



STAR HEALTH AND ALLIED INSURANCE COMPANY LIMITED

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P R O S P E C T U S

YOUNG STAR INSURANCE POLICY

Unique Identification No: SHAHLIP26043V062526

❖ Eligibility

- i Any person aged between 18 years and 40 years can take this insurance. Lifelong renewal. Economically dependent children aged from 91 days to 25 years can be covered with one or both parents.
- ii. Family means self, spouse and economically dependent children not over 25 years of age.
- iii. In case of economically dependent children, when they complete 25 years of age, a separate policy has to be taken. In such an event, continuity of benefits in terms of waiting period will be provided.
- iv Proposer plus spouse with 3 economically dependent children in total maximum of 5 can be covered under the Policy on "floater" Sum Insured basis.
- v. All terms and conditions are applicable to all the members.

❖ **Medical Underwriting / Pre-Policy Medical Check-up:** The company may ask the members to be proposed to undergo medical underwriting either through medical tests or any other medium viz tele underwriting etc. This will vary/depend upon the Sum Insured/ Medical History/ Zone and Age.

If we accept the proposal, we will reimburse at least 50% of the costs incurred by the member undertaking such Pre-Policy medical check-up.

❖ **Midterm Inclusion Facility:** Is available on payment of proportionate premium for Newly Wedded spouse, New born baby and Legally adopted child.

Note:

- i. Waiting periods as stated in the policy will be applicable from the date of inclusion of such newly wedded spouse, new born baby, legally adopted child.
- ii. Such midterm inclusion will be subject to underwriter's approval

❖ **Policy Term:** 1 year/ 2 year/ 3 year. For policies more than one year, the Basic Sum Insured is for each of the year, without any carry over benefit thereof and the premium for such policies can be paid upfront as a single payment.

❖ **Long Term Discount:** 10% discount is available on 2nd year premium. 12.5% discount is available on 3rd year premium

Note: Long term discount will not be available, if premium is paid in instalment mode

❖ **Instalment Facility available:** Premium can be paid Monthly, Quarterly, Half-yearly and Yearly. In case of instalment mode of payment, there will be loading on annual premium as given below:

- i. 2% for half-yearly mode
- ii. 3% for quarterly mode
- iii. 4% for monthly mode
- iv. 0% for yearly mode

❖ **Plan Options**

There are two plans available;

- i. Silver Plan
- ii. Gold Plan

❖ **Sum Insured Options**

- i. Rs.3,00,000/- (Available only on Individual Sum Insured basis and only for renewals)
- ii. Rs.5,00,000/-, Rs.7,50,000/-, Rs.10,00,000/-, Rs.15,00,000/-, Rs.20,00,000/-, Rs.25,00,000/-, Rs.50,00,000/-, Rs.75,00,000/- and Rs.1,00,00,000/- available for Individual and Floater basis
- iii. If the policy is issued on floater basis, the Basic Sum Insured, Cumulative Bonus and other related benefits floats amongst the Insured Persons

❖ **Zone wise premium – Applicable**

Zone A : Delhi, New Delhi, Faridabad, Gurugram, Shahdara, Gautam Buddha Nagar, Ghaziabad, Mewat, Alwar, Baghpat, Bharatpur, Bhiwani, Bulandshahar, Fatehabad, Hisar, Jhajjar, Jind, Kaithal, Karnal, Kurukshetra, Mahendragarh, Meerut, Muzaffar Nagar, Palwal, Panchsheel Nagar (Hapur), Panipat, Rewari, Rohtak, Saharanpur, Sirsa, Sonapat, Charkhi Dadri, Gujarat, Daman and Diu, Dadra and Nagar Haveli, Mumbai (including suburban), Thane, Palghar and Raigad

Zone B : Telangana, Ernakulam, Kollam, Wayanad, Thiruvananthapuram, Mathura, Aligarh, Pune, Nashik and Ahmed Nagar

Zone C : Chennai, Bengaluru, Chengalpattu, Kanchipuram, Tiruvallur, Indore and Gwalior

Zone D : Rest of Uttar Pradesh, Rest of Tamil Nadu, Rest of Kerala, Rest of Maharashtra, Rest of Haryana, Rest of Madhya Pradesh, Rest of Karnataka, Rest of Rajasthan, Andhra Pradesh, Punjab, Kolkata, North 24 Parganas and Paschim Bardhaman

Zone E : Rest of India

- ❖ **Favourable Claim Experience Discount:** You may be eligible for a discount of 5% during renewals on your policy premium based on the past claim history at the policy level. This discount is applicable only if no claim is made under the policy or the total claim amount is up to Rs. 25,000/- in the preceding three years.

This discount is only applicable for Insured Persons aged up to 55 years. In case of floater policies, age of the eldest member will be taken into consideration for the calculation of this discount.

Where the policy is on individual basis, this discount will be provided to the Insured Persons who have not made any claim or if the claim amount is up to Rs. 25,000/-. In case of floater policies such amount of claim incurred by all the Insured Members who are covered as part of the Policy shall be considered.

If the claim amount exceeds Rs 25,000/- during the defined period, this discount will not be applicable.

Note:

- i. All claims except Preventive Health Check-up, E-Domestic Second Medical Opinion, Unlimited Tele-Consultation and Star Wellness program will be considered for calculation of discount.
- ii. We shall consider the data available till the generation of renewal notice for the purpose of this discount. Any claim amount paid after the generation of renewal notice shall be accounted in the subsequent renewal for the calculation of this discount.
- iii. In case of any change in information / details which affects the eligibility of this discount, the Company reserves the right to recover the discount offered to the Customers.

- ❖ **Coverage (Applicable for both Silver and Gold Plan)**

1. In-patient Treatment: We will cover the following Medical Expenses incurred in respect of Hospitalization of the Insured Person during the Policy Period, up to the Sum Insured specified in the Policy Schedule against this In-Patient treatment:

- i. Room (Single Private A/C room), Boarding and Nursing Expenses as provided by the Hospital.

Note: Hospitalization expenses which vary based on the room rent occupied by the Insured Person will be considered in proportion to the room rent limit / room category stated in the policy or actuals whichever is less.

- ii. Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees.

iii. Anesthesia, Blood, Oxygen, Operation Theatre charges, ICU charges, Surgical Appliances, Medicines and Drugs, Diagnostic Materials and X-ray, diagnostic imaging modalities, Dialysis, Chemotherapy, Radiotherapy, cost of Pacemaker, stent and such other similar expenses With regard to coronary stenting, the Company will pay cost of stent as per the Drug Price Control Order (DPCO) / National Pharmaceuticals Pricing Authority (NPPA) Capping.

2. Day Care Treatment: We will cover the Medical Expenses incurred in respect of All Day Care Treatments of the Insured Person during the Policy Period up to the Sum Insured as specified in the Policy Schedule if such Day Care treatment requires hospitalization as an in-patient for less than 24 hours.

3. AYUSH Treatment: Medical expenses for Inpatient Hospitalization incurred on treatment under Ayurveda, Unani, Siddha and Homeopathy systems of medicines in a AYUSH Hospital is payable up to the Sum Insured.

Note: Claims under Yoga and Naturopathy system of treatment will be payable subject to prior approval from the company.

4. Coverage for Modern Treatments: The expenses payable during the entire Policy Period for the following treatment / procedure (either as a day care or as in-patient exceeding 24hrs of admission in the hospital) is limited to the amount mentioned in table below;

Sum Insured (Rs.)	Uterine artery Embolization and HIFU	Balloon Sinuplasty	Deep Brain Stimulation	Oral Chemotherapy* (Sublimits including Pre and Post Hospitalization)
	Sum Insured on Individual Basis: Limit per person, per Policy Period for each treatment / procedure			
	Sum Insured on Floater Basis: Limit per Policy Period, for each treatment / procedure (Rs.)			
3,00,000/-	37,500/-	15,000/-	75,000/-	37,500/-
5,00,000/-	1,25,000/-	50,000/-	2,50,000/-	1,25,000/-
7,50,000/-	1,37,500/-	75,000/-	2,75,000/-	1,62,500/-
10,00,000/-	1,50,000/-	1,00,000/-	3,00,000/-	2,00,000/-
15,00,000/-	1,75,000/-	1,25,000/-	4,00,000/-	2,50,000/-
20,00,000/-	2,00,000/-	1,50,000/-	4,50,000/-	2,75,000/-
25,00,000/-	2,00,000/-	1,50,000/-	5,00,000/-	3,00,000/-
50,00,000/-	2,25,000/-	1,75,000/-	6,00,000/-	4,00,000/-
75,00,000/-	2,50,000/-	2,00,000/-	7,00,000/-	5,00,000/-
1,00,00,000/-	3,00,000/-	2,00,000/-	7,50,000/-	6,00,000/-

*Sublimits are all inclusive with or without hospitalization wherever hospitalization includes pre and post hospitalization.

Sum Insured (Rs.)	Immunotherapy-Monoclonal Antibody to be given as injection	Intra Vitreal injections	Robotic Surgeries	Stereotactic Radio Surgeries
	Sum Insured on Individual Basis: Limit per person, per Policy Period for each treatment / procedure			
	Sum Insured on Floater Basis: Limit per Policy Period for each treatment / procedure (Rs.)			
3,00,000/-	75,000/-	15,000/-	75,000/-	75,000/-
5,00,000/-	2,50,000/-	50,000/-	2,50,000/-	2,00,000/-
7,50,000/-	3,25,000/-	62,500/-	2,75,000/-	2,12,500/-
10,00,000/-	4,00,000/-	75,000/-	3,00,000/-	2,25,000/-
15,00,000/-	5,00,000/-	1,00,000/-	4,00,000/-	2,50,000/-
20,00,000/-	5,50,000/-	1,25,000/-	4,50,000/-	2,75,000/-
25,00,000/-	6,00,000/-	1,50,000/-	5,00,000/-	3,00,000/-
50,00,000/-	7,50,000/-	1,75,000/-	6,00,000/-	3,50,000/-
75,00,000/-	9,00,000/-	2,00,000/-	7,00,000/-	3,75,000/-
1,00,00,000/-	10,00,000/-	2,00,000/-	7,50,000/-	4,00,000/-

Sum Insured (Rs.)	Bronchical Thermoplasty	Vaporisation of the Prostate (Green Laser Treatment or Holmium Laser Treatment)	IONM-(Intra Operative Neuro Monitoring)	Stem Cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions
	Sum Insured on Individual Basis: Limit per person, per Policy Period for each treatment / procedure			
	Sum Insured on Floater Basis: Limit per Policy Period for each treatment / procedure (Rs.)			
3,00,000/-	Up to Sum Insured			75,000/-
5,00,000/-				2,50,000/-
7,50,000/-				3,25,000/-
10,00,000/-				4,00,000/-
15,00,000/-				5,00,000/-
20,00,000/-				5,50,000/-
25,00,000/-				6,00,000/-
50,00,000/-				7,50,000/-
75,00,000/-				9,00,000/-
1,00,00,000/-				10,00,000/-

5. **Pre-Hospitalization Expenses** : Medical expenses incurred up to 60 days immediately before the Insured Person is hospitalized.
6. **Post-Hospitalization Expenses**: Medical expenses incurred up to 90 days immediately after the Insured Person is discharged from the hospital.
7. **Road Ambulance**: Subject to an admissible hospitalization claim, Road Ambulance expenses incurred for the following are payable:-
 - i. for transportation of the Insured Person by private ambulance service to go to hospital when this is needed for medical reasons
or
 - ii. for transportation of the Insured Person by private ambulance service from one hospital to another hospital for better medical treatment
or
 - iii. for transportation of the insured person from the hospital where treatment is taken to their place of residence (if it is in same city) provided the requirement of an ambulance to the residence is certified by the medical practitioner.
8. **Home Care Treatment**: Payable up to 10% of the Sum Insured subject to maximum of Rs. 5 lakhs in a Policy Year, for treatment availed by the Insured Person at home, only for the specified conditions mentioned below, which in normal course would require care and treatment at a hospital but is actually taken at home provided that:
 - i. The Medical practitioner advises the Insured person to undergo treatment at home
 - ii. There is a continuous active line of treatment with monitoring of the health status by a medical practitioner for each day through the duration of the home care treatment
 - iii. Daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained
 - iv. Insured can avail "Home Care Treatment" service on cashless basis from the list of our Network service providers given in our website "www.starhealth.in"
 - v. Claim under this benefit forms part of Sum Insured.

List of Conditions covered under Home care treatment:

 - a. Fever and Infectious diseases which can be managed as In-patient
 - b. Uncomplicated Urinary tract infections but needing Parenteral Antibiotics
 - c. Asthma and COPD-Mild Exacerbations needing Home Nebulization
 - d. Acute Gastritis / Gastroenteritis
 - e. I.V. Chemotherapy [Where advised by the doctor]
 - f. Palliative Cancer care requiring medical assistance
 - g. Acute Vertigo
 - h. Diabetic foot and Cellulitis
 - i. IVDP [Cervical and Lumbar disc diseases]

- j. Major Surgeries / Arthroplasties needing IV Antibiotics Post Discharge
- k. Care for Brain and Spinal Injury Cases Post Discharge
- l. Post CVA Care at Home after Discharge

9. Cumulative Bonus: The Insured Person will be eligible for Cumulative bonus calculated at 20% of the basic Sum Insured for each claim free year subject to a maximum of 100% of the basic Sum Insured.

Special Conditions

- i. The Cumulative bonus will be calculated on the expiring Basic Sum Insured
- ii. If the insured opts to reduce the Basic Sum Insured at the subsequent renewal, the limit of indemnity by way of such Cumulative bonus shall not exceed such reduced Basic Sum Insured.
- iii. In the event of a claim resulting in
 - a. Partial utilization of Basic Sum Insured, such cumulative bonus so granted will be reduced at the same rate at which it has accrued.
 - b. Full utilization of Basic Sum Insured and nil utilization of cumulative bonus accrued, such cumulative bonus so granted will be reduced at the same rate at which it has accrued.
 - c. Full utilization of Basic Sum Insured and partial utilization of cumulative bonus accrued, the cumulative bonus granted on renewal will be the balance cumulative bonus available and will be reduced at the same rate at which it has accrued. At any point of time, the cumulative bonus will not be less than "zero".
 - d. Full utilization of Basic Sum Insured and full utilization of cumulative bonus accrued, the cumulative bonus granted on renewal will be "nil" or "zero".

10. Automatic Restoration of Sum Insured: There shall be automatic restoration of the Basic Sum Insured once by 100% subject to the following :-

- i. The automatic restoration shall be available immediately upon partial/full utilization of the limit of coverage.
- ii. Such Restored Basic Sum Insured can be utilized for all claims during the Policy Period.
- iii. The maximum liability of the Company in a Single claim under a Policy Year shall not exceed the limit of coverage.
- iv. The unutilized restored Sum Insured cannot be carried forward
- v. This Benefit is not available for Modern Treatment
- vi. Hospitalization due to continuous period of illness including its relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment was taken will be considered as same hospitalization as per "Any one illness" definition. Any claim payable under this benefit shall be subject to the definition as provided under "Any one illness".

11. Additional Basic Sum Insured for Road Traffic Accident (RTA): If the Insured Person meets with a Road Traffic Accident resulting in in-patient hospitalization, then the Basic Sum

Insured shall be increased by 25% subject to a maximum of Rs.10,00,000/- and subject to the following:

- i. It is evidenced that the Insured Person was wearing helmet and was either riding or travelling as pillion rider in a two wheeler at the time of accident as evidenced by Police record and Hospital record.
- ii. The additional Basic Sum Insured shall be available only once during the Policy Period.
- iii. The additional Basic Sum Insured shall be available after exhaustion of the limit of coverage.
- iv. The additional Basic Sum Insured can be utilized only for that particular hospitalization following the Road Traffic Accident.
- v. Automatic Restoration of Basic Sum Insured shall not apply for this benefit.
- vi. This benefit shall not be applicable for day care treatment.
- vii. The unutilized balance cannot be carried forward for the remaining Policy Period or for renewal.
- viii. Claim under this benefit will impact the Cumulative bonus.

12. Preventive Health Check up: We will arrange for a Preventive Health Check-up at Our Network Providers for the applicable package as specified below as per opted Sum Insured and subject to the conditions specified below:

Sum Insured / Policy Type (Rs.)	Rs.3,00,000/-	Rs.5,00,000/-	Rs.7,50,000/-	Rs.10,00,000/-	Rs.15,00,000/- and above
Individual	Package A	Package A	Package A	Package B	Package B
Floater	Not Applicable	Package A	Package A	Package B	Package B

- i. An initial waiting period of 30 days shall apply from the first inception of Policy. This waiting period shall not be applicable during subsequent renewals.
- ii. Health Check-up can be availed once per Policy Year per Insured Person who is covered as Adult in the Policy and all the tests must have been done on the same date.
- iii. For the updated and applicable list of tests available under such package, Insured Persons are required to check our website www.starhealth.in.
- iv. The pre-defined health check-up packages may be modified from time to time without prior notice.
- v. This cover can be availed through Star health mobile application, other digital platforms, or by calling at our Toll free number: 1800 425 2255.
- vi. The Network Provider/Health Service Provider shall be assigned by Us upon receiving the Insured Person's request to avail a Health Check-up under this cover.
- vii. Utilization of this Health Check-up shall not impact the Sum Insured.
- viii. In case of long term policies, Insured Person(s) are eligible for a Health Check-up once every Policy Year.

