I. SALIENT FEATURES OF THE POLICY

1. Room rent, Board & Nursing Expenses as provided by the Hospital/ Nursing Home.
2. Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialists Fees.
3. Anaesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines & Drugs, Diagnostic Materials and X-ray, Cost of Pacemaker, prosthesis/internal implants and any Medical expenses incurred which is integral part of the operation.
4. Pre-Hospitalisation Medical expenses.
5. Post-Hospitalisation Medical expenses.
6. Day Care expenses.
7. Ambulance charges.
8. Free medical check-up.
9. Patient Care.
10. Accidental Hospitalisation.
11. Hospital Cash.
12. Accompanying Person.
13. Organ Donor Expenses.
14. Recharge of Sum Insured.

II. DEFINITIONS

The following words or terms shall have the meaning ascribed to them wherever they appear in this Policy, and references to the singular or to the masculine shall include references to the plural and to the female wherever the context so permits:

1) Standard definition

The following words or terms shall have the meaning ascribed to them wherever they appear in this Policy, and references to the singular or to the masculine shall include references to the plural and to the female wherever the context so permits:

1. **Accident** is a sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Any one Illness** means continuous period of illness and includes relapse within 45 days from the date of last consultation with the Hospital/ Nursing Home where treatment was taken.
3. **AYUSH Treatment** refers to the medical and / or hospitalization treatments given under Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems
4. [1]**AYUSH Hospital:** An AYUSH Hospital is a healthcare facility wherein medical/surgical/para-surgical treatment procedures and interventions are carried out by AYUSH Medical Practitioner(s) comprising of any of the following:
   a) Central or State Government AYUSH Hospital; or
   b) Teaching hospital attached to AYUSH College recognized by the Central Government/Central Council of Indian Medicine/Central Council for Homeopathy; or
   c) AYUSH Hospital, standalone or co-located with in-patient healthcare facility of any recognized system of medicine, registered with the local authorities, wherever applicable, and is under the supervision of a qualified registered AYUSH Medical Practitioner and must comply with all the following criterion:
      i. Having at least 5 in-patient beds.
      ii. Having qualified AYUSH Medical Practitioner in charge round the clock.
      iii. Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out.
      iv. Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative.
5. [2]**AYUSH Day Care Centre** means and includes Community Health Centre (CHC), Primary Health

[1] **Inserted definition of AYUSH Hospital**
[2] **Inserted definition of AYUSH Day Care**

Centre (PHC), Dispensary, Clinic, Polyclinic or any such health centre which is registered with the local authorities, wherever applicable and having facilities for carrying out treatment procedures and medical or surgical/para-surgical interventions or both under the supervision of registered. AYUSH Medical Practitioner (s) on day care basis without in-patient services and must comply with all the following criterion:

i. Having qualified registered AYUSH Medical Practitioner(s) in charge.
ii. Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out.
iii. Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative.

6. **Cashless facility** means a facility extended by the insurer to the insured where the payments, of the costs of treatment undergone by the insured in accordance with the policy terms and conditions, are directly made to the network provider by the insurer to the extent pre-authorization is approved.
7. **Condition Precedent** shall mean a Policy term or condition upon which the Insurer's liability under the Policy is conditional upon.
8. **Congenital Anomaly** refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.
   a. **Internal Congenital Anomaly -Congenital Anomaly** which is not in the visible and accessible parts of the body.
   b. **External Congenital Anomaly - Congenital Anomaly** which is in the visible and accessible parts of the body.
9. **Co-payment** means a cost sharing requirement under a health insurance policy that provides that the policyholder/ insured will bear a specified percentage of the admissible claims amount. A co-payment does not reduce the Sum Insured.
10. **Cumulative Bonus** means any increase or addition in the Sum Insured granted by the insurer without an associated increase in premium.
11. **Day care centre** means any institution established for day care treatment of illness and/or injuries or a medical setup with a hospital and which has been registered with the local authorities, wherever applicable, and is under supervision of a registered and qualified medical practitioner and must comply with all minimum criterion as under -
    a. has qualified nursing staff under its employment.
    b. has qualified medical practitioner/s in charge.
    c. has fully equipped operation theatre of its own where surgical procedures are carried out.
    d. maintains daily records of patients and will make these accessible to the insurance company's authorized personnel.
12. **Day Care treatment** means medical treatment, and/or surgical procedure which is:
    a. undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
    b. which would have otherwise required hospitalization of more than 24 hours.

    Treatment normally taken on an out-patient basis is not included in the scope of this definition.
13. **Deductible** means a cost sharing requirement under a health insurance policy that provides that the insurer will not be liable for a specified rupee amount in case of indemnity policies and for a specified number of days/hours in case of hospital cash policies which will apply before any benefits are payable by the insurer. A deductible does not reduce the Sum Insured.
14. **Dental Treatment** means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.
15. **Disclosure to information norm**: The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, misdescription or non-disclosure of any material fact.
16. **Domiciliary hospitalization** means medical treatment for an illness/disease/injury which in the normal course would require care and treatment at a hospital but is actually taken while confined at home under any of the following circumstances:
    i. the condition of the patient is such that he/she is not in a condition to be removed to a hospital, or
    ii. the patient takes treatment at home on account of non-availability of room in a hospital.
17. **Emergency care** means management for an illness or injury which results in symptoms which occur suddenly and unexpectedly and requires immediate care by a medical practitioner to prevent

death or serious long-term impairment of the insured person's health.

18. **Grace period** means the specified period of time immediately following the premium due date during which premium a payment can be made to renew or continue a policy in force without loss of continuity benefits pertaining to such as waiting periods and coverage of pre-existing diseases. Coverage need not be available for during the period for which no premium is received. The grace period for payment of the premium for all types of insurance policies shall be: fifteen days where premium payment mode is monthly and thirty days in all other cases.
    Provided the insurer shall offer coverage during the grace period, if the premium is paid in installments during policy period.
19. **Hospital**: A hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) and the said act or complies with all minimum criteria as under:
    i. has qualified nursing staff under its employment round the clock.
    ii. has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places.
    iii. has qualified medical practitioner(s) in charge round the clock.
    iv. has a fully equipped operation theatre of its own where surgical procedures are carried out.
    v. maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.
20. **Hospitalization** means admission in a Hospital for a minimum period of 24 consecutive *'In- patient Care'* hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.
21. **Illness** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.
    a. **Acute condition** - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery.
    b. **Chronic condition** - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
        (i) it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
        (ii) it needs ongoing or long-term control or relief of symptoms
        (iii) it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
        (iv) it continues indefinitely
        (v) it recurs or is likely to recur
22. **Injury** means accidental physical bodily harm excluding Illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.
23. **Inpatient Care** means treatment for which the insured person has to stay in a Hospital for more than 24 hours for a covered event.
24. **Intensive care unit** means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
25. **ICU (Intensive Care Unit) Charges** means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges.
26. **Maternity expenses means:**
    a. medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization);
    b. expenses towards lawful medical termination of pregnancy during the policy period.
27. **Medical Advice** means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.
28. **Medical expenses** means those expenses that an Insured Person has necessarily and actually

incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.

29. **Medical Practitioner** means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license. The registered practitioner should not be the insured or close Family members.
30. **Medically Necessary Treatment** means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:
    i. is required for the medical management of the illness or injury suffered by the insured.
    ii. must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity.
    iii. must have been prescribed by a medical practitioner.
    iv. must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
31. **Migration** means, the right accorded to health insurance policyholders (including all members under family cover and members of group Health insurance policy), to transfer the credit gained for pre-existing conditions and time bound exclusions, with the same insurer
32. **Network Provider** means hospitals or health care providers enlisted by an insurer, TPA or jointly by an Insurer and TPA to provide medical services to an insured by a cashless facility
33. **New Born baby** means baby born during the Policy Period and is aged up to 90 days.
34. **Non-Network Provider** means any hospital, day care centre or other provider that is not part of the network.
35. **Notification of claim** means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.
36. **OPD treatment** means the one in which the Insured visits a clinic / hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.
37. **Portability** means the right accorded to an individual health insurance policyholders (including all members under family cover), to transfer the credit gained for pre-existing conditions and time bound exclusions, from one insurer to another insurer.
38. **Pre-Existing Disease** means any condition, ailment or injury or disease:
    a) That is/are diagnosed by a physician within 36 months prior to the effective date of the policy issued by the insurer or its reinstatement, or
    b) For which medical advice or treatment was recommended by, or received from, a Physician within 36 months prior to the effective date of the policy or its reinstatement.
39. **Pre-hospitalization Medical Expenses** means medical expenses incurred during predefined number of days preceding the hospitalization of the Insured Person, provided that:
    i. Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
    ii. The In-patient Hospitalization claim for such Hospitalization is admissible by the Insurance Company.
40. **Post-hospitalization Medical Expenses** means medical expenses incurred during predefined number of days immediately after the insured person is discharged from the hospital provided that:
    i. Such Medical Expenses are for the same condition for which the insured person's hospitalization was required, and
    ii. The inpatient hospitalization claim for such hospitalization is admissible by the insurance company.
41. **Qualified nurse** means a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.
42. **Reasonable and Customary charges** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.
43. **Renewal** means the terms on which the contract of insurance can be renewed on mutual consent

with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.

44. **Room Rent** means the amount charged by a Hospital towards Room and Boarding expenses and shall include the associated medical expenses.
45. **Surgery or Surgical Procedure** means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.
46. **Unproven/ Experimental treatment** means the treatment including drug experimental therapy which is not based on established medical practice in India.

2) Specific definition

47. **Associated Medical Expenses** means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner. In case of copayment associated with room rent higher than the entitled room rent limit, Associated Medical Expenses will not include:
    a. Cost of pharmacy and consumables.
    b. Cost of implants and medical devices.
    c. Cost of diagnostics.
48. **Bank Rate** means Bank rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due.
49. **Dependent Child** refers to a child (natural or legally adopted), who is financially dependent on the primary insured or proposer and does not have his / her independent sources of income.
50. **Diagnostic Centre** means the diagnostic centers which have been empanelled by Us as per the latest version of the Schedule of diagnostic centers maintained by Us, which is available to You on request.
51. **Family** means and includes You, Your Spouse / Live-in partner, Your up to 4 dependent children up to the age of 25 years and two dependent parents in the Individual Policy.
    Or You, Your Spouse/ Live-in partner & Your up to 3 dependent children up to the age of 25 years in the Family Floater Policy
52. **Hazardous Activities** mean recreational or occupational activities which pose high risk of injury
53. **Live-in Relationship** shall, for the purpose herein, mean an arrangement between two unmarried adult persons, who consent to living together in a long-term relationship that is in the nature of a marriage.
54. **Live-in Partner** shall, for the purpose herein, means either half of the two unmarried adult persons of any gender and irrespective of the sexual orientation, who have consensually chosen to reside jointly with the other adult person, in a long-term relationship and in the same residence. For the purpose of clarity, it is, hereby, mentioned that this definition shall be construed to include persons belonging to the LGBT community, wherein the scope of LGBT shall be in accordance with the standings laws of India, as may be in force from time to time.
55. **LGBT** will mean and include a sexual orientation / gender expression as defined below
    a) Lesbian: means a woman who has the capacity to form enduring physical, romantic, and/ or emotional attractions or sexual attraction towards other woman.
    b) Gay: means a man who has the capacity to form enduring physical, romantic, and/ or emotional attractions or sexual attraction towards other man.
    c) Bisexual: A person who has the capacity to form enduring physical, romantic, and/ or emotional attractions to those of the same gender or to those of opposite gender.
    d) Transgender: means a person whose gender does not match with the gender assigned to that person at birth and includes trans-man or trans-woman (whether or not such person has undergone Sex Reassignment Surgery or hormone therapy or laser therapy or such other therapy), person with intersex variations, genderqueer and person having such socio-cultural identities as kinner, hijra, aravani and jogta
56. **Policy** means the complete documents consisting of the Proposal, Policy wording, Schedule and Endorsements and attachments if any.
57. **Policy Period** means the period commencing with the start date mentioned in the Schedule till the end date mentioned in the Schedule.
58. **Policy Year** means every annual period within the Policy Period starting with the commencement

date.

59. **Proposal form** means a form to be filled in by the prospect in written or electronic or any other format as approved by the Authority, for furnishing all material information as required by the insurer in respect of a risk, in order to enable the insurer to take informed decision in the context of underwriting the risk, and in the event of acceptance of the risk, to determine the rates, advantages, terms and conditions of the cover to be granted
60. **Prospect** means any person who is a potential customer of an insurer and likely to enter into an insurance contract either directly with the insurer or through a distribution channel.
61. **Prospectus** means a document either in physical or electronic or any other format issued by the insurer to sell or promote the insurance products.
62. **Schedule** means that portion of the Policy which sets out Your personal details, the type of insurance cover in force, the period and the sum insured. Any Annexure or Endorsement to the **Schedule** shall also be a part of the Schedule.
63. **Sum Insured** means the amount specified in the Schedule which is Our maximum, total and cumulative liability under this Policy for any and all claims arising under this Policy in a Policy Year in respect of the Insured Person(s).
64. **We, Our, Us, Insurer, GCICL** means Generali Central Insurance Company Limited.
65. **You, Your, Yourself** means the Insured Person shown in the Schedule.

Please note

a) Insect and mosquito bites is not included in the scope of definition of Accident.
b) Medical Expenses would include both medical treatment and/ or surgical treatment

III. Scope of Cover

We shall pay the following Medical expenses for medically necessary treatment, Reasonable and Customary Charges incurred for Hospitalisation:

1. Room rent, Board & Nursing Expenses as provided by the Hospital/ Nursing Home

a. Gold (for Sums Insured ₹ 50000/-, ₹ 1 lakh and ₹ 1.5 lakhs) - up to 1% of the Sum Insured (excluding Cumulative Bonus) per day for non-ICU room. If admitted into Intensive Care Unit (ICU) up to 2% of the Sum Insured per day. All admissible claims under section III. (1) during the Policy year, shall be payable maximum up to 35% of the Sum Insured per claim.
b. Gold (for Sums Insured ₹ 2 lakhs and above) – As per actuals.
c. Platinum Plan – As per actuals.
d. Topaz and Ruby Plans – up to 1% of the Sum Insured (excluding Cumulative Bonus) per day for non-ICU room.

i. For Topaz and Ruby Plans, in case You or insured person opts for a room with rent higher than the entitled room limit, the following co-payment will be applicable on the Associated Medical expenses (excluding pharmacy, consumables, implants, medical devices and diagnostics)

Applicable for Topaz and Ruby Plans Co-payment in case of admission in room with higher room rent is as below								
Sum insured	100000	200000	300000	400000	500000	600000	750000	1000000
Applicable limit on the sum insured (Excluding Cumulative Bonus)	1%	1%	1%	1%	1%	1%	1%	1%
Applicable room rent	1000	2000	3000	4000	5000	6000	7500	10000
Admission in higher room rent								
above 500 to 1000	0%	0%	0%	0%	0%	0%	0%	0%
above 1000 to 2000	10%	0%	0%	0%	0%	0%	0%	0%
above 2000 to 3000	15%	10%	0%	0%	0%	0%	0%	0%

above 3000 to 4000	20%	15%	10%	0%	0%	0%	0%	0%
above 4000 to 5000	20%	20%	15%	10%	0%	0%	0%	0%
above 5000 to 6000	25%	25%	20%	15%	10%	0%	0%	0%
above 6000 to 7000	25%	25%	25%	20%	15%	10%	0%	0%
above 7000 to 8000	25%	25%	25%	20%	20%	15%	0%	0%
above 8000 to 9000	25%	25%	25%	20%	20%	20%	10%	0%
above 9000 to 10000	25%	25%	25%	25%	20%	20%	15%	0%
above 10000	25%	25%	25%	25%	25%	25%	20%	10%

- Room, Boarding and Nursing Expenses as provided by the Hospital/ Nursing Home up to 1% of Sum Insured per day (Excluding Cumulative Bonus) or actual, whichever is lower
- During your hospital stay if at any time you are admitted in a Non-ICU room having room rent of more than the defined limit then the co-payment shall be applicable on the total Associated Medical expenses (excluding pharmacy, consumables, implants, medical devices and diagnostics)
- If a person is admitted in ICU any time during the hospitalisation and later shifted to Non-ICU room within the defined room rent limit, no co-payment shall apply and in case shifted to Non-ICU room with higher room rent limit, co-payment shall be applicable on the Associated Medical expenses (excluding pharmacy, consumables, implants, medical devices and diagnostics) applicable to Non-ICU room.
- Co-payment is not applicable in case of admission in an ICU room having room rent more than the defined limit.
- If a person is admitted only in ICU during entire hospitalisation, no co-payment shall apply.
- Copayment on Associated Medical expenses (excluding pharmacy, consumables, implants, medical devices and diagnostics) for opting a Non –ICU room with higher room rent limit is not applicable for those hospitals where differential billing based on the room category is not adopted.

2. **Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialists Fees**
   a. Gold (for Sums Insured ₹ 50000/-, ₹ 1 lakh and ₹ 1.5 lakhs) - up to 35% of the Sum Insured (excluding Cumulative Bonus) per claim.
   b. Gold (for Sums Insured ₹ 2 lakhs and above) - As per actuals.
   c. Platinum Plan – As per actuals.

