

CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

This document provides key information about your policy. You are also advised to go through your policy document.

SI No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product/Policy	Acko Group Health Insurance Policy	
2	Policy number	As mentioned in Policy	
3	Type of Insurance Product/ Policy	Indemnity & Benefit	
4	Sum Insured (Basis) (Along with amount)	Both Individual/Floater SI Amount: As mentioned in Policy schedule	
5	Policy Coverage	<p>All the below mentioned benefits are covered up to sum insured unless specified otherwise</p> <p>In-Patient Hospitalization (“IPD”) Indemnity Category</p> <ul style="list-style-type: none"> • Medical Expenses of an Insured Person incurred during Hospitalization for more than 24 hours • Worldwide Inpatient Hospitalization • Fixed benefit amount in the event of a Hospitalization • Daily allowance for each continuous and completed period of 24 hours of Hospitalisation • All necessary Day Care treatments • Costs incurred towards transportation of an Insured Person to a Hospital or Day Care Centre by an Ambulance • Costs incurred towards Compassionate Visit of an immediate relative • Costs incurred towards stay during a Compassionate Visit of an immediate relative • Monthly amount if an Insured Person suffers an Involuntary Unemployment due to an Illness or Injury • Amount equal to the EMI Amount which is due on the Insured's outstanding Loan • Missed Bill Payment • Hardship allowance • Daily allowance if the Insured Person is unable to do his/her regular employment, business or professional activity due to an Illness or Injury • Cost incurred towards Hospitalization of an Insured Person for delivery of a baby or medically necessary treatment following a pregnancy 	<p>Section C</p> <p>Section 1.1</p> <p>Section 1.1.1</p> <p>Section 1.1.2</p> <p>Section 1.1.3</p> <p>Section 1.1.4</p> <p>Section 1.1.5</p> <p>Section 1.1.6</p> <p>Section 1.1.7</p> <p>Section 1.1.8</p> <p>Section 1.1.10</p> <p>Section 1.1.11</p> <p>Section 1.1.12</p> <p>Section 1.1.13</p> <p>Section 1.1.14</p>

		<ul style="list-style-type: none"> Cost incurred towards the Hospitalization of an Insured Person's New Born Baby 	Section 1.1.15
		<ul style="list-style-type: none"> Cost incurred towards the Insured Person's pre- natal check-ups post confirmation of pregnancy, post-natal check-ups up to a period of six weeks from delivery 	Section 1.1.16
		<ul style="list-style-type: none"> Vaccination 	Section 1.1.17
		<ul style="list-style-type: none"> Cost incurred towards transportation of mortal remains 	Section 1.1.18
		<ul style="list-style-type: none"> Cost incurred towards expenses on the funeral, cremation/ or burial 	Section 1.1.19
		Optional Benefits Under IPD Category	Section 1.2
		<ul style="list-style-type: none"> Room Rent up to the selected room category or the amount/percentage of the Sum Insured 	Section 1.2.1
		<ul style="list-style-type: none"> ICU charges up to the selected amount/percentage of the Sum Insured 	Section 1.2.2
		<ul style="list-style-type: none"> Pre Hospitalization medical expenses up to 60 days before admission 	Section 1.2.3
		<ul style="list-style-type: none"> Post Hospitalization medical expenses up to 120 days post discharge 	Section 1.2.4
		<ul style="list-style-type: none"> Medical treatments or procedures taken at home 	Section 1.2.5
		<ul style="list-style-type: none"> Donor Expenses 	Section 1.2.6
		<ul style="list-style-type: none"> Daily Cash for choosing for low category room 	Section 1.2.7
		<ul style="list-style-type: none"> Restoration of Sum Insured 	Section 1.2.7
		<ul style="list-style-type: none"> Sub-limits towards any indemnity amounts payable 	Section 1.2.8
		<ul style="list-style-type: none"> Cumulative Bonus 	Section 1.2.9
		<ul style="list-style-type: none"> Additional Buffer Sum Insured for the Group 	Section 1.2.10
		<ul style="list-style-type: none"> Annual Aggregate Deductible 	Section 1.2.11
		<ul style="list-style-type: none"> Per Claim Deductible 	Section 1.2.12
		<ul style="list-style-type: none"> Group Deductible 	Section 1.2.13
		<ul style="list-style-type: none"> Reimbursement only cover 	Section 1.2.14
		<ul style="list-style-type: none"> First Notification of Claim Cover 	Section 1.2.15
		<ul style="list-style-type: none"> Network limited to specific geographies 	Section 1.2.16
		<ul style="list-style-type: none"> Network limited to preferred providers 	Section 1.2.17
		<ul style="list-style-type: none"> Coverage Continuity in case of Pink Slip 	Section 1.2.18
		<ul style="list-style-type: none"> Rewards of Healthy Behavior 	Section 1.2.19
		<ul style="list-style-type: none"> Expert opinion 	Section 1.2.20
		<ul style="list-style-type: none"> Healthy Pregnancy Program 	Section 1.2.21
		<ul style="list-style-type: none"> Child Protect Cover 	Section 1.2.22
		Personal Accident Category	Section 2.1
		<ul style="list-style-type: none"> Accidental Death Benefit 	Section 2.1.1