13. E-Domestic Second Medical Opinion: The Insured Person can obtain a Second Medical Opinion from a Doctor in the Company's network of Medical Practitioners practicing in India.

All the medical records provided by the Insured Person will be submitted to the Doctor chosen by him / her online and the medical opinion will be made available directly to the Insured by the Doctor. The Insured Person can obtain an E-Domestic Second Medical Opinion via Star Health Mobile App, by booking an appointment with a Doctor.

Special Conditions:

- i. This should be specifically requested by the Insured Person
- ii. This opinion is given based only on the medical records submitted without examining the patient
- iii. The second opinion should be only for medical reasons and not for medico-legal purposes
- iv. Any liability due to any errors or omission or consequences of any action taken in reliance of the second opinion provided by the Medical Practitioner is outside the scope of this policy
- v. Utilizing this facility alone will not amount to making a claim

14. Unlimited Tele-Consultation: We will arrange Tele Consultations with qualified Medical Practitioner or Healthcare professional through various modes of communication like audio, video, online portal, chat through Star Health mobile application or digital platforms.

The services provided under this cover will be made available subject to following conditions:

- i. The Medical Practitioner may recommend over-the-counter medications based on the information provided.
- ii. Tele Consultations should not substitute in-person consultation with independent Medical Practitioner/ Healthcare professional.
- iii. The proposer should seek assistance from a health care professional when interpreting and applying them to the Insured Person's individual circumstances. If the Insured Person has any concerns about His/ her health, He/ She may consult His/ her general practitioner. We shall not hold any responsibility towards any loss or damage arising out of or in relation to any opinion, advice, prescription, actual or alleged errors, omissions and representations made by the Medical Practitioner/ Health care professional.
- iv. There shall be no maximum limit on the count of Tele-Consultations that can be availed in a Policy Year by each Insured Person.
- v. We/Medical Practitioner/Health care professional may refer the Insured Person to another specialist or a general physician (outside of our empaneled network) if required, and the charges for such specialist or a general physician will have to be borne by the Insured Person.
- vi. We shall not be liable for any discrepancy in the information provided under this cover.
- vii. Availing services is at the sole discretion and risk of the Insured Person

15. Star Wellness Program: This program intends to promote, incentivize and to reward the Insured Persons' healthy life style through various wellness activities. The wellness activities

as mentioned below are designed to help the Insured Person to earn wellness reward points which will be tracked and monitored by the Company. The wellness points earned by the Insured Person(s) under the wellness program, can be utilized to get discount in premium. This Wellness Program is enabled and administered online through “Star Health” Mobile App.

Note: The Wellness Activates mentioned in the table below (from Serial Number 1 to 5) are applicable for the Insured Person(s) aged 18 years and above only.

The following table shows the discount on renewal premium available under the Wellness Program:

Wellness Points Earned	Discount in Premium
200 to 350	2%
351 to 600	5%
601 to 750	7%
751 to 1000	10%

*In case of floater policy the weight age is given as per the following table & noted points:

Family Size	Weightage
Self, Spouse	1:1
Self, Spouse and Dependent Children (up to 17 years)	1:1:0:0:0
Self, Spouse and Dependent Children (18 years and above)	2:2:1:1:1

Note: In case of two year policy, total number of wellness points earned in two year period will be divided by two.

Insured will be given log-in facility, which will be linked to his/ her policy.

* Please refer the Illustrations to understand the calculation of discount in premium, weight age and the calculation in case of two year policy.

The wellness services and activities are categorized as below:

Sr. No.	Activity	Maximum number of Wellness Points that can be earned under each activity in a Policy Year
1.	Manage and Track Health	
	a) Online Health Risk Assessment (HRA)	50
	b) Preventive Risk Assessment	200
2.	Affinity to Wellness	
	a) Participating in Walkathon, Marathon, Cyclothon and similar activities	100
	b) Membership in a health club (for 1 year or more)	100
3.	Stay Active – If the Insured member achieves the step count target on “Star Health” Mobile App	200

4.(a)	Weight Management Program (for the Insured who is Overweight / Obese)	100
4.(b)	Sharing Insured Fitness Success Story through adoption of Star Wellness Program (for the Insured who is not Overweight / Obese)	50
5.(a)	Chronic Condition Management Program (for the Insured who is suffering from Chronic Condition/s - Diabetes, Hypertension, Cardiovascular Disease or Asthma)	250
5.(b)	On Completion of De-Stress & Mind Body Healing Program (for the Insured who is not suffering from Chronic Condition/s - Diabetes, Hypertension, Cardiovascular Disease or Asthma)	125
Additional Wellness Services		
6	Virtual Consultation Service	
7	Medical Concierge Services	
8	Period & Fertility Tracker	
9	Digital Health Vault	
10	Wellness Content	
11	Health Quiz & Gamification	
12	Post-Operative Care	
13	Discounts from Network Providers	

1. Manage and Track Health:

a. Completion of Health Risk Assessment (HRA):

The Health Risk Assessment (HRA) questionnaire is an online tool for evaluation of health and quality of life of the Insured. It helps the Insured to introspect his/ her personal lifestyle. The Insured can log into his/her account on the website www.starhealth.in and complete the HRA questionnaire. The Insured can undertake this once per Policy Year. On Completion of online HRA questionnaire, the Insured earns 50 wellness points.

Note: To get the wellness points mentioned under HRA, the Insured has to complete the entire HRA within one month from the time he/she started HRA Activity.

b. Preventive Risk Assessment:

The Insured can also earn wellness points by undergoing diagnostic / preventive tests during the Policy Year. These tests should include the four mandatory tests mentioned below. Insured can take these tests at any diagnostic centre at Insured’s own expenses.

- If all the results of the submitted test reports are within the normal range, Insured earns 200 wellness points.
- If the result of any one test is not within the normal range as specified in the lab report, Insured earns 150 wellness points.
- If two or more test results are not within the normal range, Insured earns 100 wellness points only.

List of mandatory tests under Preventive Risk Assessment

1. Complete Haemogram Test
2. Blood Sugar (Fasting Blood Sugar (FBS) + Postprandial (PP) [or] HbA1c)
3. Lipid profile (Total cholesterol, HDL, LDL, Triglycerides, Total Cholesterol / HDL Cholesterol Ratio)
4. Serum Creatinine

Note: These tests reports should be submitted together and within 30 days from the date of undergoing such Health Check-Up.

2. Affinity towards wellness: Insured earns wellness points for undertaking any of the fitness and health related activities as given below.

List of Fitness Initiatives and Wellness points:

List of Fitness Initiatives and Wellness points		
	Initiative	Wellness Points
a.	Participating in Walkathon, Marathon, Cyclothon and similar activities	100
	- On submission of BIB Number along with the details of the entry ticket taken to participate in the event.	
b.	Membership in a health club (for 1 year or more) - In a Gym / Yoga Centre / Zumba Classes / Aerobic Exercise/ Sports Club/ Pilates Classes/ Swimming / Tai Chi/ Martial Arts / Gymnastics/ Dance Classes	100
<p>Note: In case if Insured is not a member of any health club, he/she should join into club within 3 months from the date of the policy risk commencement date. Insured person should submit the health club membership.</p>		

3. Stay Active: Insured earns wellness points on achieving the step count target on “Star Health” Mobile App as mentioned below:

Average number of steps per day in a Policy Year	Wellness Points
• If the average number of steps per day in a Policy Year are between - 5000 and 7999	100
• If the average number of steps per day in a Policy Year are between - 8000 and 9999	150
• If the average number of steps per day in a Policy Year are - 10000 and above	200
<p>Note:</p> <ul style="list-style-type: none"> • First month and last month in each Policy Year will not be taken into consideration for calculation of average number of steps per day under Stay Active. • The “Star Health” Mobile App must be downloaded within 30 days of the policy risk start date to avail this benefit. • The average step count completed by an Insured member would be tracked on “Star Health” Mobile App. 	

4. a. Weight Management Program: This Program will help the Insured Persons with Over Weight and Obesity to manage their Body Mass Index (BMI) through the empanelled wellness experts who will guide the Insured in losing excess weight and maintain their BMI.

- On acceptance of the Weight Management Program, Insured earns 50 wellness points.
- An additional 50 wellness points will be awarded in case if the results are achieved and maintained as mentioned below.

Sr. No.	Name of the Ailment	Values to be submitted	Criteria to get the Wellness points
1.	Obesity (If BMI is above 29)	Height & Weight (to calculate BMI)	Achieving and maintaining the BMI between 18 and 29
2.	Overweight (If BMI is between 25 and 29)	Height & Weight (to calculate BMI)	Reducing BMI by two points and maintaining the same BMI in the Policy Year
- Values (for BMI) shall be submitted for every 2 months (up to 5 times in each Policy Year)			

4. b. In case if the Insured is not Overweight / Obese, the Insured can submit his/her Fitness Success Story with us, on how the Insured Started / Improved /Maintaining his/her "Active/Healthy Life Style" through adoption of Star Wellness Activities.

On submission of the Fitness Success Story through adoption of Star Wellness Activities, Insured earns 50 wellness points.

5. a. **Chronic Condition Management Program:**

This Program will help the Insured suffering from Diabetes, Hypertension, Cardiovascular Disease or Asthma to track their health through the empanelled wellness experts who will guide the insured in maintaining/ improving the health condition.

- On acceptance of the Chronic Condition Management Program, Insured earns 100 wellness points.
- The Insured has to submit the test result values for every 3 months maximum up to 3 times in a Policy Year.
- If the test result values are within +/- 10% range of the values given below, for at least 2 times in a Policy Year, an additional 150 wellness points will be awarded.
- These tests reports to be submitted within 1 month from the date of undergoing the Health Check-Up

Sr.No.	Name of the Ailment	Test to be submitted	Values Criteria to get the additional Wellness points
1.	Diabetes (Insured can submit either HbA1c test value (or) Fasting Blood Sugar (FBS) Range and Postprandial test value)	HbA1c	≤ 6.5
		Fasting Blood Sugar (FBS) Range and Postprandial test value	100 to 125 mg/dl below 160 mg/dl
2.	Hypertension	Measured with - BP apparatus	Systolic Range - 110 to 140 mmHg Diastolic Range - 70 to 90 mmHg
3.	Cardiovascular Disease	LDL Cholesterol and Total Cholesterol / HDL Cholesterol Ratio	100 to 159 mg/dl ≤ 4.0
4.	Asthma	PFT (Pulmonary Function Test)	FEV1 (PFC) is 75% or more FEV1/ FVC is 70% or more

5.b. In case if the Insured is not suffering from Chronic Condition/s (Diabetes, Hypertension, Cardiovascular Disease or Asthma) he/she can opt for “De-Stress & Mind Body Healing Program”. This program helps the Insured to reduce stress caused due to internal (self-generated) & external factors and increases the ability to handle stress.

- On acceptance of De-stress & Mind Body Healing Program Insured earns 50 wellness points.
- On completion of De-stress & Mind Body Healing Program Insured earns an additional 75 wellness points.

Note: This is a 10 weeks program which insured needs to complete without any break.

6. Virtual Consultation Service: ‘Medical Consultation’ is available through our in-house Medical Practitioners/Empanelled Service providers round the clock to the insured through an online portal, mobile application as a chat service, voice call or a call back service. Consultations including on ‘Diet & Nutrition’ and ‘Second Medical Opinion’ is available.

7. Medical Concierge Services:

The Insured can also contact Star Health to avail the following services:

- Emergency assistance information such as nearest ambulance / hospital / blood bank etc.

8. Period & Fertility Tracker: The online easy tracking program helps every woman with their period health and fertility care. The program gives access to trackers for period and ovulation which maps out cycles for months. This helps in planning for conception prevention and tracks peak ovulation if planning pregnancy.

9. Digital Health Vault: A secured Personal Health records system for Insured to store/access and share health data with trusted recipients. Using this portal, Insured can store their health documents (prescriptions, lab reports, discharge summaries etc.), track health data add family members.

10. Wellness Content: The wellness portal provides rich collection of health articles, blogs, tips and other health and wellness content. The contents have been written by experts drawn from various fields. Insured will benefit from having one single and reliable source for learning about various health aspects and incorporating positive health changes.

11. Health Quiz & Gamification:

- The wellness portal provides a host of Health & Wellness Quizzes. The wellness quizzes are geared towards helping the Insured to be more aware of various health choices.
- Gamification helps in creating fun and engaging health & wellness experiences. It helps to create a sense of achievement in users and increases motivation levels.

12. Post-Operative Care: It is done through follow up phone calls (primarily for surgical cases) for resolving their medical queries.

13. Discounts from Network Providers: The Insured can avail discounts on the services offered by our network providers which will be displayed in our website.

Terms and conditions under wellness activity

- i. Any information provided by the Insured in this regard shall be kept confidential.

- ii. There will not be any cash redemption against the wellness reward points.
- iii. Insured should notify and submit relevant documents, reports, receipts etc for various wellness activities within 1 month of undertaking such activity/test.
- iv. No activity, report, document, receipt can be submitted in the last month of each Policy Year.
- v. For services that are provided through empanelled service provider, Star Health is only acting as a facilitator; hence would not be liable for any incremental costs or the services.
- vi. All medical services are being provided by empanelled health care service provider. We ensure full due diligence before empanelment. However Insured should consult his/her doctor before availing/taking the medical advices/services. The decision to utilize these advices/services is solely at Insured Person’s discretion.
- vii. We reserve the right to remove the wellness reward points if found to be achieved in unfair manner.
- viii. Star Health, its group entities, or affiliates, their respective directors, officers, employees, agents, vendors, are not responsible or liable for, any actions, claims, demands, losses, damages, costs, charges and expenses which a Member claims to have suffered, sustained or incurred, by way of and / or on account of the Wellness Program.
- ix. Services offered are subject to guidelines issued by IRDAI from time to time.

ILLUSTRATION OF BENEFITS:

Lets look how the Insured can avail discount on premium through the “Star Wellness Program”

Scenario – 1

A 24 year old Individual Ramesh buys Young Star Insurance Policy with Sum Insured of 25 Lacs, let’s understand how he can earn Wellness Points by doing different wellness activities. Ramesh has declared that his Body Mass Index (BMI) as 25. Ramesh enrolled under the Star Wellness Program and completed the following wellness activities.

Sr.No	Name of the wellness activity taken up during the Policy Year	Wellness Points Earned
1.	Completed Online Health Risk Assessment (HRA)	50
2.	Submitted Health Check-Up Report (one test result is not within normal range)	150
3.	Participated in Walkathon	100
4.	Attended to Yoga Classes	100
5.	Achieved 10,000 average number of steps per day during the Policy Year	200
6.	Ramesh accepted the Weight management program and reached 23 BMI	100
7.	Ramesh has completed De-stress & Mind Body Healing Program	125
	Total Number of Wellness Points earned	825

Based on the number of Wellness Points earned Ramesh is eligible to get 10% discount on renewal premium.

ILLUSTRATION OF BENEFITS:

Lets look how the Insured can avail discount on premium through the “Star Wellness Program”

Scenario – 2

A 26 year old Individual Suresh and his wife Lakshmi aged 25 years buys Young Star Insurance Policy (Floater Sum Insured) with Sum Insured of 50 Lacs, let’s understand how they can earn Wellness Points under the Floater Policy. Suresh has declared his Body Mass Index (BMI) as 26 & Lakshmi has declared her BMI as 25. Suresh and Lakshmi enrolled under the Star wellness program and completed the following wellness activities.

Sr. No	Name of the wellness activity taken up during the Policy Year	Wellness Points Earned by Suresh	Wellness Points Earned by Lakshmi
1.	Completed Online Health Risk Assessment (HRA)	50	50
2.	Submitted Health Check-Up Report	200	200
3.	Participation in Marathon	100	100
4.	Attended to Aerobic Exercise	100	100
5.	On achieving the step count target	200	150
6.	Suresh accepted the Weight management program and reached 24 BMI Lakshmi accepted the Weight management program and reached 23 BMI	100	100
7.	Suresh & Lakshmi has completed De-stress & Mind Body Healing Program	125	125
	Total Number of Wellness Points earned	875	825
	No of wellness points based upon weightage - 1:1	437 (875x1/2)	412 (825x1/2)

Total Number of Wellness Points earned by Suresh and Lakshmi = 849 (437+412)

Based on the no of Wellness Points earned, Suresh & Lakshmi are eligible to get 10% discount on renewal premium

ILLUSTRATION OF BENEFITS:

Lets look how the Insured can avail discount on premium through the “Star Wellness Program”

Scenario – 3

A 35 year old Individual Umesh buys Young Star Insurance Policy for two year period, with Sum Insured of 1 Crore, let’s understand how he can earn Wellness Points by doing different wellness activities. He is suffering from Hypertension. Umesh enrolled under the Star Wellness Program and completed the following wellness activities.

