



**THE ORIENTAL INSURANCE COMPANY LIMITED**  
Regd. Office: Oriental House, A-25/27, Asaf Ali Road, New Delhi-110002  
CIN No.U66010DL1947GOI007158

## **SARAL SURAKSHA BIMA ORIENTAL**

### **PROSPECTUS**

We all are exposed to the risks of accidents in our day to day lives. Despite all possible precautions accidents do occur which may result into disablement or loss of limbs or sometimes even death. This policy provides compensation in the event of insured sustaining injuries, solely and directly from an accident caused by violent, visible and external means, resulting into death or disablement be it temporary or permanent.

This is a “Standard” Personal Accident policy. “Standard” policy means an insurance product designed and developed by Insurance Regulatory and Development Authority of India (IRDAI) and therefore is uniform across the Indian insurance market.

#### **1. BRIEF DETAILS OF THE POLICY:**

- i. Minimum Sum Insured per insured person under the Policy is Rs.2.50lakhs and can be taken in multiples of 50,000, maximum upto Rs1.00crore.
- ii. Minimum Entry Age for adults, including primary member is 18years. Dependent children can be covered from the age of three months to 25years subject to the definition of “Family” below.
- iii. Maximum Entry Age under the Policy is 70years. However, the policy is renewable lifelong.
- iv. Term of the Policy is One year.

#### **2. DEFINITIONS**

The terms defined below and at other junctures in the Policy have the meanings ascribed to them wherever they appear in this Policy and, where, the context so requires, references to the singular include references to the plural; references to the male includes the female and third gender and references to any statutory enactment includes subsequent changes to the same.

- i. **Accident** means a sudden, unforeseen and involuntary event caused by external, visible and violent means.
- ii. **Age** means age of the Insured person on last birthday as on date of commencement of the Policy
- iii. **Cashless Facility** means a facility extended by the insurer to the insured where the payments, of the costs of treatment undergone by the insured person in accordance with the Policy terms and conditions, are directly made to the network provider by the insurer to the extent pre-authorization is approved.

- iv. **Cumulative Bonus** means any increase or addition in the Sum Insured granted by the insurer without an associated increase in premium.
  - v. **Disclosure to information norm:** The policy shall be void and all premiums paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact.
  - vi. **Family:** Family consists of the proposer and any one or more of the family members as mentioned below:
    - a. legally wedded spouse.
    - b. Parents and Parents-in-law.
    - c. dependent Children (i.e. natural or legally adopted) between the age 3 months to 25 years. If the child above 18 years of age is financially independent, he or she shall be ineligible for coverage in the subsequent renewals.
  - vii. **Insured Person** means person(s) named in the schedule of the Policy.
  - viii. **Policy** means these Policy wordings, the Policy Schedule and any applicable endorsements or extensions attaching to or forming part thereof. The Policy contains details of the extent of cover available to the Insured person, what is excluded from the cover and the terms & conditions on which the Policy is issued to the Insured person.
  - ix. **Sum Insured** means the pre-defined limit specified in the Policy Schedule. Sum Insured and Cumulative Bonus represents the maximum, total and cumulative liability for any and all claims made under the Policy, in respect of that Insured Person.
  - x. **Third Party Administrator (TPA)** means a Company registered with the Authority, and engaged by an insurer, for a fee or by whatever name called and as may be mentioned in the health services agreement, for providing health services.
- 3. COVERGAE:** Coverage for the Base cover is world-wide. In respect of hospitalisation cover, the policy pays only for treatments taken within India. Policy offers following Covers:
- i. **Base Covers:** (a) Death (b) Permanent Total Disability and (c) Permanent Partial Disability
  - ii. **Optional Covers:** i.e covers you can buy on payment of additional premium. (a) Temporary Total Disablement (b) Hospitalisation Expenses due to Accident and (c) Education Grant

Income Proof required if the Capital Sum Insured (CSI) opted is more than rupees Five lakhs.

