

Wider Protection
to You And Your Family

Star Health Assure Insurance Policy



Health
Insurance

The Health Insurance Specialist

Star Health Assure Insurance Policy

Unique Identification No.: SHAHLIP23131V022223

Star Health Assure Insurance Policy is imbued with many new-age features and wider benefits which covers the expenses incurred on hospitalisation due to Illness or Accident on individual and floater basis. Coverages like Automatic Restoration of Sum Insured for unlimited number of times in a policy year, wellness discount up to 20%, the inclusion of up to 9 members of a family under family floater and Sum Insured option up to Rs.2 Crore make this policy the need of the hour to overcome the medical contingencies of future.

❑ Eligibility

a. **Floater Sum Insured**

- For Adults – Minimum - 18 years & Maximum - Up to 75 years
- For Dependent Children - Minimum - 16 days & Maximum - Up to 25 years
- In case of dependent children, at the time of renewal when they become 26 years of age, such children can continue under floater sum insured till he/she gets married.

b. **Individual Sum Insured**

- Minimum - 91 days and Maximum upto 75 years.
- For Children - Provided Good Health declaration, Pediatrician Opinion and the proposal should be routed through our Central Medical Underwriting Team.

❑ **Family Definition:** Self + Spouse + Children + Parents + Parents-in-law

❑ **Maximum Family Size Covered under Floater Sum Insured:** 6 Adults + 3 Children (6 Adults = Self + Spouse + Parents + Parents-in-law) however the family size can be 9 Adults, if children covered under floater sum insured are above 25 years of age

❑ **Policy Term:** One year / Two years / Three years: For policies more than one year, the Sum Insured is for each year, without any carry over benefit thereof.

Note: Where the policy is issued for more than 1 year, the Sum Insured including sub-limits are without any carry over benefit thereof. The said benefits / covers available for the 2nd year or 3rd year cannot be utilized in the 1st year itself

❑ Discounts

a. **Floater discount**

- **For Child** - 40% discount is available from 1A premium when he/she becomes 18 years in floater policy
- **For Parent/Parent in law** - 10% discount is available from 1A premium for each parent when they come under floater policy

b. **Long term discount:** In case 2 year policy term 10% discount is available on 2nd year premium and In case 3 year policy term 10% discount is available on 2nd and 3rd year premium

❑ **Type of Policy:** Individual sum insured and Floater sum insured

❑ **Sum Insured Options:** Rs.5,00,000/-, Rs.10,00,000/-, Rs.15,00,000/-, Rs.20,00,000/-, Rs.25,00,000/-, Rs.50,00,000/-, Rs.75,00,000/-, Rs.1,00,00,000/- and Rs.2,00,00,000/-

Note: Sum insured upto Rs.2,00,00,000/- is available for the persons entering upto 65 years and their renewals. For persons entering above 65 years the sum insured is restricted to Rs.50,00,000/- even for renewals.

❑ **Pre-Acceptance Medical Screening:** There is no Pre-Acceptance Medical Screening.

❑ **Instalment Facility:** Premium can be paid in Monthly, Quarterly and Half-yearly instalments.

In case of Instalment mode of payment, there will be loading on annual premium as given below

Monthly: 4% | Quarterly: 3% | Half Yearly: 2%

Note: Instalment facility is not available for long term (2 year and 3 year) policies.

❑ **Midterm Inclusion Facility:** Is available on payment of proportionate premium for Newly Wedded spouse, New born baby and Legally adopted child subject to the following

- Intimation about the marriage / new born baby / legally adopted child should be given within 45 days from the date of marriage or date of birth however coverage is available from the date of payment of premium

❑ **Special conditions**

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

❑ **Coverage**

- Room, Boarding, Nursing Expenses all inclusive as provided by the Hospital / Nursing Home as per the limits given below:-

Sum Insured in lakhs (Rs.)	5	10 / 15 / 20 / 25	50 / 75 / 100 / 200
Room Rent Criteria	Up to 1% of Sum Insured per day	Any Room (except suite or above category)	Any room

Note: Associated Medical expenses which vary based on the room occupied by the insured person will be considered in proportion to the room rent stated in the policy schedule or actuals whichever is less. Proportionate deductions are not applied in respect of the hospitals which do not follow differential billing or for those expenses in respect of which differential billing is not adopted based on the room rent.

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

3. Anesthesia, blood, oxygen, operation theatre charges, ICU charges, surgical appliances, medicines and drugs, diagnostic materials and X-ray, diagnostic imaging modalities, dialysis, chemotherapy, radiotherapy, cost of pacemaker, stent and similar expenses. With regard to coronary stenting, medicines, Implants and such other similar items, the Company will pay cost of stent as per the Drug Price Control Order (DPCO) / National Pharmaceuticals Pricing Authority (NPPA) Capping.
4. All day care treatments are covered.
5. **Coverage for Non-medical Items (Consumables):** Covered subject to an admissible claim under the policy. (For details please refer website: www.starhealth.in)
6. **Emergency Road ambulance:** Subject to an admissible hospitalization claim, road ambulance expenses incurred for the following are payable :-
 - i. for transportation of the insured person by private ambulance service to go to hospital when this is needed for medical reasons
or
 - ii. for transportation of the insured person by private ambulance service from one hospital to another hospital for better medical treatment
or
 - iii. for transportation of the insured person from the hospital where treatment is taken to their place of residence (if it is in same city) provided the requirement of an ambulance to the residence is certified by the medical practitioner.
7. **Air Ambulance:** Air ambulance expenses are payable subject to an admissible hospitalization claim, the Insured Person(s) is/are eligible for reimbursement of expenses incurred towards the cost of air ambulance service up to 10% of sum insured per policy year.
8. **Pre-hospitalization Expenses:** Medical expenses incurred up to 60 days immediately before the insured person is hospitalized.
9. **Post Hospitalization Expenses:** Medical expenses incurred up to 180 days immediately after the insured person is discharged from the hospital.
10. **Domiciliary Hospitalization:** Coverage for medical treatment (Including AYUSH) for a period exceeding three days, for an illness/disease/injury, which in the normal course, would require care and treatment at a Hospital but, on the advice of the attending Medical Practitioner, is taken whilst confined at home under any of the following circumstances
 1. The condition of the patient is such that he/she is not in a condition to be removed to a Hospital, or
 2. The patient takes treatment at home on account of non-availability of room in a hospital.
 However, this benefit shall not cover Asthma, Bronchitis, Chronic Nephritis and Nephritic Syndrome, Diarrhoea and all types of Dysenteries including Gastro-enteritis, Diabetes Mellitus and Insipidus, Epilepsy, Hypertension, Influenza, Cough and Cold, all Psychiatric or Psychosomatic Disorders, Pyrexia of unknown origin for less than 10 days, Tonsillitis and Upper Respiratory Tract infection including Laryngitis and Pharyngitis, Arthritis, Gout and Rheumatism.
11. **Organ Donor Expenses:** In patient hospitalization expenses incurred for organ transplantation from the Donor to the Recipient Insured Person are payable provided the claim for transplantation is payable. In addition, the expenses incurred by the Donor, (if any) for the complications that necessitate a Redo Surgery / ICU admission will be covered.
The coverage limit under this benefit is over and above the Limit of Coverage and upto the Sum Insured. **This additional Sum Insured can be utilized by the Donor and not by the Insured.**
12. **Health Checkup Assure:** Expenses incurred towards cost of health check-up up to the limits mentioned in the table given below for each policy year (irrespective of claim).

Sum Insured (Rs.)	Limit Upto (Rs.)	
	Individual	Floater
5,00,000	1,500	2,500
10,00,000	2,000	5,000
15,00,000	4,000	8,000
20,00,000	5,000	10,000
25,00,000	5,000	10,000
50,00,000	5,000	10,000
75,00,000	8,000	15,000
1,00,00,000	8,000	15,000
2,00,00,000	8,000	15,000

Note: Payment of any claim under this benefit shall not be construed as a waiver of Company's right to repudiate any claim on grounds of non disclosure of material fact or pre-existing disease, for hospitalization expenses under hospitalization provisions of the policy contract.

13. **Home care treatment:** Payable up to 10% of the sum insured subject to maximum of Rs.5 lakhs in a policy year, for treatment availed by the Insured Person at home, only for the specified conditions, listed in the terms and condition of the policy which in normal course would require care and treatment at a hospital but is actually taken at home.
14. **Delivery Expenses:** Expenses for a Delivery including Delivery by Caesarean section (including pre-natal and postnatal expenses) up-to 10% of the Sum Insured is payable, subject to the following:-
 - i. Benefit under this section is subject to a waiting period of 24 months from the date of first commencement of Star Health Assure Insurance policy and its continuous renewal thereof with the Company.
 - a. There is no waiting period for subsequent deliveries
 - ii. This cover is available only when
 - a. Both self and spouse are covered under this policy for a continuous period of 24 months under Individual or floater sum insured.
 - iii. Pre-hospitalisation and Post Hospitalization expenses are not applicable for this section.

15. In Utero Fetal Surgery/Intervention: The Company will pay the expenses incurred for listed In Utero Fetal Surgeries and Procedures after the waiting period of 24 months from the date of inception of this policy

Note: The above mentioned waiting period will not apply for treatment related to congenital Internal disease / defects for the Unborn.

16. Assisted Reproduction Treatment: The Company will reimburse medical expenses incurred on Assisted Reproduction Treatment as per the table mentioned below, for sub-fertility subject to:

- A waiting period of 24 months from the date of first inception of this policy with the Company for the insured person.
- Company will pay for one Assisted Reproduction Treatment cycle in a policy year.
- For the purpose of claiming under this benefit, in-patient treatment is not mandatory.