Sr. No	Name of the wellness activity taken up during the Policy Year	Wellness Points Earned in the First Year	Wellness Points Earned in the Second Year
1.	Completed Online Health Risk Assessment (HRA)	50	50
2.	Submitted Health Check-Up Report	200	200
3.	Participated in Walkathon	100	100
4.	Attended to Tai Chi Classes	100	-
5.	Achieved 10,000 average number of steps per day during the Policy Year	200	200
6.	Submitted his fitness success story	50	50
7.	Managed Hypertension through Chronic management program	250	250
	Total Number of Wellness Points earned	950	850

Total Number of Wellness Points earned by Umesh = 1800 (950+850)

Calculation of Wellness Points as per two year policy condition = 900 (1800/2)

Based on the number of Wellness Points earned, Umesh is eligible to get 10% discount on renewal premium

❖ Coverage available only under Gold Plan

1. **Delivery Expenses:** Expenses for a Delivery including Delivery by Caesarean section (including pre-natal and post natal expenses) up to Rs.30,000/- per delivery is payable, subject to the following :-
 - i. This benefit is available only for a maximum of 2 deliveries in the life time under this policy.
 - ii. This Benefit is subject to a waiting period of 36 months from the date of first commencement of Young Star Insurance Policy and its continuous renewal thereof with the Company.
 - iii. A waiting period of 24 months will apply afresh following a claim under this benefit.
 - iv. Pre-Hospitalization and Post Hospitalization expenses and Hospital Cash Benefit are not applicable for this section.
 - v. This cover is available only when
 - a. both Self and Spouse are covered under this policy either on floater basis or on individual basis and both Self and Spouse have been covered for a continuous period of 36 months under Young Star Insurance Policy.
 - b. the policy covering the self and spouse are in force when this benefit becomes payable.
 - vi. Claims under this section will not reduce the Sum Insured
 - vii. Claim under this section will impact the Cumulative bonus
7. **Hospital Cash Benefit:** The Company will pay a Cash Benefit of Rs.1000/- for each completed day of hospitalization subject to a maximum of 7 days per hospitalization and 14 days per Policy Period, provided, there is a valid claim for hospitalization under this policy.

Note :

1. This benefit is subject to 1 day Deductible.
2. Payment under this benefit does not form part of the basic Sum Insured
3. Claim under this section will impact the Cumulative bonus

- ❖ **Add-on cover:** Young Star Extra Protect – Add on cover| UIN: SHAHLIA23171V012223 and its subsequent revisions.

Star Flexi | UIN: SHAHLIA26040V012526 and its subsequent revisions.

These Add on covers can be availed along with this Product. Please ask for the Prospectus and Proposal Form of the same at the time of purchase. All terms and conditions of the Add-on covers will apply.

Customers opting Young Star Extra Protect-Add on Cover, shall have a discount of 0.25% on the base policy premium of Young Star Insurance Policy

❖ Exclusions (Applicable for both Silver and Gold Plan)

The Company shall not be liable to make any payments under this policy in respect of any expenses what so ever incurred by the Insured Person in connection with or in respect of:

1. Pre-Existing Diseases - Code Excl 01

- A. Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 12 months of continuous coverage after the date of inception of the first Policy with insurer
- B. In case of enhancement of Sum Insured the exclusion shall apply afresh to the extent of Sum Insured increase
- C. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage
- D. Coverage under the Policy after the expiry of 12 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer

2. Specified disease / procedure waiting period - Code Excl 02

- A. Expenses related to the treatment of the following listed Conditions, surgeries/ treatments shall be excluded until the expiry of 12 months of continuous coverage after the date of inception of the first policy with us. This exclusion shall not be applicable for claims arising due to an accident
- B. In case of enhancement of Sum Insured the exclusion shall apply afresh to the extent of Sum Insured increase
- C. If any of the specified disease/procedure falls under the waiting period specified for pre-existing diseases, then the longer of the two waiting periods shall apply
- D. The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion
- E. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage
- F. List of specific diseases/procedures;
 - i. Diseases of ENT and Thyroid
 - ii. All types of Hydrocele, Hernia, Varicocele, Piles, Fistula, and Fissure in Ano.
 - iii. Diseases of Female Reproductive System
 - iv. Calculus diseases of the Gall Bladder, Kidney and Urinary Tract

3. 30-day waiting period - Code Excl 03

- A. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident, provided the same are covered

- B. This exclusion shall not, however, apply if the Insured Person has continuous coverage for more than twelve months
- C. The within referred waiting period is made applicable to the enhanced Sum Insured in the event of granting higher Sum Insured subsequently

4. Investigation & Evaluation – Code Excl 04

- A. Expenses related to any admission primarily for diagnostics and evaluation purposes only are excluded
- B. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded

5. Rest Cure, rehabilitation and respite care – Code Excl 05: Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:

- i. Custodial care either at home or in a nursing facility for personal care such as help with activities of daily living such as bathing, dressing, moving around either by skilled nurses or assistant or non skilled persons
- ii. Any services for people who are terminally ill to address physical, social, emotional and spiritual needs

6. Obesity/ Weight Control – Code Excl 06: Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions;

- A. Surgery to be conducted is upon the advice of the Doctor
- B. The surgery/Procedure conducted should be supported by clinical protocols
- C. The member has to be 18 years of age or older and
- D. Body Mass Index(BMI);
 - 1. greater than or equal to 40 or
 - 2. greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less invasive methods of weight loss:
 - a. Obesity-related cardiomyopathy
 - b. Coronary heart disease
 - c. Severe Sleep Apnea
 - d. Uncontrolled Type2 Diabetes

7. Change-of-Gender treatments – Code Excl 07: Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.

8. Cosmetic or plastic Surgery – Code Excl 08: Expenses for cosmetic or plastic surgery or any treatment to change appearance unless for reconstruction following an Accident, Burn(s) or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the Insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.

9. **Hazardous or Adventure sports – Code Excl09:** Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.
10. **Breach of law – Code Excl 10:** Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.
11. **Excluded Providers – Code Excl 11:** Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website / notified to the policyholders are not admissible. However, in case of life threatening situations or following an accident, expenses up to the stage of stabilization are payable but not the complete claim.
12. Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof – **Code Excl 12**
13. Treatments received in health hydros, 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 Excl 13**
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 Excl 14**
15. **Refractive Error – Code Excl 15:** Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres.
16. **Unproven Treatments – Code Excl 16:** Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.
17. **Sterility and Infertility – Code Excl 17:** Expenses related to sterility and infertility. This includes;
 - a. Any type of contraception, sterilization
 - b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
 - c. Gestational Surrogacy
 - d. Reversal of sterilization
18. **Maternity – Code Excl 18** (Except to the extent covered under Delivery Section – Gold Plan)
 - i. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy;
 - ii. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the Policy Period

19. Circumcision (unless necessary for treatment of a disease not excluded under this policy or necessitated due to an accident), Preputioplasty, Frenuloplasty, Preputial Dilatation and Removal of SMEGMA - **Code - Excl 19**
 20. Congenital External Condition / Defects / Anomalies - **Code- Excl 20**
 21. Convalescence, general debility, run-down condition, Nutritional deficiency states - **Code- Excl 21**
 22. Intentional self -injury - **Code- Excl 22**
 23. Injury/disease caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not) - **Code- Excl 24**
 24. Injury or disease caused by or contributed to by nuclear weapons/ materials - **Code- Excl 25**
 25. Expenses incurred on Enhanced External Counter Pulsation Therapy and related therapies, Chelation therapy, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy, VAX-D, Low level laser therapy, Photodynamic therapy and such other therapies similar to those mentioned herein under this exclusion - **Code- Excl 26.**
 26. Unconventional, Untested, Experimental therapies - **Code- Excl 27**
 27. Autologous derived Stromal vascular fraction, Chondrocyte Implantation, Procedures using Platelet Rich plasma and Intra articular injection therapy - **Code- Excl 28**
 28. Biologicals, except when administered as an in-patient, when clinically indicated and hospitalization warranted. - **Code- Excl 29**
 29. Inoculation or Vaccination (except for post-bite treatment and for medical treatment for therapeutic reasons) - **Code- Excl 31**
 30. Dental treatment or surgery unless necessitated due to accidental injuries and requiring hospitalization (Dental implants are not payable) - **Code Excl 32**
 31. Hospital registration charges, admission charges, record charges, telephone charges and such other charges - **Code Excl 34**
 32. Cost of spectacles and contact lens, hearing aids, Cochlear implants and procedures, walkers and crutches, wheel chairs, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis, infusion pump and such other similar aids. - **Code- Excl 35**
 33. Any hospitalization which are not medically necessary / does not warrant hospitalization - **Code-Excl 36**
 34. Other Excluded Expenses as detailed in the website www.starhealth.in - **Code Excl 37**
 35. Existing disease/s, disclosed by the Insured and mentioned in the policy schedule under Permanent Exclusion (based on Insured's consent) - **Code- Excl 38**
- ❖ **Moratorium Period:** After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the insurer on grounds of non-disclosure, misrepresentation, except

on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever, the Sum Insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits.

❖ **Claim Procedure** Claiming process and documents to be submitted in support of claim:

A. Condition Precedent to Admission of Liability: The terms and conditions of the policy must be fulfilled by the Insured Person for the Company to make any payment for claim(s) arising under the policy.

B. For Cashless Treatment:

- a. For assistance call 24 hours help-line 044-69006900 or Toll Free No.1800 425 2255, Senior Citizens may call at 044 40020888
- b. Inform the ID number for easy reference
- c. On admission in the hospital, produce the ID Card issued by the Company at the Hospital Helpdesk
- d. Obtain the Pre-authorization Form from the Hospital Help Desk, complete the Patient Information and resubmit to the Hospital Help Desk
- e. The Treating Doctor will complete the Hospitalization/ treatment information and the hospital will fill up expected cost of treatment. This form is submitted to the Company
- f. The Company will process the request and call for additional documents / clarifications if the information furnished is inadequate.
- g. Once all the details are furnished, the Company will process the request as per the terms and conditions as well as the exclusions therein and either approve or reject the request based on the merits.
- h. In case of emergency hospitalization information to be given within 24 hours after hospitalization
- i. Cashless facility can be availed only in networked Hospitals. For details of Networked Hospitals, the Insured may visit www.starhealth.in or contact the nearest branch.
- j. KYC (Identity proof with Address) of the proposer, as per AML Guidelines In non-network hospitals payment must be made up-front and then reimbursement will be effected on submission of documents.

Note: The Company reserves the right to call for additional documents wherever required.

Denial of a Pre-authorization request is in no way to be construed as denial of treatment or denial of coverage. The Insured Person can go ahead with the treatment, settle the hospital bills and submit the claim for a possible reimbursement.

C. For Reimbursement claims: Time limit for submission of

Sl.no.	Type of Claim	Prescribed time limit
1	Reimbursement of hospitalization, day care and pre hospitalization expenses	Claim must be filed within 15 days from the date of discharge from the Hospital.
2	Reimbursement of Post hospitalization	Within 15 days after completion of 90 days from the date of discharge from hospital

D. Notification of Claim: Upon the happening of any event giving rise or likely to give rise to a claim under the Policy, a Notification of Claim with full particulars shall be sent to the Company within stipulated time limit as described below:

Emergency Hospitalization (Cashless / Reimbursement): Within 24 hours of date and time of Hospitalization if the Insured Person has been hospitalized in an Emergency.

Planned Hospitalization (Cashless / Reimbursement): At least 48 hours prior to the proposed treatment or date and time of Hospitalization.

Note: Conditions C and D are precedent to admission of liability under the policy. However the Company will examine and relax the time limit mentioned in these conditions depending upon the merits of the case.

E. Documents to be submitted for Reimbursement: The reimbursement claim is to be supported with the following documents and submitted within the prescribed time limit.

- a. Duly completed claim form, and
- b. Pre Admission investigations and treatment papers in original
- c. Discharge Summary in original from the hospital
- d. Cash receipts in original from hospital, chemists
- e. Cash receipts and reports for tests done in original
- f. Receipts from doctors, surgeons, anesthetist in original
- g. Certificate from the attending doctor regarding the diagnosis
- h. Copy of PAN card
- i. Copy of Aadhaar Card
- j. Any other document specific to the treatment / illness
- k. Prescriptions and receipt for Pre and Post-Hospitalization expenses
- l. KYC (Identity proof with Address) of the proposer, as per AML Guidelines
- m. NEFT documents viz., Customer name, Bank Account No., Name of the Bank, IFSC code
- n. CKYC No. of the proposer (if available)

Note: For assistance call 24 hours helpline 044-69006900 or Toll Free No.: - 1800 425 2255, Senior Citizens may call at 044 40020888

For the comprehensive list of documents to be submitted while filing a reimbursement claim, please refer our website under the link <https://www.starhealth.in/claims/#claim-process>

❖ **Renewal of policy:** The policy shall be renewable provided the product is not withdrawn, except in case of established fraud or non-disclosure or misrepresentation by the Policyholder. If the product is withdrawn, the policyholder shall be provided with suitable options to migrate as per the procedure stated under “withdrawal clause”

- i. At the end of the Policy Period, the policy shall terminate and can be renewed within the Grace Period of 30 days.
- ii. While coverage is not available during the Grace Period, if the policy is renewed during the Grace Period, all the credits (Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc.) accrued under the policy shall be protected.

❖ **Special Condition**

If the Insured Person avails this policy before the age of 36 years and has continuously renewed without any break, then, on completion of 40 years of age the Insured Person will be offered a discount of 10% on the premium applicable at renewal at the age of 40 years for the Sum Insured opted at the inception of this policy. This discount is available for all the subsequent renewals. The discount is not cumulative. This discount will not be given if the Insured Person migrates to any other policy offered by the Company.

If an individual policy is converted into family floater policy at the time of renewal, then the discount is available on the family floater policy only if the age of the Insured Person added under the family floater policy is less than the age of 36 years.

Note: If individual members are covered for different Sums Insured, then the discount is available on the premium paid for the lowest of all the Sums Insured at the first inception of the policy

❖ **Possibility of Revision of Terms of the Policy including the Premium Rates:** The Company may revise or modify the terms of the policy including the premium rates as per the extant Guidelines. The Insured Person shall be notified thirty days before the changes are effected.

❖ **Withdrawal of policy :** In the likelihood of this product being withdrawn in future, the Company will intimate the Policyholder about the same 90 days prior to expiry of the policy.

- i. A one-time option to renew the existing product, if renewal falls within the 90 days from the date of withdrawal of the product, or
- ii. Policyholder will have the option to migrate to similar health insurance product available with the Company at the time of renewal. Policyholder can transfer the credits gained (to the extent of Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc.) in the previous policy to the migrated policy, provided the policy has been maintained without a break

❖ **Premium Payment in Instalments:** If the Policyholder has opted for Payment of Premium on an instalment basis i.e. Yearly or Half Yearly or Quarterly or Monthly as mentioned in the Policy Schedule/Certificate of Insurance, the following conditions shall apply (notwithstanding any terms contrary elsewhere in the policy)

- i. For monthly instalment option: Grace Period of 15 days would be given to pay the instalment premium due for the policy.
 - ii. For Quarterly, Half yearly and Yearly instalment option: Grace Period of 30 days would be given to pay the instalment premium due for the policy.
 - iii. The Policyholder will get the accrued continuity benefit in respect of the (Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc.) in the event of payment of premium within the stipulated Grace Period.
 - iv. No interest will be charged if the instalment premium is not paid on due date.
 - v. In case of instalment premium due not received within the grace period, the policy will get cancelled.
 - vi. In the event of a claim, all subsequent premium instalments shall immediately become due and payable.
 - vii. The company has the right to recover and deduct all the pending instalments from the claim amount due under the policy.
 - viii. For premium paid in instalments during the Policy Period, coverage is available during the grace period also.
- ❖ **Medical Underwriting Loading:** Company may apply a risk loading on the premium payable (based upon the declarations made in the proposal form and the health status of the persons proposed for insurance).
- i. The maximum risk loading applicable for an individual shall not exceed above 125% per diagnosis / medical condition and an overall risk loading up to 200% per insured person.
 - ii. This loading is applied from the Commencement Date of the Policy including subsequent renewal(s) with the Company.
 - iii. Company will inform about the applicable risk loading or exclusion or both as the case may be through a counter offer.
 - iv. The Company will issue Policy only after getting the Proposer's consent and additional premium (if any).

- ❖ **Free Look Period:** The Free Look Period shall be applicable on new individual health insurance policies and not on renewals or at the time of porting/migrating the policy.

The Policyholder shall be allowed free look period of thirty days from date of receipt of the policy document whether electronically or otherwise to review the terms and conditions of the policy. If the Policyholder is not satisfied with any of the terms and conditions and has not made any claim, the Policyholder has the option to cancel his/her policy. This option is available in case of policies with a term of one year or more.

The Policyholder shall be entitled to a refund of the premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the expenses, if any incurred by the Insurer on medical examination of the proposer and stamp duty charges.

