

(Formerly known as Royal Sundaram Alliance Insurance Company Limited) Corp. Office : Vishranthi Melaram Towers, No. 2 / 319, Rajiv Gandhi Salai (OMR) Karapakkam, Chennai - 600097. Regd. Office : 21, Patullos Road, Chennai - 600 002

Customer Information Sheet

Lifeline

#### **CUSTOMER INFORMATION SHEET – LIFELINE**

Sr. No.	TITLE	DESCRIPTION	REFER TO POLICY SECTION NUMBER
1	Product Name	Lifeline	
2	What am I covered for:	<ol> <li>Inpatient Care: Medical Expenses for Medical Practitioner's fees, Diagnostic tests, Medicines, drugs and consumables, Treatment Charges, Nursing Charges, Operation Theatre charges, Intensive Care Unit charges, Intravenous fluids, blood transfusion, injection administration charges, the cost of prosthetics and other devices or equipment if implanted internally during a Surgical Procedure. Modern Treatments will be covered upto 50% of Sum Insured. For claim under this benefit hospitalization has to be longer than 24 hours.</li> </ol>	D.1
		2. Pre-hospitalization Medical Expenses: Medical Expenses incurred due to Illness upto 30 days for Classic Plan and 60 days for Supreme & Elite Plan immediately before admission to a hospital.	D.2
		<b>3.</b> Post-hospitalization Medical Expenses: Medical Expenses incurred due to Illness upto 60 days for Classic, 90 days for Supreme & 180 days for Elite Plan immediately post discharge from Hospital.	D.3
		4. Day-Care Treatment: Medical Expenses for Day Care Treatments (including Chemotherapy, Radiotherapy, Hemodialysis, any procedure which needs a period of specialized observation or care after completion of the procedure) where such procedures are undertaken by an Insured Person as an In-patient in a Hospital/Day Care Center for a continuous period of less than 24 hours. Any procedure undertaken on an OPD Treatment basis in a Hospital/Day Care Center will not be covered. Pre and Post Hospitalization Medical expenses shall not be payable for this benefit. All Daycare treatments are covered.	D.4
		5. Ambulance Cover: We will cover Reasonable & Customary Charges for ambulance expenses incurred to transfer the Insured Person by surface transport following an Emergency to the nearest Hospital. There is a sub-limit of Rs 3,000 for Classic, Rs. 5,000 for Supreme & Rs. 10,000 for Elite Plan, per hospitalization.	D.5
		<ol> <li>Organ Donor Expenses: Medical Expenses for an organ donor's treatment for harvesting of the organ.</li> <li>Domiciliary Hospitalization: Medical Expenses for</li> </ol>	D.6
		medical treatment taken at home if the treatment continues for an uninterrupted period of 3 days and the condition for which treatment is taken would otherwise have	D.7



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	necessitated hospitalization. Pre-Hospitalization Medical	
	expenses are payable. However, Post-Hospitalization	
0	medical expenses are not payable.	
ð.	No Claim Bonus: Classic $-10\%$ of base sum insured upto	D.8
	a max of 50% of base sum insured; Supreme & Elite - 20% of base sum insured upto a max of 100% of base sum	D.8
	insured.	
9	Re-load of Sum Insured – We will provide a Re-load of	
	Sum Insured equal to 100% of base sum insured in case	D.9
	base sum insured and No Claim Bonus has been partially	<b>D</b> .)
	or completely exhausted. Re-load of sum insured can be	
	utilized for different illness. Re-load of Sum Insured is not	
	available for Worldwide Emergency Hospitalization and	
	International Treatment for specified critical illness. Re-	
	load of Sum Insured is applicable only for Baseline Cover	
	Benefits and not for Optional Benefits.	
10.	Ayush Treatment – We will cover medical expenses for	
	Alternative Treatment taken in government hospital or in	D.10
	any institute recognized by the government and /or as	D.10
	defined under definition of AYUSH hospital in the Policy	
11	Document, upto the limit specified. Vaccination in case of Animal Bite –We will cover	
11.	medical expenses for OPD treatment for vaccination or	D.11
	immunization for treatment post an animal bite.	
12.	Health Check-up - Cost of a health check-up as per your	
	plan eligibility subject to renewability of the policy. This	D.12
	benefit is over and above the Base Sum Insured	
13.	Preventive Healthcare & Wellness and Disease	D.13
	Management - We will provide various preventive	
	healthcare & wellness related activities like health related	
	articles on your registered email ids. Disease Management	
	initiative by us for our existing customers wherein for	
	certain specified Health Risks such as Heart, Kidney,	
	Liver, Cancer, Hypertension, Diabetes etc. our customers will be provided assistance to manage their risk better	
	through preventive check-ups, advise on Nutrition, diet,	
	exercise regime, wearables to monitor various health	
	parameters etc. This will not be substitute of doctor	
	consultation.	
14.	Second Opinion for Critical Illness (Available for Supreme	D.14
	& Elite Plan only) – Available once during Policy period	D.14
	for 11 critical illness.	
15.	Emergency Domestic Evacuation (Available for Supreme	
	& Elite Plan only) – Available once during Policy Period	D.15
	in case of medical emergency and on advise of treating	
	doctor. Covered upto Rs.11akh for Supreme and Rs.31akhs	



