

Navi Health CritiCare

Customer Information Sheet

	Title	Description	Policy Clause Number
1	Product Name	Navi Health CritiCare – Navi General Insurance	(herein called as Navi Health CritiCare)
2	What am I covered for	<p><u>Navi Health CritiCare provides following coverages -</u></p> <p>I. CRITICAL ILLNESS - We will pay the Insured Person the Sum Insured as a lump sum amount for the covered critical illness listed below , which has manifested as a first incidence, subject to the waiting period -</p> <p><u>Group I - Cancer</u></p> <ol style="list-style-type: none"> 1. Cancer of Specific Severity <p><u>Group II - Heart Related Illnesses</u></p> <ol style="list-style-type: none"> 2. Myocardial Infarction (First Heart Attack of Specific Severity) 3. Open Chest CABG 4. Open Heart Replacement or Repair of Heart Valves 5. Pulmonary Artery Graft Surgery 6. Aorta Graft Surgery 7. Cardiomyopathy 8. Primary (Idiopathic) Pulmonary Arterial Hypertension 9. Coronary Artery Disease <p><u>Group III - Nervous System & Related Illness</u></p> <ol style="list-style-type: none"> 10. Stroke Resulting in Permanent Symptoms 11. Permanent Paralysis of Limbs 12. Motor Neurone Disease with Permanent Symptoms 13. Coma of Specific Severity 14. Multiple Sclerosis with Persisting Symptoms 15. Bacterial Meningitis 16. Benign Brain Tumour 17. Encephalitis 18. Major Head Trauma 19. Progressive Supranuclear Palsy 20. Primary Parkinson's Disease 21. Multiple System Atrophy 22. Alzheimer's Disease 23. Apallic Syndrome 24. Spinal Stroke 25. Creutzfeldt-Jakob Disease <p><u>Group IV -Major Organ Related Illnesses</u></p> <ol style="list-style-type: none"> 26. Kidney Failure Requiring Regular Dialysis 27. Major Organ / Bone Marrow Transplant 28. End Stage Liver Failure 29. End Stage Lung Disease 30. Progressive Scleroderma 	Section 3 – Scope of Cover

Navi Health CritiCare | UIN: NAVHLIP22062V032122

Navi General Insurance Limited

Registered Office: Salarpuria Business Centre, 4th Floor, 93, 5th A Block, Koramangala Industrial Layout, Bengaluru, Karnataka – 560095

Toll-free number: 1800 123 0004 | Website: www.naviinsurance.com | Email: insurance.help@navi.com