3. **Anaesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines & Drugs, Diagnostic Materials and X-ray, Cost of Pacemaker, prosthesis/internal implants and any Medical expenses incurred which is integral part of the operation**
   a. Gold (for Sums Insured ₹ 50000/-, ₹ 1 lakh and ₹ 1.5 lakhs) - up to 40% of the Sum Insured (excluding Cumulative Bonus) per claim.
   b. Gold (for Sums Insured ₹ 2 lakhs and above) - As per actuals.
   c. Platinum Plan – As per actuals.

4. **Pre-Hospitalisation Medical expenses –** We shall pay for Medical expenses incurred with respect to the Insured Person for up to 60 days immediately prior to date of admission of Insured Person into the Hospital, provided that We have accepted a claim for Inpatient- Hospitalisation Expenses
   a. Gold and Platinum Plans – As per actuals
   b. Topaz and Ruby Plans – up to 1% of the Sum Insured (excluding Cumulative Bonus)

5. **Post-Hospitalisation Medical expenses–** We shall pay for Medical expenses incurred with respect to the Insured Person for up to 90 days after the date of discharge of Insured Person from the Hospital, provided that We have accepted a claim for Inpatient- Hospitalisation Expenses
   a. Gold and Platinum Plans – As per actuals

b. Topaz and Ruby Plans – up to 1% of the Sum Insured (excluding Cumulative Bonus)

6. **Day Care expenses** – We shall pay for expenses incurred under Day Care Treatment requiring less than 24 hours of Hospitalisation as per the list attached in the Policy Wordings.

7. **Ambulance charges** - up to a maximum of amount specified in the Schedule of Benefits, per **Hospitalisation** will be reimbursed to **You** on producing the bills in original.

8. **Free medical check-up** - At the end of every continuous period of 4 years during which You have held Our Health Suraksha Policy without making a claim, You may apply to Us for a free medical check-up (Physician's Consultation, ECG, Complete Blood Count, Urine Routine, Fasting blood Sugar, Post Prandial Blood Sugar, Lipid Profile, Sr. Creatinine, SGOT, SGPT, GGTP) at Our Diagnostic Center, the location of which We will specify at the time of Your application. For the avoidance of doubt, We shall not be liable for any other ancillary or peripheral costs or expenses (including but not limited to those for transportation, accommodation or sustenance).
   i. In case of Individual policy, the benefit will be available for all insured persons who were already covered under the Policy.
   ii. In case of family floater policy, the benefit will be available for two of the insured persons covered under the Policy.

9. **Patient Care –** Available for persons above 60 years, We shall provide payment for the nursing charges by a qualified nurse if necessary and recommended by the treating physician immediately after discharge from the Hospital, up to the amount specified in the Schedule of Benefits, up to a maximum of 10 days per Hospitalisation subject to maximum of 30 days during the Policy Year. This cover is over and above the Hospitalisation sum insured.

10. **Accidental Hospitalisation** – In case of Hospitalisation following an Accident, the limits under the Policy shall increase by 25% of the balance Sum Insured available subject to maximum of ₹ 1 Lakh irrespective of number of claims in a Policy Year.

11. **Hospital Cash** – We shall make payments of ₹ 500/- for each completed day of Hospitalisation subject to maximum of 60 days during the Policy Year. This benefit is applicable for Platinum plan and Ruby plan with Sum Insured ₹ 6 lakhs and above. This benefit is over and above the Hospitalisation sum insured.

12. **Accompanying Person** - We shall make payment of ₹ 500/- for each completed day of Hospitalisation for the Accompanying Person of an Insured Person provided that the Insured Person is a Dependent Child of age up to 10 years and is undergoing Medically Necessary Hospitalisation due to an Injury or Illness that occurred during the Policy Period. We will not make payment under this Benefit in respect of an Insured Person for more than 30 days in any Policy Year.
    Accompanying person means and includes mother, father, grandfather, grandmother and any immediate Family member. This benefit is over and above the Hospitalisation sum insured.

13. **Organ Donor Expenses – We** will pay the Reasonable and Customary Charges incurred for an organ donor's treatment for the harvesting of the organ donated provided that:
    a. The organ donor is any person whose organ has been made available in accordance and in compliance with THE TRANSPLANTATION OF HUMAN ORGANS (AMENDMENT) BILL, 2011 and the organ donated is for the use of the Insured Person, and
    b. We will not pay the donor's screening expenses or pre and post hospitalisation expenses or for any other medical treatment for the donor consequent on the harvesting
    c. We have accepted claim under hospitalisation for the Insured Person and the Insured Person has been Medically Advised to undergo an organ transplant.
    d. Costs directly or indirectly associated with the acquisition of the donor's organ will not be covered.
    e. These expenses shall be covered under the recipient's policy.

14. Recharge of Sum Insured

Recharge benefit is applicable for all plans, where the basic Sum Insured opted is 3 Lakhs and above. If the Basic Sum Insured and Cumulative Bonus (if any) is exhausted due to claims made and paid during the Policy Year, then We are in agreement to automatically re-instate the Sum Insured up to 100%, once in a policy year which is valid for that Policy Year only, subject to conditions specified below:

a. A claim will be admissible under this Benefit only if the claim is admissible under In-patient Hospitalization or Day Care Treatment.
b. The recharge shall be utilised only after the Sum Insured, Cumulative Bonus has been completely exhausted in that Policy Year.
c. The recharge shall be available only for all future claims for that Insured Person during that Policy Year. (Irrespective of whether the claim is for the same ailment for which he/she has claimed).
d. Cumulative Bonus shall not be considered while calculating the Recharge.
e. Any unutilized recharge cannot be carried forward to any subsequent Policy Year.
f. If the Policy is issued on Individual basis, then the recharge will be available to each insured person and can be utilised by Insured Persons who stand covered under the Policy before the Sum Insured was exhausted.
g. If the Policy is issued on Floater basis, then the recharged sum insured will be available on Floater basis for all Insured Persons in the family.
h. The waiting periods, the standard exclusions and the standard limits shall be applicable for the recharged sum insured.

IV. Exclusions

1. Waiting Periods

All Illnesses and treatments shall be covered subject to the waiting periods specified below:

a) Pre-Existing Disease- Excl 01

i. Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 36 months of continuous coverage after the date of inception of the first policy with us.
ii. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
iii. If the Insured Person is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations then waiting period for the same would be reduced to the extent of prior coverage.
iv. Coverage under the policy after the expiry of 36 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by us.

b) Specified disease/procedure waiting period- Code- Excl02

i. Expenses related to the treatment of the listed Conditions, surgeries/treatments shall be excluded until the expiry of 12/ 24/ 36 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.
ii. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
iii. 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.
iv. The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.
v. 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.
vi. List of specific diseases/procedures:

i. Waiting period of 36 months:

a. Organ transplant
b. Joint replacement Surgery due to Degenerative condition

c. Age related Osteoarthritis and Osteoporosis unless such joint replacement Surgery is necessitated by accidental Bodily Injury

ii. Waiting period of 24 months:

a. Cataracts
b. Benign Prostatic Hypertrophy
c. Hernia of all types, Hydrocele
d. Para nasal sinuses
e. Deviated Nasal Septum, Fistulae
f. Hemorrhoids
g. Fissure in ano, Dysfunctional Uterine Bleeding
h. Fibromyoma
i. Endometriosis
j. Hysterectomy
k. All internal or external tumors/ cysts/ nodules/ polyps of any kind including breast lumps with exception of malignant tumor or growth
l. Surgery for prolapsed inter vertebral disc unless arising from Accident.
m. Surgery of Varicose Veins, Varicose Ulcers
n. Congenital Internal Illness/ disease/ defect anomaly.

iii. Waiting period of 12 months:

a. Any types of gastric or duodenal Ulcers
b. Stones in the Urinary and Biliary systems
c. Surgery on ears/ tonsils/ adenoids.

iv. 30 days waiting period 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.

2. Standard Exclusions

We will not pay for any expenses incurred by You in respect of claims arising out of or howsoever related to any of the following:

a) Investigation & Evaluation- Code- Excl04

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

b) Rest Cure, rehabilitation and respite care- Code- Excl05

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 medical, physical, social, emotional and spiritual needs.

c) Obesity/ Weight Control: Code- Excl06

Expenses related to the surgical treatment of obesity that does not fulfil all the below conditions:

1) Surgery to be conducted is upon the advice of the Doctor
2) The surgery/Procedure conducted should be supported by clinical protocols

3) The member has to be 18 years of age or older and
4) Body Mass Index (BMI);
   a) greater than or equal to 40 or
   b) 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:
      i. Obesity-related cardiomyopathy
      ii. Coronary heart disease
      iii. Severe Sleep Apnea
      iv. Uncontrolled Type2 Diabetes

d) Change-of-Gender treatments: Code- Excl07
Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.

e) Cosmetic or Plastic Surgery: Code- Excl08
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 medically necessity, it must be certified by the attending Medical Practitioner.

f) 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 scuba diving, motor racing, parachuting, hang gliding, rock or mountain climbing etc. unless specifically agreed by the Insurance Company.

g) Breach of law: Code- Excl10
Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.

h) Excluded Providers: Code- Excl11
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.

i) Code- Excl12
Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof.

j) Code- Excl13
Treatments received in heath hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or a Hospital where the Hospital has effectively become the Insured Person's home or permanent abode or where admission is arranged wholly or partly for domestic reasons.

k) Code- Excl14
Dietary supplements and substances which are available naturally and 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 hospitalisation claim or day care procedures.

l) Refractive Error: Code- Excl15
Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres.

m) Unproven Treatments: **Code- Excl16**
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.

n) Birth control, Sterility and Infertility: Code- Excl17
Expenses related to Birth Control, sterility and infertility. This includes:
(i) Any type of contraception, sterilization
(ii) Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
(iii) Gestational Surrogacy
(iv) Reversal of sterilization

o) Maternity: Code Excl 18
i. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean section incurred during hospitalization) except ectopic pregnancy;
ii. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during policy period.

3. Specific exclusion: -
We will not pay for any expenses incurred by You in respect of claims arising out of or howsoever related to any of the following:

p) Circumcision unless necessary for treatment of a disease not excluded hereunder or as may be necessitated due to an Accident.
q) Vaccination/ inoculation (except as post bite treatment).
r) Charges incurred in connection with cost of spectacles and contact lenses, hearing aids, durable medical equipment (including but not limited to cost of instrument used in the treatment of Sleep Apnea Syndrome (C.P.A.P), Continuous Peritoneal Ambulatory Dialysis (C.P.A.D) and Oxygen concentrator for Asthmatic condition, wheel chair, crutches, artificial limbs, belts, braces, stocking, Glucometer), namely that equipment used externally for the human body which can withstand repeated use; is not designed to be disposable; is used to serve a medical purpose, such cost of all appliances/devices whether for diagnosis or treatment after discharge from the Hospital.
s) Dental treatment or Surgery of any kind unless requiring Hospitalisation as a result of accidental Bodily Injury.
t) Venereal /Sexually Transmitted disease other than HIV/AIDS, intentional self-Injury.
u) Congenital External Illness/ disease/ defect anomaly.
v) [3]Costs incurred on all methods of treatment except AYUSH and Allopathic treatments.
w) Stem cell storage.
x) Expenses related to donor screening, treatment, excluding Surgery to remove organs from the donor in case of a transplant Surgery. We will also not pay donor's pre and post Hospitalisation expenses or any other medical treatment for the donor consequent to Surgery.
y) Outpatient Diagnostic, Medical and Surgical Procedures or OPD treatments, non-prescribed drugs and medical supplies, Hormone replacement therapy.
z) Doctor's home visit charges during pre and post Hospitalisation period, Attendant Nursing charges unless more than 60 years as specified in the Patient Care benefit Section III. (9).
aa) Domiciliary hospitalization/treatment
bb) Treatment outside India.
cc) Injury or Disease directly or indirectly caused by or arising from or attributable to War, Invasion, Act of Foreign Enemy, War like operations (whether war be declared or not).
dd) Injury or Disease directly or indirectly caused by or contributed to by nuclear weapons/ materials.
ee) Personal comfort and convenience items or services such as television, telephone, barber or guest service and similar incidental services and supplies.
ff) Standard list of excluded items as mentioned in Annexure 1 and on our website https://generalicentralinsurance.com
gg) Any specific exclusion(s) applied by Us, specified in the Schedule and accepted by the insured.

[3] **Modified the wording to cover AYUSH treatment into the scope of the Product**

V. Eligibility

Age limit

- Age at entry is restricted to 70 years.
- Children above age of 90 days are eligible if the parent(s) are concurrently insured with Generali Central Insurance Company Limited.
- Children will be covered as dependents up to the age of 25 years.

Minimum Policy Term	1 year
Maximum Policy Term	3 Year
Minimum Age at entry	90 Days
Maximum Age at entry	70 Years
Renewal	Lifelong

VI. Sum Insured

1. The minimum sum insured that can be offered is ₹ 50,000/-
2. The maximum sum insured that is available is up to ₹ 10 lacs

Sums Insured Available in the product are as below:

	Plans Options						
	Gold Plan			**Platinum Plan**	**Topaz Plan**		**Ruby Plan**
Sum Insured options (in ₹)	50,000*, 1 L*, 1.5 L*	2 L, 2.5 L	3 L, 3.5 L, 4 L, 4.5 L, 5L	6 L, 7.5 L, 8 L, 9 L, 10 L	1 L*	2L, 3 L, 4 L, 5 L	6 L, 7.5 L, 10 L
Sum Insured basis – Individual or Family Floater	Individual	Both – Individual and Family Floater			Individual	Both – Individual and Family Floater	
* Note – Sum insured of ₹ 50000, 100000, 150000 will be applicable only for Children up to age of 25 years.							

VII. General Terms and Clauses

I. Standard General Terms and Clauses

1. Disclosure to information norm:

The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis description or non-disclosure of any material fact by the policyholder.
(Explanation: "Material facts" for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk)

2. 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

3. Portability

The insured person will have the option to port the policy to other insurers at the time of renewal 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 due date for renewal as per IRDAI guidelines related to portability.
If the Policyholder (including all members under family cover) is presently covered and has been continuously covered without any lapses under the health insurance policy with existing Indian General/Health Insurer, then the credit 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, shall be transferred from the existing Insurer to Our Company.

4. Migration

The Policyholder shall have the option to migrate the policy to other health insurance products/plans offered by the Company by applying for migration of the policy, preferably 30 days before the policy renewal date.

If the Policyholder (including all members under family cover and group insurance policies) is presently covered and has been continuously covered without any lapses under the previous health insurance policy, then the credit 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, shall be transferred to the migrated Policy.

5. 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 insured person shall be allowed free look period of thirty days from date of receipt of the policy document to review the terms and conditions of the policy, and to return the same if not acceptable.

If the insured has not made any claim during the Free Look Period, the insured shall be entitled to

i. a refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges or
ii. where the risk has already commenced and the option of return of the policy is exercised by the insured person, a deduction towards the proportionate risk premium for period of cover or
iii. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period;

6. Multiple Policies

i. In case of multiple policies taken by an insured person during a period from one or more insurers to indemnify treatment costs, the insured person shall have the right to require a settlement of his/her claim in terms of any of his/her policies. In all such cases the insurer chosen by the insured person shall be obliged to settle the claim as long as the claim is within the limits of and according to the terms of the chosen policy.
ii. Insured person having multiple policies shall also have the right to prefer claims under this policy for the amounts disallowed under any other policy / policies even if the sum insured is not exhausted. Then the insurer shall independently settle the claim subject to the terms and conditions of this policy.
iii. If the amount to be claimed exceeds the sum insured under a single policy, the insured person shall have the right to choose insurer from whom he/she wants to claim the balance amount.
iv. Where an insured person has policies from more than one insurer to cover the same risk on indemnity basis, the insured person shall only be indemnified the treatment costs in accordance with the terms and conditions of the chosen policy.
v. This section is not applicable to the Hospital Cash benefit payable in case of Platinum Plan and Ruby Plan.

7. Fraud

If any claim made by the insured person, is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the insured person or anyone acting on his/her behalf to obtain any benefit under this policy, all benefits under this policy and the premium paid shall be forfeited.

Any amount already paid against claims made under this policy but which are found fraudulent later shall be repaid by all recipient(s)/ policyholder(s), who has made that particular claim, who shall be jointly and severally liable for such repayment to the insurer.

For the purpose of this clause, the expression "fraud" means any of the following acts committed by the insured person or by his agent or the hospital/doctor/any other party acting on behalf of the insured person, with intent to deceive the insurer or to induce the insurer to issue an insurance policy:

a. the suggestion, as a fact of that which is not true and which the insured person does not believe to be true;

b. the active concealment of a fact by the insured person having knowledge or belief of the fact;
c. any other act fitted to deceive; and
d. any such act or omission as the law specially declares to be fraudulent

The Company shall not repudiate the claim and / or forfeit the policy benefits on the ground of Fraud, if the insured person / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such misstatement of or suppression of material fact are within the knowledge of the insurer.

8. Nomination

The policyholder is required at the inception of the policy to make a nomination for the purpose of payment of claims under the policy in the event of death of the policyholder. Any change of nomination shall be communicated to the company in writing and such change shall be effective only when an endorsement on the policy is made. In the event of death of the policyholder, the Company will pay the nominee {as named in the Policy Schedule/Policy Certificate/Endorsement (if any)} and in case there is no subsisting nominee, to the legal heirs or legal representatives of the policyholder whose discharge shall be treated as full and final discharge of its liability under the policy.

