

To
COSMOS IMPEX INDIA PRIVATE LIMITED
COSMOS HOUSE, 85/2, ATLADRA PADRA ROAD
VADODARA
Baroda, GUJARAT - 390012, INDIA

Date : 29-11-2022

Subject : Policy Number : 4101191100000035-03

Dear Customer,

Welcome to SBI General. Thank you for choosing SBI General's Group Health Insurance Policy. We are delighted to have you as our esteemed Customer.

We enclose the following documents pertaining to your Policy :

- Policy Schedule
- Policy Clauses & Wordings
- Grievance Redressal Letter

We have taken care that the documents reflect details of risk and cover as proposed by you. We request you to verify and confirm that the documents are in order. Please ensure safety of these documents as they form part of our contract with you. For all your future correspondence you may have with us, kindly quote your Customer ID and Policy Number.

Customer ID : C04211

Policy Number : 4101191100000035-03

The Postal Address of your SBI General Branch that will service you in future is :
Union Trade Center (UTC), Office No. 201 and 202, Second Floor, Above TCS Passport Office, Beside Apple Hospital, Udhna Darwaja, Ring Road, Surat - 395007

In case of any queries or suggestions, please do not hesitate to get in touch with us. You can contact us at customer.care@sbigeneral.in or call our Customer Care Number 1800-102-1111 / 1800-22-1111.

We look forward to a continuing and mutually beneficial relationship.

Yours sincerely,



Authorized Signatory

SBI General Insurance and SBI are separate legal entities and SBI is working as Corporate Agent of the company for sourcing of insurance products

SBI General Insurance Company Ltd., Registered Office: & Corporate
Office: SBI General Insurance Company Ltd. 9th Floor, A&B Wing, Fulcrum
Building, Sahar Road, Andheri East, Mumbai-400099.

GROUP HEALTH INSURANCE POLICY - POLICY SCHEDULE
UIN - SBIHLGP21330V022021

SCHEDULE

Policy No : 4101191100000035-03	Servicing Branch Office : Union Trade Center (UTC), Office No. 201 and 202, Second Floor, Above TCS Passport Office, Beside Apple Hospital, Udhna Darwaja, Ring Road, Surat - 395007	Issue Date : 29-11-2022
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Intermediary Details :

Intermediary Name	SBI General Insurance Direct Code	
Intermediary Code	0061174	
Intermediary Contact Details	Mobile No.	Landline No.

Insured Details :

Name of the Insured/Proposer	:	COSMOS IMPEX INDIA PRIVATE LIMITED
Address	:	COSMOS HOUSE, 85/2, ATLADRA PADRA ROAD VADODARA Baroda, GUJARAT - 390012, INDIA
Period of Insurance	:	From 16-11-2022 (00:00:00 Hrs) to 15-11- 2023 (23:59:59 Hrs)
Previous insurance policy no, if any	:	4101191100000035-02
Name of the Administrator / TPA	:	PARAMOUNT HEALTH SERVICES & INSURANCE TPA PVT. LTD
No of Primary Insured Persons covered	:	318 Employees
Total No of Insured Persons Covered	:	856 [Commencement of Policy]
Total Sum Insured	:	68,900,000.00
Details of Insured Persons	:	As per annexure attached
Compulsory Co-pay (If Applicable)	:	As per Category Sheet (Annexure A)
Add on Covers Opted	:	As per Category Sheet (Annexure A)
GST No	:	24AAACC7621C1Z9
Coinsurance Details	:	100.00%

GROUP HEALTH INSURANCE POLICY - POLICY SCHEDULE

Attached to and forming part of Group Health Policy No 4101191100000035-03

Additional Conditions : Subject to the following additional Conditions and attached Clauses / Endorsements / Warranties :

- * Reasonable and Customary Charges will be applied on re-imburement claims from non network hospitals where medical treatment taken by the Insured Person during the Policy Period following an Illness or Injury that occurs during the Policy Period, subject to availability of the Sum Insured and any specific limits specified in the Schedule of Benefits and the terms, conditions and exclusions specified in the Policy document
 - * In case employees/ Dependents are covered on voluntary basis, it is mandatory to declare it at the time of quotation only else we reserve the rights to revise or withdraw our quote.
 - * Rate chart given with quotation is valid for demography enclosed in this quotation only. In case of change of member demography the premium and rate chart would be revised.
 - * In case there is per family rate chart then in final data employee vs Dependent ratio should be same as data given at the time of quotation. In case there is change in ratio then rate chart is liable to change.
 - * Group to Retail portability clause Continuity benefit will be provided as per retail medical underwriter.
 - * In case of deletion, there will be no refund for members who have claimed. In case of deletion, if intimation will be provided later than the DOL and any claim has been taken by the member in that period, Recovery of the claim amount need to be made from the corporate.
 - * Any Doctors/ Surgeons fees charged/paid over and above the Hospital Standard Tariff/Package stand excluded from the scope of the policy. In case of Chamber cases or outside visiting consultant has conducted the surgery or is being consulted, Insurance company would be liable to pay up to the agreed tariff/ package rates with the hospital. The over & above limit will have to be borne by the customer .
 - * Beneficiary name for issue of claim cheques will be assumed as name of the corporate unless otherwise specified. Any additions for new employee, spouse/ children would be allowed within 30 days of date of joining, marriage / birth respectively.
 - * Additional premium for each additional member. Per person premium would be provided by Group Underwriter once the quote is finalized. The list of members submitted at the inception of the policy will be considered as final
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- * Pre/Post Hospitalisation of 30/60 days respectively.
 - * Cashless and Reimbursement Policy.
 - * Pre-Existing Diseases exclusion waiver waived for all members, First 30 Days Exclusion waiver waived Off. 1st Year exclusion waiver waived Off .
 - * Employees shall be covered from DOJ subject to availability of sufficient CD balance being maintained with insurer and subject to intimation received within window period for addition for new joinees during the policy period
 - * Addition/deletion shall be done on prorata basis once in a month only subject to data being provided to us by 15th of succeeding month (or predecided date) subject to sufficient CD balance being maintained.
 - * Mid term increase in SI is not allowed.
 - * Mid term inclusion of Spouse & children shall only be allowed only in case of natural additions I.e marriage, child birth and legal adoption. The same is to be intimated to us within 45 days from date of marriage/child birth/adoption and Subject to 64Vb compliance