**3i. Base Covers:** These are in-built Policy benefits and shall be available to all Insured Persons whose names are mentioned in the Policy Schedule:

- a. **Death:** The Company shall pay the benefit equal to 100% of Sum Insured, specified in the policy schedule, on death of the insured person, due to an Injury sustained in an Accident during the Policy Period, provided that the Insured Person's death occurs within 12 months from the date of the Accident.
- b. **Permanent Total Disablement:** The company shall pay the benefit equal to 100% of Sum Insured, specified in the policy schedule, if an insured Person suffers Permanent Total Disablement of the nature specified below, solely and directly due to an accident during the Policy Period, provided that the Permanent

Total Disablement occurs within 12 months from the date of the Accident:

- i. Total and irrecoverable loss of sight of both eyes or
- ii. Physical separation or loss of use of both hands or feet or
- iii. Physical separation or loss of use of one hand and one foot or
- iv. loss of sight of one eye and Physical separation or loss of use of hand or foot
- v. If such Injury shall as a direct consequence thereof, permanently, and totally, disables the Insured Person from engaging in any employment or occupation of any description whatsoever.

**c. Permanent Partial Disablement:**

The company shall pay the following percentage of Sum Insured, specified in the Policy Schedule, if the Insured Person suffers Permanent Partial Disablement of the nature specified below solely and directly due to an Accident during the Policy Period provided that the Permanent Partial Disablement shall occur within 12 months of the date of the Accident.

	Loss Covered	Percentage of Sum Insured
1.	Loss of Use/ Physical Separation: One entire hand One entire foot Loss of Sight of one eye Loss of toes – all Great both phalanges Great – one phalanx Other than great if more than one toe lost	50% 50% 50% 20% 5% 2% 1%
2.	Loss of Use of both ears	50%
3.	Loss of Use of one ear	20%
4.	Loss of four fingers and thumb of one hand	40%
5.	Loss of four fingers	35%
6.	Loss of thumb - both phalanges - one phalanx	25% 10%
7.	Loss of Index finger - three phalanges two phalanges one phalanx	10% 8% 4%
8.	Loss of middle finger – three phalanges two phalanges one phalanx	6% 4% 2%
9.	Loss of ring finger - three phalanges two phalanges one phalanx	5% 4% 2%

10.	Loss of little finger – three phalanges two phalanges one phalanx	4% 3% 2%
11.	Loss of metacarpus - first or second (additional) third, fourth or fifth (additional)	3% 2%
12.	Any other permanent partial disablement	Percentage as assessed by the independent Medical Practitioner

Maximum amount payable in respect of multiple nature of disablements shall be restricted to Sum Insured specified in the Policy Schedule.

**Note:**

- i. The Sum Insured chosen and cumulative bonus, if any, is applicable cumulatively for all the three covers specified under 3A (i),(ii) and (iii) above i.e, there is a single sum insured for all the three covers namely, Accidental death, Permanent total disability and Permanent Partial Disability.
- ii. If the accident occurs during the policy period, benefits covered under 3A (i),(ii) and (iii) above are payable, even if death or Permanent Total Disablement or Permanent Partial Disablement or any combination thereof occurs after the completion of policy period, but within 12 months from the date of accident.

**3ii. Optional Covers:** shall be available to Insured Persons in accordance with the terms set out in the Policy, if the listed cover is opted.

**a. Temporary Total Disablement:**

If the Insured Person sustains an Injury in an Accident during the Policy Period and which completely incapacitates the Insured Person from engaging in any employment or occupation of any description whatsoever which the Insured Person was capable of performing at the time of the Accident (Temporary Total Disablement), the company shall pay the benefit as specified in the Policy Schedule, till the time the insured person is able to return to work, provided that:

- (i) The period of temporary total disablement has to exceed four consecutive weeks from the date of accident, for the benefit to become payable. However, the benefit shall be reckoned from the date of accident and shall be payable for the entire duration of disablement.
- (ii) Compensation is payable @0.2% of Base SI per week, for completed weeks, and proportionately for any additional number of days.
- (iii) the compensation payable under this benefit shall not be payable

for more than 100 weeks in respect of any one Injury calculated from the date of commencement of disablement and in no case shall exceed the Sum Insured.

- (iv) The Temporary Total Disablement is certified in writing by the treating Medical Practitioner to have commenced within 30 days from the date of the Accident.
- (v) The compensation shall be paid by the company at quarterly intervals, after ascertaining the amount payable. If the period of temporary total disablement is for less than a quarter or three months, the compensation may be paid at the end of the disablement period
- (vi) During the course of payment under this benefit, the company shall have right to call for a certification from an independent Medical Practitioner with regard to the continuity of temporary total disability specified under this section.
- (vii) The insured shall notify the company immediately on resuming to his occupation/employment. Where it is found that the insured resumed to his occupation/employment without notifying to the company and received the compensation under this cover, the company shall have right to claim the recovery of such benefit paid.

Note: For the purpose of this benefit, “week” is a period of seven consecutive calendar days.

