

ManipalCigna Lifestyle Protection - Critical Care

Customer Information Sheet

Title	Description Please refer to the Plan and Sum Insured you have opted to understand the available benefits under your Plan in brief	Refer to the following Policy Section number in the Policy Wording for more details on each Cover
<p>What am I Covered for</p> <p>This section lists the benefits available on your Policy</p>	<p>Identify your Plan: Basic Cover - Coverage for 15 Critical Illnesses Enhanced Cover - Coverage for 30 Critical Illnesses Your Sum Insured - As opted by you and specified on the Schedule to this Policy</p> <p>I. Critical Illness Cover: If an Insured person is diagnosed to be suffering with a covered Critical Illness while the Policy is in force, then we will pay the Sum Insured as opted under the Policy to the Insured person. The Policy covers the following Critical Illnesses / surgeries depending on the Cover opted.</p> <ol style="list-style-type: none"> 1. Cancer of Specified Severity 2. Myocardial Infarction (First Heart Attack - of Specific Severity) 3. Open Chest CABG 4. Open Heart Replacement or Repair of Heart Valves 5. Coma of Specified Severity 6. Kidney Failure Requiring Regular Dialysis 7. Stroke Resulting in Permanent Symptoms 8. Major Organ / Bone Marrow Transplant 9. Permanent Paralysis of Limbs 10. Motor Neuron Disease with Permanent Symptoms 11. Multiple Sclerosis with Persisting Symptoms 12. Primary (Idiopathic) Pulmonary Hypertension 13. Aorta Graft Surgery 14. Deafness 15. Loss of Sight 16. Coronary Artery Disease 17. Aplastic Anaemia 18. End Stage Lung Failure 19. End Stage Liver Failure 20. Third Degree Burns 21. Fulminant Hepatitis 22. Alzheimer's Disease 23. Bacterial Meningitis 24. Benign Brain Tumor 25. Apallic Syndrome 26. Parkinson's Disease 27. Medullary Cystic Disease 28. Muscular Dystrophy 29. Loss of Speech 30. Systemic Lupus Erythematosus <p>II. Medical Second Opinion Available to all Insured Persons once during the lifetime of an Insured Person for a particular Critical Illness.</p> <p>III. Access to Online Wellness Program - Available to all customers</p>	<p>D.I</p> <p>D.II</p> <p>D.III</p>
<p>What are the Major Exclusions in the Policy</p> <p>This section provides a brief list of conditions which will not be covered under the Policy permanently</p>	<ul style="list-style-type: none"> • Any Illness, sickness or disease other than those specified as Critical Illness, as mentioned in the Policy. • Any Pre-existing Disease or any complication arising therefrom. • Any Critical Illness directly or indirectly associated with AIDS/ HIV. • Any Critical Illness arising out of use, abuse or as a consequence of drug, alcohol or hallucinogen. • Any condition directly or indirectly caused by or associated with any sexually transmitted disease. • Any Critical Illness directly or indirectly caused due to self-injury or suicide. • Any treatment/surgery for change of sex. • All expenses arising from foreign invasion & warlike operations. • Any Critical Illness caused by ionizing radiation or contamination by radioactivity from any nuclear fuel. • Congenital anomalies, inherited disorders or any complications or conditions arising therefrom. • Expense for injury of insured whilst engaging in any adventure sports. • Cosmetic or plastic surgery to improve physical appearance. • Critical illness resulting from the Insured person committing any breach of law. • Failure to seek or follow Medical Advice. • Birth control procedures and hormone replacement therapy. • Any treatment arising from or traceable to pregnancy. <p>Please refer to the policy wording for the complete list of exclusions.</p>	<p>E</p>

