

 **Premium Table: All figure in INR**

Annual Premium Table Medi Prime: Individual						
Sl Age Group	200,000	300,000	400,000	500,000	750,000	1,000,000
0-17	2,556	2,694	2,894	3,144	3,371	3,544
18-35	3,015	3,410	4,419	5,532	6,187	6,558
36-45	3,757	4,218	5,586	6,992	7,820	8,289
46-50	6,122	7,253	9,037	11,311	12,657	13,417
51-55	7,906	9,641	12,014	15,039	16,829	17,841
56-60	9,202	11,187	13,943	17,453	19,530	20,705
61-65	15,007	17,651	22,002	27,541	30,822	32,677
66-70	19,307	24,272	30,257	37,876	42,393	44,946
>70	21,400	28,427	35,438	44,361	50,034	53,047

Annual Premium Table Medi Prime: Family Floater

Age Oldest*	1 Adult + 2 Children					
Member	200,000	300,000	400,000	500,000	750,000	1,000,000
18-35	6,748	7,251	8,283	9,589	10,489	11,072
36-45	7,389	8,010	9,230	10,774	11,815	12,478
46-50	9,323	10,524	12,567	15,142	16,763	17,735
51-55	11,016	12,779	15,619	19,188	21,358	22,620
56-60	12,191	14,192	17,502	21,657	24,156	25,593
61-65	18,399	21,220	26,174	32,480	36,260	38,424
66-70	22,249	27,149	33,567	41,734	46,621	49,410
>70	24,124	30,869	38,206	47,542	53,463	56,665

Annual Premium Table Medi Prime: Family Floater

Age Oldest*	2 Adult					
Member	200,000	300,000	400,000	500,000	750,000	1,000,000
18-35	4,742	5,250	7,324	9,164	10,248	10,862
36-45	5,687	6,371	8,894	11,134	12,452	13,199
46-50	8,948	10,461	13,031	16,312	18,250	19,346
51-55	11,794	14,236	17,738	22,205	24,845	26,339
56-60	14,224	17,270	21,522	26,941	30,147	31,960
61-65	23,165	27,473	34,243	42,865	47,969	50,856
66-70	31,129	38,552	48,057	60,157	67,329	71,383
>70	37,094	48,396	60,331	75,523	85,018	90,138

Annual Premium Table Medi Prime: Family Floater

Age Oldest*	2 Adult + 2 Children					
Member	200,000	300,000	400,000	500,000	750,000	1,000,000
18-35	7,525	8,235	11,457	13,586	14,966	15,818
36-45	8,650	9,510	12,942	15,448	17,050	18,028
46-50	12,647	14,365	17,349	21,149	23,488	24,864
51-55	15,557	18,239	22,388	27,674	30,856	32,690
56-60	17,963	21,260	26,259	32,628	36,434	38,610
61-65	26,692	31,201	38,623	48,074	53,712	56,928
66-70	34,220	41,675	51,682	64,422	72,014	76,332
>70	39,859	50,981	63,286	78,948	88,737	94,063

Annual Premium Table Medi Prime: Family Floater

Age Oldest*	1 Adult + 1 Child					
Member	200,000	300,000	400,000	500,000	750,000	1,000,000
18-35	4,777	5,177	6,065	7,194	7,926	8,377
36-45	5,432	5,953	7,033	8,405	9,280	9,814
46-50	7,317	8,405	10,208	12,491	13,888	14,706
51-55	8,931	10,558	13,024	16,140	18,009	19,082
56-60	10,062	11,913	14,769	18,375	20,526	21,754
61-65	16,277	18,932	23,469	29,246	32,688	34,647
66-70	20,210	24,989	31,022	38,701	43,274	45,871
>70	22,125	28,790	35,762	44,634	50,264	53,283

Annual Premium Table Medi Prime: Family Floater

Age Oldest*	1 Adult + 3 Children					
Member	200,000	300,000	400,000	500,000	750,000	1,000,000
18-35	8,519	9,113	10,267	11,723	12,770	13,469
36-45	9,138	9,846	11,182	12,868	14,051	14,827
46-50	11,063	12,348	14,553	17,324	19,111	20,206
51-55	12,792	14,646	17,743	21,622	24,012	25,420
56-60	14,004	16,111	19,762	24,329	27,097	28,701
61-65	20,131	23,060	28,309	34,989	39,017	41,337
66-70	23,849	28,786	35,449	43,927	49,024	51,947
>70	25,660	32,380	39,930	49,536	55,632	58,954