9. 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.

10. Complete Discharge

Any payment to the policyholder, insured person or his/ her nominees or his/ her legal representative or assignee or to the Hospital, as the case may be, for any benefit under the policy shall be a valid discharge towards payment of claim by the Company to the extent of that amount for the particular claim.

11. Redressal of Grievance

In case of any grievance the insured person may contact the company through
Website: https://generalicentralinsurance.com
Toll Free: 1800-220-233 / 1860-500-3333 / 022-67837800
Email: GCIcare@generalicentral.com

Courier: Grievance Redressal Cell, Generali Central Insurance Company Limited.
Unit No. 301, 3rd Floor Part, Building No. 8, Mindspace IT/ITES SEZ, MIDC Industrial Area, Airavali, Navi Mumbai, Thane District – 400 708

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 GCIGRO@generalicentral.com or call at: 7900197777

For updated details of grievance officer, kindly refer the link generalicentralinsurance.com/customer-service/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.

Grievance may also be lodged at IRDAI Bima Bharosa (an Integrated Grievance Management

System) - https://bimabharosa.irdai.gov.in/

12. Withdrawal of Policy

i. In the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the policy.

ii. Insured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period as per IRDAI guidelines, provided the policy has been maintained without a break

13. Possibility of Revision of Terms of the Policy including the Premium Rates

- The Company, with prior approval of IRDAI, may revise or modify the terms of the policy including the premium rates. The insured person shall be notified three months before the changes are effected.
- The premiums as shown in the brochure/ prospectus are subject to revision as and when approved by the IRDAI. However such revised premiums would be applicable only from subsequent Renewals and with due notice whenever implemented.

II. Specific General Terms and Clauses

1. Condition Precedent to the contract

(i) Zone wise Premium payment

a) Premium will be calculated based on the Sum Insured opted, Age and Zone.

b) Default Zone of Cover will be based on location of Your residence.

c) All Premiums are age based and will vary as per the change in age group.

d) Zone Classification:

Zone Classification	Areas covered
Zone 1	Mumbai, Navi Mumbai, Thane, Panvel, Pune, Delhi & NCR, Surat, Vadodara, Ahmedabad, Anand, Gandhinagar, Indore, and Bangalore.,
Zone 2	Kolkata, Chennai, Hyderabad, Trivandrum, Cochin, Rest of Gujarat.
Zone 3	Rest of India

*Please note the Cities/Towns that fall under respective Zones shall be identified as per the updated/ latest Jurisdiction defined by Government.

e) Zonal Co-payment-
If the treatment is in higher zone than the policyholder's selected zone (for which policy holder has paid the premium), co-payment will be applicable as per below:
If you select Zone 1, then no co-payment will apply for treatment in Zone 1, Zone 2, or Zone 3.
If You select Zone 2, then 10% Co-payment will apply for treatment in Zone 1.
If You select Zone 3, then 20% Co-payment will apply for treatment in Zone 1 and Zone 2.

2. Conditions applicable during the contract

I. Due Care

Where this Policy requires You to do or not to do something, then the complete satisfaction of that requirement by You or someone claiming on Your behalf is a precondition to any obligation under this Policy. If You or someone claiming on Your behalf fails to completely satisfy that requirement, then We may refuse to consider Your claim. You will cooperate with Us at all times.

II. Insured

Only those persons named, as the Insured in the Schedule shall be covered under this Policy. The details of the Insured are as provided by You. A person may be added as an insured during the Policy Period after his application has been accepted by Us, an additional premium has been paid and Our agreement to extend cover has been indicated by it issuing an endorsement confirming the addition

of such person as an Insured.

III. Cost of pre-insurance medical examination

We will reimburse 100% of the cost of any pre-insurance medical examination conducted at our empanelled diagnostic center, once the Proposal is accepted and the Policy is issued for that Insured Person.

IV. Communications

a) Any communications, notifications or declarations meant for Us must be in writing and delivered to Our address specified in the Schedule.
b) Any communication meant for You will be sent by Us to Your address shown in the Schedule. You must notify Us immediately of any change in Your address.
c) Our agents are not authorized to receive communications, notices or declarations on Our behalf.

V. Cancellation

a) The policyholder may cancel this policy by giving 7 days written notice.
b) In case the Policyholder requests for cancellation of the Policy, where no claims are reported under the Policy, the Company shall refund premium for the unexpired policy/ instalment period as detailed below:
   i. **Single Premium Payment (1/2/3 years Policy Term)** – There shall be refund of proportionate premium for the unexpired policy period on prorate basis.
   ii. **Premium paid in multiple instalments (1/2/3 years Policy Term)** - There shall be refund of proportionate premium for the unexpired instalment period on prorate basis.
c) In case the Policyholder requests for cancellation of the Policy, where there are claims reported under the Policy, then the Company shall refund premium for the unexpired/ instalment policy period as detailed below:
   i. **Single Premium Payment**
      1) 1 year Policy Term - There shall be no refund of premium for the unexpired policy period.
      2) 2/3 years Policy Term – There shall be no refund of premium for the current Policy Year in which the claim got reported. However, the premium for the unutilized subsequent Policy Years (if any), shall be refunded.
   ii. **Premium paid in multiple instalments** –
      1) 1/2/3 years Policy Term - There shall be no refund of premium for the unexpired instalment period.
d) The Company may cancel the policy at any time on grounds of misrepresentation, non-disclosure of material facts, fraud or non-cooperation by the insured person by giving 15 days' written notice. There would be no refund of premium upon cancellation on the abovementioned grounds.
e) In the event of death of an Insured Person, We shall refund the premium for the unutilized Policy / Instalment period based on the guidelines for various scenarios as mentioned below:

Scenario 1 – In case of no claim reported under the policy-

A. Policy Term – 1 / 2 / 3 Years; Payment Mode – Single Premium Payment
   1) Non-Floater Policy - the corresponding premium pertaining to the deceased insured person for the unutilized Policy period shall be refunded on pro rata basis.
   2) Floater policy - the premium for pertaining to the deceased Insured person for the unutilized Policy Period shall be refunded on pro rata basis.

B. Policy Term – 1/ 2 / 3 Years; Payment Mode – Multiple Instalments
   1) Floater / Non-Floater Policy - the instalment premium pertaining to the deceased Insured Person for the unutilized instalment period shall be refunded on pro-rata basis.

Scenario 2 – In case of claim reported under the policy –

A. Policy Term – 1 Year; Payment Mode – Single Premium Payment
   1) Non-Floater Policy
      i. Claims incurred by the deceased Insured Person in the current Policy Year, The premium pertaining to the deceased Insured Person for the unutilized

current Policy Year shall not be refunded.

ii. Claims incurred by any other Insured Person, but no claims incurred by deceased Insured Person in the current Policy Year- The premium pertaining to the deceased shall be refunded on pro-rata basis.

2) Floater Policy - Claims incurred by the deceased Insured Person or any other Insured Person in the current Policy Year, The premium for the deceased Insured Person for the unutilized Policy Period, will not be refunded.

B. Policy Term – 2 / 3 Years; Payment Mode – Single Premium Payment

1) Non-Floater Policy

i. Claims incurred by the deceased Insured Person in the current Policy Year –The premium pertaining to the deceased Insured Person for the unutilized current Policy Year shall not be refunded. However, premium pertaining to the deceased Insured Person for the unutilized subsequent Policy Years (if any), shall be refunded.

ii. Claims incurred by any other Insured Person, but no claims incurred by deceased Insured Person in the current Policy Year- The premium pertaining to the deceased Insured Person for the unutilized Policy Period, shall be refunded on pro-rata basis.

2) Floater Policy - Claims incurred by the deceased Insured Person or any other Insured Person in the current Policy Year – The premium for the deceased Insured Person for the unutilized current Policy Year, will not be refunded. Premium pertaining to the deceased Insured Person for the unutilized subsequent Policy Years (if any), shall be refunded.

C. Policy Term – 1 / 2 / 3 Years; Payment Mode – Multiple Instalments

1) Non-Floater Policy

i. Claims incurred by the deceased Insured Person in the current Instalment Period, the instalment premium pertaining to the deceased Insured Person for the unutilized current instalment period shall not be refunded.

ii. Claims incurred by any other Insured Person, but no claims incurred by deceased Insured Person in the current Instalment Period –The premium pertaining to the deceased Insured Person for the unutilized instalment Period, shall be refunded on pro-rata basis.

2) Floater Policy - Claims incurred by the deceased Insured Person or any other Insured Person in the current Instalment Period, the instalment premium pertaining to the deceased Insured Person for the unutilized current instalment period shall not be refunded.

VI. Policy Period

The Policy can be issued for tenure of 1 year, 2 years and 3 years.

VII. Territorial Limits and Law

a) We cover Accidental Bodily Injury or sickness sustained by the Insured Person during the Policy Period anywhere in India.

b) All medical/ surgical treatments including investigations under this policy shall have to be taken in India and admissible claims thereof shall be payable in Indian currency (Indian Rupees).

c) The construction, interpretation and meaning of the provisions of this Policy shall be determined in accordance with Indian Law.

d) The Policy constitutes the complete contract of insurance. No change or alteration shall be valid or effective unless approved in writing by Us, which approval shall be evidenced by an endorsement on the Schedule.

VIII. Special Conditions applicable for Policies issued with Premium Payment on Instalment Basis.

If the insured person has opted for Payment of Premium on an instalment basis i.e. Half Yearly, 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. Grace Period of 15 days would be given to pay in case of monthly instalment premium and 30 days in rest installment premium due for the policy.
ii. The insured person will get the accrued continuity benefit in respect of the "Waiting Periods", "Specific Waiting Periods" in the event of payment of premium within the stipulated grace Period.
iii. No interest will be charged If the instalment premium is not paid on due date
iv. In case of instalment premium due not received within the grace period, the policy will get cancelled.
v. In the event of a claim, all subsequent premium instalments shall immediately become due and payable.
vi. The company has the right to recover and deduct all the pending instalments from the claim amount due under the policy.
vii. The payment will be accepted through E-NACH / ACH/ ECS / any other mode approved by Government of India.
viii. On successful registration for the mandate/ E-NACH/ any other mode approved by Government of India, the premium shall be auto debited as per the frequency opted.
ix. In case of withdrawal of E-NACH/ ACH/ ECS / any other mode approved by Government of India, a written communication will be required from policyholder.
x. In case there is failure in transaction in E-NACH/ ACH/ ECS mode/ any other mode approved by Government of India or the instalment premiums are not received within the grace period, the Policy will get cancelled. A fresh policy with all waiting periods would be issued.
xi. If the claim amount is lesser than the balance premium payable, then no claims would be payable till the applicable premium is recovered.
xii. Given below are the loadings applicable on Standard premiums in case of installments

Instalment frequency	**Loading on standard premiums**
Monthly	5%
Quarterly	4%
Half-yearly	3%

IX. [4]AYUSH Coverage:

Expenses incurred on hospitalization due to accident and illnesses, under AYUSH systems of medicine shall be covered. However, all preventive and rejuvenation treatments which are non-curative in nature shall not be covered.

3. Conditions when a claim arises

A. Claims Procedure

If You meet with any accidental Bodily Injury or suffer an Illness that may result in a claim, then as a condition precedent to Our liability, You must comply with the following:

a) Cashless treatment is only available at a Network Provider. In order to avail cashless treatment, the following procedure must be followed by You:
   (i) For availing cashless at a Network Provider, We must be called at Our call centre and a request for pre-authorisation must be made by way of the written form prescribed by Us.
   (ii) After considering the request and obtaining any further information or documentation that We have sought, We may, if satisfied, send the Network Provider an authorisation letter. The authorisation letter, the ID card issued to You along with this Policy and any other information or documentation that We have specified must be produced to the Network Provider identified in the pre-authorisation letter at the time of the Insured Person's admission to the Hospital.
   (iii) If the above procedure is followed, You will not be required to directly pay for those Medical Expenses to the Network Provider that We are liable to indemnify under this Policy. The original bills and evidence of treatment in respect of the same shall be left with the Network Provider. Pre-authorisation does not guarantee that all costs and expenses that are incurred will be covered. We reserve the right to review each claim for Medical Expenses incurred and accordingly coverage will be determined according to the terms, conditions and exclusions of

[4] Clause number IX newly inserted to cover AYUSH treatments at par with Allopathic Treatments, wherever applicable, in the product to provide an option for the Insured Persons to choose treatment of their choice

this Policy. All other costs and expenses that are not covered under this Policy must be settled directly with the Network Provider and We shall have no liability in this regard.

b) If pre-authorisation as above is denied by Us or if treatment is taken in a Hospital which is Non-Network or if You do not wish to avail cashless facility, then:
   (i) We must be given Notification of Claim in writing immediately and in any event within 48 hours of the commencement of the Illness or Injury. You must immediately consult a Medical Practitioner and follow the advice and treatment that he/she recommends. You must take reasonable steps or measures in good faith to minimise the quantum of any claim that may be made under this Policy.
   (ii) You must have Yourself examined by Our medical advisors if We ask, the cost for which will be borne by Us.
   (iii) You or someone claiming on Your behalf must promptly and in any event within 15 days of discharge from a Hospital give Us the necessary documents, including written details of the quantum of any claim along with all original supporting documentation, including but not limited to the following, and other information We ask for, to investigate the claim for Our obligation to make payment for it:
      a. The claim form specified by Us duly completed and signed by the claimant or a family member;
      b. first consultation letter;
      c. first prescription from the Medical Practitioner;
      d. original vouchers;
      e. original Hospital bills giving a detailed break up of all expense heads mentioned in the bill;
      f. Money receipt duly signed with a revenue stamp;
      g. birth/death certificate (as applicable);
      h. the original Hospital discharge card;
      i. all original laboratory and diagnostic test Reports such as X-Ray, E.C.G, USG, MRI Scan, Haemogram etc;
      j. If medicines have been purchased in cash and if this has not been reflected in the Hospital bill, please enclose a prescription from the Medical Practitioner and the supporting medicine bill from the chemist;
      k. If diagnostic or radiology tests have been paid for in cash and it has not been reflected in the Hospital bill, please enclose a prescription from the Medical Practitioner advising the tests, the actual test reports and the bill from the diagnostic centre for the tests.
   (iv) In the event of Your/Insured Person's death, You/Insured Person's nominee/legal heir claiming on his/her behalf must inform Us in writing immediately and send Us a copy of the postmortem report (if any) within 14 days.
   (v) The periods for intimation as stipulated under Section VII. II. 3. A. b (i), or submission of any documents as stipulated under Section VII. II. 3 A. b (iii) and Section VII. II. 3. A. b (iv) will be waived in case of any hardships being faced by the insured or his representative which is supported by some documentation.

c) Claim Settlement
   i. The Company shall settle or reject a claim, as the case may be, within 15 days from the date of receipt of last necessary document.
   ii. In the case of delay in the payment of a claim, the Company shall be liable to pay interest to the policyholder from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate.
   iii. However, where the circumstances of a claim warrant an investigation in the opinion of the Company, it shall initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document- In such cases, the Company shall settle or reject the claim within 45 days from the date of receipt of last necessary document.
   iv. In case of delay beyond stipulated 45 days, the Company shall be liable to pay interest to the policyholder at a rate 2% above the bank rate from the date of receipt of last necessary document to the date of payment of claim.
   (Explanation: "Bank rate" shall mean the rate fixed by the Reserve Bank of India (RBI) at the

beginning of the financial year in which claim has fallen due)

v. Our Claims team will scrutinize the claims on the receipt of the last necessary documents specified in Section VII. II. 3 A. b (iii) above.
vi. In case of 'pending' claims, We will ask for submission of incomplete documents.
vii. 'Rejected' claims will be informed to the Insured Person in writing with reason for rejection.

B. Basis of claims payment

a) Claims related to Any One Illness

All claims relating to Any One Illness shall be deemed to be part of the same original claim.

b) Claims for Day Care Treatment

The Day Care Treatments listed are subject to the exclusions, terms and conditions of the Policy and will not be treated as independent coverage under the Policy.

c) Claims related to Surgery for cataracts

For Gold and Platinum plans, Our obligation to make payment in respect of Surgery for cataracts (after the expiry of the 2-year period referred to in Exclusion IV. 1 b) iii. above, shall be restricted to 10% of the Sum Insured for each eye, subject to a minimum of Rs 15000 (or the actual incurred amount whichever is lower) and maximum of Rs 50,000/- per eye. This will be Our maximum liability irrespective of the number of Health Suraksha policies You hold.

For Topaz and Ruby plans, Our obligation to make payment in respect of Surgery for cataracts (after the expiry of the 2 year period referred to in Exclusion IV.1 b) iii. above, shall be restricted to the sub-limits table, mentioned in Annexure 4 (Sub-limits table).

d) Disease wise sub-limits applicable under the policy

For Topaz and Ruby Plans, Sub limits will be applicable for listed diseases as mentioned in Annexure 4 (Sub-limits table).

e) Mandatory Sub limits for Modern Treatment Methods and Advancement in Technologies

The Medical Expenses incurred for the below listed treatments or procedures, as inpatient or as day care treatment (inclusive of pre and post hospitalization), is restricted to 50% of the sum insured opted and Cumulative Bonus (if any), per policy period. These Sub limits are applicable for all Plans under the product.

i. Uterine Artery Embolization and HIFU
ii. Balloon Sinuplasty
iii. Deep Brain stimulation
iv. Oral chemotherapy
v. Immunotherapy- Monoclonal Antibody to be given as injection
vi. Intra vitreal injections
vii. Robotic surgeries
viii. Stereotactic radio surgeries
ix. Bronchical Thermoplasty
x. Vaporisation of the prostrate (Green laser treatment or holmium laser treatment)
xi. IONM - (Intra Operative Neuro Monitoring)
xii. Stem cell therapy: Hematopoietic stem cells for bone marrow transplant for haematological conditions to be covered.