Sum Insured (Rs.) in lakhs	Limit of Liability in a policy year (Rs.)
5,00,000/-	1,00,000
10,00,000/-, 15,00,000/-, 20,00,000/-, 25,00,000/-	2,00,000
50,00,000/-, 75,00,000/-, 1,00,00,000/-, 2,00,00,000/-	4,00,000

17. Hospitalization expenses for treatment of New Born Baby: Expenses up-to the limit mentioned in the below given table incurred in a hospital / nursing home on treatment of the New born for any disease, illness (including any congenital disorders) or accidental injuries are payable from Day 1 of its birth till the expiry date of the policy.

Note: This cover is available only If Delivery Expenses Claim is paid under this policy or if Mother is covered under this policy for a continuous period of 12 months without break

Sum Insured in Lakhs (Rs.)	Limit Per Policy Period (Rs.)
5,00,000/-, 10,00,000/-, 15,00,000/-, 20,00,000/-, 25,00,000/-	2,00,000
50,00,000/-, 75,00,000/-, 1,00,00,000/-, 2,00,00,000/-	4,00,000

Note: The above mentioned sub-limits will not apply for treatment related to congenital Internal disease / defects for the new born

18. Treatment for Chronic Severe Refractory Asthma: In-patient hospitalization / Day Care treatment / Home Care Treatment / Out-patient treatment expenses incurred for treatment of Chronic Severe Refractory Asthma by Advanced Medicine, if recommended by the treating Medical practitioner (Pulmonologist) is payable up to 10% of sum insured not exceeding Rs.5 lakhs per policy period per policy year.

19. Compassionate travel: In the event of the insured person being hospitalized for a life threatening emergency at a place away from his usual place of residence as recorded in the policy, the Company will reimburse the transportation expenses by air incurred upto Rs.10,000/- for one immediate family member (other than the travel companion) for travel towards the place where hospital is located, provided the claim for hospitalization is admissible under the policy.

20. Repatriation of Mortal Remains: Following an admissible claim for hospitalization under the policy, the Company shall reimburse up to Rs.15,000/- in a policy year towards the cost of repatriation of mortal remains of the insured person (including the cost of embalming and coffin charges) to the residence of the Insured as recorded in the policy.

21. Treatment in Valuable service providers network: In the event of hospitalization in valuable service provider network, an amount calculated at 1% of Sum Insured subject to a maximum of Rs.5,000/- per policy period is payable as lump sum.

22. Shared accommodation: If the Insured person occupies, a shared accommodation during in-patient hospitalization, then amount of Rs.1,000/- per day will be payable for each continuous and completed period of 24 hours of stay in such shared accommodation.

23. AYUSH Treatment: Medical expenses for Inpatient Hospitalization incurred on treatment under Ayurveda, Unani, Sidha and Homeopathy systems of medicines in a AYUSH Hospital is payable up to the sum insured.

Note: Yoga and Naturopathy systems of treatments are excluded from the scope of coverage under AYUSH treatment

24. Second Medical Opinion: The Insured Person can obtain a Second Medical Opinion from a Doctor in the Company's network of Medical Practitioners. All the medical records provided by the Insured Person will be submitted to the Doctor chosen by him/her online and the medical opinion will be made available directly to the Insured by the Doctor. To utilize this benefit, all medical records should be forwarded to the mail-id e_medicalopinion@starhealth.in or through Post/Courier.

Note: Medical Records / Documents submitted for utilizing this facility will not prejudice the Company's right to reject a claim in terms of policy.

25. Coverage for Modern Treatment: Covered upto Sum Insured (For details please refer website: www.starhealth.in)

26. Cumulative Bonus: The insured person will be eligible for Cumulative bonus calculated at 25% of sum insured for each claim free year and maximum up to 100% of the sum insured

Special Conditions

- The Cumulative bonus will be calculated on the expiring Sum Insured
- If the insured opts to reduce the Sum Insured at the subsequent renewal, the limit of indemnity by way of such Cumulative bonus shall not exceed such reduced sum insured
- In the event of a claim resulting in;
 - Partial utilization of Sum Insured, such cumulative bonus so granted will not be reduced
 - Full utilization of Sum Insured and nil utilization of cumulative bonus accrued, such cumulative bonus so granted will not be reduced
 - Full utilization of Sum Insured and partial utilization of cumulative bonus accrued, the cumulative bonus granted on renewal will be the balance cumulative bonus available and will be reduced at the same rate at which it has accrued
 - Full utilization of Sum Insured and full utilization of cumulative bonus accrued, the cumulative bonus on renewal will be "nil"

27. Automatic Restoration of Sum Insured: The policy provides automatic restoration of sum insured subject to the following condition;

- Sum Insured will be restored unlimited number of times and maximum up to 100% each time, which can be utilized for a subsequent hospitalization.
- The restoration will trigger immediately upon partial/ full utilization of the sum insured, which can be utilized for a subsequent hospitalization.
- On partial utilization of the Sum Insured, it will be restored up to extent of utilization.
- On full utilization of the Sum Insured, it will be restored to 100%.
- The Restored Sum Insured can be used for all claims including for modern treatment, but for a subsequent hospitalization.
- The maximum payable amount for a single claim under restoration benefit shall not be more than the Sum Insured.

28. Rehabilitation and Pain Management: The company will pay the medical expenses for Rehabilitation and Pain Management up to the sub-limit (or) maximum up to 20% of the sum insured whichever is less, per policy year.

Rehabilitation: The company will pay the expenses for rehabilitation, if availed at authorized centres as an In-patient/Out-patient, and if there is an admissible claim for In-patient hospitalization for an injury, disease or illness specified below.

1. Poly Trauma
2. Head injury
3. Diseases of the spine
4. Stroke

Pain Management treatment: The Company will pay expenses for treatment of pain management subject to the limits
Important Note: Rehabilitation and/or Pain management treatment can be taken only at the authorized centres mentioned in the website – www.starhealth.in

29. Star Wellness Program: This program intends to promote, incentivize and to reward the Insured Persons' healthy life style through various wellness activities. The wellness activities are designed to help the Insured person to earn wellness reward points which will be tracked and monitored by the Company. The wellness points earned by the Insured Person(s) under the wellness program, can be utilized to get discount in premium.

This Wellness Program is enabled and administered online through "Star Health" Mobile App.

Note: The Wellness Activities mentioned are applicable for the Insured person(s) aged 18 years and above only.

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

Wellness Points Earned	Discount in Premium
200 to 350	4%
351 to 600	10%
601 to 750	14%
751 to 1000	20%

Please refer website www.starhealth.in for more details

30. Co-payment: This policy is subject to co-payment of 10% of each and every claim amount for fresh as well as renewal policies for insured person whose age at the time of entry is 61 years and above.

31. Optional Cover to choose deductible: If the insured person chooses any of the following deductible, the Company will provide a discount on premium as per the table given below;

Sum Insured	Aggregate Deductible Option	Discount offered
Up to Rs. 20 lakhs	Rs. 50,000/-	45%
	Rs. 1,00,000/-	55%
Above Rs. 20 lakhs	Rs. 50,000/-	35%
	Rs. 1,00,000/-	50%

Note: This deductible is applicable for every policy year (on Aggregate basis)

Illustration of Deductible

If an Insured with 10 Lac Sum Insured opted for an aggregate deductible of Rs.50,000 in a year, lets understand how this deductible will be applied

First Policy Year

Sum Insured	Rs. 10,00,000/- (Opted Deductible is Rs. 50,000/-)
What does opting a deductible mean	Coverage will start once the Insured incurs single / multiple claims that add up to the deductible amount in a policy year
1st Claim (Injury due to Accident)	Rs. 50,000/- (Not paid by us as it is within Deductible limit)
Balance Sum Insured	Rs. 10,00,000/-
2nd Claim (Dengue fever)	Rs. 65,000/- (Payable as the deductible limit of Rs. 50,000/- is already exhausted in the policy year)
Balance Sum Insured	Rs. 9,35,000/-
3rd Claim (Bacterial Gastroenteritis)	Rs. 55,000/- (Payable as the deductible limit of Rs. 50,000/- is already exhausted in the policy year)
Balance Sum Insured	Rs. 8,80,000/-

- ❑ **Exclusions:** The Company shall not be liable to make any payments under this policy in respect of any expenses what so ever incurred by the insured person in connection with or in respect of;

STANDARD EXCLUSIONS

1. Pre-Existing Diseases - Code Excl 01

- A. **Applicable for 3 year policy term:** Expenses related to the treatment of a pre-existing disease (PED) and its direct complications shall be excluded until the expiry of 30 months of continuous coverage after the date of inception of the first policy with insurer.

Applicable for 1 year and 2 year policy term: 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 insurer

- B. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
C. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.
D. **Applicable for 3 year policy term:** Coverage under the policy after the expiry of 30 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by Insurer.

Applicable for 1 year and 2 year policy term: 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 Insurer.