- b. **Hospitalisation Expenses due to Accident:** The Company shall indemnify medical expenses incurred for hospitalisation arising due to accident during the policy period, up to the limit of 10% of the base sum insured, specified in the policy schedule.

The hospitalisation expenses shall cover the following:

- i. Room, Boarding, Nursing Expenses as provided by the Hospital / Nursing Home,
- ii. Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees whether paid directly to the treating doctor / surgeon or to the hospital.
- iii. Anesthesia, blood, oxygen, operation theatre charges, surgical appliances, medicines and drugs, costs towards diagnostics, diagnostic imaging modalities, and such other similar expenses.  
(Expenses on Hospitalisation for a minimum period of 24 hours are admissible. However, this time limit of 24 hours shall not apply when the treatment does not require hospitalisation as specified in the terms and conditions of policy contract, where the treatment is taken in the Hospital and the Insured is discharged on the same day.)
- iv. Intensive Care Unit (ICU) / Intensive Cardiac Care Unit (ICCU) expenses
- v. The Cost of prosthetic and other devices or equipment if implanted internally during a Surgical Procedure carried out to treat the accidental injury covered under the policy
- vi. Expenses incurred on hospitalization due to accident, under AYUSH

(as defined in IRDAI (Health Insurance) Regulations, 2016) systems of medicine shall be covered without any sub-limits.

- vii. The following other expenses necessitated due to injury shall also be covered under the optional cover specified under Hospitalisation expenses:
- a. Dental treatment.
  - b. Plastic surgery.
  - c. All the day care treatments.
  - d. Expenses incurred on road Ambulance subject to a maximum of Rs.2000/- per hospitalization.

**c. Education Grant:**

Following an admissible claim of the insured person under the policy towards Death or Permanent Total Disability of the insured person, the company shall pay a one-time educational grant of 10% of the Base Sum insured (specified in the policy schedule), per child to all dependent children of the Insured provided that:

- i. Such Dependent Child/ Children(s) is/are pursuing an educational course as a full time student in an educational institution.
- ii. Age of the child or children as the case shall not be more than 25 completed years.

**Note:**

- a. The benefits payable under each of the optional covers are independent and over and above the base sum insured.
- b. Claim admissibility under the optional covers “Temporary total disablement” and “hospitalization due to accident” is independent of claim admissibility under the base covers.

**4. OTHER IMPORTANT FEATURES:**

**i. Cumulative bonus:**

Sum insured (excluding cumulative bonus) shall be increased by 5% in respect of each claim free policy year, provided the policy is renewed without a break subject to maximum of 50% of the sum insured. If a claim is made in any particular year, the cumulative bonus accrued may be reduced at the same rate at which it has accrued.

- a. The cumulative bonus is applicable only in respect of base covers i.e. death or Permanent Total Disablement or Permanent Partial Disablement. Addition or reduction of cumulative bonus will be done only if claim made under base covers
- b. The CB shall be added and available individually to the insured persons under the policy, if no claim has been reported. CB shall reduce only in case of claim from the same Insured Person.
- c. CB shall be available only if the Policy is renewed / premium paid within the Grace Period.
  - a. If a claim is made in the expiring Policy Year, and is notified to us after the acceptance of Renewal premium any awarded CB shall be reduced

accordingly.

- ii. **Premium payment Modes:** The policy offers the facility of Premium payment in Instalments. Instalments can be Monthly, quarterly, half-yearly, or yearly payment can be made, as per the convenience of the insured. In case of Half Yearly, Quarterly or Monthly instalment, the following Conditions shall apply (notwithstanding any terms contrary elsewhere in the policy)
  - a. Grace Period of 15 days would be given to pay the instalment premium due for the policy.
  - b. During such grace period, coverage will not be available from the due date of instalment premium till the date of receipt of premium by Company.
  - c. No interest will be charged if the instalment premium is not paid on due date.
  - d. In case of instalment premium due not received within the grace period, the policy will get cancelled.
  - e. In the event of a claim, all subsequent premium instalments shall immediately become due and payable.
  - f. The company has the right to recover and deduct all the pending instalments from the claim amount due under the policy
- iii. **Grace Period:** In case of premium payments in instalments, Grace period of 30days is allowed in case of Yearly payment, and in all other payment modes (Monthly, quarterly, half yearly) Grace period of 15days is allowed.
- iv. **Free Look Period:** Free Look is applicable on the new policy and not on renewals.
  - a. The Insured will be allowed a period of fifteen days from the date of receipt of the Policy to review the terms and conditions of the Policy, and to return the same if not acceptable.
  - b. If the insured has not made any claim during the Free Look Period, the insured shall be entitled to
  - c. A refund of the premium paid less any expenses incurred by the Company on medical examination of the insured person and the stamp duty charges or
    - i. where the risk has already commenced and the option of return of the Policy is exercised by the insured, a deduction towards the proportionate risk premium for period of cover or
    - ii. Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period;