		<ul style="list-style-type: none"> • Permanent Total Disability • Permanent Partial Disability • Temporary Total Disability • Expenses incurred towards education of a child • Disappearance due to an Accident • amount equal to the outstanding loan principal amount in respect of the Insured Person's outstanding Loan will be payable • Outstanding Bills Protection Benefit • Convenient Travel option • Expenses for improvements to be carried out in the Insured Person's residence or to the Insured Person's vehicle • Chauffeur Benefit <p>Personal Accident Category Benefit Options</p> <p>Medical expenses incurred for suffering an Injury due to an Accident while the Insured Person is travelling as a passenger on a Common Carrier</p> <p>Critical Illness Category</p> <p>Percentage of Sum Insured will be payable when Insured Person is diagnosed with specified Critical Illness</p> <p>Waiting Period for Critical Illness</p> <p>Survival Period for Critical Illness</p> <p>Domestic Travel Category</p> <p>In this section defines the Benefits under this coverage category which are in force for the Insured Person during the Travel Period under the Policy</p> <p>Out-patient ("OPD") and Wellness Benefit Category</p> <p>Medically Necessary Treatment as an Out-Patient</p> <p>Medical Expenses incurred by an Insured Person towards Dental Treatment</p> <p>Expenses incurred towards treatment of vision</p> <p>Expenses incurred towards LASIK treatment</p> <p>Preventive health check-up</p> <p>Medical Expenses incurred in respect of any diagnostic tests of the nature of an MRI or a CT Scan</p> <p>Special Services</p> <p>Domestic Emergency Evacuation</p> <p>International Emergency Evacuation</p> <p>Medical Equipment Cover</p>	<p>Section 2.1.2</p> <p>Section 2.1.3</p> <p>Section 2.1.4</p> <p>Section 2.1.5</p> <p>Section 2.1.6</p> <p>Section 2.1.7</p> <p>Section 2.1.8</p> <p>Section 2.1.9</p> <p>Section 2.1.10</p> <p>Section 2.1.11</p> <p>Section 2.2</p> <p>Section 2.3</p> <p>Section 2.3.1.1</p> <p>Section 2.3.2.1</p> <p>Section 2.3.2.2</p> <p>Section 2.4</p> <p>Section 2.5</p> <p>Section 2.5.1</p> <p>Section 2.5.2</p> <p>Section 2.5.3</p> <p>Section 2.5.4</p> <p>Section 2.5.5</p> <p>Section 2.5.6</p> <p>Section 2.6</p> <p>Section 2.6.1</p> <p>Section 2.6.2</p> <p>Section 2.6.3</p>
6	Exclusions (what the policy does)	General Exclusions:	

	not cover)	<p>I. Standard exclusion:</p> <ol style="list-style-type: none"> 1. Pre-Existing Diseases-Code-Excl01 2. Specified Disease/Procedure Waiting Period-Code-Excl02 3. 30-day waiting period (Code-Excl03) 4. Investigation & Evaluation (Code- Excl04) 5. Rest Cure, rehabilitation and respite care (Code-Excl05) 6. Obesity/ Weight Control (Code- Excl06) 7. Change-of-Gender treatments (Code- Excl07) 8. Cosmetic or plastic Surgery (Code- Excl08) 9. Hazardous or Adventure sports (Code- Excl09) 10. Breach of law (Code- Excl10) 11. Excluded Providers (Code- Excl11) 12. Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof. (Code- Excl12). 13. Treatments received in health spas, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons. (Code- Excl13) 14. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure (Code-Excl14) 15. Refractive Error (Code- Excl15) 16. Unproven Treatments:(Code- Excl16) 17. Sterility and Infertility: (Code- Excl17) 18. Maternity (Code - Excl18) <p>II. Specific Exclusions</p> <ol style="list-style-type: none"> 1. Specific exclusion applicable for Section C (1.1, 1.2, 2.1, 2.2, 2.3) <ol style="list-style-type: none"> a) Stem cell treatment. b) Dental Treatment. c) Circumcision d) Birth control procedures, contraceptive supplies or services including complications arising due to supplying services, hormone replacement therapy and voluntary termination of pregnancy, surrogate or vicarious pregnancy. e) Eye sight & Optical services/surgeries f) Ear examinations, cost of hearing aids or cochlear implants. g) Vaccinations except post-bite Treatment 	Section D
			Section D II.1

