

**HOSPITAL CASH DAILY ALLOWANCE**

**CUSTOMER INFORMATION SHEET**  
 (Description is illustrative and not exhaustive)

SI No	Title	Description	Policy Clause Number
1	Product Name	Hospital Cash Daily Allowance	
2	What am I covered for?	<p>In the event of Accidental Bodily Injury or illness first occurring or manifesting itself during the Policy Period and causing the Insured's or the Named Insured's Hospitalisation within the Policy Period, the Company will pay:</p> <ol style="list-style-type: none"> <li>The Daily Allowance for each continuous and completed period of 24 hours of Hospitalisation necessitated solely by reason of the said Accidental Bodily Injury or illness.1. The Daily Allowance for each continuous and completed period of 24 hours of Hospitalisation necessitated solely by reason of the said Accidental Bodily Injury or illness.</li> <li>Two times the Daily Allowance for each continuous and completed period of 24 hours required to be spent by the Insured or Named Insured in the Intensive Care Unit of a Hospital during any period of Hospitalisation necessitated solely by reason of the said Accidental Bodily Injury or Sickness for a maximum period of 7 days for each hospitalisation.</li> </ol>	Section A
3	What are the major exclusions in the policy?	<ol style="list-style-type: none"> <li>Pre-existing disease: Any medical condition or complication arising from it which existed before the commencement of the Policy Period, or for which care, treatment or advice was sought, recommended by or received from a Physician or for which a claim has or could have been made under any earlier policy.</li> <li>Any treatment not performed by a Physician or any treatment of a purely experimental nature.</li> <li>Any and all variants of the condition commonly referred to as Cancer, except in case of invasive malignant melanoma</li> <li>Any routine or prescribed medical check up or examination. Medical Expenses relating to any hospitalisation for diagnostic, X-ray or laboratory examinations not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any Illness or accidental Bodily Injury for which hospitalisation is required.</li> <li>Any Sickness that has been classified as an Epidemic by the Central or State Government.</li> <li>Circumcision, cosmetic or aesthetic treatments of any description change of life surgery or treatment, plastic surgery (unless necessary for the treatment of Illness or accidental Bodily Injury as a direct result of the insured event and performed within 6 months of the same).</li> <li>Dental treatment or surgery of any kind unless as a result of Accidental Bodily Injury to natural teeth and also requiring hospitalization</li> <li>Convalescence, general debility, rest cure, congenital external diseases or defects or anomalies, genetic disorders, stem cell implantation or surgery, or growth hormone therapy.</li> <li>Self afflicted injuries or conditions (attempted suicide), and/or the use or misuse of any drugs or alcohol</li> <li>Any sexually transmitted diseases or any condition directly or indirectly caused to or associated with Human T-Cell Lymphotropic Virus type or any Syndrome or condition of a similar kind commonly referred to as AIDS.</li> <li>Any diagnosis or treatment arising from or traceable to pregnancy (whether uterine or extra uterine), childbirth including caesarean section, medical termination of pregnancy and/or any treatment related to pre and post natal care of the mother or the new born.</li> <li>Hospitalisation for the sole purpose of traction, physiotherapy or any ailment for which hospitalisation is not warranted due to advancement in medical technology</li> </ol>	Section C.

HOSPITAL CASH DAILY ALLOWANCE

3	What are the major exclusions in the policy?	<p>13. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection military or usurped power of civil commotion or loot or pillage in connection herewith.</p> <p>14. Naval or military operations of the armed forces or airforce and participation in operations requiring the use of arms or which are ordered by military authorities for combating terrorists, rebels and the like.</p> <p>15. Any natural peril including but not limited to avalanche, earthquake, volcanic eruptions or any kind of natural hazard.</p> <p>16. Participation in any hazardous activity.</p> <p>17. Radioactive contamination.</p> <p>18. Non-allopathic treatment.</p> <p>19. Consequential losses of any kind, be they by way of loss of profit, loss of opportunity, loss of gain, business interruption, market loss or otherwise, or any claims arising out of loss of a pure financial nature such as loss of goodwill or any legal liability of any kind whatsoever.</p>	Section C
4	Waiting periods	<p>1. Illness requiring Hospitalisation within the first 30 days from the commencement date of the Policy Period unless the Policy is renewed without interruption and with the Company.</p> <p>2. Without prejudice to Exclusion 1 above, the treatment of cataracts, benign prostatic hypertrophy, hysterectomy, menorrhagia, fibromyoma, D&amp;C, endometriosis, hernia of all types, hydrocele, fistulae, haemorrhoids, fissure in ano, stones in the urinary and biliary systems, surgery on ears, tonsils or sinuses, skin and all internal tumours/cysts/nodules/polyps of any kind including breast lumps, gastric or duodenal ulcer, backache, prolapsed intervertebral disc during the first year of a series of Daily Hospital Allowance Policies renewed with the Company without interruption</p>	Section C
5	Payout basis	The payout under this policy is on benefit basis.	Section D
6	Renewal Conditions	<p>Renewal of Policy</p> <p>The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the insured person.</p> <p>i. The Company shall endeavor to give notice for renewal. However, the Company is not under obligation to give any notice for renewal.</p> <p>ii. Renewal shall not be denied on the ground that the insured person had made a claim or claims in the preceding policy years.</p> <p>iii. Request for renewal along with requisite premium shall be received by the Company before the end of the policy period.</p> <p>iv. At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without break in policy. Coverage is not available during the grace period.</p> <p>v. No loading shall apply on renewals based on individual claims experience</p>	Section D
7	Insured's Rights	<p>a. Free Look period of 15 days from the date of receipt of the policy shall be applicable at the inception</p> <p>b. Lifelong renewability (except on certain specific grounds)</p> <p>c. Right to migrate from one product to another product of the company</p> <p>d. Right to port from one company to another company</p> <p>e. In the case of delay in the payment of a claim, the Company shall be liable to pay interest from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate</p>	Section D

