

**Annexure-2**
**Customer Information Sheet (Description is illustrative and not exhaustive)**

No	TITLE	DESCRIPTION	Refer to policy clause number
1.	<b>Product Name</b>	<b>Corona Kavach Policy, ICICI Lombard General Insurance Company Limited</b>	
2.	<b>What am I covered for</b>	a. Hospitalization expenses- Medical expenses incurred on hospitalization for Covid for minimum period of 24 hours including pre-hospitalization expenses for a period of 15 days and post hospitalization expenses for a period of 30 days.	4.1,4.4,4.5
		b. Ambulance Charges: Expenses on road Ambulance subject to a maximum of Rs.2000/- per hospitalization.	4.1
		c. Home Care treatment expenses-Costs of treatment incurred by the insured person on availing treatment at home maximum up to 14 days per admission as per policy terms and conditions including pre-hospitalization expenses for a period of 15 days and post hospitalization expenses for a period of 30 days.	4.2
		d. AYUSH Coverage- Medical expenses incurred on hospitalization for Covid under AYUSH Treatment	4.3
		e. Hospital Daily Cash	5.1
3.	<b>What are the Major exclusions in the policy</b>	Following is a partial list of the policy exclusions. Please refer to the policy document for the complete list of exclusions:	
		a. Admission primarily for investigation & evaluation	7.1
		b. Admission primarily for rest Cure, rehabilitation and respite care	7.2
		c. Any claim in relation to Covid where it has been diagnosed prior to Policy Start Date.	7.5
		d. Day Care treatment and OPD treatment	7.6
4.	<b>Waiting period</b>	Expenses related to the treatment of Covid within 15 days from the policy commencement date shall be excluded	6.1
5.	<b>Payment basis</b>	The Base Cover is on indemnity basis and Optional Cover is on Benefit Basis.	
6.	<b>Cancellation</b>	The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts fraud by the Insured Person by giving 7 days' written notice.	9.9
8.	<b>Claims</b>	a. For Cashless Service: <a href="https://www.bharti-axagi.co.in/cashless-hospital-network">https://www.bharti-axagi.co.in/cashless-hospital-network</a>	8.1,8.2
		b. For Reimbursement of Claim: For reimbursement of claims the insured person may submit the necessary documents to	

		TPA/Company within the prescribed time limit as specified hereunder.													
		<table border="1"> <thead> <tr> <th>Sl No</th> <th>Type of Claim</th> <th>Prescribed Time limit</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Reimbursement of hospitalization and pre hospitalization expenses</td> <td>Within thirty days of date of discharge from hospital</td> </tr> <tr> <td>2</td> <td>Reimbursement of post hospitalization expenses</td> <td>Within fifteen days from completion of post hospitalization treatment</td> </tr> <tr> <td>3</td> <td>Reimbursement of Home Care expenses</td> <td>Within thirty days from completion of home care treatment</td> </tr> </tbody> </table>	Sl No	Type of Claim	Prescribed Time limit	1	Reimbursement of hospitalization and pre hospitalization expenses	Within thirty days of date of discharge from hospital	2	Reimbursement of post hospitalization expenses	Within fifteen days from completion of post hospitalization treatment	3	Reimbursement of Home Care expenses	Within thirty days from completion of home care treatment	
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		For details on claim procedure please refer the policy document.													
9	<b>Policy Servicing</b>	<p>The Company is committed to extend the best possible services to its customers. However, If Policyholder/Insured Person have a grievance that he/she wish us to redress, he/she may contact the Company with the details of their grievance via:</p> <ul style="list-style-type: none"> <li>• Website: <a href="http://www.bharti-axagi.co.in">www.bharti-axagi.co.in</a></li> <li>• Email: <a href="mailto:customersupportba@icicilombard.com">customersupportba@icicilombard.com</a></li> <li>• Phone: 18001032292</li> <li>• Courier: ICICI Lombard Healthcare, ICICI Bank Tower, Plot No. 12, Financial District, Nanakram Guda, Gachibowli, Hyderabad-500032</li> </ul> <p>Policyholder/Insured/ Insured Person may also approach the grievance cell at any of the Company's branches with the details of the grievance during working hours from Monday to Friday.</p> <p><b>Escalation Level 1</b></p> <p>In case the Policyholder/Insured/Insured Person has not got his/her grievances redressed through one of the above methods (After 5 days of intimating of your complaint), Policyholder/ Insured/ Insured Person may contact the National Grievance Redressal Officer at :  Write to: ICICI Lombard General Insurance Company Ltd., ICICI Lombard House, 414, Veer Savarkar Marg, Prabhadevi, Mumbai – 400025,  Telephone: 18001032292  Email: <a href="https://www.bharti-axagi.co.in/grievance-redressal/procedure">https://www.bharti-axagi.co.in/grievance-redressal/procedure</a></p>													