	<p>h) Any physical, psychiatric or psychological examinations or testing, any Treatment and associated expenses for alopecia, baldness, wigs, or toupees and hair fall Treatment and products, issue of medical certificates and examinations as to suitability for employment or travel.</p> <p>i) Medical Instrument</p> <p>j) Artificial Life Maintenance</p> <p>k) Developmental problem treatment</p> <p>l) Treatment for general debility, ageing, convalescence, sanatorium Treatment, private duty nursing, run down condition or rest cure.</p> <p>m) Prosthetics and other devices</p> <p>n) Treatment received outside India</p> <p>o) External Congenital Anomaly</p> <p>p) Suicide and Self-Injury</p> <p>q) Change in profession</p> <p>r) Certification / diagnosis / Treatment by a family member, or a person who stays with the Insured Person, or from persons not registered as Medical Practitioners under the respective Medical Councils, or from a Medical Practitioner who is practicing outside the discipline that he is licensed for, or any diagnosis or Treatment that is not scientifically recognised or Unproven/Experimental treatment, or any form of clinical trials or any kind of self-medication and its complications.</p> <p>s) Unlawful Activities</p> <p>t) Death, injury, illness or disability caused by participation of the Insured Person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.</p> <p>u) War and hazardous substances</p> <p>v) Non-Medical Expenses</p> <p>w) Organ Donor</p> <p>x) Hazardous Activities</p> <p>y) Any stay in Hospital without undertaking any Treatment or any other purpose other than for receiving eligible Treatment of a type that normally requires a stay in the Hospital</p> <p>z) Any physical, or medical condition or Treatment or service that is specifically excluded in the Policy Schedule / Certificate of Insurance under special conditions.</p> <p>Specific exclusion applicable to 2.2. Personal Accident Category</p> <p>1. Working in underground mines, tunnelling or explosives, or involving electrical installation with hightension supply, or as jockeys or circus personnel, or engaging in Hazardous Activities.</p>	Section D II.2
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		<p>2. Certification of disability by a family member, or a person who stays with the Insured Person, or from persons not registered as Medical Practitioners under the respective Medical Councils, or from a Medical Practitioner who is practicing outside the discipline that he is licensed for.</p> <p>3. Death or disability caused other than by an Accident.</p> <p>4. Medical or surgical treatment except as necessary solely and directly as a result of an Accident.</p> <p>5. Death or disability resulting directly or indirectly, contributed or aggravated or prolonged by childbirth or from pregnancy or a consequence thereof including ectopic pregnancy unless specifically arising due to Accident.</p> <p>6. Chemical Attack.</p> <p>7. Biological Attack</p> <p>Specific exclusion applicable to 2.3 Critical Illness Category</p> <p>1. Certification / diagnosis / Treatment by a family member, or a person who stays with the Insured Person, or from persons not registered as Medical Practitioners under the respective Medical Councils, or from a Medical Practitioner who is practicing outside the discipline that he is licensed for, or any diagnosis or Treatment that is not scientifically recognised or Unproven/Experimental treatment, or any form of clinical trials or any kind of self-medication and its complications.</p> <p>2. Chemical Attack: Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any Illness, incapacitating disability or death.</p> <p>3. Biological Attack: Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any Illness,</p>	Section D II.3
