



WITH YOU ALWAYS

A photograph of a family—a man, a woman, and a young child—sitting on a grassy lawn in a park. The man is wearing an orange shirt and jeans, the woman is wearing a light green shirt and jeans, and the child is wearing a bright green tank top and dark pants. They are all looking at each other and smiling. The background is a lush green forest with large trees.

**MORE
HOLISTIC.
MORE
PROTECTIVE.
MORE
WELLNESS.**

Presenting

TATA AIG 
MediCare
PREMIER

Choose all-round care for your health with our **Trusted Naam, Fantastic Kaam!**

Being the risk experts, we know there can be no compromise in the matters of health and making sure that starts with a robust insurance plan. Choosing the right mix of features and coverage levels is essential to get everything you would need in an ideal health insurance plan. TATA AIG Medicare Premier is a simplified and comprehensive Health Insurance plan. The product is designed keeping in mind the important role that your health insurance plays considering the cost of medical emergencies. With a legacy built on trust be rest assured that we will not compromise on your health insurance and neither should you.

Key Benefits

Global Cover for Planned Hospitalization[#]

Covers medical expenses related to inpatient & day care hospitalization of the Insured Person incurred outside India, provided that the diagnosis was made in India.

Expenses incurred towards obtaining visa for medical treatment is also covered.*

Consumables Benefit

Covers expenses incurred, for specified consumables which are consumed during the period of hospitalization directly related to the insured person's medical or surgical treatment of illness/disease/injury.

Restore Benefits

We will automatically restore the Basic Sum Insured if the Sum Insured and accrued Cumulative Bonus is insufficient to pay a claim during the policy year.

For single premium multi-year policies, the insured can utilize maximum up to 3X Restore in a policy year. i.e. can utilize the available restorations anytime during the policy period, except for the first claim, for e.g. a policy with tenure of 3 years, the insured is eligible for a total of 3 restorations anytime during the policy period and 2 restorations for a 2 years policy.*

Emergency Air Ambulance

Covers expense for ambulance transportation by airplane or helicopter for emergency life threatening health conditions, which require immediate ambulance transportation to the hospital/medical centre for further medical management.

New Features



Wellness Services

Provides wellness services designed to assist insured persons in maintaining and improving good health and fitness.

- Unlimited Teleconsultation - General/ Specialty
- Health Condition Management
- Redeemable Voucher/Discount on services (Vouchers for fitness centres & activities, Discounts on Pharmacy & Diagnostics etc.)
- Ambulance Booking facility
- Emergency Help Me feature

Wellness Program

Provides a wellness program designed to promote wellness and fitness amongst the insured persons through:

- Health Risk Assessment
- Wellness Rewards
- Rewards accumulated through fitness activities can be utilized towards the payment of services/items under below categories:

- OPD consultation/treatment
- Health-check-ups/diagnostics
- Health Supplements
- Pharmaceuticals

Home Care Treatment*

Covers expenses incurred for treatment taken at home for Dialysis/Chemotherapy/Pandemic Care at home.

Coverages

In-Patient Treatment

Covers expenses for hospitalization due to disease/illness/injury during the policy period that requires an Insured Person's admission in a hospital as an inpatient.

High End Diagnostics

Covers the insured person for the listed diagnostic provided in the policy wordings on OPD basis if required as part of a treatment.

Accidental Death Benefit

Covers 100% of the base Sum Insured, maximum up to ₹50 Lakh in the event of death of insured person due to accident. This benefit is not applicable for dependent children covered in the policy.

Maternity Cover

We will cover for maternity expenses, up to limits as specified in the Benefit Table, per policy subject to a waiting period of 4 years of continuous coverage under this policy.

First year Vaccinations

Covers vaccination expenses for up to one year after the birth of the child provided the child is covered with us.

Organ Donor

Covers medical and surgical expenses of the organ donor for harvesting the organ where an Insured Person is the recipient.