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

- A. Expenses related to the treatment of the listed Conditions, surgeries/treatments shall be excluded until the expiry of 24 months of continuous coverage after the date of inception of the first policy with us. This exclusion shall not be applicable for claims arising due to an accident.
B. In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
C. If any of the specified disease/procedure falls under the waiting period specified for pre-existing diseases, then the longer of the two waiting periods shall apply.
D. The waiting period for listed conditions shall apply even if contracted after the policy or declared and accepted without a specific exclusion.
E. If the Insured Person is continuously covered without any break as defined under the applicable norms on portability stipulated by IRDAI, then waiting period for the same would be reduced to the extent of prior coverage.
F. List of specific diseases/procedures

1. Treatment of Cataract and diseases of the anterior and posterior chamber of the Eye, Diseases of ENT, Diseases related to Thyroid, Benign diseases of the breast.
2. Subcutaneous Benign Lumps, Sebaceous cyst, Dermoid cyst, Mucous cyst lip / cheek, Carpal Tunnel Syndrome, Trigger Finger, Lipoma, Neurofibroma, Fibroadenoma, Ganglion and similar pathology
3. All treatments (Conservative, Operative treatment) and all types of intervention for Diseases related to Tendon, Ligament, Fascia, Bones and Joint Including Arthroscopy and Arthroplasty / Joint Replacement [other than caused by accident].
4. All types of treatment for Degenerative disc and Vertebral diseases including Replacement of bones and joints and Degenerative diseases of the Musculo-skeletal system, Prolapse of Intervertebral Disc (other than caused by accident),
5. All treatments (conservative, interventional, laparoscopic and open) related to Hepato-pancreato-biliary diseases including Gall bladder and Pancreatic calculi. All types of management for Kidney calculi and Genitourinary tract calculi.
6. All types of Hernia,
7. Desmoid Tumor, Umbilical Granuloma, Umbilical Sinus, Umbilical Fistula,
8. All treatments (conservative, interventional, laparoscopic and open) related to all Diseases of Cervix, Uterus, Fallopian tubes, Ovaries, Uterine Bleeding, Pelvic Inflammatory Diseases
9. All Diseases of Prostate, Stricture Urethra, all Obstructive Uropathies,
10. Benign Tumours of Epididymis, Spermatocele, Varicocele, Hydrocele,
11. Fistula, Fissure in Ano, Hemorrhoids, Pilonidal Sinus and Fistula, Rectal Prolapse, Stress Incontinence
12. Varicose veins and Varicose ulcers
13. All types of transplant and related surgeries.
14. Congenital Internal disease / defect [except for Unborn in Coverage (15) and New Born in Coverage (17)]

Note: Waiting period for the following benefits are as follows

- a. **Delivery Expenses Cover:** Benefit under this section is subject to a waiting period of 24 months from the date of first commencement of Star Health Assure Insurance policy and its continuous renewal thereof with the Company
b. **In Utero Fetal Surgery / Intervention:** The Company will pay the expenses incurred for In Utero Fetal Surgeries and Procedures mentioned below after the waiting period of 24 months from the date of inception of this policy

Note: The above mentioned waiting period will not apply for treatment related to congenital Internal disease / defects for the Unborn.

- c. **Assisted Reproduction Treatment:** A waiting period of 24 months from the date of first inception of this policy with the Company for the insured person
d. **New Born Baby Cover:** This cover is available only If delivery expenses claim is paid under this policy or if Mother is covered under this policy for a continuous period of 12 months without break

3. 30-day waiting period - Code Excl 03

- A. Expenses related to the treatment of any illness within 30 days from the first policy commencement date shall be excluded except claims arising due to an accident, provided the same are covered
B. This exclusion shall not, however, apply if the Insured Person has continuous coverage for more than twelve months
C. The within referred waiting period is made applicable to the enhanced sum insured in the event of granting higher sum insured subsequently

4. Investigation & Evaluation - Code Excl 04

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

5. Rest Cure, rehabilitation (except to the extent covered under Coverage 28) and respite care - Code Excl 05:

Expenses related to any admission primarily for enforced bed rest and not for receiving treatment. This also includes:

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

6. Obesity/ Weight Control - Code Excl 06:

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

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

7. Change-of-Gender treatments - Code Excl 07:

Expenses related to any treatment, including surgical management, to change characteristics of the body to those of the opposite sex.

8. Cosmetic or plastic surgery - Code Excl 08:

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

9. Hazardous or Adventure sports - Code Excl 09:

Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.

10. Breach of law - Code Excl 10:

Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.

11. Excluded Providers - Code Excl 11:

Expenses incurred towards treatment in any hospital or by any Medical Practitioner or any other provider specifically excluded by the Insurer and disclosed in its website / notified to the policyholders are not admissible. However, in case of life threatening situations or following an accident, expenses up to the stage of stabilization are payable but not the complete claim.

12. Treatment for Alcoholism, drug or substance abuse or any addictive condition and consequences thereof - Code Excl 12

13. Treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons - Code Excl 13

14. Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure - Code Excl 14

15. Refractive Error - Code Excl 15:

Expenses related to the treatment for correction of eye sight due to refractive error less than 7.5 dioptres.

16. Unproven Treatments - Code Excl 16:

Expenses related to any unproven treatment, services and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.

17. Sterility and Infertility (except to the extent covered under Coverage 16) - Code Excl 17:

Expenses related to sterility and infertility. This includes;

- a. Any type of contraception, sterilization
- b. Assisted Reproduction services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, ICSI
- c. Gestational Surrogacy
- d. Reversal of sterilization

18. Maternity - Code Excl 18 (except to the extent covered under Coverage 14)

- i. Medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy;
- ii. Expenses towards miscarriage (unless due to an accident) and lawful medical termination of pregnancy during the policy period

19. Circumcision (unless necessary for treatment of a disease not excluded under this policy or necessitated due to an accident), Preputioplasty, Frenuloplasty, Preputial Dilatation and Removal of SMEGMA - **Code Excl 19**
 20. Congenital External Condition / Defects / Anomalies(except to the extent covered under Coverage 17) - **Code Excl 20**
 21. Convalescence, general debility, run-down condition, Nutritional deficiency states - **Code Excl 21**
 22. Intentional self-injury - **Code Excl 22**
 23. Injury/disease caused by or arising from or attributable to war, invasion, act of foreign enemy, warlike operations (whether war be declared or not) - **Code Excl 24**
 24. Injury or disease caused by or contributed to by nuclear weapons/ materials - **Code Excl 25**
 25. Expenses incurred on Enhanced External Counter Pulsation Therapy and related therapies, Chelation therapy, Hyperbaric Oxygen Therapy, Rotational Field Quantum Magnetic Resonance Therapy, VAX-D, Low level laser therapy, Photodynamic therapy and such other therapies similar to those mentioned herein under this exclusion - **Code Excl 26**
 26. Unconventional, Untested, Experimental therapies - **Code Excl 27**
 27. Autologous derived Stromal vascular fraction, Chondrocyte Implantation, Procedures using Platelet Rich plasma and Intra articular injection therapy - **Code Excl 28**
 28. Biologicals, except when administered as an in-patient, when clinically indicated and hospitalization warranted - **Code Excl 29**
 29. Inoculation or Vaccination (except for post-bite treatment and for medical treatment for therapeutic reasons) - **Code Excl 31**
 30. Cost of spectacles and contact lens, hearing aids, Cochlear implants and procedures, walkers and crutches, wheel chairs, CPAP, BIPAP, Continuous Ambulatory Peritoneal Dialysis, infusion pump and such other similar aids - **Code Excl 35**
 31. Any hospitalization which are not medically necessary / does not warrant hospitalization - **Code Excl 36**
 32. Existing disease/s, disclosed by the Insured and mentioned in the policy schedule under Permanent Exclusion (based on Insured's consent) - **Code Excl 38**
- ❑ Moratorium Period:** After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the insurer on grounds of non-disclosure, misrepresentation, except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever, the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits.
- ❑ Claim Settlement**
- For assistance call 24 hours help-line 044-69006900 or Toll Free No. 1800 425 2255. Senior Citizens may call at 044-40020888
 - In case of planned hospitalization, inform 24 hours prior to admission in the hospital
 - In case of emergency hospitalization information to be given within 24 hours after hospitalization
 - Cashless facility wherever possible in network hospital
 - In non-network hospitals payment must be made up-front and then reimbursement will be effected on submission of documents subject to terms and conditions of the policy
 - KYC (Identity proof with Address) of the proposer, as per AML Guidelines
 - NEFT documents viz., Customer name, Bank Account No., Name of the Bank, IFSC code
 - CKYC No. of the proposer (if available)
- ❑ Renewal of policy:** The policy shall be renewable provided the product is not withdrawn, except in case of established fraud or non-disclosure or misrepresentation by the Insured. If the product is withdrawn, the policyholder shall be provided with suitable options to migrate as per the procedure stated under "withdrawal clause"
- i) At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days.
 - ii) While coverage is not available during the Grace Period, if the policy is renewed during the Grace Period, all the credits (Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc.) accrued under the policy shall be protected.
- ❑ Premium Payment in Instalments:** If the insured person has opted for Payment of Premium on an Instalment basis i.e. Half Yearly or Quarterly or Monthly or as mentioned in the Policy Schedule/Certificate of Insurance, the following conditions shall apply (notwithstanding any terms contrary elsewhere in the policy)
- i. For monthly instalment option: Grace Period of 15 days would be given to pay the instalment premium due for the policy.
 - ii. For Quarterly and Half yearly instalment option: Grace Period of 30 days would be given to pay the instalment premium due for the policy.
 - iii. The Insured Person will get the accrued continuity benefit in respect of the (Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc.) in the event of payment of premium within the stipulated Grace Period.

- iv. No interest will be charged if the instalment premium is not paid on due date.
- v. In case of instalment premium due not received within the Grace Period, the policy will get cancelled.
- vi. In the event of a claim, all subsequent premium instalments shall immediately become due and payable.
- vii. The company has the right to recover and deduct all the pending instalments from the claim amount due under the policy.
- viii. For premium paid in instalments during the Policy Period, coverage is available during the Grace Period also.

❑ Cancellation

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

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

❑ Disclosure of Information: The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis description or non-disclosure of any material fact by the policyholder.