Annual Premium Table Medi Prime: Family Floater

Age Oldest*	2 Adult + 1 Child					
Member	200,000	300,000	400,000	500,000	750,000	1,000,000
18-35	6,128	6,883	9,515	11,517	12,762	13,504
36-45	7,201	7,948	11,052	13,445	14,920	15,792
46-50	10,939	12,575	15,395	18,991	21,161	22,415
51-55	13,847	16,439	20,328	25,286	28,244	29,932
56-60	16,276	19,479	24,168	30,144	33,695	35,715
61-65	25,167	29,614	36,786	45,919	51,346	54,428
66-70	32,961	40,458	50,307	62,845	70,295	74,519
>70	38,800	50,094	62,321	77,884	87,609	92,876

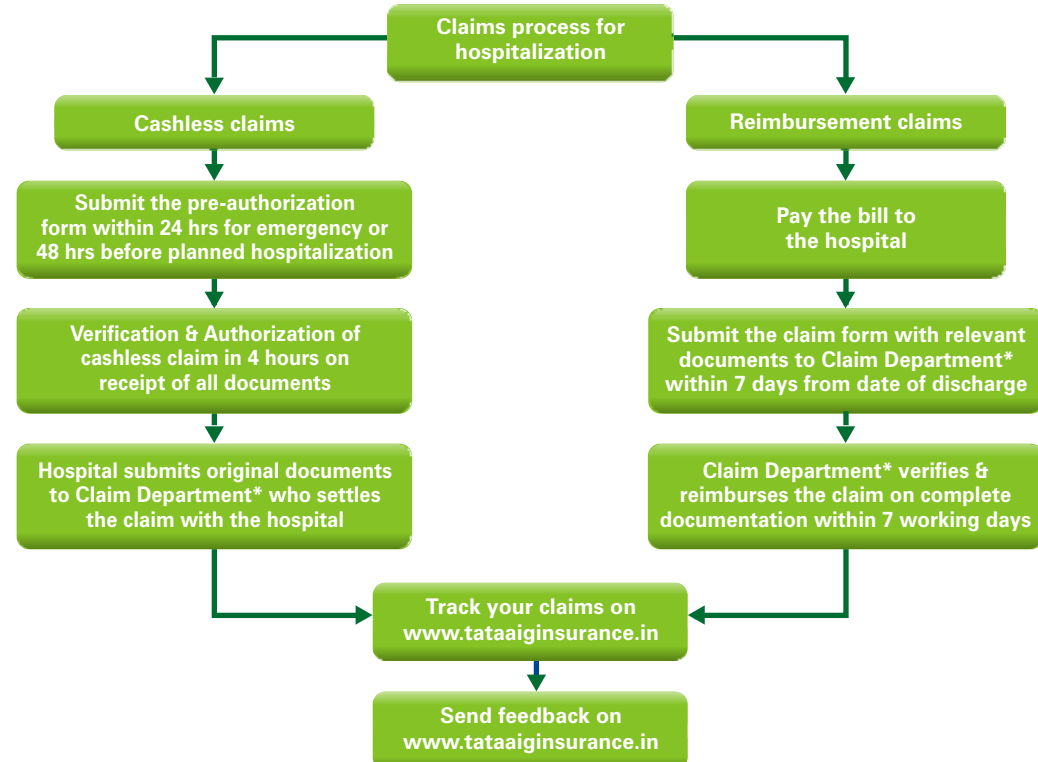
Annual Premium Table Medi Prime: Family Floater

Age Oldest*	2 Adults + 3 Children					
Member	200,000	300,000	400,000	500,000	750,000	1,000,000
18-35	8,898	9,677	13,061	15,393	16,924	17,880
36-45	10,023	10,952	14,546	17,255	19,008	20,090
46-50	14,020	15,807	18,953	22,956	25,446	26,926
51-55	16,930	19,681	23,992	29,481	32,814	34,752
56-60	19,336	22,702	27,863	34,435	38,392	40,672
61-65	28,065	32,643	40,227	49,881	55,670	58,990
66-70	35,593	43,117	53,286	66,229	73,972	78,394
>70	41,232	52,423	64,890	80,755	90,695	96,125

 **Key Exclusions:**

Any treatment which begins during waiting periods except Accident related / War / Intentional self injury or attempted suicide / Abuse of drugs and alcohol and nicotine addiction / Treatment of Obesity / Sleep Apnoea / Maternity / Psychiatric or mental disorders / Congenital diseases / Conditions related to or arising out of HIV/AIDS / etc.