CIN: U66000KA2016PLC148551 | IRDAI Registration Number: 155

		<p>31. Aplastic Anaemia 32. Systemic Lupus Erythematosus 33. Good Pasture's Syndrome 34. Medullary Cystic Disease</p> <p><u>Group V - Disability Related Illness</u> 35. Loss of Limbs 36. Blindness 37. Deafness 38. Loss of Speech</p> <p><u>Group VI – Other Major Illness</u> 39. Third Degree Burns 40. Pneumonectomy 41. Muscular Dystrophy</p> <p>Once your claim has been accepted and paid under this Benefit then this benefit shall automatically cease with immediate effect in respect of that insured person. However, additional benefits, if opted shall continue till expiry of the Policy Period and Policy shall not be renewed thereafter. This Policy shall continue for other Insured Persons (if any) and shall be renewable.</p> <p>ii. SHE SMART - We will pay the Insured Person the Sum Insured as a lump sum amount for the covered critical illness listed below , which has manifested as a first incidence, subject to the waiting period -</p> <p>1. Severe Osteoporosis 2. Maternity Benefit</p> <p>A. <u>Pregnancy Complication Benefit</u> – We will pay for the below conditions and treatments if they occur atleast after 10 months from inception of the policy.</p> <ul style="list-style-type: none"> i. Disseminated Intravascular Coagulation ii. Eclampsia of pregnancy iii. Malignant Hydatidiform Mole iv. Gestational Choriocarcinoma <p>B. <u>Congenital Anomaly Benefit</u> - We will pay this benefit if unfortunately, your new born child suffers with any one or more of below congenital disabilities This benefit is applicable for your first 2 children.</p> <ul style="list-style-type: none"> a. Down's Syndrome b. Congenital Heart Disease <ul style="list-style-type: none"> i. Tetralogy of Fallot ii. Transposition of great arteries iii. Ebstein's anomaly c. Spina Bifida 	
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	<p>III. ADDITIONAL CRITICAL ILLNESS - We will pay the Insured Person the Sum Insured as a lump sum amount for the covered critical illness listed below , which has manifested as a first incidence, subject to the waiting period –</p> <ol style="list-style-type: none"> 1. Early Stage Cancer 2. Intermediary Stage Cancer 3. Angioplasty <p>IV. SECOND CRITICAL ILLNESS - We will pay the Insured Person the Sum Insured as a lump sum amount, if second critical illness is diagnosed as a first incidence, subject to the waiting period–</p> <p>Once your claim has been accepted and paid under this Benefit then this benefit shall automatically cease with immediate effect in respect of that insured person. However, coverage under Additional Critical Illness / Personal Accident / SheSmart, if opted, shall continue till expiry of the policy. Policy shall not be renewed thereafter for that Insured Person.</p> <p>V. PERSONAL ACCIDENT - We will pay lumpsum amount, if you sustain an accidental Injury during the policy period resulting in death within 12 months from date of accident.</p> <p>Once your claim has been accepted and paid under this benefit then your Policy shall immediately and automatically cease with immediate effect. However, policy shall continue for other Insured Persons.</p> <p>VI. MEDICAL INFLATION BONUS - Your renewal sum insured will be increased by 10% of the previous Policy Sum Insured, on cumulative basis for each Policy Year irrespective of a claim in the expiring policy year. The benefit is subject to the following:</p> <ol style="list-style-type: none"> a. The accumulated medical inflation shall not exceed 50% of the sum insured or ₹ 7.5 lakhs whichever is lower. b. The entire medical inflation will be lost if the policy is not renewed on or before end of grace period. <p>VII. CHILD TUITION BENEFIT - We will pay lumpsum amount once under each of the below coverages (if claim is accepted) during the lifetime of the policy –</p> <ol style="list-style-type: none"> a. Critical Illness b. Second Critical Illness c. Personal Accident <p>This lump sum amount will be paid to the dependent child(ren) who are pursuing an educational course as a full-time student in any recognised educational institute at the time of such incident.</p>	
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		<p>a) We have paid your earlier claim of Cancer of Specified Illness /Major Stage Cancer.</p> <p>b) Such relapse is diagnosed after a period of 2 years post complete remission or from the last treatment / therapy received.</p> <p>XIV. ADJUVANT THERAPY - We will pay lumpsum amount If you are diagnosed with Cancer of Specified Severity / Major cancer and after undergoing primary medical or surgical treatment, you are recommended for Adjuvant Therapy.</p> <p>Provided that -</p> <p>i. We have paid a claim earlier for cancer under section – Cancer of Specified Illness / Major stage of cancer.</p> <p>ii. This coverage will not trigger if only primary medical or surgical treatment is advised or in case of Adjuvant therapy is advised before the primary treatment (Neo-Adjuvant Therapy)</p> <p>XV. CANCER SUPPORT - We will provide below mentioned additional support to the Insured person, if a claim is accepted under Section - Early Stage Cancer / Intermediary Stage of Cancer/ Cancer of Specified Severity or Major Stage Cancer.</p> <p>A. Expert Opinion – An expert opinion will be organised by our service provider.</p> <p>B. Cancer Counselling – Maximum of 10 sessions towards Genetic / Psychological / Lifestyle counselling to Insured /Insured’s dependents will be available.</p> <p>XVI. CARE RESTORE - We will restore the Sum Insured , if you are diagnosed with Second Primary Cancer, provided that-</p> <p>i. We have paid a claim earlier as a first incidence for the cancer under section – Cancer of Specified Illness / Major stage of cancer.</p> <p>ii. The Second Primary Cancer is diagnosed after a period of 3 years from the last diagnosis of Cancer of Specified Severity/Major Stage Cancer.</p> <p>iii. This benefit can be availed only once during the lifetime of a Policy provided Policy is renewed continuously without any break.</p>	
3	<p>What are the major Exclusions in the policy:</p>	<p>We will not pay for any claims arising directly or indirectly from:</p> <p>A. STANDARD EXCLUSIONS</p> <p>i. Substance related and Abusive Disorders</p> <p>ii. Breach of Law</p> <p>iii. Chemical and Nuclear Exposure</p> <p>iv. War</p>	<p>Section 4 – Exclusions</p>