C. Policy Currency

We shall make payment in Indian Rupees only.

D. Dispute Resolution

Any and all disputes or differences under or in relation to this Policy shall be subject to the exclusive jurisdiction of the Indian Courts and subject to Indian law.

4. Conditions for renewal of the contract

(i) Renewal

The policy shall ordinarily be renewable except on grounds of fraud, misrepresentation by the insured person.

i. The Company shall endeavor to give notice for renewal. However, the Company is not under obligation to give any notice for renewal.
ii. Renewal shall not be denied on the ground that the insured person had made a claim or claims in the preceding policy years.
iii. Request for renewal along with requisite premium shall be received by the Company before the end of the policy period.
iv. At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without break in policy. Coverage is not available during the grace period.
v. No loading shall apply on renewals based on individual claims experience
vi. Health Suraksha Policy shall be renewable lifelong
vii. In case of a Renewal within Grace Period of 30 days Policy will be considered as continuous for the purpose of all waiting periods and Health Check-up benefit.
viii. For Renewal Proposal received after completion of Grace Period of 30 days, all waiting periods would apply afresh.
ix. The brochure/ prospectus mentions the premiums as per the age slabs/ Sum Insured and the same would be charged as per the completed age at every Renewal.
x. If any Dependent Child has completed 25 years at the time of Renewal, then such person can be covered under a separate policy. The Cumulative Bonus will be passed on to the separate policy taken by such person
xi. No increase/ decrease in Sum Insured during the currency of the Policy. However increase/decrease in Sum Insured or change in cover, will be allowed at the time of Renewal of the Policy. You can submit a request for the changes by filling the Proposal before the expiry of the Policy
xii. In case of enhancement of sum insured the waiting period shall apply afresh to the extent of sum insured increase.

(ii) Cumulative Bonus

a) We will provide cumulative bonus for every claim free year. We shall increase in the Sum Insured by 10% towards Cumulative Bonus for every claim free year on the basic Sum Insured up to the maximum of 50% of the sum insured.
b) In case of a claim in the Policy, the Cumulative Bonus will get reduced by 10% for each claim year. Increase/ Reduction in cumulative bonus will depend on the claims in the previous year, but the base Sum Insured (excluding cumulative bonus amount if any) of the Policy issued by Us shall be preserved.
c) In case You have opted for the 'Family Floater' option as specified in the Schedule, the Cumulative Bonus so applied will only be available to those Insured Persons who were Insured Persons in the claim free Policy Year and continue to be Insured Persons in the subsequent Policy Year.
d) The Cumulative Bonus is provisional and is subject to revision if a claim is made in respect of the expiring Policy Year, which is notified after the acceptance of Renewal premium, such awarded Cumulative Bonus shall be withdrawn.

VIII. Mandatory Disclosures

a) Your Health Suraksha Policy shall be renewable lifelong if renewed continuously without any break in insurance.
b) The brochure/ prospectus mentions the premium rates as per the age slabs/ Sum Insured.
   i. For individual plan Insured would be charged as per the completed age at every renewal.
   ii. For Family floater plan premium would applicable as per the completed age of the eldest member in the family at every renewal.
c) The premiums as shown in the prospectus/ brochure are subject to revision as and when approved by the regulator. However such revised premiums would be applicable only from subsequent Renewals and with due notice whenever implemented.
d) Renewals will not be refused or cancellation will not be invoked by US except on ground of fraud, moral hazard, misrepresentation or non-cooperation by the insured. If You prefer to cancel the Policy the cancellation will be on short period basis.

e) There will be no loading on premium for adverse claims experience.
f) Medical loading on premium will be applicable on basis of findings in pre-insurance medical examination.
g) **Family discount** of 10% is applicable in case more than one family member is covered on individual sum insured basis in the same policy, except for the policy with coverage for one adult with one or more children, the family discount shall be on basis of age of the Adult as per below table. The family discount will not be applicable in case of only single person being covered at Renewal.

Family Discount (Individual policies)	
Age Bands	**Discount**
<=65	10.0%
66-70	7.5%
71-75	5.0%
76 & above	4.0%

h) **Long-term discount** will be applicable as mentioned below, in case of single premium payment for policy term of more than one year.

Number of years	Discount
1 year	Nil
2 years	5%
3 years	10%

i) **Loyalty discount**
   i. Loyalty discount of 2.5% is applicable if the client already has a separate Retail Health insurance policy (other than Health Suraksha/ Personal Accident/ Travel) from Generali Central Insurance Company Limited
   ii. The loyalty discount shall continue only if the insured maintains the separate health insurance policy with Us.
j) **Web sales/Tele Sales Discount:** A discount of 15% in lieu of intermediary commissions if policy is sourced directly from the Company's website or through leads generated via Tele sales channel.
k) **Employee discount**: We shall accord a discount of 15%, on the premium amount, against proposals received from the following categories of individuals, provided that the respective individual, at least till the date of issuance of the policy cover, continues to be in/of such capacity:
   a. Employed with Generali Central Insurance Company Limited recorded through its official rolls/register
   b. Employed with Generali Central Life Insurance Co. Ltd., recorded through its official rolls/register
   c. Contracted for provision of services directly by Generali Central Insurance Company Limited., recorded through appointment/engagement letter or like document
   d. Contracted for provision of services directly by Generali Central Life Insurance Co. Ltd., recorded through appointment/engagement letter or like document

   Towards entitlement of the discount, each eligible proposer shall have to submit with Generali Central Insurance Company Limited., alongside the proposal, a self-certified copy of the identification card or appointment/engagement letter or such document that may have been issued in favour of the proposer to evidence the relationship, which bears an identification mark/logo of the issuing entity.

   Note: Either Web sales/Tele Sales Discount or Employee discount would apply in a single policy.
l) No increase/ decrease in Sum Insured during the currency of the Policy. However increase/decrease in Sum Insured or change in cover, addition/deletion of Insured Persons, etc. will be allowed at the time of Renewal of the Policy. You can submit a request for the changes by filling the proposal form before the expiry of the Policy.
m) Detailed exclusions are given under Section IV of the Prospectus.

IX. Payment of Premium

a) As per table annexed

X. This prospectus shall form part of your proposal form, hence please sign as you have noted the contents of this prospectus

"I agree to undergo medical tests as advised by the Insurance Company. I agree to a medical underwriting loading as per underwriting guidelines of the Company."

Signature	Place
Name	Date

In case of any claims please contact:
Claims Department
Generali Central Health (GCH)
Generali Central Insurance Company Limited.
Qubix Business Park, Building No. Block IT – 1, Ground Floor, Plot No. 2,
Blueridge Township, Near Rajiv Gandhi Infotech Park, Phase – 1,
Village Hinjawadi, Taluka Mulshi, Pune, Maharashtra - 411057.
Toll Free Number: 1800 103 8889
Toll Free Fax: 1800 103 9998
Email: GCH@generalicentral.com

Annexure 1

List I – Items for which coverage is not available in the Policy

Sl No.	Item
1.	BABY FOOD
2.	BABY UTILITES CHARGES
3.	BEAUTY SERVICES
4.	BELTS/ BRACES
5.	BUDS
6.	COLD PACK/HOT PACK
7.	CARRY BAGS
8.	EMAIL / INTERNET CHARGES
9.	FOOD CHARGES (OTHER THAN PATIENT's DIET PROVIDED BY HOSPITAL)
10.	LEGGINGS
11.	LAUNDRY CHARGES
12.	MINERAL WATER
13.	SANITARY PAD
14.	TELEPHONE CHARGES
15.	GUEST SERVICES
16.	CREPE BANDAGE
17.	DIAPER OF ANY TYPE
18.	EYELET COLLAR
19.	SLINGS
20.	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES
21.	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED
22.	TELEVISION CHARGES
23.	SURCHARGES
24.	ATTENDANT CHARGES
25.	EXTRA DIET OF PATIENT (OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)
26.	BIRTH CERTIFICATE
27.	CERTIFICATE CHARGES
28.	COURIER CHARGES
29.	CONVENYANCE CHARGES
30.	MEDICAL CERTIFICATE
31.	MEDICAL RECORDS
32.	PHOTOCOPIES CHARGES
33.	MORTUARY CHARGES
34.	WALKING AIDS CHARGES
35.	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)
36.	SPACER
37.	SPIROMETRE
38.	NEBULIZER KIT
39.	STEAM INHALER
40.	ARMSLING
41.	THERMOMETER
42.	CERVICAL COLLAR
43.	SPLINT
44.	DIABETIC FOOTWEAR
45.	KNEE BRACES (LONG/ SHORT/ HINGED)
46.	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER
47.	LUMBO SACRAL BELT
48.	NIMBUS BED OR WATER OR AIR BED CHARGES
49.	AMBULANCE COLLAR
50.	AMBULANCE EQUIPMENT
51.	ABDOMINAL BINDER
52.	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES

53.	SUGAR FREE TABLETS
54.	CREAMS POWDERS LOTIONS (Toiletries are not payable, only prescribed medical pharmaceuticals payable)
55.	ECG ELECTRODES
56.	GLOVES
57.	NEBULISATION KIT
58.	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]
59.	KIDNEY TRAY
60.	MASK
61.	OUNCE GLASS
62.	OXYGEN MASK
63.	PELVIC TRACTION BELT
64.	PAN CAN
65.	TROLLY COVER
66.	UROMETER, URINE JUG
67.	VASOFIX SAFETY

List II – Items that are to be subsumed into room charges

Sl No.	**Item**
1.	BABY CHARGES (UNLESS SPECIFIED/INDICATED)
2.	HAND WASH
3.	SHOE COVER
4.	CAPS
5.	CRADLE CHARGES
6.	COMB
7.	EAU-DE-COLOGNE / ROOM FRESHNERS
8.	FOOT COVER
9.	GOWN
10.	SLIPPERS
11.	TISSUE PAPER
12.	TOOTHPASTE
13.	TOOTHBRUSH
14.	BED PAN
15.	FACE MASK
16.	FLEXI MASK
17.	HAND HOLDER
18.	SPUTUM CUP
19.	DISINFECTANT LOTIONS
20.	LUXURY TAX
21.	HVAC
22.	HOUSE KEEPING CHARGES
23.	AIR CONDITIONER CHARGES
24.	IM IV INJECTION CHARGES
25.	CLEAN SHEET
26.	BLANKET/WARMER BLANKET
27.	ADMISSION KIT
28.	DIABETIC CHART CHARGES
29.	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES
30.	DISCHARGE PROCEDURE CHARGES
31.	DAILY CHART CHARGES
32.	ENTRANCE PASS / VISITORS PASS CHARGES
33.	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE
34.	FILE OPENING CHARGES

35.	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)
36.	PATIENT IDENTIFICATION BAND / NAME TAG
37.	PULSEOXYMETER CHARGES

List III – Items that are to be subsumed into Procedure Charges

Sl No.	Item
1.	HAIR REMOVAL CREAM
2.	DISPOSABLES RAZORS CHARGES (for site preparations)
3.	EYE PAD
4.	EYE SHEILD
5.	CAMERA COVER
6.	DVD, CD CHARGES
7.	GAUSE SOFT
8.	GAUZE
9.	WARD AND THEATRE BOOKING CHARGES
10.	ARTHROSCOPY & ENDOSCOPY INSTRUMENTS
11.	MICROSCOPE COVER
12.	SURGICAL BLADES, HARMONICSCALPEL, SHAVER
13.	SURGICAL DRILL
14.	EYE KIT
15.	EYE DRAPE
16.	X-RAY FILM
17.	BOYLES APPARATUS CHARGES
18.	COTTON
19.	COTTON BANDAGE
20.	SURGICAL TAPE
21.	APRON
22.	TORNIQUET
23.	ORTHOBUNDLE, GYNAEC BUNDLE

List IV – Items that are to be subsumed into cost of treatment

Sl No.	Item
1.	ADMISSION/REGISTRATION CHARGES
2.	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE
3.	URINE CONTAINER
4.	BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES
5.	BIPAP MACHINE
6.	CPAP/ CAPD EQUIPMENTS
7.	INFUSION PUMP - COST
8.	HYDROGEN PEROXIDE\SPIRIT\ DISINFECTANTS ETC
9.	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES- DIET CHARGES
10.	HIV KIT
11.	ANTISEPTIC MOUTHWASH
12.	LOZENGES
13.	MOUTH PAINT
14.	VACCINATION CHARGES
15.	ALCOHOL SWABES
16.	SCRUB SOLUTION/STERILLIUM
17.	GLUCOMETER & STRIPS
18.	URINE BAG

Annexure 2: Premium rates exclusive of Goods & Services Tax (age in completed years)

A. For Gold and Platinum Plans

Zone 1														
One Adult/Individual														
Age (in years)	**50000**	**1 L**	**1.5 L**	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
90 days - 17	3,891	5,052	6,129	7,008	7,769	8,455	9,079	9,655	10,194	10,701	12,507	13,137	13,538	14,299	15,016
18-25	3,897	5,179	6,353	7,312	8,148	8,896	9,580	10,214	10,804	11,361	13,280	13,971	14,409	15,247	16,033
26-30	NA	NA	NA	7,873	8,773	9,584	10,321	11,004	11,642	12,245	14,281	15,028	15,503	16,404	17,253
31-35	NA	NA	NA	9,081	10,124	11,062	11,915	12,706	13,443	14,142	16,472	17,335	17,885	18,930	19,911
36-40	NA	NA	NA	10,351	11,544	12,620	13,595	14,499	15,343	16,141	18,748	19,735	20,364	21,556	22,680
41-45	NA	NA	NA	13,083	14,592	15,958	17,192	18,333	19,403	20,409	23,725	24,974	25,767	27,277	28,695
46-50	NA	NA	NA	16,366	18,253	19,974	21,519	22,948	24,286	25,546	29,751	31,315	32,306	34,197	35,973
51-55	NA	NA	NA	20,394	22,746	24,902	26,827	28,608	30,274	31,845	37,047	38,994	40,228	42,582	44,797
56-60	NA	NA	NA	26,302	29,341	32,156	34,639	36,939	39,093	41,121	47,811	50,322	51,917	54,957	57,818
61-65	NA	NA	NA	37,735	41,987	45,974	49,440	52,649	55,650	58,478	67,741	71,234	73,454	77,695	81,688
66-70	NA	NA	NA	48,372	53,833	59,032	63,479	67,594	71,445	75,073	86,923	91,393	94,240	99,682	104,807
71-75	NA	NA	NA	62,009	69,047	75,866	81,587	86,881	91,832	96,498	111,491	117,229	120,883	127,888	134,486
> 75	NA	NA	NA	72,804	81,039	89,119	95,806	101,996	107,781	113,233	131,120	137,817	142,085	150,279	157,995

Zone 1												
Two Adults												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	10,603	11,814	12,899	13,892	14,810	15,666	16,474	19,256	20,258	20,893	22,108	23,247
26-30	11,415	12,721	13,896	14,965	15,956	16,881	17,755	20,708	21,791	22,480	23,785	25,017
31-35	13,167	14,680	16,039	17,277	18,423	19,492	20,505	23,884	25,136	25,933	27,448	28,871
36-40	15,008	16,739	18,299	19,713	21,023	22,248	23,405	27,185	28,616	29,528	31,257	32,887
41-45	18,970	21,158	23,139	24,929	26,584	28,135	29,593	34,402	36,212	37,362	39,552	41,608
46-50	23,731	26,466	28,963	31,203	33,274	35,214	37,042	43,138	45,407	46,844	49,586	52,161
51-55	29,571	32,981	36,108	38,899	41,481	43,897	46,175	53,719	56,542	58,331	61,744	64,956
56-60	38,138	42,544	46,626	50,227	53,562	56,684	59,626	69,326	72,967	75,280	79,687	83,837
61-65	54,716	60,881	66,662	71,688	76,341	80,693	84,793	98,225	103,289	106,508	112,658	118,448
66-70	70,140	78,057	85,596	92,045	98,012	103,595	108,855	126,038	132,520	136,647	144,539	151,970
71-75	89,913	100,118	110,005	118,302	125,978	133,157	139,922	161,662	169,982	175,281	185,438	195,005
> 75	105,565	117,507	129,223	138,919	147,894	156,283	164,187	190,123	199,835	206,023	217,905	229,093