Note: Please refer to policy wordings available on www.tataaiginsurance.in for complete list of exclusions

 Easy 3 step process for smooth & fast claims settlement**Tentative list of claim document required with signed claim form are as below:**

- First consultation letter and subsequent prescription
- Original Bills - Hospital / Medicines/Investigation / Implants
- Original detailed discharge / Day care summary from the hospital
- Original Receipts - Hospital / Medicines/Investigation / Implants

For detailed claims process please refer to Claims Guide Book available on www.tataaiginsurance.in

***Family Health Plan (TPA) Ltd** - Claims Department, Tata AIG General Insurance Company (Tata AIG)

Ground Floor, Srinilaya – Cyber Spazio, Road No: 2, Banjara Hills, Hyderabad 500 034 • FHPL Toll Free No: 1800 425 4090



Call us
24x7 Toll Free Helpline
1800-266-7780



Write to us
customersupport@tata-aig.com



For Claims
24x7 Toll Free Claims Helpline
1800-425-4033

This is only a summary of the product features. *Tax benefits are applicable subject to changes in tax laws. The actual benefits available are as described in the policy, and will be subject to the policy terms, conditions and exclusions.

Insurance is the subject matter of the solicitation. For more details on risk factors, terms and conditions, please read sales brochure carefully, before concluding a sale. Tata AIG General Insurance Company Ltd. Registered office: Peninsula Corporate Park, Piramal Tower, 9th Floor, G.K. Marg, Lower Parel, Mumbai - 400013. Toll Free No. 1800 266 7780. For more information visit us at www.tataaiginsurance.in

Tata AIG MediPrime



WITH YOU ALWAYS



Health Emergencies come without any advance notice and may result in a financial emergency for you and your family. You may not be able to prevent a health emergency but you can certainly prevent it from becoming a financial burden.

We at Tata AIG understand this need of comprehensive Health Insurance that you can trust to take care of you and your family in case of a medical exigency.

Presenting Tata AIG's MediPrime, an open and transparent Health Insurance without sub-limits or capping of benefits for certain diseases, so that you can focus your or your family's recovery without any worry.



Why Tata AIG's MediPrime?

- Comprehensive Hospitalization coverage including in-patient hospitalization, day care procedures, domiciliary (treatment at home) & organ donor expenses without any sub-limits.
- Coverage for pre & post hospitalization expenses.
- Unique benefits like Vaccination on animal bite, accidental dental treatment, daily cash for accompanying child, Ayush Benefit (Non-allopathic treatment) etc.
- Entry age up to 65 years.
- Insurance cover for life on continuous renewal



- No loading on renewal in case of a claim.
- 10% No claims bonus on sum assured for every claim free year.
- Family discount of 10% if 3 or more family members are covered under Individual plans.
- Portability from any another health insurance plan.
- Cashless hospitalization across a strong and growing +3000 network of hospitals.
- Tax benefits under section 80D*.



What does Tata AIG's MediPrime cover?

Coverage without any sub-limits on health expenses

- a) Room & ICU charges.
- b) Day Care Procedures - Medical expenses for 140 different Day Care procedures which do not require 24 hours hospitalization due to technological advancement.
- c) Domiciliary Treatment - Medical Expenses incurred by an Insured Person for availing medical treatment at his home which would otherwise have required hospitalization.
- d) Organ Donor - In-patient medical expenses incurred on the insured (i.e. recipient) and the organ donor for harvesting (i.e. surgery & storage of organ) for organ transplantation.

Unique health benefits from Tata AIG's MediPrime

- a) Coverage for Vaccination for Animal-bite treatment.
- b) Inpatient and outpatient coverage for Accidental Dental treatment.
- c) Ayush Benefit: Coverage for Non-allopathic in-patient treatments like Ayurvedic, Unani or Homeopathy.
- d) Daily Cash Benefit for accompanying an insured child.
- e) Pre and Post Hospitalization Medical Expenses related to hospitalization - 30 days immediately before hospitalization and 60 days immediately after discharge.