	<p><b>Escalation Level 2</b> In case the Policyholder/ Insured/Insured Person has not got his/her grievances redressed through any of the above methods (After 5 days of approaching National Grievance Redressal Officer), Policyholder/ Insured/ Insured Person may contact the Chief Grievance Redressal Officer at: Email: <a href="https://www.bharti-axagi.co.in/grievance-redressal/procedure">https://www.bharti-axagi.co.in/grievance-redressal/procedure</a></p> <p><b>Escalation Level 3</b> In case the Policyholder/ Insured/Insured Person has not got his/her grievances redressed by the Company within 14 days, or, If Policyholder/ Insured/Insured Person is not satisfied with Company’s redressal of the grievance through one of the above methods, Policyholder/ Insured/ Insured Person may approach the nearest Insurance Ombudsman for resolution of their grievance. The contact details of Ombudsman offices are mentioned in the policy wording. These details can also be found at <a href="http://www.cioins.co.in/ombudsman.html">http://www.cioins.co.in/ombudsman.html</a>. Policy holder may also obtain copy of IRDAI circular Ref No. F. No. IRDAI/Reg/8/145/2017, notification on Insurance Regulatory and Development Authority (Protection of Policy holders’ interests) Regulations, 2017 from any of our offices.</p> <p><b>Grievance of Senior Citizens:</b> In respect of Senior Citizens, the Company has established a separate channel to address the grievances. Any concerns may be directly addressed to the Senior Citizen’s channel of the Company for faster attention or speedy disposal of grievance, if any.</p> <ul style="list-style-type: none"> <li>• Website: <a href="http://www.bharti-axagi.co.in">www.bharti-axagi.co.in</a></li> <li>• Email: <a href="mailto:customersupportba@icicilombard.com">customersupportba@icicilombard.com</a></li> <li>• Phone: 18001032292</li> <li>• Courier: Any of the Company’s Branch office or corporate office</li> </ul> <p>Insured/ Insured Person may also approach the grievance cell at any of the Company’s branches with the details of the grievance during working hours from Monday to Friday.</p>	
<b>Grievances/ Complaints</b>	a. Details of Grievance redressal officer <a href="https://www.bharti-axagi.co.in/grievance-redressal/procedure">https://www.bharti-axagi.co.in/grievance-redressal/procedure</a>	10

		<p>b. IRDAI Integrated Grievance Management System - <a href="https://igms.irda.gov.in/">https://igms.irda.gov.in/</a></p> <p>c. Insurance Ombudsman – The contact details of the Insurance Ombudsman offices have been provided as Annexure-B of Policy document.</p>	
10	<b>Insured's Rights</b>	<p><b>Pre Authorization:</b> 4 Hours of turn-around time from when first request was received from hospital to our response back to the hospital.</p> <p><b>Reimbursement:</b> Last document received to final status, i.e. repudiation or settlement, to be done within 30 days.</p>	
11	<b>Insured's Obligations</b>	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.	
<p><b>Legal Disclaimer Note:</b> 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.</p>			

**Benefit Illustration in respect of policies offered on Individual and family floater basis (Corona Kavach Policy, ICICI Lombard GIC)**

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.)
18	803	5,00,000	803	0	803	5,00,000	6750	69.437%	2063	5,00,000
21	803	5,00,000	803	0	803	5,00,000				
39	1179	5,00,000	1179	0	1179	5,00,000				
41	1179	5,00,000	1179	0	1179	5,00,000				
59	1393	5,00,000	1393	0	1393	5,00,000				
65	1393	5,00,000	1393	0	1393	5,00,000				
	Total Premium for all members of the family is Rs. 6750 when each member is covered separately  Sum Insured available for each insured is Rs. 5,00,000		Total Premium for all members of the family is Rs. 6750 when they are covered under a single policy  Sum Insured available for each family member is Rs. 5,00,000				Total Premium when policy is opted on floater basis is Rs. 2063.  Sum Insured of Rs. 5,00,000 is available for the entire family.			

Note: The Policy Tenure is of 3.5 Months. Premium Rates specified in the above illustration are standard premium rates without considering any loading. Also, the premium rates are exclusive of taxes applicable