



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

MASTER PRODUCT -TOTAL HEALTH PLUS

Customer Information Sheet			
Description is illustrative and not exhaustive			
S. No.	Title	Description	Refer to Policy Clause Number
1	Product Name	MASTER PRODUCT - TOTAL HEALTH PLUS	
2	What am I Covered for	Hospitalization expenses that are incurred as in-patient during the policy period.	C-Benefits-1
		Pre-Hospitalization medical expenses incurred 30 days (Gold plus plan)/60 days (Platinum plus plan) prior to hospitalisation.	C-Benefits-1e
		Post Hospitalization medical expenses incurred within 60 days (Gold plan)/90 days (Platinum plan) from date of discharge from the hospital.	C-Benefits-1f
		Day care procedures which do not require 24 hours hospitalization.	C-Benefits-1g
		Accident Hospitalisation - A reimbursement of 50% sum insured is applicable to the Insured Person in case of accidental hospitalization. This sum insured can be utilized only after exhaustion of the available Sum Insured under the hospitalisation benefit	E-Additional benefits-2
		Ambulance Charges - An amount of Rs. 1500/- per admissible hospitalization shall be payable towards Emergency ambulance charges for transporting the patient to the hospital and overall policy limit up to Rs.3000/- will be reimbursed on producing the bills in original.	E-Additional benefits-3
		Maternity Benefit - Covered of 10% of the Sum Insured subject to maximum of Rs. 30,000/- (under Gold Plus Plan) & Rs.50000/- (under Platinum Plus Plan) is payable under the maternity benefit. This benefit shall be applicable only in respect of delivery of first two living children.	E-Additional benefits-5
		Hospital Cash - A daily benefit of Rs. 500/- (under Gold Plus Plan) / Rs. 1000 (under Platinum Plus Plan) as per the schedule is payable on minimum 24 hours hospitalization to a maximum limit of 30 days per annum. This benefit follows admitted liability under hospitalization benefit.	E-Additional benefits-6
		Outpatient Treatment (Applicable for Platinum Plans only) - Cover towards Out patient treatment charges upto Rs.2500/-.	E-Additional benefits-7
3	What are the major exclusions in the policy	The cost of spectacles, contact lenses and hearing aids under Hospitalization benefit	D-Exclusions (ii)-35
		Any other alternative medicine except Allopathy(Modern Medicine).	D-Exclusions(ii)-20
		Costs of donor screening or treatment including surgery to remove organs in the event of the insured acting as a donor	D-Exclusions(ii)-29
		Any treatment received outside India.	D-Exclusions(ii)-19
		Hospitalization directly or indirectly in consequence of AIDS and related diseases.	D-Exclusions(ii)-7
		The treatment of psychiatric, psychosomatic disorders, mental or insanity related diseases	D-Exclusions(ii)-13
		Genetic disorders and stem cell implantation/ surgery / storage.	D-Exclusions(ii)-32
		Treatment by a family member or self-medication or any treatment that is not scientifically recognized	D-Exclusions(ii)-28
		Sex change or treatment, which results from, or is in any way related to, sex change.	D-Exclusions(ii)-10
Pre Existing Disease and any disease, illness, medical condition, injury, which is a complication of a Pre Existing Disease. (Applicable for Hospital Cash Benefit section only)	Exclusions for Hospital cash 1.1		
Note: The above is a partial listing of the policy exclusions, Please refer to the policy clauses for the full listing			
4	Waiting Period	Initial waiting period: Diseases contracted during the first 30 days from the Commencement Date of the Policy(not applicable for accident).	D-Exclusions(i)-2
		Specific waiting periods :	D-Exclusions(i)-3
		12 months: Congenital Internal Anomaly, Any type of Migraine/Vascular head ache, Stones in the Urinary and Biliary systems, Surgery on Tonsils/Adenoids, Gastric and Duodenal Ulcer, Any type of Cyst/Nodules/Polyps/Benign Tumours/Breast Lumps unless caused by accident.	