Compassionate Travel

- Domestic**
Covers expenses related to a round trip economy class air ticket, or first-class railway ticket, to allow the Immediate Family Member to be at insured person's bedside during his stay in the hospital in India.
- Global***
Covers expenses related to round trip economy class air ticket, to allow the Immediate Family Member to accompany the Insured person for the purpose of planned treatment outside India.

OPD Dental Treatment

Covers expenses related to root canal, filling, tooth extractions over and above sum insured. Does not impact cumulative bonus.

Home Physiotherapy*

As a part of post hospitalization expenses cover, 15 physiotherapy sessions arranged at home by our empanelled service providers within India.

Other Coverages

- Pre-Hospitalization expenses
- Daily Cash for choosing Shared Accommodation
- Vaccination Cover
- Post-Hospitalization expenses
- Daily Cash for Accompanying an Insured Child
- Prolonged Hospitalization Benefit
- Second Opinion
- Ambulance Cover
- Hearing Aid
- AYUSH Benefit
- Domiciliary Treatment
- In-Patient Treatment-Dental
- OPD Treatment
- Health Check-up
- Day Care Procedure
- Cumulative Bonus
- Bariatric Surgery
- Delivery Complications Cover

The above mentioned benefits are subject to terms and conditions.

*For Sum Insured 75 Lakh & above.

Pre-Policy Check-up (PPC)

Pre-Policy Check-up at our network is required. The medical reports are valid for a period of 90 days from the date of the Pre-Policy Check-up. The company may conduct Tele MER/Video, MER/Pre-Policy Check-up based on age/Sum Insured medical declaration or any other underwriting criteria.

In case of an adverse medical declaration, we may call for additional medical tests. We may conduct medical tests at diagnostic centres based on medical disclosure wherever applicable. At least 50% of the Pre-Policy medical Check-up cost would be borne by TATA AIG in case a Pre-Policy Check-up (PPC) is conducted and the proposal is accepted.

Premium Chart:

PER PERSON ANNUAL PREMIUM IN ₹ (EXCLUSIVE OF GST)

For the purpose of premium computation, the country is categorized into following three Zones and premium payable under the policy will be computed based on the residential location/address as provided by the proposer/insured person.

Zone A										
Age (in years)/ Sum Insured	5 Lakh	10 Lakh	15 Lakh	20 Lakh	25 Lakh	50 Lakh	75 Lakh	1 Crore	2 Crore	3 Crore
91days-17yrs	7,205	7,947	8,730	9,016	9,300	10,467	12,688	14,198	18,791	22,984
18-35yrs	10,227	11,579	12,983	13,871	14,575	17,218	20,685	22,681	29,136	34,942
36-45yrs	12,820	13,876	15,427	16,530	17,318	20,056	25,377	28,119	36,413	43,727
46-50yrs	18,090	20,363	22,882	24,004	25,084	29,804	36,379	40,510	53,217	64,529
51-55yrs	22,092	24,799	27,831	29,153	30,426	35,964	45,015	50,323	66,685	81,314
56-60yrs	29,199	32,592	36,570	38,248	39,855	46,801	58,532	65,454	87,139	106,626
61-65yrs	38,235	42,525	47,819	50,002	52,094	61,092	77,767	87,135	117,174	144,354
66-70yrs^	60,573	66,608	74,834	78,120	81,260	94,680	120,700	135,113	182,519	225,984
71+yrs^	74,264	80,995	91,110	95,102	98,900	115,106	146,261	163,305	220,515	273,069

Mumbai (including Mumbai Metropolitan Region), Delhi (including National Capital Region, Faridabad, Ghaziabad), Ahmedabad, Surat & Baroda