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8	Cancellation	<p>i. The policyholder may cancel this policy by giving 15days' written notice and in such an event, the Company shall refund premium for the unexpired policy period as detailed below.</p> <table border="1"> <thead> <tr> <th rowspan="2">Period in Risk</th> <th colspan="3">Premium Refund</th> </tr> <tr> <th>Policy Period 1 Year</th> <th>Policy Period 2 Year</th> <th>Policy Period 3 Year</th> </tr> </thead> <tbody> <tr> <td>Within 15 Days</td> <td colspan="3">As per Free Look Period Condition</td> </tr> <tr> <td>Exceeding 15 days but less than or equal to 1 month</td> <td>75.00%</td> <td>75.00%</td> <td>80.00%</td> </tr> <tr> <td>Exceeding 15 days but less than or equal to 3 months</td> <td>50.00%</td> <td>75.00%</td> <td>80.00%</td> </tr> <tr> <td>Exceeding 3 months but less than or equal to 6 months</td> <td>25.00%</td> <td>65.00%</td> <td>75.00%</td> </tr> <tr> <td>Exceeding 6 months but less than or equal to 12 months</td> <td>0.00%</td> <td>45.00%</td> <td>60.00%</td> </tr> <tr> <td>Exceeding 12 months but less than or equal to 15 months</td> <td>0.00%</td> <td>30.00%</td> <td>50.00%</td> </tr> <tr> <td>Exceeding 15 months but less than or equal to 18 months</td> <td>0.00%</td> <td>20.00%</td> <td>45.00%</td> </tr> <tr> <td>Exceeding 18 months but less than or equal to 24 months</td> <td>0.00%</td> <td>0.00%</td> <td>30.00%</td> </tr> <tr> <td>Exceeding 24 months but less than or equal to 27 months</td> <td>0.00%</td> <td>0.00%</td> <td>20.00%</td> </tr> <tr> <td>Exceeding 27 months but less than or equal to 30 months</td> <td>0.00%</td> <td>0.00%</td> <td>15.00%</td> </tr> <tr> <td>Exceeding 30 months but less than or equal to 36 months</td> <td>0.00%</td> <td>0.00%</td> <td>0.00%</td> </tr> </tbody> </table> <p>Cancellation grid for premium received on instalment basis and refund is as under The premium will be refunded as per the below table:</p> <table border="1"> <thead> <tr> <th rowspan="2">Period in Risk (from latest instalment date)</th> <th>Premium Refund</th> <th>Premium Refund</th> <th>Premium Refund</th> </tr> <tr> <th>% of Monthly Premium</th> <th>% of quarterly Premium</th> <th>% of Half Yearly Premium</th> </tr> </thead> <tbody> <tr> <td>Within 15 days from 1st Installment date</td> <td colspan="3">As per Free Look Period Condition</td> </tr> <tr> <td>Exceeding 15 days but less than or equal to 3 months</td> <td colspan="2" rowspan="2">No Refund</td> <td>30%</td> </tr> <tr> <td>Exceeding 3 months but less than or equal to 6 months</td> <td>0%</td> </tr> </tbody> </table> <p>Note: The first slab of Number of days "within 15 days" in above table is applicable only in case of new business. In case of renewal policies, period is risk "Exceeding 15 days but less than 3 months" should be read as "within 3 months".</p> <p>Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of Cancellation where, any claim has been admitted or has been lodged or any benefit has been availed by the insured person under the policy.</p> <p>i. 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 15 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud.</p>	Period in Risk	Premium Refund			Policy Period 1 Year	Policy Period 2 Year	Policy Period 3 Year	Within 15 Days	As per Free Look Period Condition			Exceeding 15 days but less than or equal to 1 month	75.00%	75.00%	80.00%	Exceeding 15 days but less than or equal to 3 months	50.00%	75.00%	80.00%	Exceeding 3 months but less than or equal to 6 months	25.00%	65.00%	75.00%	Exceeding 6 months but less than or equal to 12 months	0.00%	45.00%	60.00%	Exceeding 12 months but less than or equal to 15 months	0.00%	30.00%	50.00%	Exceeding 15 months but less than or equal to 18 months	0.00%	20.00%	45.00%	Exceeding 18 months but less than or equal to 24 months	0.00%	0.00%	30.00%	Exceeding 24 months but less than or equal to 27 months	0.00%	0.00%	20.00%	Exceeding 27 months but less than or equal to 30 months	0.00%	0.00%	15.00%	Exceeding 30 months but less than or equal to 36 months	0.00%	0.00%	0.00%	Period in Risk (from latest instalment date)	Premium Refund	Premium Refund	Premium Refund	% of Monthly Premium	% of quarterly Premium	% of Half Yearly Premium	Within 15 days from 1st Installment date	As per Free Look Period Condition			Exceeding 15 days but less than or equal to 3 months	No Refund		30%	Exceeding 3 months but less than or equal to 6 months	0%	Section D
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9	Claims	<p>Reimbursement of Claim: For reimbursement of claims the insured person may submit the necessary documents to Company within the prescribed time limit as specified in the Policy wordings</p>	Section D																																																																				

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10	Policy Servicing, Grievances/ Complaints	<p>a. If Insured person is not satisfied with the redressal of grievance through one of the methods, insured person may contact the grievance officer at ggro@bajajallianz.co.in For updated details of grievance officer, <a href="https://www.bajajallianz.com/about-us/customer-service.html">https://www.bajajallianz.com/about-us/customer-service.html</a></p> <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 in Policy document.</p>	Section D
11	Insured's Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.	Section D
<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.</p>			