- ❖ **Redressal of Grievance:** In case of any grievance the Insured Person may contact the Company through

Website : www.starhealth.in
E-mail : gro@starhealth.in, grievances@starhealth.in
Ph. No. : 044-69006900 | Toll Free No. 1800 425 2255
 Senior Citizens may call at 044-69007500

Courier/Post: **Star Health and Allied Insurance Company Limited, 4th Floor, Balaji Complex, No.15, Whites Lane, Whites Road, Royapettah, Chennai-600014**

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance. If Insured person is not satisfied with the redressal of grievance through one of the above methods, Insured Person may contact the grievance officer at 044-43664600.

For updated details of grievance officer, kindly refer the link

<https://www.starhealth.in/grievance-redressal>

If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017, as amended from time to time.

Grievance may also be lodged at IRDAI Integrated Grievance Management System - <https://bimabharosa.irdai.gov.in/>

- ❖ **Migration:** In case of migration of one policy to another with the same insurer, the Policyholder (including all members under family cover and group insurance policies) can transfer the credits gained to the extent of the Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc. in the previous policy to the migrated policy.
- ❖ **Portability:**
 - The Policyholder has the choice to port his / her policy from one Insurer to another by applying to such Insurer to port the entire policy along with all the members of the family, if any, at least 30 days before, but not earlier than 60 days from the policy renewal date as per IRDAI guidelines related to portability.
 - The Policyholder is entitled to transfer the credits gained to the extent of the Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc. from the existing Insurer to the Acquiring Insurer in the previous policy.
- ❖ **Disclosure of Information:** The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis description or nondisclosure of any material fact by the policyholder.

❖ **Cancellation:**

- i. The Policyholder may cancel his policy by giving 7 days written notice. In such an event, the Company shall
 - a. refund proportionate premium for unexpired Policy Period, for Policy Term upto one year and there is no claim (s) made during the Policy Period.
 - b. refund premium for the unexpired Policy Period, in respect of policies with Policy Term more than 1 year and risk coverage for such Policy Years has not commenced.
- ii. The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud by the Insured Person by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of misrepresentation, non-disclosure of material facts or fraud

Note: In case of long term policies the refund will be given after adjusting the long term discount availed by the insured/ policyholder.

❖ **Automatic Expiry:** The insurance under this policy with respect to each relevant Insured Person shall expire immediately on the earlier of the following events:

- i. Upon the death of the Insured Person. This also means that in case of family floater policy, cover for the other surviving members of the family will continue, subject to other terms of the policy.
- ii. Upon exhaustion of the Limit of Coverage Plus Restored Basic Sum Insured under the policy.

❖ **Revision of Basic Sum Insured:** is permissible only at the time of renewal, subject to underwriter's approval. If the policy is renewed for enhanced Sum Insured, then Exclusion Code- Excl 01, Exclusion Code- Excl 02 and Exclusion Code- Excl 03 will apply afresh to this enhanced Sum Insured (that is for the difference between the expiring basic Sum Insured and renewed basic Sum Insured) from the effective date of such enhancement.

❖ **Discounts**

- i. **Wellness Discount:** 10% discount is available on the Renewal Premiums
- ii. **Online Discount:** 5% discount is available only for first purchase of policy through Online.

❖ **Excluded Hospitals (providers):** Insured can refer the company website using the following link to get the list of excluded hospitals. <https://www.starhealth.in/lookup/hospital/#excluded-hospital>

❖ **How to buy this insurance?** Please contact our nearest Branch Office /our Agent or visit our website www.starhealth.in for online purchase

❖ **Relief under Section 80-D:** Insured Person is eligible for relief under Section 80-D of the IT Act in respect of the premium paid by any mode other than cash

- ❖ **Important Note:** IRDAI or its officials do not involve in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.
- ❖ **Prohibition of Rebates:** Section 41 of Insurance Act 1938 (Prohibition of rebates): No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

1 year Premium Chart (in Rs.)- Silver Plan (excluding GST)

Zone A - Silver Plan - Sum Insured Rs. 3,00,000/-	
Age Band/ Family Size	1A
18-30	4,993
31-35	5,480
36-40	6,339
41-45	7,587
46-50	9,030
51-55	11,242
56-60	11,348
61-65	14,099
Above 65	18,229

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone A - Silver Plan - Sum Insured - Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	6,809	10,525	12,640	15,458	10,786	14,344	16,461	19,293
31-35	7,491	11,242	13,381	16,228	11,878	15,474	17,611	20,467
36-40	8,693	12,678	14,958	17,992	13,800	17,627	19,906	22,955
41-45	10,457	14,531	16,864	19,981	16,647	20,557	22,896	26,005
46-50	12,476	16,684	19,106	22,328	19,884	23,928	26,350	29,571
51-55	15,578	19,824	22,261	25,513	24,847	28,929	31,365	34,616
56-60	15,750	19,342	21,404	24,155	25,130	28,582	30,645	33,396
61-65	19,601	23,194	25,256	28,007	31,290	34,744	36,805	39,557
Above 65	25,376	28,969	31,031	33,782	40,531	43,985	46,046	48,797

Age Band/ Family Size	Zone A - Silver Plan - Sum Insured - Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,661	11,840	14,221	17,390	12,134	16,138	18,517	21,705
31-35	8,427	12,648	15,053	18,257	13,363	17,407	19,812	23,024
36-40	9,780	14,262	16,827	20,241	15,523	19,829	22,394	25,826
41-45	11,765	16,348	18,972	22,478	18,728	23,126	25,758	29,257
46-50	14,035	18,769	21,494	25,119	22,369	26,918	29,643	33,267
51-55	17,525	22,302	25,043	28,701	27,953	32,544	35,286	38,944
56-60	17,718	21,759	24,079	27,174	28,270	32,155	34,475	37,571
61-65	22,052	26,093	28,413	31,508	35,201	39,086	41,406	44,502
Above 65	28,548	32,590	34,910	38,005	45,597	49,482	51,802	54,897

Age Band/ Family Size	Zone A - Silver Plan - Sum Insured - Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,501	13,324	16,018	19,596	13,669	18,176	20,861	24,455
31-35	9,366	14,239	16,953	20,566	15,061	19,610	22,324	25,945
36-40	10,891	16,060	18,956	22,810	17,494	22,345	25,243	29,110
41-45	13,141	18,429	21,396	25,348	21,123	26,079	29,046	33,005
46-50	15,708	21,164	24,236	28,329	25,229	30,361	33,434	37,526
51-55	19,653	25,144	28,245	32,373	31,529	36,704	39,804	43,931
56-60	20,679	25,518	28,246	31,878	33,172	37,726	40,448	44,080
61-65	25,765	30,603	33,332	36,964	41,308	45,862	48,585	52,216
Above 65	33,394	38,233	40,955	44,593	53,510	58,064	60,793	64,425

A=Adult; C=Child

Age Band/ Family Size	Zone A – Silver Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	10,371	16,010	19,238	23,534	16,425	21,833	25,053	29,363
31-35	11,419	17,100	20,363	24,694	18,091	23,548	26,804	31,155
36-40	13,248	19,294	22,768	27,394	21,016	26,831	30,305	34,945
41-45	15,948	22,135	25,693	30,445	25,369	31,318	34,883	39,629
46-50	19,026	25,425	29,110	34,018	30,298	36,458	40,141	45,056
51-55	23,759	30,199	33,919	38,869	37,864	44,073	47,785	52,741
56-60	24,973	30,647	33,914	38,276	39,829	45,293	48,560	52,922
61-65	31,074	36,748	40,015	44,377	49,592	55,056	58,323	62,686
Above 65	40,231	45,899	49,172	53,528	64,239	69,703	72,970	77,331

Age Band/ Family Size	Zone A – Silver Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,826	18,268	21,980	26,916	18,753	24,961	28,666	33,624
31-35	13,029	19,526	23,274	28,259	20,673	26,936	30,685	35,684
36-40	15,131	22,043	26,036	31,360	24,033	30,720	34,714	40,043
41-45	18,246	25,320	29,419	34,875	29,046	35,880	39,980	45,436
46-50	21,790	29,103	33,343	38,989	34,714	41,794	46,026	51,680
51-55	27,225	34,594	38,869	44,564	43,411	50,548	54,816	60,518
56-60	28,636	35,126	38,883	43,894	45,689	51,968	55,725	60,737
61-65	35,652	42,143	45,899	50,917	56,913	63,193	66,955	71,966
Above 65	46,177	52,668	56,430	61,442	73,755	80,042	83,797	88,810

Age Band/ Family Size	Zone A – Silver Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	13,500	20,869	25,130	30,811	21,431	28,561	32,829	38,518
31-35	14,879	22,318	26,620	32,358	23,633	30,839	35,143	40,894
36-40	17,298	25,208	29,805	35,923	27,499	35,185	39,776	45,908
41-45	20,883	28,983	33,694	39,973	33,273	41,133	45,844	52,116
46-50	24,961	33,335	38,208	44,705	39,790	47,925	52,798	59,295
51-55	31,211	39,649	44,564	51,118	49,789	57,994	62,909	69,461
56-60	32,844	40,274	44,600	50,360	52,427	59,641	63,966	69,733
61-65	40,918	48,343	52,668	58,435	65,333	72,555	76,880	82,646
Above 65	53,021	60,452	64,777	70,538	84,707	91,928	96,253	1,02,013

Age Band/ Family Size	Zone A – Silver Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	16,066	24,849	29,968	36,788	25,530	34,088	39,206	46,034
31-35	17,719	26,585	31,754	38,636	28,181	36,816	41,984	48,874
36-40	20,623	30,066	35,571	42,919	32,823	42,033	47,539	54,893
41-45	24,933	34,601	40,254	47,785	39,748	49,184	54,830	62,368
46-50	29,826	39,825	45,668	53,466	47,574	57,333	63,183	70,974
51-55	37,323	47,405	53,298	61,158	59,576	69,413	75,311	83,173
56-60	39,303	48,170	53,361	60,279	62,754	71,416	76,602	83,519
61-65	48,986	57,859	63,044	69,962	78,247	86,910	92,101	99,019
Above 65	63,515	72,381	77,573	84,490	1,01,494	1,10,156	1,15,342	1,22,258

A=Adult; C=Child

Age Band/ Family Size	Zone A – Silver Plan – Sum Insured – Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	17,599	27,239	32,871	40,374	27,991	37,399	43,031	50,541
31-35	19,420	29,151	34,840	42,413	30,903	40,401	46,083	53,670
36-40	22,613	32,976	39,038	47,110	36,008	46,139	52,200	60,286
41-45	27,366	37,976	44,191	52,474	43,636	54,008	60,223	68,513
46-50	32,745	43,714	50,148	58,725	52,243	62,979	69,405	77,984
51-55	40,993	52,053	58,543	67,191	65,440	76,268	82,751	91,399
56-60	43,176	52,909	58,620	66,224	68,954	78,476	84,187	91,798
61-65	53,832	63,565	69,269	76,880	86,000	95,523	1,01,234	1,08,838
Above 65	69,807	79,547	85,251	92,862	1,11,566	1,21,089	1,26,800	1,34,405

Age Band/ Family Size	Zone A – Silver Plan – Sum Insured – Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	20,138	31,191	37,660	46,286	32,055	43,004	49,339	57,980
31-35	22,233	33,385	39,924	48,629	35,403	46,455	52,854	61,573
36-40	25,904	37,779	44,748	54,035	41,274	53,051	59,885	69,188
41-45	31,374	43,538	50,681	60,216	50,049	61,974	69,124	78,651
46-50	37,561	50,140	57,536	67,395	59,949	72,289	79,685	89,550
51-55	47,046	59,730	67,191	77,133	75,129	87,574	95,035	1,04,976
56-60	49,568	60,730	67,296	76,044	79,181	90,133	96,699	1,05,447
61-65	61,819	72,982	79,547	88,296	98,783	1,09,735	1,16,301	1,25,049
Above 65	80,197	91,358	97,923	1,06,673	1,28,186	1,39,138	1,45,697	1,54,452

Zone B – Silver Plan – Sum Insured – Rs. 3,00,000	
Age Band/ Family Size	1A
18-30	4,801
31-35	5,269
36-40	6,095
41-45	7,295
46-50	8,683
51-55	10,810
56-60	11,348
61-65	14,099
Above 65	18,229

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	6,548	10,120	12,154	14,864	10,371	13,793	15,828	18,551
31-35	7,203	10,810	12,866	15,604	11,421	14,879	16,934	19,680
36-40	8,359	12,190	14,383	17,300	13,269	16,949	19,140	22,073
41-45	10,055	13,973	16,215	19,213	16,006	19,766	22,015	25,005
46-50	11,996	16,043	18,371	21,469	19,119	23,008	25,336	28,434
51-55	14,979	19,061	21,405	24,531	23,891	27,816	30,159	33,285
56-60	15,750	19,342	21,404	24,155	25,130	28,582	30,645	33,396
61-65	19,601	23,194	25,256	28,007	31,290	34,744	36,805	39,557
Above 65	25,376	28,969	31,031	33,782	40,531	43,985	46,046	48,797

A=Adult; C=Child

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,366	11,385	13,674	16,721	11,668	15,518	17,805	20,870
31-35	8,103	12,161	14,474	17,555	12,849	16,738	19,050	22,139
36-40	9,404	13,714	16,180	19,463	14,926	19,066	21,533	24,833
41-45	11,313	15,719	18,243	21,614	18,008	22,236	24,768	28,131
46-50	13,495	18,048	20,668	24,153	21,509	25,883	28,503	31,988
51-55	16,851	21,444	24,080	27,598	26,878	31,293	33,929	37,446
56-60	17,718	21,759	24,079	27,174	28,270	32,155	34,475	37,571
61-65	22,052	26,093	28,413	31,508	35,201	39,086	41,406	44,502
Above 65	28,548	32,590	34,910	38,005	45,597	49,482	51,802	54,897

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,161	12,791	15,377	18,812	13,122	17,449	20,027	23,477
31-35	8,992	13,669	16,274	19,744	14,459	18,826	21,431	24,907
36-40	10,456	15,418	18,198	21,898	16,794	21,451	24,233	27,946
41-45	12,616	17,692	20,540	24,334	20,278	25,036	27,884	31,685
46-50	15,079	20,317	23,267	27,196	24,220	29,147	32,096	36,025
51-55	18,866	24,138	27,115	31,078	30,268	35,236	38,212	42,174
56-60	20,679	25,518	28,246	31,878	33,172	37,726	40,448	44,080
61-65	25,765	30,603	33,332	36,964	41,308	45,862	48,585	52,216
Above 65	33,394	38,233	40,955	44,593	53,510	58,064	60,793	64,425

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	9,956	15,370	18,468	22,592	15,768	20,959	24,050	28,188
31-35	10,962	16,416	19,548	23,706	17,368	22,606	25,732	29,909
36-40	12,718	18,522	21,857	26,298	20,176	25,758	29,093	33,547
41-45	15,310	21,250	24,665	29,227	24,354	30,065	33,487	38,044
46-50	18,265	24,408	27,946	32,657	29,086	34,999	38,536	43,254
51-55	22,808	28,991	32,562	37,314	36,349	42,310	45,874	50,632
56-60	24,973	30,647	33,914	38,276	39,829	45,293	48,560	52,922
61-65	31,074	36,748	40,015	44,377	49,592	55,056	58,323	62,686
Above 65	40,231	45,899	49,172	53,528	64,239	69,703	72,970	77,331

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,353	17,537	21,101	25,840	18,002	23,963	27,520	32,279
31-35	12,508	18,745	22,343	27,128	19,846	25,859	29,458	34,256
36-40	14,526	21,161	24,995	30,106	23,071	29,491	33,325	38,441
41-45	17,516	24,307	28,242	33,480	27,884	34,445	38,381	43,619
46-50	20,918	27,938	32,009	37,429	33,325	40,122	44,185	49,613
51-55	26,136	33,210	37,314	42,781	41,675	48,526	52,624	58,097
56-60	28,636	35,126	38,883	43,894	45,689	51,968	55,725	60,737
61-65	35,652	42,143	45,899	50,917	56,913	63,193	66,955	71,966
Above 65	46,177	52,668	56,430	61,442	73,755	80,042	83,797	88,810

A=Adult; C=Child

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	12,960	20,034	24,125	29,579	20,574	27,419	31,516	36,977
31-35	14,284	21,425	25,555	31,063	22,687	29,605	33,737	39,258
36-40	16,606	24,199	28,613	34,486	26,399	33,778	38,185	44,071
41-45	20,047	27,823	32,346	38,374	31,942	39,487	44,010	50,032
46-50	23,963	32,002	36,679	42,917	38,198	46,008	50,686	56,923
51-55	29,963	38,063	42,781	49,073	47,797	55,674	60,392	66,683
56-60	32,844	40,274	44,600	50,360	52,427	59,641	63,966	69,733
61-65	40,918	48,343	52,668	58,435	65,333	72,555	76,880	82,646
Above 65	53,021	60,452	64,777	70,538	84,707	91,928	96,253	1,02,013