Zone 1												
One Adult + One Child												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	10,237	11,407	12,454	13,413	14,299	15,125	15,906	18,592	19,559	20,172	21,346	22,446
26-30	10,628	11,844	12,938	13,933	14,856	15,717	16,530	19,280	20,288	20,929	22,145	23,291
31-35	11,805	13,161	14,380	15,490	16,517	17,476	18,384	21,414	22,536	23,250	24,609	25,884
36-40	12,938	14,430	15,775	16,994	18,123	19,179	20,177	23,435	24,669	25,455	26,946	28,351
41-45	15,700	17,510	19,150	20,631	22,000	23,284	24,491	28,470	29,968	30,920	32,733	34,434
46-50	18,821	20,991	22,971	24,747	26,390	27,929	29,378	34,213	36,013	37,152	39,326	41,369
51-55	22,433	25,020	27,392	29,510	31,469	33,301	35,029	40,752	42,894	44,251	46,840	49,277
56-60	28,275	31,541	34,568	37,237	39,710	42,025	44,205	51,397	54,096	55,811	59,079	62,155
61-65	39,622	44,086	48,273	51,912	55,282	58,433	61,402	71,128	74,796	77,127	81,580	85,773
66-70	50,791	56,524	61,983	66,653	70,974	75,017	78,826	91,269	95,962	98,952	104,666	110,047
71-75	65,110	72,499	79,659	85,667	91,225	96,424	101,323	117,065	123,090	126,928	134,283	141,210
> 75	76,444	85,091	93,575	100,597	107,096	113,170	118,894	137,676	144,708	149,189	157,793	165,895

Zone 1												
Two Adults + One Child												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	13,528	15,073	16,457	17,724	18,896	19,987	21,018	24,568	25,846	26,656	28,207	29,660
26-30	14,171	15,792	17,250	18,578	19,807	20,956	22,040	25,707	27,051	27,906	29,527	31,055
31-35	15,891	17,717	19,358	20,852	22,235	23,525	24,748	28,826	30,337	31,298	33,127	34,844
36-40	17,596	19,625	21,454	23,112	24,648	26,084	27,440	31,872	33,550	34,619	36,646	38,557
41-45	21,587	24,077	26,331	28,367	30,250	32,015	33,675	39,147	41,206	42,515	45,008	47,347
46-50	26,186	29,204	31,959	34,431	36,716	38,857	40,874	47,601	50,105	51,690	54,715	57,557
51-55	31,610	35,256	38,598	41,582	44,342	46,924	49,360	57,423	60,441	62,354	66,002	69,436
56-60	40,111	44,744	49,038	52,825	56,333	59,616	62,710	72,912	76,741	79,174	83,809	88,173
61-65	56,603	62,980	68,961	74,160	78,974	83,476	87,717	101,612	106,851	110,181	116,543	122,533
66-70	72,559	80,749	88,548	95,219	101,391	107,167	112,609	130,384	137,089	141,359	149,523	157,210
71-75	93,014	103,570	113,799	122,381	130,322	137,749	144,747	167,236	175,843	181,325	191,832	201,729
> 75	109,205	121,559	133,679	143,709	152,994	161,672	169,849	196,679	206,725	213,127	225,419	236,993

Zone 1												
One Adult + Two Children												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	13,162	14,666	16,012	17,245	18,385	19,447	20,450	23,904	25,148	25,936	27,445	28,859
26-30	13,384	14,914	16,292	17,546	18,707	19,792	20,816	24,278	25,548	26,356	27,886	29,330
31-35	14,529	16,198	17,699	19,065	20,329	21,509	22,627	26,355	27,736	28,616	30,287	31,857
36-40	15,526	17,317	18,930	20,393	21,748	23,015	24,212	28,122	29,603	30,546	32,335	34,021
41-45	18,316	20,429	22,341	24,069	25,667	27,164	28,573	33,215	34,963	36,074	38,188	40,173
46-50	21,276	23,729	25,967	27,975	29,832	31,571	33,210	38,676	40,710	41,998	44,456	46,765
51-55	24,472	27,295	29,883	32,193	34,330	36,329	38,214	44,457	46,793	48,274	51,098	53,757
56-60	30,248	33,742	36,980	39,835	42,480	44,957	47,289	54,983	57,871	59,705	63,200	66,491
61-65	41,509	46,186	50,572	54,384	57,914	61,215	64,326	74,515	78,357	80,799	85,465	89,857
66-70	53,210	59,216	64,935	69,827	74,354	78,589	82,580	95,615	100,532	103,664	109,650	115,288
71-75	68,210	75,951	83,452	89,746	95,570	101,016	106,148	122,640	128,952	132,972	140,677	147,935
> 75	80,084	89,143	98,031	105,387	112,195	118,559	124,556	144,232	151,599	156,293	165,307	173,795

Zone 1												
Two Adults + Two Children												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	16,453	18,332	20,016	21,556	22,981	24,309	25,563	29,880	31,435	32,420	34,306	36,074
26-30	16,926	18,862	20,605	22,190	23,659	25,031	26,326	30,705	32,311	33,332	35,268	37,094
31-35	18,615	20,754	22,676	24,427	26,047	27,558	28,991	33,768	35,537	36,664	38,806	40,817
36-40	20,184	22,512	24,610	26,511	28,273	29,920	31,476	36,559	38,484	39,710	42,035	44,227
41-45	24,203	26,995	29,523	31,806	33,917	35,896	37,757	43,892	46,201	47,669	50,463	53,085
46-50	28,641	31,942	34,955	37,659	40,158	42,500	44,706	52,063	54,802	56,535	59,845	62,953
51-55	33,650	37,530	41,088	44,265	47,203	49,952	52,544	61,128	64,340	66,377	70,260	73,916
56-60	42,084	46,945	51,450	55,423	59,103	62,548	65,794	76,498	80,516	83,067	87,931	92,510
61-65	58,490	65,080	71,260	76,632	81,606	86,258	90,641	104,999	110,413	113,854	120,428	126,617
66-70	74,977	83,441	91,499	98,393	104,771	110,739	116,363	134,731	141,659	146,071	154,507	162,451
71-75	96,114	107,022	117,592	126,460	134,666	142,340	149,572	172,811	181,705	187,369	198,227	208,453
> 75	112,846	125,611	138,135	148,500	158,093	167,061	175,511	203,235	213,616	220,231	232,932	244,892

Zone 1												
One Adult + Three Children												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	16,087	17,925	19,571	21,077	22,471	23,768	24,995	29,216	30,736	31,699	33,544	35,272
26-30	16,139	17,985	19,646	21,158	22,558	23,867	25,101	29,277	30,808	31,782	33,628	35,369
31-35	17,253	19,235	21,017	22,639	24,141	25,542	26,869	31,297	32,937	33,981	35,966	37,831
36-40	18,113	20,203	22,085	23,792	25,373	26,851	28,247	32,809	34,537	35,637	37,724	39,691
41-45	20,933	23,347	25,533	27,508	29,334	31,045	32,655	37,960	39,958	41,227	43,644	45,912
46-50	23,731	26,466	28,963	31,203	33,274	35,214	37,042	43,138	45,407	46,844	49,586	52,161
51-55	26,512	29,569	32,373	34,875	37,190	39,356	41,398	48,161	50,692	52,297	55,357	58,237
56-60	32,220	35,942	39,391	42,433	45,251	47,888	50,373	58,569	61,645	63,598	67,322	70,828
61-65	43,396	48,285	52,870	56,856	60,547	63,998	67,249	77,902	81,919	84,472	89,349	93,942
66-70	55,628	61,908	67,886	73,001	77,733	82,162	86,334	99,961	105,102	108,376	114,634	120,528
71-75	71,311	79,404	87,246	93,825	99,914	105,607	110,973	128,214	134,813	139,016	147,071	154,659
> 75	83,724	93,195	102,487	110,177	117,295	123,948	130,218	150,787	158,489	163,398	172,821	181,694

Zone 1												
Two Adults + Three Children												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	19,378	21,591	23,574	25,388	27,067	28,630	30,107	35,192	37,023	38,183	40,405	42,487
26-30	19,682	21,933	23,959	25,803	27,510	29,105	30,611	35,704	37,571	38,758	41,009	43,132
31-35	21,339	23,791	25,995	28,001	29,858	31,591	33,233	38,709	40,738	42,029	44,485	46,790
36-40	22,771	25,398	27,765	29,910	31,897	33,755	35,511	41,246	43,418	44,801	47,424	49,897
41-45	26,820	29,913	32,714	35,244	37,584	39,776	41,839	48,637	51,196	52,822	55,919	58,824
46-50	31,096	34,680	37,951	40,886	43,600	46,143	48,538	56,526	59,499	61,381	64,974	68,349
51-55	35,689	39,805	43,579	46,948	50,064	52,979	55,729	64,833	68,240	70,400	74,518	78,395
56-60	44,056	49,146	53,862	58,021	61,873	65,480	68,878	80,084	84,290	86,961	92,053	96,846
61-65	60,377	67,179	73,559	79,104	84,239	89,041	93,565	108,386	113,974	117,526	124,312	130,701
66-70	77,396	86,132	94,451	101,567	108,151	114,312	120,116	139,077	146,229	150,783	159,491	167,691
71-75	99,215	110,474	121,385	130,540	139,010	146,932	154,397	178,385	187,566	193,414	204,621	215,178
> 75	116,486	129,663	142,591	153,290	163,193	172,450	181,172	209,791	220,507	227,336	240,446	252,792

Zone 2															
One Adult/Individual															
Age (in years)	50000	1 L	1.5 L	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
90 days-17	3,516	4,565	5,539	6,333	7,021	7,641	8,205	8,725	9,212	9,671	11,303	11,872	12,234	12,922	13,570
18-25	3,522	4,680	5,741	6,608	7,363	8,039	8,658	9,230	9,763	10,267	12,001	12,626	13,021	13,779	14,489

26-30	NA	NA	NA	7,115	7,928	8,661	9,327	9,944	10,521	11,065	12,906	13,581	14,010	14,824	15,592
31-35	NA	NA	NA	8,206	9,149	9,996	10,768	11,482	12,149	12,780	14,886	15,666	16,163	17,107	17,993
36-40	NA	NA	NA	9,354	10,433	11,405	12,286	13,103	13,866	14,587	16,943	17,835	18,403	19,481	20,496
41-45	NA	NA	NA	11,823	13,187	14,421	15,537	16,568	17,535	18,444	21,441	22,569	23,286	24,651	25,932
46-50	NA	NA	NA	14,790	16,495	18,051	19,447	20,738	21,947	23,086	26,886	28,300	29,195	30,904	32,509
51-55	NA	NA	NA	18,430	20,555	22,504	24,244	25,853	27,359	28,778	33,480	35,239	36,355	38,481	40,484
56-60	NA	NA	NA	23,770	26,515	29,060	31,303	33,382	35,328	37,161	43,207	45,476	46,918	49,665	52,251
61-65	NA	NA	NA	34,102	37,944	41,547	44,679	47,579	50,291	52,847	61,218	64,374	66,381	70,213	73,822
66-70	NA	NA	NA	43,714	48,649	53,347	57,366	61,085	64,565	67,843	78,553	82,592	85,165	90,083	94,714
71-75	NA	NA	NA	56,038	62,398	68,560	73,731	78,515	82,989	87,206	100,755	105,940	109,243	115,573	121,536
> 75	NA	NA	NA	65,793	73,236	80,537	86,580	92,174	97,402	102,329	118,493	124,546	128,403	135,808	142,781

Zone 2												
Two Adults												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	9,582	10,676	11,657	12,554	13,384	14,157	14,887	17,402	18,307	18,881	19,979	21,009
26-30	10,316	11,496	12,558	13,524	14,419	15,256	16,045	18,714	19,693	20,315	21,495	22,608
31-35	11,899	13,266	14,495	15,614	16,649	17,615	18,531	21,584	22,716	23,436	24,805	26,091
36-40	13,563	15,127	16,537	17,815	18,999	20,105	21,151	24,567	25,861	26,685	28,247	29,720
41-45	17,143	19,121	20,911	22,528	24,024	25,425	26,744	31,089	32,725	33,764	35,744	37,601
46-50	21,446	23,918	26,174	28,198	30,070	31,823	33,475	38,984	41,035	42,333	44,811	47,138
51-55	26,723	29,805	32,631	35,154	37,487	39,670	41,729	48,546	51,097	52,714	55,798	58,701
56-60	34,466	38,447	42,137	45,390	48,404	51,226	53,884	62,650	65,941	68,031	72,014	75,764
61-65	49,447	55,018	60,243	64,785	68,990	72,923	76,628	88,766	93,343	96,252	101,809	107,042
66-70	63,386	70,541	77,353	83,181	88,573	93,619	98,373	113,901	119,758	123,489	130,620	137,336
71-75	81,255	90,477	99,412	106,910	113,847	120,334	126,448	146,094	153,613	158,402	167,581	176,227
> 75	95,400	106,192	116,779	125,542	133,652	141,233	148,377	171,815	180,591	186,184	196,921	207,032

Zone 2												
One Adult + One Child												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	9,251	10,308	11,255	12,121	12,922	13,669	14,374	16,802	17,676	18,230	19,290	20,284
26-30	9,605	10,703	11,692	12,592	13,425	14,203	14,938	17,423	18,334	18,914	20,013	21,049
31-35	10,668	11,894	12,995	13,998	14,927	15,793	16,614	19,352	20,366	21,011	22,239	23,392
36-40	11,692	13,041	14,256	15,358	16,378	17,332	18,234	21,178	22,294	23,004	24,351	25,621
41-45	14,188	15,824	17,306	18,644	19,882	21,042	22,133	25,729	27,082	27,943	29,581	31,118
46-50	17,009	18,969	20,759	22,364	23,848	25,239	26,549	30,919	32,545	33,574	35,539	37,385
51-55	20,273	22,611	24,755	26,668	28,438	30,094	31,656	36,828	38,763	39,990	42,330	44,532
56-60	25,552	28,504	31,239	33,651	35,886	37,978	39,948	46,448	48,887	50,436	53,390	56,170
61-65	35,807	39,841	43,624	46,913	49,958	52,806	55,489	64,279	67,593	69,700	73,724	77,513
66-70	45,900	51,081	56,015	60,235	64,139	67,793	71,236	82,480	86,722	89,423	94,587	99,450
71-75	58,840	65,518	71,988	77,417	82,441	87,139	91,566	105,792	111,237	114,705	121,352	127,612
> 75	69,083	76,897	84,564	90,909	96,783	102,272	107,445	124,418	130,773	134,823	142,598	149,920

Zone 2												
Two Adults + One Child												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	12,225	13,621	14,873	16,017	17,076	18,062	18,994	22,202	23,357	24,089	25,491	26,804
26-30	12,806	14,271	15,589	16,789	17,900	18,938	19,918	23,231	24,446	25,219	26,683	28,065
31-35	14,361	16,011	17,494	18,844	20,094	21,260	22,365	26,050	27,415	28,284	29,937	31,489
36-40	15,901	17,736	19,388	20,886	22,274	23,572	24,798	28,802	30,319	31,285	33,117	34,844
41-45	19,508	21,758	23,795	25,636	27,337	28,932	30,432	35,377	37,238	38,421	40,674	42,787
46-50	23,665	26,392	28,882	31,115	33,180	35,115	36,938	43,017	45,280	46,712	49,446	52,014
51-55	28,566	31,861	34,881	37,578	40,072	42,406	44,606	51,894	54,621	56,350	59,646	62,750
56-60	36,248	40,436	44,316	47,738	50,908	53,875	56,671	65,891	69,351	71,549	75,739	79,682
61-65	51,152	56,916	62,320	67,019	71,369	75,437	79,270	91,827	96,562	99,571	105,320	110,733
66-70	65,571	72,973	80,021	86,050	91,628	96,847	101,765	117,829	123,888	127,747	135,125	142,072
71-75	84,057	93,596	102,840	110,596	117,773	124,484	130,809	151,132	158,910	163,864	173,360	182,303
> 75	98,689	109,853	120,806	129,871	138,261	146,104	153,493	177,740	186,818	192,604	203,712	214,171

Zone 2												
One Adult + Two Children												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	11,895	13,253	14,471	15,584	16,615	17,574	18,481	21,602	22,726	23,438	24,802	26,080
26-30	12,095	13,478	14,723	15,856	16,906	17,886	18,811	21,941	23,088	23,818	25,201	26,506
31-35	13,130	14,638	15,994	17,229	18,371	19,438	20,448	23,817	25,065	25,860	27,371	28,790
36-40	14,031	15,649	17,107	18,429	19,654	20,799	21,880	25,414	26,752	27,605	29,221	30,745
41-45	16,552	18,462	20,190	21,752	23,195	24,549	25,821	30,017	31,596	32,600	34,511	36,304
46-50	19,228	21,444	23,466	25,281	26,959	28,531	30,012	34,951	36,790	37,954	40,175	42,262
51-55	22,116	24,666	27,005	29,093	31,024	32,830	34,534	40,176	42,287	43,625	46,178	48,580
56-60	27,335	30,493	33,419	35,999	38,390	40,627	42,736	49,688	52,298	53,955	57,114	60,088
61-65	37,512	41,738	45,702	49,147	52,337	55,321	58,131	67,340	70,812	73,019	77,235	81,204

66-70	48,086	53,514	58,682	63,103	67,194	71,021	74,628	86,408	90,851	93,681	99,091	104,186
71-75	61,642	68,637	75,416	81,104	86,367	91,288	95,926	110,830	116,534	120,167	127,130	133,689
> 75	72,372	80,559	88,591	95,239	101,391	107,143	112,562	130,343	137,000	141,243	149,388	157,059