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

- ✓ Upon the death of the Insured Person. This means that, the cover for the surviving members of the family will continue, subject to other terms of the policy.
- ✓ Upon exhaustion of the Sum Insured, Limit of Coverage, Limit of Coverage plus Restore Sum Insured.

❑ Migration: In case of migration of one policy to another with the same insurer, the Policyholder (including all members under family cover and group insurance policies) can transfer the credits gained to the extent of the Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc. in the previous policy to the migrated policy.

❑ Portability:

- A. The Insured Person has the choice to port his / her policy from one Insurer to another by applying to such Insurer to port the entire policy along with all the members of the family, if any, at least 30 days before, but not earlier than 60 days from the policy renewal date as per IRDAI guidelines related to portability.
- B. The Insured Person is entitled to transfer the credits gained to the extent of the Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc. from the existing Insurer to the Acquiring Insurer in the previous policy.

❑ 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 whether electronically or otherwise to review the terms and conditions of the policy. If the Insured is not satisfied with any of the terms and conditions and has not made any claim, the Insured has the option to cancel his/her policy. This option is available in case of policies with a term of one year or more.

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

❑ Redressal of Grievance: In case of any grievance the insured person may contact the Company through

Website : www.starhealth.in

E-mail : gro@starhealth.in, grievances@starhealth.in

Ph. No. : 044-69006900 | Toll Free No. 1800 425 2255

Senior Citizens may call at 044-69007500

Courier : 4th Floor, Balaji Complex, No.15, Whites Lane, Whites Road, Royapettah, Chennai-600014

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

For updated details of grievance officer, kindly refer the link <https://www.starhealth.in/grievance-redressal>

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

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

- ❑ **Possibility of Revision of Terms of the Policy Including the Premium Rates:** The Company, may revise or modify the terms of the policy including the premium rates as per the extant Guidelines. The insured person shall be notified thirty days before the changes are effected.
- ❑ **Revision of Sum Insured:** Reduction or enhancement of Sum Insured is permissible only at the time of renewal. The acceptance for enhancement and the amount of enhancement will be at the discretion of the Company and subject to **Exclusion Code Excl 01, Exclusion Code Excl 02 and Exclusion Code Excl 03.**
- ❑ **Withdrawal of policy**
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.
 - i. A one-time option to renew the existing product, if renewal falls within the 90 days from the date of withdrawal of the product, or
 - ii. Insured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal. Insured Person can transfer the credits gained (to the extent of Sum Insured, No Claim Bonus, Specific Waiting Periods, Waiting period for Pre-Existing Diseases, Moratorium period etc.) in the previous policy to the migrated policy, provided the policy has been maintained without a break
- ❑ **The Company:** Star Health and Allied Insurance Co. Ltd., commenced its operations in 2006 as India's first Standalone Health Insurance provider. As an exclusive Health Insurer, the Company is providing sterling services in Health, Personal Accident & Overseas Travel Insurance and is committed to setting international benchmarks in service and personal caring.
- ❑ **Star Advantages**
 - No Third Party Administrator, direct in-house claims settlement
 - Faster and hassle – free claim settlement
 - Cashless hospitalization
- ❑ **Tax Benefits:** Payment of premium by any mode other than cash for this insurance is eligible for relief under Section 80D of the Income Tax Act 1961.
- ❑ **TAXES ARE SUBJECT TO CHANGES IN TAX LAWS**
- ❑ **Prohibition of Rebates:** Section 41 of Insurance Act 1938 (Prohibition of rebates) - No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakhs rupees.

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**Health
Insurance**

The Health Insurance Specialist

Benefits Illustration in respect of policies offered on individual and family floater basis

Age of the members insured (in yrs)	Coverage opted on individual basis covering each member of the family separately (at a single point of time)		Coverage opted on individual basis covering multiple members of the family under a single policy(Sum insured is available for each member of the family)				Coverage opted on family floater basis with overall Sum insured (Only one sum insured is available for the entire family)			
	Premium (Rs.)	Sum Insured (Rs.)	Premium (Rs.)	Discount (if any)	Premium After Discount (Rs.)	Sum Insured (Rs.)	Premium or consolidated premium for all members of family (Rs.)	Floater Discount, (if any)	Premium After Discount (Rs.)	Sum Insured (Rs.)
Illustration 1										
63	31,872	10,00,000	31,872	Nil	31,872	10,00,000	57,460	6,202	51,258	10,00,000
58	25,588	10,00,000	25,588		10,00,000					
Total Premium for all members of the family is Rs.57,460/-, when each member is covered separately. Sum insured available for each individual is Rs.10,00,000/-			Total Premium for all members of the family is Rs.57,460/-, when they are covered under a single policy,Sum insured available for each family member is Rs.10,00,000/-				Total Premium when policy is opted on floater basis is Rs.51,258/-, Sum insured of Rs.10,00,000/- is available for the entire family (2A)			

Illustration 1

Illustration 2

54	19,787	10,00,000	19,787	19,787	10,00,000	57,247	13,084	44,163	10,00,000
51	19,787	10,00,000	19,787	19,787	10,00,000				
17	5,891	10,00,000	5,891	5,891	10,00,000				
15	5,891	10,00,000	5,891	5,891	10,00,000				
13	5,891	10,00,000	5,891	5,891	10,00,000				
Total Premium for all members of the family is Rs.57,247/-, when each member is covered separately. Sum insured available for each individual is Rs.10,00,000/-						Total Premium when policy is opted on floater basis is Rs.44,163/-, Sum insured of Rs.10,00,000/- is available for the entire family (2A+3C)			

Note: Premium rates specified in the above illustration are standard premium rates without considering any loading. Also, the premium rates are exclusive of taxes applicable.

A-Adult | C-Child

Illustration for Discounts on Premium

Illustration 1

Sum Insured : Rs.10,00,000/-
Policy Type : Family Floater
Family Size : 2 Adults+2 Children
Zone : A
Policy Term : 1 year

Relation	Age in years	Premium Excluding GST (Rs.)	45% discount for Deductible Opted Rs.50,000/- (Rs.)	Total Premium Excl. GST (Rs.)
Self (Primary member)	45	27,767	12,495	15,272
Spouse	40			
Child 1	17			
Child 2	15			
Final Premium			15,272	

Illustration for Child Above 17 years and One Parent including Deductible is Opted

Illustration 2 - (Child Above 17 years and one Parent to be covered) :

Sum Insured: Rs.10,00,000/-
Policy Type : Family Floater
Family Size : 2 Adults+2 Children+1 Parent
Zone : A
Policy Term : 1 year

Relation	Age in years	Premium Excluding GST (Rs.)	Floater Discount for at 40% for Child 1 and 10% for Parent 1	Premium after Floater Discount Excluding GST (Rs.)	45% discount for Deductible Opted Rs.50,000/- (Rs.)	Total Premium Excl. GST (Rs.)
Self (Primary member)	45	23,686	-	23,686	10,659	13,027
Spouse	40					
Child 2	17					
Child 1	19	9,762	3,905	5,857	2,636	3,221
Parent 1	70	38,157	3,816	34,341	15,453	18,888
Final Premium						35,136

The information provided in this brochure is only indicative. For more details on the risk factors, terms and conditions, please read the policy wordings before concluding sale

Or

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STAR HEALTH ASSURE INSURANCE POLICY

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STAR HEALTH AND ALLIED INSURANCE CO. LTD.

Registered Office : No. 1, New Tank Street, Valluvar Kottam High Road, Nungambakkam, Chennai - 600 034.
Phone : 044 - 2828 8800 Corporate Office : No. 148, Acropolis, Dr. Radha Krishnan Salai, Mylapore, Chennai - 600 004. Phone : 044 - 4788 6666

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Chat: +91 9597652225 | sms: STAR to 56677 | Email: support@starhealth.in