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	<p>incapacitating disability or death.</p> <p>Specific Exclusion for Loss of Pay due to Hospitalization:</p> <ul style="list-style-type: none"> a) Any Involuntary Unemployment or suspension of the Insured Person at his/her primary occupation, which is temporary in nature. b) Any unemployment from any occupation or job in which no salary was ever provided to the Insured Person. c) Any unemployment occurring while the Insured Person, who is a Salaried Individual, is still under his/her probation, including any unemployment resulting from non-confirmation of his/her employment by the employer during or after the period on probation. d) Any suspension of the Insured Person from his/her primary occupation on account of any pending enquiry being conducted by the employer or a public authority. e) Medical exclusions <ul style="list-style-type: none"> i. Any unemployment if it arises as a result of intentional self-inflicted injuries. ii. Any unemployment if it arises as a result of termination of service on the grounds of a Pre Existing Diseases. iii. Any unemployment if it arises as a result of intake of alcohol or drugs by the Insured Person. iv. Any unemployment if it arises as a result of insured person being on family leave or sick leave due to childbirth or pregnancy. <p>Specific Exclusion for Fire and Allied Perils:</p> <p>This Policy does not cover (not applicable to policies covering dwellings)</p> <ul style="list-style-type: none"> i. The first 5% of each and every claim subject to a minimum of Rs.10,000 in respect of each and every loss arising out of —Act of God perils such as Lightning, STFI, Subsidence, Landslide and Rock slide covered under the policy, ii. The first Rs.10,000 for each and every loss arising out of other perils in respect of which the Insured is indemnified by this policy. The Excess shall apply per event per Insured. <p>b. Loss, destruction or damage caused by war, invasion,</p>	<p>Section D II.4</p> <p>Section D II.5</p>
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		<p>respectively.</p> <p>i. Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.</p> <p>j. Loss or damage by spoilage resulting from the retardation or interruption or cessation of any process or operation caused by operation of any of the perils covered.</p> <p>k. Loss by theft during or after the occurrence of any Insured peril except as provided under Riot, Strike, Malicious and Terrorism Damage cover.</p> <p>l. Any Loss or damage occasioned by or through or in consequence directly or indirectly due to Volcanic eruption or other convulsions of nature.</p> <p>m. Loss or damage to property Insured if removed to any building or place other than in which it is herein stated to be Insured, except machinery and equipment temporarily removed for repairs, cleaning, renovation or other similar purposes for a period not exceeding 60 days.</p> <p>Specific Exclusion to Travel category</p> <p>a) Suicide or attempted suicide, intentional self-inflicted Injury or acts of self-destruction, whether the Insured Person is medically sane or insane.</p> <p>b) Medical or surgical treatment except as necessary solely and directly as a result of an Accident.</p> <p>c) Certification of disability by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's family.</p> <p>d) Death, disability or illness caused by participation of the Insured Person in any flying activity, except as a bona fide passenger on a public aircraft, which is operating under a valid license from the relevant authority for the transportation of passengers.</p> <p>e) Death, disability or illness or Injury arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.</p> <p>f) Any change of profession after inception of the Policy which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Certificate of Insurance.</p> <p>g) Any journey where the Insured Person is travelling as a commercial driver, operator or crew member in, or carrying out any testing or repairs on a Common Carrier.</p>	Section D II.6
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7	<p>Waiting Period</p> <ul style="list-style-type: none"> Time period during which 	<p>Initial waiting Period: 30 days for all illnesses (not applicable in case of continuous renewal or accidents)</p> <p>Critical illness Waiting period – As per policy schedule</p>	<p>Section D.I.3</p> <p>2.3.2.1</p>