Zone 2												
Two Adults + Two Children												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	14,868	16,567	18,088	19,480	20,768	21,968	23,101	27,003	28,408	29,298	31,002	32,600
26-30	15,296	17,046	18,621	20,053	21,381	22,620	23,791	27,748	29,199	30,122	31,872	33,522
31-35	16,823	18,755	20,493	22,074	23,538	24,905	26,199	30,516	32,115	33,133	35,069	36,887
36-40	18,240	20,344	22,240	23,958	25,550	27,038	28,445	33,038	34,778	35,886	37,987	39,968
41-45	21,873	24,396	26,680	28,743	30,651	32,439	34,121	39,665	41,752	43,078	45,604	47,974
46-50	25,883	28,866	31,589	34,032	36,291	38,407	40,401	47,050	49,525	51,091	54,082	56,891
51-55	30,409	33,916	37,132	40,002	42,658	45,142	47,484	55,242	58,145	59,985	63,494	66,798
56-60	38,031	42,424	46,495	50,086	53,412	56,525	59,458	69,131	72,762	75,068	79,464	83,601
61-65	52,857	58,813	64,398	69,253	73,748	77,952	81,912	94,888	99,780	102,890	108,831	114,424
66-70	67,757	75,406	82,688	88,918	94,682	100,076	105,157	121,757	128,018	132,005	139,629	146,807
71-75	86,859	96,716	106,268	114,283	121,698	128,633	135,169	156,170	164,207	169,326	179,138	188,380
> 75	101,979	113,515	124,833	134,200	142,870	150,974	158,610	183,665	193,046	199,024	210,502	221,310

Zone 2												
One Adult + Three Children												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	14,538	16,198	17,686	19,047	20,307	21,480	22,588	26,403	27,776	28,647	30,313	31,875
26-30	14,585	16,253	17,754	19,121	20,386	21,568	22,684	26,458	27,841	28,721	30,389	31,963
31-35	15,592	17,383	18,993	20,459	21,816	23,082	24,282	28,283	29,765	30,709	32,503	34,188
36-40	16,369	18,257	19,959	21,501	22,930	24,265	25,527	29,650	31,211	32,206	34,091	35,869
41-45	18,917	21,099	23,074	24,859	26,509	28,056	29,510	34,305	36,110	37,257	39,441	41,491
46-50	21,446	23,918	26,174	28,198	30,070	31,823	33,475	38,984	41,035	42,333	44,811	47,138
51-55	23,959	26,722	29,255	31,517	33,609	35,566	37,412	43,524	45,811	47,261	50,026	52,629
56-60	29,118	32,481	35,598	38,347	40,893	43,277	45,523	52,929	55,709	57,474	60,839	64,007
61-65	39,217	43,635	47,779	51,381	54,716	57,835	60,774	70,401	74,031	76,338	80,745	84,895
66-70	50,271	55,946	61,349	65,971	70,248	74,250	78,020	90,336	94,981	97,939	103,596	108,921
71-75	64,444	71,757	78,844	84,790	90,292	95,438	100,287	115,868	121,831	125,629	132,909	139,766
> 75	75,662	84,221	92,618	99,568	106,000	112,013	117,678	136,267	143,227	147,663	156,179	164,198

Zone 2												
Two Adults + Three Children												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	17,512	19,512	21,304	22,943	24,460	25,873	27,208	31,803	33,458	34,506	36,514	38,395
26-30	17,787	19,821	21,652	23,318	24,861	26,303	27,664	32,265	33,953	35,026	37,060	38,979
31-35	19,284	21,500	23,491	25,305	26,983	28,549	30,033	34,982	36,815	37,982	40,201	42,285
36-40	20,578	22,952	25,091	27,029	28,826	30,505	32,091	37,274	39,237	40,487	42,857	45,092
41-45	24,237	27,033	29,564	31,850	33,964	35,946	37,810	43,953	46,266	47,735	50,534	53,160
46-50	28,102	31,341	34,297	36,949	39,402	41,700	43,864	51,083	53,770	55,471	58,717	61,767
51-55	32,252	35,972	39,382	42,427	45,243	47,877	50,362	58,590	61,669	63,620	67,343	70,846
56-60	39,814	44,413	48,675	52,433	55,915	59,175	62,245	72,372	76,173	78,587	83,188	87,520
61-65	54,562	60,710	66,475	71,487	76,127	80,466	84,555	97,949	102,999	106,209	112,342	118,115
66-70	69,943	77,838	85,355	91,786	97,736	103,304	108,550	125,684	132,147	136,263	144,133	151,543
71-75	89,661	99,836	109,696	117,969	125,624	132,783	139,529	161,207	169,504	174,789	184,917	194,457
> 75	105,269	117,177	128,860	138,529	147,478	155,844	163,726	189,589	199,273	205,444	217,292	228,449

Zone 3															
One Adult/Individual															
Age (in years)	**50000**	**1 L**	**1.5 L**	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
90 days-17	2,612	3,392	4,115	4,707	5,219	5,678	6,098	6,484	6,846	7,188	8,400	8,822	9,091	9,604	10,085
18-25	2,616	3,477	4,265	4,911	5,470	5,975	6,435	6,858	7,254	7,630	8,917	9,384	9,678	10,238	10,766
26-30	NA	NA	NA	5,287	5,893	6,436	6,933	7,389	7,818	8,223	9,591	10,093	10,411	11,018	11,586
31-35	NA	NA	NA	5,541	6,176	6,750	7,272	7,754	8,205	8,631	10,051	10,580	10,915	11,551	12,151
36-40	NA	NA	NA	6,568	7,323	8,005	8,624	9,199	9,734	10,241	11,893	12,520	12,917	13,675	14,388
41-45	NA	NA	NA	7,714	8,602	9,408	10,135	10,809	11,439	12,033	13,986	14,725	15,191	16,080	16,917
46-50	NA	NA	NA	9,767	10,893	11,920	12,840	13,693	14,492	15,245	17,754	18,688	19,279	20,407	21,466
51-55	NA	NA	NA	10,446	11,650	12,756	13,740	14,653	15,507	16,311	18,978	19,974	20,606	21,813	22,947
56-60	NA	NA	NA	14,085	15,712	17,220	18,550	19,782	20,935	22,022	25,604	26,949	27,802	29,430	30,964
61-65	NA	NA	NA	20,209	22,485	24,620	26,477	28,195	29,802	31,317	36,277	38,148	39,337	41,607	43,746
66-70	NA	NA	NA	25,903	28,829	31,612	33,994	36,199	38,261	40,203	46,548	48,943	50,468	53,383	56,127
71-75	NA	NA	NA	33,209	36,975	40,628	43,693	46,528	49,178	51,676	59,705	62,778	64,735	68,488	72,018
> 75	NA	NA	NA	38,989	43,398	47,726	51,308	54,621	57,719	60,639	70,218	73,804	76,090	80,478	84,610

Zone 3												
Two Adults												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	7,120	7,932	8,664	9,330	9,944	10,519	11,063	12,930	13,606	14,033	14,845	15,611
26-30	7,667	8,544	9,332	10,052	10,714	11,337	11,923	13,907	14,635	15,096	15,976	16,799
31-35	8,034	8,955	9,787	10,545	11,243	11,897	12,515	14,574	15,342	15,826	16,750	17,619
36-40	9,524	10,619	11,608	12,505	13,339	14,115	14,849	17,244	18,154	18,730	19,829	20,862
41-45	11,185	12,473	13,642	14,695	15,673	16,586	17,448	20,280	21,351	22,027	23,315	24,530
46-50	14,163	15,794	17,284	18,618	19,855	21,014	22,105	25,743	27,097	27,955	29,590	31,126
51-55	15,146	16,893	18,497	19,923	21,247	22,486	23,650	27,518	28,962	29,879	31,628	33,274
56-60	20,423	22,783	24,969	26,897	28,685	30,356	31,932	37,125	39,076	40,312	42,674	44,898
61-65	29,303	32,604	35,699	38,392	40,883	43,212	45,410	52,602	55,315	57,038	60,331	63,432
66-70	37,560	41,802	45,837	49,291	52,489	55,478	58,295	67,495	70,967	73,179	77,406	81,385
71-75	48,153	53,613	58,911	63,354	67,465	71,308	74,930	86,572	91,028	93,866	99,307	104,427
> 75	56,533	62,928	69,202	74,396	79,201	83,692	87,926	101,816	107,016	110,330	116,693	122,684

Zone 3												
One Adult + One Child												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	6,875	7,659	8,365	9,008	9,602	10,156	10,682	12,484	13,137	13,549	14,333	15,072
26-30	7,138	7,955	8,689	9,359	9,975	10,555	11,101	12,948	13,626	14,055	14,874	15,641
31-35	7,203	8,029	8,774	9,454	10,080	10,666	11,221	13,066	13,754	14,189	15,017	15,797
36-40	8,210	9,154	10,007	10,780	11,499	12,168	12,801	14,866	15,650	16,147	17,094	17,985
41-45	9,257	10,323	11,290	12,162	12,970	13,726	14,439	16,783	17,670	18,229	19,296	20,301
46-50	11,233	12,526	13,708	14,766	15,747	16,666	17,531	20,417	21,491	22,171	23,468	24,686
51-55	11,490	12,816	14,032	15,114	16,119	17,058	17,942	20,876	21,971	22,667	23,994	25,242
56-60	15,142	16,891	18,511	19,941	21,266	22,505	23,673	27,524	28,970	29,887	31,637	33,286
61-65	21,219	23,610	25,851	27,801	29,605	31,292	32,883	38,091	40,056	41,303	43,688	45,934
66-70	27,199	30,271	33,192	35,694	38,009	40,174	42,213	48,876	51,390	52,992	56,052	58,934
71-75	34,869	38,824	42,660	45,877	48,854	51,637	54,260	62,690	65,917	67,972	71,912	75,619
> 75	40,938	45,568	50,112	53,873	57,352	60,605	63,671	73,729	77,494	79,894	84,502	88,840

Zone 3												
Two Adults + One Child												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	9,084	10,120	11,054	11,904	12,688	13,421	14,115	16,497	17,360	17,904	18,940	19,917
26-30	9,517	10,607	11,585	12,479	13,301	14,073	14,801	17,264	18,168	18,740	19,832	20,855
31-35	9,696	10,808	11,812	12,726	13,569	14,359	15,105	17,589	18,516	19,101	20,215	21,265
36-40	11,166	12,449	13,609	14,661	15,639	16,549	17,409	20,217	21,284	21,959	23,248	24,459
41-45	12,728	14,194	15,524	16,722	17,834	18,874	19,854	23,077	24,296	25,065	26,531	27,914
46-50	15,628	17,428	19,072	20,544	21,909	23,188	24,391	28,406	29,900	30,846	32,651	34,346
51-55	16,191	18,058	19,772	21,297	22,712	24,036	25,282	29,416	30,959	31,940	33,810	35,569
56-60	21,480	23,961	26,260	28,289	30,168	31,926	33,583	39,045	41,097	42,397	44,881	47,220
61-65	30,313	33,728	36,930	39,715	42,292	44,702	46,976	54,416	57,222	59,005	62,411	65,620
66-70	38,855	43,244	47,418	50,991	54,299	57,391	60,305	69,822	73,415	75,703	80,075	84,191
71-75	49,813	55,462	60,942	65,539	69,791	73,767	77,514	89,557	94,167	97,103	102,731	108,028
> 75	58,483	65,098	71,589	76,961	81,932	86,578	90,958	105,327	110,706	114,135	120,717	126,915

Zone 3												
One Adult + Two Children												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	8,839	9,847	10,755	11,582	12,345	13,058	13,734	16,051	16,891	17,420	18,428	19,379
26-30	8,989	10,017	10,941	11,785	12,562	13,291	13,979	16,305	17,159	17,699	18,730	19,696
31-35	8,865	9,882	10,799	11,636	12,406	13,128	13,810	16,081	16,929	17,463	18,482	19,442
36-40	9,852	10,985	12,008	12,937	13,799	14,602	15,361	17,839	18,780	19,376	20,513	21,582
41-45	10,799	12,043	13,172	14,189	15,132	16,014	16,846	19,581	20,615	21,267	22,511	23,684
46-50	12,698	14,160	15,496	16,692	17,801	18,840	19,818	23,080	24,294	25,063	26,529	27,906
51-55	12,535	13,981	15,308	16,488	17,584	18,609	19,573	22,773	23,968	24,728	26,175	27,537
56-60	16,198	18,069	19,803	21,332	22,750	24,075	25,325	29,444	30,991	31,972	33,845	35,608
61-65	22,230	24,734	27,082	29,125	31,014	32,782	34,449	39,905	41,963	43,270	45,768	48,121
66-70	28,494	31,712	34,773	37,394	39,819	42,087	44,223	51,203	53,837	55,515	58,721	61,740
71-75	36,530	40,672	44,691	48,062	51,180	54,096	56,844	65,675	69,056	71,209	75,336	79,220
> 75	42,887	47,738	52,498	56,438	60,083	63,491	66,703	77,240	81,184	83,699	88,526	93,071
Zone 3												
Two Adults + Two Children												
Age (in years)	2 L	2.5 L	3 L	3.5 L	4 L	4.5 L	5 L	6 L	7.5 L	8 L	9 L	10 L
18-25	11,049	12,308	13,444	14,478	15,431	16,322	17,167	20,064	21,113	21,776	23,035	24,224
26-30	11,368	12,669	13,837	14,905	15,887	16,809	17,679	20,621	21,701	22,384	23,688	24,910
31-35	11,358	12,661	13,837	14,908	15,895	16,820	17,694	20,604	21,690	22,375	23,680	24,910
36-40	12,808	14,280	15,611	16,818	17,939	18,982	19,969	23,191	24,414	25,189	26,667	28,056

41-45	14,271	15,914	17,406	18,749	19,996	21,162	22,261	25,874	27,241	28,103	29,747	31,297
46-50	17,093	19,062	20,860	22,471	23,963	25,361	26,678	31,069	32,703	33,738	35,712	37,566
51-55	17,235	19,223	21,048	22,671	24,178	25,587	26,913	31,313	32,956	34,001	35,991	37,863
56-60	22,536	25,140	27,552	29,680	31,652	33,496	35,235	40,966	43,118	44,483	47,088	49,542
61-65	31,324	34,852	38,161	41,039	43,702	46,192	48,542	56,230	59,130	60,972	64,492	67,807
66-70	40,150	44,685	48,998	52,691	56,109	59,304	62,315	72,150	75,862	78,226	82,744	86,997
71-75	51,473	57,311	62,974	67,724	72,118	76,226	80,098	92,543	97,306	100,339	106,156	111,629
> 75	60,432	67,268	73,975	79,527	84,663	89,464	93,990	108,838	114,396	117,939	124,741	131,145

Zone 3												
One Adult + Three Children												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	10,803	12,035	13,145	14,156	15,088	15,960	16,786	19,618	20,644	21,292	22,523	23,685
26-30	10,839	12,080	13,194	14,212	15,148	16,028	16,857	19,662	20,692	21,343	22,586	23,751
31-35	10,527	11,734	12,824	13,817	14,732	15,589	16,399	19,096	20,103	20,738	21,948	23,087
36-40	11,494	12,816	14,009	15,093	16,099	17,035	17,921	20,812	21,910	22,605	23,932	25,179
41-45	12,342	13,764	15,053	16,215	17,294	18,302	19,253	22,378	23,560	24,306	25,727	27,068
46-50	14,163	15,794	17,284	18,618	19,855	21,014	22,105	25,743	27,097	27,955	29,590	31,126
51-55	13,579	15,146	16,583	17,862	19,049	20,160	21,204	24,671	25,966	26,788	28,356	29,832
56-60	17,254	19,248	21,094	22,724	24,233	25,646	26,977	31,364	33,012	34,057	36,052	37,931
61-65	23,240	25,858	28,313	30,449	32,424	34,272	36,015	41,719	43,870	45,237	47,849	50,308
66-70	29,789	33,153	36,354	39,093	41,629	44,000	46,234	53,531	56,284	58,039	61,391	64,546
71-75	38,190	42,521	46,722	50,247	53,507	56,555	59,428	68,661	72,194	74,445	78,761	82,821
> 75	44,837	49,908	54,885	59,004	62,814	66,377	69,735	80,751	84,874	87,503	92,549	97,301

Zone 3												
Two Adults + Three Children												
Age (in years)	**2 L**	**2.5 L**	**3 L**	**3.5 L**	**4 L**	**4.5 L**	**5 L**	**6 L**	**7.5 L**	**8 L**	**9 L**	**10 L**
18-25	13,013	14,496	15,834	17,052	18,174	19,224	20,219	23,631	24,867	25,647	27,130	28,530
26-30	13,219	14,732	16,090	17,331	18,473	19,546	20,557	23,978	25,234	26,028	27,544	28,965
31-35	13,020	14,514	15,862	17,090	18,221	19,281	20,283	23,619	24,864	25,649	27,146	28,555
36-40	14,450	16,111	17,612	18,974	20,239	21,416	22,529	26,164	27,544	28,418	30,085	31,653
41-45	15,813	17,635	19,287	20,776	22,158	23,449	24,667	28,671	30,186	31,142	32,963	34,680
46-50	18,558	20,696	22,648	24,397	26,017	27,535	28,965	33,732	35,506	36,630	38,773	40,786
51-55	18,280	20,388	22,324	24,045	25,643	27,138	28,544	33,211	34,954	36,061	38,172	40,158
56-60	23,593	26,318	28,843	31,071	33,136	35,066	36,886	42,886	45,139	46,568	49,296	51,864
61-65	32,334	35,976	39,392	42,363	45,112	47,683	50,108	58,044	61,037	62,938	66,572	69,994
66-70	41,445	46,127	50,579	54,391	57,918	61,217	64,325	74,477	78,309	80,750	85,413	89,804
71-75	53,134	59,160	65,005	69,908	74,444	78,685	82,682	95,528	100,445	103,576	109,580	115,229
> 75	62,382	69,437	76,361	82,092	87,394	92,350	97,022	112,349	118,086	121,744	128,764	135,376