CIN: L66010TN2005PLC056649 | IRDAI Regn. No: 129

STAR HEALTH ASSURE INSURANCE POLICY										
Unique Identification No.: SHAHLIP23131V022223 BRO/SHAN.7/2025										
ZONE A - Premium Chart for 3 Years 2 Years 1 Year										
(Delhi including Faridabad, Gurgaon, Ghaziabad and Noida, Mumbai including Thane, Ahmedabad,										
Under floater policy, premium for child aged up to 17 years will be according to the family size. Above 17 years, the child can be considered under the floater policy by paying the premium applicable for the child based on his/her appropriate age from the 1A premium table with a floater discount of 40%. The premium for parents (in-laws) is based on their appropriate age from the 1A table with a floater discount of 10% for each parent.										
Sum Insured		Aggregate Deductible Option			Discount Offered					
Up to Rs. 20 lakhs		Rs. 50,000/-			45%					
		Rs. 1,00,000/-			55%					
Above Rs. 20 lakhs		Rs. 50,000/-			35%					
		Rs. 1,00,000/-			50%					
Note: This deductible is applicable for every policy year.(on Aggregate basis)										
Premium Chart for 3 Year (Excluding GST)										
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000
1A	91days-15	13,350	16,495	21,096	23,623	25,751	29,682	33,433	35,743	38,881
	16	15,593	19,979	25,413	28,450	31,179	36,152	40,607	43,678	47,958
	17	17,835	23,463	29,731	33,277	36,607	42,622	47,781	51,613	57,034
	18-33	20,326	27,333	34,528	38,641	42,639	49,811	55,753	60,429	67,119
	34	21,627	28,934	36,416	40,756	44,965	52,487	58,749	63,665	70,679
	35	22,928	30,534	38,304	42,870	47,291	55,162	61,746	66,901	74,239
	36-43	24,373	32,312	40,403	45,220	49,876	58,135	65,075	70,497	78,194
	44	26,791	34,923	43,380	48,560	53,490	62,177	69,638	75,332	83,339
	45	29,209	37,534	46,358	51,899	57,104	66,219	74,202	80,167	88,483
	46-48	31,896	40,435	49,666	55,609	61,120	70,710	79,272	85,540	94,199
	49	36,103	45,247	55,241	61,856	67,932	78,431	87,955	94,825	1,04,238
	50	40,309	50,058	60,815	68,103	74,745	86,151	96,639	1,04,109	1,14,278
	51-53	44,984	55,404	67,008	75,044	82,315	94,730	1,06,287	1,14,426	1,25,432
	54	49,228	60,625	73,169	81,944	89,905	1,03,458	1,16,063	1,24,984	1,37,406
	55	53,473	65,846	79,329	88,844	97,494	1,12,187	1,25,838	1,35,541	1,48,659
	56-58	58,189	71,647	86,174	96,511	1,05,928	1,21,885	1,36,700	1,47,272	1,61,563
	59	62,787	77,303	92,848	1,03,985	1,14,150	1,31,340	1,47,291	1,58,710	1,74,145
	60	67,385	82,958	99,522	1,11,460	1,22,372	1,40,796	1,57,881	1,70,147	1,86,726
	61-63	72,495	89,243	1,06,938	1,19,766	1,31,508	1,51,302	1,69,648	1,82,856	2,00,705
	64	77,093	94,899	1,13,612	1,27,240	1,39,730	1,60,758	1,80,238	1,94,293	2,13,286
	65	81,691	1,00,555	1,20,286	1,34,715	1,47,953	1,70,214	1,90,829	2,05,731	2,25,868
	66-68	86,800	1,06,839	1,27,701	1,43,021	1,57,089	1,80,720	2,02,596	2,18,439	2,39,847
	69	90,111	1,10,911	1,32,506	1,48,403	1,63,009	1,87,528	2,10,221	2,26,674	2,48,906
	70	93,422	1,14,983	1,37,312	1,53,784	1,68,929	1,94,336	2,17,846	2,34,910	2,57,964
	71-73	97,101	1,19,508	1,42,651	1,59,764	1,75,507	2,01,901	2,26,318	2,44,060	2,68,029
	74	1,00,191	1,23,309	1,47,136	1,64,787	1,81,032	2,08,255	2,33,435	2,51,746	2,76,484
	75	1,03,281	1,27,110	1,51,621	1,69,811	1,86,557	2,14,609	2,40,552	2,59,432	2,84,938
	76-78	1,06,714	1,31,333	1,56,604	1,75,392	1,92,697	2,21,669	2,48,459	2,67,972	2,94,333
	79	1,09,433	1,34,677	1,60,550	1,79,812	1,97,559	2,27,621	2,54,722	2,74,735	3,01,773
	80	1,12,153	1,38,022	1,64,497	1,84,232	2,02,421	2,32,853	2,60,984	2,81,499	3,09,213
	Above 80	1,15,174	1,41,738	1,68,882	1,89,144	2,07,824	2,39,066	2,67,943	2,89,014	3,17,479
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000
1A+1C	18-33	33,635	46,407	59,038	66,062	72,936	85,430	95,380	1,03,461	1,15,125
	34	34,936	48,007	60,927	68,177	75,262	88,105	98,376	1,06,697	1,18,685
	35	36,237	49,608	62,815	70,292	77,588	90,781	1,01,733	1,09,933	1,22,244
	36-43	37,683	51,386	64,913	72,642	80,173	93,753	1,04,702	1,13,529	1,26,199
	44	39,591	53,007	66,620	74,561	82,167	95,818	1,07,087	1,15,918	1,28,479
	45	41,499	54,629	68,326	76,481	84,160	97,883	1,09,472	1,18,307	1,30,759
	46-48	43,620	56,431	70,223	78,614	86,375	1,00,177	1,12,122	1,20,962	1,33,292
	49	47,317	60,252	74,526	83,442	91,568	1,05,920	1,18,627	1,27,801	1,40,466
	50	51,015	64,074	78,829	88,270	96,760	1,11,663	1,25,131	1,34,640	1,47,641
	51-53	55,123	68,321	83,610	93,634	1,02,529	1,18,045	1,32,359	1,42,238	1,55,612
	54	59,368	73,542	89,771	1,00,534	1,10,119	1,26,773	1,42,135	1,52,796	1,67,226
	55	63,612	78,763	95,931	1,07,434	1,17,709	1,35,501	1,51,911	1,63,354	1,78,839
	56-58	68,328	84,563	1,02,776	1,15,100	1,26,142	1,45,200	1,62,772	1,75,085	1,91,743
	59	72,927	90,219	1,09,450	1,22,575	1,34,364	1,54,655	1,73,363	1,86,522	2,04,325
	60	77,525	95,875	1,16,124	1,30,050	1,42,587	1,64,111	1,83,953	1,97,960	2,16,906
	61-63	82,634	1,02,160	1,23,540	1,38,355	1,51,723	1,74,617	1,95,720	2,10,668	2,30,885
	64	87,232	1,07,816	1,30,214	1,45,830	1,59,945	1,84,073	2,06,310	2,22,106	2,43,466
	65	91,831	1,13,471	1,36,888	1,53,305	1,68,167	1,93,528	2,16,901	2,33,543	2,56,048
	66-68	96,940	1,19,756	1,44,303	1,61,610	1,77,303	2,04,035	2,28,668	2,46,252	2,70,027
	69	1,00,251	1,23,828	1,49,108	1,66,992	1,83,223	2,10,843	2,36,293	2,54,487	2,79,086
	70	1,03,561	1,27,900	1,53,914	1,72,374	1,89,143	2,17,651	2,43,918	2,62,722	2,88,144
	71-73	1,07,240	1,32,425	1,59,253	1,78,354	1,95,721	2,25,215	2,52,390	2,71,872	2,98,209
	74	1,10,330	1,36,226	1,63,738	1,					

Gross Premium Chart for 2 year term										A-Adult C-Child	
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000	
1A	91days-16	9,059	11,193	14,315	16,030	17,474	20,141	22,686	24,254	26,384	
	17	11,301	14,677	18,632	20,857	22,902	26,611	29,861	32,189	35,460	
	18-34	13,793	18,548	23,430	26,220	28,933	33,801	37,832	41,006	45,545	
	35	15,094	20,148	25,318	28,335	31,260	36,476	40,829	44,242	49,105	
	36-44	16,539	21,926	27,416	30,685	33,845	39,449	44,158	47,837	53,060	
	45	18,957	24,537	30,394	34,024	37,459	43,491	48,721	52,672	58,205	
	46-49	21,644	27,438	33,702	37,735	41,474	47,982	53,792	58,045	63,921	
	50	25,850	32,250	39,276	43,982	48,287	55,703	62,475	67,330	73,960	
	51-54	30,525	37,596	45,470	50,923	55,856	64,281	72,123	77,646	85,115	
	55	34,769	42,816	51,630	57,823	63,446	73,009	81,899	88,204	96,728	
	56-59	39,485	48,617	58,475	65,489	71,879	82,708	92,761	99,935	1,09,632	
	60	44,084	54,273	65,149	72,964	80,102	92,163	1,03,351	1,11,372	1,22,213	
	61-64	49,193	60,558	72,565	81,270	89,238	1,02,669	1,15,118	1,24,081	1,36,193	
	65	53,791	66,213	79,239	88,744	97,460	1,12,125	1,25,709	1,35,518	1,48,774	
	66-69	58,900	72,498	86,654	97,050	1,06,596	1,22,631	1,37,476	1,48,227	1,62,753	
	70	62,211	76,570	91,460	1,02,432	1,12,516	1,29,440	1,45,101	1,56,462	1,71,812	
	71-74	65,890	81,095	96,799	1,08,412	1,19,094	1,37,004	1,53,573	1,65,612	1,81,877	
	75	68,980	84,896	1,01,284	1,13,435	1,24,619	1,43,358	1,60,690	1,73,298	1,90,332	
	76-79	72,413	89,119	1,06,267	1,19,016	1,30,758	1,50,418	1,68,597	1,81,838	1,99,726	
	80	75,132	92,463	1,10,214	1,23,436	1,35,621	1,56,010	1,74,860	1,88,602	2,07,166	
	Above 80	78,154	96,180	1,14,599	1,28,348	1,41,023	1,62,223	1,81,818	1,96,117	2,15,433	
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000	
1A+1C	18-34	22,824	31,491	40,062	44,828	49,492	57,970	64,722	70,206	78,120	
	35	24,125	33,091	41,950	46,943	51,818	60,646	67,718	73,442	81,680	
	36-44	25,570	34,869	44,048	49,292	54,403	63,618	71,048	77,038	85,635	
	45	27,479	36,490	45,755	51,212	56,397	65,683	73,433	79,427	87,915	
	46-49	29,599	38,292	47,651	53,345	58,612	67,977	76,083	82,081	90,448	
	50	33,297	42,114	51,954	58,173	63,804	73,720	82,587	88,920	97,623	
	51-54	37,405	46,361	56,735	63,537	69,573	80,102	89,515	96,519	1,05,594	
	55	41,649	51,581	62,896	70,437	77,163	88,830	99,591	1,07,077	1,17,208	
	56-59	46,366	57,382	69,741	78,104	85,596	98,528	1,10,453	1,18,807	1,30,111	
	60	50,964	63,038	76,415	85,579	93,819	1,07,984	1,21,043	1,30,245	1,42,693	
	61-64	56,073	69,323	83,830	93,884	1,02,955	1,18,490	1,32,810	1,42,953	1,56,672	
	65	60,671	74,978	90,504	1,01,359	1,11,177	1,27,946	1,43,400	1,54,391	1,69,253	
	66-69	65,781	81,263	97,920	1,09,664	1,20,313	1,38,452	1,55,167	1,67,099	1,83,233	
	70	69,091	85,335	1,02,725	1,15,044	1,26,233	1,45,260	1,62,793	1,75,334	1,92,291	
	71-74	72,770	89,860	1,08,064	1,21,026	1,32,811	1,52,825	1,71,265	1,84,484	2,02,356	
	75	75,860	93,661	1,12,549	1,26,049	1,38,336	1,59,179	1,78,382	1,92,170	2,10,811	
	76-79	79,293	97,884	1,17,532	1,31,630	1,44,475	1,66,239	1,86,289	2,00,711	2,20,205	
	80	82,013	1,01,228	1,21,479	1,36,051	1,49,338	1,71,831	1,92,552	2,07,474	2,27,645	
	Above 80	85,034	1,04,945	1,25,864	1,40,962	1,54,740	1,78,044	1,99,510	2,14,990	2,35,912	
	Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000
	1A+2C	18-34	29,127	39,243	49,210	55,074	60,762	70,931	79,238	85,883	95,366
35		30,428	40,843	51,098	57,188	63,089	73,607	82,235	89,120	98,926	
36-44		31,873	42,622	53,196	59,538	65,674	76,579	85,564	92,715	1,02,881	
45		33,782	44,243	54,903	61,458	67,667	78,644	87,949	95,104	1,05,161	
46-49		35,902	46,045	56,799	63,591	69,882	80,938	90,599	97,759	1,07,694	
50		39,600	49,867	61,102	68,419	75,075	86,681	97,104	1,04,598	1,14,868	
51-54		43,708	54,113	65,883	73,783	80,844	93,063	1,04,331	1,12,196	1,22,839	
55		47,952	59,334	72,044	80,683	88,434	1,01,791	1,14,107	1,22,754	1,34,453	
56-59		52,669	65,135	78,889	88,350	96,867	1,11,489	1,24,969	1,34,485	1,47,357	
60		57,267	70,791	85,563	95,824	1,05,089	1,20,945	1,35,559	1,45,923	1,59,938	
61-64		62,376	77,075	92,979	1,04,130	1,14,225	1,31,451	1,47,326	1,58,331	1,73,917	
65		66,974	82,731	99,653	1,11,605	1,22,447	1,40,907	1,57,917	1,70,069	1,86,499	
66-69		72,084	89,015	1,07,068	1,19,910	1,31,583	1,51,413	1,69,684	1,82,777	2,00,478	
70		75,394	93,088	1,11,873	1,25,292	1,37,503	1,58,221	1,77,309	1,91,012	2,09,537	
71-74		79,073	97,612	1,17,212	1,31,272	1,44,081	1,65,786	1,85,781	2,00,162	2,19,602	
75		82,163	1,01,413	1,21,697	1,36,295	1,49,607	1,72,140	1,92,898	2,07,848	2,28,056	
76-79		85,596	1,05,636	1,26,681	1,41,876	1,55,746	1,79,200	2,00,805	2,16,388	2,37,450	
80		88,316	1,08,981	1,30,627	1,46,296	1,60,608	1,84,792	2,07,068	2,23,152	2,44,890	
Above 80		91,3									

