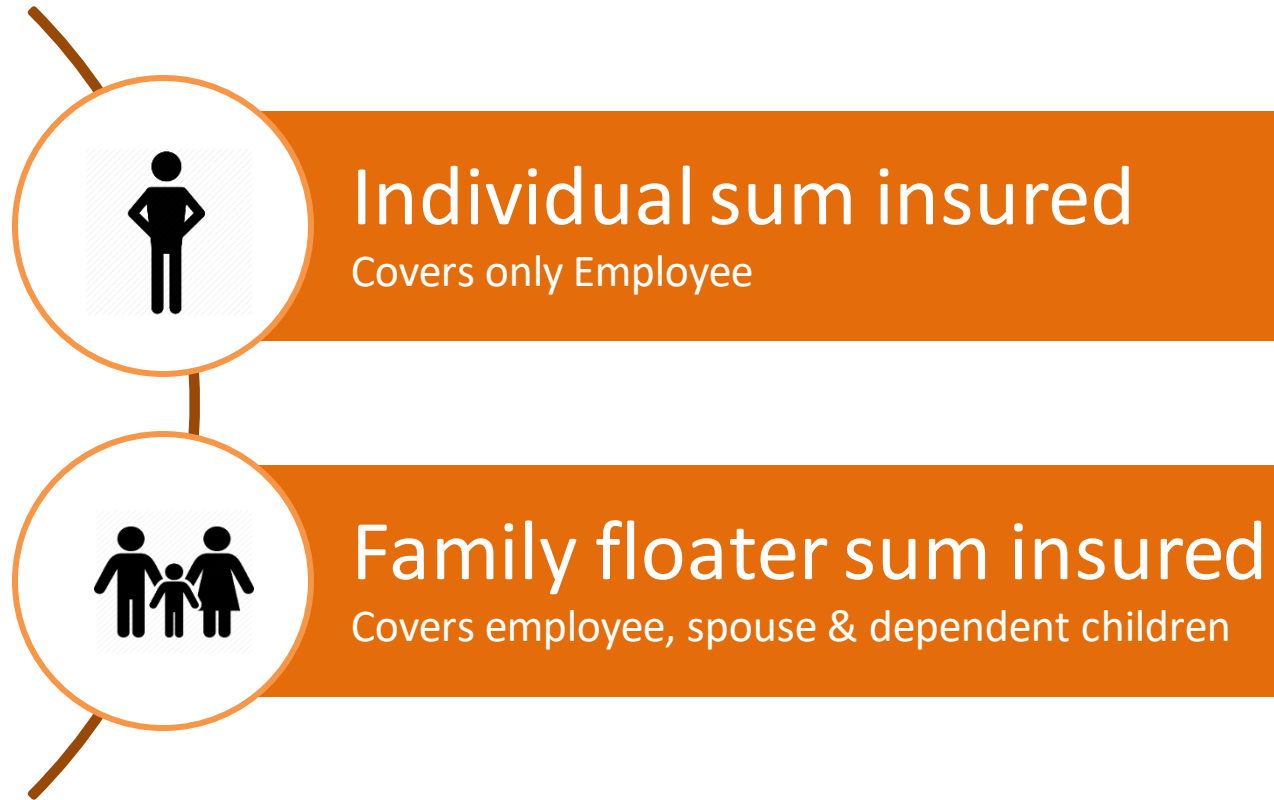


Easy Health Group

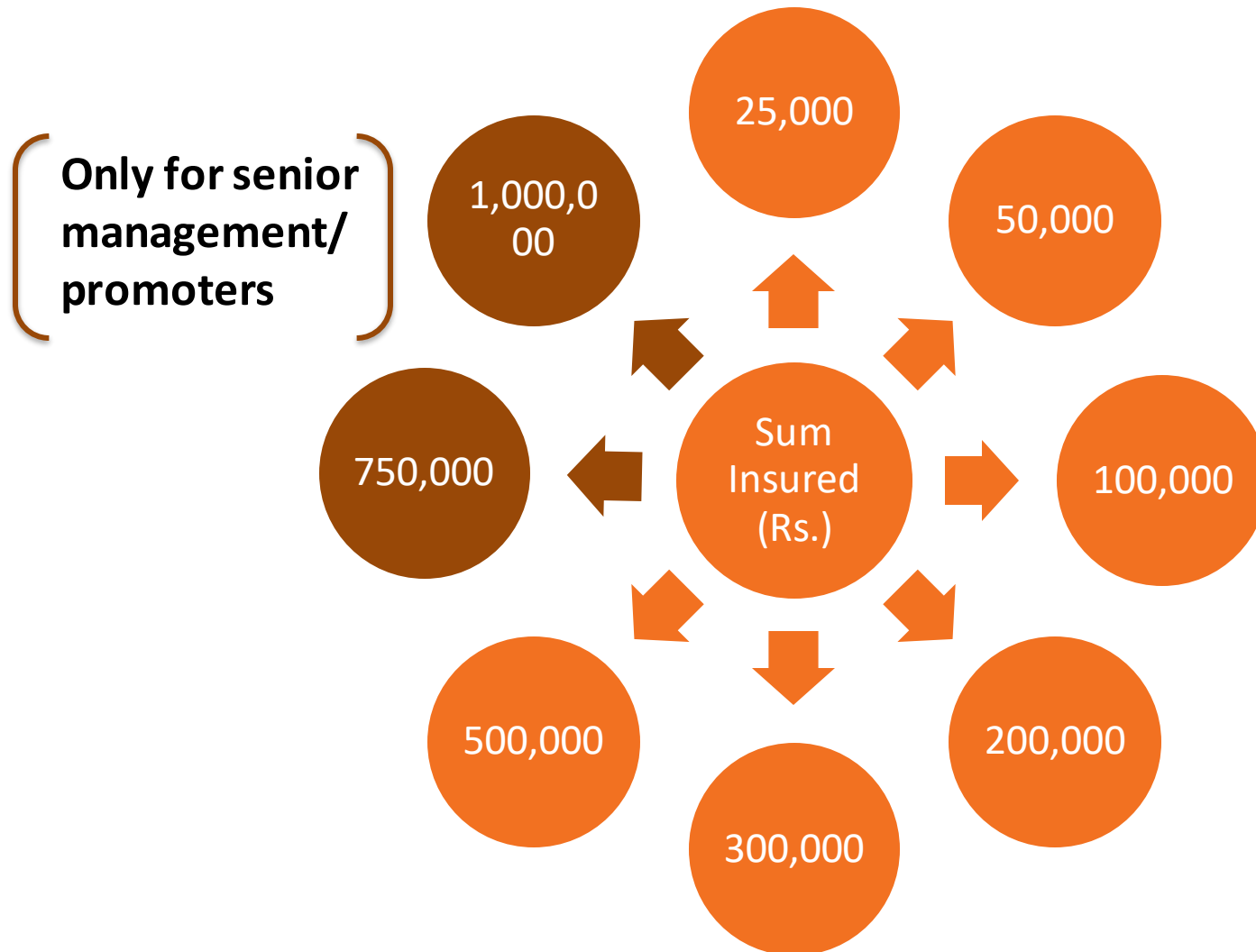
SME OTC



Plan Structure



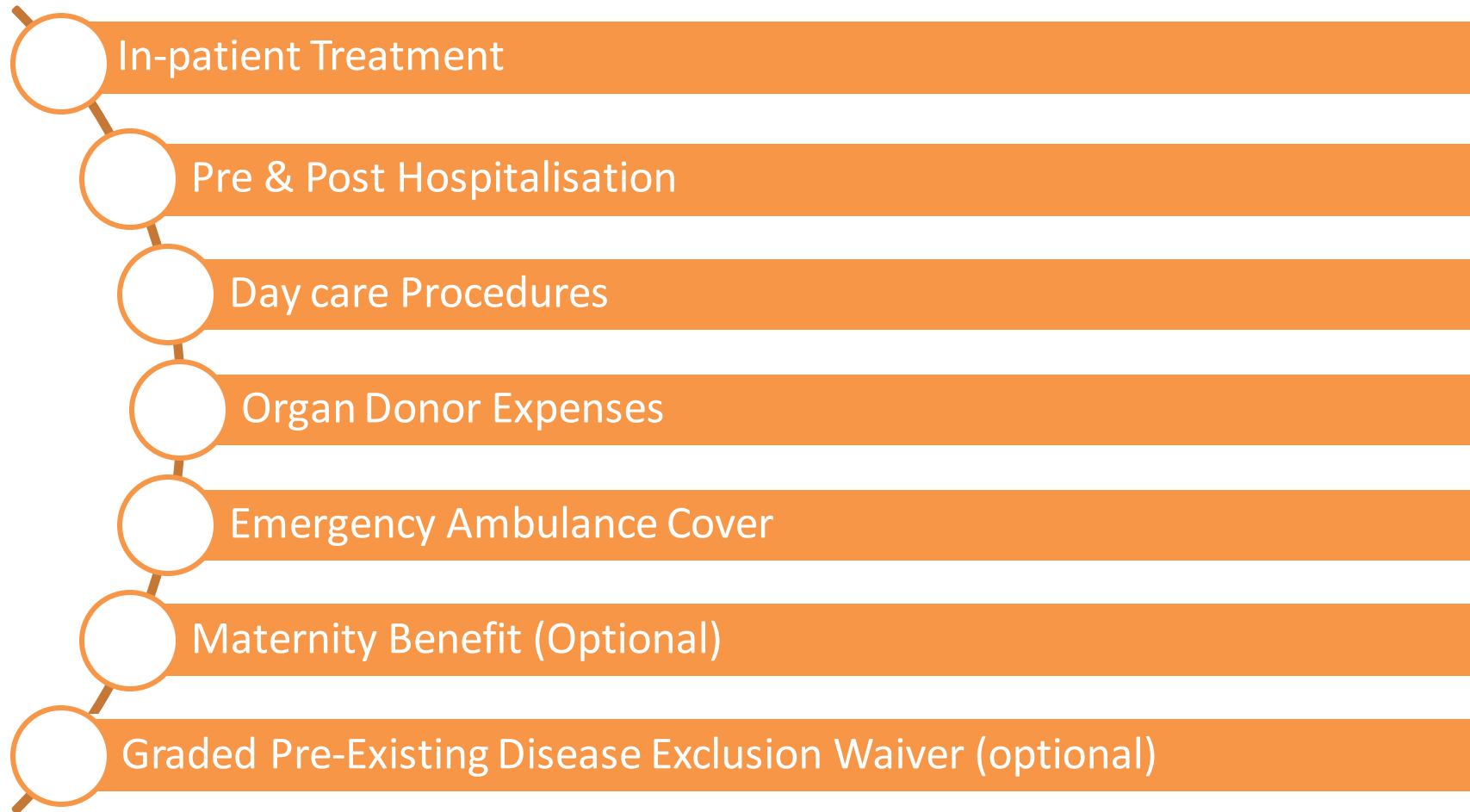
Product Features- Sum Insured Options



Senior Management Staff : General Manager and above whichever is lower



Benefits Offered



Optional Benefit on payment of additional premium



In-patient Hospitalization



Covers medical expenses incurred for:

- Room rent and boarding expenses
- Nursing
- Intensive Care Unit
- Medical Practitioner Fee
- Anesthesia, blood, oxygen, operation theatre charges, surgical appliances, internal implants
- Medicines, drugs and consumables
- Diagnostic procedures
- Cost of prosthetic and other devices or equipment (e.g. Pacemaker) if implanted internally during a surgical procedure.