		24 months: Spondylosis/Spondilitis, Any type, Inter vertebral Disc Prolapse and such other Degenerative Disorders, Cataract, Benign Prostatic Hypertrophy, Hysterectomy, Salphingo – Oophorectomy, Fistula, Fissure in Anus, Piles, Hernia, Hydrocele, Sinusitis and Deviated Nasal Septum, Heart ailments, Chronic Renal Failure or end stage Renal Failure, Any type of cancer including but not limited to Carcinoma/Sarcoma Blood Cancer, Diabetes and its related complications both direct and indirect, Hypertension and its related complications both direct and indirect, Organ Transplant, Retinal detachment surgery with or without vitrectomy unless caused by accident.	D-Exclusions(i)-4
		36 months: Osteoarthritis of any joint, Treatment of Joint replacement Surgery by any cause other than accident, Chronic Obstructive Pulmonary Disease (C.O.P.D), Operations for age related macular degeneration (ARMD) or choroidal neo vascular membrane (CNVM), unless caused by accident.	D-Exclusions(i)-5
		36 months - Expenses incurred towards Maternity	E-Additional Benefits-5-C
		Pre-existing diseases: Covered after 36 months under hospitalization benefit.	D-Exclusions(i)-1
5	Payout Basis	Reimbursement of covered expenses up to specified limits mentioned in the Schedule / Certificate of this policy AND / OR Fixed amount on the occurrence of a covered event AND / OR Daily cash Benefit for each completed 24 hours of hospitalization.	C-Benefits&E-Additional Benefits
6	Cost Sharing	In case of a claim, this policy requires you to share the following costs: Expenses exceeding the following Sub-limits: Room/ ICU charges A limit of 2% and 4% of the Sum insured per day respectively (applicable only for Gold Plus plan)	C-Benefits-1a
		Specified diseases: Cataract - 10% of the Sum Insured subject to a maximum of Rs.50,000/- Dialysis, Chemotherapy and Radiotherapy - 10% of the Sum insured per month Physiotherapy Charges Rs.250/- per day	C-Benefits-1h
		Ambulance Charges Rs.1500/- per admissible hospitalization Rs.3000/- per policy period. Maternity Benefit Upto Rs.30,000/- under Gold Plus Plan Upto Rs.50,000/- under Platinum Plus plan	E- Additional Benefits 3 & 5
7	Renewal Condi- tions	Life long renewal provided premium is paid on / before the expiry date of the policy or grace period of 30 days.	F-Conditions-13
		In the event of mis-description, fraud, non co-operation by you or non disclosure of material facts coming to our knowledge, policy shall not be considered for renewal.	F-Conditions-13
		The Policy shall be withdrawn at any time by the company by giving three months notice to the insured/proposer. A suitable alternate product will be made available at the time of withdrawal.	F-Conditions-13
		At renewal, the coverages, terms & conditions & premium may change, in which case a three months notice shall be sent to the Proposer/Insured.	F-Conditions-13
8	Renewal Benefits	Indexation - The sum insured would be increased by slabs of 10% subject to a maximum accumulation of 5 slabs and applicable only for Hospitalization benefit. This benefit is not applicable for pre-existing disease	E-Additional benefits-1
		No Claim Discount: The renewal premium shall be reduced by 5% if there is no claim for that insured person under expiring policy and in floater policy if there is no claim for all members under expiring policy.	C-Benefits, Additional Features - 4
		Health Checkup - A maximum amount of Rs.1500/- (Gold Plus plan) and Rs.3000/- (Platinum Plus Plan) is reimbursed after each 4 consecutive claim free years. In respect of a floater policy, if a claim is reported/admitted/settled under the policy, no insured member shall be eligible for the above benefit.	E-Additional benefits-4
9	Cancellation	The Company may at any time cancel this Policy on the grounds of mis-representation, fraud, non-disclosure of material facts on the Proposal Form or non-cooperation by the Insured, by giving fourteen (14) days notice in writing by courier / registered post / acknowledgement due post to the Insured at address recorded / updated in the policy	F-Conditions-4
		The insured may also cancel the policy by giving 15 days notice in writing to the company.	F-Conditions-4
		Free look in: At the inception of the policy the insured will be allowed a period of 15 days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable and the refund in such case shall be subject to terms and conditions of the policy.	F-Conditions-20
10	Claim Form Availability	The standard claim form (Part A and Part B) and the cashless pre-authorisation request form are available in our website for ready reference. The same may be also obtained from any of our offices on request.	-
11	Network Hospitals of TPA	The updated Network Hospital List may be obtained from the website of our TPA. Please note the Network Hospitals of the TPA are subject to change	-
(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.			

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