## 5. EXCLUSIONS (APPLICABLE TO ALL SECTIONS OF THE POLICY)

The Company shall not be liable to make any payments under this policy in respect of:

- i. Any claim for death or disablement (whether of a permanent nature or of a temporary nature), hospitalisation of the insured person, directly or indirectly due to War (whether declared or not) and war like occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrections, mutiny, military or usurped power, seizure, capture, arrest, restraints and detainment of all kinds.

- ii. Any claim for death, disablement (whether of a permanent nature or of a temporary nature), hospitalization of Insured Person
  - a. from intentional self-injury unless in self-defense or to save life, suicide or attempted suicide;
  - a. whilst under the influence of intoxicating liquor or drugs or other intoxicants except where the insured is not directly responsible for the injury / accident though under influence of intoxication.
  - b. whilst engaging in aviation or ballooning, or whilst mounting into, or dismounting from or travelling in any balloon or aircraft other than as a passenger (fare-paying or otherwise) in any Scheduled Airlines in the world.  
[Standard type of aircraft means any aircraft duly licensed to carry passengers (for hire or otherwise) by appropriate authority irrespective of whether such an aircraft is privately owned or chartered or operated by a regular airline or whether such an aircraft has a single engine or multiengine;]
  - c. arising or resulting from the Insured Person committing any breach of law with criminal intent.
- iii. Any claim for death, disablement (whether of a permanent nature or of a temporary nature), hospitalization of Insured Person 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.
- iv. Any claim resulting or arising from or any consequential loss directly or indirectly caused
  - a. by or contributed to or arising from:
    - a. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or from any nuclear waste from combustion (including any self-sustaining process of nuclear fission) of nuclear fuel.
    - b. Nuclear weapons material
    - c. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
    - d. Nuclear, chemical and biological terrorism
  - v. Any loss arising out of the Insured Person's actual or attempted commission of or willful participation in an illegal act or any violation or attempted violation of the law.

## **6. EXCLUSIONS SPECIFIC TO “HOSPITALISATION EXPENSES DUE TO ACCIDENT”**



The Company shall not be liable to make any payments under this policy in respect of any expenses incurred by the insured person in connection with or in respect of:

**i. Investigation & Evaluation)**

- a)** Expenses related to any admission primarily for diagnostics and evaluation purposes.
  - b)** Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment.
- ii. 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.
  - iii. Expenses incurred for treatment of accidental injuries which does not warrant hospitalization.
  - iv. Any expenses incurred on Domiciliary Hospitalization and OPD treatment.
  - v. Treatment taken outside the geographical limits of India.
  - vi. All expenses listed in Annexure-B (List I) of the Policy.

**7. OTHER TERMS AND CONDITIONS:**

**i. 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.

(Explanation: "Material facts" for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk)

**ii. Notice & Communication**

- a. Any notice, direction, instruction or any other communication related to the Policy should be made in writing.
- b. Such communication shall be sent to the address of the Company or through any other electronic modes specified in the Policy Schedule.
- c. The Company shall communicate to the Insured at the address or through any other electronic mode mentioned in the schedule.

**iii. Renewal of the Policy:**

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

- a. The Company shall endeavour to give notice for renewal. However, the Company is not under obligation to give any notice for renewal.
- b. Request for renewal along with requisite premium shall be received by the Company before the end of the policy period.
- c. At the end of the policy period, the policy shall terminate and can be renewed within the Grace

period of 30 days to maintain continuity of benefits without break in policy. Coverage is not available during the grace period.

- d. No loading shall apply on renewals based on individual claims experience.
  - e. The cover for the Insured shall terminate immediately in the event of admissible claim and settlement of 100% Sum Insured under Coverage Death or Permanent Total Disability and no Renewal of contract will be permissible.
  - f. The insured may also avail an optional cover or opt out of the optional cover at the time of renewal.
- iv. **Possibility of revision of the premium rates:** The Company, with prior approval of IRDAI, may revise or modify the premium rates.

v. **Services Offered by TPA (To be stated where TPA is involved)**

Servicing of claims, i.e., claim admissions and assessments, under this Policy by way of pre-authorization of cashless treatment or processing of claims other than cashless claims or both, as per the underlying terms and conditions of the policy.