Zone B										
Age (in years)/ Sum Insured	5 Lakh	10 Lakh	15 Lakh	20 Lakh	25 Lakh	50 Lakh	75 Lakh	1 Crore	2 Crore	3 Crore
91days -17 yrs	6,306	6,961	7,629	7,873	8,116	9,116	11,161	12,526	16,583	20,278
18-35yrs	8,868	10,092	11,448	12,131	12,797	15,239	18,340	20,105	25,709	30,724
36-45yrs	10,869	12,282	13,654	14,630	15,329	17,750	22,707	25,186	32,505	38,914
46-50yrs	15,896	17,963	20,176	21,185	22,157	26,435	32,371	36,100	47,320	57,251
51-55yrs	19,425	21,881	24,539	25,721	26,862	31,853	40,001	44,799	59,276	72,153
56-60yrs	24,919	27,911	31,283	32,732	34,125	40,179	50,441	56,532	75,140	91,767
61-65yrs	32,557	36,317	40,790	42,664	44,463	52,247	66,678	74,887	100,626	123,809
66-70yrs^	51,511	56,732	63,656	66,452	69,131	80,626	103,076	115,656	156,258	193,399
71+yrs^	62,944	68,748	77,249	80,636	83,866	97,693	124,446	139,230	188,049	232,810

Hyderabad (including Secunderabad), Bengaluru, Kolkata, Indore, Chennai, Chandigarh (including, Mohali, Panchkula, Zirakpur), Pune (including Pimpri Chinchwad) and Rajkot

Zone C										
Age (in years)/ Sum Insured	5 Lakh	10 Lakh	15 Lakh	20 Lakh	25 Lakh	50 Lakh	75 Lakh	1 Crore	2 Crore	3 Crore
91days -17 yrs	5,430	5,995	6,545	6,746	6,947	7,775	9,588	10,803	14,306	17,486
18-35yrs	7,525	8,617	9,785	10,397	10,996	13,703	15,933	17,460	22,184	26,382
36-45yrs	9,620	11,043	12,424	13,118	13,792	16,821	19,747	21,929	28,157	33,550
46-50yrs	13,519	15,357	17,233	18,114	18,967	22,749	27,920	31,197	40,748	49,127
51-55yrs	16,524	18,701	20,944	21,970	22,962	27,340	34,424	38,649	51,002	61,902
56-60yrs	21,148	23,784	26,616	27,862	29,063	34,321	43,219	48,566	64,422	78,486
61-65yrs	27,507	30,794	34,536	36,134	37,673	44,370	56,792	63,962	85,849	105,447
66-70yrs^	43,448	47,944	53,709	56,069	58,336	68,110	87,362	98,301	132,809	164,283
71+yrs^	52,873	57,852	64,918	67,765	70,487	82,189	105,003	117,765	159,073	196,855

Rest of India

^Premium rates for age above 65 is for renewal.

Premium Calculations:

- The premium will be charged on the completed age of the Insured Person.
- The premium for the policy will remain the same for the policy period as mentioned in the policy schedule.
- For family floater, premium is calculated by adding the premium of respective individual members and applying family floater discount.

Calculate Your Premium

Individual Premiums	Family Floater Discount	Long Term Discount	Total Premium	
<div>You</div>	<div>20% for 2 members</div>	<div>5% for 2yrs tenure</div>	<div>Family Floater Discount</div> <div>Long Term Discount</div> <div></div>	
<div>Spouse</div>				
<div>up to 3 Children</div>				
<div>up to 2 Dependent Parents</div>				
<div>TOTAL</div>	Apply discount	<div>TOTAL</div>	Apply discount	<div>TOTAL</div>

Premium calculated are Exclusive of GST

General Exclusions

Medical Exclusions:

- Congenital external diseases, defects or anomalies
- Alcoholic pancreatitis

Non-Medical Exclusions:

- Intentional self-injury or attempted suicide while sane or insane.
- Expenses for treatment directly arising from attempting to commit a breach of law with criminal intent
- Treatment rendered by a Medical Practitioner which is outside his discipline

Please refer to policy wordings for complete list of Benefits and Exclusions.