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	15,424	23,855	28,769	35,316	24,509	32,724	37,638	44,192
31-35	17,010	25,522	30,484	37,091	27,054	35,344	40,304	46,919
36-40	19,798	28,864	34,148	41,202	31,510	40,351	45,637	52,697
41-45	23,935	33,217	38,644	45,874	38,158	47,216	52,637	59,873
46-50	28,633	38,232	43,841	51,328	45,671	55,039	60,655	68,135
51-55	35,830	45,509	51,166	58,711	57,193	66,636	72,299	79,846
56-60	39,303	48,170	53,361	60,279	62,754	71,416	76,602	83,519
61-65	48,986	57,859	63,044	69,962	78,247	86,910	92,101	99,019
Above 65	63,515	72,381	77,573	84,490	1,01,494	1,10,156	1,15,342	1,22,258

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	16,895	26,149	31,556	38,759	26,872	35,903	41,310	48,520
31-35	18,643	27,985	33,446	40,716	29,666	38,785	44,239	51,523
36-40	21,708	31,657	37,476	45,226	34,567	44,293	50,112	57,875
41-45	26,272	36,457	42,424	50,375	41,891	51,847	57,814	65,772
46-50	31,435	41,965	48,142	56,376	50,153	60,460	66,629	74,864
51-55	39,353	49,970	56,201	64,504	62,822	73,217	79,441	87,743
56-60	43,176	52,909	58,620	66,224	68,954	78,476	84,187	91,798
61-65	53,832	63,565	69,269	76,880	86,000	95,523	1,01,234	1,08,838
Above 65	69,807	79,547	85,251	92,862	1,11,566	1,21,089	1,26,800	1,34,405

Age Band/ Family Size	Zone B – Silver Plan – Sum Insured – Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	19,332	29,944	36,154	44,435	30,773	41,284	47,365	55,661
31-35	21,343	32,050	38,327	46,684	33,986	44,597	50,740	59,110
36-40	24,868	36,268	42,958	51,874	39,623	50,929	57,490	66,420
41-45	30,119	41,796	48,654	57,808	48,047	59,495	66,359	75,505
46-50	36,059	48,134	55,235	64,699	57,551	69,397	76,498	85,968
51-55	45,164	57,341	64,504	74,047	72,124	84,071	91,234	1,00,777
56-60	49,568	60,730	67,296	76,044	79,181	90,133	96,699	1,05,447
61-65	61,819	72,982	79,547	88,296	98,783	1,09,735	1,16,301	1,25,049
Above 65	80,197	91,358	97,923	1,06,673	1,28,186	1,39,138	1,45,697	1,54,452

A=Adult; C=Child

Zone C - Silver Plan - Sum Insured - Rs. 3,00,000	
Age Band/ Family Size	1A
18-30	4,417
31-35	4,847
36-40	5,607
41-45	6,711
46-50	7,988
51-55	9,945
56-60	11,348
61-65	14,099
Above 65	18,229

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone C - Silver Plan - Sum Insured - Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	6,024	9,310	11,181	13,675	9,542	12,689	14,561	17,067
31-35	6,626	9,945	11,837	14,355	10,508	13,688	15,579	18,106
36-40	7,690	11,215	13,232	15,916	12,207	15,593	17,609	20,307
41-45	9,251	12,855	14,918	17,676	14,726	18,185	20,254	23,005
46-50	11,037	14,759	16,902	19,751	17,589	21,167	23,309	26,159
51-55	13,780	17,536	19,693	22,569	21,980	25,591	27,746	30,622
56-60	15,750	19,342	21,404	24,155	25,130	28,582	30,645	33,396
61-65	19,601	23,194	25,256	28,007	31,290	34,744	36,805	39,557
Above 65	25,376	28,969	31,031	33,782	40,531	43,985	46,046	48,797

Age Band/ Family Size	Zone C - Silver Plan - Sum Insured - Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	6,777	10,474	12,580	15,384	10,734	14,276	16,381	19,200
31-35	7,454	11,188	13,316	16,151	11,821	15,399	17,526	20,368
36-40	8,651	12,617	14,886	17,906	13,732	17,541	19,810	22,846
41-45	10,408	14,461	16,783	19,885	16,567	20,457	22,786	25,881
46-50	12,415	16,604	19,014	22,220	19,788	23,812	26,222	29,429
51-55	15,503	19,728	22,154	25,390	24,727	28,789	31,214	34,451
56-60	17,718	21,759	24,079	27,174	28,270	32,155	34,475	37,571
61-65	22,052	26,093	28,413	31,508	35,201	39,086	41,406	44,502
Above 65	28,548	32,590	34,910	38,005	45,597	49,482	51,802	54,897

Age Band/ Family Size	Zone C - Silver Plan - Sum Insured - Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,481	11,725	14,095	17,245	12,029	15,995	18,358	21,520
31-35	8,242	12,530	14,918	18,098	13,254	17,257	19,645	22,832
36-40	9,584	14,133	16,682	20,073	15,395	19,664	22,213	25,617
41-45	11,564	16,217	18,829	22,306	18,588	22,949	25,561	29,044
46-50	13,823	18,624	21,328	24,929	22,201	26,718	29,422	33,023
51-55	17,294	22,127	24,856	28,488	27,745	32,299	35,027	38,660
56-60	20,679	25,518	28,246	31,878	33,172	37,726	40,448	44,080
61-65	25,765	30,603	33,332	36,964	41,308	45,862	48,585	52,216
Above 65	33,394	38,233	40,955	44,593	53,510	58,064	60,793	64,425

A=Adult; C=Child

Age Band/ Family Size	Zone C – Silver Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	9,127	14,089	16,929	20,710	14,454	19,213	22,046	25,839
31-35	10,049	15,048	17,919	21,731	15,920	20,722	23,587	27,416
36-40	11,658	16,979	20,035	24,107	18,494	23,612	26,668	30,752
41-45	14,034	19,479	22,609	26,792	22,325	27,559	30,697	34,873
46-50	16,743	22,374	25,617	29,935	26,662	32,083	35,324	39,650
51-55	20,908	26,575	29,849	34,205	33,320	38,784	42,051	46,412
56-60	24,973	30,647	33,914	38,276	39,829	45,293	48,560	52,922
61-65	31,074	36,748	40,015	44,377	49,592	55,056	58,323	62,686
Above 65	40,231	45,899	49,172	53,528	64,239	69,703	72,970	77,331

Age Band/ Family Size	Zone C – Silver Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	10,407	16,075	19,342	23,686	16,502	21,966	25,226	29,589
31-35	11,465	17,183	20,481	24,868	18,192	23,704	27,003	31,402
36-40	13,316	19,397	22,912	27,597	21,149	27,034	30,548	35,237
41-45	16,057	22,282	25,889	30,690	25,561	31,574	35,182	39,984
46-50	19,175	25,610	29,341	34,310	30,548	36,779	40,503	45,478
51-55	23,958	30,443	34,205	39,216	38,202	44,482	48,238	53,255
56-60	28,636	35,126	38,883	43,894	45,689	51,968	55,725	60,737
61-65	35,652	42,143	45,899	50,917	56,913	63,193	66,955	71,966
Above 65	46,177	52,668	56,430	61,442	73,755	80,042	83,797	88,810

Age Band/ Family Size	Zone C – Silver Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,880	18,365	22,114	27,114	18,860	25,134	28,889	33,895
31-35	13,093	19,639	23,426	28,475	20,797	27,138	30,925	35,987
36-40	15,222	22,183	26,228	31,612	24,199	30,963	35,003	40,399
41-45	18,377	25,505	29,651	35,176	29,280	36,197	40,343	45,862
46-50	21,966	29,335	33,623	39,340	35,015	42,174	46,462	52,180
51-55	27,466	34,891	39,216	44,983	43,814	51,035	55,360	61,126
56-60	32,844	40,274	44,600	50,360	52,427	59,641	63,966	69,733
61-65	40,918	48,343	52,668	58,435	65,333	72,555	76,880	82,646
Above 65	53,021	60,452	64,777	70,538	84,707	91,928	96,253	1,02,013

Age Band/ Family Size	Zone C – Silver Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	14,138	21,867	26,371	32,373	22,466	29,997	34,502	40,510
31-35	15,593	23,395	27,943	34,000	24,800	32,398	36,946	43,009
36-40	18,148	26,458	31,303	37,769	28,884	36,989	41,834	48,305
41-45	21,941	30,449	35,423	42,051	34,978	43,282	48,250	54,883
46-50	26,247	35,046	40,187	47,050	41,865	50,453	55,601	62,457
51-55	32,844	41,716	46,902	53,819	52,427	61,083	66,274	73,192
56-60	39,303	48,170	53,361	60,279	62,754	71,416	76,602	83,519
61-65	48,986	57,859	63,044	69,962	78,247	86,910	92,101	99,019
Above 65	63,515	72,381	77,573	84,490	1,01,494	1,10,156	1,15,342	1,22,258

A=Adult; C=Child

Age Band/ Family Size	Zone C – Silver Plan – Sum Insured – Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	15,487	23,970	28,927	35,529	24,632	32,911	37,868	44,476
31-35	17,090	25,653	30,659	37,323	27,194	35,553	40,553	47,230
36-40	19,899	29,019	34,353	41,457	31,687	40,602	45,936	53,052
41-45	24,082	33,419	38,888	46,177	38,400	47,527	52,996	60,291
46-50	28,816	38,468	44,130	51,678	45,973	55,421	61,076	68,626
51-55	36,073	45,806	51,517	59,128	57,587	67,115	72,821	80,431
56-60	43,176	52,909	58,620	66,224	68,954	78,476	84,187	91,798
61-65	53,832	63,565	69,269	76,880	86,000	95,523	1,01,234	1,08,838
Above 65	69,807	79,547	85,251	92,862	1,11,566	1,21,089	1,26,800	1,34,405

Age Band/ Family Size	Zone C – Silver Plan – Sum Insured – Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	17,721	27,448	33,141	40,732	28,208	37,843	43,418	51,022
31-35	19,565	29,379	35,133	42,793	31,154	40,880	46,511	54,184
36-40	22,795	33,245	39,378	47,551	36,321	46,685	52,699	60,885
41-45	27,609	38,313	44,600	52,990	44,043	54,537	60,829	69,213
46-50	33,054	44,123	50,632	59,308	52,755	63,614	70,123	78,804
51-55	41,401	52,562	59,128	67,877	66,113	77,065	83,631	92,379
56-60	49,568	60,730	67,296	76,044	79,181	90,133	96,699	1,05,447
61-65	61,819	72,982	79,547	88,296	98,783	1,09,735	1,16,301	1,25,049
Above 65	80,197	91,358	97,923	1,06,673	1,28,186	1,39,138	1,45,697	1,54,452

Zone D – Silver Plan – Sum Insured –Rs.3,00,000	
Age Band/ Family Size	1A
18-30	4,225
31-35	4,637
36-40	5,364
41-45	6,420
46-50	7,641
51-55	9,513
56-60	11,348
61-65	14,099
Above 65	18,229

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	5,762	8,906	10,695	13,080	9,127	12,137	13,928	16,325
31-35	6,338	9,513	11,322	13,731	10,051	13,093	14,902	17,318
36-40	7,356	10,727	12,657	15,224	11,677	14,915	16,843	19,424
41-45	8,848	12,296	14,269	16,907	14,086	17,394	19,373	22,004
46-50	10,557	14,117	16,167	18,893	16,825	20,247	22,296	25,022
51-55	13,181	16,774	18,836	21,588	21,024	24,478	26,540	29,291
56-60	15,750	19,342	21,404	24,155	25,130	28,582	30,645	33,396
61-65	19,601	23,194	25,256	28,007	31,290	34,744	36,805	39,557
Above 65	25,376	28,969	31,031	33,782	40,531	43,985	46,046	48,797

A=Adult; C=Child

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	6,482	10,019	12,033	14,715	10,267	13,655	15,668	18,366
31-35	7,130	10,702	12,737	15,448	11,307	14,729	16,764	19,482
36-40	8,275	12,068	14,238	17,127	13,135	16,778	18,949	21,853
41-45	9,955	13,833	16,053	19,020	15,847	19,568	21,795	24,756
46-50	11,876	15,882	18,187	21,254	18,928	22,777	25,082	28,149
51-55	14,829	18,871	21,190	24,286	23,652	27,537	29,857	32,953
56-60	17,718	21,759	24,079	27,174	28,270	32,155	34,475	37,571
61-65	22,052	26,093	28,413	31,508	35,201	39,086	41,406	44,502
Above 65	28,548	32,590	34,910	38,005	45,597	49,482	51,802	54,897

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,345	11,512	13,839	16,931	11,810	15,704	18,024	21,129
31-35	8,092	12,302	14,647	17,769	13,013	16,943	19,288	22,416
36-40	9,410	13,876	16,378	19,708	15,115	19,306	21,810	25,151
41-45	11,354	15,922	18,486	21,900	18,250	22,532	25,096	28,516
46-50	13,571	18,285	20,940	24,476	21,798	26,232	28,887	32,423
51-55	16,980	21,724	24,404	27,970	27,241	31,712	34,390	37,957
56-60	20,303	25,054	27,732	31,298	32,568	37,040	39,713	43,279
61-65	25,297	30,047	32,726	36,292	40,557	45,028	47,701	51,267
Above 65	32,787	37,538	40,211	43,782	52,537	57,008	59,687	63,253

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,961	13,833	16,621	20,333	14,191	18,863	21,645	25,369
31-35	9,866	14,774	17,593	21,335	15,631	20,345	23,158	26,918
36-40	11,446	16,670	19,671	23,668	18,158	23,182	26,184	30,192
41-45	13,779	19,125	22,198	26,304	21,919	27,058	30,138	34,239
46-50	16,439	21,967	25,151	29,391	26,177	31,499	34,682	38,929
51-55	20,528	26,092	29,306	33,583	32,714	38,079	41,286	45,568
56-60	24,519	30,090	33,297	37,580	39,105	44,469	47,677	51,960
61-65	30,509	36,080	39,287	43,570	48,691	54,055	57,263	61,546
Above 65	39,500	45,064	48,278	52,555	63,071	68,435	71,643	75,925

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	10,218	15,783	18,991	23,256	16,202	21,567	24,768	29,051
31-35	11,257	16,871	20,109	24,416	17,861	23,273	26,512	30,831
36-40	13,073	19,045	22,495	27,095	20,764	26,542	29,993	34,597
41-45	15,765	21,876	25,418	30,132	25,096	31,000	34,543	39,257
46-50	18,827	25,145	28,808	33,686	29,993	36,110	39,767	44,652
51-55	23,522	29,889	33,583	38,503	37,507	43,673	47,361	52,287
56-60	28,116	34,488	38,176	43,096	44,858	51,024	54,712	59,632
61-65	35,004	41,377	45,064	49,991	55,878	62,044	65,737	70,658
Above 65	45,337	51,710	55,404	60,324	72,414	78,586	82,273	87,195

A=Adult; C=Child

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,664	18,031	21,712	26,621	18,517	24,677	28,364	33,279
31-35	12,855	19,282	23,000	27,957	20,418	26,645	30,363	35,332
36-40	14,945	21,779	25,752	31,037	23,759	30,400	34,367	39,664
41-45	18,042	25,041	29,111	34,536	28,747	35,538	39,609	45,028
46-50	21,567	28,801	33,011	38,625	34,379	41,407	45,617	51,231
51-55	26,967	34,257	38,503	44,166	43,017	50,107	54,353	60,015
56-60	32,247	39,542	43,789	49,445	51,474	58,557	62,803	68,466
61-65	40,174	47,464	51,710	57,373	64,146	71,236	75,482	81,144
Above 65	52,057	59,352	63,599	69,255	83,166	90,257	94,503	1,00,158

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	13,881	21,469	25,892	31,784	22,058	29,452	33,874	39,773
31-35	15,309	22,969	27,435	33,382	24,349	31,809	36,274	42,227
36-40	17,818	25,977	30,734	37,082	28,359	36,316	41,073	47,427
41-45	21,542	29,895	34,779	41,286	34,342	42,495	47,373	53,886
46-50	25,770	34,409	39,457	46,195	41,104	49,535	54,590	61,321
51-55	32,247	40,958	46,049	52,840	51,474	59,972	65,069	71,861
56-60	38,588	47,294	52,391	59,183	61,613	70,118	75,209	82,000
61-65	48,096	56,807	61,898	68,690	76,825	85,330	90,426	97,218
Above 65	62,360	71,065	76,163	82,954	99,648	1,08,153	1,13,244	1,20,036

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	15,205	23,534	28,401	34,883	24,184	32,313	37,179	43,668
31-35	16,779	25,187	30,102	36,644	26,700	34,907	39,815	46,371
36-40	19,537	28,491	33,728	40,703	31,110	39,864	45,101	52,087
41-45	23,644	32,811	38,181	45,337	37,702	46,662	52,032	59,195
46-50	28,292	37,769	43,327	50,738	45,138	54,414	59,966	67,378
51-55	35,418	44,973	50,581	58,053	56,540	65,895	71,497	78,969
56-60	42,391	51,947	57,554	65,020	67,700	77,049	82,657	90,129
61-65	52,853	62,409	68,010	75,482	84,437	93,786	99,393	1,06,860
Above 65	68,538	78,100	83,701	91,174	1,09,538	1,18,887	1,24,495	1,31,961