Title	<p style="text-align: center;">Description</p> <p style="text-align: center;">Please refer to the Plan and Sum Insured you have opted to understand the available benefits under your Plan in brief</p>	<p style="text-align: center;">Refer to the following Policy Section number in the Policy Wording for more details on each Cover</p>
<p>Waiting & Survival Period</p> <p>This section lists the applicable period before you can make a Claim for the covered Critical Illnesses</p>	<p>a. First 90 days of waiting period will be applicable in respect of any Critical Illness whose signs or symptoms first occur within 90 days of the Inception date of the first Policy.</p> <p>b. The Sum Insured is payable only upon the Insured surviving 30 days from the diagnosis of the Illness or undergoing the Surgical Procedure for the first time.</p>	<p style="text-align: center;">E.I.1.i</p> <p style="text-align: center;">E.I.1.ii</p>
<p>Payout Basis</p> <p>This section lists the manner in which the proceeds of the Policy will be paid to you</p>	<p>a. In case of Lumpsum Payout for Critical Illnesses - the full Sum Insured opted will be paid upon the first diagnosis of the covered Critical illnesses.</p> <p>b. In case of Staggered Payout for Critical Illnesses - 25% of Sum Insured will be paid immediately on Claim event and 75% + additional 10% of Sum Insured will be paid in 60 equal monthly instalments starting from the next month.</p>	<p style="text-align: center;">G.I.6</p>
<p>Cost Sharing</p>	<p>Not Applicable</p>	
<p>Renewal Conditions</p> <p>This section lists the terms of Renewals and Revival under the Policy</p>	<p>a. The Policy will automatically terminate at the end of the Policy Period.</p> <p>b. A Grace Period of 30 days for Single and Yearly payment mode will be available to renew the policy with continuation of cover.</p> <p>c. The Policy would be considered as a fresh Policy if there would be a break of more than 30 days between the previous Policy Expiry Date and current Policy Inception Date.</p> <p>d. Renewals will not be denied except on grounds of misrepresentation, fraud, non-disclosure or non-cooperation by the Insured.</p> <p>e. Alterations in the Policy such as increase/decrease in Sum Insured, change in plan addition/deletion of Insured persons will be allowed at the time of Renewal of the Policy. You can submit a request for the changes by filling the Proposal Form before the expiry of the Policy. We reserve Our right to carry out underwriting in relation to acceptance or rejection of the request for changes on Renewal. The Terms and Conditions of the existing Policy will not be altered.</p> <p>Revival Period: For instalment (Half-yearly and Quarterly) premium policies, the revival period shall be 30 days and for monthly premium payment mode, the revival period shall be 15 days from the due date of next instalment.</p>	<p style="text-align: center;">F.I.14</p>
<p>Renewal Benefits</p>	<p>Not Applicable</p>	
<p>Cancellation</p> <p>The section explains the Policy Cancellation process in brief</p>	<p>a. Cancellations may be intimated to us by giving 15-day notice wherein we shall refund the premium for the unexpired term on the short period scale as mentioned in the Policy Wordings enclosed in the kit. The Premium shall be refunded only if no Claim has been made under the Policy.</p> <p>b. No refund will be processed for cancellation of policies with premium payment mode as Half-yearly, Quarterly and Monthly.</p> <p>c. This Policy can be cancelled on grounds of misrepresentation, fraud, non-disclosure of material fact or non-cooperation by You, upon giving 15 days' notice without refund of premium.</p>	<p style="text-align: center;">F.I.13</p>
<p>How to Claim</p> <p>This section gives a brief on the procedure to make a Claim</p>	<p>In the event of a claim arising out of any Critical Illnesses covered under this Policy, the claim documents must be submitted to reach Our branch or Head Office within sixty (60) days of the date of first diagnosis of the Critical Illness/date of Surgical Procedure, as the case may be.</p> <ul style="list-style-type: none"> • Claim form duly filled and signed Part A and B wherever applicable; • Medical Certificate confirming the diagnosis of Critical Illness; • Certificate from attending Medical Practitioner confirming that the Claim does not relate to any Pre - existing Illness or Injury or any Illness or Injury which was diagnosed within the first 90 days of the Inception of the Policy. • Discharge Card/Death Summary from the Hospital, if applicable; • Investigation test reports confirming the diagnosis as specified under the definition of the respective Critical Illnesses; • First consultation letter and subsequent prescriptions; • Indoor case papers, if applicable; • KYC documents; • Specific documents listed under the respective Critical Illness • Any other necessary documents as may be required by us; • In the case where Critical Illness arises due to an accident, FIR copy or medico legal certificate will also be required. <p>We may call for any additional necessary documents/information as required based on the circumstances of the Claim.</p>	<p style="text-align: center;">G.I</p>

	For any Claims related query, information or assistance, you can contact Our Healthline 1800-102-4462 or visit Our website www.manipalcigna.com or email us at atcustomercare@manipalcigna.com . Please refer to the Policy Wordings for complete process on Claims.	
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Legal disclaimer: The information mentioned above is illustrative and not exhaustive. Information must be read in conjunction with the product brochures and Policy document. In case of any conflict between the Prospectus and the Policy document the terms and conditions mentioned in the Policy document shall prevail.

For benefit illustration with indicative ages and Sum Insured, please refer Annexure to CIS - Benefit Illustration