		<p>B. EXCLUSIONS SPECIFIC TO THE POLICY WHICH CANNOT BE WAIVED</p> <ul style="list-style-type: none"> i. Pre-Existing Disease ii. Self-Inflicted Injuries or Attempted Suicide iv. External Congenital anomaly, disease or defects v. Dangerous Acts (Adventure/Professional Sports/Defence Operation) vi. Unrecognized Physician vii. Maternity and Pregnancy viii. Experimental or Unrecognized Treatment <p>Note: The above is an abridged wording/listing of the policy exclusions. For complete listing and wording of exclusions please refer to the policy clauses.</p>											
4	Waiting period	<p>Waiting Period will be applicable individually for each Insured Person and claims shall be assessed accordingly.</p> <p>Waiting Period * –</p> <table border="1" data-bbox="435 813 1212 1424"> <tr> <td>Waiting Period</td> <td>90 days (Inbuilt) Options - 30 / 60 days</td> </tr> <tr> <td>SheSmart Maternity Benefit</td> <td>10 months</td> </tr> <tr> <td>Second Critical Illness</td> <td> <ul style="list-style-type: none"> ▪ 1 Year – from the diagnosis of first critical illness ▪ 4 years – if first claim paid for cancer and second critical illness claim is from group IV ▪ 4 years – if first claim paid for end stage lung disease and second critical illness claim is for pneumonectomy </td> </tr> <tr> <td>Cancer Relapse</td> <td>2 Years</td> </tr> <tr> <td>Care Restore</td> <td>3 Years</td> </tr> </table> <p>* Waiting Period means the benefits under the Policy shall be payable to You only if the Critical Illness is first manifested or diagnosed after specified time period from the commencement of the Policy. Waiting period is applicable in the first year of the Policy and is not applicable in subsequent renewals</p>	Waiting Period	90 days (Inbuilt) Options - 30 / 60 days	SheSmart Maternity Benefit	10 months	Second Critical Illness	<ul style="list-style-type: none"> ▪ 1 Year – from the diagnosis of first critical illness ▪ 4 years – if first claim paid for cancer and second critical illness claim is from group IV ▪ 4 years – if first claim paid for end stage lung disease and second critical illness claim is for pneumonectomy 	Cancer Relapse	2 Years	Care Restore	3 Years	Section 3 – Scope of Cover
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5	Payment basis	<p>1. Reimbursement – Following coverages will be on reimbursement of actual expenses either by way of Cashless to the Hospital/ Network provider when a cashless facility is availed or directly to you as a reimbursement against the bills when you have paid for the expenses.</p> <ul style="list-style-type: none"> - Health Check Up - Counselling - Cancer Counselling 											

		2. Benefit - All other coverages are on benefit basis i.e. lumpsum amount will be paid as covered under the policy.	
6	Loss Sharing	Not Applicable	
7	Renewal Conditions	<ul style="list-style-type: none"> • You may renew the policy on or before the end of the Policy Period. Renewal of policy is subject to realization of renewal premium. • We may not renew the policy if you have acted in a fraudulent manner; misrepresented or suppressed any of the material fact either at the time of taking the Policy or any time during the policy period. <ul style="list-style-type: none"> ▪ We are NOT under any obligation to send renewal notice or reminders. ▪ Grace Period of 30 days for renewing the Policy is provided under this Policy. ▪ Any revision / modification in the product will be done with the approval of the IRDAI and will be intimated to you at least 90 days prior to the effective date of modification or revision coming into effect. ▪ <u>Product Withdrawal</u> <ul style="list-style-type: none"> - The product may be withdrawn subject to prior approval of IRDAI. Such information shall be communicated to policyholders at least ninety (90) days prior to the date from which such withdrawal shall come into effect. - In such case, you will get onetime option to renew the existing policy within 90 days of withdrawal of the product or migrate to modified product or other suitable Individual Health Insurance Policy with us subject to Migration norms in vogue. - If you choose to renew the existing policy, you will be migrated to modified product or other suitable Individual Health Insurance Policy at the time of next renewal. - However, if you do not respond to Our intimation in case of such withdrawal, the Policy will be withdrawn on the renewal date. - If your renewal falls after 90 days of withdrawal of product, you will require to migrate to modified product or other suitable Individual Health Insurance Policy. - If you migrate to the similar Health Insurance product available with Us, you will be entitled for the accrued waiting period for Pre-existing disease so that the total waiting period for pre-existing disease does not exceed the waiting period applicable in the withdrawn product. - 	<p>Section 6 – General Terms & Conditions</p> <p># 6.3) iii) – Renewal Terms</p> <p># 6.2) xii) – Withdrawal of the Product</p>

