

Kshema Group Health Insurance

Prospectus

1. Eligibility

Employer Employee Groups and Members of a recognized Entity or Society Group of People and their Dependents as mentioned in Policy Document.

2. Policy Coverage

A. Base Cover

The Policy provides base coverage as described below in this section provided that the expenses are incurred on the written Medical Advice of a Medical Practitioner and are incurred on Medically Necessary Treatment of the Insured Person.

1. In-patient Hospitalization Expenses Cover.

- Covers Reasonable and Customary Charges.
- Room Rent
- Nursing Expenses.
- ICU Charges.
- Medical Practitioner, Surgeon, Specialists, Consultants and Anesthetists fees.
- Operation Theatre Charges.

2. AYUSH treatment.

1.2 Sub-limit:

There are sub limits determined for various procedures as mentioned in the policy wordings or specified for each group as per the individual requirement.

3. Sum Insured

As per the requirement specified.

4. Premium

The premium for each Policy will be determined based on the available data of each group and applicable discounts and loadings. Payment of premiums will be available on Yearly Basis or Instalment Basis.

5. Entry Age

1. **Adult:** Minimum age Limit – 18 years and Maximum – No Age Limit
2. **Dependent Children:** 3 months to 25 years.

6. Family Size

- ii. You + Legally Wedded Spouse + Parents and Parents- in law + maximum Five dependent children (i.e. biological or adopted) between the age of 3 months to 25 years.

7. Additional Benefits - Income Tax Benefit as per Sec 80 D of the IT Act on the premiums paid for this policy.

8. Eligibility is a group

A group in insurance is a collection of people covered under one **master policy**.

The policy is for employer or organization for its members.

Types of Eligible Groups

- **Employer-Employee Groups:** The most common group. It includes all full-time workers of a company. It covers their dependents
- **Non-Employer Groups:** These include professional associations, labor unions, wellness groups, group formed for defined purpose / requirement/ objective and groups with a shared financial interest.

9. Policy Tenure

- This policy can be issued for 1 year.

10. Type of Cover – Individual and Floater.

11. Geography Covered

This Policy only covers medical treatment taken within India.

12. Exclusions under this Policy

We will not make any payment for any claim in respect of any Insured Person caused by, arising from or attributable to any of the following unless expressly stated to the contrary in this Policy:

- i. **Exclusions with Waiting Period**
 - a. Pre-Existing disease
 - b. Specific Disease/ Procedure Waiting Period
- ii. c. First 30 days waiting period **Investigation & Evaluation:**

- a. Expenses related to any admission primarily for diagnostic and evaluation purposes only are excluded.
 - b. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded.
- iii. **Rest Cure, rehabilitation and respite care**
Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:
 - a. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non-skilled persons.
 - b. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs.
- iv. **Obesity/Weight control:**
Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions:
 - i. Surgery to be conducted is upon the advice of the doctor.
 - ii. The surgery/procedure conducted should be supported by clinical protocols.
 - iii. The member has to be 18 years of age or older and
 - iv. Body Mass Index (BMI)
 - a. Greater than or equal to 40 or,
 - b. Greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
 - 1. Obesity related cardiomyopathy.
 - 2. coronary heart disease.
 - 3. severe sleep apnoea.
 - 4. uncontrolled type2 diabetes.
- v. **Change-of-Gender treatments:**
Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.
- vi. **Cosmetic or plastic surgery:**
Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of Medically Necessary Treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.
- vii. **Hazardous or Adventure Sports:**
Expenses related to any treatment necessitated due to participation as a professional in Hazardous or Adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep sea diving.
- viii. **Breach of Law:**
Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.
- ix. **Excluded Providers**
Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website/notified to the policyholders are not admissible. However, in case of life-

threatening situations or following an Accident, expenses up to the stage of stabilization are payable but not the complete claim.

- x. Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof.
- xi. Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons.
- xii. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a Medical Practitioner as part of Hospitalization claim or day care procedure.
- xiii. Expenses related to the treatment for correction of eyesight due to refractive error less than 7.5 dioptres.
- xiv. **Unproven Treatments**
Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.
- xv. **Sterility and Infertility**
Expenses related to sterility and infertility. This includes:
 - a. Any type of contraception, sterilization.
 - b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI.
 - c. Gestational Surrogacy.
 - d. Reversal of sterilization.
- xvi. **Maternity**
 - a. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy.
 - b. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the Policy period.
- xvii. War or any act of war, invasion, act of foreign enemy, (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, Nuclear, Chemical or Biological attack or weapons, radiation of any kind.
- xviii. Any Insured Person committing or attempting to commit intentional self-injury or attempted suicide or suicide.
- xix. Any Insured Person's participation or involvement in naval, military or air force operation.
- xx. Investigative treatment for Sleep-apnoea, General debility or exhaustion ("run-down condition").
- xxi. Congenital external diseases, defects or anomalies.
- xxii. Stem cell harvesting.
- xxiii. Investigative treatments for analysis and adjustments of spinal sub luxation, diagnosis and treatment by manipulation of the skeletal structure or for muscle stimulation by any means except treatment of fractures (excluding hairline fractures) and dislocations of the mandible and extremities).
- xxiv. Circumcisions (unless necessitated by Illness or Injury and forming part of treatment).

