

MANIPALCIGNA SUPER TOP UP
Customer Information Sheet

Description					
Your Coverage Details:	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	
Basic cover: This section lists the Basic benefits available in your plan	Plan name	Plus		Select	
	Identify your Opted Deductible & Sum Insured	Deductible (in Rs. Lacs)	Sum insured (in Rs. Lacs)	Deductible (in Rs. Lacs)	Sum insured (in Rs. Lacs)
		3, 3.5	3, 6	1	1, 2, 4
		4, 4.5	4, 8	2, 2.5	2, 4, 5
		5, 5.5	5, 10, 15, 20	3, 3.5	3, 6, 10
		7.5	10, 15, 20	4, 4.5	4, 8, 15
		10	10, 20, 30	5, 7.5	5, 10, 15, 20
	-	-	10	10, 20, 30	
	Inpatient Hospitalisation	Covers Hospital expenses for admission longer than 24 hours. Covered up to any Room Category.			D.I.1
	Pre - hospitalisation	Medical Expenses Covered up to 60 days preceding the hospitalisation.			D.I.2
Post - hospitalisation	Medical Expenses Covered up to 90 days immediately after discharge from the hospital.			D.I.3	
Inpatient hospitalisation for AYUSH Cover	Covered up to full Sum Insured.			D.I.4	
Day Care Treatment	Covered up to full Sum Insured.			D.I.5	
Non-medical expenses Cover	Actual expense incurred towards non - medical items listed under policy wordings under Annexure III.			D.I.6	
Road Ambulance Cover	Actual expense incurred on availing Ambulance services.			D.I.7	
Donor Expenses	Covered up to full Sum Insured.			D.I.8	
Guaranteed Cumulative Bonus	A guaranteed 5% increase in Sum Insured every policy year at renewal, maximum up to 50% of the Sum Insured.			D.I.9	
Optional cover: This section lists the available optional covers under your plan and the limits under each of these option	Guaranteed Continuity on Deductible	From 5 th Policy Year onwards, the Insured Person will have an option to opt for a base policy*, with guaranteed continuity on waiting periods [#] applicable under the base Policy. No fresh risk assessment shall be done for Sum Insured up to the deductible amount opted under this Policy (ManipalCigna Super Top Up). Cover under existing policy, ManipalCigna Super Top Up, will continue to be available for the Insured person, subject to Renewal and policy terms and conditions. [#] Waiting Periods here will mean initial waiting period, specific illness waiting period and pre-existing disease waiting period of base policy. * ManipalCigna ProHealth Insurance – Protect Plan(CTTHLIP18045V031819 or any subsequent versions approved by the IRDAI) or equivalent product offered by Us. This optional cover is available at the purchase of this Policy and the same shall apply to Insured person/s for which the cover is opted.			D.II.1
	Reduction in Pre-existing disease waiting period	Option to reduce Pre- existing disease waiting period to 24 months since inception of the policy and shall apply to all insured persons covered under the policy.			D.II.2
Add on cover (Rider) This section lists the Add on cover available under your plan	Critical illness	Lump sum payment of an additional 100% of Sum Insured Opted.			Add on policy wordings
Premium	Premium Payment Options	Single, Yearly, Half yearly, Quarterly and Monthly mode of payment available.			F.I.7
What are the major exclusions in the Policy	Please note that this is an indicative list of exclusions; please refer the Policy wording and clauses for the complete list of exclusions. - Investigation & Evaluation- Code- Excl 04 - Rest Cure, rehabilitation and respite care- Code- Excl 05 - Obesity/ Weight Control: Code- Excl 06 - Change-of-Gender treatments: Code- Excl 07 - Cosmetic or plastic Surgery: Code- Excl 08 - Hazardous or Adventure sports: Code- Excl 09 - Breach of law: Code- Excl 10 - Excluded Providers: Code- Excl 11 - Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof: Code- Excl 12 - Treatments received in health spas, nature cure clinics, spas or similar establishments			E	

	<ul style="list-style-type: none"> - Dietary supplements and substances that can be purchased without prescription - Refractive Error: Code- Excl 15 - Unproven Treatments: Code- Excl 16 - Sterility and Infertility: Code- Excl 17 - Maternity: Code Excl 18 - Dental treatment, dentures or surgery of any kind unless necessitated due to an accident, Circumcision, Protheses, corrective devices and medical appliances - Costs of donor screening - Any form of Non-Allopathic treatment - All expenses caused by ionizing radiation or contamination by radioactivity, directly or indirectly, caused by or arising from warlike operations - External Congenital Anomaly or defects 	
<p>Waiting Period This sections lists the applicable period (days/months) before you can make a claim for the listed diseases/treat ments</p>	<ul style="list-style-type: none"> a. First 30 days from the Policy start date, for all illnesses except Accidents. b. First 24 months from the Policy start date for Specific illnesses. c. A 48 months waiting period will be applicable for any Pre-existing disease. 	E
<p>Payout Basis This section lists the manner in which the proceeds of the Policy will be paid to you</p>	<p>For all covers, pay-out will be on indemnity basis 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>	G.I.4 & G.I.5
<p>Cancellation The section explains the Policy cancellation process in brief</p>	<p>Cancellations may be intimated to Us by giving 15 days' 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 only be refunded only if no claim has been made under the Policy.</p> <p>This Policy can be cancelled on grounds of misrepresentation, fraud, non-disclosure of material fact, upon giving 15 days' notice without refund of premium.</p>	F.I.5
<p>Legal disclaimer: The information mentioned above is illustrative and not exhaustive. Information must be read in conjunction with the product brochures/prospectus 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.</p> <p>For benefit illustration with indicative ages and Sum Insured, please refer Annexure to CIS - Benefit Illustration</p>		