Age Band/ Family Size	Zone D – Silver Plan – Sum Insured – Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	17,399	26,949	32,538	39,991	27,696	37,155	42,629	50,095
31-35	19,209	28,845	34,494	42,015	30,588	40,137	45,666	53,199
36-40	22,381	32,641	38,662	46,686	35,661	45,836	51,741	59,778
41-45	27,107	37,616	43,789	52,027	43,242	53,545	59,723	67,955
46-50	32,453	43,321	49,711	58,229	51,796	62,457	68,848	77,371
51-55	40,648	51,607	58,053	66,642	64,911	75,664	82,110	90,699
56-60	48,667	59,626	66,072	74,661	77,742	88,494	94,941	1,03,530
61-65	60,695	71,655	78,100	86,691	96,987	1,07,740	1,14,186	1,22,775
Above 65	78,738	89,697	96,143	1,04,733	1,25,856	1,36,608	1,43,048	1,51,644

A=Adult; C=Child

Zone E – Silver Plan – Sum Insured – Rs. 3,00,000	
Age Band/ Family Size	1A
18-30	4,033
31-35	4,426
36-40	5,120
41-45	6,128
46-50	7,293
51-55	9,080
56-60	10,832
61-65	13,458
Above 65	17,401

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	5,500	8,501	10,209	12,486	8,712	11,586	13,295	15,583
31-35	6,050	9,080	10,808	13,107	9,594	12,498	14,224	16,531
36-40	7,021	10,240	12,081	14,532	11,146	14,237	16,078	18,541
41-45	8,446	11,737	13,621	16,139	13,445	16,604	18,493	21,004
46-50	10,077	13,476	15,432	18,034	16,060	19,326	21,282	23,884
51-55	12,582	16,011	17,980	20,606	20,069	23,366	25,333	27,959
56-60	15,034	18,463	20,431	23,057	23,987	27,283	29,252	31,878
61-65	18,710	22,139	24,108	26,734	29,867	33,164	35,132	37,759
Above 65	24,222	27,652	29,621	32,247	38,688	41,985	43,953	46,579

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	6,188	9,563	11,486	14,046	9,801	13,035	14,956	17,531
31-35	6,806	10,215	12,158	14,746	10,793	14,060	16,002	18,597
36-40	7,899	11,520	13,591	16,349	12,538	16,016	18,087	20,859
41-45	9,503	13,204	15,324	18,156	15,126	18,678	20,805	23,630
46-50	11,336	15,160	17,361	20,288	18,067	21,741	23,942	26,870
51-55	14,155	18,013	20,227	23,182	22,577	26,286	28,500	31,455
56-60	16,912	20,770	22,985	25,939	26,985	30,694	32,908	35,863
61-65	21,049	24,907	27,122	30,076	33,601	37,310	39,524	42,479
Above 65	27,251	31,108	33,323	36,278	43,525	47,233	49,448	52,401

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,141	11,192	13,455	16,461	11,482	15,268	17,523	20,542
31-35	7,868	11,961	14,240	17,276	12,651	16,472	18,752	21,794
36-40	9,149	13,490	15,923	19,160	14,695	18,770	21,204	24,452
41-45	11,039	15,480	17,973	21,292	17,743	21,906	24,399	27,724
46-50	13,194	17,778	20,358	23,796	21,192	25,503	28,084	31,522
51-55	16,508	21,121	23,726	27,193	26,484	30,831	33,435	36,902
56-60	19,739	24,358	26,962	30,429	31,664	36,011	38,610	42,077
61-65	24,594	29,212	31,817	35,284	39,431	43,778	46,376	49,842
Above 65	31,876	36,495	39,094	42,566	51,077	55,424	58,029	61,496

A=Adult; C=Child

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,712	13,448	16,160	19,768	13,797	18,339	21,044	24,665
31-35	9,592	14,364	17,105	20,743	15,197	19,780	22,515	26,170
36-40	11,128	16,207	19,125	23,011	17,654	22,538	25,456	29,354
41-45	13,396	18,593	21,582	25,574	21,310	26,307	29,301	33,288
46-50	15,982	21,357	24,452	28,575	25,450	30,624	33,719	37,847
51-55	19,957	25,367	28,492	32,650	31,806	37,021	40,139	44,303
56-60	23,838	29,254	32,373	36,536	38,018	43,234	46,352	50,517
61-65	29,661	35,077	38,196	42,360	47,338	52,554	55,672	59,836
Above 65	38,403	43,812	46,937	51,095	61,319	66,534	69,653	73,816

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	9,934	15,345	18,463	22,610	15,752	20,967	24,080	28,244
31-35	10,944	16,402	19,550	23,737	17,365	22,626	25,775	29,974
36-40	12,710	18,516	21,870	26,342	20,187	25,805	29,160	33,636
41-45	15,327	21,269	24,712	29,295	24,399	30,139	33,583	38,166
46-50	18,304	24,446	28,008	32,751	29,160	35,107	38,662	43,411
51-55	22,869	29,059	32,650	37,434	36,465	42,460	46,046	50,835
56-60	27,335	33,530	37,115	41,899	43,612	49,606	53,192	57,976
61-65	34,032	40,228	43,812	48,602	54,326	60,320	63,911	68,695
Above 65	44,078	50,274	53,865	58,649	70,403	76,403	79,988	84,773

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,340	17,530	21,109	25,881	18,002	23,991	27,576	32,355
31-35	12,498	18,747	22,361	27,180	19,851	25,905	29,520	34,351
36-40	14,530	21,174	25,036	30,175	23,099	29,555	33,412	38,562
41-45	17,541	24,345	28,303	33,577	27,949	34,551	38,509	43,778
46-50	20,967	28,001	32,094	37,552	33,424	40,257	44,350	49,808
51-55	26,217	33,305	37,434	42,939	41,823	48,715	52,843	58,347
56-60	31,351	38,444	42,572	48,071	50,044	56,930	61,059	66,564
61-65	39,058	46,145	50,274	55,779	62,364	69,257	73,386	78,890
Above 65	50,611	57,704	61,832	67,331	80,856	87,750	91,878	97,376

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	13,496	20,873	25,173	30,902	21,445	28,634	32,933	38,668
31-35	14,884	22,331	26,673	32,454	23,672	30,926	35,266	41,054
36-40	17,323	25,256	29,880	36,052	27,571	35,307	39,933	46,110
41-45	20,943	29,065	33,813	40,139	33,388	41,314	46,057	52,389
46-50	25,054	33,453	38,361	44,912	39,962	48,159	53,073	59,618
51-55	31,351	39,820	44,770	51,372	50,044	58,307	63,261	69,865
56-60	37,517	45,981	50,936	57,539	59,901	68,170	73,120	79,722
61-65	46,760	55,229	60,179	66,782	74,691	82,959	87,914	94,518
Above 65	60,628	69,091	74,047	80,649	96,880	1,05,149	1,10,099	1,16,701

A=Adult; C=Child

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	14,783	22,881	27,612	33,914	23,513	31,415	36,146	42,455
31-35	16,313	24,487	29,266	35,627	25,958	33,937	38,709	45,083
36-40	18,995	27,700	32,792	39,572	30,246	38,757	43,848	50,640
41-45	22,988	31,900	37,121	44,078	36,654	45,366	50,587	57,551
46-50	27,506	36,720	42,124	49,329	43,884	52,902	58,300	65,506
51-55	34,434	43,724	49,176	56,441	54,970	64,065	69,511	76,775
56-60	41,214	50,504	55,956	63,214	65,819	74,909	80,361	87,626
61-65	51,385	60,675	66,121	73,386	82,091	91,181	96,633	1,03,891
Above 65	66,634	75,931	81,376	88,641	1,06,495	1,15,585	1,21,037	1,28,295

Age Band/ Family Size	Zone E – Silver Plan – Sum Insured – Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	16,916	26,201	31,634	38,880	26,926	36,123	41,445	48,703
31-35	18,675	28,043	33,536	40,848	29,738	39,022	44,397	51,721
36-40	21,759	31,734	37,588	45,389	34,670	44,563	50,303	58,118
41-45	26,354	36,572	42,572	50,582	42,041	52,058	58,064	66,067
46-50	31,551	42,118	48,330	56,612	50,357	60,723	66,935	75,222
51-55	39,519	50,173	56,441	64,791	63,108	73,562	79,829	88,180
56-60	47,315	57,969	64,237	72,588	75,582	86,036	92,303	1,00,654
61-65	59,009	69,664	75,931	84,282	94,293	1,04,747	1,11,014	1,19,365
Above 65	76,551	87,206	93,472	1,01,824	1,22,360	1,32,813	1,39,075	1,47,432

1 year Premium Chart (in Rs.) – Gold Plan (excluding GST)

Zone A – Gold Plan – Sum Insured – Rs. 3,00,000	
Age Band/ Family Size	1A
18-30	6,586
31-35	7,079
36-40	7,931
41-45	9,179
46-50	10,630
51-55	12,843
56-60	12,701
61-65	15,452
Above 65	19,576

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone A – Gold Plan – Sum Insured – Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,402	12,431	14,771	17,521	12,065	16,505	18,733	22,148
31-35	9,090	13,148	15,510	18,285	13,164	17,633	19,876	23,322
36-40	10,293	14,583	17,089	20,055	15,077	19,786	22,178	25,812
41-45	12,050	16,437	18,994	22,044	17,926	22,716	25,162	28,869
46-50	14,075	18,598	21,237	24,391	21,161	26,088	28,614	32,427
51-55	17,178	21,730	24,391	27,576	26,125	31,082	33,630	37,473
56-60	17,103	20,955	23,207	25,895	26,211	30,411	32,561	35,813
61-65	20,955	24,807	27,059	29,746	32,372	36,572	38,728	41,973
Above 65	26,730	30,581	32,833	35,528	41,619	45,812	47,969	51,214

A=Adult; C=Child

Age Band/ Family Size	Zone A - Gold Plan - Sum Insured - Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	9,452	13,985	16,617	19,712	13,573	18,568	21,074	24,917
31-35	10,226	14,793	17,450	20,570	14,808	19,838	22,360	26,238
36-40	11,579	16,407	19,224	22,563	16,961	22,260	24,951	29,038
41-45	13,556	18,493	21,368	24,799	20,166	25,557	28,306	32,477
46-50	15,835	20,922	23,891	27,440	23,807	29,349	32,191	36,479
51-55	19,325	24,447	27,440	31,022	29,390	34,966	37,834	42,156
56-60	19,241	23,574	26,107	29,131	29,488	34,212	36,631	40,289
61-65	23,574	27,907	30,440	33,465	36,418	41,142	43,569	47,220
Above 65	30,071	34,404	36,937	39,969	46,820	51,538	53,965	57,615

Age Band/ Family Size	Zone A - Gold Plan - Sum Insured - Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	9,999	15,124	18,014	21,530	14,871	20,208	22,999	27,141
31-35	10,870	16,031	18,956	22,508	16,264	21,643	24,455	28,639
36-40	12,396	17,860	20,960	24,750	18,704	24,378	27,373	31,795
41-45	14,646	20,223	23,393	27,289	22,324	28,111	31,176	35,691
46-50	17,213	22,964	26,241	30,270	26,430	32,393	35,564	40,211
51-55	21,150	26,944	30,249	34,313	32,730	38,735	41,935	46,618
56-60	22,003	27,102	30,009	33,580	34,230	39,513	42,329	46,450
61-65	27,089	32,187	35,089	38,666	42,365	47,650	50,466	54,586
Above 65	34,718	39,817	42,719	46,295	54,574	59,852	62,667	66,788

Age Band/ Family Size	Zone A - Gold Plan - Sum Insured - Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,876	17,804	21,235	25,468	17,628	23,858	27,190	32,049
31-35	12,916	18,900	22,360	26,635	19,301	25,580	28,941	33,841
36-40	14,745	21,086	24,771	29,328	22,226	28,864	32,443	37,631
41-45	17,451	23,935	27,696	32,379	26,571	33,349	37,013	42,314
46-50	20,531	27,218	31,114	35,958	31,508	38,489	42,273	47,743
51-55	25,256	31,999	35,916	40,810	39,066	46,104	49,923	55,428
56-60	26,297	32,225	35,677	39,977	40,887	47,081	50,441	55,285
61-65	32,398	38,332	41,778	46,085	50,651	56,845	60,204	65,050
Above 65	41,549	47,483	50,936	55,235	65,297	71,490	74,851	79,695

Age Band/ Family Size	Zone A - Gold Plan - Sum Insured - Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	13,331	20,068	23,984	28,856	19,955	26,993	30,804	36,310
31-35	14,526	21,326	25,278	30,199	21,874	28,969	32,815	38,370
36-40	16,629	23,843	28,041	33,300	25,243	32,751	36,844	42,729
41-45	19,744	27,120	31,416	36,816	30,249	37,913	42,110	48,123
46-50	23,288	30,903	35,339	40,929	35,923	43,826	48,164	54,366
51-55	28,723	36,394	40,873	46,505	44,614	52,580	56,954	63,204
56-60	29,954	36,705	40,646	45,602	46,747	53,750	57,606	63,106
61-65	36,977	43,721	47,662	52,619	57,977	64,981	68,830	74,330
Above 65	47,501	54,252	58,193	63,150	74,820	81,824	85,678	91,179

A=Adult; C=Child

Age Band/ Family Size	Zone A – Gold Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	15,005	22,661	27,134	32,751	22,634	30,593	34,960	41,210
31-35	16,383	24,110	28,624	34,299	24,841	32,871	37,280	43,580
36-40	18,795	27,008	31,803	37,856	28,709	37,216	41,906	48,593
41-45	22,388	30,783	35,698	41,914	34,474	43,165	47,974	54,809
46-50	26,466	35,129	40,211	46,639	40,993	49,958	54,935	61,980
51-55	32,710	41,449	46,568	53,058	50,998	60,026	65,039	72,148
56-60	34,167	41,858	46,363	52,067	53,485	61,430	65,847	72,097
61-65	42,236	49,927	54,431	60,136	66,398	74,342	78,761	85,010
Above 65	54,344	62,030	66,535	72,246	85,765	93,716	98,128	1,04,383

Age Band/ Family Size	Zone A – Gold Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	17,564	26,649	31,971	38,729	26,733	36,120	41,336	48,720
31-35	19,224	28,385	33,758	40,578	29,384	38,848	44,114	51,568
36-40	22,120	31,859	37,575	44,853	34,024	44,058	49,676	57,579
41-45	26,438	36,401	42,258	49,725	40,950	51,209	56,960	65,054
46-50	31,324	41,618	47,673	55,406	48,776	59,365	65,314	73,666
51-55	38,826	49,198	55,301	63,099	60,779	71,445	77,443	85,859
56-60	40,621	49,754	55,124	61,986	63,812	73,204	78,483	85,889
61-65	50,311	59,437	64,808	71,669	79,311	88,697	93,976	1,01,383
Above 65	64,833	73,965	79,336	86,198	1,02,552	1,11,938	1,17,223	1,24,629

Age Band/ Family Size	Zone A – Gold Plan – Sum Insured – Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	19,104	29,039	34,875	42,308	29,194	39,431	45,161	53,226
31-35	20,925	30,951	36,836	44,346	32,111	42,434	48,220	56,355
36-40	24,118	34,770	41,041	49,050	37,216	48,171	54,330	62,973
41-45	28,864	39,769	46,195	54,415	44,839	56,039	62,360	71,199
46-50	34,243	45,514	52,151	60,659	53,445	65,011	71,543	80,670
51-55	42,498	53,853	60,546	69,124	66,649	78,300	84,889	94,085
56-60	44,501	54,493	60,378	67,933	70,012	80,265	86,062	94,161
61-65	55,150	65,142	71,033	78,587	87,058	97,310	1,03,109	1,11,208
Above 65	71,132	81,124	87,014	94,564	1,12,625	1,22,878	1,28,676	1,36,775

Age Band/ Family Size	Zone A – Gold Plan – Sum Insured – Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	21,643	32,984	39,664	48,228	33,258	45,029	51,476	60,666
31-35	23,738	35,185	41,920	50,569	36,611	48,488	54,991	64,266
36-40	27,408	39,573	46,751	55,976	42,476	55,083	62,023	71,874
41-45	32,871	45,330	52,685	62,156	51,251	64,005	71,255	81,345
46-50	39,059	51,933	59,541	69,335	61,151	74,320	81,823	92,236
51-55	48,551	61,524	69,188	79,074	76,331	89,606	97,165	1,07,663
56-60	50,893	62,308	69,053	77,752	80,240	91,922	98,573	1,07,811
61-65	63,143	74,559	81,304	90,003	99,842	1,11,524	1,18,175	1,27,413
Above 65	81,514	92,937	99,681	1,08,381	1,29,245	1,40,927	1,47,578	1,56,816

A=Adult; C=Child

Zone B – Gold Plan – Sum Insured – Rs. 3,00,000	
Age Band/ Family Size	1A
18-30	6,333
31-35	6,806
36-40	7,626
41-45	8,826
46-50	10,221
51-55	12,349
56-60	12,701
61-65	15,452
Above 65	19,576

