Bajaj Allianz General Insurance Co. Ltd.
Bajaj Allianz House, Airport Road, Yerawada, Pune - 411 006. Reg. No.: 113
For more details, log on to: www.bajajallianz.com | E-mail: bagichelp@bajajallianz.co.in or Call at: Sales - 1800 209 0144 / Service - 1800 209 5858 (Toll Free No.) Issuing Office:



## **M CARE**

# **CUSTOMER INFORMATION SHEET**

This document provides key information about your policy. You are also advised to go through your policy document

SI No	Title	Description	Policy Clause Number
1	Name of Insurance Product	M Care	
2	Policy Number	Kindly refer to Your Policy schedule	
3	Type of Insurance	Kindly refer to Your Policy schedule	
4	Sum Insured (Basis)	Kindly refer to Your Policy schedule	Section C
	Policy Coverage (What the Policy Covers)	Coverages If the Insured is diagnosed as suffering from a Vector Borne disease listed below which first occurs or manifests itself during the Policy Period, the Company shall pay a Lump Sum Benefit.	Section C
		Dengue Fever – Immunoglobulins /Polymerase Chain Reaction (PCR) test showing positive results for Dengue	Section C I a
5		Malaria - presence of Plasmodium falciparum/ vivax/ malariae in the his/her blood by laboratory examination	Section C I b
		Filariasis (Payable only once in lifetime) - presence of microfilariae in a blood smear  1. lymphoedema, 2. elephantiasis and 3. scrotal swelling 4. Concurrent to the above three conditions the final diagnosis should be confirmed as Filariasis  Note: 1. If the Insured Person is already infected with Filariasis prior to first Policy inception then this benefit will not be extended for lifetime 2. Once the Sum Assured is paid for any Insured Person, no other claim for this particular condition shall be paid to the Insured Person in his/her entire lifetime.	Section C I c
		Kala Azar - diagnosis of Visceral Leishmaniosis by parasite demonstration in bone marrow/spleen/lymph node aspiration or in culture medium as the confirmatory diagnosis or positive serological tests for kala azar	Section C I d
		<b>Chikungunya</b> - diagnosis of Chikungunya with Immunosorbent assays (ELISA), confirming the presence of IgM and IgG anti-chikungunya antibodies.	Section C I e
		Japanese Encephalitis - positive serological test for Japanese Encephalitis by immunoglobulin M (IgM) antibody capture ELISA (MAC ELISA) for serum and cerebrospinal fluid (CSF).	Section C I f
		<b>Zika Virus</b> - PRNT is performed by CDC or a CDC-designated confirmatory testing laboratory to confirm presumed positive, equivocal, or inconclusive IgM results	Section C I g
6	Cumulative Bonus	Not Applicable	

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7	Exclusions (What the policy does not cover)	What the policy 1. Any Treatment taken for any illness other than for vector borne diseases as				
			New Zealand	Japan		
			Singapore	Canada		
			Switzerland	Dubai		
			USA	Hong Kong		
			Malaysia	Countries of the European Union		
8	Waiting Period Time period during which specified disease/treatme nt are not covered It is counted from beginning of the policy coverage	Policy of days was previous Once a renewal apply for Policy reclaim for apply for the policy reclaim for the polic	Vaiting period: Any of the list 15 days of the date of common period after occurrence of any aiting period shall be applicated admission.  benefit is paid and if insured Policy, 60 days waiting period the specific ailment of which the named Insured/Insured or the same ailment in the relating period for other listed venewed post 60 days from the same ailment in the relating period for other listed venewed post 60 days from the	ted vector borne disease diagnosed within encement of the Policy is excluded  of the listed vector borne diseases, a 60 able for the specific ailment from date of defending the renews the Policy, in such scenario for the defending the date of previous admission would a claim has been paid.  The date of admission of the previously paid Persons, 60 days cooling off period shall newed policy opted, however there would ector borne diseases.  The date of admission of the previously paid Persons, then a fresh waiting period of 15	Section D	
9	Financial Limits of Coverage Sublimit (it is a pre-defined limit and the insurance company will not pay any amount in excess of this limit)  Co-payment (it is a specified amount /percentage of the admissible claim amount to be paid by policy holder/insured)  Deductible (it is a specified amount: Upto which an insurance company will not pay any claim and Which will be deducted from	Not App	licable			