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	<b>17.</b> Interna	tional Tr	reatment	for 11 s	pecified Cri	tical Illness	
	(Availa	able for	Elite Pla	an only)	– Covered	upto Sum	D.17
	Insured	d for 11 o	critical il	lness. Co	-payment of	20% every	2117
		plies for			<b>•</b> •	2	
	• •	-				Plan Only):	
		•				hild, where	
						red, after a	D.18
			-			lowing sub-	
	limits.	5 period	or o yea	15, 54050		io wing buo	
	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii						
		25	20	50	[		
	Sum Insured	25	30	50	100 lakhs	150 lakhs	
		lakhs	lakhs	lakhs			
	Sub Limit	2lakhs	21akhs	21akhs	2.50lakhs	2.50lakhs	
	New Born F	Rahv <sup>.</sup> Nev	w horn h	ahv will l	e covered a	s an insured	
		•		•		aby is born),	
						This benefit	
	is subject to				n accepted.	This beliefft	
	is subject to	2J/0 01 k	Sum msu	icu.			
	**		6.1				
		<b>.</b>			•	be covered	
				newal of	the policy. T	he sub-limit	
	for this bene	efit is Rs1	0,000.				
						) – Expenses	
						atient with a	
	Medica	al Practi	tioner to	assess	the Insure	ed Person's	
	conditi	on. Any	diagnosti	c tests pr	escribed by	the Medical	
	Practit	ioner. R	easonable	e & Cu	stomary Ex	penses for	D.19
	Dental	OPD 7	reatment	t, Cost	of Spectacl	es, Contact	
	Lenses	and Hea	ring Aid	will be	covered onc	e in 2 years	
					eatment Sur		
	Additional Op	otional B	enefits a	t the Cu	stomer leve	(these will	
	be offered to t						
			insui cu u	option	ar coverage,	,	
	1 Ton-u	n nlan or	Aggreg	ate annu	al Deductib	le options of	
			00 0			akhs and 10	
						n Discount.	Optional
						sured under	Endorsements
		c & Supre		iy avalla	ore sum m		- 1
	Classic	a supre					
	2 Homi	al Cach	If tha Ir	ourod Do	roon in Una	vitalized and	
						oitalised and	Orthur 1
						ation claim,	Optional
						cified in the	Endorsements
						d completed	-2
	period	of 24 hou	irs of Ho	spitalisat	ion provided	that:	



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	The Insured Person should have been Hospitalized for a minimum period of 48 hours continuously; We will not make any payment under this endorsement in respect of an Insured Person for more than 30 days of Hospitalisation in total under any Policy Year.	
Su ho	aims made in respect of this benefit will not be subject to the m Insured. Hospital Cash benefit is not available for spitalization in case of Supreme Plus and Elite Plus optional vers.	
3	Include US and Canada for Worldwide Emergency Hospitalization and International Treatment for specified Critical Illnesses. This benefit can be availed only at the inception of First Policy with Us. (available only for Elite Plan)	Optional Endorsements -3
4	<b>Supreme Plus:</b> If you opt for Supreme Plus, following benefits will be offered in additional to the base cover:	
	<ul> <li>Additional facility of app based cabs as a part of Ambulance Cover: We will cover charges for app based cabs service incurred towards transportation of an Insured Person at the time of getting admitted to the Hospital or discharge to the Hospital. This benefit is available only on reimbursement basis on the basis of submission of an invoice generated by a digital app based cab service and the invoice should mention details such as date, location of pick-up and drop and time of pick-up and drop. e.g. ola and uber. Hand-written paper invoice will not be accepted. The maximum benefit will be restricted up to sub-limit of ambulance cover applicable to your Plan. The benefit is available only for cab ride taken by the Insured Person at the time of Hospital admission or discharge. These charges are payable only if Inpatient claim is admissible.</li> <li>Refresh of Sum Insured: Refresh of Sum Insured is a part of Re-load of Sum Insured. Re-load benefit is payable only in case of a) Base Sum Insured and No Claim Bonus is completely exhausted. b) same Insured for Illness other than for which claims has already been paid in the same policy year.</li> </ul>	Optional Endorsement - 4
	Refresh of Sum Insured is payable to the Same Insured person for same illness for which claim is already paid in the same policy year. Refresh of Sum Insured is available only once in Lifetime of the Policy at a Policy level. Refresh of Sum Insured is not available for Worldwide Emergency Hospitalization and International Treatment	