Pre & Post Hospitalization

The medical expenses incurred due to an illness



Pre – Hospitalisation

in **30 days** immediately before the insured person was hospitalised

Post- Hospitalisation

in **60 days** immediately after the insured person was discharged from hospital

Provided that:

- Medical expenses were incurred for the same condition for which hospitalization was required, and
- We have accepted an inpatient hospitalization claim.



30 Days Waiting Period Exclusion Waiver

30 days waiting period stands waived for all Insured Persons covered under this Policy.



30

Days Waiting
Period Exclusion
Waiver



Key Exclusions

- 30 days exclusion - Waived for all.
- 1 year waiting period for specified diseases.
- Pre-existing diseases covered after 48 months waiting period.
- War or any act of war, nuclear, chemical and biological weapons, radiation of any kind
- Insured Person committing or attempting to commit a criminal or illegal act, intentional self injury or attempted suicide while sane or insane.
- Participation or involvement in naval, military or air force operation, adventurous sports.
- Abuse or the consequences of the abuse of intoxicants or hallucinogenic substances such as drugs and alcohol.
- Obesity or morbid obesity or any weight control program.
- Psychiatric or mental disorders; congenital internal or external diseases.
- Sexually transmitted disease or illness; AIDS/HIV.
- Pregnancy, miscarriage, maternity or birth except in the case of ectopic pregnancy.
- Dental treatment and surgery of any kind, unless requiring Hospitalisation.
- Plastic surgery or cosmetic surgery, unless necessary due to an Accident or Illness.
- Any non-allopathic treatment.

Please refer Policy Wordings for complete list of Exclusions



Individual Sum Insured – Rest of India

Rest of INDIA

Rest of India - Per person applicable premium Table without Service Tax and Edu Cess.

All employees (their eligible dependents, if opted) of the corporate must be enrolled for cover and the same must be confirmed in writing. In event of any evidence of selection being exercised, the offer and coverage shall stand null and void.

Plan A#- Premium including PED Waiver

Age / SI	25,000	50,000	100,000	200,000	300,000	500,000	750,000	1,000,000
0-17	933	1,021	1,276	1,487	1,628	2,214	2,657	3,055
18-35	1,187	1,417	1,866	2,749	3,340	4,542	5,451	6,269
36-45	1,479	1,819	2,481	3,427	4,207	5,722	6,980	8,010
46-55	3,198	3,563	4,288	6,358	7,732	10,516	13,039	15,142
56-65	5,384	5,934	6,999	10,606	12,942	17,601	22,177	26,050
66-70	8,970	9,851	11,619	17,105	20,886	28,405	36,358	42,607

Plan B- Premium with PED Exclusion

Age / SI	25,000	50,000	100,000	200,000	300,000	500,000	750,000	1,000,000
0-17	840	919	1,148	1,338	1,465	1,993	2,391	2,750
18-35	1,068	1,275	1,679	2,474	3,006	4,088	4,906	5,642
36-45	1,331	1,637	2,233	3,084	3,786	5,149	6,282	7,209
46-55	2,878	3,207	3,859	5,722	6,959	9,464	11,735	13,628
56-65	4,846	5,341	6,299	9,546	11,648	15,841	19,960	23,445
66-70	8,073	8,866	10,457	15,395	18,797	25,564	32,723	38,347

Plan C#- Premium Including PED Waiver and Maternity^

Age / SI	25,000	50,000	100,000	200,000	300,000	500,000	750,000	1,000,000
0-17	933	1,123	1,404	1,636	1,791	2,435	2,923	3,361
18-35	1,187	1,559	2,053	3,024	3,674	4,997	5,996	6,895
36-45	1,479	2,001	2,729	3,770	4,628	6,294	7,678	8,811
46-55	3,198	3,919	4,717	6,994	8,505	11,567	14,343	16,657
56-65	5,384	6,527	7,699	11,667	14,236	19,361	24,395	28,655
66-70	8,970	10,836	12,781	18,816	22,975	31,245	39,994	46,868