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,079	11,953	14,203	16,848	11,601	15,870	18,013	21,296
31-35	8,740	12,643	14,914	17,581	12,658	16,955	19,111	22,425
36-40	9,898	14,023	16,431	19,284	14,498	19,025	21,325	24,819
41-45	11,586	15,805	18,264	21,196	17,236	21,843	24,194	27,759
46-50	13,534	17,883	20,420	23,453	20,348	25,085	27,514	31,180
51-55	16,518	20,894	23,453	26,515	25,120	29,886	32,336	36,031
56-60	17,103	20,955	23,207	25,895	26,211	30,411	32,561	35,813
61-65	20,955	24,807	27,059	29,746	32,372	36,572	38,728	41,973
Above 65	26,730	30,581	32,833	35,528	41,619	45,812	47,969	51,214

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	9,089	13,448	15,978	18,954	13,051	17,854	20,264	23,959
31-35	9,833	14,224	16,779	19,779	14,239	19,075	21,500	25,229
36-40	11,134	15,776	18,485	21,695	16,309	21,404	23,991	27,921
41-45	13,035	17,781	20,546	23,845	19,390	24,574	27,218	31,228
46-50	15,226	20,118	22,973	26,385	22,891	28,220	30,953	35,076
51-55	18,581	23,506	26,385	29,829	28,260	33,621	36,379	40,535
56-60	19,241	23,574	26,107	29,131	29,488	34,212	36,631	40,289
61-65	23,574	27,907	30,440	33,465	36,418	41,142	43,569	47,220
Above 65	30,071	34,404	36,937	39,969	46,820	51,538	53,965	57,615

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	9,599	14,519	17,293	20,669	14,276	19,399	22,079	26,056
31-35	10,435	15,390	18,198	21,607	15,613	20,777	23,477	27,493
36-40	11,900	17,146	20,122	23,760	17,956	23,402	26,278	30,523
41-45	14,060	19,414	22,457	26,197	21,431	26,987	29,929	34,264
46-50	16,524	22,045	25,192	29,059	25,373	31,097	34,141	38,603
51-55	20,304	25,866	29,039	32,940	31,421	37,186	40,258	44,753
56-60	22,003	27,102	30,009	33,580	34,230	39,513	42,329	46,450
61-65	27,089	32,187	35,089	38,666	42,365	47,650	50,466	54,586
Above 65	34,718	39,817	42,719	46,295	54,574	59,852	62,667	66,788

A=Adult; C=Child

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,401	17,092	20,386	24,449	16,922	22,903	26,102	30,767
31-35	12,400	18,144	21,466	25,570	18,529	24,557	27,784	32,488
36-40	14,155	20,243	23,780	28,154	21,337	27,709	31,145	36,126
41-45	16,753	22,978	26,588	31,084	25,508	32,015	35,532	40,621
46-50	19,710	26,129	29,869	34,519	30,247	36,949	40,582	45,833
51-55	24,246	30,719	34,480	39,178	37,504	44,260	47,926	53,210
56-60	26,297	32,225	35,677	39,977	40,887	47,081	50,441	55,285
61-65	32,398	38,332	41,778	46,085	50,651	56,845	60,204	65,050
Above 65	41,549	47,483	50,936	55,235	65,297	71,490	74,851	79,695

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	12,798	19,265	23,024	27,702	19,157	25,913	29,572	34,858
31-35	13,945	20,473	24,266	28,991	20,999	27,810	31,502	36,835
36-40	15,964	22,889	26,920	31,968	24,233	31,441	35,370	41,020
41-45	18,954	26,035	30,160	35,344	29,039	36,396	40,426	46,198
46-50	22,356	29,666	33,925	39,292	34,486	42,073	46,237	52,192
51-55	27,574	34,938	39,238	44,645	42,829	50,477	54,676	60,676
56-60	29,954	36,705	40,646	45,602	46,747	53,750	57,606	63,106
61-65	36,977	43,721	47,662	52,619	57,977	64,981	68,830	74,330
Above 65	47,501	54,252	58,193	63,150	74,820	81,824	85,678	91,179

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	14,405	21,755	26,048	31,441	21,728	29,369	33,562	39,562
31-35	15,727	23,146	27,479	32,927	23,848	31,556	35,789	41,837
36-40	18,043	25,927	30,530	36,342	27,560	35,728	40,230	46,649
41-45	21,492	29,551	34,270	40,237	33,095	41,438	46,055	52,616
46-50	25,408	33,724	38,603	44,773	39,353	47,959	52,738	59,501
51-55	31,402	39,791	44,705	50,935	48,958	57,625	62,437	69,262
56-60	34,167	41,858	46,363	52,067	53,485	61,430	65,847	72,097
61-65	42,236	49,927	54,431	60,136	66,398	74,342	78,761	85,010
Above 65	54,344	62,030	66,535	72,246	85,765	93,716	98,128	1,04,383

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	16,861	25,583	30,692	37,180	25,663	34,675	39,683	46,771
31-35	18,455	27,250	32,407	38,954	28,208	37,294	42,349	49,505
36-40	21,235	30,584	36,072	43,058	32,663	42,295	47,689	55,276
41-45	25,380	34,945	40,567	47,736	39,312	49,160	54,682	62,452
46-50	30,071	39,953	45,766	53,190	46,825	56,990	62,701	70,720
51-55	37,273	47,230	53,089	60,575	58,348	68,587	74,345	82,424
56-60	40,621	49,754	55,124	61,986	63,812	73,204	78,483	85,889
61-65	50,311	59,437	64,808	71,669	79,311	88,697	93,976	1,01,383
Above 65	64,833	73,965	79,336	86,198	1,02,552	1,11,938	1,17,223	1,24,629

A=Adult; C=Child

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	18,340	27,877	33,480	40,615	28,026	37,854	43,355	51,097
31-35	20,088	29,713	35,363	42,572	30,827	40,736	46,291	54,101
36-40	23,153	33,379	39,400	47,088	35,728	46,244	52,157	60,454
41-45	27,709	38,178	44,347	52,238	43,045	53,797	59,866	68,351
46-50	32,873	43,693	50,065	58,232	51,307	62,411	68,681	77,443
51-55	40,798	51,698	58,124	66,359	63,983	75,168	81,493	90,322
56-60	44,501	54,493	60,378	67,933	70,012	80,265	86,062	94,161
61-65	55,150	65,142	71,033	78,587	87,058	97,310	1,03,109	1,11,208
Above 65	71,132	81,124	87,014	94,564	1,12,625	1,22,878	1,28,676	1,36,775

Age Band/ Family Size	Zone B – Gold Plan – Sum Insured – Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	20,777	31,664	38,077	46,298	31,927	43,228	49,417	58,240
31-35	22,788	33,778	40,243	48,546	35,147	46,548	52,792	61,696
36-40	26,311	37,990	44,881	53,737	40,777	52,879	59,542	68,999
41-45	31,556	43,517	50,578	59,670	49,201	61,445	68,405	78,091
46-50	37,496	49,855	57,160	66,562	58,705	71,347	78,550	88,547
51-55	46,609	59,063	66,420	75,911	73,278	86,022	93,278	1,03,356
56-60	50,893	62,308	69,053	77,752	80,240	91,922	98,573	1,07,811
61-65	63,143	74,559	81,304	90,003	99,842	1,11,524	1,18,175	1,27,413
Above 65	81,514	92,937	99,681	1,08,381	1,29,245	1,40,927	1,47,578	1,56,816

Zone C – Gold Plan – Sum Insured – Rs. 3,00,000	
Age Band/ Family Size	1A
18-30	5,826
31-35	6,262
36-40	7,016
41-45	8,120
46-50	9,404
51-55	11,361
56-60	12,701
61-65	15,452
Above 65	19,576

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,432	10,996	13,066	15,500	10,673	14,600	16,572	19,593
31-35	8,041	11,631	13,721	16,175	11,645	15,599	17,582	20,631
36-40	9,106	12,901	15,117	17,741	13,338	17,503	19,619	22,833
41-45	10,659	14,541	16,803	19,501	15,857	20,095	22,258	25,538
46-50	12,451	16,452	18,786	21,576	18,720	23,078	25,313	28,686
51-55	15,196	19,222	21,576	24,394	23,110	27,495	29,749	33,149
56-60	17,103	20,955	23,207	25,895	26,211	30,411	32,561	35,813
61-65	20,955	24,807	27,059	29,746	32,372	36,572	38,728	41,973
Above 65	26,730	30,581	32,833	35,528	41,619	45,812	47,969	51,214

A=Adult; C=Child

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,362	12,372	14,699	17,437	12,007	16,425	18,643	22,042
31-35	9,046	13,086	15,436	18,196	13,100	17,549	19,780	23,210
36-40	10,243	14,514	17,006	19,959	15,004	19,691	22,072	25,688
41-45	11,992	16,359	18,903	21,937	17,839	22,608	25,040	28,729
46-50	14,008	18,508	21,135	24,274	21,060	25,962	28,476	32,270
51-55	17,095	21,626	24,274	27,442	25,999	30,932	33,468	37,292
56-60	19,241	23,574	26,107	29,131	29,488	34,212	36,631	40,289
61-65	23,574	27,907	30,440	33,465	36,418	41,142	43,569	47,220
Above 65	30,071	34,404	36,937	39,969	46,820	51,538	53,965	57,615

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,799	13,309	15,852	18,946	13,087	17,783	20,239	23,884
31-35	9,566	14,108	16,682	19,807	14,312	19,045	21,520	25,202
36-40	10,909	15,717	18,445	21,780	16,459	21,452	24,088	27,980
41-45	12,889	17,796	20,585	24,014	19,645	24,738	27,435	31,408
46-50	15,147	20,208	23,092	26,638	23,258	28,505	31,296	35,386
51-55	18,612	23,711	26,619	30,195	28,802	34,087	36,903	41,023
56-60	22,003	27,102	30,009	33,580	34,230	39,513	42,329	46,450
61-65	27,089	32,187	35,089	38,666	42,365	47,650	50,466	54,586
Above 65	34,718	39,817	42,719	46,295	54,574	59,852	62,667	66,788

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	10,451	15,667	18,687	22,411	15,512	20,995	23,927	28,203
31-35	11,366	16,632	19,677	23,439	16,985	22,510	25,468	29,780
36-40	12,976	18,556	21,799	25,808	19,559	25,400	28,549	33,116
41-45	15,357	21,063	24,373	28,493	23,383	29,347	32,571	37,236
46-50	18,068	23,951	27,380	31,643	27,727	33,870	37,200	42,013
51-55	22,226	28,159	31,606	35,913	34,378	40,571	43,932	48,776
56-60	26,297	32,225	35,677	39,977	40,887	47,081	50,441	55,285
61-65	32,398	38,332	41,778	46,085	50,651	56,845	60,204	65,050
Above 65	41,549	47,483	50,936	55,235	65,297	71,490	74,851	79,695

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,732	17,659	21,106	25,394	17,560	23,753	27,107	31,953
31-35	12,783	18,767	22,244	26,575	19,249	25,493	28,877	33,766
36-40	14,633	20,981	24,676	29,304	22,213	28,821	32,423	37,601
41-45	17,375	23,866	27,646	32,398	26,619	33,363	37,057	42,348
46-50	20,493	27,194	31,098	36,017	31,612	38,567	42,384	47,842
51-55	25,276	32,027	35,968	40,924	39,260	46,270	50,119	55,619
56-60	29,954	36,705	40,646	45,602	46,747	53,750	57,606	63,106
61-65	36,977	43,721	47,662	52,619	57,977	64,981	68,830	74,330
Above 65	47,501	54,252	58,193	63,150	74,820	81,824	85,678	91,179

A=Adult; C=Child

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	13,204	19,942	23,878	28,821	19,918	26,921	30,765	36,265
31-35	14,417	21,217	25,189	30,183	21,860	28,927	32,806	38,350
36-40	16,540	23,767	27,986	33,314	25,264	32,750	36,878	42,761
41-45	19,701	27,089	31,414	36,884	30,337	37,985	42,217	48,232
46-50	23,290	30,913	35,386	41,042	36,073	43,963	48,343	54,542
51-55	28,785	36,475	40,979	46,691	44,878	52,823	57,234	63,490
56-60	34,167	41,858	46,363	52,067	53,485	61,430	65,847	72,097
61-65	42,236	49,927	54,431	60,136	66,398	74,342	78,761	85,010
Above 65	54,344	62,030	66,535	72,246	85,765	93,716	98,128	1,04,383

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	15,456	23,451	28,135	34,081	23,525	31,786	36,376	42,874
31-35	16,917	24,979	29,707	35,708	25,858	34,186	38,820	45,379
36-40	19,466	28,036	33,066	39,470	29,941	38,771	43,715	50,669
41-45	23,265	32,033	37,187	43,758	36,036	45,064	50,125	57,247
46-50	27,565	36,623	41,952	48,758	42,923	52,241	57,476	64,826
51-55	34,167	43,294	48,665	55,527	53,485	62,872	68,149	75,556
56-60	40,621	49,754	55,124	61,986	63,812	73,204	78,483	85,889
61-65	50,311	59,437	64,808	71,669	79,311	88,697	93,976	1,01,383
Above 65	64,833	73,965	79,336	86,198	1,02,552	1,11,938	1,17,223	1,24,629

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	16,811	25,554	30,690	37,231	25,691	34,700	39,742	46,839
31-35	18,414	27,237	32,416	39,025	28,258	37,342	42,434	49,592
36-40	21,223	30,598	36,116	43,164	32,750	42,391	47,810	55,416
41-45	25,400	34,997	40,652	47,885	39,458	49,314	54,877	62,655
46-50	30,133	40,052	45,893	53,380	47,032	57,210	62,957	70,990
51-55	37,398	47,390	53,281	60,829	58,651	68,904	74,702	82,795
56-60	44,501	54,493	60,378	67,933	70,012	80,265	86,062	94,161
61-65	55,150	65,142	71,033	78,587	87,058	97,310	1,03,109	1,11,208
Above 65	71,132	81,124	87,014	94,564	1,12,625	1,22,878	1,28,676	1,36,775

Age Band/ Family Size	Zone C – Gold Plan – Sum Insured – Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	19,045	29,026	34,904	42,440	29,267	39,625	45,299	53,386
31-35	20,889	30,963	36,890	44,501	32,218	42,669	48,392	56,554
36-40	24,119	34,824	41,141	49,259	37,379	48,473	54,580	63,249
41-45	28,927	39,890	46,363	54,698	45,101	56,324	62,704	71,584
46-50	34,372	45,701	52,396	61,015	53,813	65,402	72,004	81,168
51-55	42,725	54,141	60,885	69,585	67,172	78,854	85,505	94,743
56-60	50,893	62,308	69,053	77,752	80,240	91,922	98,573	1,07,811
61-65	63,143	74,559	81,304	90,003	99,842	1,11,524	1,18,175	1,27,413
Above 65	81,514	92,937	99,681	1,08,381	1,29,245	1,40,927	1,47,578	1,56,816

A=Adult; C=Child

Zone D - Gold Plan - Sum Insured - Rs. 3,00,000	
Age Band/ Family Size	1A
18-30	5,573
31-35	5,990
36-40	6,711
41-45	7,767
46-50	8,995
51-55	10,867
56-60	12,701
61-65	15,452
Above 65	19,576

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone D - Gold Plan - Sum Insured - Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,109	10,518	12,498	14,826	10,209	13,966	15,851	18,741
31-35	7,691	11,125	13,124	15,472	11,139	14,920	16,818	19,734
36-40	8,710	12,340	14,460	16,970	12,758	16,742	18,766	21,841
41-45	10,196	13,908	16,072	18,653	15,168	19,221	21,291	24,428
46-50	11,910	15,737	17,970	20,638	17,906	22,075	24,212	27,438
51-55	14,535	18,387	20,638	23,333	22,106	26,300	28,456	31,708
56-60	17,103	20,955	23,207	25,895	26,211	30,411	32,561	35,813
61-65	20,955	24,807	27,059	29,746	32,372	36,572	38,728	41,973
Above 65	26,730	30,581	32,833	35,528	41,619	45,812	47,969	51,214

Age Band/ Family Size	Zone D - Gold Plan - Sum Insured - Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,998	11,834	14,060	16,679	11,485	15,711	17,832	21,084
31-35	8,653	12,517	14,765	17,405	12,530	16,786	18,920	22,201
36-40	9,798	13,883	16,267	19,092	14,352	18,835	21,112	24,571
41-45	11,471	15,648	18,081	20,984	17,063	21,625	23,951	27,480
46-50	13,399	17,703	20,216	23,219	20,144	24,834	27,238	30,867
51-55	16,352	20,686	23,219	26,249	24,869	29,587	32,013	35,671
56-60	19,241	23,574	26,107	29,131	29,488	34,212	36,631	40,289
61-65	23,574	27,907	30,440	33,465	36,418	41,142	43,569	47,220
Above 65	30,071	34,404	36,937	39,969	46,820	51,538	53,965	57,615