The services offered by a TPA shall not include

- a. Claim settlement and Claim rejection
  - b. Any services directly to any insured person or to any other person unless such service is in accordance with the terms and conditions of the Agreement entered into with the Company.
- vi. **Cancellation:** Policy may be cancelled by either party by giving 15 days' written Notice.
  - vii. **Cancellation by the Insured:** The Insured may cancel this Policy by giving 15 days' written notice, and in such an event, the Company shall refund premium on short term rates for the unexpired Policy Period as per Table below.

a. Refund in case of cancellation of Policy where premium payment mode is Yearly

Sl.	Period on Risk	Refund
1.	Upto one month	75% of Annual Premium received
2.	Upto three months	50% of Annual Premium received
3.	Upto Six months	25% of Annual Premium received
4.	Exceeding Six months	NIL

IMP: No refunds of premium shall be made in respect of Cancellation (by either Party) where, any claim has been admitted or has been lodged or any benefit has been availed by the Insured person under the Policy.

b. Refund in case of cancellation of Policy where premium payment mode is Half Yearly

Sl.	Period on Risk	Refund
1.	Upto 30 days	50% of Half yearly premium received
2.	Exceeding 30 days	No Refund

- c. No Refund shall be made in case of cancellation of Policy where premium payment mode is Monthly or Quarterly.

**viii. Cancellation of policy by the Company:** 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. Cancellation shall be done by sending notice by registered post to the insured at his last known address or an e-mail informing him about Policy cancellation. There would be no refund of premium when cancellation is on grounds of misrepresentation, non-disclosure of material facts or fraud.

**8. PREMIUM TABLE: All sums are in Indian Rupees. GST shall be charged extra.**

**A. BASE COVER:**

**Yearly Payment Mode:**

Premium for Base Cover (Yearly)	INR 60/- per lakh
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**Instalment Premium payments: Premium for different modes (other than yearly):**

Payment Instalment	Premium( per lakh) in INR
Half-yearly	32
Quarterly	17
Monthly	6

**B. OPTIONAL COVERS:**

**i. Temporary Total Disablement:**

**a. Yearly Payment Mode:**

Premium for Temporary Total Disablement Cover (Yearly)	INR 20/- per lakh
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**b. Instalment Premium payments: Premium for different modes (other than yearly)**

Payment Instalment	Premium( per lakh) in INR
Half-yearly	11
Quarterly	6
Monthly	2.50

**ii. Hospitalization expenses due to Accident:**

**Premium for Yearly Mode payment**

Sum Insured (INR) for Base cover	Hospitalization Sum Insured (INR) ( 10% of Base cover)	Premium per lakh SI of Base cover (INR)
Up to 10,00,000	Up to 1,00,000	27
10,50,000-15,00,000	1,05,000-1,50,000	24
15,50,000-20,00,000	1,55,000-2,00,000	22
20,50,000-30,00,000	2,05,000-3,00,000	20
30,50,000-50,00,000	3,05,000-5,00,000	19
50,50,000-70,00,000	5,05,000-7,00,000	16
70,50,000-90,00,000	7,05,000-9,00,000	15

90,50,000-1,00,00,000	9,05,000-10,00,000	14
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**Premium for different payment Modes (other than yearly):**

**a. Instalment Premium payments: Premium chart for half yearly Payment Instalment -:**

Sum Insured for Base cover	Hospitalization Sum Insured( 10% of Base cover)	Premium per lakh SI of Base cover
Up to 10,00,000	Up to 1,00,000	14.5
10,50,000-15,00,000	1,05,000-1,50,000	13.0
15,50,000-20,00,000	1,55,000-2,00,000	12.0
20,50,000-30,00,000	2,05,000-3,00,000	10.5
30,50,000-50,00,000	3,05,000-5,00,000	10.0
50,50,000-70,00,000	5,05,000-7,00,000	8.5
70,50,000-90,00,000	7,05,000-9,00,000	8.0
90,50,000-1,00,00,000	9,05,000-10,00,000	7.5

