



THE ORIENTAL INSURANCE COMPANY LIMITED

Regd. Office: Oriental House, P.B.No.7037, A-25/27, Asaf Ali Road, New Delhi-110 002

CIN No. U66010DL1947GOI007158

GROUP CORONA KAVACH POLICY- ORIENTAL INSURANCE PREMIUM CHART

INDIVIDUAL PLAN : BASE COVER										
S.No.	Sum Insured (INR)	For 9,1/2 Months			For 6,1/2 Months			For 3,1/2 Months		
		Age in completed years*			Age in completed years*			Age in completed years*		
		0-40	41-60	61-80	0-40	41-60	61-80	0-40	41-60	61-80
1	50,000	404	538	807	344	459	689	222	296	444
2	1,00,000	680	907	1361	581	775	1163	375	500	750
3	1,50,000	932	1243	1865	797	1062	1593	514	685	1028
4	2,00,000	1164	1552	2328	995	1326	1989	642	856	1284
5	2,50,000	1373	1831	2747	1174	1565	2348	757	1009	1514
6	3,00,000	1462	1949	2924	1249	1665	2498	806	1074	1611
7	3,50,000	1664	2218	3327	1421	1895	2843	917	1222	1833
8	4,00,000	1764	2352	3528	1508	2010	3015	973	1297	1946
9	4,50,000	1953	2604	3906	1669	2225	3338	1076	1435	2153
10	5,00,000	2016	2688	4032	1723	2297	3446	1112	1482	2223
INDIVIDUAL PLAN : DAILY HOSPITAL CASH-OPTIONAL COVER										
S.No.	Sum Insured (INR)	For 9,1/2 Months			For 6,1/2 Months			For 3,1/2 Months		
		Age in completed years*			Age in completed years*			Age in completed years*		
		0-40	41-60	61-80	0-40	41-60	61-80	0-40	41-60	61-80
1	50,000	2	2	3	2	2	3	2	2	3
2	1,00,000	26	34	51	22	29	44	14	19	29
3	1,50,000	55	73	110	47	62	93	30	40	60
4	2,00,000	73	97	146	62	83	125	41	54	81
5	2,50,000	92	122	183	78	104	156	50	67	101
6	3,00,000	110	146	219	94	125	188	61	81	122
7	3,50,000	128	171	257	110	146	219	71	94	141
8	4,00,000	146	195	293	125	167	251	80	107	161
9	4,50,000	164	219	329	140	187	281	91	121	182
10	5,00,000	183	244	366	156	208	312	101	134	201
Premium in INR and Taxes as applicable shall be extra.										
*Means the age completed as on the date of the policy inception/renewal. So, for a person aged 40 years and 364 days, premium would be charged on the age of 40 years, not that of 41 years.										

The Oriental Insurance Company Ltd.

Group Corona Kavach Policy-Oriental Insurance

UIN: OICHLGP21231V012021

Premium Chart

FAMILY FLOATER PLAN:

Base Rate will be as per premium chart for Individual Plan. Following methodology to be adopted/applied on Base Rates (Individual Plan) to arrive at final family floater Premium:

Sr. No.	Insured Member's age	Premium to be charged
1	Member with the highest age	100% of Base/Individual premium as applicable for that age and sum insured.
2	All other members with lower ages(i.e. All members other than the Primary Member)	Discount to be applied as per Table A on Base/Individual Premium of every member
3	FINAL FLOATER PREMIUM	ADD Sr. No. 1 & 2

Table A: Sum Insured wise applicable floater discount:

Sum Insured	50,000	1,00,000	1,50,000	2,00,000	2,50,000	3,00,000	3,50,000	4,00,000	4,50,000	5,00,000
Applicable Discount	90%	90%	85%	80%	75%	75%	75%	60%	60%	60%

Discounts

- 5% Group Health Care Worker Discount: Applicable in case the Group consists entirely of doctors, nurses or health care workers.

Definition: **Health care worker** for the purpose of this policy shall mean doctors, nurses, midwives, dental practitioners and other health professionals including laboratory assistants, pharmacists, physiotherapists, technicians and people working in hospitals.

- 5.5% in premium if TPA services not opted for.
- Group Volume Discount:

S.No.	Group Size	Percentage of Group Discount
1.	Upto 500	0%
2.	501 to 1000	2.5%
3.	1001 to 2000	5%
4.	2000 to 3500	7.5%
5.	More than 3500	10%

Premium: Single premium payment with no installment facility.