STAR HEALTH ASSURE INSURANCE POLICY										
Unique Identification No.: SHAHLIP23131V022223 BRO/SHAN/7/2025										
ZONE B - Premium Chart for 3 Years 2 Years 1 Year										
(Pune including Nashik, Trivandrum, Ernakulam, Chennai, Bengaluru, Hyderabad, Secunderabad and Rest of Gujarat)										
Under floater policy, premium for child aged up to 17 years will be according to the family size. Above 17 years, the child can be considered under the floater policy by paying the premium applicable for the child based on his/her appropriate age from the 1A premium table with a floater discount of 40%. The premium for parents (in-laws) is based on their appropriate age from the 1A table with a floater discount of 10% for each parent.										
Sum Insured		Aggregate Deductible Option					Discount Offered			
Up to Rs. 20 lakhs		Rs. 50,000/-					45%			
		Rs. 1,00,000/-					55%			
Above Rs. 20 lakhs		Rs. 50,000/-					35%			
		Rs. 1,00,000/-					50%			
Note: This deductible is applicable for every policy year.(on Aggregate basis)										
Premium Chart for 3 Year (Excluding GST)										
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	A-Adult C-Child	2,00,00,000
1A	91days-15	11,735	14,508	18,751	20,997	22,862	26,360	29,712	31,725	34,461
	16	13,818	17,796	22,837	25,565	28,005	32,502	36,519	39,263	43,101
	17	15,900	21,083	26,923	30,132	33,148	38,644	43,326	46,801	51,741
	18-33	18,214	24,736	31,463	35,208	38,862	45,469	50,889	55,176	61,341
	34	19,345	26,127	33,105	37,047	40,885	47,795	53,495	57,990	64,437
	35	20,477	27,519	34,747	38,886	42,908	50,122	56,100	60,804	67,532
	36-43	21,734	29,065	36,571	40,929	45,156	52,706	58,995	63,931	70,971
	44	23,770	31,206	38,995	43,648	48,087	55,963	62,679	67,817	75,071
	45	25,806	33,348	41,418	46,366	51,018	59,220	66,363	71,702	79,171
	46-48	28,068	35,727	44,111	49,387	54,275	62,839	70,457	76,019	83,727
	49	31,660	39,782	48,792	54,634	59,988	69,295	77,723	83,774	92,083
	50	35,251	43,837	53,473	59,881	65,701	75,751	84,990	91,529	1,00,439
	51-53	39,242	48,342	58,675	65,711	72,048	82,924	93,064	1,00,145	1,09,723
	54	42,933	52,882	64,032	71,711	78,648	90,513	1,01,564	1,09,326	1,19,822
	55	46,624	57,422	69,389	77,711	85,248	98,103	1,10,065	1,18,506	1,29,921
	56-58	50,725	62,466	75,341	84,378	92,581	1,06,536	1,19,510	1,28,707	1,41,141
	59	54,724	67,384	81,145	90,877	99,731	1,14,759	1,28,719	1,38,653	1,52,082
	60	58,722	72,302	86,948	97,377	1,06,881	1,22,981	1,37,928	1,48,598	1,63,022
	61-63	63,165	77,767	93,396	1,04,599	1,14,825	1,32,117	1,48,160	1,59,649	1,75,178
	64	67,163	82,685	99,200	1,11,099	1,21,975	1,40,339	1,57,369	1,69,595	1,86,118
	65	71,162	87,603	1,05,003	1,17,599	1,29,125	1,48,562	1,66,578	1,79,541	1,97,058
	66-68	75,605	93,068	1,11,451	1,24,821	1,37,698	1,57,698	1,76,811	1,90,591	2,09,214
	69	78,484	96,609	1,15,630	1,29,501	1,42,217	1,63,618	1,83,441	1,97,752	2,17,091
	70	81,363	1,00,150	1,19,808	1,34,181	1,47,365	1,69,538	1,90,072	2,04,913	2,24,968
	71-73	84,561	1,04,085	1,24,451	1,39,381	1,53,085	1,76,116	1,97,439	2,12,870	2,33,720
	74	87,248	1,07,390	1,28,351	1,43,749	1,57,889	1,81,641	2,03,627	2,19,553	2,41,072
	75	89,935	1,10,695	1,32,251	1,48,117	1,62,694	1,87,166	2,09,816	2,26,237	2,48,424
	76-78	92,921	1,14,367	1,36,584	1,52,970	1,68,033	1,93,306	2,16,692	2,33,663	2,56,593
	79	95,285	1,17,275	1,40,016	1,56,814	1,72,261	1,98,168	2,22,138	2,39,544	2,63,063
	80	97,650	1,20,184	1,43,448	1,60,657	1,76,489	2,03,030	2,27,583	2,45,426	2,69,532
	Above 80	1,00,277	1,23,415	1,47,261	1,64,928	1,81,187	2,08,433	2,33,634	2,51,961	2,76,721
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000
1A+1C	18-33	30,312	42,319	54,215	60,660	66,993	78,596	87,726	95,195	1,06,032
	34	31,443	43,711	55,857	62,499	69,016	80,923	90,331	98,009	1,09,127
	35	32,574	45,103	57,499	64,338	71,039	83,249	92,937	1,00,823	1,12,223
	36-43	33,831	46,649	59,323	66,381	73,287	85,834	95,832	1,03,950	1,15,662
	44	35,358	47,801	60,476	67,680	74,597	87,113	97,338	1,05,389	1,16,897
	45	36,885	48,952	61,628	68,979	75,908	88,393	98,843	1,06,828	1,18,132
	46-48	38,581	50,232	62,909	70,423	77,365	89,815	1,00,516	1,08,428	1,19,504
	49	41,663	53,298	66,319	74,251	81,457	94,293	1,05,604	1,13,736	1,24,996
	50	44,745	56,363	69,729	78,078	85,549	98,771	1,10,692	1,19,045	1,30,487
	51-53	48,170	59,769	73,518	82,332	90,096	1,03,747	1,16,346	1,24,944	1,36,588
	54	51,861	64,309	78,875	88,331	96,696	1,11,337	1,24,846	1,34,124	1,46,687
	55	55,552	68,848	84,232	94,331	1,03,296	1,18,927	1,33,347	1,43,305	1,56,786
	56-58	59,653	73,893	90,185	1,00,998	1,10,629	1,27,360	1,42,792	1,53,506	1,68,006
	59	63,651	78,811	95,988	1,07,998	1,17,779	1,35,582	1,52,001	1,63,451	1,78,947
	60	67,650	83,729	1,01,792	1,13,997	1,24,929	1,43,804	1,61,210	1,73,397	1,89,887
	61-63	72,093	89,194	1,08,240	1,21,220	1,32,873	1,52,940	1,71,442	1,84,448	2,02,043
	64	76,091	94,112	1,14,043	1,27,719	1,40,023	1,61,163	1,80,651	1,94,394	2,12,983
	65	80,090	99,030	1,19,847	1,34,219	1,47,173	1,69,385	1,89,860	2,04,339	2,23,923
	66-68	84,532	1,04,495	1,26,295	1,41,441	1,55,117	1,78,521	2,00,092	2,15,390	2,36,079
	69	87,411	1,08,036	1,30,473	1,46,121	1,60,265	1,84,441	2,06,723	2,22,551	2,43,956
	70	90,290	1,11,577	1,34,652	1,50,801	1,65,413	1,90,361	2,13,353	2,29,712	2,51,833
	71-73	93,489	1,15,511	1,39,295	1,56,001	1,71,133	1,96,939	2,20,721	2,37,668	2,60,586
	74	96,176	1,18,816	1,43,195	1,60,369	1,75,937	2,02,464	2,26,909	2,44,352	2,67,937
	75	98,863	1,22,121	1,47,094	1,64,737	1,80,742	2,07			