8	Renewal Benefits	<p>Following benefits shall be applicable if available in your plan.</p> <ul style="list-style-type: none"> ▪ Medical Inflation – The Sum Insured will be enhanced by 10% every year subject to maximum of 50% irrespective of claim. ▪ Health Check Up – Available once at the end of two consecutive claim free policy years. ▪ Cancer Seek - Defined tests are available once at end of 3 consecutive Years subject to NIL claim under the policy. ▪ Fixed Premium Guarantee – Will be provided for six (6) consecutive years irrespective of change in age provided that - <ul style="list-style-type: none"> a. Policy is renewed continuously without any break. b. There is no change in sum insured , plan or coverages at the time of Renewal of Policy. 	Section 3 – Scope of Cover # 3.6 # 3.9 # 3.12 # 3.11
9	Cancellation	<p>Cancellation by You – You may cancel this Policy any time during the Policy period by giving Us 15 days notice in writing. Your premium shall be refunded as per the refund table available in the policy document provided no claim has been made under this Policy.</p> <p>Cancellation by Us - We may cancel this Policy on grounds of misrepresentation, fraud, non-disclosure of material facts, non-cooperation by You or anyone acting on Your behalf.</p> <p>Cancellations done on the ground of misrepresentation, fraud, non-disclosure of material facts, will be given 15 days written notice. Such cancellations are from the date of inception of the policy or the renewal date (as the case may be) without refund of any premium.</p> <p>Cancellations done on ground of non-cooperation, shall be entitled to get refund of pro-rata premium for the unexpired portion of the policy on the date of cancellation provided no claim has been paid or is payable under the policy.</p>	Section 6 - General Terms & Conditions - # 6.2) ii)
10	Claims	<p>In the event of any unfortunate event be rest assured of complete assistance from us.</p> <p>1. Insured/Representative can notify or submit a claim within 7 days of occurrence of event by following way;</p> <ul style="list-style-type: none"> • Making a call on Toll Free 1800 123 0004 OR • By sending an email to insurance.help@navi.com OR • Through Customer Portal on website www.naviinsurance.com OR • Directly walk-in to office or through an Intermediary 	Section 6.4) v) – Claims Process & Management

		<p>2. During Notification of Claim, information pertaining to You, Your Policy & Loss will be collected.</p> <p>3. All claim documents as mentioned in the policy should be submitted to us not later than 30 days from the date of Insured Event.</p> <p>4. In case any document is missing, we'll raise a request within 5 days of submission of documents by you and you should provide the documents within 10 days from our notification.</p> <p>5. Claim shall be settled or repudiated within 30 days of the receipt of the last necessary document/information. If your claim needs further investigation, the claim shall be settled or repudiated within 45 days of receiving the last necessary document/information.</p> <p>6. Payment of Interest: In case of delay in payment beyond the above given timelines, two percent (2%) interest will be paid above the Bank Rate or as per the applicable / extant IRDAI regulation. Such interest shall be paid from the date of receipt of last relevant and necessary document from the insured /claimant by us till the date of the actual payment.</p>	
11	Policy Servicing	<p>a. Call Us: Toll Free 1800 123 0004</p> <p>b. Email: insurance.help@navi.com Email for Senior Citizens- seniorcare@navi.com</p> <p>c. Visit our website: https://www.naviinsurance.com/service/</p> <p>d. Walk in for assistance</p> <p>e. Dispatch your letters to us at – Corporate Office: Navi General Insurance Limited Salarpuria Business Centre, 4th B Cross Road, 5th Block, Koramangala Industrial Layout, Bengaluru, Karnataka – 560095</p> <p>f. Escalation –</p> <ul style="list-style-type: none"> • First Escalation – Contact Customer Experience Team at - Manager.CustomerExperience@navi.com • Second Escalation - Email to Head Customer Experience and Grievance Redressal Officer at – Head.CustomerExperience@navi.com 	
	Grievances / Complaints	<p>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:</p> <p>1. Our Grievance Redressal Officer</p> <p>You can send Your grievance in writing by post or email to Our Grievance Redressal Officer at the following address:</p> <p>Navi General Insurance Limited (formerly known as DHFL General Insurance Limited)</p>	Section 7 – Grievance Redressal Procedure