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<ul> <li>for specified critical illness. Refresh of Sum Insured is applicable only for Baseline Cover Benefits and not for Optional Benefits. For triggering Refresh of Sum insured, Insured Person or immediate kin will have to provide his written consent for utilizing Refresh of Sum Insured.</li> <li><b>3.</b> In-patient for Pre-existing Disease in case of Life Threatening Condition: We will cover hospitalization expenses resulting from any of the Pre-existing disease which has been specifically disclosed by you at the time of inception of the policy and has been mentioned in the Policy schedule issued to you. This benefit is available only once in the Lifetime of the Policy at a policy level. This benefit is limited to a maximum of Rs. 1,00,000.</li> <li><b>4. Bariatric Surgery:</b> If You are hospitalized on the advice of a Doctor and required you to undergo Bariatric Surgery during the Policy period, then We will pay Expenses related to Bariatric Surgery. This benefit is available to Insured Person 18 years and above. Our maximum liability under this benefit will be restricted to Rs. 50,000. Any future complications arising out of bariatric treatment post-surgery will not be covered. To claim under this benefit, you should be covered under Supreme Plus for a period of 72 months without any break. At the time of claiming this benefit, Insured person should be covered under Supreme Plus.</li> <li><b>5. Mobility Devices</b></li> <li><b>1.</b> We shall cover expenses incurred by Insured Person towards mobility devices such as walkers, manual wheelchair, crutches, splints, external prosthetics, slings, plasters, etc. which has been avised as a part</li> </ul>	Lifeline	Office : 21, Patullos Road, Chennai - 600 002 Customer Information Sheet
<ul> <li>expenses resulting from any of the Pre-existing disease which has been specifically disclosed by you at the time of inception of the policy and has been mentioned in the Policy schedule issued to you. This benefit is available only once in the Lifetime of the Policy at a policy level. This benefit is available only on reimbursement mode. This benefit is limited to a maximum of Rs. 1,00,000.</li> <li><b>4. Bariatric Surgery:</b> If You are hospitalized on the advice of a Doctor and required you to undergo Bariatric Surgery during the Policy period, then We will pay Expenses related to Bariatric Surgery. This benefit is available to Insured Person 18 years and above. Our maximum liability under this benefit will be restricted to Rs. 50,000. Any future complications arising out of bariatric treatment postsurgery will not be covered under Supreme Plus for a period of 72 months without any break. At the time of claiming this benefit, Insured person should be covered under Supreme Plus.</li> <li><b>5. Mobility Devices</b> <ol> <li>We shall cover expenses incurred by Insured Person towards mobility devices such as walkers, manual wheelchair, crutches, splints, external prosthetics, slings, plasters, etc. which has been advised as a part</li> </ol> </li> </ul>		<ul> <li>for specified critical illness. Refresh of Sum Insured is applicable only for Baseline Cover Benefits and not for Optional Benefits. For triggering Refresh of Sum insured, Insured Person or immediate kin will have to provide his written consent for utilizing Refresh of Sum Insured.</li> <li><b>3. In-patient for Pre-existing Disease in case of Life</b></li> </ul>
<ul> <li>of a Doctor and required you to undergo Bariatric Surgery during the Policy period, then We will pay Expenses related to Bariatric Surgery. This benefit is available to Insured Person 18 years and above. Our maximum liability under this benefit will be restricted to Rs. 50,000. Any future complications arising out of bariatric treatment postsurgery will not be covered. To claim under this benefit, you should be covered under Supreme Plus for a period of 72 months without any break. At the time of claiming this benefit, Insured person should be covered under Supreme Plus.</li> <li><b>5.</b> Mobility Devices <ol> <li>We shall cover expenses incurred by Insured Person towards mobility devices such as walkers, manual wheelchair, crutches, splints, external prosthetics, slings, plasters, etc. which has been advised as a part</li> </ol> </li> </ul>		expenses resulting from any of the Pre-existing disease which has been specifically disclosed by you at the time of inception of the policy and has been mentioned in the Policy schedule issued to you. This benefit is available only once in the Lifetime of the Policy at a policy level. This benefit is available only on reimbursement mode.
1.We shall cover expenses incurred by Insured Person towards mobility devices such as walkers, manual wheelchair, crutches, splints, external prosthetics, slings, plasters, etc. which has been advised as a part		of a Doctor and required you to undergo Bariatric Surgery during the Policy period, then We will pay Expenses related to Bariatric Surgery. This benefit is available to Insured Person 18 years and above. Our maximum liability under this benefit will be restricted to Rs. 50,000. Any future complications arising out of bariatric treatment post- surgery will not be covered. To claim under this benefit, you should be covered under Supreme Plus for a period of 72 months without any break. At the time of claiming this benefit, Insured person should be covered under Supreme
<ul> <li>accident. These expenses can be part of in-patient or post-discharge. This is not payable in case of Pre-hospitalisation,, out-patient treatment and any sickness related claims.</li> <li>This benefit is only available if the claim of accidental</li> </ul>		<ol> <li>We shall cover expenses incurred by Insured Person towards mobility devices such as walkers, manual wheelchair, crutches, splints, external prosthetics, slings, plasters, etc. which has been advised as a part of treatment to deal with the disability induced by an accident. These expenses can be part of in-patient or post-discharge. This is not payable in case of Pre- hospitalisation,, out-patient treatment and any sickness related claims.</li> <li>This benefit is only available if the claim of accidental</li> </ol>
<ul> <li>injury has been admissible by us.</li> <li>3. Our maximum liability will be restricted to 5% of the Sum Insured or Rs. 50,000 whichever is lesser.</li> </ul>		3. Our maximum liability will be restricted to 5% of the
6. Second Opinion for additional 11 specified Critical Illnesses (Total 22 Critical Illnesses)		
Following Additional 11 Critical Illnesses are covered for Second Opinion:		-



