy period-Gold and Diamond Plan • Attendant Allowance- Rs.500 & Rs.1000 per day of hospitalisation, in Gold Plan & Diamond Plan respectively, max 10 days per illness, limited to 15 days in a policy period- in respect of insured persons above the age of 90 days to 10 years. • Ambulance Charges-Rs 1000 to Rs.3000 per illness, limited to Rs.3000-Rs.8000 per policy period. • Donor Expenses when Insured is the Recipient • Organ Donor Benefit when Insured is the Donor • Medical Second Opinion on reimbursement basis • Maternity Expenses cover upto 2.5% of SI, in Diamond Plan • New born Baby cover upto 2.5% of SI, in Diamond Plan • Restoration of SI under 2 options-50% & 100%. • Ayurvedic, Siddha, Unani and Homeopathic treatment. • Optional Covers-Restoration of SI, Personal Accident, Life Hardship Survival benefit • Extension of policy covering SAARC countries 	<p>6.2</p> <p>3.17</p> <p>1.2</p> <p>1.2 & Appendix I 2.3</p> <p>1.2 & 1.3</p> <p>1.2 & 1.4</p> <p>1.2</p> <p>1.2 & 1.8</p> <p>1.2 & 1.7</p> <p>1.2 & 1.6</p> <p>1.2 & 1.5</p> <p>1.2 & 1.5</p> <p>2.1</p> <p>1.2</p> <p>2.1,2.2,2.3</p> <p>2B</p> <p>2A</p>

(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.

3	What are the major exclusions in the policy:	<ul style="list-style-type: none"> Any hospital admission primarily for investigation / diagnostic purpose Pregnancy(covered in Diamond Plan), infertility, external congenital/genetic conditions, Circumcision, sex change surgery ,cosmetic surgery & plastic surgery, Refractive error correction, hearing aids Substance abuse, self-inflicted injuries, STDs and HIV / AIDS, War or war like operations or breach of law, etc Any kind of admission fees, registration fees levied by the hospital <p>(Note: the above is a partial listing of the policy exclusions. Please refer to the policy clauses for the full listing).</p>	4.10 4.12 4.5 4.6 4.8,4.9 4.4 4.26
4	Waiting period	<ul style="list-style-type: none"> Pre-existing diseases: Covered after 48 months Initial waiting period: 30 days for all illnesses (not applicable on renewal or for accidents) Specific waiting periods: <ol style="list-style-type: none"> 12 months for named diseases(clauses 4.3 (i & ii)) 24 months for disease at (clauses 4.3 (iii to xxii)) 48 months for diseases (clauses 4.3 (xxiii & xxiv)) 	4.1 4.2 4.3
5	Payout basis	<ul style="list-style-type: none"> Cashless services for covered expenses in Network hospitals Reimbursement of covered expenses Reimbursement for treatment taken in SAARC countries Fixed amount for specified diseases (Life Hardship Survival Benefit) 	1.1 & 5.6 1.1 2A 2.3
6	Cost sharing	<ul style="list-style-type: none"> 10% of each claim as Co-payment only in Silver plan 20% compulsory co-payment in cases where Entry Age is above 65years 	1.2 & 4.29 6.3
7	Renewal Conditions	<ul style="list-style-type: none"> Policy is ordinarily renewable Other terms and conditions of renewal 	9 9
8	Renewal Benefits	<ul style="list-style-type: none"> None. 	NA

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9	Cancellation	<ul style="list-style-type: none"> • Cancellation on the request of Insured or by the Company after giving 30 days' notice. 	5.15
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