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	total claim amount		
	(if claim amount is		
	more than the		
	specified amount)		
10	Claims/claims	Cashless Claim process	Section E19
	procedure	Cashless treatment is only available at Network Hospitals	
	•	You or Your representative must intimate Us 48 hours before the planned	
		Hospitalization and within 24 hours of emergency hospitalization and	
		request pre-authorization by way of the written form	
		We will review each claim for Medical Expenses, coverage and accordingly	
		issue an authorization letter either to You or the Network Hospital.	
		Reimbursement claim process	
		Applicable for claims where treatment is taken at a Non network hospital OR	
		If we have denied your claim as per Cashless Claims Procedure.	
		You or Your representative must intimate Us 48 hours before the planned	
		Hospitalization and within 48 hours of emergency hospitalization	
		You or someone claiming on Your behalf must promptly and in any event	
		within 30 days of discharge from a Hospital give Us the documentation	
		The Company shall settle or reject the claim within 45days from the date of	
		receipt of last necessary document.	
		You or someone claiming on Your behalf must promptly and in any event within	
		30 days of discharge from a Hospital give Us the documentation listed out in	
		policy wordings and any additional information We ask, for Our obligation to	
		make payment for it.	
		Turnaround time(TAT) for claim settlement:	
		Turnaround time (TAT) for claim settlement: 30 Working Days	
		2. TAT for preauthorization of cashless facility: Within 120 Mins	
		3. TAT for cashless final bill authorization: Within 120 Mins	
		Weblinks	
		Network hospital and Black listed hospital list	
		https://www.bajajallianz.com/branch-locator.htmll	
		Helpline Number	
		Tollfree: 1800-103-2529	
		Downloading /getting claim forms Downloading /getting claim forms	
		Health Insurance Claim Process   Accident Insurance Claim (bajajallianz.com)	
11	Policy Servicing	Call centre number(Toll free): 1800-209-5858	
		Details of Company officials: Branch-wise GRO details can be found on the below	
		link.	
		https://www.bajajallianz.com/download-documents/other-information/GRO-	
40	0	List.pdf	0
12	Grievances	Grievance Redressal Procedure:	Section E 17
	/Complaints	a) Toll-free number 1-800-209- 5858 or 020-30305858,	
		Say "Hi" on WhatsApp on +91 7507245858 b) Branches for resolution of your grievances /complaints, the Branch details	
		can be found on our website: www.bajajallianz.com/branch-locator.html	
		Register your grievances / complaints on our website	
		www.bajajallianz.com/about-us/customer-service.html	
		c) E-mail	
		<ul> <li>Level 1: bagichelp@bajajallianz.co.in and for senior citizens to seniorcitizen@bajajallianz.co.in</li> </ul>	
		seniorcitizen@bajajaillanz.co.in	

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		<ul> <li>Level 2: In case you are not satisfied with the response given to you at Level 1 you may write to our Grievance Redressal Officer at ggro@bajajallianz.co.in</li> <li>Level 3: If in case, your grievance is still not resolved, and you wish to talk to our care specialist, please give a missed call on +91 8080945060 OR SMS To 575758 and our care specialist will call you back</li> <li>d) If you are still not satisfied with the decision of the Insurance Company, you may approach the Insurance Ombudsman, established by the Central Government for redressal of grievance. Detailed process along with list of Ombudsman offices are available at www.cioins.co.in/ombudsman.html</li> </ul>	
13	Things to remember	Free Look Cancellation: Insured has an option of cancelling his/her policy up to 15 days from the first inception of policy with Us, subject to rest terms and conditions.  Policy Paneral L. Except on grounds of froud, more bazard or mis.	Section E6 Section E7 Section E13 Section E
		Policy Renewal: Except on grounds of fraud, moral hazard or mis representation or non-co-operation, renewal of your policy shall not be denied  Migration and Portability: At renewal Insured has an option to migrate his /her	
		policy to other policy with us or port the policy to another insurer subject to terms and conditions specified under Migration and Portability guidelines  For detailed guidelines on Migration and Portability, kindly refer the link https://www.irdai.gov.in/ADMINCMS/cms/Circulars_List.aspx?mid=3.2.3  beneficiary will have the option to port the policy to other insurers by applying to such insurer to port the entire policy along with all the members of the family, if any ,at least 45days before, but not earlier than60days from the policy renewal data as par IRDAL guidelines related to portability. If such paragin presently	
		date as per IRDAI guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance policy with an Indian General/Health insurer, the proposed Insured beneficiary will get the accrued continuity benefits in waiting periods as per IRDAI guidelines on portability	
		Change in Sum Insured: sum insured can be changed (increased/decreased) only at the time of renewal subject to underwriting by the company. For increase in Sum insured, the waiting periods if any shall start afresh only for the enhance portion of the sum insured	
14	Your Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement	
		<del>_</del>	

**Legal Disclaimer Note:** 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.

### **Declaration by policy holder**

Place

Date: Signature of Policy holder

Note:

Web link for downloading the product related documents <a href="https://www.bajajallianz.com/health-insurance-plans/health-insurance-documents.html">https://www.bajajallianz.com/health-insurance-documents.html</a>