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	<ol> <li>Angioplasty</li> <li>Benign brain Tumor</li> <li>Blindness</li> <li>Deafness</li> <li>End stage lung Failure</li> <li>End stage liver failure</li> <li>Loss of speech</li> <li>Loss of limbs</li> <li>Major head trauma</li> <li>Primary (idiopathic) pulmonary hypertension</li> <li>Third degree burns</li> </ol>	
	<ul> <li>5. Elite Plus: If you opt for Elite Plus, following benefits will be offered in additional to the base cover:</li> <li>1. Additional facility of app based cabs as a part of Ambulance Cover: We will cover charges for app based cabs service incurred towards transportation of an Insured Person at the time of getting admitted to the Hospital or discharge to the Hospital. This benefit is available only on reimbursement basis on the basis of submission of an invoice generated by a digital app based cab service the invoice should mention details such as date, location of pick-up and drop and time of pick-up and drop. e.g. ola and uber. Hand-written paper invoice will not be accepted. The maximum benefit will be restricted up to sub-limit of ambulance cover applicable to your Plan. The benefit is available only for cab ride taken by the Insured Person at the time of Hospital admission or discharge. These charges are payable only if Inpatient claim is admissible.</li> <li>2. Refresh of Sum Insured: Refresh of Sum Insured is a part of Re-load of Sum Insured. Re-load of Sum Insured is payable only in case of a) Base Sum Insured for Illness other than for which claims has already been paid in the same policy year. c) different Insured for the same Illness for which claims has already been paid in the same policy year. Refresh of Sum Insured is available only once in Lifetime of the Policy at a Policy level. Refresh of Sum Insured is not available for Worldwide Emergency Hospitalization and International Treatment for specified critical illness. Refresh of Sum Insured is applicable only for Baseline Cover Benefits and not for Optional Benefits. For triggering Refresh of Sum insured is applicable only for Baseline Cover Benefits and not for</li> </ul>	Optional Endorsement - 5



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	Insured Person or immediate kin will have to provide his	
	written consent for utilizing Refresh of Sum Insured.	
	<b>3.</b> In-patient for Pre-existing Disease in case of Life Threatening Condition: We will cover hospitalization expenses resulting from any of the Pre-existing disease which has been specifically disclosed by you at the time of inception of the policy and has been mentioned in the Policy schedule issued to you. This benefit is available only once in the Lifetime of the Policy at a policy level. This benefit is available only on reimbursement mode. This benefit is limited to a maximum of Rs. 2,00,000.	
	4. Bariatric Surgery: If You are hospitalized on the advice of a Doctor and required you to undergo Bariatric Surgery during the Policy period, then We will pay Expenses related to Bariatric Surgery. This benefit is available to Insured Person 18 years and above. Our maximum liability under this benefit will be restricted to Rs. 200,000. Any future complications arising out of bariatric treatment post- surgery will not be covered. To claim under this benefit, you should be covered under Elite Plus for a period of 48 months without any break. To claim under this benefit, Insured Person should be covered under Elite Plus at the time of claim.	
	<ul> <li>5. Mobility Devices <ol> <li>We shall cover expenses incurred by Insured Person towards mobility devices such as walkers, manual wheelchair, crutches, splints, external prosthetics, slings, plasters, etc. which has been advised as a part of treatment to deal with the disability induced by an accident. These expenses can be part of in-patient or post-discharge. This is not payable in case of only pre-hospitalisation, out-patient treatment and any sickness related claims.</li> <li>This benefit is only available if the claim of accidental injury has been admissible by us.</li> <li>Our maximum liability will be restricted to Rs. 50,000.</li> </ol> </li> </ul>	
	6. Second Opinion for additional 11 specified Critical Illnesses (Total 22 Critical Illnesses)	
	Following Additional 11 Critical Illnesses are covered for Second Opinion:	
	1. Angioplasty	



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Lifeline	2. Benign brain Tumor         3. Blindness         4. Deafness         5. End stage lung Failure         6. End stage liver failure         7. Loss of speech         8. Loss of limbs         9. Major head trauma         10. Primary (idiopathic) pulmonary hypertension         11. Third degree burns         7. International Treatment abroad for 3	<u>*</u>
	additional Critical illnesses (Total 14 specified critical illnesses) Following additional 3 Critical Illnesses are covered for International Treatment abroad:	
	<ol> <li>End Stage Liver Disease</li> <li>End Stage Lung Disease</li> <li>Third Degree burn</li> </ol>	
	8. In-Vitro Fertilisation(IVF) Treatment	
	<ul> <li>The Company will reimburse medical expenses incurred on IVF</li> <li>Treatment, where indicated, for sub-fertility subject to: <ul> <li>a. A waiting period of 48 months from the date of inception of the Elite Plus with the Company for the insured person.</li> <li>b. The maximum cumulative liability in lifetime of the policy of the Company for such treatment shall be limited to Rs.2,50,000/</li> <li>c. For the purpose of claiming under this benefit, in- patient treatment is not mandatory.</li> <li>d. For claim under this benefit, Insured person should have opted for Elite Plus for a period of 48 months without any break.</li> <li>e. Re-load and Refresh of Sum Insured Benefit shall not be</li> </ul> </li> </ul>	
	<ul> <li>applicable for this benefit.</li> <li>f. This Benefit can be used for a maximum of 3 cycles subject to a maximum of Rs. 2,50,000 as a cumulative benefit.</li> <li>g. To be eligible for this benefit both husband and wife should stay insured continuously without break for a period of 48 months under Elite Plus.</li> <li>h. This benefit does not cover Surrogacy.</li> <li>i. This benefit covers intrauterine insemination (IUI), Intra-Cytoplasmic Sperm Injection (ICSI), In-Vitro Fertilisation(IVF).</li> <li>j. Maximum age of female member should be less than 45 years.</li> </ul>	



