Annexure - A **CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY**

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

through your policy document.				
SI No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number	
1	Name of Insurance Product/Polic y	Corona Rakshak Policy, Universal Sompo General Insurance Company		
2	Policy Number	<<>>>		
3	Type of Insurance Product/Polic y	Benefit Basis Only Benefit: Where an Insurance Policy pays a fixed amount under the policy on the occurrence of a covered event.		
4	Sum Insured (Basis) (Along with amount)	 Individual Sum Insured -Where each member has a separate sum insured under the policy This policy is on individual sum insured basis. <sum (in="" 2,50,000="" available="" basis.="" fifty="" from="" individual="" insured="" multiples="" of="" on="" rs.50,000="" the="" thousand)="" to="">></sum> 		
5	Policy Coverage (What the policy covers?) (Policy Clause Number/s)	Lump sum benefit equal to 100% of the Sum Insured shall be payable on positive diagnosis of COVID, requiring hospitalization for a minimum continuous period of 72 hours. The positive diagnosis of COVID shall be from a government authorized diagnostic centre. i)Payment will be made only on Hospitalisation for a minimum continuous period of 72 hours following positive diagnosis for COVID. ii. This is onetime benefit applicable for the entire tenure of the Policy and shall terminate upon payment of this benefit.	Section D	

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	Exclusions (What the policy does not cover)	policy commencement date.	Section E.1 E.2
		E.1. Standard Exclusions	
		The Company shall not be liable to make any payment under the policy, in respect of any expenses incurred in connection with or in respect of:	
		E.1.1. Investigation & Evaluation (Code- Excl04)	
6		i Expenses related to any admission primarily for diagnostics and evaluation purposes. ii Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment.	
		E.2. Specific Exclusions:	
		E.2.1. Any diagnosis which is not related and not incidental to COVID is not covered in this Policy E.2.2. Testing done at a Diagnostic centre which is not authorized by the Government shall not be recognized under this Policy E.2.3. Any claim with respect to COVID manifested prior to commencement date of this policy or during. E.2.4. Cover under this Policy shall cease if the Insured Person travels to any country placed under travel restriction by the Government of India.	
7	Waiting Period • Time period during which specified diseases/trea	15 days from the first policy commencement	Section C - M
	tments are not covered • It is counted from the beginning of	date	
	beginning of		

	the policy coverage.		
8	Financial limits of coverage i. Sub-limit (It is a predefined limit and the insurance company will not pay any amount in excess of this limit) ii. Copayments (It is a specified amount/percentage of the admissible claim amount to be paid by policyholder/insured). iii. Deductible (It is a specified amount: - up to which an insurance company will not pay any claim, and - which will be deducted from total claim amount (if claim amount is more than	NA	

	the specified amount) iv. Any other limit (as applicable)		
	Claims/Claim s Procedures	1. Claim intimation: Claim intimation can be done online on our Health Serve Web Portal or by calling at our toll free number 1800 200 4030 or by emailing us at healthserve@universalsompo.com i Within 24 hours from the date of emergency hospitalization required ii At least 48 hours prior to admission in Hospital in case of a planned Hospitalization. 2. Reimbursement Process:	Section G
9		Follow below steps to avail reimbursement facility through our In house Health Claims Management: Step I: Visit our Web Portal to register claim or Call our Health Helpline 1800 200 4030 or email us at healthserve@universalsompo.com and inform about your claim.	
		Step II: Visit hospital and undergo your treatment. Settle your hospitalization bill and	

collect all the documents after discharge from the hospital.

Step III: Fill in Reimbursement Claim Form and submit all original documents to our below mention office for reimbursement.
Universal Sompo General Insurance Company

Universal Sompo General Insurance Company Limited,

Health Claims Management Office, 1st FloorC-56- A/13, Block- C Sector- 62, Noida.

Uttar Pradesh, Pincode: 201309

Step IV: On receipt of document your claim will processed as per Terms & Conditions of policy and the same will be communicated over SMS & Email.

Step V: Outcome of the claim will be communicated within 15 days from date of Submission of claim

3.Documents to be submitted

- i. Duly filled and signed Claim Form
- ii. Copy of Insured Person's passport, if available (All pages)
- iii. Photo Identity proof of the patient (if insured person does not own a passport)
- iv. Medical practitioner's prescription advising admission
- v. Discharge summary including complete medical history of the patient along with other details.