Premium Chart for 2 Year (Excluding GST)										A-Adult C-Child		
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000		
1A	91days-16	7,963	9,845	12,724	14,248	15,514	17,887	20,162	21,528	23,385		
	17	10,046	13,132	16,810	18,816	20,657	24,029	26,969	29,066	32,025		
	18-34	12,360	16,785	21,350	23,891	26,371	30,854	34,532	37,441	41,624		
	35	13,491	18,177	22,992	25,730	28,394	33,180	37,137	40,255	44,720		
	36-44	14,748	19,723	24,816	27,773	30,642	35,765	40,032	43,382	48,159		
	45	16,784	21,864	27,240	30,492	33,573	39,022	43,716	47,267	52,259		
	46-49	19,046	24,243	29,932	33,512	36,830	42,641	47,810	51,584	56,814		
	50	22,638	28,298	34,614	38,760	42,542	49,097	55,076	59,339	65,170		
	51-54	26,629	32,804	39,815	44,590	48,890	56,270	63,150	67,955	74,455		
	55	30,320	37,343	45,172	50,590	55,490	63,859	71,651	77,136	84,554		
	56-59	34,421	42,388	51,124	57,256	62,823	72,293	81,096	87,337	95,774		
	60	38,419	47,306	56,928	63,756	69,973	80,515	90,305	97,283	1,06,715		
	61-64	42,862	52,770	63,376	70,978	77,917	89,651	1,00,537	1,08,333	1,18,871		
	65	46,860	57,689	69,180	77,478	85,067	97,873	1,09,746	1,18,279	1,29,811		
	66-69	51,303	63,153	75,628	84,700	93,011	1,07,009	1,19,979	1,29,330	1,41,967		
	70	54,182	66,694	79,806	89,380	98,159	1,12,929	1,26,609	1,36,491	1,49,844		
	71-74	57,381	70,629	84,449	94,580	1,03,879	1,19,507	1,33,976	1,44,447	1,58,596		
	75	60,068	73,934	88,349	98,948	1,08,684	1,25,032	1,40,165	1,51,131	1,65,948		
	76-79	63,053	77,606	92,682	1,03,801	1,14,022	1,31,172	1,47,041	1,58,557	1,74,117		
	80	65,418	80,515	96,114	1,07,645	1,18,250	1,36,034	1,52,487	1,64,439	1,80,586		
	Above 80	68,045	83,746	99,927	1,11,916	1,22,948	1,41,437	1,58,538	1,70,974	1,87,775		
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000		
1A+1C	18-34	20,569	28,717	36,789	41,162	45,460	53,333	59,528	64,597	71,950		
	35	21,700	30,108	38,431	43,001	47,483	55,659	62,134	67,411	75,046		
	36-44	22,957	31,654	40,255	45,044	49,730	58,244	65,029	70,537	78,485		
	45	24,484	32,806	41,408	46,343	51,041	59,524	66,534	71,977	79,720		
	46-49	26,180	34,086	42,688	47,787	52,497	60,946	68,207	73,576	81,092		
	50	29,262	37,152	46,098	51,615	56,590	65,424	73,295	78,885	86,583		
	51-54	32,687	40,557	49,887	55,868	61,137	70,400	78,949	84,783	92,685		
	55	36,378	45,097	55,244	61,868	67,737	77,990	87,449	93,964	1,02,784		
	56-59	40,479	50,141	61,197	68,034	75,070	86,423	96,895	1,04,165	1,14,004		
	60	44,477	55,060	67,000	75,534	82,220	94,645	1,06,104	1,14,110	1,24,945		
	61-64	48,920	60,524	73,448	82,256	90,164	1,03,781	1,16,336	1,25,161	1,37,101		
	65	52,919	65,442	79,252	88,756	97,314	1,12,003	1,25,545	1,35,107	1,48,041		
	66-69	57,361	70,907	85,700	95,978	1,05,258	1,21,139	1,35,777	1,46,158	1,60,197		
	70	60,240	74,448	89,879	1,00,658	1,10,406	1,27,059	1,42,407	1,53,318	1,68,074		
	71-74	63,439	78,383	94,521	1,05,858	1,16,126	1,33,637	1,49,775	1,61,275	1,76,826		
	75	66,126	81,688	98,421	1,10,226	1,20,930	1,39,163	1,55,963	1,67,959	1,84,178		
	76-79	69,112	85,360	1,02,755	1,15,079	1,26,269	1,45,302	1,62,839	1,75,385	1,92,347		
	80	71,476	88,268	1,06,186	1,18,923	1,30,497	1,50,164	1,68,285	1,81,266	1,98,816		
	Above 80	74,103	91,500	1,10,000	1,23,194	1,35,195	1,55,567	1,74,336	1,87,801	2,06,005		
	Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000	
	1A+2C	18-34	26,049	35,458	44,743	50,071	55,260	64,604	72,151	78,229	86,946	
35		27,181	36,850	46,385	51,910	57,283	66,930	74,757	81,043	90,042		
36-44		28,438	38,396	48,210	53,954	59,531	69,515	77,652	84,170	93,481		
45		29,964	39,548	49,362	55,253	60,841	70,794	79,157	85,609	94,716		
46-49		31,661	40,828	50,643	56,696	62,298	72,216	80,830	87,209	96,088		
50		34,743	43,893	54,053	60,524	66,390	76,694	85,918	92,517	1,01,580		
51-54		38,168	47,299	57,842	64,777	70,937	81,670	91,572	98,416	1,07,681		
55		41,859	51,839	63,199	70,777	77,537	89,260	1,00,072	1,07,597	1,17,780		
56-59		45,960	56,883	69,152	77,444	84,870	97,693	1,09,517	1,17,797	1,29,000		
60		49,958	61,801	74,955	83,944	92,020	1,05,916	1,18,726	1,27,743	1,39,941		
61-64		54,401	67,266	81,403	91,166	99,964	1,15,051	1,28,959	1,38,794	1,52,097		
65		58,399	72,184	87,207	97,665	1,07,114	1,23,274	1,38,168	1,48,740	1,63,037		
66-69		62,842	77,648	93,655	1,04,887	1,15,058	1,32,410	1,48,400	1,59,790	1,75,193		
70		65,721	81,190	97,833	1,09,567	1,20,206	1,38,330	1,55,030	1,66,951	1,83,070		
71-74		68,920	85,124	1,02,476	1,14,767	1,25,926	1,44,908	1,62,398	1,74,908	1,91,822		
75		71,607	88,429	1,06,376	1,19,135	1,30,731	1,50,433	1,68,586	1,81,591	1,99,174		
76-79		74,592	92,101	1,10,709	1,23,988	1,36,069	1,56,572	1,75,462	1,89,017	2,07,343		

(Rest of India)

- ❑ The premium for parents (in-laws) is based on their appropriate age from the 1A table with a floater discount of 10% for each parent.