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	<ul> <li>k. To claim under this benefit, we would require certificate and case history from the treating doctor which has necessitated treatment.</li> <li>l. Available once in lifetime of the policy for a maximum of 3 IVF cycles.</li> <li>m. Under this benefit, maximum of 3 cycles of the treatment as mentioned above should be utilized in maximum 3 consecutive policy years.</li> <li>n. At the time of claiming the benefit, Insured person should be covered under Elite Plus at the time of claim.</li> <li>o. Any treatment or side effects resulting in hospitalization arising as a consequence to infertility treatment is not payable.</li> </ul>	
What are the major exclusions in the policy:	Investigation & Evaluation, Rest Cure, rehabilitation and respite care, Obesity/ Weight Control, Change-of-Gender treatments, Cosmetic or plastic Surgery, Hazardous or Adventure sports, Breach of law, Excluded Providers, Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences, Treatments received in heath 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, 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, Refractive Error, Unproven Treatments, Sterility and Infertility, Maternity, Alternative treatment, Ancillary Hospital Charges, Charges for medical papers, Circumcision, Conflict and disaster, Congenital conditions, Convalescence and Rehabilitation, Dental/oral treatment, Drugs and dressings for OPD Treatment or take-home use, Hereditary conditions, Items of personal comfort and convenience, including but not limited to : (A)Telephone, television, diet charges, (unless included in room rent) personal attendant or barber or beauty services, baby food, cosmetics, napkins, toiletry items, guest services and similar incidental expenses or services (B) Private nursing/attendant's charges incurred during Pre-hospitalization or Post-hospitalization (C) Drugs or treatment not supported by prescription etc., OPD Treatment, Preventive Care, Self-inflicted injuries, Sexual problems, Sexually transmitted diseases, Sleep disorders, Treatment received outside India, Artificial life maintenance is not covered from the time Insured Person goes into vegetative state and a point of no recovery to Life, Nuclear, chemical or biological attack or weapons, contributed to, caused by, resulting from or from any other cause or event contributing co	Ε



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	• The expenses that are not covered in this policy are placed under List-I of Annexure-II.	
Waiting Period	<ul> <li>Waiting period for Pre-existing Diseases cover Classic – 48 months Supreme – 36 months Elite – 24 months</li> <li>For Pre-existing Diseases to which Portability benefit was extended, recalculated waiting periods and Sum Insured limits are presented in the Schedule.</li> <li>2 years specific waiting period for the following 16 conditions: • Stones in billiary and urinary systems • Lumps / cysts / nodules / polyps / internal tumours • Gastric and Duodenal Ulcers • Surgery on tonsils / adenoids • Osteoarthrosis / Arthritis / Gout / Rheumatism / Spondylosis / Spondylitis / Intervertebral Disc Prolapse • Cataract • Fissure / Fistula / Hemorrhoids • Hernia / Hydrocele • Chronic Renal Failure or end stage Renal Failure • Sinusitis / Deviated Nasal Septum / Tympanoplasty / Chronic Suppurative Otitis Media • Benign Prostatic Hypertrophy • Knee/Hip Joint replacement • Dilatation and Curettage • Varicose veins • Dysfunctional Uterine Bleeding / Fibroids / Prolapse Uterus / Endometriosis • Hysterectomy for any benign disorder.</li> </ul>	E.1.1 E.1.2
	<ul><li> 30 days for all illnesses except any accidents.</li><li> 90 days initial waiting period for Critical illness</li></ul>	E.1.3
	Personal Waiting Periods	E.2.23
	Bariatric Surgery- 72 months (Supreme Plus)     48 months (Elite Plus)	E.2.24
	• In-Vitro Fertilisation(IVF) Treatment – 48 months	Optional Endorsement- 4(4) &5(4)



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		Optional Endorsement- 5(8)
Payment basis	Cashless facility or reimbursement of covered expenses up to specified limits.	
Loss Sharing	<ol> <li>Top-up plan on Aggregate annual Deductible options of Rs 1 Lakh, 2 Lakhs, 3 Lakhs, 4 Lakhs, 5 Lakhs and 10 Lakhs can be availed along with premium Discount. Customer can select any available sum insured under Classic &amp; Supreme Plan</li> </ol>	Optional Endorsement -1
	<ol> <li>All claims of International Treatment for specified Critical Illness will be subject to 20% Co-payment</li> </ol>	D.17(e)
Renewal Conditions	<ul> <li>This is a life-long renewal product on mutual consent subject to application of Renewal and realization of renewal premium</li> <li>The Waiting Periods mentioned in the Policy wording will get reduced by 1 year with every continuous renewal of your Health Insurance Policy.</li> <li>There is no maximum cover ceasing age in this Policy.</li> <li>Renewal premium is subject to change with prior approval from IRDAI.</li> <li>There will be no underwriting on Policy renewal. The first year underwriting results will continue if the policy is continued without a break.</li> <li>Alterations in the policy such as Increase/ decrease in Sum Insured or Change in Plan/Product, addition/ deletion of members, addition deletion of Medical Condition will be allowed at the time of Renewal of the Policy. Any request for acceptance of changes on renewal will be subject to underwriting. The terms and conditions of the existing policy will not be altered</li> <li>We will allow a grace period of 30 days in case of one year, 2 years, 3 years policies and 15 days in case of one year, 2 years, 3 years policies and 15 days in case of grace period are allowed and in case of quarterly and half-yearly, only one instance of grace period is allowed.</li> <li>Renewal of the Policy will not ordinarily be denied other than on grounds of moral hazard, misrepresentation, fraud, non-disclosure or non-cooperation from the insured</li> </ul>	F.1.10 & F.2.13