	<p>specified diseases/treatments are not covered</p> <ul style="list-style-type: none"> It is counted from the beginning of the policy coverage. 	<p>Specific Waiting periods (Not applicable for claims arising due to an accident): As Per the Policy Schedule</p> <p>Pre-existing diseases: As per the policy Schedule.</p>	<p>Section D.I.2</p> <p>Section D.I.3</p>
8	<p>Financial limits of coverage</p> <p>i. Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit)</p> <p>ii. Co-payment (It is a specified amount/percentage of the admissible claim amount to be paid by policyholder/insured).</p> <p>iii. Deductible (It is a specified amount:</p> <ul style="list-style-type: none"> up to which an insurance company will not pay any claim, and which will be deducted from total claim amount (if claim amount is more than the 	<p>The policy will pay only up to the limits specified hereunder for the following diseases/procedures:</p> <p>Sublimit : Not Applicable</p> <p>Co-payment - Please specify as per the policy Schedule.</p> <p>Deductible - Please specify as per the policy Schedule</p>	

	specified amount) Any other limit (as applicable)		
9	Claims/Claims Procedure	<p>Details of procedure to be followed for cashless service as well as for reimbursement of claim including pre and post hospitalization.</p> <p>Turn Around Time (TAT) for claims settlement:</p> <ol style="list-style-type: none"> TAT for preauthorization of cashless facility 1 hour TAT for cashless final bill authorization: 3 hours <p>Cashless claim facility can be availed in all network hospitals. The list of network hospitals are available on our website or can be checked at the customer care centre.</p> <p>For reimbursement of a claim, please submit all necessary documents on our App or email to us. We may ask for original hard copy of the documents in some cases. Please find the important links/numbers below :-</p> <ol style="list-style-type: none"> Network Hospital Details: Acko App or www.acko.com/gi Helpline Number: 1800 266 2256 Hospitals which are backlisted or from where no claims will be accepted by the insurer: Acko App or www.acko.com/gi <p>Downloading getting the claim form: Acko App or www.acko.com/gi</p>	Section F.
10	Policy Servicing	<p>Company Officials: Acko General Insurance Limited, 2nd floor, #36/5, Hustlehub One East, 27th Main Rd, Sector 2, HSR Layout, Bengaluru, Karnataka - 560102</p> <ul style="list-style-type: none"> Our website: www.acko.com/gi Email: grievance@acko.com Toll Free: 1800 266 2256 	
11	Grievances/Complaints	<p>For resolution of any query, insured may contact the company on our helpline number 1800 266 2256 or may write an e-mail at hello@acko.com.</p> <p>For resolution of grievance, insured may contact the company on our toll-free helpline number 1800 210 4990 (Operating hours: 10 AM – 7 PM, all days of the week).</p> <p>Senior Citizens Support: Phone: 080-62370023 Email: grievance.healthseniorcitizen@acko.com</p> <p>you can also write to grievance@acko.com. Your complaint will be acknowledged by us within 24 working hours.</p> <p>If in case you are dissatisfied with the decision/resolution provided through details indicated above on your Complaint or have not received any response within 14 working days, you may write or email to Chief Grievance Officer:</p>	Section E.16

		<p>Email: gro@acko.com</p> <p>Postal Address: Acko General Insurance Limited 36/5 Hustlehub One East, Somasandrapalya, 27th Main Road Sector 2, HSR Layout, Karnataka Bangalore – 560102</p> <p>The Chief Grievance Officer will provide a final response within 7 days of receipt of the escalation. If in case your issue remains unresolved within 14 days of lodging a complaint with us and you wish to pursue other avenues for redressal of grievances, you may approach IRDAI by calling on the Toll-Free no. 155255 or you can register an online complaint on the website https://irdai.gov.in/igms1</p> <p>Insurance Ombudsman for Redressal, whose details are given below:</p> <p>General Manager Consumer Affairs Department- Grievance Redressal Cell</p> <p>Website: https://cioins.co.in/Ombudsman</p> <p>In the event of an unsatisfactory response from the Grievance Officer, he/she may register a complaint in the Integrated Grievance Management System (IGMS) of the IRDAI.</p>	
12	Things to remember	<p>Free Look cancellation: You may cancel the insurance policy if you do not want it, within 30 days from the beginning of the policy.</p> <p>Policy renewal: Except on grounds of fraud, moral hazard or misrepresentation or non-cooperation, renewal of your policy shall not be denied, provided the policy is not withdrawn.</p> <p>Migration and Portability: When your policy is due for renewal, you may migrate to another policy with us or port your policy to another insurer. For Detailed Guidelines on migration, kindly refer the link https://irdai.gov.in/document-detail?documentId=393128 For Detailed Guidelines on Portability, kindly refer the link https://irdai.gov.in/document-detail?documentId=393128</p> <p>Change in Sum Insured: Sum Insured can be changed (increased/decreased) only at the time of renewal or at any time, subject to underwriting by the company. For increase in SI, the waiting period if any shall start afresh only for the enhanced portion of the sum insured.</p> <p>Moratorium Period: After completion of five continuous years under the policy no look back to be applied. This period of five years is called as moratorium period. The moratorium would be applicable for the sums insured of</p>	<p>Section E.15</p> <p>Section E.10</p> <p>Section E.8&9</p> <p>Section E.12</p>

		<p>the first policy and subsequently completion of five continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits.</p> <p>After the expiry of Moratorium Period no health insurance policy shall be contestable except for proven fraud and permanent exclusions specified in the policy contract.</p>	
13	Your Obligations	<p>Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement.</p> <p>If any of the facts provided to us to purchase this Policy are found to be incorrect, incomplete, suppressed or not disclosed, the policy shall be canceled without refund of premium after 15 days' notice. Any claim made under such Policy, shall be rejected</p>	

Note:

Please go through our website <https://www.acko.com/qi/download/> for the product related documents including the Customer Information sheet are available on the website of the insurer.