- vi. Investigation reports including Insured
 Person's Test Reports from Authorized
 COVID-19 testing centre
- vii. NEFT Details (to enable direct credit of claim amount in bank account) and cancelled cheque
- viii. KYC (Identity proof with Address) of the proposer, where claim liability is above Rs

 1 Lakh as per AML Guidelines
- ix. Legal heir/succession certificate, wherever applicable
- x. In the event of a claim lodged under the Policy and the original documents having been submitted to any other insurer, the Company shall accept the copy of the documents and claim settlement advice, duly certified by the other insurer subject to satisfaction of the Company.

Any other relevant document required by Company for assessment of the claim.

4.Claim Settlement (provision for Penal Interest)

- i The Company shall settle or reject a claim, as the case may be, within 15 days from the date of submission of the claim.
- ii In the case of delay in the payment of a claim, the Company shall be liable to pay interest from the date of receipt date of receipt of intimation to till the date of payment.
- iii However, where the circumstances of a claim warrant an investigation in the opinion of the Company, it shall initiate and complete such investigation at the

	earliest in any case not later than 15 days from the date of submission of claim. iv In case of delay beyond stipulated 15 days the company shall be liable to pay interest at a rate 2% above the bank rate from the date of receipt of intimation to till the date of payment.	
	5.Payment of Claim	
	All claims under the policy shall be payable in Indian currency only. On payment of 100% of sum insured the policy will be terminated.	
	Provide the details/web link for following: i. Network Hospital details: Available on website: www.universalsompo.com. ii. Helpline Number:	
	Toll Free Numbers: 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030, Senior Citizen: 1800-267-4030	
	iii. Hospitals which are blacklisted or from where no claims will be accepted by insurer: Available on website: www.universalsompo.com. iv. Downloading/getting claim form: Available on website: www.universalsompo.com. iv. Downloading/getting claim form: Available on website: www.universalsompo.com.	
Policy Servicing	1.Universal Sompo General Insurance Co. Ltd.	Annexure
3	Unit No. 601 & 602, 6th Floor, Reliable Tech Park, Cloud City Campus; Thane- Belapur Road, Airoli, Navi Mumbai- 400708 2.Toll Free Numbers: 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030 3.E-mail Address: contactus@universalsompo.com. Note: Please include Your Policy number for	
	•	from the date of submission of claim. iv In case of delay beyond stipulated 15 days the company shall be liable to pay interest at a rate 2% above the bank rate from the date of receipt of intimation to till the date of payment. 5.Payment of Claim All claims under the policy shall be payable in Indian currency only. On payment of 100% of sum insured the policy will be terminated. Provide the details/web link for following: i. Network Hospital details: Available on website: www.universalsompo.com. ii. Helpline Number: Toll Free Numbers: 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030, Senior Citizen: 1800-267-4030 iii. Hospitals which are blacklisted or from where no claims will be accepted by insurer: Available on website: www.universalsompo.com. iv. Downloading/getting claim form: Available on website: www.universalsompo.com. iv. Downloading/getting claim form: Available on website: www.universalsompo.com. 1.Universal Sompo General Insurance Co. Ltd. Unit No. 601 & 602, 6th Floor, Reliable Tech Park, Cloud City Campus; Thane- Belapur Road, Airoli, Navi Mumbai- 400708 2.Toll Free Numbers: 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030 3.E-mail Address:

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		Grievances/	Grievances:	Annexure
		Complaints	If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, you can address Your grievance as follows:	
			Step 1: Contact Us	
			Write us at: Customer Service Universal Sompo Insurance Co. Ltd Unit No: 601 & 602, 6 th Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra-400708	
			E- mail Address: Contactus@universalsompo.com	
			For more details:	
			Toll Free Numbers: 1800-22-4030 or 1800-200-4030	
	11		Senior Citizen toll free number: 1800-267-4030	
			Step 2: Grievance Cell	
			If the resolution you received does not meet your expectations, you can directly write to our Grievance Id. After examining the matter, the final response would be conveyed within two weeks from the date of receipt of your complaint on this email id.	
			Customer Service Universal Sompo Insurance Co. Ltd Unit No: 601 & 602, 6 th Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra-400708	
			E- mail Address: grievance @universalsompo.com	
			For more details: www.universalsompo.com	

Visit Branch Grievance Redressal Officer (GRO) - Walk into any of our nearest branches and request to meet the GRO.