Lifeline		Office : 21, Patu	nos koa	,		ormation Sheet
Lifeline	i	The Company shall endeavor	to give			ormation Sheet
	1.	However, the Company is not u notice for renewal.				
	ii.					
	iii.					
	iv.					
	case of one year and 15 days in case of monthly, quarterly and half- yearly payments to maintain continuity of benefits without break in policy. Coverage is not available					
	v.	No loading shall apply on ren claims experience	lewals b	based on 1	ndividual	
Renewal benefits	•	D.8				
	i. The	year. policyholder may cancel this	policy	by giving	15 days'	
Cancellation	written	notice and in such an event,	the Con	npany sha	all refund	
	premiu	m for the unexpired policy perio	d as det	ailed belo	w.	
	Cance	ellation date upto (x months)	1	2	3	
	Upto	l month	75%	87%	91%	
	•	3 months	50%	74%	82%	
	<u> </u>	5 months	25%	61.5%	73.5%	
	•	12 months	0%	48.5%	64.5%	F 1 7
	^	15 months	NA	24.5%	47%	F.1.7
	-	18 months	NA	12%	38.5%	
	^	24 months	NA	0%	30%	
	-	30 months ad 30 months	NA NA	NA NA	8% 0%	
	Beyon					
	Notwit	nstanding anything contained he	rein or o	otherwise.	no	
		of premium shall be made in re				
	1					



Lifeline	Office : 21, Patullos Road, Chennai - 600 002	formation Shoot
Lifeline	where, any claim has been admitted or has been lodged or any	Formation Sheet
	benefit has been availed by the insured person under the policy.	
	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.	
	For half- yearly payment mode	
	Upto 90 days- 50% Refund	
	Post 90 days- Nil	
	For Quarterly payment mode	
	Upto 30 days- 50%	
	After 30 days- Nil	
	For Monthly payment Mode	
	Cancellation- No refund	
	Automatic Cancellation:	
	a. Individual Policy:	
	The Policy shall automatically terminate on death of the Insured Person .	
	b. Family Floater Policies:	
	The Policy shall automatically terminate in the event of the leath of all the Insured Persons.	
	c. Refund:	
	A refund in accordance with the table in Section F.1.7 above shall be payable if there is an automatic cancellation of the Policy provided that no claim has been filed under the Policy by or on behalf of any Insured Person.	
Claims	For cashless service – weblink of network hospital royalsundaram.in/health-insurance	
		C C
	Intimation – Before 3 days in case of planned hospitalisation and within 2 days of admission in case of emergency hospitalisation.	G



(Formerly known as Royal Sundaram Alliance Insurance Company Limited) Corp. Office : Vishranthi Melaram Towers, No. 2 / 319, Rajiv Gandhi Salai (OMR) Karapakkam, Chennai - 600097. Regd. Office : 21, Patullos Road, Chennai - 600 002

Lifeline	Office : 21, Patullos Road, Chennai - 600 002 Customer Information Sheet							
	Claim Document submission: within 30 days from the date of discharge.							
Policy Servicing/ Grievances/Complaints	<ul> <li>Grievances/Complaints -Company Officials: Mr. T M Shyamsunder – Grievance Redressal Officer</li> <li>IRDAI/(IGMS/Call Centre): - <u>https://igms.irda.gov.in/</u> - IRDA Grievance toll-free number: 155255</li> <li>Ombudsman Details– Please refer Annexure 1 to Customer Information Sheet</li> </ul>	F.1.16						
Insured's Rights	<b>Free Look:</b> The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy.							
	The insured person shall be allowed free look period of fifteen days from date of receipt of the policy document to review the terms and conditions of the policy, and to return the same if not acceptable.							
	If the insured has not made any claim during the Free Look Period, the insured shall be entitled to							
	<ul> <li>i. a refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges or</li> <li>ii. where the risk has already commenced and the option of return of the policy is exercised by the insured person, a deduction towards the proportionate risk premium for period of cover or</li> <li>iii. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period;</li> </ul>	F.1.15						
	<b>Implied renewability:</b> Renewal of the Policy will not ordinarily be denied other than on grounds of moral hazard, misrepresentation or fraud or non-cooperation by You.							
	• Migration and Portability related queries please email us at <u>healthpolicy.helpdesk@royalsundaram.in</u> and write us at: Royal Sundaram Insurance Co. Ltd.							



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Lifeline	Customer Information Sheet							
	2 <sup>nd</sup> Floor, Delphi C-wing,							
	Hiranandani Business Park, Powai,							
	Mumbai- 400076							
	• Increase in SI during the Policy term is not allowed.							
	• Turn Around Time (TAT) for issue of PreAuth and settlement of Reimbursement							
	Cashless - 3 hours from time of receipt of all requisite documents Reimbursement $-21$ days from the date of receipt of all requisite documents							
	Customer has an option to choose installment payment options i.e. Monthly, quarterly and half-yearly mode.							
Insured's Obligations	<ul> <li>Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.</li> <li>Disclosure of Material Information during the policy period such as change in occupation</li> </ul>							
Policy Tenure	1 year / 2 years / 3 years							

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.