Waiting Period:

- Policy coverage starts 30 days from the first inception of the policy (except accident).
- Any listed illnesses/treatments will be covered after a waiting period of 24 months.
- Any pre-existing condition will be covered after a waiting period of 24 months.
- Maternity will be covered after a waiting period of 48 months of continuous coverage under this policy with us.
- OPD Treatment & OPD Treatment-Dental will be covered after a waiting period of 24 months of continuous coverage under this policy.

Tax Benefit:

The premium amount paid under this policy qualifies for deduction under Section 80D of Income Tax (Amendment) Act, 1986. This benefit is not applicable for premium paid in cash/or by demand draft. Tax benefits are subject to changes in Income Tax Law.

Claim Procedure

- Intimation & Assistance: Please contact Us atleast 48 hours prior to an event which might give rise to a claim. For any emergency situations, kindly contact Us within 24 hours of the event.
- Claim Related Information: For any claim related query, intimation of claim and submission of claim related documents, You can contact Us through:
Name: TAGIC Health Claims
Email: healthclaimsupport@tataaig.com

Toll Free: 1800 266 7780 or 1800 229 966 (For Senior Citizens)

Website: www.tataaig.com

Submit claim: TATA AIG General Insurance Company Limited, 5th and 6th Floor, Imperial Towers, H.No 7-1-6-617/A, GHMC No - 615,616, Ameerpet, Hyderabad – 500016, Telangana, Phone-040-66864900. For list of network hospitals, please visit our website.

Terms and Conditions

- Minimum entry age - 91 days and Maximum entry age - 65 years
- Policy Tenure Options-1/2/3 Years
- Covers upto 7 members (Self, Spouse, upto 3 dependent children and parents/parents-in-law)
- Free Look cancellation of 30 days is available after receipt of the policy document to review the policy terms and conditions. In case of any policy related objections, you have the option to cancel the policy and premium would be refunded as per the free-look cancellation clause mentioned in the policy.
- We may apply risk loading based on individual's health status.
- There will be no premium refund in case of cancellation due to established fraud, misrepresentation and/or non-disclosure of material facts.
- Grace period of 30 days is available for renewal.
- Sum insured can be enhanced only at the time of renewal subject to our underwriting guidelines
- In case you want to port your policy to Us, apply at least 45 days prior to policy renewal date and IRDAI portability guidelines shall apply.
- The Company, may revise or modify the terms of the Policy including the premium rates or product withdrawal. The Policyholder shall be notified three months before the changes are effected and shall be provided with an option to migrate to similar products offered by Us.
- The policy is renewable except in case of established fraud or non-disclosure or misrepresentation by the Insured Person.

Prohibition of Rebates

Section 41 of Insurance Act 1938 as amended by Insurance Laws (Amendment) Act, 2015

- No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
- Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten Lakh rupees.

Grievance Redressal Procedure:

As per Regulation 25 of IRDA of India (Protection of Policyholders' Interests, Operations and Allied Matters of Insurers) Regulations, 2024.

Section 64 VB of the Insurance Act, 1938:

Commencement of risk cover under the policy is subject to receipt of premium by TATA AIG General Insurance Company Limited.



24x7 Helpline
1800 266 7780
For Senior Citizens
1800 22 9966



24x7 Claims Helpline
1800 266 7780
(Toll Free)