B. For Topaz and Ruby Plans:

Zone 1								
One Adult/Individual								
Age (in years)	**1 L**	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
90 days-17	4,648	6,448	7,863	9,076	10,166	12,007	12,613	14,413
18-25	4,766	6,727	8,275	9,599	10,795	12,748	13,412	15,391
26-30	NA	7,244	8,913	10,344	11,631	13,712	14,427	16,564
31-35	NA	8,354	10,288	11,942	13,435	15,812	16,643	19,114
36-40	NA	9,523	11,735	13,628	15,334	17,995	18,945	21,772
41-45	NA	12,037	14,842	17,233	19,389	22,775	23,975	27,548
46-50	NA	15,058	18,576	21,570	24,267	28,563	30,061	34,534
51-55	NA	18,760	23,160	26,889	30,254	35,566	37,434	43,006
56-60	NA	24,197	29,905	34,724	39,064	45,898	48,310	55,506
61-65	NA	34,716	42,755	49,491	55,554	65,033	68,386	78,420
66-70	NA	44,501	54,899	63,540	71,320	83,445	87,738	100,615
71-75	NA	57,048	70,555	81,669	91,672	107,031	112,539	129,104
> 75	NA	66,981	82,881	95,876	107,570	125,878	132,305	151,675

Zone 1							
Two Adults							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	9,754	11,998	13,919	15,652	18,484	19,447	22,318
26-30	10,504	12,924	14,999	16,865	19,882	20,920	24,017
31-35	12,113	14,918	17,316	19,481	22,928	24,132	27,716
36-40	13,808	17,016	19,760	22,234	26,093	27,470	31,570
41-45	17,453	21,521	24,987	28,114	33,024	34,764	39,944
46-50	21,834	26,935	31,277	35,187	41,416	43,589	50,074
51-55	27,203	33,582	38,989	43,868	51,571	54,279	62,358
56-60	35,085	43,362	50,349	56,643	66,553	70,050	80,484

61-65	50,339	61,994	71,761	80,553	94,297	99,159	113,709
66-70	64,526	79,603	92,133	103,414	120,995	127,220	145,891
71-75	82,719	102,305	118,420	132,924	155,195	163,182	187,201
> 75	97,122	120,177	139,020	155,977	182,522	191,842	219,929

Zone 1							
One Adult + One Child							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	9,418	11,585	13,439	15,112	17,847	18,777	21,548
26-30	9,779	12,032	13,965	15,702	18,511	19,477	22,361
31-35	10,860	13,375	15,524	17,466	20,556	21,636	24,849
36-40	11,904	14,669	17,035	19,168	22,494	23,681	27,215
41-45	14,444	17,810	20,679	23,267	27,330	28,770	33,057
46-50	17,316	21,362	24,806	27,907	32,847	34,570	39,714
51-55	20,636	25,476	29,578	33,279	39,123	41,177	47,306
56-60	26,011	32,148	37,328	41,994	49,341	51,933	59,669
61-65	36,452	44,892	51,965	58,332	68,284	71,805	82,341
66-70	46,726	57,644	66,717	74,886	87,617	92,125	105,645
71-75	59,900	74,083	85,753	96,256	112,383	118,166	135,560
> 75	70,330	87,025	100,670	112,949	132,171	138,920	159,259

Zone 1							
Two Adults + One Child							
Age (in years)	2 L	3 L	4 L	5 L	6 L	7.5 L	10 L
18-25	12,445	15,308	17,758	19,970	23,583	24,812	28,474
26-30	13,039	16,043	18,620	20,936	24,681	25,969	29,815
31-35	14,620	18,005	20,898	23,512	27,671	29,125	33,450
36-40	16,189	19,950	23,167	26,068	30,592	32,207	37,013
41-45	19,860	24,489	28,434	31,992	37,579	39,559	45,453
46-50	24,092	29,721	34,513	38,827	45,701	48,098	55,254
51-55	29,079	35,898	41,678	46,893	55,128	58,023	66,659
56-60	36,900	45,605	52,954	59,573	69,995	73,673	84,647
61-65	52,074	64,132	74,236	83,331	97,549	102,579	117,630
66-70	66,751	82,348	95,310	106,980	125,168	131,607	150,922
71-75	85,572	105,833	122,504	137,508	160,547	168,809	193,657
> 75	100,471	124,321	143,814	161,356	188,816	198,457	227,512

Zone 1							
One Adult + Two Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	12,109	14,895	17,278	19,430	22,946	24,142	27,705
26-30	12,315	15,152	17,585	19,773	23,310	24,527	28,158
31-35	13,366	16,461	19,107	21,497	25,300	26,628	30,583
36-40	14,285	17,603	20,442	23,001	26,993	28,418	32,658
41-45	16,851	20,779	24,126	27,145	31,885	33,565	38,567
46-50	19,575	24,148	28,042	31,547	37,132	39,079	44,894
51-55	22,512	27,792	32,267	36,304	42,679	44,921	51,607
56-60	27,826	34,391	39,932	44,924	52,783	55,557	63,832
61-65	38,188	47,030	54,440	61,109	71,536	75,224	86,262
66-70	48,951	60,389	69,894	78,452	91,790	96,512	110,676
71-75	62,753	77,611	89,836	100,839	117,735	123,793	142,015
> 75	73,679	91,169	105,464	118,327	138,465	145,535	166,842

Zone 1							
Two Adults + Two Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	15,136	18,618	21,598	24,288	28,682	30,177	34,631
26-30	15,575	19,163	22,240	25,007	29,480	31,019	35,612
31-35	17,126	21,091	24,481	27,542	32,415	34,118	39,184
36-40	18,570	22,884	26,574	29,901	35,090	36,943	42,456
41-45	22,268	27,458	31,881	35,870	42,134	44,354	50,963
46-50	26,351	32,507	37,748	42,467	49,985	52,607	60,434
51-55	30,955	38,214	44,367	49,918	58,684	61,766	70,960
56-60	38,715	47,848	55,558	62,503	73,437	77,296	88,810
61-65	53,810	66,270	76,710	86,108	100,801	105,998	121,551
66-70	68,977	85,093	98,487	110,546	129,340	135,994	155,953
71-75	88,424	109,361	126,587	142,092	165,899	174,436	200,112
> 75	103,820	128,465	148,608	166,734	195,110	205,072	235,096

Zone 1
One Adult + Three Children

Age (in years)	2 L	3 L	4 L	5 L	6 L	7.5 L	10 L
18-25	14,799	18,205	21,118	23,748	28,045	29,507	33,861
26-30	14,850	18,271	21,206	23,844	28,109	29,576	33,955
31-35	15,873	19,548	22,689	25,527	30,043	31,621	36,317
36-40	16,665	20,537	23,849	26,835	31,491	33,154	38,101
41-45	19,258	23,747	27,572	31,023	36,440	38,360	44,076
46-50	21,834	26,935	31,277	35,187	41,416	43,589	50,074
51-55	24,389	30,108	34,956	39,330	46,236	48,664	55,908
56-60	29,641	36,634	42,537	47,854	56,226	59,180	67,995
61-65	39,924	49,168	56,914	63,887	74,787	78,644	90,183
66-70	51,176	63,134	73,071	82,018	95,962	100,899	115,707
71-75	65,605	81,139	93,919	105,423	123,086	129,420	148,470
> 75	77,028	95,313	110,257	123,706	144,759	152,150	174,426

Zone 1							
Two Adults + Three Children							
Age (in years)	2 L	3 L	4 L	5 L	6 L	7.5 L	10 L
18-25	17,827	21,928	25,438	28,606	33,781	35,542	40,787
26-30	18,110	22,282	25,861	29,078	34,279	36,068	41,409
31-35	19,632	24,178	28,063	31,573	37,159	39,111	44,919
36-40	20,951	25,818	29,981	33,735	39,589	41,679	47,899
41-45	24,675	30,426	35,327	39,748	46,689	49,149	56,472
46-50	28,610	35,294	40,984	46,108	54,270	57,116	65,614
51-55	32,831	40,530	47,056	52,944	62,241	65,509	75,260
56-60	40,529	50,091	58,162	65,433	76,880	80,919	92,973
61-65	55,546	68,407	79,185	88,886	104,052	109,417	125,472
66-70	71,202	87,838	101,664	114,112	133,512	140,381	160,984
71-75	91,276	112,889	130,670	146,675	171,250	180,063	206,567
> 75	107,169	132,609	153,402	172,113	201,404	211,687	242,680

Zone 2								
One Adult/Individual								
Age (in years)	1 L	2 L	3 L	4 L	5 L	6 L	7.5 L	10 L
90 days-17	4,201	5,827	7,106	8,202	9,187	10,851	11,398	13,025
18-25	4,307	6,079	7,478	8,675	9,755	11,520	12,121	13,909
26-30	NA	6,546	8,055	9,348	10,511	12,391	13,038	14,969
31-35	NA	7,550	9,298	10,792	12,142	14,290	15,040	17,274
36-40	NA	8,606	10,605	12,316	13,857	16,262	17,121	19,676
41-45	NA	10,877	13,413	15,573	17,522	20,582	21,667	24,895
46-50	NA	13,608	16,787	19,493	21,930	25,812	27,166	31,208
51-55	NA	16,954	20,930	24,300	27,340	32,141	33,829	38,865
56-60	NA	21,867	27,025	31,380	35,303	41,479	43,658	50,161
61-65	NA	31,373	38,638	44,725	50,204	58,770	61,800	70,868
66-70	NA	40,216	49,612	57,421	64,452	75,410	79,289	90,926
71-75	NA	51,554	63,761	73,805	82,844	96,725	101,702	116,672
> 75	NA	60,531	74,900	86,644	97,212	113,756	119,564	137,069

Zone 2							
Two Adults							
Age (in years)	2 L	3 L	4 L	5 L	6 L	7.5 L	10 L
18-25	8,815	10,843	12,578	14,145	16,704	17,575	20,169
26-30	9,492	11,679	13,555	15,241	17,967	18,905	21,704
31-35	10,947	13,482	15,648	17,605	20,720	21,808	25,047
36-40	12,479	15,378	17,858	20,093	23,580	24,825	28,530
41-45	15,772	19,448	22,581	25,407	29,844	31,416	36,098
46-50	19,731	24,341	28,265	31,799	37,428	39,391	45,252
51-55	24,583	30,348	35,235	39,643	46,605	49,052	56,354
56-60	31,706	39,187	45,501	51,189	60,144	63,304	72,734
61-65	45,491	56,024	64,851	72,796	85,217	89,611	102,759
66-70	58,313	71,938	83,261	93,456	109,344	114,970	131,843
71-75	74,754	92,454	107,017	120,124	140,251	147,468	169,175
> 75	87,770	108,605	125,633	140,957	164,946	173,368	198,750

Zone 2							
One Adult + One Child							
Age (in years)	2 L	3 L	4 L	5 L	6 L	7.5 L	10 L
18-25	8,511	10,469	12,145	13,657	16,128	16,969	19,473
26-30	8,838	10,874	12,620	14,190	16,728	17,601	20,208
31-35	9,814	12,087	14,029	15,784	18,576	19,552	22,456
36-40	10,758	13,257	15,394	17,322	20,328	21,401	24,595
41-45	13,053	16,095	18,688	21,026	24,698	26,000	29,874

46-50	15,649	19,305	22,417	25,220	29,684	31,241	35,890
51-55	18,649	23,023	26,730	30,074	35,355	37,212	42,751
56-60	23,507	29,052	33,733	37,950	44,589	46,932	53,923
61-65	32,942	40,569	46,961	52,714	61,709	64,890	74,412
66-70	42,226	52,093	60,293	67,675	79,180	83,254	95,472
71-75	54,132	66,949	77,495	86,987	101,561	106,787	122,506
> 75	63,557	78,645	90,976	102,072	119,444	125,542	143,923

Zone 2							
Two Adults + One Child							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	11,247	13,834	16,048	18,047	21,312	22,423	25,732
26-30	11,784	14,498	16,827	18,920	22,304	23,469	26,943
31-35	13,212	16,271	18,886	21,248	25,007	26,320	30,229
36-40	14,630	18,029	20,936	23,558	27,646	29,105	33,449
41-45	17,948	22,131	25,696	28,911	33,960	35,750	41,076
46-50	21,772	26,859	31,189	35,088	41,300	43,466	49,933
51-55	26,278	32,441	37,665	42,377	49,819	52,435	60,240
56-60	33,346	41,213	47,854	53,837	63,255	66,578	76,496
61-65	47,060	57,956	67,087	75,306	88,155	92,701	106,303
66-70	60,324	74,419	86,132	96,678	113,114	118,934	136,389
71-75	77,331	95,642	110,707	124,267	145,087	152,553	175,008
> 75	90,796	112,350	129,965	145,818	170,634	179,346	205,604

Zone 2							
One Adult + Two Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	10,943	13,460	15,615	17,559	20,736	21,817	25,037
26-30	11,129	13,693	15,892	17,869	21,065	22,165	25,447
31-35	12,079	14,876	17,267	19,426	22,863	24,064	27,638
36-40	12,909	15,908	18,473	20,786	24,393	25,681	29,514
41-45	15,228	18,778	21,803	24,531	28,815	30,333	34,853
46-50	17,690	21,823	25,341	28,509	33,556	35,316	40,571
51-55	20,345	25,116	29,160	32,808	38,570	40,595	46,637
56-60	25,147	31,079	36,087	40,598	47,700	50,207	57,685
61-65	34,511	42,501	49,197	55,225	64,647	67,980	77,955
66-70	44,237	54,574	63,164	70,897	82,951	87,218	100,018
71-75	56,710	70,137	81,185	91,129	106,397	111,872	128,339
> 75	66,584	82,390	95,308	106,933	125,132	131,521	150,776

Zone 2							
Two Adults + Two Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	13,678	16,825	19,518	21,949	25,920	27,271	31,296
26-30	14,075	17,317	20,099	22,599	26,641	28,032	32,183
31-35	15,477	19,060	22,123	24,890	29,294	30,832	35,411
36-40	16,782	20,680	24,015	27,022	31,711	33,386	38,368
41-45	20,123	24,813	28,811	32,416	38,077	40,083	46,055
46-50	23,813	29,377	34,113	38,378	45,172	47,541	54,615
51-55	27,974	34,534	40,095	45,111	53,033	55,818	64,126
56-60	34,986	43,240	50,208	56,484	66,366	69,853	80,258
61-65	48,629	59,888	69,323	77,817	91,094	95,791	109,846
66-70	62,334	76,899	89,003	99,901	116,885	122,899	140,935
71-75	79,909	98,830	114,397	128,409	149,923	157,638	180,842
> 75	93,823	116,095	134,297	150,678	176,322	185,324	212,457

Zone 2							
One Adult + Three Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	13,374	16,452	19,084	21,461	25,344	26,665	30,601
26-30	13,420	16,512	19,164	21,548	25,402	26,728	30,686
31-35	14,344	17,666	20,505	23,069	27,150	28,576	32,820
36-40	15,061	18,559	21,552	24,251	28,459	29,961	34,432
41-45	17,404	21,460	24,917	28,035	32,931	34,666	39,832
46-50	19,731	24,341	28,265	31,799	37,428	39,391	45,252
51-55	22,040	27,209	31,590	35,542	41,784	43,978	50,524
56-60	26,787	33,106	38,440	43,246	50,811	53,481	61,448
61-65	36,079	44,433	51,434	57,735	67,586	71,071	81,499
66-70	46,248	57,054	66,035	74,120	86,721	91,183	104,565
71-75	59,287	73,325	84,875	95,271	111,233	116,957	134,173
> 75	69,611	86,135	99,640	111,794	130,819	137,499	157,630

Zone 2							
Two Adults + Three Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	16,110	19,817	22,988	25,851	30,528	32,119	36,860
26-30	16,366	20,137	23,370	26,278	30,978	32,595	37,422
31-35	17,741	21,850	25,361	28,533	33,580	35,344	40,593
36-40	18,933	23,332	27,094	30,486	35,777	37,666	43,286
41-45	22,299	27,496	31,925	35,920	42,193	44,416	51,034
46-50	25,855	31,895	37,037	41,668	49,044	51,616	59,296
51-55	29,669	36,627	42,525	47,845	56,247	59,201	68,013
56-60	36,626	45,267	52,561	59,132	69,477	73,127	84,020
61-65	50,197	61,820	71,560	80,327	94,032	98,881	113,389
66-70	64,345	79,380	91,874	103,124	120,655	126,863	145,481
71-75	82,487	102,018	118,087	132,551	154,759	162,723	186,675
> 75	96,849	119,840	138,630	155,539	182,010	191,303	219,311