(Formerly known as Royal Sundaram Alliance Insurance Company Limited)

Corp. Office : Vishranthi Melaram Towers, No. 2 / 319, Rajiv Gandhi Salai (OMR) Karapakkam, Chennai - 600097. Regd. Office : 21, Patullos Road, Chennai - 600 002

Lifeline

Royal Sundaram

#### Customer Information Sheet

							es offered on individual an							
Age of the members insured	Coverage opted on individual basis covering each member of the family separately (at a signle point in time)		Coverage opted on individual basis covering multiple member of the family under 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 entire family)				Coverage opted on family floater basis with overall sum insured (Only one sum insured is available for entire family)			
	Individual						2 Adult				2 Adult 2 Child			
	Premium (Rs.)	Sum Insured (Rs.)	Premium (Rs.)	Discount if any	Premium after Discount	Sum Insured (Rs.)	Premium (Rs.)	Floater Discount, i anv	discount (Rs.)	Sum Insured (Rs.)	Premium (Rs.)	Floater Discount, if any	discount (Rs.)	Sum Insured
18	₹ 3,523	2 lakh Classic	NA	NA	NA	NA	₹ 5,312	₹ 0	₹ 5,312	2 lakh Classic	₹ 9,864	₹0	₹ 9,864	2 lakh Clas
25	₹ 3,740	2 lakh Classic	NA	NA	NA	NA	₹ 5,468	₹ 0	₹ 5,468	2 lakh Classic	₹ 10,024	₹ 0	₹ 10,024	2 lakh Clas
35	₹ 5,286	2 lakh Classic	NA	NA	NA	NA	₹ 7,288	₹0	₹ 7,288	2 lakh Classic	₹ 12,534	₹0	₹ 12,534	2 lakh Clas
45 55	₹ 9,175 ₹ 16,438	2 lakh Classic 2 lakh Classic	NA NA	NA NA	NA NA	NA NA	₹ 12,328 ₹ 22,145	₹0 ₹0	₹ 12,328 ₹ 22,145	2 lakh Classic 2 lakh Classic	₹ 17,548 ₹ 27,315	₹ 0 ₹ 0	₹ 17,548 ₹ 27,315	2 lakh Clas 2 lakh Clas
65	₹ 28,108	2 lakh Classic	NA	NA	NA	NA	₹ 38,296	₹0	₹ 38,296	2 lakh Classic	₹ 43,382	₹0	₹ 43,382	2 lakh Clas
70	₹ 35,918	2 lakh Classic	NA	NA	NA	NA	₹ 49,232	₹0	₹ 49,232	2 lakh Classic	₹ 54,262	₹0	₹ 54,262	2 lakh Clas
														1
18	₹ 4,404	4 lakh Classic	NA	NA	NA	NA	₹ 6,640	₹ 0	₹ 6,640	4 lakh Classic	₹ 11,097	₹0	₹ 11,097	4 lakh Clas
25	₹ 4,675	4 lakh Classic	NA	NA	NA	NA	₹ 6,835	₹ 0	₹ 6,835	4 lakh Classic	₹ 11,295	₹0	₹ 11,295	4 lakh Clas
35	₹ 6,608	4 lakh Classic	NA	NA	NA	NA	₹ 9,110	₹0	₹ 9,110	4 lakh Classic	₹ 14,347	₹0	₹ 14,347	4 lakh Clas
45 55	₹ 11,469 ₹ 20,548	4 lakh Classic 4 lakh Classic	NA NA	NA NA	NA NA	NA NA	₹ 15,410 ₹ 27,682	そ 0 そ 0	₹ 15,410 ₹ 27,682	4 lakh Classic 4 lakh Classic	₹ 20,614 ₹ 32,823	そ 0 そ 0	₹ 20,614 ₹ 32,823	4 lakh Clas 4 lakh Clas
65	₹ 35,135	4 lakh Classic	NA	NA	NA	NA	₹ 47,870	₹0	₹ 47,870	4 lakh Classic	₹ 52,906	₹0	₹ 52,825	4 lakh Clas
70	₹ 44,898	4 lakh Classic	NA	NA	NA	NA	₹ 61,541	₹0	₹ 61,541	4 lakh Classic	₹ 66,506	₹0	₹ 66,506	4 lakh Clas
	,								,					
18	₹ 4,570	5 lakh Supreme	NA	NA	NA	NA	₹ 6,891	₹0	₹ 6,891	5 lakh Supreme	₹ 11,320	₹0	₹ 11,320	5 lakh Supr
25	₹ 4,852	5 lakh Supreme	NA	NA	NA	NA	₹ 7,094	₹0	₹ 7,094	5 lakh Supreme	₹ 11,525	₹0	₹ 11,525	5 lakh Supr
35	₹ 6,858	5 lakh Supreme	NA	NA	NA	NA	₹ 9,454	₹0	₹ 9,454	5 lakh Supreme	₹ 14,678	₹ 0	₹ 14,678	5 lakh Supr
45	₹ 11,902	5 lakh Supreme	NA	NA	NA	NA	₹ 15,993	₹0	₹ 15,993	5 lakh Supreme	₹ 21,183	₹0	₹ 21,183	5 lakh Supr