Write to us
customersupport@tataaig.com

Benefit Table

Cover/Sum Insured (in ₹)	Coverage				
	Up to ₹50 Lakh	₹75 Lakh	₹100 Lakh	₹200 Lakh	₹300 Lakh
In-patient Treatment	Up to Sum Insured				
Pre-Hospitalization expenses	Up to 60 days				
Post-Hospitalization expenses	Up to 90 days	Up to 200 days			
Day Care procedures	Up to Sum Insured				
Organ Donor					
Domiciliary Treatment					
Restore Benefit					
AYUSH Benefit					
Ambulance cover (per hospitalization)	Up to ₹5,000	Up to ₹7,500	Up to ₹10,000	Up to ₹20,000	Up to ₹30,000
Health Check-up	Up to 1% of Sum Insured; maximum ₹10,000 per policy	Up to 1% of Sum Insured; maximum ₹15,000 per policy	Up to 1% of Sum Insured; maximum ₹20,000 per policy	Up to 1% of Sum Insured; maximum ₹25,000 per policy	Up to 1% of Sum Insured; maximum ₹25,000 per policy
Compassionate travel (per policy year)	Up to ₹20,000	Up to ₹50,000			
Global Cover for Planned Hospitalization [#]	Up to Sum Insured (For applicability refer to Special condition as mentioned under 'Global Cover for Planned Hospitalization')				
Consumables Benefit	Up to Sum Insured				
Bariatric Surgery Cover					
In-patient Treatment - Dental					
Vaccination cover					
Hearing Aid	50% of actuals; maximum ₹10,000 per policy				
Daily cash for choosing shared accommodation	0.25% of base Sum Insured; maximum ₹2,000 per day				

Daily cash for accompanying an insured child	0.25% of base Sum Insured; maximum ₹2,000 per day				
Second Opinion	Covered				
Maternity Cover	₹50,000 (₹60,000 for birth of girl child)	₹1,00,000 (₹1,20,000 for birth of girl child)			
Delivery Complications Cover	Up to ₹10,000	Up to ₹25,000			
First year Vaccinations	Up to ₹10,000 (₹15,000 for girl child)				
Prolonged Hospitalization Benefit	1% of Sum Insured				
High End Diagnostics (per policy year)	Up to ₹25,000	Up to ₹50,000			
OPD Treatment	Up to ₹5,000	Up to ₹7,500	Up to ₹10,000	Up to ₹15,000	Up to ₹20,000
OPD Treatment - Dental	Up to ₹10,000	Up to ₹12,500	Up to ₹15,000	Up to ₹20,000	Up to ₹25,000
Emergency Air Ambulance Cover	Up to ₹5,00,000	Up to ₹5,00,000 for out of Network Up to Sum Insured within our Network			
Accidental Death Benefit	100% of base Sum Insured	₹50,00,000			
Home Care Treatment Cover	Not Available	Up to Sum Insured for a) Dialysis at home b) Chemotherapy at home c) Up to 25% of Sum Insured for Pandemic Care at home, max up to 15 days in a policy year			
Cumulative Bonus	50% increase in cumulative bonus for every claim free year. In the case a claim is made during the policy year, the cumulative bonus would reduce by 50% in the following year. Alternately, No Claim Discount in premium can be opted, in which case policy will not be entitled for Cumulative Bonus.				
Wellness Services	i. Unlimited Teleconsultation General ii. Unlimited Teleconsultation – Specialist iii. Health Condition Management a. Diet & Weight Management Program b. Stress Management Program iv. Redeemable voucher/Discount on services v. Ambulance Booking facility vi. Emergency Help me feature				
Wellness Program	i. Health Risk Assessment ii. Reward Earning iii. Reward utilization (towards OPD Consultation/ Treatment, Pharmaceuticals, Health Check-Ups/Diagnostics, etc.)				

#2% discount in lieu of non-availability of 'Global Cover for Planned Hospitalization' where either the policyholder or the Insured Person(s) is a Foreign National or their Residence Status is Non-Resident Indian (NRI) or Overseas Citizen of India (OCI) or if the Policyholder/Insured Person(s), as a Resident Indian National, has agreed to opt out of this Benefit at the time of proposal or at renewal.



WITH YOU ALWAYS

Trusted Naam, Fantastic Kaam!

Disclaimer: Insurance is a subject matter of solicitation. For more details on benefits, co-payments, exclusions, limitations, terms and conditions, please read policy wordings carefully available on our website www.tataaig.com before concluding a sale.

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TATA AIG GENERAL INSURANCE COMPANY LIMITED

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Website: www.tataaig.com | IRDA of India Registration No: 108 | CIN: U85110MH2000PLC128425
Tata AIG MediCare Premier UIN: TATHLIP24159V042324