Get your Medical Expenses incurred upto 60 days prior to admission & 90 days post discharge from hospitalization covered, by informing us 5 days or more in advance from the date of Hospitalization.
- f) Health check-up at the end of 4 continuous renewals for every insured person.
- g) Emergency Ambulance Expenses.



Tata AIG MediPrime at-a-glance

Term	Option of choosing 1 year or 2 years For a 2 year term option, 5% discount is applicable. Premium for 2 year policy is as per age slab applicable for each year. E.g. a) Proposed Insured Age 34 years opting for Medi Prime Individual 2 year policy with Sum Insured of Rs 2 Lac. Calculation - 3015X 2 X 95% = Rs. 5728.5/- plus taxes. b) Proposed Insured Age 35 years opting for Medi Prime Individual 2 year policy with Sum Insured of Rs 2 Lac. Calculation - (3015+3757) X 95% = Rs. 6433.4/- plus taxes.
Eligibility Criteria	Entry age is 18 - 65 years No medical check-up up to 45 years and up to Sum Insured of ₹ 5 lacs.
Policy options	Individual & Family Floater 10% Family discount in Individual plan if 3 or more family members are covered.
Family floater	In family floater policy, you can insure yourself, your spouse with up to 3 dependent children (from 91 days onwards to 21 years) & your dependent parents. Family floater is available in various options of 1A + 1C, 1A + 2C, 1A + 3C, 2A + C, 2A + 2C & 2A + 3C where A = Adult & C = Child
Sum Insured options	₹ 2 lacs, ₹ 3 lacs, ₹ 4 lacs, ₹ 5 lacs, ₹ 7.5 lacs & ₹ 10 lacs
Co-Pay	No co-pay is applicable
Pre-Policy Check-up (PPC)	Only for age above 45 years & for Sum Insured greater than 5 lacs PPC will be carried out at our network list of diagnostic centres as available on our website. As per IRDA regulation, on acceptance, the Insured will bear 50% of Medical costs and in case of decline; the refund of premium will be done after deducting the remaining 50% of medical test costs. The PPC grid is given below, having medical tests from level 1 to level 8. As an exception, medical costs for test levels from 1 – 4 will be borne fully by the Company. The medical reports are valid for a period of 90 days from the date of PPC.
Renewal terms	Policy is life-long renewable, subject to regular premium payment within the due date. You can renew your policy within 15 days from the expiry of the policy to be eligible for renewal benefits like cumulative bonus amount, continued pre-existing coverage etc.
Renewal benefits	Cumulative Bonus - 10% increase in your annual Sum Insured for every claim free year, subject to a maximum of 50%. In case a claim is made during a policy year, the cumulative bonus would reduce by 20% in the following year. Health Checkup - 1% of the Sum Insured per Policy subject to a maximum of Rs. 5,000 per Insured Person only once at the end of four continuous claim free years during which You have been insured with Us. Sum Insured Enhancement - Sum Insured can be enhanced at the time of renewal if no claim has been made. For 1 level increase in the Sum Insured there will no fresh medical tests. In case where the Sum Insured increase is more than 1 level, then fresh medical tests will be required. On acceptance of the increased sum insured, a fresh waiting period will be applicable only to the incremental sum insured.
Waiting period	30 days from the 1st inception of the policy (except accident) 24 months for specific illness and treatments from the 1st inception of the policy & will get reduced by 1 year on every continuous renewal.
Pre-existing Diseases	Pre-existing Diseases will be covered after a waiting period of 48 months & will get reduced by 1 year on every continuous renewal of your policy.
Portability	Transfer the accrued benefits and provide due allowances for pre-existing conditions and time bound exclusions for your health insurance policy for the period enjoyed with any other health insurance plans provided there is a continuous cover without any interruption. You need to approach at least 45 days prior to your expiry date to avoid any break in coverage Portability will be provided in accordance to IRDA guidelines issued from time to time.