		<p>Corporate Office: Salarpuria Business Centre, 4th B Cross Road, 5th Block, Koramangala Industrial Layout, Bengaluru, Karnataka – 560095</p> <p>E-mail: gro@navi.com</p> <p>Toll free: 1800 123 0004</p> <p>2. Consumer Affairs Department of IRDAI</p> <p>a. In case it is not resolved within 15 days or if You are unhappy with the resolution You can approach the Grievance Redressal Cell of the Consumer Affairs Department of IRDAI by calling Toll Free Number 155255 (or) 1800 4254 732 or sending an e-mail to complaints@irdai.gov.in. You can also make use of IRDAI's online portal - Integrated Grievance Management System (IGMS) by registering Your complaint at igms.irda.gov.in.</p> <p>b. You can send a letter to IRDAI with Your complaint on a Complaint Registration Form available by clicking here. You must fill and send the Complaint Registration Form along with any documents by post or courier to General Manager, Insurance Regulatory and Development Authority of India (IRDAI), Consumer Affairs Department - Grievance Redressal Cell, Sy.No.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad - 500032.</p> <p>c. You can visit the portal http://www.policyholder.gov.in for more details.</p> <p>3. Insurance Ombudsman</p> <p>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 www.generalinsurancecouncil.org.in, the Consumer Education Website of the IRDAI at http://www.policyholder.gov.in, or from any of Our Offices.</p> <p>Ombudsman and Addresses: Refer the below link: http://ecoi.co.in/ombudsman.html</p>	
12	Insured's Rights	<ul style="list-style-type: none"> ▪ Free Look Period – You have 15 days from the date of receipt of the Policy to review the terms and conditions. In case the terms of the policy are not acceptable, you have an option to cancel the policy provided you have not made any claim under the policy. Premium paid for the policy will be refunded in your account within 15 days from your request of policy cancellation. Your premium refund will be subject to deduction of stamp duty charges and proportionate risk premium. Free look provision is not applicable for renewal policies. 	# 6.2) iv)

		<ul style="list-style-type: none"> ▪ Renewability - You may renew the policy on or before the end of the Policy Period. Renewal of policy is subject to realization of renewal premium. ▪ Continuity - You have an option to migrate to Our other individual personal accident insurance product(s), if available, subject to Our underwriting guidelines. Likewise, children under the family plan when exiting on account of being not dependent on parents will also be given an option to migrate to our individual personal accident insurance plans subject to our underwriting guidelines. Insured Person(s) will be entitled for accrued continuity benefits as per prevailing portability and migration guidelines issued by the regulator. ▪ Turn Around Time <ul style="list-style-type: none"> ✚ Settlement of Claims – 30 days from submission of the last "necessary" document(s) / information. In case, the claim warrants an investigation, the same shall be completed within 30 days from the date you submit the last necessary document to us. In such cases, the settlement shall be within 45 days from the date of receipt of last necessary document. 	<p># 6.3) ii)</p> <p># 6.3) i)</p> <p># 6.4) f)</p>
13	Insured's Obligations	<p>You must disclose material facts*. Non-disclosure may result in claim not being paid.</p> <p><i>*material facts - means a fact deemed so important that it would change the decision made by an insurer if it were kept hidden.</i></p>	

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.