FAIRFIRST INSURANCE LIMITED
Access Towers II (14th Floor), No. 278/4, Union Place, Colombo 02, Sri Lanka
Tel: 011-2428428 | Fax: 011-2438438 | Email: info@fairfirst.lk | Website: www.fairfirst.lk

Insurance Product Information Document (IPID)
Personal Health Insurance Policy

This document is a summary of the key features of your insurance policy. You must read your full Policy Document for complete details.

1 Type of insurance cover.

The Personal Health Insurance Policy is designed to provide financial protection for you and your family members by covering necessary medical expenses you incur due to accidents or illnesses that require hospitalization.

2 Key Benefits (What is Covered)

Your specific coverage and benefit limits are detailed in your Policy Schedule.

2.1 **Hospitalization (Inpatient Care):** We cover medical expenses when you are admitted to a hospital for more than 24 hours due to an accident or illness.

2.2 **Day Care Treatment**: We cover a specific list of 106 surgical procedures (listed in Annexure 1 of your policy) that require less than 24 hours in a hospital. This benefit has a 6-month waiting period.

2.3 **No-Claim Bonus:** If you do not make any claims for a full year, you will receive a 5% discount on your renewal premium. This can increase each year up to a maximum of 15% after first three consecutive claim-free years (Section 3.6).

2.4 **Overseas Treatment:** Treatment outside Sri Lanka is covered only if the required procedure is not available locally (Section 3.4).

2.5 **Outpatient (OPD) Treatment:** This covers consultations, tests, or treatments where you are not admitted to a hospital (Section 1.7).

2.6 **Pregnancy and Maternity**: All costs related to pregnancy, childbirth (including C-sections), and pre/post-natal care are covered.

3 Optional Add-on Benefits (If you have selected and paid for them)

3.1. **Critical Illness Cover**: You can purchase an additional cover for a specific list of 15 critical illnesses (like cancer, heart attack, and stroke). This benefit has a 6-month waiting period (Annexure 2).

4 Key Exclusions (What is NOT Covered)

4.1. **Pre-existing Conditions**: Any health condition, illness, or symptom you had or were aware of before the policy started is not covered (Section 1.1).

4.2. **First 30-Day Waiting Period**: Hospitalization due to illness is not covered during the first 30 days of the policy. However, treatment for accidents is covered from day one (Section 1.2).

4.3. **Dental Treatment**: Not covered, unless hospitalization is required following an accident (Section 1.16).

4.4. **Psychiatric and Mental Illness**: All treatments for mental health conditions, stress, or psychological disorders are excluded (Section 1.8).

4.5. **Self-inflicted Harm & Substance Abuse**: Conditions resulting from attempted suicide or the misuse of alcohol or drugs (Section 1.3).

4.6. **Cosmetic and Vision/Hearing Correction**: Plastic surgery, cosmetic treatments, and surgeries to improve eyesight or hearing are not covered (Section 1.13, 1.19).

4.7. **Hazardous Activities:** Injuries from high-risk sports like scuba diving, racing, or mountaineering are excluded (Section 1.6).

For a full list, please read Section 1 (Exclusions Applicable) in your Policy Document.

5 How do I pay my premium?

You can pay your premium Annually. Payment can be made via methods such as bank transfer, cheque, or credit/debit card. A premium is only considered paid upon receiving an official receipt from us.

6 Why is it important to have nominees/beneficiaries?

This policy pays benefits directly to you (the Insured Person) or the hospital. As it is not a life insurance policy, a nominee is not required for claim payments.

7 What are my responsibilities? (Your Duty of Disclosure)

You have a duty to be truthful and transparent with us.

7.1. **When you buy or renew the policy:** You must provide complete and accurate information about your health and medical history. You must also inform us of any changes to your health, occupation, or address upon renewal (Section 3.7).

7.2. **During the policy period**: You must take reasonable care to prevent illness and accidents and follow all medical advice given by a qualified doctor. You must also inform us if you have other medical insurance policies (Section 3.8, 3.15).

Failing to disclose information can lead to your policy being cancelled or claims being rejected.

8 How do I make a claim?

8.1. **Step 1**: Notify Us

   a. You must inform us of any incident that may lead to a claim within 60 days.

8.2. **Step 2:** Pre-authorization for Cashless Service

   a. For planned hospitalization, contact us beforehand to get pre-authorization. This allows us to arrange a cashless facility, where we pay the hospital directly.

8.3. **Step 3**: Submit Required Documents

   a. For reimbursement claims (where you pay first), submit a completed claim form along with all original documents.

   b. Key Documents: Claim form, doctor's prescription for admission, original itemized hospital bills, original payment receipts, and the discharge summary.

8.4. **Step 4**: Claim Submission & Contact

   a. Claims Hotline & Inquiries: 011 2 428 428

   b. Email for Claims Submission: medicalclaim@fairfirst.lk

   c. Physical Submission: Fairfirst Insurance Limited, Access Towers II (14th Floor), 278/4, Union Place, Colombo 02.

For full details, please refer to Section 4 (Claims Procedure) in your Policy Document.

9 Complaints and Grievance Handling

9.1. Step 1 – Contact Fairfirst Insurance:

☎ +94 11242 8282 (8:30 a.m. to 5:00 p.m.)

✉ info@fairfirst.lk

You may escalate concerns to Fairfirst’s Risk & Compliance team.

9.2. Step 2 – External Escalation (if unresolved):

   a. Insurance Regulatory Commission of Sri Lanka (IRCSL)

   ☎ +94 11 2335167 | ✉ info@ircsl.gov.lk | 🌐 www.ircsl.gov.lk

   b. Insurance Ombudsman

   ☎ +94 11 2505542 / +94 11 2505041 | ✉ info@insuranceombudsman.lk | 🌐 www.insuranceombudsman.lk

10 Contact Us for More Information

Fairfirst Insurance Limited
Access Towers II (14th Floor), No. 278/4, Union Place, Colombo 02, Sri Lanka
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11 Other Important Information

11.1. **Cancellation**: You can cancel the policy at any time by giving us written notice. We can also cancel the policy by sending you a registered letter. Refunds depend on when the policy is cancelled and if any claims have been made (Section 3.10, 3.11, 3.12).

11.2. **Claim Time Limit**: Any legal action regarding a claim must be started within 12 months of the event (Section 3.16).

11.3. **Age Limits**: This policy is available for adults aged 18 to 70 and dependent children aged 3 months to 25 years (if unmarried and unemployed).