Medi Prime - Schedule of Benefits

MediPrime Benefits (per Policy Year)	Sum Insured ₹ 2.00, ₹ 3.00, ₹ 4.00	Sum Insured ₹ 5.00, ₹ 7.50, ₹ 10.00
a) In-patient Treatment	Covered without Sub-limits	Covered without Sub-limits
b) Pre-hospitalization	Covered without Sub-limits	Covered without Sub-limits
c) Post-hospitalization	Covered without Sub-limits	Covered without Sub-limits
d) Day Care Procedures	Covered without Sub-limits	Covered without Sub-limits
e) Domiciliary Treatment	Covered without Sub-limits	Covered without Sub-limits
f) Organ Donor Expenses	Covered without Sub-limits	Covered without Sub-limits
g) Emergency Ambulance	Up to Rs. 2,500 per hospitalization	Up to Rs. 2,500 per hospitalization
h) Dental Treatment (In case of Accident)	n-patient treatment - Up to 100% of Sum Insured and Outpatient Dental treatment - Up to Rs 5,000.	In-patient treatment - Up to 100% of Sum Insured and Outpatient Dental treatment - Up to Rs 7,500.
l) Ayush Benefit	Inpatient Ayurveda, Unani, Sidha or Homeopathy treatment maximum up to Rs 20,000	Inpatient Ayurveda, Unani, Sidha or Homeopathy treatment maximum up to Rs 25,000
j) Daily Cash for Accompanying an Insured Child	Rs 300 per day, maximum up to Rs 9,000 per hospitalistation	Rs 500 per day, maximum up to Rs 15,000 per hospitalistation
k) Vaccination (In case of post-bite treatment)	In-patient treatment - Up to 100% of Sum Insured and Outpatient Vaccination - Up to Rs 5,000	In-patient treatment - Up to 100% of Sum Insured and Outpatient Vaccination - Up to Rs 5,000
l) Health Check-up	Up to 1% of the Sum Insured per Policy subject to a maximum of ₹ 5,000 per Insured Person only once at the end of a block of every continuous four claim free years.	Up to 1% of the Sum Insured per Policy subject to a maximum of ₹ 5,000 per Insured Person only once at the end of a block of every continuous four claim free years.

PPC grid for Age (Years)	Sum Insured ₹2 Lacs	Sum Insured ₹3.0, ₹4.0 & ₹5.0 Lacs	Sum Insured ₹7.5 & ₹10.0 Lacs
18-45	No medical tests	No medical tests	Level 2 - ME, RUA, FBS, ECG
46-55	Level 1 - ME, FBS, ECG	Level 4 - ME, RUA, FBS, ECG, CBC, TC	Level 4 - ME, RUA, FBS, ECG, CBC, TC
56-60	Level 2 - ME, RUA, FBS, ECG	Level 3 - ME, RUA, FBS, ECG, CBC, Lipids	Level 5 - ME, RUA, FBS, CBC, Lipids, SGOT, TMT, HbA1c, Sr Creat, PSA (males), USG abd (females)
61-65	Level 6 - ME, RUA, FBS, CBC, Lipids, TMT, SGOT, Total Proteins, Sr Creat, PSA (males), USG Abd (females)	Level 7 - ME, RUA, FBS, CBC, Lipids, TMT, SGOT, Total Proteins, Sr Creat, PSA (males), USG Abd (females) HbA 1c	Level 8 - ME, RUA, FBS, CBC, Lipids, TMT, LFT, RFT, HbA1c, PSA (males), USG Abd (females)

Note: ME = Medical Examination (Report), CBC = Complete Blood Count, ECG = Electro Cardio Gram, FBS = Fasting Blood Sugar, Lipids = Lipid Profile, Sr Creatinine = Serum Creatinine, PSA = Prostate Specific antigen, RUA = Routine Urine Examination, TMT = Treadmill Test, USG = Ultrasonogram, SGOT - Serum Glutamic Oxaloacetic Transaminase, HbA1c - Glycoslated Hb, TC - Total Cholesterol, RFT = Renal function test, LFT = Liver function test

Test levels 1 to 4 will be paid fully by Tata AIG as a goodwill gesture as against 50% costs borne by the insured as per IRDA guidelines.

Test levels 5 to 8 the costs (per person) will range from Rs. 1,800 to Rs. 2,300 of which 50% costs to be paid by the proposed insured to specified diagnostic centres and the rest 50% of the costs will be paid by Tata AIG.

If you are required to undergo Pre Policy Check-Up, you must carry your photo ID (Original and a photocopy) to the network diagnostic centre.