Note: This deductible is applicable for every policy year.(on Aggregate basis)

Premium Chart for 3 Year (Excluding GST)										A-Adult	C-Child
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000	
1A	91days-15	10,330	12,781	16,712	18,713	20,351	23,471	26,477	28,231	30,618	
	16	12,274	15,897	20,597	23,056	25,245	29,328	32,964	35,424	38,878	
	17	14,218	19,014	24,481	27,398	30,140	35,185	39,452	42,617	47,139	
	18-33	16,378	22,477	28,798	32,223	35,579	41,693	46,660	50,609	56,317	
	34	17,361	23,687	30,225	33,822	37,338	43,716	48,925	53,056	59,009	
	35	18,345	24,897	31,653	35,421	39,097	45,739	51,191	55,503	61,700	
	36-43	19,438	26,242	33,240	37,198	41,051	47,986	53,709	58,222	64,691	
	44	21,142	27,975	35,181	39,377	43,389	50,560	56,628	61,281	67,882	
	45	22,846	29,708	37,123	41,555	45,726	53,135	59,547	64,341	71,074	
	46-48	24,740	31,633	39,280	43,976	48,324	55,995	62,791	67,740	74,620	
	49	27,796	35,030	43,185	48,354	53,080	61,351	68,826	74,165	81,512	
	50	30,853	38,427	47,090	52,732	57,836	66,706	74,860	80,589	88,405	
	51-53	34,250	42,201	51,429	57,596	63,121	72,657	81,565	87,727	96,063	
	54	37,459	46,149	56,087	62,813	68,860	79,257	88,957	95,710	1,04,844	
	55	40,669	50,097	60,745	68,030	74,599	85,857	96,349	1,03,693	1,13,626	
	56-58	44,235	54,483	65,921	73,827	80,976	93,190	1,04,562	1,12,563	1,23,383	
	59	47,712	58,760	70,968	79,479	87,193	1,00,340	1,12,570	1,21,212	1,32,896	
	60	51,189	63,036	76,014	85,131	93,410	1,07,490	1,20,578	1,29,860	1,42,410	
	61-63	55,052	67,788	81,621	91,411	1,00,318	1,15,434	1,29,475	1,39,469	1,52,980	
	64	58,529	72,065	86,668	97,063	1,06,535	1,22,584	1,37,483	1,48,118	1,62,493	
	65	62,006	76,341	91,714	1,02,715	1,12,753	1,29,734	1,45,491	1,56,766	1,72,007	
	66-68	65,869	81,093	97,321	1,08,995	1,19,661	1,37,678	1,54,389	1,66,376	1,82,577	
	69	68,373	84,173	1,00,955	1,13,065	1,24,137	1,42,826	1,60,154	1,72,603	1,89,427	
	70	70,876	87,252	1,04,588	1,17,134	1,28,614	1,47,974	1,65,920	1,78,830	1,96,276	
	71-73	73,658	90,673	1,08,625	1,21,656	1,33,587	1,53,694	1,72,326	1,85,748	2,03,887	
	74	75,994	93,547	1,12,017	1,25,454	1,37,765	1,58,498	1,77,707	1,91,560	2,10,280	
75	78,331	96,421	1,15,408	1,29,252	1,41,943	1,63,303	1,83,089	1,97,372	2,16,673		
76-78	80,927	99,614	1,19,176	1,33,473	1,46,586	1,68,642	1,89,068	2,03,829	2,23,776		
79	82,983	1,02,143	1,22,160	1,36,815	1,50,262	1,72,870	1,93,803	2,08,944	2,29,402		
80	85,039	1,04,672	1,25,144	1,40,157	1,53,939	1,77,098	1,98,539	2,14,058	2,35,027		
Above 80	87,324	1,07,482	1,28,460	1,43,871	1,58,024	1,81,796	2,03,801	2,19,741	2,41,278		
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000	
1A+1C	18-33	27,422	38,765	50,020	55,962	61,826	72,654	81,070</			

Premium Chart for 2 Year (Excluding GST)										A-Adult C-Child	
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000	
1A	91days-16	7,010	8,673	11,341	12,698	13,809	15,927	17,967	19,157	20,777	
	17	8,954	11,789	15,225	17,041	18,704	21,784	24,454	26,350	29,037	
	18-34	11,113	15,252	19,541	21,865	24,143	28,291	31,662	34,342	38,215	
	35	12,097	16,462	20,969	23,465	25,902	30,314	33,928	36,789	40,907	
	36-44	13,190	17,807	22,555	25,241	27,856	32,562	36,445	39,507	43,897	
	45	14,894	19,540	24,497	27,420	30,194	35,136	39,364	42,567	47,089	
	46-49	16,788	21,465	26,654	29,841	32,791	37,997	42,608	45,967	50,635	
	50	19,844	24,862	30,559	34,219	37,547	43,352	48,643	52,391	57,527	
	51-54	23,241	28,637	34,898	39,083	42,832	49,303	55,348	59,529	65,186	
	55	26,450	32,584	39,556	44,300	48,571	55,903	62,740	67,512	73,967	
	56-59	30,016	36,971	44,732	50,097	54,948	63,236	70,953	76,382	83,724	
	60	33,493	41,247	49,779	55,749	61,165	70,386	78,961	85,031	93,238	
	61-64	37,357	45,999	55,386	62,029	68,073	78,330	87,858	94,640	1,03,808	
	65	40,834	50,276	60,432	67,681	74,290	85,480	95,866	1,03,288	1,13,321	
	66-69	44,697	55,028	66,039	73,961	81,198	93,424	1,04,764	1,12,898	1,23,892	
	70	47,200	58,107	69,673	78,031	85,675	98,572	1,10,529	1,19,125	1,30,741	
	71-74	49,982	61,528	73,710	82,552	90,649	1,04,292	1,16,936	1,26,043	1,38,352	
75	52,318	64,402	77,101	86,350	94,827	1,09,097	1,22,317	1,31,855	1,44,745		
76-79	54,915	67,595	80,869	90,571	99,469	1,14,435	1,28,296	1,38,313	1,51,848		
80	56,971	70,124	83,854	93,913	1,03,145	1,18,663	1,33,032	1,43,427	1,57,474		
Above 80	59,255	72,934	87,170	97,627	1,07,231	1,23,361	1,38,293	1,49,110	1,63,725		
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000	
1A+1C	18-34	18,608	26,305	33,942	37,974	41,953	49,301	55,012	59,719	66,585	
	35	19,591	27,515	35,370	39,573	43,712	51,324	57,278	62,166	69,276	
	36-44	20,684	28,859	36,957	41,350	45,667	53,571	59,795	64,885	72,267	
	45	21,879	29,603	37,627	42,110	46,384	54,168	60,536	65,498	72,594	
	46-49	23,206	30,429	38,372	42,953	47,181	54,831	61,359	66,180	72,957	
	50	25,754	32,836	41,006	45,912	50,316	58,209	65,215	70,158	76,984	
	51-54	28,584	35,511	43,933	49,199	53,801	61,963	69,500	74,578	81,459	
	55	31,794	39,459	48,591	54,416	59,540	68,563	76,592	82,561	90,241	
	56-59	35,360	43,845	53,767	60,213	65,916	75,896	85,105	91,432	99,998	
	60	38,837	48,122	58,813	65,865	72,134	83,046	93,113	1,00,080	1,09,512	
	61-64	42,700	52,874	64,421	72,145	79,042	90,990	1,02,010	1,09,689	1,20,082	
	65	46,177	57,150	69,467	77,797	85,259	98,140	1,10,018	1,18,338	1,29,595	
	66-69	50,040	61,902	75,074	84,077	92,167	1,06,084	1,18,916	1,27,947	1,40,165	
	70	52,544	64,981	78,708	88,147	96,643	1,11,232	1,24,681	1,34,174	1,47,015	
	71-74	55,325	68,403	82,745	92,668	1,01,617	1,16,952	1,31,088	1,41,093	1,54,626	
	75	57,662	71,277	86,136	96,466	1,05,795	1,21,757	1,36,469	1,46,905	1,61,019	
	76-79	60,258	74,470	89,904	1,00,687	1,10,437	1,27,095	1,42,448	1,53,362	1,68,122	
	80	62,314	76,999	92,888	1,04,029	1,14,114	1,31,324	1,47,183	1,58,477	1,73,748	
	Above 80	64,599	79,809	96,204	1,07,743	1,18,199	1,36,021	1,52,445	1,64,159	1,79,998	
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	25,00,000	50,00,000	75,00,000	1,00,00,000	2,00,00,000	
1A+2C	18-34	23,374	32,167	40,860	45,721	50,475	59,101	65,988	71,573	79,625	
	35	24,357	33,377	42,288	47,321	52,234	61,124	68,254	74,020	82,316	
	36-44	25,450	34,721	43,874	49,097	54,189	63,372	70,771	76,739	85,307	
	45	26,645	35,465	44,545	49,857	54,906	63,968	71,512	77,353	85,634	
	46-49	27,972	36,291	45,290	50,701	55,703	64,632	72,335	78,035	85,997	
	50	30,520	38,698	47,924	53,659	58,838	68,010	76,192	82,013	90,024	
	51-54	33,350	41,373	50,850	56,946	62,323	71,764	80,476	86,433	94,500	
	55	36,559	45,321	55,508	62,163	68,062	78,363	87,868	94,416	1,03,281	
	56-59	40,126	49,707	60,684	67,960	74,438	85,697	96,081	1,03,286	1,13,038	
	60	43,603	53,984	65,731	73,612	80,656	92,846	1,04,089	1,11,935	1,22,552	
	61-64	47,466	58,736	71,338	79,892	87,564	1,00,791	1,12,987	1,21,544	1,33,122	
	65	50,943	63,012	76,384	85,544	93,781	1,07,941	1,20,994	1,30,192	1,42,635	
	66-69	54,806	67,764	81,992	91,824	1,00,689	1,15,885	1,29,892	1,39,802	1,53,205	
	70	57,310	70,843	85,625	95,894	1,05,165	1,21,033	1,35,658	1,46,029	1,60,055	
	71-74	60,091	74,265	89,662	1,00,415	1,10,139	1,26,753	1,42,064	1,52,948	1,67,666	
	75	62,428	77,139	93,053	1,04,214	1,14,317	1,31,557	1,47,445	1,58,759	1,74,059	
	76-79	65,024	80,332	96,821	1,08,434	1,18,959	1,36,896	1,53,424	1,65,217	1,81,162	
	80	67,080	82,861	99,806	1,11,776	1,22,636	1,41,124	1,58,160	1,70,331	1,86,788	
	Above 80	69,365	85,671	1,03,122	1,15,490	1,26,721	1,45,822	1,63,422	1,76,014	1,93,038	
Plan Type	Age Band / SI	5,00,000	10,00,000	15,00,000	20,00,000	2					