

Date : 18 Oct 2023

Mr Ajay Girdhar
8- Niranjan Housing Society
Near Shri Krishna Nagar Garkeda
Aurangabad 431001
Maharashtra 27

Policy No: 44182433

Mobile No: XXXXXX2425



Dear Mr Ajay Girdhar,

Thank You for trusting us as your preferred Health Insurer.

At Care Health insurance, it is our endeavor to make quality healthcare easily accessible for our customers as well as ensure a truly hassle-free claim servicing experience

To help you understand our services better, please go through the 'Know your policy better' kit that accompanies this letter and constitutes the following

- Policy certificate
- Premium Acknowledgement
- Key Policy Information
- Claim Process
- Policy Terms and Conditions- <https://bit.ly/3PSzkQU> and also available on Customer App

Also appended herewith for your convenience is your Care Health Card. This card should be presented at the time of an emergency or a planned hospitalization, to avail cashless treatment at our network of over 16000+ cashless network pan-India.

To further simplify procedures, we're online as well. Visit our portal www.careinsurance.com and view network hospitals across the country, cashless procedures and do much more.

For any assistance, please feel free to write to us at <https://www.careinsurance.com/contact-us.html>.

Once again, we thank you for this opportunity to serve you, and wish you and your loved ones good health always!

Team Care Health Insurance

CUSTOMER APP



For Android



For IOS

Care Health Insurance Limited

Regd. Office: 5th Floor, 19 Chawla House, Nehru Place, New Delhi-110019
Corresp. Office: Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road,
Sector-43, Gurugram-122009 (Haryana)
IRDAI Regn. No. 148 | CIN: U66000DL2007PLC161503

REACH US @

 Care Health- Customer App	 WhatsApp 8860402452	Self Help Portal: www.careinsurance.com/self-help-portal.html Submit Your Queries/Requests: www.careinsurance.com/contact-us.html
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Policy Certificate

Mr Ajay Girdhar
8- Niranjan Housing Society
Near Shri Krishna Nagar Garkeda
Aurangabad 431001
Maharashtra 27

Policy No.	44182433
Plan Name	CARE ADVANTAGE
Add-on Policy Name	Care Shield
Cover Type	Individual
Policy Period - Start Date	00:00 hrs 28-Sep-2023
Policy Period - End Date	Midnight 27-Sep-2024
Nominee Name (Relation)	Gaurav girdhar (Brother)
Premium Paid	Rs.9,462.00 (Premium Rs 8018.24+Underwriting Loading Rs 0.00+CGST Rs0.00+IGST Rs1,443.29+SGST Rs0.00+UGST Rs0.00)
Premium Payment Mode	Single Premium

Policyholder	Gender	Date Of Birth	Client ID
Mr Ajay Girdhar	Male	28-Jun-1993	42577112

Details of Insured Person

Name	Client ID	Date of Birth	Relationship	Insured with the Company (since)	Pre-existing diseases since
Ajay Girdhar	42577112	28-Jun-1993	MEMBER	07-Jul-2022	NONE

Details of Cover

Policy Insured Name	Policy Sum Insured	Accumulated No Claim Bonus Amount	Accumulated Inflation Shield Amount
Ajay Girdhar	25,00,000.00	2,50,000.00	1,67,500.00

- Note**
- NCB/NCB Shield Protection has been applied on this renewal.
 - Amount of No Claim Bonus / No Claim Bonus Super is calculated basis the claim status updated till Date of Payment of Renewal Premium. This amount can vary basis the claim reported against Expiring Policy Year.
 - Floater Policy, all the member coverage is on shared basis. Individual Policy each member is covered on Individual Basis.
 - Coverage and Claims Subject to the Policy Terms & Conditions.

Contact details for Claims & Policy Servicing

Correspondence address	Care Health Insurance Limited, Vipul Tech Square, Tower C, 3rd Floor, Golf Course Road, Sector-43, Gurugram-122009 (Haryana)
E-mail ID for Claims	claims@careinsurance.com
Website	www.careinsurance.com

Intermediary Details

Name	Code	Contact Details
JAINUINE INSURANCE BROKERS PRIVATE LIMITED	20060888	7306637799

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Schedule of Benefits

S No.	Particulars	Basis of Offering
1	Hospitalization Expenses (In-patient Care and Day Care Treatment)	Up to SI
2	Pre-Hospitalization Medical Expenses and Post-Hospitalization Expenses	Pre-Hospitalization for 60 days & Post-Hospitalization for 180 days; Maximum up to SI
3	Ambulance Cover	Up to SI
4	Organ Donor Cover	Up to SI
5	No Claims Bonus (NCB)	10% of Sum Insured for each Claim free year, maximum upto 50% of Sum Insured; reduced by 10% of Sum Insured in case of claim.
6	Automatic Recharge	Up to SI (Once in a Policy Year)
7	Initial Wait Period	30 Days
8	Specific Diseases Waiting Period	24 Months
9	Pre-existing Diseases Waiting Period	48 Months
10	Room Rent / Room Category	No Sub-limits
11	ICU Charges	No Sub-limits
12	Ayush treatment	Up to SI
13	Health Services (Health Portal)	Doctor on chat, Healthy tips reminder, etc.
14	Health Services (Discount Connect)	Discounts on services such as consultations, diagnostics, maternity etc at our network.