**b. Instalment Premium payments: Premium chart for quarterly Payment mode -:**

Sum Insured for Base cover	Hospitalization Sum Insured( 10% of Base cover)	Premium per lakh SI of Base cover
Up to 10,00,000	Up to 1,00,000	7.5
10,50,000-15,00,000	1,05,000-1,50,000	7.0
15,50,000-20,00,000	1,55,000-2,00,000	6.5
20,50,000-30,00,000	2,05,000-3,00,000	5.5
30,50,000-50,00,000	3,05,000-5,00,000	5.5
50,50,000-70,00,000	5,05,000-7,00,000	4.5
70,50,000-90,00,000	7,05,000-9,00,000	4.5
90,50,000-1,00,00,000	9,05,000-10,00,000	4.0

**a. Instalment Premium payments: Premium chart for Monthly Payment mode -:**

Sum Insured for Base cover	Hospitalization Sum Insured( 10% of Base cover)	Premium per lakh SI of Base cover
Up to 10,00,000	Up to 1,00,000	3.0
10,50,000-15,00,000	1,05,000-1,50,000	2.5
15,50,000-20,00,000	1,55,000-2,00,000	2.5
20,50,000-30,00,000	2,05,000-3,00,000	2.0
30,50,000-50,00,000	3,05,000-5,00,000	2.0
50,50,000-70,00,000	5,05,000-7,00,000	2.0
70,50,000-90,00,000	7,05,000-9,00,000	1.5
90,50,000-1,00,00,000	9,05,000-10,00,000	1.5

**Premium for hospitalization expense cover is as per above tables. Premium for this cover depends upon the Sum Insured and Mode of payment opted.**

- c. Premium for TPA Card- Rs.30.00:** In addition to premium in respect “Hospitalisation Expenses due to Accident”, Rs.30.00 per insured person- in respect of whom the cover “Hospitalisation Expenses due to Accident” has been opted, will be chargeable for the cost

for TPA card. **No discount / loading is applicable on the card cost premium.**

**iii. Education Grant:**

**a) Premium for Yearly Mode payment**

<b>Premium for Education Grant Cover- per child</b>	<b>INR 5/- per lakh SI of Primary Insured's Base cover</b>
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**b) Premium for different payment modes (other than yearly):**

<b>Payment Mode</b>	<b>Premium( per lakh) in INR</b>
Half-yearly	2.6
Quarterly	1.4
Monthly	0.5

**C. Discounts and Loadings:** In addition to above premium, following discounts / loadings shall apply on the premium, based on criteria as defined below:

- i. **Age of the Insured-** : Discounts / loadings shall apply based on age of the members.
- ii. **Occupation** – As work place is very significant factor while quantifying the risk of the particular insured, there is a provision of loading on premium for persons involved in the profession falling under High risk category.
  - a. **High Risk category** includes- Persons working in underground mines, explosives, magazines, workers involved in electrical installation with high tension supply, circus personnel and persons engaged in occupations of similar or greater hazard.
  - b. **Family Discount:** Discount of 10% on premium shall be allowed if two or more family members are covered under a single policy. It may be noted that separate sums insured would be available in respect of each insured family member.
- iii. **Staff Discount:** Discount of 33% is allowed to employees (serving as well as retired) of The Oriental Insurance Company. No Intermediary is however allowed. Only Age based discount / loading and occupation based loading shall apply and no other discounts like family discount or On-Line Policy discount shall be allowed.
- iv. **On-Line Policy Discount:** Discount of 10% shall be allowed if the Policy is bought on-line and no Intermediary is involved. This discount shall also be allowed in case of on-line renewal of policies where no Intermediary was involved at any stage – either on first purchase or in subsequent renewals.
- v. **TPA Card charges:** Rs.30.00 (chargeable in case optional cover of “Hospitalisation Expenses due to Accident” is opted). This fee is payable in respect of each family member for whom “hospitalisation Expenses due to Accident” cover has been opted and stated so in the Schedule. Also, the fee is independent of the Base Sum Insured opted.

**D. TABLE OF LOADINGS & DISCOUNTS AT A GLANCE**

<b>Sl.</b>	<b>Criteria</b>	<b>Discounts / Loadings</b>
1	<b>Age</b> Upto 30years 31-50years 51-70 years Above 70years	discount - 10% No discount or loading loading - 10% loading - 25%

2	<b>High Risk Occupation loading</b>	loading - 50%
3	<b>Family Discount</b>	discount -10% if 2 or more members are covered
4	<b>Staff Discount</b>	discount - 33%
5	<b>On-Line Policy Discount</b>	discount - 10%

NOTE: All discounts shall be applied successively in the same order as they appear above and not on cumulative basis.