Age Band/ Family Size	Zone D - Gold Plan - Sum Insured - Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,639	13,067	15,564	18,602	12,849	17,459	19,871	23,450
31-35	9,392	13,851	16,378	19,446	14,052	18,699	21,129	24,744
36-40	10,710	15,431	18,109	21,384	16,160	21,062	23,650	27,471
41-45	12,654	17,472	20,211	23,577	19,288	24,288	26,936	30,837
46-50	14,872	19,841	22,672	26,153	22,836	27,987	30,727	34,743
51-55	18,274	23,279	26,135	29,646	28,279	33,467	36,232	40,278
56-60	21,603	26,609	29,463	32,969	33,607	38,795	41,559	45,605
61-65	26,596	31,602	34,451	37,963	41,595	46,783	49,548	53,594
Above 65	34,087	39,093	41,942	45,453	53,582	58,764	61,528	65,573

A=Adult; C=Child

Age Band/ Family Size	Zone D – Gold Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	10,261	15,382	18,347	22,004	15,230	20,613	23,492	27,690
31-35	11,160	16,330	19,319	23,013	16,676	22,101	25,005	29,239
36-40	12,740	18,219	21,402	25,339	19,203	24,938	28,030	32,513
41-45	15,078	20,680	23,930	27,975	22,958	28,813	31,979	36,559
46-50	17,739	23,516	26,882	31,067	27,222	33,254	36,523	41,250
51-55	21,821	27,647	31,032	35,260	33,753	39,834	43,133	47,889
56-60	25,818	31,639	35,029	39,250	40,144	46,225	49,523	54,280
61-65	31,809	37,635	41,018	45,247	49,730	55,811	59,109	63,867
Above 65	40,794	46,619	50,009	54,231	64,110	70,190	73,490	78,246

Age Band/ Family Size	Zone D – Gold Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,518	17,338	20,722	24,932	17,241	23,322	26,614	31,372
31-35	12,551	18,426	21,840	26,092	18,899	25,029	28,352	33,152
36-40	14,367	20,600	24,228	28,771	21,810	28,297	31,833	36,918
41-45	17,059	23,432	27,144	31,809	26,135	32,756	36,383	41,578
46-50	20,120	26,700	30,533	35,362	31,037	37,866	41,613	46,972
51-55	24,816	31,444	35,314	40,180	38,546	45,429	49,208	54,608
56-60	29,409	36,037	39,907	44,772	45,897	52,773	56,559	61,959
61-65	36,304	42,926	46,795	51,662	56,922	63,800	67,579	72,979
Above 65	46,638	53,266	57,135	62,002	73,459	80,336	84,120	89,521

Age Band/ Family Size	Zone D – Gold Plan – Sum Insured – Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	12,964	19,579	23,444	28,297	19,556	26,432	30,205	35,605
31-35	14,154	20,831	24,731	29,634	21,463	28,401	32,210	37,653
36-40	16,239	23,334	27,477	32,708	24,804	32,155	36,207	41,984
41-45	19,343	26,596	30,843	36,213	29,785	37,295	41,449	47,355
46-50	22,867	30,351	34,743	40,296	35,418	43,163	47,464	53,551
51-55	28,261	35,812	40,234	45,842	44,062	51,863	56,193	62,335
56-60	33,546	41,097	45,520	51,121	52,513	60,313	64,650	70,786
61-65	41,468	49,019	53,442	59,043	65,191	72,991	77,329	83,465
Above 65	53,356	60,902	65,325	70,932	84,205	92,012	96,344	1,02,486

Age Band/ Family Size	Zone D – Gold Plan – Sum Insured – Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	15,175	23,025	27,623	33,462	23,097	31,208	35,715	42,094
31-35	16,609	24,525	29,166	35,059	25,388	33,564	38,114	44,554
36-40	19,112	27,526	32,465	38,753	29,397	38,066	42,920	49,748
41-45	22,842	31,451	36,510	42,962	35,381	44,244	49,213	56,206
46-50	27,064	35,958	41,189	47,871	42,143	51,291	56,431	63,648
51-55	33,546	42,507	47,780	54,517	52,513	61,728	66,910	74,182
56-60	39,882	48,849	54,122	60,859	62,652	71,873	77,056	84,327
61-65	49,396	58,357	63,629	70,366	77,869	87,085	92,268	99,539
Above 65	63,654	72,620	77,894	84,631	1,00,687	1,09,903	1,15,091	1,22,363

A=Adult; C=Child

Age Band/ Family Size	Zone D - Gold Plan - Sum Insured - Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	16,506	25,089	30,132	36,554	25,223	34,069	39,019	45,987
31-35	18,079	26,742	31,827	38,315	27,744	36,663	41,662	48,691
36-40	20,838	30,041	35,460	42,379	32,155	41,620	46,941	54,408
41-45	24,938	34,360	39,912	47,015	38,741	48,417	53,879	61,516
46-50	29,586	39,324	45,059	52,409	46,176	56,170	61,813	69,699
51-55	36,718	46,529	52,312	59,723	57,585	67,651	73,344	81,289
56-60	43,691	53,502	59,280	66,698	68,739	78,805	84,497	92,449
61-65	54,147	63,958	69,741	77,158	85,476	95,541	1,01,234	1,09,186
Above 65	69,838	79,649	85,432	92,844	1,10,577	1,20,644	1,26,336	1,34,288

Age Band/ Family Size	Zone D - Gold Plan - Sum Insured - Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	18,699	28,498	34,269	41,669	28,734	38,905	44,475	52,416
31-35	20,509	30,400	36,219	43,691	31,632	41,893	47,512	55,526
36-40	23,680	34,191	40,393	48,363	36,699	47,591	53,587	62,099
41-45	28,401	39,165	45,520	53,703	44,281	55,300	61,564	70,282
46-50	33,747	44,870	51,444	59,905	52,835	64,212	70,695	79,692
51-55	41,948	53,157	59,778	68,320	65,950	77,420	83,951	93,020
56-60	49,967	61,176	67,797	76,339	78,781	90,250	96,781	1,05,851
61-65	61,995	73,203	79,826	88,367	98,026	1,09,496	1,16,027	1,25,096
Above 65	80,032	91,247	97,869	1,06,410	1,26,895	1,38,364	1,44,895	1,53,965

Zone E - Gold Plan - Sum Insured - Rs. 3,00,000	
Age Band/ Family Size	1A
18-30	5,319
31-35	5,717
36-40	6,406
41-45	7,414
46-50	8,586
51-55	10,373
56-60	12,123
61-65	14,749
Above 65	18,686

*Rs.3 lakhs Sum Insured is available only on Individual basis and only for renewals

Age Band/ Family Size	Zone E - Gold Plan - Sum Insured - Rs. 5,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	6,786	10,040	11,930	14,152	9,745	13,331	15,131	17,889
31-35	7,342	10,620	12,528	14,768	10,632	14,242	16,053	18,837
36-40	8,314	11,779	13,802	16,198	12,178	15,981	17,913	20,848
41-45	9,732	13,276	15,342	17,805	14,478	18,348	20,323	23,317
46-50	11,368	15,021	17,153	19,700	17,092	21,071	23,112	26,191
51-55	13,875	17,551	19,700	22,273	21,101	25,104	27,162	30,266
56-60	16,325	20,003	22,152	24,718	25,019	29,028	31,081	34,185
61-65	20,003	23,680	25,829	28,394	30,900	34,909	36,967	40,065
Above 65	25,515	29,191	31,340	33,913	39,727	43,729	45,788	48,886

A=Adult; C=Child

Age Band/ Family Size	Zone E – Gold Plan – Sum Insured – Rs. 7,50,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	7,635	11,296	13,421	15,921	10,963	14,997	17,022	20,125
31-35	8,259	11,948	14,094	16,614	11,961	16,023	18,060	21,192
36-40	9,352	13,252	15,527	18,224	13,699	17,979	20,153	23,454
41-45	10,949	14,936	17,259	20,030	16,288	20,642	22,863	26,231
46-50	12,790	16,899	19,297	22,163	19,229	23,705	26,000	29,464
51-55	15,608	19,745	22,163	25,056	23,738	28,242	30,558	34,049
56-60	18,367	22,503	24,921	27,807	28,147	32,657	34,966	38,457
61-65	22,503	26,639	29,057	31,944	34,762	39,272	41,588	45,073
Above 65	28,704	32,840	35,258	38,152	44,692	49,196	51,512	54,996

Age Band/ Family Size	Zone E – Gold Plan – Sum Insured – Rs. 10,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	8,399	12,704	15,132	18,085	12,492	16,974	19,319	22,799
31-35	9,131	13,466	15,923	18,906	13,662	18,180	20,542	24,057
36-40	10,413	15,002	17,606	20,790	15,711	20,477	22,993	26,708
41-45	12,303	16,987	19,650	22,923	18,752	23,613	26,188	29,981
46-50	14,459	19,290	22,043	25,427	22,201	27,210	29,874	33,777
51-55	17,766	22,633	25,409	28,823	27,493	32,537	35,225	39,159
56-60	21,003	25,870	28,645	32,053	32,674	37,717	40,405	44,338
61-65	25,857	30,724	33,494	36,909	40,440	45,484	48,172	52,105
Above 65	33,140	38,007	40,777	44,190	52,094	57,132	59,819	63,752

Age Band/ Family Size	Zone E – Gold Plan – Sum Insured – Rs. 15,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	9,976	14,955	17,837	21,393	14,807	20,040	22,840	26,921
31-35	10,850	15,876	18,782	22,373	16,213	21,487	24,311	28,427
36-40	12,386	17,712	20,808	24,635	18,670	24,246	27,252	31,610
41-45	14,659	20,105	23,265	27,198	22,320	28,013	31,091	35,544
46-50	17,246	22,863	26,136	30,204	26,466	32,331	35,509	40,104
51-55	21,215	26,879	30,170	34,280	32,816	38,727	41,935	46,559
56-60	25,101	30,760	34,056	38,160	39,029	44,941	48,148	52,772
61-65	30,926	36,589	39,879	43,990	48,348	54,261	57,468	62,093
Above 65	39,661	45,324	48,620	52,725	62,329	68,241	71,448	76,073

Age Band/ Family Size	Zone E – Gold Plan – Sum Insured – Rs. 20,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	11,198	16,857	20,146	24,239	16,762	22,674	25,875	30,500
31-35	12,202	17,914	21,233	25,367	18,374	24,334	27,565	32,231
36-40	13,968	20,028	23,555	27,972	21,204	27,511	30,949	35,892
41-45	16,585	22,781	26,390	30,926	25,409	31,847	35,372	40,423
46-50	19,562	25,958	29,685	34,380	30,175	36,814	40,458	45,668
51-55	24,127	30,571	34,333	39,064	37,476	44,167	47,841	53,091
56-60	28,593	35,036	38,799	43,529	44,622	51,307	54,987	60,237
61-65	35,296	41,733	45,495	50,227	55,341	62,028	65,702	70,952
Above 65	45,342	51,786	55,548	60,279	71,419	78,104	81,783	87,035

A=Adult; C=Child

Age Band/ Family Size	Zone E - Gold Plan - Sum Insured - Rs. 25,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	12,604	19,035	22,792	27,511	19,012	25,698	29,366	34,616
31-35	13,761	20,252	24,044	28,811	20,867	27,612	31,315	36,607
36-40	15,788	22,686	26,714	31,799	24,115	31,262	35,201	40,818
41-45	18,806	25,857	29,986	35,208	28,958	36,259	40,298	46,039
46-50	22,232	29,508	33,777	39,177	34,434	41,964	46,145	52,063
51-55	27,476	34,817	39,117	44,568	42,838	50,422	54,633	60,604
56-60	32,614	39,956	44,255	49,701	51,054	58,637	62,854	68,820
61-65	40,316	47,657	51,957	57,402	63,380	70,963	75,181	81,146
Above 65	51,874	59,211	63,510	68,962	81,866	89,456	93,667	99,639

Age Band/ Family Size	Zone E - Gold Plan - Sum Insured - Rs. 50,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	14,754	22,385	26,856	32,532	22,455	30,341	34,722	40,925
31-35	16,148	23,843	28,356	34,085	24,682	32,632	37,056	43,317
36-40	18,581	26,761	31,563	37,676	28,580	37,008	41,728	48,366
41-45	22,208	30,577	35,496	41,769	34,398	43,015	47,846	54,645
46-50	26,312	34,959	40,045	46,541	40,972	49,867	54,864	61,880
51-55	32,614	41,326	46,453	53,003	51,054	60,014	65,052	72,121
56-60	38,774	47,493	52,619	59,169	60,912	69,876	74,915	81,985
61-65	48,024	56,736	61,862	68,412	75,706	84,666	89,705	96,774
Above 65	61,886	70,603	75,730	82,280	97,890	1,06,850	1,11,894	1,18,964

Age Band/ Family Size	Zone E - Gold Plan - Sum Insured - Rs. 75,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	16,047	24,393	29,295	35,538	24,523	33,122	37,935	44,710
31-35	17,577	25,999	30,942	37,251	26,973	35,644	40,505	47,338
36-40	20,259	29,207	34,475	41,202	31,262	40,464	45,637	52,897
41-45	24,246	33,406	38,804	45,709	37,665	47,073	52,382	59,807
46-50	28,764	38,232	43,807	50,953	44,894	54,609	60,096	67,763
51-55	35,698	45,236	50,859	58,064	55,985	65,772	71,307	79,031
56-60	42,478	52,016	57,633	64,845	66,829	76,616	82,150	89,881
61-65	52,643	62,181	67,804	75,015	83,101	92,887	98,422	1,06,153
Above 65	67,898	77,436	83,059	90,265	1,07,505	1,17,292	1,22,827	1,30,558

Age Band/ Family Size	Zone E - Gold Plan - Sum Insured - Rs. 1,00,00,000							
	1A	1A+1C	1A+2C	1A+3C	2A	2A+1C	2A+2C	2A+3C
18-30	18,180	27,706	33,318	40,511	27,936	37,824	43,240	50,960
31-35	19,940	29,555	35,213	42,478	30,753	40,730	46,193	53,984
36-40	23,022	33,241	39,271	47,020	35,680	46,269	52,099	60,374
41-45	27,612	38,077	44,255	52,211	43,051	53,764	59,854	68,330
46-50	32,809	43,623	50,015	58,241	51,367	62,429	68,731	77,478
51-55	40,783	51,680	58,118	66,422	64,118	75,269	81,619	90,437
56-60	48,579	59,476	65,914	74,218	76,592	87,743	94,093	1,02,911
61-65	60,273	71,170	77,609	85,912	95,303	1,06,454	1,12,804	1,21,622
Above 65	77,809	88,712	95,150	1,03,454	1,23,370	1,34,521	1,40,870	1,49,688

A=Adult; C=Child

Benefit Illustration in respect of policies offered on individual and family floater basis										
Age of the members insured (in yrs)	Coverage opted on individual basis covering each member of the family separately (at a single point of time)		Coverage opted on individual basis covering multiple members of the family under a single policy (Sum Insured is available for each member of the family)				Coverage opted on family floater basis with overall Sum Insured (Only one Sum Insured is available for the entire family)			
	Premium (Rs.)	Sum Insured (Rs.)	Premium (Rs.)	Discount (if any)	Premium After Discount (Rs.)	Sum Insured (Rs.)	Premium or consolidated premium for all members of family (Rs.)	Floater Discount (if any)	Premium After Discount (Rs.)	Sum Insured (Rs.)
Illustration 1 - Gold Plan										
31	7,691	5,00,000	7,691	Nil	7,691	5,00,000	14,800	3,661	11,139	5,00,000
28	7,109	5,00,000	7,109		7,109	5,00,000				
Total Premium for all members of the family is Rs. 14,800/-, when each member is covered separately. Sum Insured available for each individual is Rs. 5,00,000/-			Total Premium for all members of the family is Rs. 14,800/-, when they are covered under a single policy. Sum Insured available for each family member is Rs. 5,00,000/-				Total Premium when policy is opted on floater basis is Rs. 11,139/-, Sum Insured of Rs. 5,00,000/- is available for the entire family (2A)			
Illustration 2 - Gold Plan										
46	11,910	5,00,000	11,910		11,910	5,00,000	29,215	7,140	22,075	5,00,000
44	10,196	5,00,000	10,196		10,196	5,00,000				
18	7,109	5,00,000	7,109		7,109	5,00,000				
Total Premium for all members of the family is Rs. 29,215/-, when each member is covered separately. Sum Insured available for each individual is Rs. 5,00,000/-			Total Premium for all members of the family is Rs. 29,215/-, when they are covered under a single policy. Sum Insured available for each family member is Rs. 5,00,000/-				Total Premium when policy is opted on floater basis is Rs. 22,075/-, Sum Insured of Rs. 5,00,000/- is available for the entire family (2A+1C)			
Note: <ol style="list-style-type: none"> Premium rates specified in the above illustration are standard premium rates without considering any loading. Also, the premium rates are exclusive of taxes applicable. Floater discount shown here is difference between Premium applicable for Individual Sum Insured and Floater Sum Insured. Premium considered are of Zone D 										

A-Adult | C-Child