Optional Cover

S NO.	Particulars	Details
1	Room Rent Modification	Single Private room category
2	Air Ambulance Cover	Up to Rs 5 Lacs
3	Pre & Post Hospitalization Modification	Pre-Hospitalization modified to 60 Days and Post-Hospitalization modified to 180 Days.
4	Unlimited E-consultation	Applicable

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Portability Details of the Insured

Previous Insurer : Star Health & Allied Ins.

Name	First Policy Number	Expiry Policy Number	Date of First Enrollment	Expiry Policy SI Rs. (Original SI+CB)
AJAY GIRDHAR	P/151115/01/	P/151115/01/2022/009122	07-Jul-2020	5,00,000 + 2,50,000

*SI = Sum Insured, CB = Cumulative Bonus

Special Conditions

S No.	Particulars
1	Co-payment (Applicable 61 years or above)

Add-on Policy - CARE SHIELD

UIN No- RHIHLIA21168V012021

Schedule of Benefits

S No.	Particulars	Description
1	Claim Shield	Applicable
2	NCB Shield	Applicable
3	Inflation Shield	Applicable

For Care Health Insurance Limited

Authorized Signatory

Date of Issue : 18 Oct 2023

Place of Issue : Gurgaon, Haryana

Service Branch : C BLOCK on the 2nd Floor BRIJ TARNAG COMMERCIAL COMPLEX
HN0631191/1 to 631196/2C Besides Greenland Guest House Begumpet
Hyderabad Telangana 500016Hyderabad, Telangana, 500016

Branch Contact No. : 9289454758

Consolidated Stamp Duty paid vide E-Challan GRN no. 98389442 dated 17 Jan 2023, RCM Applicability- N/A
SAC: 997133 and Description of Service: Accident and Health Insurance Services State
GSTIN No.: 27AADCR6281N1ZS
UIN :CHIHLP23150V022223

Note:

- Attached with this Policy Certificate are the Policy terms and conditions, Optional Covers (if opted) and Annexures. Please ensure that these documents have been received, read and understood. If any of these documents have not been received, please feel free to write to us at <https://www.careinsurance.com/contact-us.html>
- For waiting periods and exclusions under this Policy, please refer to Clause 4 of the Policy terms and conditions.
- This Policy Certificate in original must be surrendered to the Company in case of cancellation of the Policy.

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		Self Help Portal: www.careinsurance.com/self-help-portal.html
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Premium Acknowledgement

Policy No.	44182433
Client ID	42577112
Policyholder	Mr Ajay Girdhar
Address	8- Niranjn Housing Society Near Shri Krishna Nagar Garkeda Aurangabad 431001 Maharashtra 27
Policy Period	28-Sep-2023 to 27-Sep-2024

Premium Details

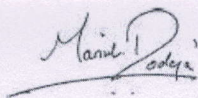
Particulars	Amount (in Rs.)
Gross Premium	
CARE ADVANTAGE	6,712.92
Air Ambulance Cover	419.92
Care Shield	372.94
Pre and Post Hospitalization	503.46
Unlimited e-consultation	9.00
Goods & Services Tax (GST)	1,443.29
Total	9,462.00

The Premium is rounded off to the nearest rupee.

Eligibility of Premium for Deduction u/s 80D of the Income Tax Act, 1961

The premium paid through any mode other than cash for this policy is eligible for Income tax benefits to the person making the payment subject to the provisions of section 80D of the Income Tax Act, 1961 and amendments thereof. Effective from Assessment year 2019-20, in cases where health insurance premium for multiple years is paid in one year, it will be eligible for proportionate deduction in the years in which the health insurance continues to be effective.

For Care Health Insurance Limited



Authorized Signatory

Date of Issue : 18 Oct 2023

Place of Issue : Gurgaon, Haryana

Note:

- 1) In case of any discrepancy, the Policyholder is requested to contact the Company immediately.
- 2) Any amount paid in cash towards the premium would not qualify for tax benefits as mentioned above.
- 3) This document must be surrendered to the Company in case of Cancellation of the Policy or for the issuance of a fresh certificate in the case of any alteration in the Policy.
- 4) This Policy is issued subject to realization of the premium amount. In case the instrument given towards the premium amount is dishonored, then the cover provided under this Policy shall automatically get cancelled. In the given scenario, if any amount has been paid by the Company in respect of a claim or due to any other reason than the amount so advanced by the Company shall be refunded to the Company forthwith.
- 5) We may credit upto Rs. 1/- to your account for validation, before remitting any further payment.

Signature Not Verified

Digitally signed by Manish Dodeja
Date: 20231018163521
Reason: I'm the author
Location: India

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
No physical Health Cards will be dispatched. The electronic version of the card below will be accepted across all network providers.

care HEALTH INSURANCE



HEALTH CARD

Policy No.
44182433


Member ID	DOB	NAME
42577112	28-Jun-1993	Ajay Girdhar


 www.careinsurance.com

Care Health-Customer App



For Android For iOS

 WhatsApp
8860402452

 **SELF HELP**
FOR MEDICAL AND POLICYHOLDER

Submit Your Queries/Requests: www.careinsurance.com/contact-us.html

Disclaimer

1. This card is not transferable
2. Use of this card is governed by the policy terms &
3. To avail cashless facility, this card needs to be produced along with photo
4. Valid upto policy period end date or cancellation date, whichever is earlier

IRDAI Registration No.148