

Corona Kavach Policy, Edelweiss General Insurance Company Limited



Customer Information Sheet

(Description is illustrative and not exhaustive)

Sr. No	Title	Description	Refer to Policy Clause Number
1	Product Name	Corona Kavach Policy, Edelweiss General Insurance Company Limited	
2	What am I (customer) covered for?	a. Hospitalization expenses- Medical expenses incurred on hospitalization for Covid for minimum period of 24 hours including pre-hospitalization expenses for a period of 15 days and post hospitalization expenses for a period of 30 days .	4.1,4.4,4.5
		b. Ambulance Charges: Expenses on road Ambulance subject to a maximum of ₹2,000/- per hospitalization.	4.1
		c. Home Care treatment expenses-Costs of treatment incurred by the insured person on availing treatment at home maximum up to 14 days per admission as per policy terms and conditions including pre-hospitalization expenses for a period of 15 days and post hospitalization expenses for a period of 30 days.	4.2
		d. AYUSH Coverage- Medical expenses incurred on hospitalization for Covid under AYUSH Treatment	4.3
		e. Hospital Daily Cash	5.1

Benefit Illustration in respect of policies offered on Individual and Family floater basis

Age of the members insured	Coverage opted on individual basis covering each member of the family separately (at a single point in time)		Coverage opted on individual basis covering multiple members of the family under a 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 the entire family)			
	Premium (Rs.)	Sum insured (Rs.)	Premium (Rs.)	Discount, if any	Premium after discount (Rs.)	Sum insured (Rs.)	Premium or consolidated premium for all members of family (Rs.)	Floater discount, if any	Premium after discount (Rs.)	Sum insured (Rs.)
65	1,819	5,00,000	1,819	5%	1,728	5,00,000	1,819		NA	5,00,000
60	1,819	5,00,000	1,819	5%	1,728	5,00,000	1,819		NA	
35	1,260	5,00,000	1,260	5%	1,197	5,00,000	1,260		NA	
30	1,260	5,00,000	1,260	5%	1,197	5,00,000	1,260		NA	
Total	6,158		6,158		5,850		6,158	5%	5,853	
"Total Premium for all members of the family is INR 6,158, when each member is covered separately. Sum insured available for each individual is Rs. 5,00,000."			"Total Premium for all members of the family is INR 5,850, when they are covered under a single policy. Sum Insured available for each family member is Rs.5,00,000."				"Total Premium when opted on a floater basis is INR 5,853. Sum Insured of Rs. 5,00,000 is available for the entire family."			

"Note: Premium rates specified in the above illustration shall be standard premium rates without considering any loading. Also, the premium rates shall be exclusive of taxes applicable"

Sr. No	Title	Description	Refer to Policy Clause Number	
3	What are the Major exclusions in the policy	Following is a partial list of the policy exclusions. Please refer to the policy document for the complete list of exclusions:		
		a. Admission primarily for investigation & evaluation	7.1	
		b. Admission primarily for rest Cure, rehabilitation and respite care	7.2	
		C. Any claim in relation to Covid where it has been diagnosed prior to Policy Start Date.	7.5	
		d. Day Care treatment and OPD treatment	7.6	
4	Waiting period	Expenses related to the treatment of Covid within 15 days from the policy commencement date shall be excluded	6.1	
5	Payment basis	The Base Cover is on indemnity basis and Optional Cover is on Benefit Basis.		
6	Cancellation	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 7 days' written notice .	9.9	
7	Claims	a. For Cashless Service: Please refer the below links where from where Hospital Network details can be obtained https://www.paramounttpa.com/Home/ProviderNetwork.aspx https://www.edelweissinsurance.com/health-insurance/-/section/health-home	8.1,8.2	
		b. For Reimbursement of Claim: For reimbursement of claims the insured person may submit the necessary documents to TPA/Company within the prescribed time limit as specified hereunder.		
		Sl. No.	Type of Claim	Prescribed Time limit
		1	Reimbursement of hospitalization and pre hospitalization expenses	Within thirty days of date of discharge from hospital
		2	Reimbursement of post hospitalization expenses	Within fifteen days from completion of post hospitalization treatment
		3	Reimbursement of Home Care expenses	Within thirty days from completion of home care treatment
		For details on claim procedure please refer the policy document.		
8	Policy Servicing	For detailed terms and conditions, queries and grievances, please refer to our Website www.edelweissinsurance.com Toll Free: 1800 12000 Email ID: support@edelweissinsurance.com Company Address : Edelweiss General Insurance Company Limited 5th Floor, Tower 3, Kohinoor City Mall, Kohinoor City, Kirod Road, Kurla (West), Mumbai – 400070		

	Grievances/ Complaints	<p>For easy and faster response, please feel free to contact on Call us at: 180012000 (Toll-Free) 022 42312000 (Call Charges applicable) Email us at: support@edelweissinsurance.com</p> <p>a. Please feel free to contact our Grievance Cell on Call us at: 1800120216216 Email: grievance@edelweissinsurance.com Address: Edelweiss General Insurance Company Limited, Kohinoor City, Mall, Tower 3, Kiroi Road, Kurla West, Mumbai 400070</p> <p>Senior citizens can also contact us on</p> <ul style="list-style-type: none"> • Contact Number: 02242312001 • Email:senior.citizen@edelweissinsurance.com <p>b. IRDAI Integrated Grievance Management System - https://igms.irda.gov.in/</p> <p>c. Insurance Ombudsman – The contact details of the Insurance Ombudsman offices have been provided as Annexure-A of Policy document.</p>	10
9	Insured's Rights	Insurer to specify the norms on TAT for Pre-Auth and Settlement of reimbursement	
10	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.	

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.



Ombudsman and Addresses

Mentioned below are contact details of Ombudsman:

Office Details	Jurisdiction of Office Union Territory, District
AHMEDABAD Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu
BENGALURU Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19, Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in	Karnataka
BHOPAL Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@cioins.co.in	Madhya Pradesh, Chattisgarh
BHUBANESHWAR Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar-751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@cioins.co.in	Orissa
CHANDIGARH Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@cioins.co.in	Punjab, Haryana(excluding Gurugram, Faridabad, Sonapat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.
CHENNAI Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@cioins.co.in	Tamil Nadu, Tamil Nadu PuducherryTown and Karaikal (which are part of Puducherry).
DELHI Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@cioins.co.in	Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh.
GUWAHATI Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
HYDERABAD Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.



Office Details	Jurisdiction of Office Union Territory, District
JAIPUR Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@cioins.co.in	Rajasthan
ERNAKULAM Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@cioins.co.in	Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.
KOLKATA Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@cioins.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.
LUCKNOW Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@cioins.co.in	Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
MUMBAI Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@cioins.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.
NOIDA Office of the Insurance Ombudsman, Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PATNA Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@cioins.co.in	Bihar, Jharkhand.
PUNE Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@cioins.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.