Plan D#- Premium With PED Exclusion and Maternity^

Age / SI	25,000	50,000	100,000	200,000	300,000	500,000	750,000	1,000,000
0-17	840	1,021	1,276	1,487	1,628	2,214	2,657	3,055
18-35	1,068	1,417	1,866	2,749	3,340	4,542	5,451	6,268.51
36-45	1,331	1,819	2,481	3,427	4,207	5,722	6,980	8,010
46-55	2,878	3,563	4,288	6,358	7,732	10,516	13,039	15,142
56-65	4,846	5,934	6,999	10,606	12,942	17,601	22,177	26,050
66-70	8,073	9,851	11,619	17,105	20,886	28,405	36,358	42,607

#Maternity Benefit and PED Exclusions waiver applicable only for groups with more than 50 Primary members

^ Maternity Benefit not available for SI Rs. 25,000



Family Floater Sum Insured – Rest of India

Rest of INDIA

Rest of India - Per person applicable premium Table without Service Tax and Edu Cess.

All employees (their eligible dependents, if opted) of the corporate must be enrolled for cover and the same must be confirmed in writing. In event of any evidence of selection being exercised, the offer and coverage shall stand null and void.

Plan E#- Premium including PED Waiver									Plan G#- Premium Including PED Waiver and Maternity^								
Age / SI	25,000	50,000	100,000	200,000	300,000	500,000	750,000	1,000,000	Age / SI	25,000	50,000	100,000	200,000	300,000	500,000	750,000	1,000,000
0-17	863	944	1,180	1,375	1,506	2,048	2,458	2,826	0-17	863	1,047	1,308	1,524	1,669	2,269	2,723	3,132
18-35	1,098	1,311	1,726	2,543	3,090	4,202	5,042	5,798	18-35	1,098	1,452	1,913	2,818	3,424	4,656	5,587	6,425
36-45	1,368	1,683	2,295	3,170	3,891	5,292	6,457	7,409	36-45	1,368	1,864	2,543	3,513	4,312	5,865	7,155	8,210
46-55	2,958	3,296	3,966	5,881	7,152	9,727	12,061	14,007	46-55	2,958	3,652	4,395	6,517	7,925	10,778	13,365	15,521
56-65	4,980	5,489	6,474	9,811	11,971	16,281	20,514	24,096	56-65	4,980	6,082	7,174	10,872	13,266	18,041	22,732	26,701
66-70	8,297	9,112	10,748	15,822	19,320	26,275	33,631	39,412	66-70	8,297	10,097	11,909	17,533	21,408	29,115	37,267	43,673
Plan F- Premium with PED Exclusion									Plan H#- Premium With PED Exclusion and Maternity^								
Age / SI	25,000	50,000	100,000	200,000	300,000	500,000	750,000	1,000,000	Age / SI	25,000	50,000	100,000	200,000	300,000	500,000	750,000	1,000,000
0-17	770	842	1,053	1,227	1,343	1,827	2,192	2,521	0-17	770	944	1,180	1,375	1,506	2,048	2,458	2,826
18-35	979	1,169	1,539	2,268	2,756	3,747	4,497	5,172	18-35	979	1,311	1,726	2,543	3,090	4,202	5,042	5,798
36-45	1,220	1,501	2,047	2,827	3,471	4,720	5,759	6,608	36-45	1,220	1,683	2,295	3,170	3,891	5,292	6,457	7,409
46-55	2,638	2,939	3,538	5,245	6,379	8,675	10,757	12,492	46-55	2,638	3,296	3,966	5,881	7,152	9,727	12,061	14,007
56-65	4,442	4,896	5,774	8,750	10,677	14,521	18,296	21,491	56-65	4,442	5,489	6,474	9,811	11,971	16,281	20,514	24,096
66-70	7,400	8,127	9,586	14,112	17,231	23,434	29,996	35,151	66-70	7,400	9,112	10,748	15,822	19,320	26,275	33,631	39,412

#Maternity Benefit and PED Exclusions waiver applicable only for groups with more than 50 Primary members

^ Maternity Benefit not available for SI Rs. 25,000