55	₹ 21,325 ₹ 36,463	5 lakh Supreme	NA NA	NA NA	NA NA	NA	₹ 28,728 ₹ 49,679	₹ 0 ₹ 0	₹ 28,728 ₹ 49,679	5 lakh Supreme	₹ 33,852 ₹ 54,695	₹ 0 ₹ 0	₹ 33,852 ₹ 54,695	5 lakh Supr
70	₹ 46,595	5 lakh Supreme 5 lakh Supreme	NA	NA	NA	NA NA	₹ 64,324	₹0 ₹0	₹ 64,324	5 lakh Supreme 5 lakh Supreme	₹ 54,695 ₹ 68,809	₹0	₹ 54,695	5 lakh Supr 5 lakh Supr
70	( 40,393	5 akii Supreme	NA	INA	INA	INA	( 04,324	τ0	C 04,324	5 lakii Supreme	1 08,809	τ0	< 08,809	5 akii Supre
18	₹ 5,976	10 lakh Supreme	NA	NA	NA	NA	₹ 9,011	₹0	₹ 9,011	10 lakh Supreme	₹ 13,288	₹0	₹ 13,288	10 lakh Supr
25	₹ 6,345	10 lakh Supreme	NA	NA	NA	NA	₹ 9,869	₹ 0	₹ 9,869	10 lakh Supreme	₹ 13,611	₹ 0	₹ 13,611	10 lakh Supr
35	₹ 8,968	10 lakh Supreme	NA	NA	NA	NA	₹ 12,363	₹0	₹ 12,363	10 lakh Supreme	₹ 17,572	₹0	₹ 17,572	10 lakh Supr
45	₹ 15,564	10 lakh Supreme	NA	NA	NA	NA	₹ 20,913	₹ 0	₹ 20,913	10 lakh Supreme	₹ 26,078	₹0	₹ 26,078	10 lakh Supr
55	₹ 27,886	10 lakh Supreme	NA	NA	NA	NA	₹ 37,568	₹0	₹ 37,568	10 lakh Supreme	₹ 42,646	₹0	₹ 42,646	10 lakh Supr
65	₹ 47,683	10 lakh Supreme	NA	NA	NA	NA	₹ 64,965	₹0	₹ 64,965	10 lakh Supreme	₹ 69,902	₹0	₹ 69,902	10 lakh Supr
70	₹ 60,932	10 lakh Supreme	NA	NA	NA	NA	₹ 83,518	₹0	₹ 83,518	10 lakh Supreme	₹ 88,359	₹0	₹ 88,359	10 lakh Supr
18	₹ 37,723	50 lakh Elite	NA	NA	NA	NA	₹ 50,334	₹0	₹ 50,334	50 lakh Elite	₹ 76,065	₹0	₹ 76,065	50 lakh El
25	₹ 42,480	50 lakh Elite	NA	NA	NA	NA	₹ 55,857	₹0	₹ 55,857	50 lakh Elite	₹ 80,705	₹0	₹ 80,705	50 lakh El
35	₹ 47,789	50 lakh Elite	NA	NA	NA	NA	₹ 66,475	₹ 0	₹ 66,475	50 lakh Elite	₹ 91,323	₹0	₹ 91,323	50 lakh El
45	₹ 59,772	50 lakh Elite	NA	NA	NA	NA	₹ 81,820	₹0	₹ 81,820	50 lakh Elite	₹ 105,289	₹0	₹ 105,289	50 lakh El
55	₹ 83,557	50 lakh Elite	NA	NA	NA	NA	₹ 120,510	₹ 0	₹ 120,510	50 lakh Elite	₹ 143,589	₹ 0	₹ 143,589	50 lakh El
65	₹ 122,160	50 lakh Elite	NA	NA	NA	NA	₹ 204,673	₹ 0	₹ 204,673	50 lakh Elite	₹ 227,752	₹ 0	₹ 227,752	50 lakh E
70	₹ 156,011	50 lakh Elite	NA	NA	NA	NA	₹ 250,029	₹0	₹ 250,029	50 lakh Elite	₹ 267,551	₹0	₹ 267,551	50 lakh E
18	₹ 46,080	150 lakh Elite	NA	NA	NA	NA	₹ 65,404	₹0	₹ 65,404	150 lakh Elite	₹ 99,401	₹0	₹ 99,401	150 lakh E
25	₹ 46,080 ₹ 56,229	150 lakh Elite	NA	NA	NA	NA	₹ 65,404 ₹ 73,709	₹0 ₹0	₹ 65,404 ₹ 73,709	150 lakh Elite	₹ 99,401 ₹ 105.239	₹0	₹ 99,401 ₹ 105,239	150 lakh E
35	₹ 68,543	150 lakh Elite	NA	NA	NA	NA	₹ 82,226	₹0	₹ 82,226	150 lakh Elite	₹ 113,756	₹0	₹ 113,756	150 lakh E
45	₹ 83,554	150 lakh Elite	NA	NA	NA	NA	₹ 107,347	₹0	₹ 107,347	150 lakh Elite	₹ 136,616	₹0	₹ 136,616	150 lakh E
55	₹ 102,035	150 lakh Elite	NA	NA	NA	NA	₹ 145,448	₹ 0	₹ 145,448	150 lakh Elite	₹ 176,541	₹0	₹ 176,541	150 lakh E
65	₹ 146,778	150 lakh Elite	NA	NA	NA	NA	₹ 238,801	₹0	₹ 238,801	150 lakh Elite	₹ 269,894	₹0	₹ 269,894	150 lakh E
70	₹ 189,405	150 lakh Elite	NA	NA	NA	NA	₹ 295,919	₹ 0	₹ 295,919	150 lakh Elite	₹ 327,543	₹ 0	₹ 327,543	150 lakh E
1 premium for all members e policy (2Adult with 25 years and 2 children age < 18 yrs=4 members ) is Rs.14526/ Insured available for individual is Rs.2 lakhs	NA			NA				NA			Total premium when policy opted on a floater basis is Rs.10024/ Sum Insured of Rs.2 lakhs is available for the entire family		NA	



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