- xxv. Any Convalescence, sanatorium treatment, private duty nursing or long-term nursing care.
- xxvi. Vaccination including inoculation and immunisations (Except post Animal bite treatment).
- xxvii. Non-Medical expenses such as Food charges (other than patient's diet provided by hospital), laundry charges, attendant charges, ambulance collar, ambulance equipment, baby food, baby utility charges and other such items. Full list of Non-Medical expenses is attached and available at www.kshema.co.
The provision or fitting of hearing aids, spectacles or contact lenses.
- xxviii. Any treatment and associated expenses for alopecia, baldness including corticosteroids and topical immunotherapy wigs, toupees, hair pieces, any non-surgical hair replacement methods, Optometric therapy.
- xxix. Any treatment or part of a treatment that is not of a Reasonable and Customary charge, not Medically Necessary; treatments or drugs not supported by a prescription.
- xxx. Expenses for Artificial limbs and/or device used for diagnosis or treatment (except when used intra-operatively). prosthesis, corrective devices external durable medical equipment of any kind, wheelchairs, crutches, and oxygen concentrator for bronchial asthma/ COPD conditions, cost of cochlear implant(s) unless necessitated by an Accident.

12. Additional Covers

- i. Home Care Treatment.
- ii. Organ Donor Expense Cover.
- iii. Domiciliary Treatment.
- iv. Pre and Post Hospitalization Medical Expenses.
- v. Correction of Refractive Error.
- vi. OPD Treatment.
- vii. Road Ambulance Cover.
- viii. Modern Treatment Methods & Advancements in Technologies.
- ix. Daily Cash Allowance

13. Applicability

This cover is applicable only as long as the insured person is a member of the group. If the insured person ceases to be a member of the group, the policy ceases to operate for that insured person.

14. Condition Precedent to Admission of Liability The terms and conditions of the Policy must be fulfilled by you for us to make any payment for claim(s) arising under the Policy.

- **Disclosure of Information** The policy shall be void and all premiums paid thereon shall be forfeited by us in the event of misrepresentation, mis description or nondisclosure of any material fact by the policyholder.
- **Moratorium period** – After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim

shall be contestable by the insurer on grounds of non-disclosure, misrepresentation, except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever, the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits.

15. Portability "Portability" means a facility provided to the health insurance policyholders (including all members under family cover), to transfer the credits gained for, pre-existing diseases and specific waiting periods from one insurer to another insurer.

16. Cancellation Clause

- i. You may cancel your policy at any time during the term, by giving 7 days' notice in writing.
- ii. We may cancel the Policy only on the ground of established fraud by giving minimum notice of 7 days to you and refund will be on proportionate basis.

We will refund proportionate premium for unexpired policy period, if there is no claim (s) made during the policy period.

17. Possibility of Revision of Terms of the Policy Including the Premium Rates we may revise or modify the terms of the Policy including the premium rates. You shall be notified three months before the changes are affected.

18. Withdrawal of Policy

- i) In the likelihood of this product being withdrawn in future, we will intimate you about the same 90 days prior to expiry of the Policy.
- ii) You will have the option to migrate to similar health insurance product available with us at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period. as per IRDAI guidelines, provided the policy has been maintained without a break.

19. Claim settlement.

- i. We will settle or reject a claim, as the case may be, within **15 days** from the date of receipt of last necessary document.
- ii. However, where the circumstances of a claim warrant an investigation in our opinion, it shall initiate and complete such investigation at the earliest, in any case not later than **30 days** from the date of receipt of last necessary document. In such cases, we will settle or reject the claim within **45 days** from the date of receipt of last necessary document.

20. Grievance Redressal Clause

- a) For resolution of any query or grievance, You may contact the Policy issuing office or email Us at customer.support@kshema.co or through Kshema Application or write to Us at Grievance Redressal Officer, KSHEMA GENERAL INSURANCE LIMITED, Regd. Office #413, 4th Floor, My Home Tycoon, Kundan Bagh, Begumpet, Hyderabad, Telangana, India- 500016.
- b) If You are not satisfied with the resolution provided, You may escalate to our Nodal Desk E-mail gro@kshema.co or can write to us at the sub section "Grievance Redressal" on our website www.kshema.co (Customer Support section).
- c) In case Your complaint is not fully addressed by Us, you may use the Bima Bharosa, a Grievance Redressal Portal of IRDAI (Bima Bharosa) for escalating the complaint to IRDAI. Through Bima Bharosa You can register Your complaint online and track its status. For registration, please visit Website <https://bimabharosa.irdai.gov.in>
- d) If the issue still remains unresolved, You may, subject to vested jurisdiction, approach Insurance Ombudsman for the redressal of the grievance at <https://www.cioins.co.in>.

For detailed terms, conditions and exclusions please refer the policy wordings available in our website www.kshema.co

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