- We will acknowledge receipt of your concern Immediately
- Seek and obtain further details, if any, from the complainant (permitted only once) Within one week
- Within 2 weeks of receiving your grievance, we will respond to you with the best solution.
- We shall regard the complaint as closed incase on non-receipt of reply from the complainant Within 8 weeks from the date of registration of the grievance

Step 3: Chief Grievance Redressal Officer

In case, you are not satisfied with the decision/resolution of the above office or have not received any response within 15 working days, you may write or email to:

Customer Service Universal Sompo Insurance Co. Ltd Unit No: 601 & 602, 6th Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra-400708

E- mail Address:gro@universalsompo.com

For More details: www.universalsompo.com

Company's Grievance Redressal Officer

For updated details of grievance officer, kindly refer the link https://www.universalsompo.com/resourse-grievance-redressal

Step 4: Insurance Ombudsman

Bima Bharosa Portal Link:

https://bimabharosa.irdai.gov.in/

You can approach the Insurance Ombudsman depending on the nature of grievance and financial implication, if any. Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at www.irdai.gov.in, or of the General Insurance Council at https://www.gicouncil.in/, the Consumer Education Website of the IRDAI at http://www.policyholder.gov.in, or from any of Our Offices.

The updated contact details of the Insurance Ombudsman offices can be referred by clicking on the Insurance ombudsman official site:

https://www.cioins.co.in/Ombudsman.

Note: Grievance may also be lodged at IRDAIhttps://bimabharosa.irdai.gov.in/.

Note: Please refer the Contact details of the Insurance Ombudsman mentioned in Policy wordings under Annexure B section

Things to remember

Material Change: The Insured shall notify the Company in writing of any material change in the risk in relation to the declaration made in the proposal form or medical examination report and the Company may, adjust the scope of cover and/or premium, if necessary, accordingly endorsement. issuance of bν Records to be maintained: The Insured Person shall keep an accurate record containing all relevant medical records and shall allow the Company or its representatives to inspect such records. The Policyholder or Insured Person shall furnish such information as the Company may require for settlement of any claim under the Policy, within reasonable time limit and within the time limit specified in the Policy.

Notice & Communication: Any notice. other direction. instruction or any communication related to the Policy should be made in writing. Such communication shall be sent to the address of the Company or through any other electronic modes specified in the The Policy Schedule. Company shall communicate to the Insured at the address or through any other electronic mode mentioned in the schedule.

Territorial Limit: The company's liability to make any payment under the policy will be within India only.

Automatic termination: This policy shall terminate for the Insured immediately on the earlier of the following events irrespective of the expiry date mentioned in the policy schedule

- Upon the demise of the covered person.
- •Upon payment of an admissible claim and settlement of 100% of Sum Insured specified in the Policy Schedule.

Territorial Jurisdiction: All disputes or differences under or in relation to the interpretation of the terms, conditions, validity, construct, limitations and/or exclusions contained in the Policy shall be determined by the Indian court and according to Indian law.

Endorsements (Changes in Policy): This policy constitutes the complete contract of insurance. This Policy cannot be modified by

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		anyone (including an insurance agent or broker) except the company. Any change made by the company shall be evidenced by a written endorsement signed and stamped.	
		Cancellation: The Insured may cancel this Policy by giving 7 days' written notice, and in such an event, the Company shall refund premium for the unexpired Policy Period as per the rates detailed below.	
		<u>a</u>) If no claim has been made during the policy period, a proportionate refund of the premium will be issued based on the number of unexpired days. The date of cancellation request will be considered as expiry date of coverage	
		b) If the claim has been made in the current policy year, the premium for the remaining policy year(s) will be refunded on cancellation	
	Your Obligations	Please disclose in the proposal form all the diseases, conditions which you are aware at the time of buying the policy. Please disclose pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement. Disclosure of other material information during the policy period.	
13		Universal Sompo General Insurance Co. Ltd.	
		 Unit No. 601 & 602, 6th Floor, Reliable Tech Park, Cloud City Campus; Gut No-31, Thane- Belapur Road, Airoli, Navi Mumbai-400708 Toll Free Numbers: 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030 E-mail Address: contactus@universalsompo.com 	

Declaration by the Policy Holder I have read the above and confirm having noted the details. Place: Date: Date: PolicyHolder) Note: i. Weblink to Access product related documents: Universal Sompo | Resources Downloads

ii. In case of any conflict, the terms & conditions mentioned in the policy document shall prevail.