Zone 3								
One Adult/Individual								
Age (in years)	**1 L**	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
90 days-17	3,121	4,330	5,282	6,095	6,828	8,063	8,470	9,682
18-25	3,199	4,517	5,557	6,447	7,249	8,561	9,007	10,337
26-30	NA	4,864	5,986	6,946	7,811	9,208	9,689	11,122
31-35	NA	5,098	6,278	7,289	8,199	9,649	10,157	11,664
36-40	NA	6,041	7,446	8,646	9,729	11,417	12,019	13,813
41-45	NA	7,098	8,748	10,161	11,430	13,428	14,135	16,241
46-50	NA	8,985	11,085	12,873	14,481	17,044	17,941	20,609
51-55	NA	9,611	11,864	13,774	15,496	18,217	19,176	22,029
56-60	NA	12,959	16,015	18,595	20,919	24,580	25,870	29,725
61-65	NA	18,591	22,897	26,503	29,751	34,825	36,621	41,997
66-70	NA	23,832	29,400	34,027	38,192	44,687	46,986	53,882
71-75	NA	30,551	37,784	43,735	49,093	57,317	60,268	69,140
> 75	NA	35,869	44,385	51,343	57,606	67,409	70,852	81,225

Zone 3							
Two Adults							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	6,550	8,058	9,348	10,511	12,414	13,060	14,988
26-30	7,052	8,680	10,072	11,327	13,351	14,049	16,127
31-35	7,392	9,103	10,569	11,889	13,991	14,727	16,913
36-40	8,760	10,796	12,537	14,107	16,554	17,428	20,029
41-45	10,291	12,685	14,733	16,574	19,470	20,495	23,549
46-50	13,028	16,073	18,666	20,998	24,714	26,014	29,883
51-55	13,935	17,202	19,973	22,470	26,415	27,805	31,942
56-60	18,790	23,222	26,963	30,332	35,641	37,512	43,101
61-65	26,957	33,200	38,430	43,138	50,496	53,101	60,895
66-70	34,556	42,630	49,339	55,379	64,797	68,129	78,130
71-75	44,299	54,786	63,416	71,185	83,110	87,388	100,252
> 75	52,010	64,358	74,448	83,529	97,743	102,735	117,776

Zone 3							
One Adult + One Child							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	6,324	7,780	9,026	10,148	11,986	12,609	14,472
26-30	6,566	8,081	9,377	10,545	12,430	13,080	15,015
31-35	6,627	8,161	9,475	10,659	12,544	13,204	15,164
36-40	7,551	9,307	10,808	12,161	14,271	15,024	17,266
41-45	8,517	10,498	12,193	13,716	16,113	16,962	19,489
46-50	10,332	12,748	14,804	16,653	19,600	20,632	23,700
51-55	10,572	13,050	15,152	17,046	20,039	21,093	24,231
56-60	13,930	17,216	19,990	22,487	26,424	27,811	31,954
61-65	19,521	24,041	27,828	31,238	36,566	38,452	44,097
66-70	25,024	30,870	35,728	40,102	46,922	49,335	56,577
71-75	32,079	39,673	45,922	51,548	60,183	63,281	72,596
> 75	37,662	46,604	53,910	60,486	70,780	74,395	85,286

Zone 3							
Two Adults + One Child							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	8,357	10,280	11,927	13,410	15,838	16,663	19,123
26-30	8,755	10,775	12,503	14,061	16,574	17,440	20,020

31-35	8,921	10,986	12,755	14,349	16,886	17,774	20,412
36-40	10,270	12,657	14,699	16,539	19,408	20,433	23,482
41-45	11,711	14,434	16,765	18,860	22,156	23,322	26,797
46-50	14,376	17,736	20,597	23,170	27,270	28,705	32,975
51-55	14,896	18,389	21,350	24,019	28,237	29,723	34,144
56-60	19,762	24,423	28,358	31,901	37,485	39,452	45,330
61-65	27,887	34,345	39,755	44,626	52,237	54,932	62,995
66-70	35,748	44,100	51,041	57,288	67,031	70,479	80,824
71-75	45,827	56,675	65,603	73,639	85,976	90,401	103,709
> 75	53,803	66,577	77,015	86,409	101,114	106,278	121,837

Zone 3							
One Adult + Two Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	8,131	10,003	11,605	13,048	15,410	16,212	18,606
26-30	8,268	10,176	11,809	13,279	15,653	16,471	18,908
31-35	8,156	10,044	11,662	13,119	15,439	16,251	18,663
36-40	9,062	11,168	12,970	14,593	17,125	18,029	20,719
41-45	9,937	12,247	14,225	16,003	18,799	19,788	22,737
46-50	11,680	14,411	16,735	18,826	22,157	23,323	26,792
51-55	11,533	14,236	16,529	18,596	21,861	23,011	26,434
56-60	14,902	18,417	21,385	24,056	28,267	29,751	34,183
61-65	20,450	25,186	29,153	32,726	38,307	40,283	46,196
66-70	26,215	32,340	37,430	42,011	49,156	51,684	59,271
71-75	33,606	41,562	48,109	54,002	63,049	66,294	76,053
> 75	39,456	48,823	56,478	63,367	74,150	77,937	89,347

Zone 3							
Two Adults + Two Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	10,164	12,503	14,506	16,310	19,263	20,265	23,258
26-30	10,457	12,870	14,934	16,795	19,796	20,831	23,913
31-35	10,450	12,869	14,942	16,809	19,781	20,821	23,912
36-40	11,780	14,519	16,860	18,971	22,262	23,437	26,935
41-45	13,131	16,184	18,798	21,146	24,841	26,149	30,045
46-50	15,723	19,399	22,528	25,342	29,827	31,396	36,066
51-55	15,858	19,575	22,728	25,569	30,058	31,640	36,347
56-60	20,734	25,624	29,753	33,470	39,328	41,393	47,559
61-65	28,816	35,490	41,080	46,114	53,979	56,763	65,095
66-70	36,939	45,570	52,742	59,198	69,265	72,828	83,518
71-75	47,354	58,565	67,790	76,094	88,841	93,415	107,166
> 75	55,597	68,796	79,582	89,289	104,484	109,821	125,898

Zone 3							
One Adult + Three Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	9,938	12,225	14,183	15,948	18,834	19,815	22,741
26-30	9,971	12,272	14,240	16,014	18,876	19,862	22,801
31-35	9,685	11,928	13,849	15,579	18,333	19,298	22,162
36-40	10,572	13,030	15,131	17,026	19,979	21,033	24,172
41-45	11,356	13,997	16,257	18,289	21,484	22,615	25,985
46-50	13,028	16,073	18,666	20,998	24,714	26,014	29,883
51-55	12,494	15,423	17,907	20,145	23,682	24,929	28,637
56-60	15,874	19,618	22,779	25,625	30,111	31,691	36,413
61-65	21,380	26,331	30,479	34,213	40,049	42,115	48,296
66-70	27,407	33,810	39,131	43,921	51,390	54,034	61,965
71-75	35,134	43,451	50,296	56,457	65,915	69,308	79,510
> 75	41,249	51,042	59,045	66,247	77,520	81,480	93,408

Zone 3							
Two Adults + Three Children							
Age (in years)	**2 L**	**3 L**	**4 L**	**5 L**	**6 L**	**7.5 L**	**10 L**
18-25	11,970	14,726	17,084	19,210	22,687	23,868	27,393
26-30	12,159	14,965	17,366	19,529	23,019	24,223	27,806
31-35	11,979	14,753	17,129	19,268	22,675	23,868	27,411
36-40	13,291	16,380	19,022	21,404	25,117	26,442	30,388
41-45	14,550	17,934	20,830	23,432	27,527	28,976	33,293
46-50	17,071	21,062	24,459	27,514	32,383	34,087	39,157
51-55	16,819	20,761	24,105	27,119	31,880	33,558	38,550
56-60	21,706	26,825	31,147	35,039	41,172	43,333	49,789
61-65	29,746	36,635	42,405	47,601	55,720	58,594	67,195

66-70	38,131	47,040	54,443	61,107	71,500	75,177	86,212
71-75	48,882	60,454	69,977	78,549	91,707	96,428	110,623
> 75	57,390	71,015	82,149	92,170	107,855	113,363	129,959

*Premiums exclusive of Goods & Services Tax.
**Age in completed years
*** For Family Floater, premium would applicable as per the age of the eldest member in the family.
**** The premiums above are subject to revision as and when approved by the regulator. However, such revised premiums would be applicable only from subsequent renewals and with due notice whenever implemented.

Annexure 3: Schedule of Benefits

			Plans Options						
			Gold Plan			Platinum Plan	Topaz Plan		Ruby Plan
A	Eligibility	**Sum Insured options (in ₹)**	**50,000* 1,00,000* 1,50,000***	**2,00,000 2,50,000**	**3,00,000 3,50,000 4,00,000 4,50,000 5,00,000**	**6,00,000 7,50,000 8,00,000 9,00,000 10,00,000**	**1,00,000 ***	**2,00,000 3,00,000 4,00,000 5,00,000**	**6,00,000 7,50,000 10,00,000**
		Entry age of Proposer	18 years – 70 years	18 years – 70 years	18 years – 70 years	18 years – 70 years	18 years – 70 years	18 years – 70 years	18 years – 70 years
		Entry age of Child	90 days – 25 years	90 days – 25 years	90 days – 25 years	90 days – 25 years	90 days – 25 years	90 days – 25 years	90 days – 25 years
		Maximum Renewal Age	Lifelong	Lifelong	Lifelong	Lifelong	Lifelong	Lifelong	Lifelong
		Individual/ Family Floater SI Options	Individual	Both	Both	Both	Individual	Both	Both
		Policy Term	1/ 2/ 3 years	1/ 2/ 3 years	1/ 2/ 3 years	1/ 2/ 3 years	1/ 2/ 3 years	1/ 2/ 3 years	1/ 2/ 3 years
		Family Definition – Individual SI	S+Sp/Lp +4C+2P	S+Sp/Lp +4C+2P	S+Sp/Lp +4C+2P	S+Sp/Lp+ 4C+2P	S+Sp/Lp +4C+2P	S+Sp/Lp +4C+2P	S+Sp/Lp+4 C+2P
		Family Definition – Family Floater SI	Not Applicable	S+Sp/Lp +3C	S+Sp/Lp +3C	S+Sp/Lp+ 3C	Not Applicable	S+Sp/Lp +3C	S+Sp/Lp+3 C
B	Hospitalisation Benefits	Hospitalisation	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI	Up to SI
		Room Rent Limit	1% of SI per day for non ICU and 2% of SI per day for ICU up to 35% of the SI per claim	As per actuals	As per actuals	As per actuals	1% of the SI per day for non ICU room	1% of the SI per day for non ICU room	1% of the SI per day for non ICU room
		Surgeon, Anaesthetist, Medical Practitioner, Consultants, Specialists Fees	up to 35% of the SI per claim	As per actuals	As per actuals	As per actuals	As per the co-payment clause for room rent	As per the co-payment clause for room rent	As per the co-payment clause for room rent
		Anaesthesia, Blood, Oxygen, Operation	up to 40% of the SI per claim	As per actuals	As per actuals	As per actuals	As per the co-payment clause	As per the co-payment clause	As per the co-payment

		Theatre Charges, Surgical Appliances, Medicines & Drugs, Diagnostic Materials and X-ray, Cost of Pacemaker, prosthesis/ internal implants and any Medical expenses incurred which is integral part of the operation					for room rent	for room rent	clause for room rent
		Day Care Treatment	Covered	Covered	Covered	Covered	Covered	Covered	Covered
		Pre-Hospitalisation	60 days, as actuals	60 days, as actuals	60 days, as actuals	60 days, as actuals	Medical Expenses up to 1% of Sum Insured up to maximum 60 days	Medical Expenses up to 1% of Sum Insured up to maximum 60 days	Medical Expenses up to 1% of Sum Insured up to maximum 60 days
		Post-Hospitalisation	90 days, as actuals	90 days, as actuals	90 days, as actuals	90 days, as actuals	Medical Expenses up to 1% of Sum Insured up to maximum 90 days	Medical Expenses up to 1% of Sum Insured up to maximum 90 days	Medical Expenses up to 1% of Sum Insured up to maximum 90 days
		Cumulative Bonus - 10% for every claim free year to Max 50%	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
		Hospital cash benefit	Not Applicable	Not Applicable	Not Applicable	₹ 500/- per day, up to 60 days	Not Applicable	Not Applicable	₹ 500/- per day , up to 60 days
		Patient Care (Above 60 years) - Per day Benefit	₹ 500/- per day, maximum up to 10 days and 30 days in a policy period	₹ 500/- per day, maximum up to 10 days and 30 days in a policy period	₹ 500/- per day, maximum up to 10 days and 30 days in a policy period	₹ 500/- per day, maximum up to 10 days and 30 days in a policy period	₹ 350/- per day, maximum up to 10 days and 30 days in a policy period	₹ 350/- per day, maximum up to 10 days and 30 days in a policy period	₹ 350/- per day, maximum up to 10 days and 30 days in a policy period
		Accidental Hospitalisation – 25%	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable

		increase subject to Maximum of ₹ 1 lacs irrespective of number of claims in a Policy period							
		Accompanying Person - ₹ 500/- per day for child up to 10 years, maximum up to 30 days in a Policy Year	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
		Organ donor expenses	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
C	Sublimit for Specified procedure's	Mandatory Sub limits for Modern Treatment Methods and Advancement in Technologies	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
D	Recharge Benefit	Recharge Benefit	Not Applicable	Not Applicable	Applicable	Applicable	Not Applicable	Applicable for Sum Insured 3 L and above	Applicable
E	Ambulance	Ambulance charges	₹ 2000 per hospitalization	₹ 2000 per hospitalization	₹ 2000 per hospitalization	₹ 2000 per hospitalization	₹ 750/- per hospitalization and overall limit of ₹ 1500/- per policy period	₹ 750/- per hospitalization and overall limit of ₹ 1500/- per policy period	₹ 750/- per hospitalization and overall limit of ₹ 1500/- per policy period
F	Discount	Family discount of 10% is applicable in case more than one family member is covered on individual sum insured basis in the same policy, except for the policy with coverage for one adult with one or more children, the family	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable

		discount shall be on basis of age of the Adult as per below table: **Age Bands** / **Discont** <=65 / 10.0% 66-70 / 7.5% 71-75 / 5.0% 76 & above / 4.0%							
		Long term Discount (on single premium payment) – 5% for 2 year policy and 10% for 3 year policy	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
		Loyalty Discount – 2.5% discount if the client already has a separate Retail Health insurance policy (other than Health Suraksha/ Personal Accident /Travel) from Generali Central Insurance Company Limited The loyalty discount shall continue only if the insured maintains the separate health insurance policy with us	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
G	Premium instalment option (monthly, quarterly, half yearly) with Loading	Option of paying premium on instalment basis. Available for 1 year, 2 years and 3 years policy terms	Available	Available	Available	Available	Available	Available	Available

H	Waiting Periods	Pre-existing Disease- 36 months	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
		30 day - fresh proposals excluding Accidental Hospitalization	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
		1 year Waiting Period for listed conditions	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
		2 years Waiting Period for listed conditions	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
		3 years Waiting Period - Joint Replacement and Organ Transplant	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
I	Zone wise pricing	Zone wise pricing	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable
J	Disease wise Sublimits	Applicable for specific ailments	Not Applicable except for Cataract	Not Applicable except for Cataract	Not Applicable except for Cataract	Not Applicable except for Cataract	Applicable as per sub-limits table	Applicable as per sub-limits table	Applicable as per sub-limits table
K	Free Medical Check up	Medical Check-up - At the end of every continuous period of 4 claim free years	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable	Applicable

* Note –
Sum insured of ₹ 50000, 100000, 150000 will be applicable only for Children up to age of 25 years.

SI: Sum insured, S: Self, Sp: Spouse, Lp: Live-in partner, C: Child, P: Parent

Annexure 4: Sub-limits table

Sub-limits table applicable for Topaz and Ruby Plans

The Medical Expenses incurred during hospitalization (inclusive of pre and post hospitalization) due to the below listed treatments shall be limited to actual expenses or up to the Sub limits (whichever is less). All values are in INR.

Procedure/ Treatment	**Topaz Plan**	**Topaz Plan**	**Topaz Plan**	**Ruby Plan**
	1,00,000	**2,00,000 3,00,000**	**4,00,000 5,00,000**	**6,00,000 7,50,000 10,00,000**
Cataract surgery (per eye)	10000	20000	30000	40000
Hysterectomy	20000	35000	45000	55000
Gall Bladder removal	20000	35000	45000	55000
Surgery on piles	15000	20000	30000	40000
Surgery Fissure, Fistula, Sinus	15000	20000	30000	40000
Surgery of Deviated Nasal Septum correction	15000	20000	30000	40000
Angiography invasive	10000	15000	20000	30000
Percutaneous Transluminal Coronary Angioplasty (PTCA)	40000	80000	120000	150000
Appendectomy	20000	30000	40000	50000
Hernia	20000	30000	40000	50000
Surgery of renal stone/ Lithotripsy	20000	30000	40000	50000
Prostate Surgery TURP	30000	75000	100000	120000
Coronary Artery Bypass Grafting (CABG)	80000	100000	150000	200000
Total Knee Replacement (per knee)	40000	80000	120000	150000
Total Hip Replacement (per hip)	40000	80000	120000	150000
Tonsillectomy/ Adenoidectomy	15000	25000	35000	45000
Transplant surgery (this includes total cost of organ donor surgery, recipient surgery and hospitalization)	80000	100000	150000	200000
Dialysis (policy limit)	10000	15000	20000	30000